

Laboratory Assessment Checklist

Information to collect before conducting the Ergonomics Assessment

- 1. Evaluation Completed by _____
- 2. Date _____
- 3. Employee Name(s) observed _____
- 4. Department/Lab Location _____
- 5. Job Title _____
- 6. Length of time on job: _____ yrs. _____ months
- 7. Shift _____
- 8. Shift Length _____
- 9. Hours worked per week _____
- 10. Break schedules _____
- 11. Is the employee Left or Right Handed? _____
- 12. Is this a multi-user workstation? _____

13. Ask if employee has discomfort when performing task (note part of body and briefly describe issue) **Do not** ask for medical or related information.-----

16. Ask the employee: 'How can the design of the job tasks be improved to make the job easier to perform (or to relieve discomfort)?'

17. Are there any planned changes to the way the job is to be performed? If Yes, describe:

18. List tasks performed and % of time/shift e.g. pipetting; using microscope; computer etc.

<u>Task</u>	<u>% of time per shift</u>	<u>Notes</u>

Continue on back of sheet as necessary

For all task assessments:

- Begin with head to toe exam - start with hands-arms etc. Flow the checklist and examine and note the cause of awkward postures, forceful and/or repetitive motions, contact stress points, etc.
- Note any employee modifications to the workstation and the reason for use

- Evaluate the physical environment – noise, lighting & glare, airflow & ventilation, floor surface, etc.
- Make a 'Birds-Eye' view sketch of the work area including worksurface shape and location of all frequently used equipment and tools.

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NOTE: You should follow up on all responses with a "*" beside the box.

COMPUTER WORKSTATIONS – <i>Refer to Computer Workstation Checklist for more information</i>	Yes	No
1. Is a seat provided?	<input type="checkbox"/>	<input type="checkbox"/> *
2. Is the seat height adjustable within the recommendations?	<input type="checkbox"/>	<input type="checkbox"/> *
3. Is lumbar back support provided?	<input type="checkbox"/>	<input type="checkbox"/> *
4. Is a footrest provided?	<input type="checkbox"/>	<input type="checkbox"/> *
5. Is there ample leg room?	<input type="checkbox"/>	<input type="checkbox"/> *
6. Are all adjustability features easy to use?	<input type="checkbox"/>	<input type="checkbox"/> *
7. Is there ample room to accommodate a keyboard and a computer mouse so the employee can rest their arms at their side and forearms parallel to the floor?	<input type="checkbox"/>	<input type="checkbox"/> *
8. Is the keyboard and mouse close to body & on the same level?	<input type="checkbox"/>	<input type="checkbox"/> *
9. Is there ample room to place the monitor at a comfortable viewing distance and directly in front of user?	<input type="checkbox"/>	<input type="checkbox"/> *
10. Is the top of monitor is at or just below eye height (Bi/Tri focal users may need to lower/tilt the monitor further for comfort)?	<input type="checkbox"/>	<input type="checkbox"/> *
11. If documents are frequently used, is there a document holder?	<input type="checkbox"/>	<input type="checkbox"/> *
LABORATORY BENCHES		
1. If the worker stands, is anti-fatigue matting supplied and	<input type="checkbox"/>	<input type="checkbox"/> *
2. Is a foot on a stool or ledge when standing in one spot available?	<input type="checkbox"/>	<input type="checkbox"/> *
3. Is the height of the bench appropriate for the work that is performed? (Precision work=above elbow height; light work=just below elbow height; heavy work=-6 inches below elbow height)	<input type="checkbox"/>	<input type="checkbox"/> *
4. Is there adequate leg room (for knees and feet if standing bench – legs for seated bench)?	<input type="checkbox"/>	<input type="checkbox"/> *
5. Do contact stressors exist such as bench tops with sharp edges?	<input type="checkbox"/>	<input type="checkbox"/> *
6. Can the employee alternate sitting and standing while performing tasks?	<input type="checkbox"/>	<input type="checkbox"/> *
7. Do benches have a cut-out for work activities?	<input type="checkbox"/>	<input type="checkbox"/> *
BIOLOGICAL SAFETY CABINETS		
1. Are arms relaxed when working in the fume hood?	<input type="checkbox"/>	<input type="checkbox"/> *
2. Are work supplies within easy reach in the cabinet?	<input type="checkbox"/>	<input type="checkbox"/> *
3. Are vials, tubes and receptacles as low profile as possible?	<input type="checkbox"/>	<input type="checkbox"/> *
4. Can work be viewed without tilting the head and neck?	<input type="checkbox"/>	<input type="checkbox"/> *
5. Can the employee alternate sitting and standing while performing tasks?	<input type="checkbox"/>	<input type="checkbox"/> *
LABORATORY CHAIRS		
1. Can all laboratory chairs be adjusted to accommodate all of the employees who need to use the chairs?	<input type="checkbox"/>	<input type="checkbox"/> *
2. Does the chair support the back while you work?	<input type="checkbox"/>	<input type="checkbox"/> *

