Early Medical Assessment



Machinery and Equipment Wholesaling

Press Operator

1. Machinery and Equipment Wholesaling
2. Press Operator

Dear Doctor: This form will take up to 5 minutes to complete. Please review each task the worker undertakes (both picture and written description) and tick whether or not the worker can complete this task. If modification required, please leave comments. Space at the end of this document is available for final comments and recommendations.

|  |  |  |
| --- | --- | --- |
| L:\RTW Fund Project\Stage Three SAWIC Codes 472801, 473601 & 485601\Machinery and Equipment Wholesalers\Aussie Pan - Grants Bakery Equipment\IMG_1587.JPG  L:\RTW Fund Project\Stage Three SAWIC Codes 472801, 473601 & 485601\Machinery and Equipment Wholesalers\Aussie Pan - Grants Bakery Equipment\IMG_1586.JPG  L:\RTW Fund Project\Stage Three SAWIC Codes 472801, 473601 & 485601\Machinery and Equipment Wholesalers\Aussie Pan - Grants Bakery Equipment\IMG_1588.JPG | **Bread Pans**   * + - * Constant standing required for this position.       * Grasping 2 halves of bread pan from deep container. Bending and twisting to access items when supply low. Placing together on press.       * Bilateral hand movement to arrange pan together and hold in place for welding to occur using foot press to operate. All reaching to use press is within comfortable forward reaching range.       * Stacking completed bread pan from floor. | Doctor Approval  Yes  No  Comments: |
| L:\RTW Fund Project\Stage Three SAWIC Codes 472801, 473601 & 485601\Machinery and Equipment Wholesalers\Aussie Pan - Grants Bakery Equipment\IMG_1597.JPG | **Bread Tins**   * Placing card of steel onto machine (forward reach). Repetitive reach to place in and retrieve steel after it is bent. * Bilateral reaching to the side of the machine at waist height to operate 2 buttons at the same time. * Light weights handled, constant standing required. | Doctor Approval  Yes  No  Comments: |
| L:\RTW Fund Project\Stage Three SAWIC Codes 472801, 473601 & 485601\Machinery and Equipment Wholesalers\Aussie Pan - Grants Bakery Equipment\IMG_1598.JPG |  |  |
| L:\RTW Fund Project\Stage Three SAWIC Codes 472801, 473601 & 485601\Machinery and Equipment Wholesalers\Aussie Pan - Grants Bakery Equipment\IMG_1604.JPG | **Press Line**   * Walking down line of presses and repetitively forward reaching (within comfortable range) to place steel on presses. * All operated at the same time with one button. | Doctor Approval  Yes  No  Comments: |
| L:\RTW Fund Project\Stage Three SAWIC Codes 472801, 473601 & 485601\Machinery and Equipment Wholesalers\Aussie Pan - Grants Bakery Equipment\IMG_1624.JPG | **Break Press**   * Items handled <1kg. * Pushing metal into press (repetitive forward reach within comfortable range). * Hydraulic, foot pedal operated. * Retrieving finished product and placing on trolley. * Constant standing and walking required. | Doctor Approval  Yes  No  Comments: |
| L:\RTW Fund Project\Stage Three SAWIC Codes 472801, 473601 & 485601\Machinery and Equipment Wholesalers\Aussie Pan - Grants Bakery Equipment\IMG_1627.JPG | **Cleaning**   * Manually cleaning tins by wiping them with a cloth. * Tins are then stacked on trolleys. | Doctor Approval  Yes  No  Comments: |
| L:\RTW Fund Project\Stage Three SAWIC Codes 472801, 473601 & 485601\Machinery and Equipment Wholesalers\Aussie Pan - Grants Bakery Equipment\IMG_1609.JPG  L:\RTW Fund Project\Stage Three SAWIC Codes 472801, 473601 & 485601\Machinery and Equipment Wholesalers\Aussie Pan - Grants Bakery Equipment\IMG_1612.JPG  L:\RTW Fund Project\Stage Three SAWIC Codes 472801, 473601 & 485601\Machinery and Equipment Wholesalers\Aussie Pan - Grants Bakery Equipment\IMG_1618.JPG | **Guillotine**   * Measuring on bench. * Lifting sheet of aluminium and placing on guillotine. * Guillotine is operated using a foot pedal. * Repetitive bending and reaching forward to feed aluminium through guillotine. * Full sheet can weigh up to 20kg. Two people required for full sheet as it is awkward to handle. | Doctor Approval  Yes  No  Comments: |

1. Work Capacity Form

**Doctor Review (include final comments)**

|  |
| --- |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |

I confirm that in my view, subject to the above comments, the worker is able to perform certain duties detailed in this Early Medical Assessment.

|  |  |  |
| --- | --- | --- |
| These duties should be reassessed on: |  | Date: |

|  |  |  |
| --- | --- | --- |
| Signature : |  | Date: |

**Employers Declaration:**

I confirm that I/we have reviewed the Doctor’s recommendations and comments. I/we will make suitable changes to make allowances for the Dr’s recommendations.

|  |  |  |
| --- | --- | --- |
| Signature : |  | Date: |

**Employees Declaration**

My Doctor has discussed their recommendations with me. I have been given the opportunity to participate in this process.

|  |  |  |
| --- | --- | --- |
| Signature : |  | Date: |

For information on completing this form, please contact Business SA on 08 8300 0000.

***Disclaimer:*** *This document is published by Business SA with funding from ReturnToWorkSA. All workplaces and circumstances are different and this document should be used as a guide only. It is not diagnostic and should not replace consultation, evaluation, or personal services including examination and an agreed course of action by a licensed practitioner. Business SA and ReturnToWorkSA and their affiliates and their respective agents do not accept any liability for injury, loss or damage arising from the use or reliance on this document. The copyright owner provides permission to reproduce and adapt this document for the purposes indicated and to tailor it (as intended) for individual circumstances*. (C) 2016 ReturnToWorkSA