



## **ERGONOMICS PROGRAM**

**UNIVERSITY RISK MANAGEMENT  
19 Hagood Ave  
MSC 818  
Charleston, SC 29425  
Office 843.792.3604**

Revised: October 2015

**TABLE OF CONTENTS**

INTRODUCTION ..... 3  
DEFINITIONS ..... 3  
RISK FACTORS ..... 3  
REPORTING MUSCULOSKELETAL INJURIES, SIGNS OR SYMPTOMS ..... 4  
ERGONOMIC ASSESSMENT FLOWCHART ..... 4  
TRAINING..... 5  
WORKSITE EVALUATIONS..... 5  
HAZARD PREVENTION AND CONTROL..... 5  
MEDICAL MANAGEMENT ..... 5  
RECORDKEEPING ..... 6

## **INTRODUCTION**

It is the policy of The Medical University of South Carolina to improve the comfort and well-being of employees by identifying and correcting ergonomic risk factors in the workplace.

Work-related musculoskeletal injuries can result when there is a mismatch between the physical capacity of workers and their equipment and the physical demands of their job. According to the Occupational Safety & Health Administration (OSHA), each year 1.8 million workers in the United States report work-related musculoskeletal injuries such as carpal tunnel syndrome, tendonitis, and back injuries. About 600,000 musculoskeletal injuries each year are serious enough to prevent employees from working. Ergonomics can provide a solution to many of these injuries.

## **DEFINITIONS**

### Ergonomics

Ergonomics is the discipline or science that focuses on the relationship between an employee and his/her work environment.

### Musculoskeletal Injuries

Musculoskeletal injuries are defined as any disorders of muscles, tendons, ligaments, nerves, joints, bones and circulatory system. This class of injuries results when the muscles, tendons, ligaments, nerves, joints, bones or circulatory system are damaged by repeated or excessive force.

## **RISK FACTORS**

Poor workplace designs can present ergonomic risk factors called stressors. These stressors include but are not limited to repetition, force, awkward postures, static postures, contact stress and vibration.

Repetition: These are repetitive activities for greater than two hours per day that includes keyboarding greater than four hours per day.

Force: Examples are lifting greater than 75 pounds, pushing or pulling heavy objects without the use of engineered devices, carrying heavy objects over distances, etc.

Awkward Posture: Repeatedly raising or working with hands above the head for more than two hours per day or working with the back, neck or wrist bent for more than two hours per day.

Static Postures: A special type of awkward posture, it occurs when a body part is not moving, but is still doing work. Examples include sitting in a chair or holding an object.

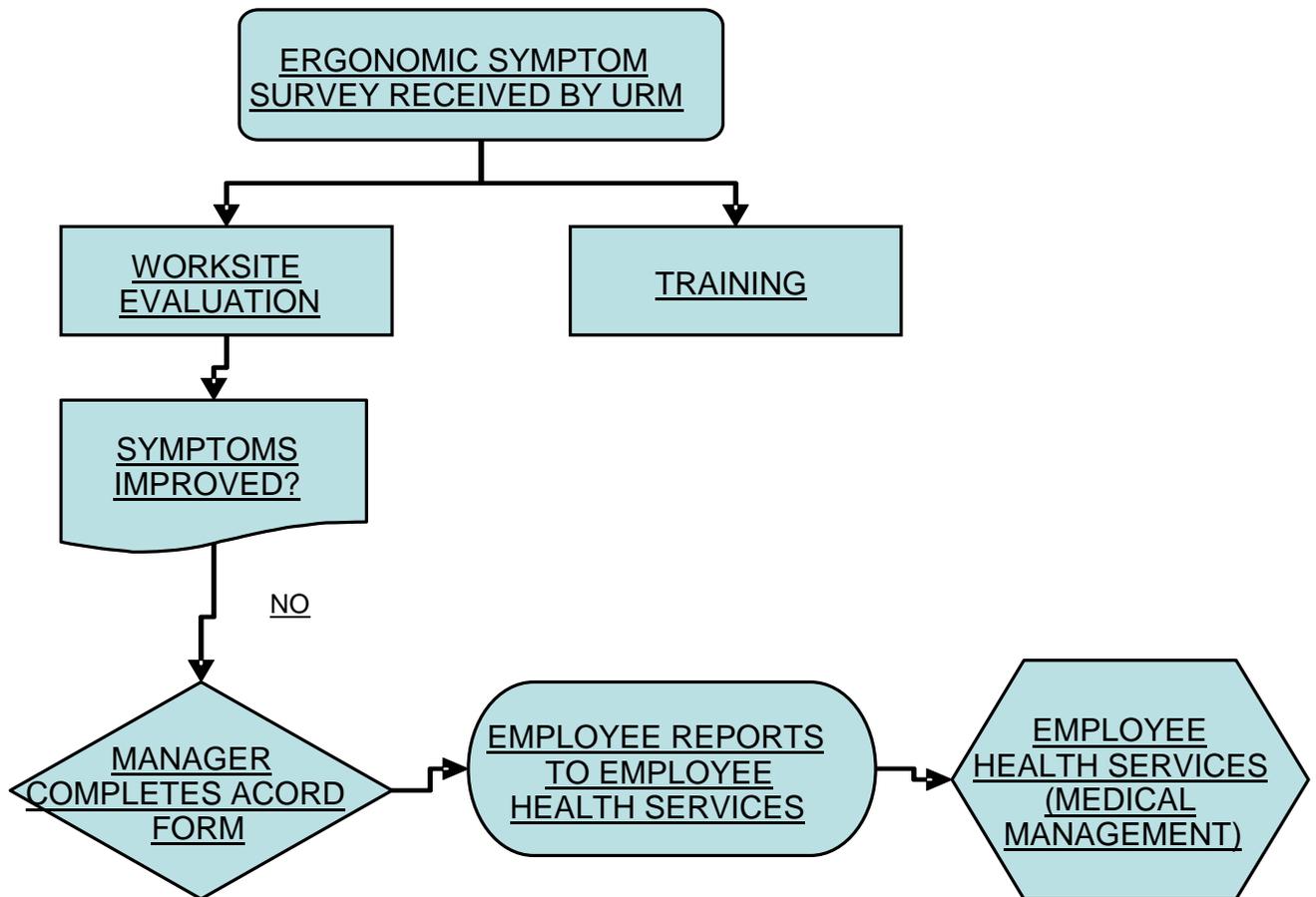
Contact Stress: Using hands or knees as a hammer more than ten minutes per hour or two hours per day.

