

# Musculoskeletal Injury (MSI) Risk Assessment Worksheet

## Instructions

1. Review the [Guide to Musculoskeletal Injury \(MSI\) Risk Assessment](#) for information on how to conduct an MSI risk assessment. The guide also describes the physical demands risk factors and contributing risk factors that you need to consider as part of a risk assessment.
2. In the “Description” section of this worksheet:
  - Note the date of the assessment and who is conducting the assessment.
  - Name and describe the job or task being assessed.
  - Note which worker representatives are participating.
3. This worksheet has five sections that address different risk factors. The first part of each section covers physical demands risk factors. The second part of each section covers contributing risk factors.
4. For the physical demands risk factors component of each section, consider the low-, moderate-, and high-risk criteria for each risk factor. Check the boxes for the **highest level of risk** that is present.
5. For the contributing risk factors component of each section, determine if any contributing risk factors are present. The presence of one or more contributing risk factors may increase the overall risk of injury.
6. For each of the five sections, write notes to describe any specific observations you may have.
7. On the last page, record the results on the “Summary of risk” table. The results will help you decide which risk factors pose a greater risk to workers so you can focus on controlling those risk factors first.

## Description

Date: \_\_\_\_\_ Completed by: \_\_\_\_\_

Job or task being assessed: \_\_\_\_\_

Representative sample of workers, including workers with MSI signs and symptoms: \_\_\_\_\_


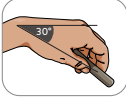



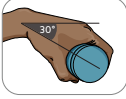

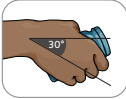
Joint health and safety committee (or worker health and safety representative) reviewed?

Yes       No

# 1. Force required

## Physical demands risk factors

Determine if any of the following MSI risk factors are present. Check the boxes for the highest level of risk.

Pinch gripping		
Low risk	Moderate risk	High risk
<input type="checkbox"/> Pinch gripping unsupported objects less than 2 hours total per day.	<input type="checkbox"/> Pinch gripping unsupported objects that weigh 1 kg (2 lb.) or more per hand for more than 2 hours total per day.  <input type="checkbox"/> Pinch gripping with a force of 2 kg (4 lb.) or more per hand for more than 2 hours total per day. This is equivalent to pinch gripping half a stack of photocopy paper (250 sheets).  	<input type="checkbox"/> Pinch gripping unsupported objects that weigh 1 kg (2 lb.) or pinch gripping with a force of 2 kg (4 lb.) in any of the following situations:  <input type="checkbox"/> Pinch gripping for more than 4 hours total per day.  <input type="checkbox"/> Pinch gripping for more than 3 hours total per day with repetitive motions every few seconds.  <input type="checkbox"/> Pinch gripping for more than 3 hours total per day with wrists bent in any of the following positions:  <input type="checkbox"/> $\geq 30^\circ$ flexion   <input type="checkbox"/> $\geq 45^\circ$ extension   <input type="checkbox"/> $\geq 30^\circ$ ulnar deviation 
Power gripping		
Low risk	Moderate risk	High risk
<input type="checkbox"/> Power gripping unsupported objects less than 2 hours total per day.	<input type="checkbox"/> Power gripping unsupported objects that weigh 4.5 kg (10 lb.) or more per hand for more than 2 hours total per day.  <input type="checkbox"/> Power gripping with a force of 4.5 kg (10 lb.) or more per hand for more than 2 hours total per day. This is equivalent to clamping light-duty automotive jumper cables onto a battery.  	<input type="checkbox"/> Power gripping unsupported objects that weigh 4.5 kg (10 lb.) or power gripping with a force of 4.5 kg or more per hand in any of the following situations:  <input type="checkbox"/> Power gripping for more than 4 hours total per day.  <input type="checkbox"/> Power gripping with a repetitive motion every few seconds for more than 3 hours total per day.  <input type="checkbox"/> Power gripping for more than 3 hours total per day with wrists bent in any of the following positions:  <input type="checkbox"/> $\geq 30^\circ$ flexion   <input type="checkbox"/> $\geq 45^\circ$ extension   <input type="checkbox"/> $\geq 30^\circ$ ulnar deviation 

## Pushing, pulling, or carrying

Force is needed to push or pull an object, either on wheels or by sliding. Force is also needed to carry an object.

