








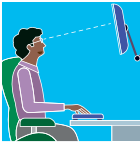






WORKSTATION ASSESSMENT CHECKLIST

Name	Company	Date
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DISCOMFORT NOTES

NEUTRAL SEATED POSTURE	OBSERVED AWKWARD POSTURES					
	Head/Neck	Shoulders	Back	Elbows	Hands/Wrists	Legs
	 Awkward Neck Posture: Looking Down	 Elevated Shoulders	 Excessive Recline	 Elbow Contact Stress	 Awkward Wrist	 Leg Contact Stress: Back of Knee
NEUTRAL STANDING POSTURE					 Wrist Contact Stress: Edge of Desk/ Sharp Surface	
	 Awkward Neck Posture: Looking Up	 Reaching Across Body				
	 Awkward Neck Posture: Twisting	 Leaning/ Reaching Forward			 Wrist Contact Stress: Mouse Wrist Rest	

EXISTING EQUIPMENT

Document holder	Keyboard tray	Task light
Ergonomic task chair	Monitor arm(s)	Telephone headset
Footrest	Monitor stand	
Glare filter	Palm support	

WORKSTATION ASSESSMENT CHECKLIST

Keyboard/Mouse	Chair	Monitor/Documents
Keyboard/mouse on desk?	Adjustable seat height?	Laptop used as primary monitor?
Keyboard/mouse close to body?	Adjustable seat pan?	Dual/Triple monitors being used?
Mouse wrist rest being used?	Adjustable armrests?	Monitor aligned with body?
Keyboard tabs lowered?	Adjustable lumbar support?	Monitor at appropriate height?
Keyboard/mouse on keyboard tray?	Adjustable backrest tension?	Monitor at appropriate distance?
Adequate thigh clearance?	Backrest provides movement?	Documents aligned with body?

ACTIONS TAKEN	ADDITIONAL RECOMMENDATIONS
Chair properly adjusted	
Keyboard and mouse adjusted	
Wrist rest removed (contact stress prevention)	
Monitor position adjusted	
Reorganized desk and documents	
Equipment recommendation	
Microbreak recommendation	
Follow-up assessment	
Seek medical attention	
Other (please explain)	

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