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| **Hand and Foot Controls Checklist** |

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| **Company:** | Click or tap here to enter text. | **Workstation Name:** | Click or tap here to enter text. |
| **Prepared by:** | Click or tap here to enter text. | **Department:** | Click or tap here to enter text. |
| **Date:** | Click or tap to enter a date. | **Document Number:** | Click or tap here to enter text. |

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| **“NO” answer indicates need for additional investigation.** | |
| **Foot Controls** | |
| * **Seated:** Foot controls operated from a seated position. Avoid repetitive foot control use from a standing position. | Select YES or NO. |
| * **On floor:** Foot controls positioned on floor (rather than foot rest or other platform). * If footrest is used, footrest large enough to allow for foot control and foot on footrest. * Avoid having one foot higher than other. | Select YES or NO. |
| **Hand Controls** | |
| * **Precision:** Controls requiring precision or high-speed operation assigned to hands, rather than feet. | Select YES or NO. |
| * **One major control:** When only one major control operated by either hand or both hands, place in front of operator, midway between hands. | Select YES or NO. |
| * **Handedness:** Handedness is important only if the task requires skill or dexterity. If control requires fine adjustment, place control on right, most people (about 90% of population) are right-handed. | Select YES or NO. |
| * **Valves:** Locate manually operated hand control valves from 20 to 50 “(range of 30 to 40” is preferred) above floor whenever possible so valve is accessible from a standing position and optimize the force that can be applied to operate the valve. | Select YES or NO. |
| * **Levers:** Levers requiring significant force (greater than 5 lbs. force) located at chest level for standing work (range of 46” to 56” from floor) and elbow level for seated work (seated with feet on floor, range of 26” to 32” from floor). | Select YES or NO. |
| * **Levers:** Levers installed so they move toward axis of body (rather than away from body) to reduce amount of tension on body. | Select YES or NO. |
| * **Fine adjustment:** When controls require fine adjustment, provide support for hand being used. | Select YES or NO. |
| * **Finger operated:** For finger-operated controls, provide an armrest, either as part of the seat or on the panel itself. | Select YES or NO. |
| **Emergency Controls (E-Stops)** | |
| * **Separate location:** Emergency controls and displays physically separate from those used during normal operations. | Select YES or NO. |
| * **Accessibility:** Emergency controls placed in locations that are easily accessible. | Select YES or NO. |
| * **Line of sight:** Emergency controls and displays placed within 300 of the operator’s optimal line of sight. | Select YES or NO. |
| * **Special measures:** Special measures (guards, color coding, etc.) provided for emergency controls to aid in identification and to prevent inadvertent operation. | Select YES or NO. |