Note any pushing, pulling, or carrying tasks, especially tasks that are repeated and/or long duration, or involve long distances, awkward postures, or work above the shoulder level or below knee height. See [MSI prevention guidance: Pushing and pulling](#) for more information on assessing these risks.



Determine if any of the following MSI risk factors are present. Check the boxes for the highest level of risk. If there is a moderate risk, do a lift/lower risk assessment to determine if there is a high risk (see page 5).

## Lifting or lowering

### Low risk

- Any lifting or lowering that is less than moderate risk.



### Moderate risk

Lifting or lowering objects:

- Above shoulder height, below the knees, or at arm's length.
- Twice or more per minute for more than 1 hour per shift.
- That weigh 2.3 kg (5 lb.) or more, twice or more per minute.
- That weigh more than 8.2 kg (18 lb.), once per shift.

**Note:** If any box above is selected, proceed to high-risk column.

### High risk

If you find any lifting or lowering that presents a moderate risk, do a lift/lower risk assessment for high risk (see page 5).

## Contributing risk factors

- Aspects of workplace layout (working reaches, working heights, seating, floor surfaces)

Describe: \_\_\_\_\_

- Characteristics of objects handled (size and shape, load condition and weight distribution, handles)

Describe: \_\_\_\_\_

- Environmental conditions (cold temperatures)

Describe: \_\_\_\_\_

- Organization of work (work-recovery cycles, task variability, work rate)

Describe: \_\_\_\_\_

## Notes and observations:

## Lift/lower risk assessment (to determine if high risk)

Use this section to assess forceful exertion from lifting and lowering. You can also use the WorkSafeBC online [Lift/Lower Calculator](#) to assess lifting and lowering forces. If a job or task involves a number of lifts with various weights or postures, assess the following scenarios:

1. The worst-case scenario — the heaviest weight and the most awkward posture.
2. The most commonly performed lift. When determining the frequency + duration adjustment in Step 3, consider all the lifting done in a typical workday.

### Step 1: Determine the actual weight of the lifted object

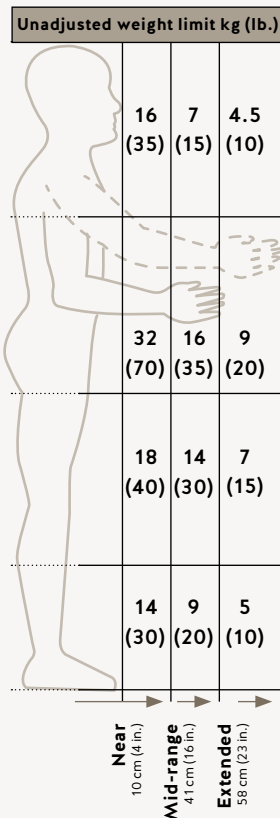
What is the lifted object?

1. Heaviest/most awkward
2. Most common

Actual weight = \_\_\_\_\_

### Step 2: Determine the unadjusted weight limit

Look for the most extreme hand position during the lift/lower task. Mark it on the following diagram.



Unadjusted weight limit = \_\_\_\_\_

### Step 3: Determine the frequency + duration adjustment

Find out how many times the worker lifts per minute and how many total hours per day the worker spends lifting. Look up the frequency + duration adjustment in the following table.

How many lifts per minute?	How many hours per day?		
	Less than 1 h	1 h to 2 h	more than 2 h
1 lift every 2-5 min	1.00	1.00	0.85
1 lift every min	0.95	0.95	0.70
2-3 lifts every min	0.90	0.85	0.60
4-5 lifts every min	0.85	0.70	0.50
6-7 lifts every min	0.60	0.50	0.35
8-9 lifts every min	0.40	0.30	0.15
10+ lifts every min	0.20	0.10	0.05

**Note:** For lifting done less than once every five minutes, use 1.0.

Frequency + duration adjustment = \_\_\_\_\_

### Step 4: Determine the twisting adjustment

If the worker twists more than 45° while lifting, the twisting adjustment is 0.85. Otherwise, use 1.0.