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3. Does the seat and seatback tilt forward?	<input type="checkbox"/>	<input type="checkbox"/> *
4. Are feet on the floor, a foot-ring or a footrest in neutral positions?	<input type="checkbox"/>	<input type="checkbox"/> *
5. If armrests are present, can they be adjusted to support arms in a neutral posture when working?	<input type="checkbox"/>	<input type="checkbox"/> *
MICROSCOPES	Yes	No
1. Do the shoulders appear rounded and/or is the worker hunched over?	<input type="checkbox"/> *	<input type="checkbox"/>
2. Is there excessive neck flexion (>25 degrees) or jutting out of neck?	<input type="checkbox"/> *	<input type="checkbox"/>
3. Are there contact stresses between sharp edges and the forearms?	<input type="checkbox"/> *	<input type="checkbox"/>
4. Is the microscope pulled out to the edge of the workbench?	<input type="checkbox"/>	<input type="checkbox"/> *
5. Are armrests or padding provided?	<input type="checkbox"/>	<input type="checkbox"/> *
6. Is there sufficient leg room?	<input type="checkbox"/>	<input type="checkbox"/> *
7. Does the worker rest their feet on the lab stool?	<input type="checkbox"/>	<input type="checkbox"/> *
8. Is there a foot rest provided?	<input type="checkbox"/>	<input type="checkbox"/> *
9. Has the individual been trained how to properly sit at a microscope workstation?	<input type="checkbox"/>	<input type="checkbox"/> *
10. Are microscope work breaks provided?	<input type="checkbox"/>	<input type="checkbox"/> *
PIPETTING		
1. Are manual pipettors used?	<input type="checkbox"/> *	<input type="checkbox"/>
2. Are electronic pipettors provided?	<input type="checkbox"/>	<input type="checkbox"/> *
3. Are latch-mode pipettors provided?	<input type="checkbox"/>	<input type="checkbox"/> *
4. Is the pipette designed to reduce contact with sharp edges?	<input type="checkbox"/>	<input type="checkbox"/> *
5. Has the individual been trained how to properly operate the pipette (e.g., pickup tips, eject tips, program electronic pipette, etc.).	<input type="checkbox"/>	<input type="checkbox"/> *
6. Does the worker pipette more than 2 hours per day?	<input type="checkbox"/> *	<input type="checkbox"/>
7. Are frequent breaks provided?	<input type="checkbox"/>	<input type="checkbox"/> *
8. Is the pipette computer-controlled to allow for computer-activated multiple dispensing instead of finger-activated dispensing?	<input type="checkbox"/>	<input type="checkbox"/> *
9. Are wrists and arms in a straight or neutral position when using a pipette?	<input type="checkbox"/>	<input type="checkbox"/> *
FINE MOTOR SKILLS		
1. Are vials with the fewest amount of threads allowable used?	<input type="checkbox"/>	<input type="checkbox"/> *
2. Does the worker perform dissection or micro-manipulation with forceps more than 5 hours per week?	<input type="checkbox"/> *	<input type="checkbox"/>
3. Does the worker use alternate fingers when using pinch grips or forceps?	<input type="checkbox"/>	<input type="checkbox"/> *
4. Are frequent micro breaks provided?	<input type="checkbox"/>	<input type="checkbox"/> *
5. Do contact stresses exist between the forearm and workbench?	<input type="checkbox"/> *	<input type="checkbox"/>

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MICROTOME AND CRYOSTAT	Yes	No
1. Does the worker use excessive wrist flexion and extension when operating the microtome or cryostat?	<input type="checkbox"/> *	<input type="checkbox"/>
2. Can the microtome be operated the hand in a pistol grip position?	<input type="checkbox"/>	<input type="checkbox"/> *
3. Is the workstation at a height that reduces arm abduction as much as possible?	<input type="checkbox"/>	<input type="checkbox"/> *
3. Does the worker have access to an automatic microtome/cryostat?	<input type="checkbox"/>	<input type="checkbox"/> *
4. Are frequent breaks provided?	<input type="checkbox"/>	<input type="checkbox"/> *
5. Is a fully adjustable chair provided?	<input type="checkbox"/>	<input type="checkbox"/> *
Misc.	Yes	No
1. Are chemical and gas valves easy to reach and turn?	<input type="checkbox"/>	<input type="checkbox"/> *
2. Are supplies and tools within easy reach?	<input type="checkbox"/>	<input type="checkbox"/> *
3. Are bottle dispensers and bottom dispensing carboys available to dispense liquids?	<input type="checkbox"/>	<input type="checkbox"/> *
4. Are heavy bottles and boxes stored on low shelves?	<input type="checkbox"/>	<input type="checkbox"/> *
5. Does the worker try to take a break and change tasks every 20-30 minutes?	<input type="checkbox"/>	<input type="checkbox"/> *

NOTE: You should follow up on all responses with a "*" beside the box.

