# ASSESSMENT OF PHYSICAL ERGONOMICS RISK FACTORS AND THEIR EFFECTS ON QUALITY IN MEDICAL LABORATORIES

### Submitted By

### Wael Mohamed Ahmed Hamed

M.B.B.Ch., Faculty of Medicine, Cairo University, 1994 Master of (Radiology), Faculty of Medicine, Al Azhar University, 2003

A thesis submitted in Partial Fulfillment Of The Requirement for the Doctor of Philosophy Degree In Environmental Science

Department of Environmental Medical Sciences Institute of Environmental Studies and Research Ain Shams University

2015

## APPROVAL SHEET

# ASSESSMENT OF PHYSICAL ERGONOMICS RISK FACTORS AND THEIR EFFECTS ON QUALITY IN MEDICAL LABORATORIES

#### Submitted By

## Wael Mohamed Ahmed Hamed

M.B.B.Ch., Faculty of Medicine, Cairo University, 1994 Master of (Radiology), Faculty of Medicine, Al Azhar University, 2003

This thesis Towards a Doctor of Philosophy Degree in Environmental Science Has been Approved by:

Name

Signature

#### 1-Prof. Dr. Mohamed Salah El Din Mostafa

Prof. of Preventive Medicine, Epidemiology and Statistics Institute of Postgraduate of Childhood Ain Shams University

#### 2-Prof. Dr. Magdy Karam El Din Ali

Prof. of Preventive Medicine and Epidemiology Institute of Postgraduate of Childhood Ain Shams University

#### 3-Prof. Dr. Mahmoud Serry El Bokhary

Prof. of Chest Disease& Head of Department of Environmental

Medical Sciences Institute of Environmental Studies & Research Ain Shams University

#### 4-Prof. Dr. Mohamed Fargaly Kasem

Prof. of Community Medicine and Epidemiology Faculty of Medicine Al-Azhar University

2015

# ASSESSMENT OF PHYSICAL ERGONOMICS RISK FACTORS AND THEIR EFFECTS ON QUALITY IN MEDICAL LABORATORIES

#### Submitted By

## Wael Mohamed Ahmed Hamed

M.B.B.Ch., Faculty of Medicine, Cairo University, 1994 Master of (Radiology), Faculty of Medicine, Al Azhar University, 2003

A thesis submitted in Partial Fulfillment Of The Requirement for the Doctor of Philosophy Degree In Environmental Science Department of Environmental Medical Science

Under The Supervision of:

#### 1-Prof. Dr. Mohamed Salah El Din Mostafa

Prof. of Preventive Medicine, Epidemiology and Statistics Institute of Postgraduate of Childhood Ain Shams University

## 2-Prof. Dr. Magdy Karam El Din Ali

Prof. of Preventive Medicine and Epidemiology Institute of Postgraduate of Childhood Ain Shams University

2015

### **ACKNOWLEDGEMENTS**

The one who is most deserving of thanks and praise from me is Allah, may He be glorified and exalted, because of the great favours and blessings that He has bestowed upon me.

I would like to thank Professor MOHAMED SALAH ELDIN MOSTAFA, Professor of Preventive Medicine & Epidemiology & Statistics, Ain Shams University, my advisor, for his guidance and support in helping me prepare and reviewing my research. I would also like to thank Professor MAGDY KARAM ELDIN ALI, Professor of Preventive Medicine & Epidemiology, Ain Shams University for his help and support during this entire process. I would like to thank the medical laboratories workers .Without their help and support I would have not been able to accomplish my goals. Again thanks to everyone who made this paper possible. I would finally like to thank my family (Mother, Father, Wife and Children). They were always understanding and extremely patient with me throughout my studies

## **DECLARATION**

I declare that this thesis is my own work except for quotations and summaries which have been clearly acknowledged. It is being submitted for the degree of Doctor of Philosophy at the Institute of Environmental Studies and Research - Ain Shams University. It has not been submitted for any other degree in any other University.

•

#### Wael Mohamed Hamed

Cairo, January 2015

### **ABSTRACT**

**Introduction:** Medical Laboratory workers are exposed to many physical ergonomic risk factors and ergonomic stressors during routine laboratory work that may result in formation of work related musculoskeletal disorders and affect quality in work environment.