Twisting adjustment = \_\_\_\_\_

### Step 5: Calculate the weight limit

To get the weight limit, multiply the unadjusted weight limit (Step 2) by the frequency + duration adjustment (Step 3) and the twisting adjustment (Step 4).

$$\begin{array}{ccccccc} & \times & & \times & & = & \\ \text{Step 2} & & \text{Step 3} & & \text{Step 4} & & \text{Weight limit} \end{array}$$

Actual weight = \_\_\_\_\_ Weight limit = \_\_\_\_\_

### Step 6: Analyze the results

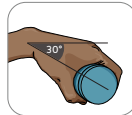

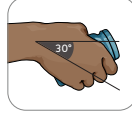
If the actual weight (Step 1) is greater than the weight limit (Step 5), you must implement risk controls.

**Notes and observations:**

## 2. Repetition

### Physical demands risk factors

Determine if any of the following MSI risk factors are present. Check the boxes for the highest level of risk for each body part.

Neck, shoulders, elbows, wrists, and hands		
Low risk	Moderate risk	High risk
Some repetition, but less than 2 hours total per day: <ul style="list-style-type: none"> <li><input type="checkbox"/> Neck</li> <li><input type="checkbox"/> Shoulders</li> <li><input type="checkbox"/> Elbows</li> <li><input type="checkbox"/> Wrists</li> <li><input type="checkbox"/> Hands</li> </ul>	Repeating the same motion every few seconds with little or no variation for 2–6 hours total per day: <ul style="list-style-type: none"> <li><input type="checkbox"/> Neck</li> <li><input type="checkbox"/> Shoulders</li> <li><input type="checkbox"/> Elbows</li> <li><input type="checkbox"/> Wrists</li> <li><input type="checkbox"/> Hands</li> </ul>	Repeating the same motion every few seconds with little or no variation for more than 6 hours total per day: <ul style="list-style-type: none"> <li><input type="checkbox"/> Neck</li> <li><input type="checkbox"/> Shoulders</li> <li><input type="checkbox"/> Elbows</li> <li><input type="checkbox"/> Wrists</li> <li><input type="checkbox"/> Hands</li> </ul>
Wrists and hands (excludes typing)		
Low risk	Moderate risk	High risk
<input type="checkbox"/> Some repetition but less than 2 hours total per day.	<input type="checkbox"/> Repeating the same motion every few seconds with little or no variation for more than 2 hours total per day.	<input type="checkbox"/> Repeating a high, forceful hand motion every few seconds with little or no variation for more than 2 hours total per day, with wrists bent in any of the following positions: <ul style="list-style-type: none"> <li><input type="checkbox"/> <math>\geq 30^\circ</math> flexion </li> <li><input type="checkbox"/> <math>\geq 45^\circ</math> extension </li> <li><input type="checkbox"/> <math>\geq 30^\circ</math> ulnar deviation </li> </ul>

## Wrists, hands, and fingers (typing)

### Low risk

- Intensive typing for less than 4 hours total per day.

### Moderate risk

- Intensive typing for 4-7 hours total per day.

### High risk

- Intensive typing for more than 7 hours total per day.
- Intensive typing for more than 4 hours total per day with wrist bent in any of the following positions:
- $\geq 30^\circ$  flexion
  - $\geq 45^\circ$  extension
  - $\geq 30^\circ$  ulnar deviation

Refer to the high-risk illustrations on the previous page under "Wrists and hands."

