

#### Risk assessment RA03

# https://sportsciencesafety.stir.ac.uk

Faculty / Service Area:	Faculty of He	aculty of Health Sciences and Sport Location: Sport Science laboratories, other							
Description of work task / equipment /area being assessed:									
Exercise testing (Static and maximal)									
Change log		Version 1.1 6 <sup>th</sup> July 2022 New format  Version 1.2 10 <sup>th</sup> July 2023 Referenced regulations and SOPs							
Head of faculty		Prof Jayne Donaldson	Safety office	-	Dr Nidia Rodriguez Sanchez				
Completed by:		Dr Stuart Galloway	Date:		12 <sup>th</sup> May 2015				
Reviewed by (Line Manager	r):	Dr Nidia Rodriguez Sanchez	Date:		10 <sup>th</sup> July 2023				
		Chris Grigson	Date of next review:		August 2024				
Equipment used		Dynamometry Kin-Com, Biodex, Globus, squat rack, Cybex resistance machines, mid thigh pull, weights and dumbbells.							
Categories of people involv	red	Staff, UG, PG, Visitors							
Duration of activity for assessment production at o minutes or mor range of joint a		Various durations from 30-45 minutes for assessment of maximal force production at one joint angle to 60 minutes or more for assessment at a range of joint angles (these are total times of subject involvement not exercise times)	Frequency of	activity	Frequency dependent upon nature of work. Research work could be daily, consultancy work could be monthly, teaching could be 3-4 times per year				



Legal compliance to standards and regulations required

Health and Safety at Work act 1974 (HASAWA) https://www.hse.gov.uk/legislation/hswa.htm

Management of Health and Safety at Work Regulations 1999 (MHSWR)

https://www.legislation.gov.uk/uksi/1999/3242/contents/made

Provision of Work Equipment Regulations 1998 (PUWER)

https://www.hse.gov.uk/work-equipment-machinery/puwer.htm

Manual Handling Operations Regulations 1992 (MHR)

https://www.hse.gov.uk/pubns/priced/l23.pdf

What are the hazards?	Hazard category	Who might be harmed and how?	What are you already doing to control the risks?	*Risk rating	What additional controls (if any) are required to reduce the risks?	*Risk rating	Action by who?	Action by when?	Date of completion
Collapse or impaired movement leads to slips, trips and falls	F4	Participants  Cuts, abrasions and broken bones	SOP, equipment SOP, Instruction and familiarisation sessions ensure the participant knows the equipment and their surroundings.  Appropriate period of active recovery following exercise to prevent collapse due to venous pooling or hypertension  Regular equipment maintenance and inspection.	Low					



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			Participants never left alone during and for a period after testing. Investigator instructed to look out for signs of a feint.						
Hard exercise leads to adverse health effects	F4	Cardiac or respiratory event leads to illness and potentially death	Should not occur in individuals who are accustomed to hard physical effort and who routinely exercise.  SOP, Instruction and familiarisation.  Participants never left alone during and for a period after testing. Investigator instructed to look out for signs of a feint.  pre-participation screening (including resting blood pressure and heart rate) and	Low	To be 100% certain of no risk an exercise ECG and echocardiography should be performed prior to testing but this would be impractical in a non-clinical setting.				



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			questionnaire exclude participants with inadequate fitness levels Medical history						
			questionnaire and age restriction exclude participants who may have existing health conditions.						
			pre-participation guidelines are the standard for any exercise assessments worldwide* Investigators trained						
			to look out for signs of adverse health effects and instructed to stop the test immediately.						
			Investigators trained to use the automatic defibrillator located nearby.						



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			Investigators trained in emergency procedures						
References	* Preparticipation medical evaluation for elite athletes <a href="https://bmjopensem.bmj.com/content/bmjosem/7/4/e001178.full.pdf">https://bmjopensem.bmj.com/content/bmjosem/7/4/e001178.full.pdf</a>								
	RA16 Dyna	sk Assessments amometers	KinCom						
		cle ergometers abolic testing dmills	Lode Excalibur Cosmed Quark C CosmedK5	pet Dou	le Corival Monark uglas Bags Cosmos Pulsar 3P	894E			
	RA80_Tea	y Risk Assessments chingLab_L19 IromuscularLab_3B14	RA81_Resistance 2D RA84_Multipurpo	_		/Lab_3B1 <sup>,</sup>	42		



# Standard operating procedure

#### **Procedure:**

Volunteer arrives and is given written and oral information about the nature and purpose of such a test. They then complete a physical activity and medical history questionnaire prior to assessment of resting blood pressure and heart rate. On completion of these procedures and if no adverse responses have been observed (see below) the volunteer is asked to sign an informed consent form agreeing to participate in such an activity and agreeing that they are free to withdraw from the procedures at any time without giving any reason for doing so.

The exercise test protocol is then carried out by a minimum of one support person however, for ergometry based testing this is normally a minimum of two support personnel.

Following completion of the exercise testing an active recovery period is performed by the volunteer to ensure adequate recovery from the exercise and to prevent venous pooling of blood in the periphery which may lead to hypotension and collapse (syncope).

Following the active recovery volunteers are generally provided with feedback on their test results and will remain in the laboratory for a further 5-10 minutes. At this point the volunteers are free to go as long as they do not complain of any adverse symptoms when asked if they feel light headed, faint or sick. In the event of them feeling an adverse symptom they will be placed in a supine position with feet elevated and blood pressure will be monitored at intervals for at least 5 minutes or until they feel that they have recovered.

#### Responses which would screen a person out of participating in this activity:

- <18 or >40 years of age and/or inactive (inactive defined as less than 3x30 minutes of exercise per week)
- Resting blood pressure >150/100 mmHg (even after two repeat measurements 5 minutes apart)
- Resting heart rate >100 beats per minute (even after repeat measurement following additional seated rest)
- History of cardiovascular, respiratory, metabolic or other disease (including muscle, bone or joint problems)
- Females if they indicate that they are pregnant
- If <18 parental consent is required before assessment takes place assuming that other screening criteria do not exclude the individual.
- If >40 guidance of medical practitioner is requested even in cases where other screening criteria do not exclude the individual.