Source: NIEHS, 2004 & UCLA, 2008

Lab Equipment Resources

From the National Institute of Health or the U.S. Government website <http://www.ors.od.nih.gov/Pages/home.aspx>

Pipettes:

Hamilton Company

4970 Energy Way, Reno, NV 89502
Phone: 800-648-5950 800-648-5950

Web: <http://www.hamiltoncompany.com/>
(Recommendations: Soft grip manual pipettes)

MATRIX Technologies Corporation

22 Friars Drive, Hudson, NH 03051
Phone: 800-345-0206 800-345-0206

Web: <http://www.matrixtechcorp.com/>
(Recommendations: Electronic multi-channel pipettes; most are available thru the NIH Self-Service Store)

Rainin Instrument, LLC.

7500 Edgewater Drive, Box 2160
Oakland, California, USA 94621-0060
Phone: 510 564 1600 510 564 1600
Fax: 510 564 1617
Ordering Tel: 800-472-4646 800-472-4646 (toll-free)

E-mail: pipets@rainin.com
Web: <http://www.rainin.com/>
(Products can be found at the NIH Self-Service Stores; e.g., Rainin Latch-Mode pipette, LTS, electronic pipettes)

Microscope Accessories:

Ergo Source

P.O. Box 695 Wayzata, MN 55391
Phone: 952-404-1058 952-404-1058 Fax: 952-404-1058
Web: <http://www.ergosource.com/>

Bay Optical Instrument

2403 -15th Street San Francisco, CA 94114
Phone: 415-431-8711 415-431-8711 Fax: 415-252-9184
Web: <http://bayoptical.com/>

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MSM Microscope Forearm Supports R&D Ergonomics Inc.

6 Harvey Brook Dr. Freeport, ME 04032
 Phone: 207-865-6445 207-865-6445 Fax: 207-353-5308
 Web: www.morencyrest.com/msm.htm

Leica Microsystems, Inc.

111 Deer Lake Road Deerfield, IL 60015
 Phone: 800-248-0123 800-248-0123 Fax: 847-405-0147
 Web: www.leica-microsystems.com/Stereomicroscopes

Anti-Fatigue Matting:

Tiffin Systems

450 Wall Street Tiffin, OH 44883
 Phone: 800-221-1994 800-221-1994 Fax: 419-447-8313

Alimed

297 High Street Dedham, MA 02026
 Phone: 800-225-2610 800-225-2610 Fax: 800-437-2966
 Web: <http://www.alimed.com/> (Recommendations: E.L. Task Chair; Ergo Task Chair; Obus Forme; RFM Metro for big & tall)

Tennessee Mat Company, Inc.

1414 Fourth Avenue. South Nashville, TN 37210-4123
 Phone: 800-264-3030 800-264-3030 Fax: 615-255-4428
 Web: <http://www.wearwell.com/>

Ergo Source

P.O. Box 695 Wayzata, MN 55391
 Phone: 952-404-1058 952-404-1058 Fax: 952-404-1058
 Web: <http://www.ergosource.com/>

Adjustable Tables & Edge Guards/Padding:

Alimed

297 High Street Dedham, MA 02026
 Phone: 800-225-2610 800-225-2610 Fax: 800-437-2966
 Web: <http://www.alimed.com/> (Recommendations: E.L. Task Chair; Ergo Task Chair; Obus Forme; RFM Metro for big & tall)

Ergo Source

P.O. Box 695 Wayzata, MN 55391
Phone: 952-404-1058 952-404-1058 Fax: 952-404-1058
Web: <http://www.ergosource.com/>

Automatic Microtomes:

Leica Microsystems, Inc.

111 Deer Lake Road Deerfield, IL 60015
Phone: 800-248-0123 800-248-0123 Fax: 847-405-0147
Web: www.leica-microsystems.com/Stereomicroscopes

Automatic and Adjustable Cryostats:

Leica Microsystems, Inc.

111 Deer Lake Road Deerfield, IL 60015
Phone: 800-248-0123 800-248-0123 Fax: 847-405-0147
Web: www.leica-microsystems.com/Stereomicroscopes

Laboratory Stools

BIOFIT

P.O. Box 109, Waterville, OH 43566
Phone: 800-597-0246 800-597-0246
Web: <http://www.biofit.com/>
(Recommendations: Model #4W43-ERB-ASC-AF-XR)

UNICOR

P.O. Box 11670, Lexington, KY 40577-1670
Phone: 800-827-3168 800-827-3168
Web: <http://www.unicor.gov/>
(Recommendations: Legacy Arm Drafting Stool in vinyl with footring)