## Contributing risk factors

- Aspects of workplace layout (working reaches, working heights, seating, floor surfaces)

Describe: \_\_\_\_\_

- Characteristics of objects handled (size and shape, load condition and weight distribution, handles)

Describe: \_\_\_\_\_

- Environmental conditions (cold temperatures)

Describe: \_\_\_\_\_

- Organization of work (work-recovery cycles, task variability, work rate)

Describe: \_\_\_\_\_







## Notes and observations:



### 3. Awkward posture

#### Physical demands risk factors

Determine if any of the following MSI risk factors are present. Check the boxes for the highest level of risk.

Knees		
Low risk	Moderate risk	High risk
<input type="checkbox"/> Squatting or kneeling for less than 2 hours total per day.	<input type="checkbox"/> Squatting for 2-4 hours total per day.  <input type="checkbox"/> Kneeling for 2-4 hours total per day.	<input type="checkbox"/> Squatting or kneeling for more than 4 hours total per day.
	 	
Shoulders		
Low risk	Moderate risk	High risk
<input type="checkbox"/> Working with elevated arms less than 2 hours total per day.	<input type="checkbox"/> Working with hands above the head for 2-4 hours total per day.  <input type="checkbox"/> Working with elbows above shoulder level for 2-4 hours total per day.	<input type="checkbox"/> Working with hands above the head for more than 4 hours total per day.  <input type="checkbox"/> Working with elbows above shoulder level for more than 4 hours total per day.
		
Neck		
Low risk	Moderate risk	High risk
<input type="checkbox"/> Working with the neck bent in any direction less than 2 hours total per day.	<input type="checkbox"/> Working with the neck bent more than 30° in any direction for 2-4 hours total per day.  <input type="checkbox"/> Side <input type="checkbox"/> Backward <input type="checkbox"/> Forward	<input type="checkbox"/> Working with the neck bent more than 45° for more than 4 hours total per day, without support or the ability to vary posture.
	  	

## Back

### Low risk

- Working with the back bent in any direction less than 2 hours total per day.

### Moderate risk

- Working with the back bent more than 30° in any direction for 2-4 hours total per day.



### High risk

Working with the back bent forward without support or the ability to vary posture for:

- More than 30° for more than 4 hours total per day.
- More than 45° for more than 2 hours total per day.



## Contributing risk factors

- Aspects of workplace layout (working reaches, working heights, seating, floor surfaces)

Describe: \_\_\_\_\_

- Characteristics of objects handled (size and shape, load condition and weight distribution, handles)

Describe: \_\_\_\_\_

- Environmental conditions (cold temperatures)

Describe: \_\_\_\_\_

- Organization of work (work-recovery cycles, task variability, work rate)

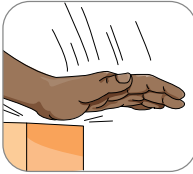


Describe: \_\_\_\_\_

**Notes and observations:**

## 4. Contact stress

### Physical demands risk factors

Determine if any of the following MSI risk factors are present. Check the boxes for the highest level of risk.

Hands		
Low risk	Moderate risk	High risk
<input type="checkbox"/> Using a hand as a hammer less than 10 times per hour for less than 2 hours total per day.	<input type="checkbox"/> Using a hand as a hammer more than 10 times per hour for more than 2 hours total per day.	<input type="checkbox"/> Using a hand as a hammer more than once per minute for more than 2 hours total per day.
		
Knees		
Low risk	Moderate risk	High risk
<input type="checkbox"/> Using a knee as a hammer less than 10 times per hour for less than 2 hours total per day.	<input type="checkbox"/> Using a knee as a hammer more than 10 times per hour for more than 2 hours total per day.	<input type="checkbox"/> Using a knee as a hammer more than once per minute for more than 2 hours total per day.
		