Vibration: Using tools or equipment that typically has high vibration levels for more than two hours per day.

**REPORTING MUSCULOSKELETAL INJURIES, SIGNS OR SYMPTOMS**

Employees may request an in-person ergonomic worksite evaluation by filling out an [Ergonomic Symptom Survey](#) located on the University Risk Management (URM) website or by contacting 843-792-3604. Fax completed surveys to URM Occupational Safety and Health Programs (843)792-0284. Once an Ergonomic Symptom Survey is completed, an evaluation is scheduled. No evaluations will be performed without the knowledge of the employee’s immediate manager.

**ERGONOMIC ASSESSMENT FLOWCHART**



### **TRAINING**

Physical and Occupational Therapy staff will provide unit specific training upon requests. Submit request through University Risk Management Occupational Safety and Health Programs Division (843)792-3604.

### **WORKSITE EVALUATIONS**

Worksite evaluations are conducted by URM to identify, evaluate and control potential ergonomic risk factors. URM will provide written recommendations to the employee and their manager outlining possible alterations to the workstation. The purpose of the evaluation and written report is to eliminate ergonomic problems that may lead to musculoskeletal injuries and to address musculoskeletal injuries already present.

The written report provided by URM may include suggested products, such as keyboard trays or ergonomically designed chairs. Purchasing suggested products is both the decision and responsibility of the evaluated employee's manager.

### **HAZARD PREVENTION AND CONTROL**

Upon completion of a worksite evaluation, the following types of controls will be evaluated and considered for possible implementation.

**Engineering Controls:** Changes made to workstations, tools, and/or machinery that alter the physical composition of area or process.

**Administrative Controls:** Changes made to regulate exposure without making physical changes to the area or process, for example taking frequent breaks and job rotations. In general, engineering controls are preferred as their goal is to reduce the presence of hazards.

For example, the Lift Team was initiated to reduce the number of work related back injuries and improve the work environment for nursing staff. Please schedule Lift Team assistance through the Patient Transport Request Form under the Quick Links on the MUHA intranet

### **MEDICAL MANAGEMENT**

If an employee is experiencing any signs or symptoms of musculoskeletal injuries, the employee is to report their symptoms to their manager. Pain, numbness and tingling in wrist, arms, elbows, neck, shoulders and back are examples of early symptoms of musculoskeletal concerns.

In the event that an employee develops musculoskeletal symptoms, the manager will be responsible for ensuring that the following occurs:

- The manager will ensure the Ergonomic Symptoms Survey is completed and submitted to University Risk Management.
- Upon receipt of the Ergonomic Symptoms Survey, University Risk Management will conduct a worksite evaluation. A written evaluation will be sent to the employee's manager.
- If musculoskeletal signs or symptoms persist, the manager will fill out a first report of injury form (ACORD) and advise the employee to report to Employee Health Services for a medical evaluation.
- If the employee returns to work with restrictions, the manager will make a reasonable effort to accommodate the restriction.

### **RECORDKEEPING**

Worksite Evaluations: A written ergonomic worksite evaluation will be available for every assessment performed. The following information will be included:

- Employee and manager name
- Date of evaluation
- Worksite location
- Observed ergonomic risk factors
- Recommendations to prevent and control ergonomic risk factors

Medical Management: Employee Health Services will maintain medical management records.