**Objective:** The aim of this study is to identify the different physical ergonomics risk factors that workers may be exposed to them in medical laboratories, association with laboratory ergonomic stressors, occurrence of work related musculoskeletal disorders and assess effects on quality in medical laboratories.

**Subjects and methods:** This study is Descriptive cross-sectional study for 80 workers in medical forensic laboratories in Cairo. The collected data from designed Questionnaire, clinical examination and investigations were processed and analyzed.

**Results:** Neck and upper extremity musculoskeletal disorders were found among 42.5% of the sample size, related to age, work period, awkward body position with non ergonomic chair and contact stress. Back musculoskeletal disorders were found among 31.3% of the sample size, related to work period, static posture due to insufficient leg room and awkward body position with non ergonomic chair .Lower limbs musculoskeletal disorder related to height, weight, static posture due to insufficient leg room and no lab bench anti-fatigue mat. Laboratory workers have little awareness with ergonomic principles .These factors decrease safety, productivity and quality of life in the laboratory work environment.

**Conclusion:** The most notable result from the study was repetitive movement is the main physical ergonomic risk factor poses significant risk for occurrence of musculoskeletal disorders in medical laboratories,

due to exposure to many ergonomic stressors, like, repetitive nature of pipetting, prolonged awkward postures at a microscope, opening and closing vial caps, microtome work, standing at laboratory workbenches, non ergonomic chair and using computer.

**Recommendations:** Ergonomic design of the laboratory. Medical laboratory workers must be awared with the protective measures to eliminate or reduce ergonomic stressors during routine laboratory procedures through ergonomic training program. Providing management leadership and employee involvement in the identification, correction and elimination of such risk factors.

**Keywords**: Ergonomic risk factor, Musculoskeletal disorders, Quality, Medical laboratories.

# TABLE OF CONTENTS

# Page No

	ACKNOWLEDGEMENTS	Ι
	DECLARATION	II
	ABSTRACT	III
	TABLE OF CONTENTS	V
	LIST OF ABBREVIATIONS	VI
	LIST OF TABLES	VII
	LIST OF FIGURES	Х
	CHAPTER 1. INTRODUCTION AND AIM OF	
	WORK	1
	CHAPTER 2. LITERATURE REVIEW	6
[	OVERVIEW OF ERGONOMICS	6
	WORK RELATED MUSCULOSKELETAL	
	DISORDERS	16
	LABORATORY SAFETY ERGONOMICS FOR THE	
	PREVENTION OF MUSCULOSKETAL	
	DISORDERS	41
	QUALITY AT MEDICAL LABORATORIES AND	
	WORKRELATED MUSCULOSKELETAL	
	DISORDERS	52
	CHAPTER 3. SUBJECTS AND METHODS	69
	CHAPTER 4. RESULTS	73
	CHAPTER 5. DISCUSSION	94
	CHAPTER 6. SUMMARY	104
	CHAPTER 7. CONCLUSIONS AND	
	<b>RECOMMENDATIONS</b>	107
	CHAPTER 8. REFERENCES	109
	APPENDIX. QUESTIONNAIRE	119
	ARABIC SUMMARY	

## **LIST OF ABBREVIATIONS**

Abbreviation	Meaning
CTS	Carpal Tunnel Syndrome
CLSI	Clinical and Laboratory Standards Institute
CTDs	Cumulative Trauma Disorders
FTEs	Full-Time Equivalent Employees
ISO	International Organization for Standardization
NCCLS	National Committee for Clinical Laboratory Standards
NIOSH	National Institute of Occupational Safety and Health
QWL	Quality of Work Life
REM	Rapid Eye Movement
RSIs	Repetitive Strain Injuries.
BLS	U.S. Bureau of Labor Statistics
WMSDs	Work-related Musculoskeletal Disorders
VDTs	Video Display Terminals