Local pressure		
<p>Local contact stress occurs when a hard or sharp object comes in contact with the skin (e.g., holding hand tools, handling objects with grooved or uneven edges, using power tool triggers with sharp edges). See <a href="#">MSI prevention guidance: Contact stress</a> for more information on assessing this risk.</p>		

### Contributing risk factors

- Aspects of workplace layout (working reaches, working heights, seating, floor surfaces)

Describe: \_\_\_\_\_

- Characteristics of objects handled (size and shape, load condition and weight distribution, handles)

Describe: \_\_\_\_\_

- Environmental conditions (cold temperatures)

Describe: \_\_\_\_\_

- Organization of work (work-recovery cycles, task variability, work rate)

Describe: \_\_\_\_\_

**Notes and observations:**

## 5. Hand-arm vibration

### Physical demands risk factors

<b>Moderate risk</b> Check the appropriate box if any of the following MSI risk factors are present.	<b>High risk</b> Does hand-arm vibration exceed regulatory limits? Exposure beyond these limits poses a high risk of hand-arm vibration disorders.														
<input type="checkbox"/> Using high-vibration tools for more than 30 minutes total per day (e.g., impact wrenches, chainsaws, jackhammers, or riveting hammers).	<b>Step 1</b> There are three ways to find the vibration value for a tool:  A. Ask the manufacturer for the vibration value.  B. Look it up in a vibration database.  C. Measure the vibration yourself. Follow ISO Standard 5349-1:2001 and ISO Standard 5349-2:2001.  <b>Step 2</b> Determine how many hours per day the worker uses the tool (i.e., the amount of time that the tool is actually vibrating in the worker's hands). This is the total exposure time.  <b>Step 3</b> The left column shows total exposure time. The right column shows the maximum vibration value considered safe for nearly all workers for a given daily exposure time. <table border="1" data-bbox="527 1056 1081 1409"><thead><tr><th>Total daily exposure time (hours)</th><th>Maximum vibration value considered safe for nearly all workers (m/s<sup>2</sup>)</th></tr></thead><tbody><tr><td>8</td><td>5</td></tr><tr><td>6</td><td>5.8</td></tr><tr><td>4</td><td>7.1</td></tr><tr><td>2</td><td>10</td></tr><tr><td>1</td><td>14.1</td></tr><tr><td>0.5</td><td>20</td></tr></tbody></table> <b>Note:</b> This table is adapted from <a href="#">OHS Guideline G7.11-1</a> . The values in the table refer to the 2015 American Conference of Governmental Industrial Hygienists (ACGIH) limits.	Total daily exposure time (hours)	Maximum vibration value considered safe for nearly all workers (m/s <sup>2</sup> )	8	5	6	5.8	4	7.1	2	10	1	14.1	0.5	20
Total daily exposure time (hours)	Maximum vibration value considered safe for nearly all workers (m/s <sup>2</sup> )														
8	5														
6	5.8														
4	7.1														
2	10														
1	14.1														
0.5	20														
<input type="checkbox"/> Using moderate-vibration hand tools for more than 2 hours total per day (e.g., grinders, sanders, or jigsaws).															

## Contributing risk factors

- Aspects of workplace layout (working reaches, working heights, seating, floor surfaces)

Describe: \_\_\_\_\_

- Characteristics of objects handled (size and shape, load condition and weight distribution, handles)

Describe: \_\_\_\_\_

- Environmental conditions (cold temperatures) See [MSI prevention guidance: Cold temperature](#) for more information on assessing this risk.

Describe: \_\_\_\_\_

- Organization of work (work-recovery cycles, task variability, work rate)

Describe: \_\_\_\_\_

## Notes and observations:

## Next steps

Complete and review the “Summary of risk” table to identify the level of risk associated with the various risk factors. Include contributing risk factors for each.

1. Minimize the risk of MSI to the lowest reasonable level. Prioritize as follows:

- High-risk tasks first
- Low- and moderate-risk tasks with a history of worker injuries and signs and symptoms of MSI
- Tasks with multiple risk factors

2. Develop risk controls to eliminate or minimize the risk of MSI.

For more information on developing controls, see [\*Preventing Musculoskeletal Injury \(MSI\): A Guide for Employers and Joint Committees\*](#).



## Summary of risk

	Low risk	Moderate risk	High risk	Contributing risk factors
<b>Gripping force</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Lift/lower force</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Repetition</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Awkward posture</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Contact stress</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Hand-arm vibration</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Notes and observations on controls: