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## Introduction

e approach typically requires hiring physical or occupational therapists to conduct a functional capacity exam provide an objective measure of a patient's safe functional abilities compared to the physical demands of work. A job matching program should involve both human resources personnel and a quali ed healthcare provider use reliable and valid methods for conducting FCEs and physical demands analyses; and require basic knowledge of federal and state employment law because a ne line exists between job placement and discrimination.

e Americans with Disabilities Act does not prevent employers from conducting physical agility and physical tness tests on employees or job applicants [1]. However, employers cannot require medical examinations unless they are shown to be job related and consistent with business necessity. Some organizations rely on stretching, exercise and conditioning programs to change an individual worker's physical condition with the aim of preventing MSDs. is approach relies on changing each employee's physical condition and capabilities, and depends on many variables that are outside an employer's control, including employee willingness, interest and participation; an individual's physical condition and already existing conditions, and the design of the exercises to match workplace demands. In the U.S., employers that use exercise and stretching to manage MSDs must ensure that they are promoting preventive exercise, not therapeutic exercise.

## Discussion

If a physician or licensed healthcare professional recommends therapeutic exercise in response to a work-related injury or illness, the case is considered to involve medical treatment and the case is recordable. Many studies have examined the e ects of stretching on the performance of athletes, and most results have been generally positive. However, the workplace and physical condition of employees are di erent [2]. In a review of three studies, the results suggest that worker health was enhanced and injury severity and costs decreased. However, the studies failed to de nitively prove the case for or against stretching. Similar studies and literature reviews have drawn the same conclusions that results were not very compelling, were mixed and suggested future studies with improved validity. While research does support that stretching improves exibility, range of motion standardize the controls. Regardless of the model on which a program is based, the main focus of a comprehensive ergonomics program is to make tasks, jobs, products, environments and systems compatible with the needs, abilities and limitations of people, as opposed to making the people compatible with the work characteristics and demands. Diagnosis is the rst step to identify and measure workplace exposures to MSD risk factors. e primary risk factors are awkward posture, high force, and high frequency and long duration. e limits for each factor vary by each joint of the body due to its anatomical structure [7]. A combination of two or more risk factors increases the chance of developing an MSD. Valid and proven assessment tools are available for whole-body exposure, as well as segmental exposure and speci c risk factors. E ective assessment tools use quantitative measures to identify and determine the exposure to risk factors that contribute to MSD development. For example, the NIOSH li ing equation is used to evaluate the back during li ing tasks while the rapid entire body assessment is used to evaluate exposures to all joints of the body [8]. e usability of qualitative and quantitative assessment tools has evolved to a point at which unsafe, ergonomics or medical professionals can conduct MSD risk assessments e ectively. In one study, found that workers completed ergonomic risk assessments that were in agreement with those completed by an ergonomist. e bottom line is that MSD assessment and management can and should include people across an organization, not just ergonomics professional. Changing the workplace depends on people in engineering roles and engineering controls to ensure that reach, force and distance are within acceptable limits of the collective workforce [9]. is requires designing the workplace to t the 5th percentile female to percentile male to prevent exposure to MSD risk factors for all workers. Many studies have proven this approach to be e ective and e cient. Administrative controls include changes to work planning, such as job rotation, rest breaks and slowed pace.

ese controls depend on people and can create additional challenges

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