vi

## LIST OF TABLES

NO	Title	Page NO
1 2	JASTRZEBOWSKI'S DIVISIONS OF USEFUL WORK RISK FACTORS FOR NONTRAUMATIC NECK AND NECK/SHOULDER	6
	DIS O R D E R S	28
3	RISK FACTORS FOR CARPAL TUNNEL SYNDROME	31
4	RISK FACTORS FOR SHOULDER DISORDERS	32
5	RELATION BETWEEN AGE AND NECK AND UPPER LIMBS	
	MUSCULOSKELETAL DISORDERS.	73
6	RELATION BETWEEN WORK PERIOD AND NECK AND UPPER	74
-	LIMBS MUSCULOSKELETAL DISORDERS	74
7	RELATION BETWEEN RIGHT ARM AND SHOULDER PAIN AND	74
8	NECK AND UPPER LIMBS MUSCULOSKELETAL DISORDER	/4
0	MUSCULOSKELETAL DISORDERS	75
9	RELATION BETWEEN COMPUTER CHAIR ADJUSTABLE HEIGHT SE	15
,	NECK AND UPPER LIMBS MUSCULOSKELETAL DISORDERS	75
10	RELATION BETWEEN COMPUTER CHAIR GOOD SUPPORT FOR	10
10	BACK AND NECK AND UPPER LIMBS MUSCULOSKELETAL	
	DISORDERS	76
11	RELATION BETWEEN SHOULDERS RELAXATION WHEN USING	
	KEYBOARD AND MOUSE OR TRACKBALL AND NECK AND UPPER	
	LIMBS MUSCULOSKELETAL DISORDERS	76
12	RELATION BETWEEN MAINTAIN CONTROL OF EQUIPMENT OR	
	TOOLS AND NECK AND UPPER LIMBS MUSCULOSKELETAL	
	DISORDERS	77
13	RELATION BETWEEN USAGE OF HEADSETS WHEN FREQUENT	
	TELEPHONE WORK IS COMBINED WITH LABORATORY TASKS	
	AND NECK AND UPPER LIMBS MUSCULOSKELETAL DISORDERS	
14	RELATION BETWEEN CONTACT STRESSES EXIST BETWEEN FOREAR	RМ,
	WRIST AND/OR ELBOW AND WORKBENCH(I.E. SHARP EDGES OR	
	HARD SURFACES AND NECK AND UPPER LIMBS MUSCULOSKELETA	
1.5	DISORDERS RELATION BETWEEN AGE AND BACK MUSCULOSKELETAL	78
15	RELATION BETWEEN AGE AND BACK MUSCULOSKELETAL DISORDERS	79
16	RELATION BETWEEN WORK PERIOD AND BACK	19
10	MUSCULOSKELETAL DISORDERS	79
17	RELATION BETWEEN MAINTAIN CONTROL OF EQUIPMENT OR	17
17	TOOLS AND BACK MUSCULOSKELETAL DISORDERS	80
18	RELATION BETWEEN UPPER AND MIDDLE BACK PAIN AND BACK	50
	MUSCULOSKELETAL DISORDERS	80
19	RELATION BETWEEN LOWER BACK PAIN AND BACK	
	MUSCULOSKELETAL DISORDERS	81
20	RELATION BETWEEN COMPUTER CHAIR ADJUSTABLE HEIGHT	
	SEAT AND BACK MUSCULOSKELETAL DISORDERS	81

