

COMPUTER/VDT COMFORT CHECKLIST

COLLEGE: _____

EMPLOYEE: _____

DEPARTMENT: _____

DATE: _____

EVALUATED BY: _____

CHAIR

1. Adjustable Chair with:

Support for low back? (convex 1-2") YES NO

Adjustable seat angle? (8 degrees back, 5 forward) YES NO

Rounded edges on seat?
(seat width = 18.2";depth =15-17" min) YES NO

Arm rest? (min distance between 18.2") YES NO
Leg clearance (h= 24";w= 20" min)

Is chair stable? (5 legs & casters) YES NO

2. Height of Chair:

Knees even with hips, or a little lower than
hips? (16"-20.5 ") YES NO

Is seat easily adjusted? YES NO

Do feet reach the floor? YES NO

Is a footrest needed? YES NO

3. Back Rest:

Backrest placed at waistline to support low
back? (16"-20" min 13") YES NO

WORK SURFACES

KEYBOARD

- | | | |
|---|-----|----|
| 1. Position of Keyboard: (23"-28") | YES | NO |
| Elbows bent at 90 ? | YES | NO |
| Wrists straight, or slightly bent up? | YES | NO |

MOUSE

1. Position of Mouse:

- | | | |
|---------------------------------------|-----|----|
| Elbows bent at 90 ? | YES | NO |
| Wrists straight, or slightly bent up? | YES | NO |
| Shoulders relaxed? | YES | NO |

SCREEN

1. Position of screen:

- | | | |
|--|-----|----|
| About 16" - 22" away (roughly arm's length)? | YES | NO |
| Top of terminal screen even or slightly below top of forehead? | YES | NO |

2. Visibility of screen:

- | | | |
|------------------|-----|----|
| Glare on screen? | YES | NO |
| Clarity? | YES | NO |

WORK

1. Position of Work:

- | | | |
|---|-----|----|
| Document and screen at similar heights? | YES | NO |
| Use of document holder | YES | NO |
| Sitting directly in front of the document holder, keyboard, and display terminal? | YES | NO |

PHYSICAL STRAIN REDUCTION

Muscle relaxing exercises?	YES	NO
Eyes	YES	NO
Head	YES	NO
Arms & shoulders	YES	NO
Wrists	YES	NO

COMMENTS

FOLLOW UP BY:

DATE: _____