

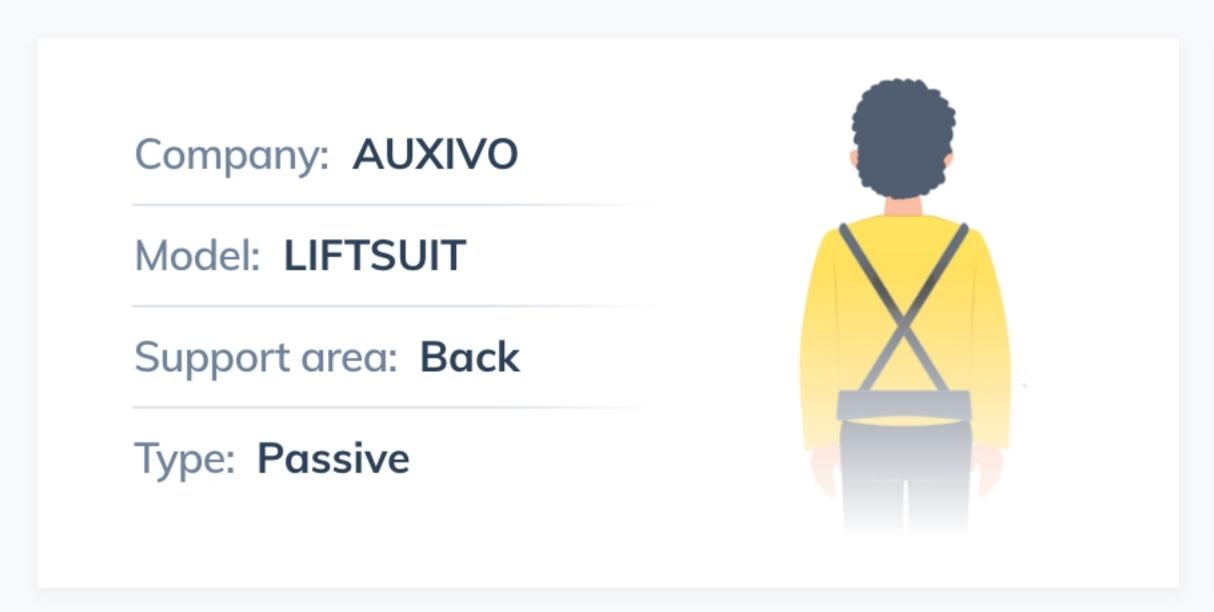
# IMPACT ASSESSMENT REPORT



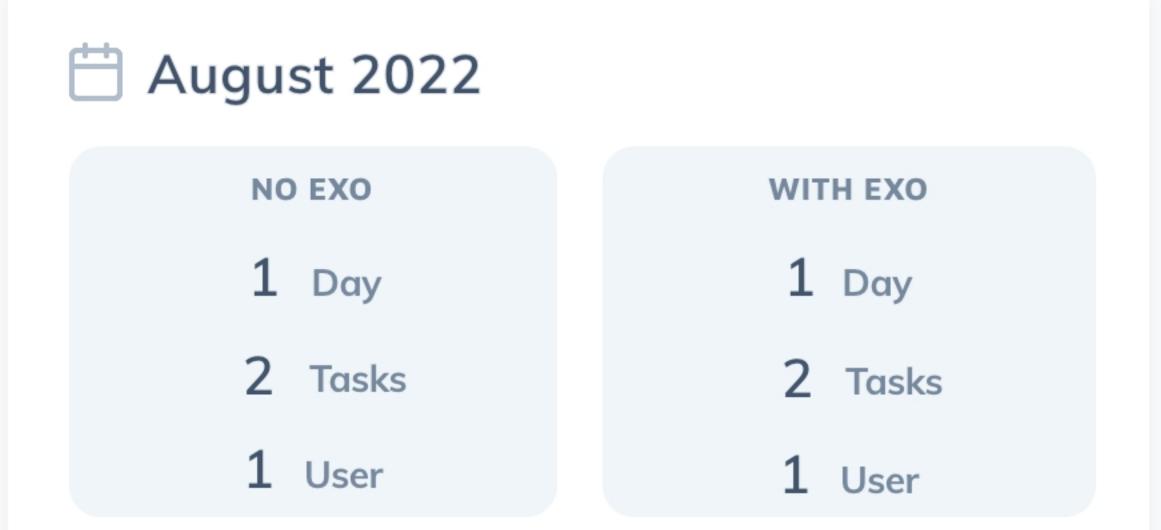
# **Executive Summary**



#### STUDY EXOSKELETON



#### **DATA COLLECTED**

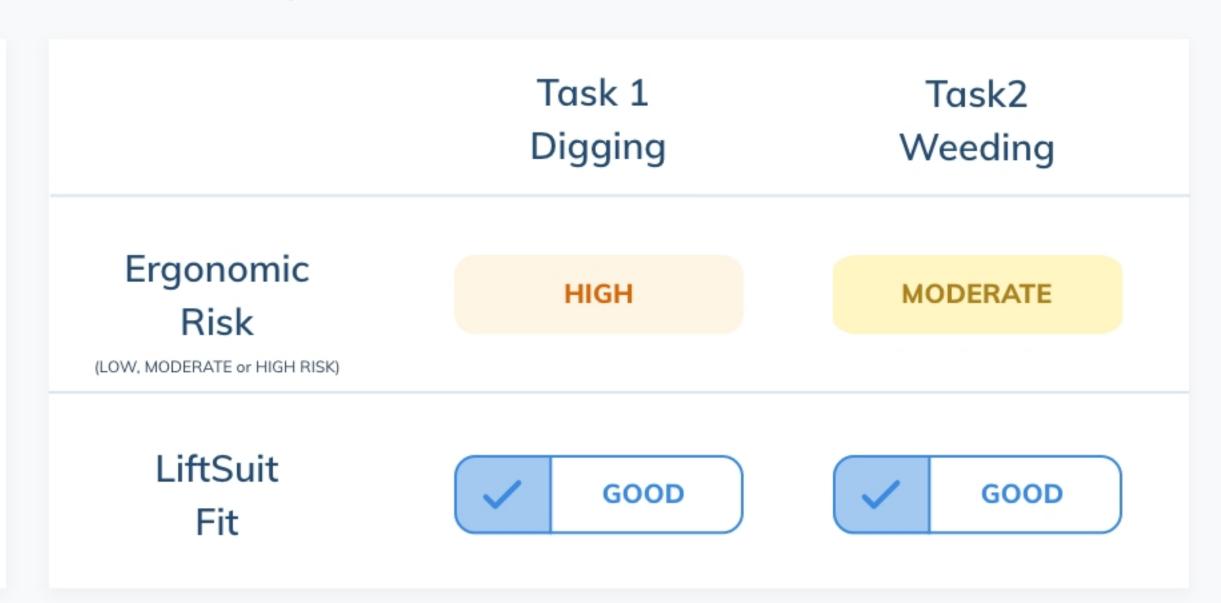


# Main results

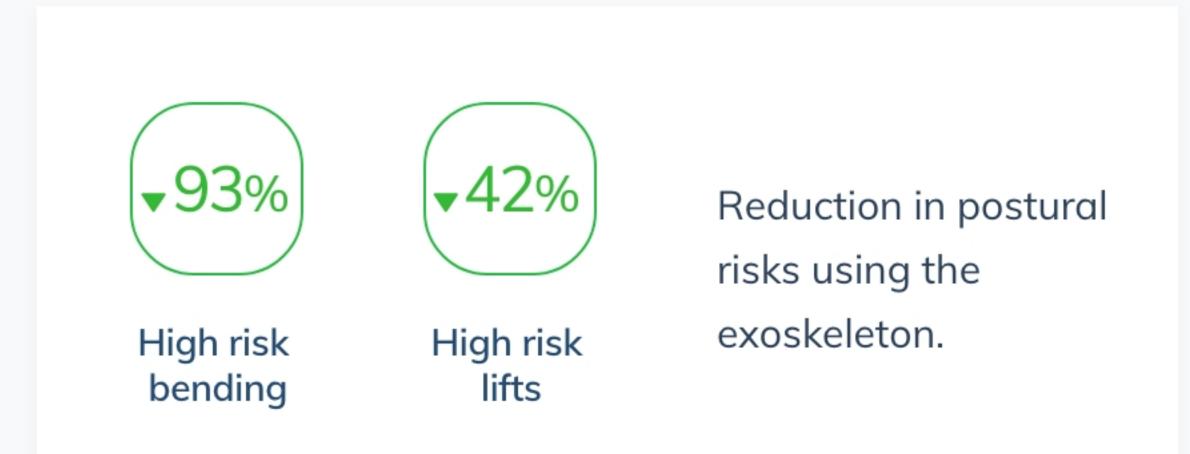
#### LOWER BACK DISORDER (LBD) RISK REDUCTION



#### **EXOSKELETON / TASK FIT**



## **POSTURAL BEHAVIOUR IMPACT**



#### PHYSIOLOGICAL IMPACT



## RECOMMENDATIONS



# > Follow a stepwise implementation & evaluate with additional data

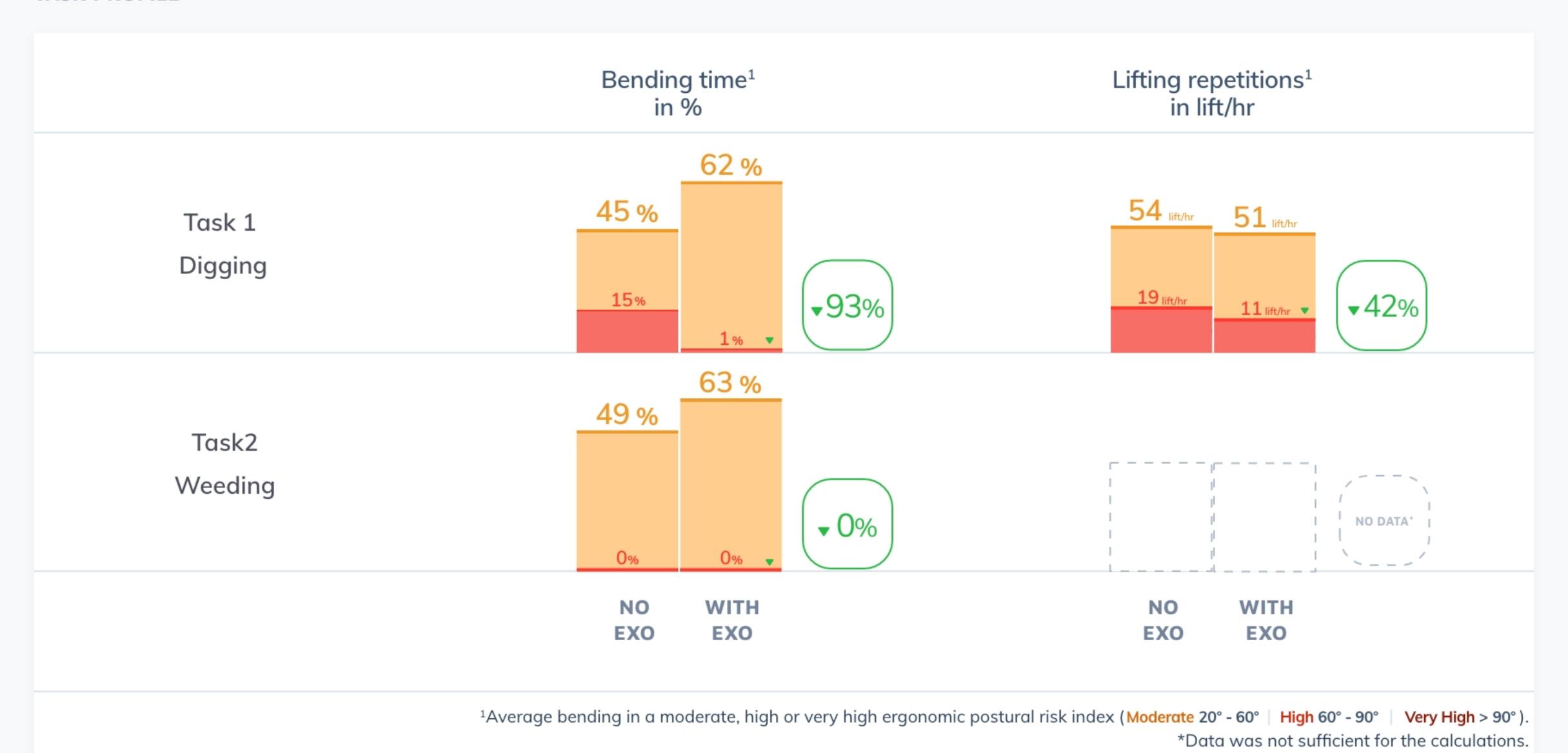
Considering back flexion risks, the analysed activities have moderate to high ergonomic risk. The use of the exoskeleton LiftSuit may reduce the risk of developing a low back disorder (LBD). It could potentially reduce LBD risk in 13%. Besides, LiftSuit may lead to bending and lifting posture improvement, data has shown a reduction of 93% of high risk bending and 42% of high risk lifts. Furthermore, there was a reduction of 17% in workload and an increase in 14% on time spent in recovery zone.

These results should be interpreted as preliminary because they are based on a small sample size. Therefore, periodic evaluation with additional data is recommended.

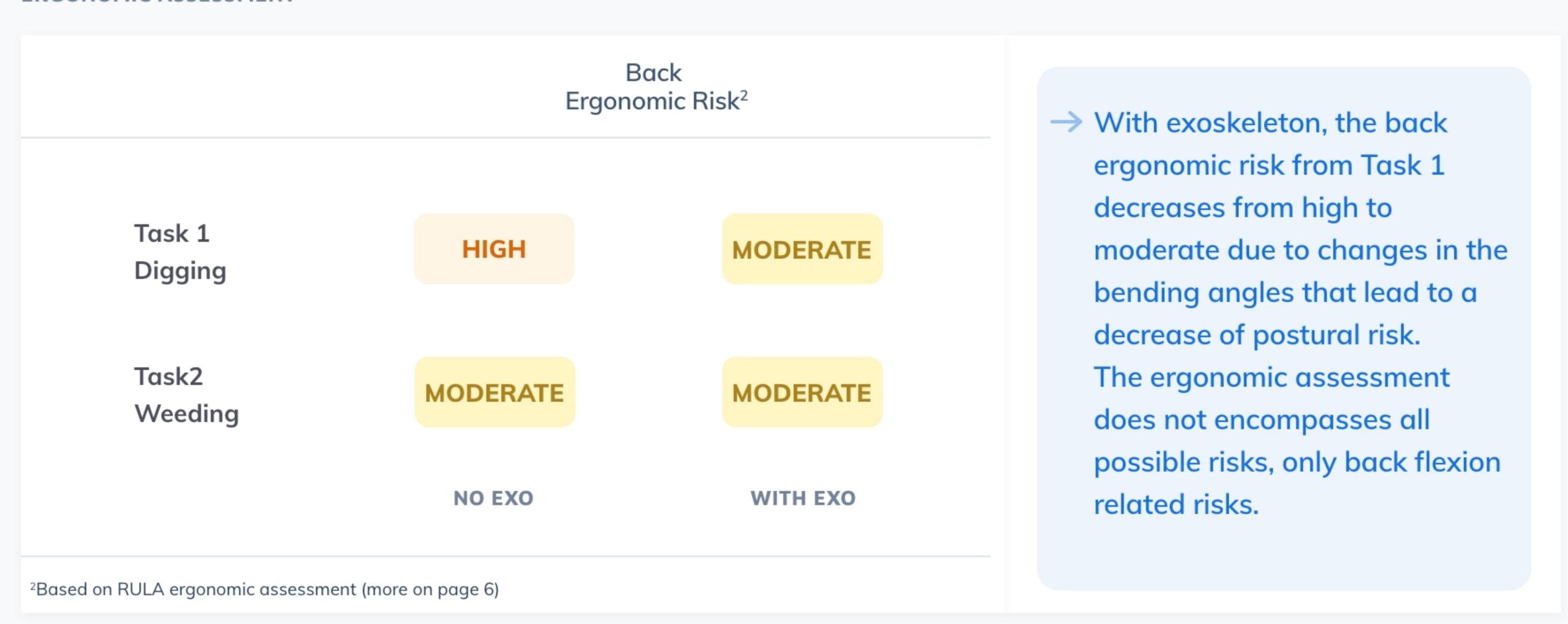
# Main ergonomic results



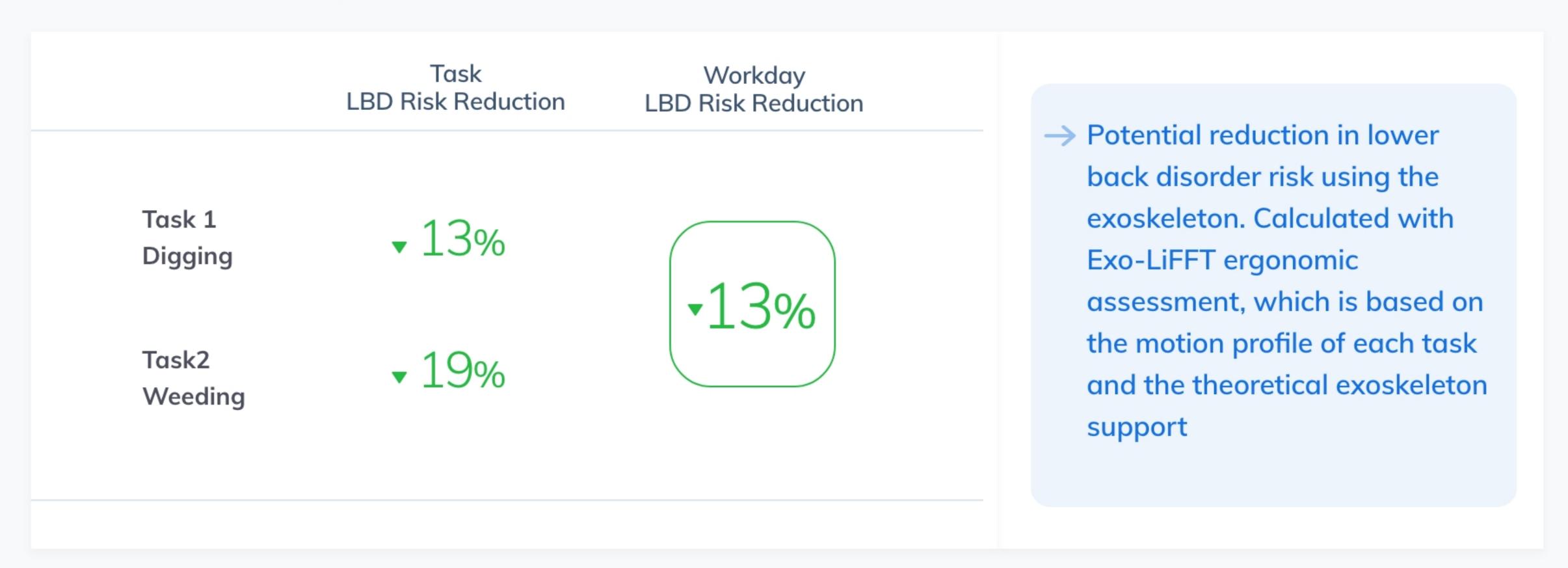
#### **TASK PROFILE**



#### **ERGONOMIC ASSESSMENT**



## LOWER BACK DISORDER (LBD) RISK REDUCTION



# Main physiological results



#### **WORKLOAD & EXERTION**



#### **PHYSIOLOGICAL ANALYSIS BY TASK**



#### **WORKLOAD EVOLUTION**



## **MAIN FINDINGS**

→ From a physiological perspective, the exoskeleton LiftSuit showed that it could be an effective way to reduce the physical load during the operations carried out during the study. Overall, the exoskeleton showed positive results in terms of Workload reduction (-17%) and increase in Recovery (+14%) across the different operations.



#### **CONSIDERATIONS**

# General limitations

## Study sample size

The results should be interpreted with caution because they are based on a small sample size, meaning that confounding factors could have had a large impact on the results.

# Partial task segmentation

The operations carried out were segmented by tasks, but either not all tasks were monitored with the exoskeleton or the data was not complete; so the final results could include resting periods or mix different tasks where the exoskeleton provided different levels of support.

