Discomfort Survey



A discomfort survey can help identify hazardous manual tasks. Early reporting of symptoms can lead to risk controls being put in place before injury occurs.

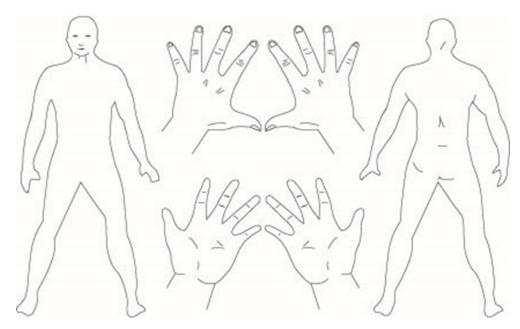
This survey sheet will help you identify and record instances where workers experience discomfort that:

- persists
- · recurs the next day, or
- persists after days off.

Workers should report pain or discomfort at work when it occurs. HSRs should investigate the reasons for the problem. Even if only one worker reports problems, investigate the presence of a risk factor.

•	Name (optional)	
•	Date Job work location	
	Tasks involved	
•	Time on this job	Less than $3 \text{ mths} \square 3 \text{ mths to } 1 \text{ yr} \square 1 \text{ yr or more } \square$

Do you suffer from swelling, numbness, tingling, 'pins and needles', stiffness, aches and pains in any part of the body? Indicate in the diagrams where the problem occurs.



Rate the level of discomfort/pain (circle the number which best identifies discomfort)

1 2 3 4 5

Just Noticeable Moderate Unbearable

Health Monitoring FAQs For Workers



What do you think caused the problem?		