# Job Demands Analysis

**To the physician:** We are presenting this summary of our employee’s current job demands to assist you in your assessment of this patient’s physical capabilities for possible participation in our Early Return-to-Work Program.

**Employee Name**

**Job Description**

**Typical Work Environment/Conditions**

**Essential Tasks/Physical Requirements**

**Equipment Used**

Check marks indicate the extent to which the employee performs the following:

(N = Never, O = Occasionally, F = Frequently, C = Continuously)

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Lifting/ Lifting/Carrying** | N | O | F | C | **Activity** | N | O | F | C |
| 10 lbs. or less |  |  |  |  | Bend |  |  |  |  |
| 11 - 20 lbs. |  |  |  |  | Squat |  |  |  |  |
| 21 - 40 lbs. |  |  |  |  | Kneel |  |  |  |  |
| 41 - 60 lbs. |  |  |  |  | Twist/Turn |  |  |  |  |
| 61 - 100 lbs. |  |  |  |  | Climb |  |  |  |  |
| Pushing/Pulling |  |  |  |  | Crawl |  |  |  |  |
| 13 - 25 lbs. |  |  |  |  | Reach Above Shoulder |  |  |  |  |
| 26 - 40 lbs. |  |  |  |  | Type/Keyboard |  |  |  |  |
| 41 - 60 lbs. |  |  |  |  | Driving |  |  |  |  |
| 61 - 100 lbs. |  |  |  |  | Automatic |  |  |  |  |
| 100+ lbs. |  |  |  |  | Standard |  |  |  |  |
| Comments (Address all other physical requirements here including sitting, standing, walking and levels of fine manipulation.)  |

**cc:** New York State Insurance Fund