

### 3.2.4 Repetitive Motion

For analysis of repetitive motion, a trained person should use the checklist as shown in Table 3.9.

**Table 3.9: Checklist for repetitive motion**

Body Part	Physical Risk Factor	Max. Exposure Duration	Please tick (/)	
			Yes	No
Neck, shoulders, elbows, wrists, hands, knee	Work involving repetitive sequence of movement more than twice per minute	More than 3 hours on a “normal” workday  OR  More than 1 hour continuously without a break		
	Work involving intensive use of the fingers, hands or wrist or work involving intensive data entry (key-in)			
	Work involving repetitive shoulder/arm movement with some pauses OR continuous shoulder/arm movement			
	Work using the heel/base of palm as a “hammer” more than once per minute	More than 2 hours per day		
	Work using the knee as a “hammer” more than once per minute.	More than 2 hours per day		
<b>Sub Total (Number of tick(s))</b>				

The total score for repetition is **5**. **YES** score of **1** and above will initiate an advanced assessment.