## Title

NO

		N
21	RELATION BETWEEN SUFFICIENT LEG ROOM AND KNEE CLEARANCE	ĽΕ
	WHEN WORKING AT THE COMPUTER AND BACK MUSCULOSKELET.	AL
	DISORDERS	
22	RELATION BETWEEN PRESENCE OF LAB BENCH ANT FATIGUE MAT	
	TO STAND ON OR A STOOL TO ELEVATE ONE FOOT ON AND BACK	
	MUSCULOSKELETAL DISORDERS	
23	RELATION BETWEEN LAB BENCH CHAIR SUFFICIENT LUMBAR	
20	SUPPORT AND BACK MUSCULOS KELETAL DISORDERS	83
24	RELATION BETWEEN LAB BENCH ADEQUATE LEG ROOM AND	05
24		07
~-	BACK MUSCULOSKELETAL DISORDERS	83
25	RELATION BETWEEN PRESENCE OF MICROSCOPE ADJUSTABLE	
	CHAIR THAT PROVIDES ADEQUATE BACK SUPPORT AND BACK	_
	BACK MUSCULOSKELETAL DISORDERS	84
26	RELATION BETWEEN HEIGHT AND LOWER LIMBS	
	MUSCULOSKELETAL DISORDERS	85
27	RELATION BETWEEN WEIGHT AND LOWER LIMBS	
	MUSCULOSKELETAL DISORDERS	85
28	RELATION BETWEEN RIGHT THIGH AND KNEE PAIN AND LOWER	
	LIMB MUSCULOSKELETAL DISORDERS	86
29	RELATION BETWEEN LEFT THIGH AND KNEE PAIN AND LOWER LI	86
	MUSCULOSKELETAL DISORDERS	
30	RELATION BETWEEN LOWER BACK PAIN AND LOWER LIMB	
00	MUSCULOSKELETAL DISORDERS	87
31	RELATION BETWEEN SUFFICIENT LEG ROOM AND KNEE CLEARANC	
51	WHEN WORKING AT THE COMPUTER AND LOWER LIMBS	
	MUSCULOSKELETAL DISORDERS	
32	RELATION BETWEEN FEET REST FLAT ON THE FLOOR OR ON A	
34	FOOTREST AND LOWER LIMBS MUSCULOSKELETAL DISORDERS.	88
22	RELATION BETWEEN LAB BENCH ADEQUATE LEG ROOM AND	00
33		00
24	LOWER LIMBS MUSCULOSKELETAL DISORDERS	88
34	RELATION BETWEEN PRESENCE OF LAB BENCH ANTI-FATIGUE	
	MAT TO STAND ON OR A STOOL TO ELEVATE ONE FOOT ON AND	00
	LOWER LIMBS MUSCULOSKELETAL DISORDERS	89
35	RELATION BETWEEN LAB BENCH ADEQUATE LEG ROOM AND	
	AGGRAVATE CONDITION WITH MAINTAIN CONTROL OF	
	EQUIPMENT OR TOOLS	90
36	RELATION BETWEEN USAGE OF VIALS WITH THE FEWEST	
	ALLOWABLE NUMBER OF THREADS AND AGGRAVATE THE	
	CONDITION BY PERFORMING THE SAME MOTION OR SERIES OF	
	MOTIONS CONTINUALLY OR FREQUENTLY FOR AN EXTENDED	
	PERIOD OF TIME	90
37	RELATION BETWEEN MICROSCOPE POSITIONED SO THAT ONE	
	CAN SIT UPRIGHT IN A COMFORTABLE POSITION TO VIEW	
	THROUGH THE EYEPIECE AND AGGRAVATE THE CONDITION BY	
	PERFORMING THE SAME MOTION OR SERIES OF MOTIONS	
	CONTINUALLY OR FREQUENTLY FOR AN EXTENDED PERIOD OF	
	TIME.	91
		-

NO	Title	Page
		NO
38	RELATION BETWEEN LAB BENCH CHAIR HAVE ADJUSTABLE	
	ARMS THAT ALLOW FOR SITTING CLOSE TO WORK BENCH TO	
	COMPLETE WORK AND AGGRAVATE CONDITION WITH	
	PROLONGED OR REPETITIVE REACHING ABOVE SHOULDER	
	HEIGHT	92
39	RELATION BETWEEN PRESENCE OF MICROTOME WORK MATER. IA	LS
	POSITIONED WITHIN CLOSE AND EASY REACH AND AGGRAVATE	
	CONDITION WITH PROLONGED OR REPETITIVE REACHING ABOVE	
	SHOULDER HEIGHT	92
40	RELATION BETWEEN CONTACT STRESSES EXIST BETWEEN	
	FOREARM, WRIST AND/OR ELBOW AND WORKBENCH (I.E. SHARP	
	EDGES OR HARD SURFACES) AND AGGRAVATE THE CONDITION	
	BY PRESSING PART OF THE BODY (SUCH AS THE HAND) AGAINST	
	SHARP EDGES	93

