

Supervisor Checklist for Health Assessments

UF Job Duties that Require a Health Assessment

Check all job duties that apply to position title _____/position number _____.
The job duty links provide descriptions, required forms and locations for more information.

1. For established positions, record the items checked below in myUFL's Organizational Development.
2. For non-established positions (Ex. OPS, volunteers), record the items checked below on the [INOP form](https://connect.ufl.edu/ehs/occmcd/pages/inop.aspx) (<https://connect.ufl.edu/ehs/occmcd/pages/inop.aspx>).
- The Student Health Care Center will need the job duties from either #1 or #2 above before the health assessment is completed.

- ___ [Animal Contact](#)* direct exposure to vertebrate animals, animal tissues, body fluids or wastes
- ___ [Asbestos Abatement](#)* individuals involved in an abatement effort
- ___ [Climbing](#) focus is on not only leg motion but also hand-over-hand motion such as with climbing ladders but not stairs
- ___ [Commercial Driver License](#)* for those required to have a commercial driver license as part of their UF employment)
- ___ [Contact with Human Blood](#)* or Other Potentially Infectious Material (OPIM) includes human body fluids other than feces, urine, tears and sweat
- ___ [Frequent reaching above shoulder](#) includes painting, shelving books, running overhead cable, etc
- ___ [Heavy Lifting](#) 45 pounds and over
- ___ [Human Pathogen Research \(BSL2+/3\)](#)* for those working with or in proximity to certain biological agents
- ___ [Kneeling](#) more than 2 hours per day
- ___ [Law Enforcement](#) duties with the University Police Department
- ___ [Noise](#)* (Work in Area of Excessive Noise) noise level defined by OSHA
- ___ [Operation of Special Purpose Vehicle](#) includes industrial or farm equipment
- ___ [Patient Contact](#) having physical or face-to-face contact with a patient, or having contact with potentially contaminated items including (but not limited to) blood and/or body fluids
- ___ [Pesticide Use](#)* individuals who use pesticides as defined in the *Medical Monitoring Program for Pesticide Users*
- ___ [Repeated Bending](#) more than 2 hours per day
- ___ [Repetitive Pulling and Pushing](#)
- ___ [Respirator Use](#)* for individuals required to wear a respirator on a routine or emergency basis
- ___ [Scientific Research Diving](#)* for individuals who participate in UF affiliated research diving
- ___ [None of the above job duties apply](#)

Supervisor name (print or type)	Supervisor signature	Date