# Lack of user feedback

When it comes to implementing exoskeletons, usability, comfort, and user-perceived support are very important factors. Unfortunately, the current study did not have access to such information for all tasks for all exoskeletons, so generalized comparisons may have confounding factors.

# Ergonomic risk assessment

## Assessment considerations

The ergonomic assessment does not encompasses all possible risks nor all body parts. This should be taken into consideration when interpreting and results should be considered as preliminary.

# Low back disorder (LBD) risk

LBD risk is calculated using Exo-LiFFT ergonomic assessment tool. Which is based on the motion profile of each task and the theoretical exoskeleton support.

Karl E. Zelik, Cameron A. Nurse, Mark C. Schall, Richard F. Sesek, Matthew C. Marino, Sean Gallagher, An ergonomic assessment tool for evaluating the effect of back exoskeletons on injury risk, Applied Ergonomics, Volume 99, 2022, 103619, ISSN 0003-6870

# Motion & force analytics

# Estimations for torque (forces)

Some variables such as the distance from the low back to the load are not measured directly, and thus, are based on estimations.

## **REFERENCE STANDARDS**



**ATSM** F3474 – 20 ; F3518 – 21



ISO

6385:2016; 10075-1:2017; 10075-2:1996; 10075-3:2004; 8996:2004; 11226:2000



