



**Employers'**  
**LINK-JOB DESCRIPTION**  
*For Temporary Light Duty Work*

Department of Labor and Industries  
**Review of Job Analysis and Job Description**  
**Physician Billing Codes:**  
 1038M-Limit one per day  
 1028M-Each additional review,  
 up to five per workers per day

**PE-2-M**

Worker:	Claim #:	
Company:	Job Title: <b>MODIFIED; Low Back</b> <b>Electrician: Construction or Maintenance: Power House</b>	
Phone No:	Hours per day:	Days per week:
Employer Name (please print):		Title:
Employer Signature:		Date
<p><b>Foreman:</b> <i>Please refer to the Level 1 Mechanic Craft Classification Work Function List for training or modifications.</i></p> <p><b>Essential Job Duties:</b></p> <ol style="list-style-type: none"> <li>1. Participate in pre-shift planning meeting, problem solving groups and safety meetings.</li> <li>2. Identify and report unsafe conditions and complete work order for corrective action.</li> <li>3. Document crew licenses and certifications are up to date and filed. If a license is expiring soon, contact crew member with a reminder memo.</li> <li>4. Develop safety and skill training in the injured crew member's areas of greatest expertise. Take pictures of the machine or electrical unit and create a manual for those tasks for training future workers and contract labor. Schedule a demonstration.</li> <li>5. Ensure that prior to starting a test, communications are made to other crafts, management, supervisors and Dispatch and Operations regarding the test.</li> <li>6. Inspect equipment (within physical limitations) and document that after maintenance or repairs have been performed, the work space has been returned to operational status.</li> <li>7. Make wire and conduit labels and affix to wires and conduits. May need access to aerial personnel lift to install on conduits above shoulder height.</li> <li>8. Act as confined space attendant if can be performed safely while seated outside the space. Record all necessary data for procedure.</li> <li>9. Gather information from appropriate parties to determine priorities for scheduling work and convey this information to the foreman.</li> <li>10. Assess staff, materials and equipment to determine there are sufficient resources available to complete upcoming work orders. Document what is needed and who is responsible for ordering the materials and gain approval from engineer or foreman as appropriate. Create requisitions for materials, as allowed, and forward to purchasing department. Track estimated time of arrival for materials and report to foreman to schedule job. May require assistance to access parts above shoulder height.</li> <li>11. Assist in troubleshooting process through data collection and verification. Document test results and submit to appropriate personnel.</li> <li>12. Verify repairs have been performed if visual inspection can be performed within limitations. If not work with a partner. Document equipment installation, maintenance and repair. Develop maintenance and repair logs.</li> <li>13. Verify blueprints, P, C and ID's (piping, cable and instrumentation diagrams) and schematics contain the latest revisions. Gather all redline drawings from crew members. Transfer redline corrections to as built drawings. Archive previous redline versions.</li> <li>14. At workbench, inspect and repair electrical hand tools, mag lights, cords and test equipment. Rewire boxes.</li> <li>15. Inventory and document the amount of cable left on spools. Update the document as cable is used and notify foreman when re-order point is reached. Proceed with tasks as listed under number 7.</li> <li>16. Make a chart of what color tools belong in each department with a map of the home base for where specific tools are stored. Duplicate, laminate and have charts posted around plant to find tools quickly.</li> <li>17. Data entry: Maximo Records Management, Daily Work Order &amp; weekly Percentage of Completion reports.</li> </ol>		

<p><b>Machinery, tools, equipment and personal protective equipment description:</b></p> <p>Computer, pen and paper, small hand tools, voltage meters, communication radio, cell phone, micrometer, dial indicators.</p>	<p><b>Modification Equipment Required:</b></p> <p>*Ergonomic chair suitable for the injured worker for prolonged sitting. May need head rest for a neck injury.</p> <p>*Sit to stand electric desk to sit or stand at will and to position keyboard at proper height to avoid static muscle loading in neck.</p> <p>*Rolling mechanic's stool for accessing low areas.</p> <p>*Access to electric motor utility cart available to injured worker to reduce walking.</p>	
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**FREQUENCY DEFINITIONS**

