

## Physical Demands Questionnaire - Limitations

Answers to this form help your physician to understand your job requirements and will assist in developing specific limitations should job modifications be indicated.

### Manual Materials Handle:

Weight/Force you handle \_\_\_\_\_

Size and shape of objects \_\_\_\_\_

Do things you lift have handles? \_\_\_\_ Yes \_\_\_\_ No

How high are you required to lift? \_\_\_\_waist high \_\_\_\_shoulder high \_\_\_\_above head

What is the distance you carry something you routinely lift? \_\_\_\_\_

Is your position unusual or involve a variety of trunk moves? \_\_\_\_ Yes \_\_\_\_ No  
(i.e., bend and rotate while lifting)

Lift/lower - height, position of load, and relationship to body

(horizontal distance from load) (check the appropriate answer)

\_\_\_\_ Unilateral

\_\_\_\_ Bilateral

### Carry

\_\_\_\_ Unilateral

\_\_\_\_ Bilateral

### Push/Pull

\_\_\_\_ Unilateral

\_\_\_\_ Bilateral

\_\_\_\_ While whole body is moving

### Consider non-materials handling:

#### Posture/Positions

\_\_\_\_ Duration (hours, minutes, seconds, or percentage of day)

\_\_\_\_ Continuous (duration hours, minutes, seconds)

\_\_\_\_ Intensity (degrees of position, range of motion, WNL, minimum, moderate, severe)

\_\_\_\_ Balanced/Symmetrical

### Consider mobility/ambulation (walk, crawl, climb, run):

Distance \_\_\_\_\_

Repetitions \_\_\_\_\_

Speed \_\_\_\_\_

Duration (percentage of day) \_\_\_\_\_

Repetitive movement (squatting, reaching, stooping)

\_\_\_\_ Repetitions

\_\_\_\_ Frequency

\_\_\_\_ Cycle time

\_\_\_\_ Duration (percentage of day)

\_\_\_\_ Continuous duration

\_\_\_\_ Intensity (degrees of position \_\_\_\_minimum \_\_\_\_moderate \_\_\_\_severe)

\_\_\_\_ Balanced/Symmetrical \_\_\_\_Yes \_\_\_\_No

## Physical Demands Questionnaire - Limitations

(Part 2)

Consider scales for balance:

Dynamic vs. static

Duration (*percent of job required*) \_\_\_\_\_

Surface type

Even surface

Uneven surface

Climbing (*stairs, ladders, poles*)

Beam and scaffolding/narrow ledges

Surface conditions?  wet  dry  ice  snow  oil

Consider combined postures vs. individual joint positions:

Squat/crouched  spine flexion

Hips flexion

Knees flexion

Ankle dorsiflexion

Are you able to change position? (*i.e., driving for required distance before stopping, or viewing computer monitor and using keyboard for specific periods of time without rest*)

Yes  No

Consider simultaneous motion:

Motions/positions happen simultaneously (*i.e., squat while looking down, or reaching while handling or sitting on a window sill while leaning or holding himself with one arm and reaching with another*)

Neck  Yes  No

Trunk  Yes  No

Upper Extremities

Shoulder

Elbow

Hands

Lower extremities

Hips

Knees

Ankles