

Risk assessment for workplaces with display screen equipment

according to Sections 5 and 6 Arbeitsschutzgesetz (ArbSchG – Safety and Health at Work Act)

To be completed by workplace user:									
Mork	ros:								
Work area: e.g., FB/ZE/Dez.			Room no.:						
		T'Al -	Phone:						
User:		Title:	Email:						
		First name:	Average dail						
			spent worki		hr(s)				
		Surname:	display scree						
No.	Risks a	s and/or impairments			does not apply	no longer applies	no assessment possible		
1	Requi	red space in office room							
1.1	• Fr de • Fr	r office and your workplace in the office sufficiently large space in front of <u>all</u> pieces of furniture must be at eep; wee area of movement at your personal workspace is a 5 m ² .	least 80 cm						
1.2	Does y	our office provide a view to the outside?							
1.3	-	r workstation set up in such a way that you are not faw but a side wall instead?	acing the						
1.4	Are tri	pping hazards avoided?							
2	Workt	Worktable							
	• A	work surface sufficiently large? minimum surface area of 160 cm x 80 cm and a heig re recommended	ht of 72 cm						
2.2	Is it po	ossible to adjust the worktable to your size?							
2.3	Is the deep?	available work surface in front of the monitor at least 80 cm?							
2.4	Are th	ne surfaces free from glare and reflection?							
2.5	• A	leg room in the area of the swivel chair sufficient? t least 58 cm wide t least 60 cm deep							
3	Office	chair and alternative seating							
3.1	way th	your chair and worktable adjustable in such a that your thigh and lower legs are at a right e when your feet touch the ground and are lower arms horizontal when you use the							

No.	Risks and/or impairments	applies	does not apply	no longer applies	no assessment possible		
	keyboard?		- 1-1- 7				
3.2	©: dguv Do your feet touch the ground in a right angle without having to use a						
	footrest? If not, do you have a footrest at your disposal?						
3.3	Does your office swivel chair have 5 legs/casters?						
3.4	Can you adjust the height of your office chair between 42 and 53 cm?						
3.5	Is your office chair equipped with a height-adjustable backrest?						
3.6	Is there enough room to change position and vary movement? Please check your office chair in this respect.						
4	Monitor						
4.1	Is the distance between your eyes and the monitor at least 50 cm?						
4.2	Is the uppermost line on the screen significantly lower than your eye level?						
 Adjust font size and focus for clear and easy reading. Adjust contrast and brightness of the screen. Set up the monitor in such a way that you face it directly without having to turn your upper body. Select a positive display mode (i.e., dark characters on a light background). Use the seeing aids provided. 							
5	Notebook (Laptop)						
5.1	Have you been given an additional computer mouse?						
5.2	Have you been given an additional keyboard?						
6	Keyboard						
6.1	Is the available work surface in front of the keyboard at least 5 to 10 cm to provide support for your wrists when typing?						
6.2	Can you set up your keyboard at an angle?						
7	Working with display screen equipment						
7.1	Is it possible to take short breaks and do other tasks when working with display screen equipment?						
7.2	Is it possible to work in a relaxed and upright body posture?						
8	Lighting						
	Is the lighting suitable, i.e., not too bright or too dim to work comfortably?						
8.1	Horizontal illuminance at your workplace should be at least 500 lux.						
8.2	Is incoming daylight complemented by an additional workplace light source?						
8.3	Are there curtains or blinds to reduce light irradiation?						
9	Noise						
9.1	Does your workplace feel sufficiently noise-protected?						

No.	Risks and/or impairments			appli	es	does not apply	no longer applies	no assessment possible			
9.2	nega •	conversation noise level)		·							
10	clim	climate									
10.1	Are drafts avoided?										
10.2	Doe	s the	office air humidity level feel comfortable?								
11	Equi	Equipment safety									
11.1	Are the electrical devices checked regularly? (Refer to inspection label)]					
11.2		Are all cables sufficiently long to work freely?									
12	Occ	Occupational health care									
12.1	Did you know that you can make use of occupational health care services regularly (every 3 years) offered by the Medical Service (MAS)?										
12.2	When did you have your last occupational health care examination for working with display screen equipment?			Mont	th:	Year:					
	Should you have marked (ticked) the answer <i>no</i> in 12.1, please contact Ms Mönkehues (<u>dita.moenkehues@tu-darmstadt.de</u>) at Unit IV A – Occupational Safety, to enter your tasks in the occupational health care file.										
MAINISCANCE ACT OF THE ACCEPTATIONAL SAFETY, to enter your tasks in the occupational health care life.											
The following fields need to be completed by the respective superior!											
Result:		All questions have been answered by marking <i>yes</i> . No issues have been reported; thus, no measures are required.									
	-		Issues (measures required, enter below)	easures required, enter below)							
Date [dd/mm/yyyy], signature of superior:											
Issues by no.		Desc	ription of measures	Date complet	ted:	Notes:					

Should you prefer personalised feedback and advice in this matter, please contact our Senior Occupational Safety Specialist, Susanne Schienbein (susanne.schienbein@tu-darmstadt.de).

This risk assessment must be retained and filed by the respective superior.