<p><b>N: Never</b> (not at all) 0 minutes</p>	<p><b>S: Seldom</b> (1%-10% of the time) up to 48 min.</p>	<p><b>O: Occasional</b> (11%-33% of the time) 49 min. to 2 hrs. 25 min.</p>	<p><b>F: Frequent</b> (34%-66% of the time) 2 hrs., 26 min. to 5 hrs., 35 min.</p>	<p><b>C: Constant</b> (67%-100% of the time) more than 5 hrs., 36 min.</p>
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PHYSICAL DEMANDS	FREQUENCY					DESCRIPTION OF TASKS
	N	S	O	F	C	
Sitting:				X		While using computer, attending meetings, riding in utility cart, or as confined space attendant. May sit/stand at will with use of <b>*electric sit-stand desk. *Doctor please indicate need for modification.</b>
Standing:			X			While observing equipment, as confined space attendant if able (may bring chair), repairing or replacing small parts, installing labels.
Walking:			X			Around the plant. <b>*May use utility cart for transportation to reduce walking. *Doctor please indicate need for modification.</b>
Climbing Ladders / Stairs (circle one)		X				Uses elevator. May limit where worker can go, some stairs required. <b>May use scissor lift instead of ladder to access high areas.</b>
Twisting at the Waist		X				May occur while accessing parts and supplies.
Bending / Stooping:		X	X			While accessing parts or performing light repairs or installations below waist level. May choose to bend, kneel or squat.
Squatting / Kneeling:		X				<b>*May use rolling stool for accessing low shelves or equipment. *Doctor please indicate need for modification.</b>
Crawling:	X					May occur while performing light repairs or installations.
Reaching Out <b>Both</b>				X		Working with tools for repairs, keyboarding.
Working above shoulder <b>Dominant or Both</b>			X	X	X	May need to reach parts that are above shoulder height. Some computer workstations may cause shoulder hunching. <b>This may be modified with an articulating keyboard arm or electric table. Doctor, Please indicate need for modification below.</b>
Handling / Grasping <b>Dominant</b>			X			Tools, mouse, pen, cart for traveling around plant.
Fine Manipulation <b>Dominant</b>			X			Small parts, pen, writing.
Keyboarding				X		For data entry, documenting task procedures and safety protocols.
Wrist flexion <b>Both</b>				X		Some computer workstations may cause flexion.
Repetitive Motion <b>Both</b>				X		Keyboarding.
Vibratory Tasks	X					None noted.
Foot Controls / Driving	X	or	X			When using motorized utility cart. <b>Indicate if cart with hand controls is needed under doctor's modifications.</b>
Talking / Hearing / Seeing			X			Conversing with coworkers or supervisor about task at hand.

Worker:

Claim No:

Link-Job Description: PE-2-M

Lifting / Pushing	Never	Seldom	Occasional	Frequent	Constant
<i>Example</i>	<u>50</u> lbs.	<u>20</u> lbs.	<u>10</u> lbs.	<u>0</u> lbs.	<u>0</u> lbs.
Lift: R or L or B	<u>21</u> lbs.	<u>20</u> lbs.	<u>10</u> lbs.	<u>1</u> lbs.	___ lbs.
Carry DISTANCE <u>5</u> ft Both - Use cart	<u>21</u> lbs.	<u>20</u> lbs.	<u>10</u> lbs.	<u>1</u> lbs.	___ lbs.
Push / Pull R or L or B	<u>21</u> lbs.	<u>20</u> lbs.	<u>5</u> lbs.	<u>1</u> lbs.	___ lbs.

**Job Description Developed by:**

Signature: <i>Chandra Caine</i>	Date: 12/2/2015
Name (Please print): Chandra Pat Caine, MS, CDMS	Title: Vocational Rehabilitation Counselor WA # 11099

**Job Description Approved by Foreman:**

Signature:	Date:
Name (Please print):	Title:

**FOR HEALTH PROVIDER'S USE ONLY**

<b>Provider Approval:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Hours per day:</b>	<b>Days per week:</b>	<b>Effective date:</b>
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If no, please provide objective medical documentation to support your decision.

**Modification Equipment Required; Please check all that apply:**

- Ergonomic chair suitable for the injured worker for prolonged sitting. May need head rest for a neck injury.
- Sit to stand electric desk to sit or stand at will and to position keyboard at proper height to avoid static muscle loading in neck.
- Rolling mechanic's stool for accessing low areas.
- Access to electric motor utility cart available to injured worker to reduce walking.
- Other:

Provider Signature	Provider Name (Please print)	Date:
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