## LIST OF FIGURES

NO	Title	Page
		No
1	USING FORCE IN THE LABORATORY	19
2	CONTACT STRESS	20
3	AWKWARD POSITION AT MICROSCOPE	22
4	CARPAL TUNNEL SYNDROME	30
5	KEEP FREQUENTLY USED SUPPLIES WITHIN CLOSE	
	REACH	42
6	HOLD THE PIPETTER WITH A RELAXED GRIP	45
7	WORKSTATION SET-UP FOR MICROSCOP	46
8	FULLY ADJUSTABLE ERGO-TASK CHAIR	47
9	ERGONOMICS FOR COMPUTER WORKSTATION	<b>49</b>
10	USAGE OF APPROPRIATE KEYBOARD AND MOUSE (	50
11	QUALITY MANAGEMENT SYSTEM	54
12	PATH OF WORKFLOW	55
13	HE QUALITY MANAGEMENT SYSTEM MODEL	56
14	PERCENTAGE OF WORKERS WHO WERE NOT	
	TRAINED TO DO MICROSCOPE WORK BREAKS,	
	STRETCH BREAKS, USE TELEPHONE HANDSET AND	
	AWARE OF ERGONOMICS RESOURCES.	94
15	PERCENTAGE OF WORKERS DO HARD PHYSICAL	
	EFFORT.	94
16	PERCENTAGE OF WORKERS WERE COMPLAINED	
	OF WORK RELATED INJURY, DIAGNOSED AS NECK,	95
17	UPPER MSDS, BACK MSDS AND LOWER LIMBS MSDS. PERCENTAGE OF WORKERS WERE COMPLAINED OF	93
1/	RIGHT UPPER ARM ,SHOULDER PAIN ,NECK PAIN	
	AND LOWER BACK PAIN	95
18	MANAGEMENT OF MSDS	96
10	MANAOLMENT OF M5D5	90

### **INTRODUCTION**

Ergonomics is the science of fitting the work-place conditions and job demands to the capabilities of the working population. The goal of ergonomics is to make the work place more comfortable and to improve both health and productivity. To meet these goals, the capabilities and limitations of workers and their tools, equipment and furniture are considered in conjunction with how they relate to particular tasks (University of Minnesota Duluth Environmental Health and Safety Office ,2000). Ergonomics should be considered in the work system design so as to reduce or eliminate problems (Shikdar,2004)

Physical ergonomics is concerned with human anatomical, anthropometric, physiological and biomechanical characteristics as they relate to physical activity. (Relevant topics include working postures, materials handling, repetitive movements, work related musculoskeletal disorders, workplace layout, safety and health (*International Ergonomics Association, 2014*).

Physical risk factors for the development of musculoskeletal disorders in medical laboratories are mechanical overload, repetition frequency, exposure time and posture (*Luttman et al., 2014*).

Laboratory researchers are at risk for repetitive motion injuries during routine laboratory procedures such as pipetting, working at microscopes, operating microtomes, using cell counters and video display terminals. Repetitive motion injuries develop over time and occur when muscles and joints are stressed, tendons are inflamed, nerves are pinched and the flow of blood is restricted. Standing and working in awkward positions in laboratory hoods/biological safety cabinets can also present ergonomic problems .The main ergonomic stressors during routine laboratory workers are; Pipetting, Microscopy, Microtome Work, Laboratory Workbenches. Micro-Manipulation, Fine Motor Skills, Overhead Lifting, Cryostat Work, Computer Screens and Non Ergonomic Chair. The workers must be awared with the protective measures to eliminate or reduce ergonomic stressors during routine laboratory procedures (*NIESH*, 2014).

The term musculoskeletal disorders denote health problems the locomotor apparatus, i.e. of muscles, tendons, the skeleton, cartilage, ligaments and nerves. Musculoskeletal disorders include all forms of illhealth ranging from light, transitory disorders to irreversible, disabling injuries. WRMSD divided into: Neck disorders, upper-extremity disorders, back injuries and lower-extremity disorders. Back injuries (e.g. lower back pain, disc degeneration, and herniation) have the highest proportion (approximately 60%). The second position is taken by injuries of the neck and the upper extremities (e.g. pain syndromes of the neck, shoulders, arms, "tennis elbow", tendinitis and tendovaginitis, carpal tunnel syndrome, syndromes related to cumulative traumata, the socalled cumulative trauma disorders (CTDs) or repetitive strain injuries (RSIs)), followed by injuries of knees (for example, degeneration of menisci, arthrosis) and hips (e.g. arthrosis). It is generally accepted that working conditions and workload are important factors for the development and continuance of these disorders (Luttman., et al., 2014).

Cytotechnologists suffer from musculoskeletal disorders commonly associated with poor ergonomic design in the workplace. Among the symptoms presented are headache, neck pain and stiffness, pain of the lower and upper back, and upper-extremity discomfort. Neurological symptoms, such as numbness, tingling, and/or pain in the hand and fingers, are often associated with repetitive motion (*Thompson et al.*, 2003).