#### RAPID UPPER LIMB ASSESSMENT (RULA)

Rating criterion	Score
No action required if posture is not maintained or repeated for long periods	1 - 2
Further investigation is needed and changes may be required	3 - 4
Further investigation and changes are required soon	5 - 6
Further investigation and changes are required immediately	+ 6
	No action required if posture is not maintained or repeated for long periods  Further investigation is needed and changes may be required  Further investigation and changes are required soon  Further investigation and changes are

RULA (or Rapid Upper Limb Assessment) is a task-level assessment tool used to evaluate biomechanical and postural load requirements of job tasks/demands on the upper extremities, neck, and trunk.

#### Sources

assistance and object weights.

Mild exo assist

(15Nm)

Gómez-Galán, M.; Callejón-Ferre, Á.-J.; Pérez-Alonso, J.; Díaz-Pérez, M.; Carrillo-Castrillo, J.-A. Musculoskeletal Risks: RULA Bibliometric Review. Int. J. Environ. Res. Public Health 2020, 17, 4354. https://doi.org/10.3390/ijerph17124354

Roman-Liu, D., 2014. Comparison of concepts in easy-to-use methods for MSD risk assessment. Applied ergonomics 45, 420e427.

Lynn McAtamney et al., "RULA: a survey method for the investigation of world-related upper limb Disorders," Applied Ergonomics, 1993

#### **EXO-LIFFT**

Exo-LiFFT is an ergonomic assessment tool that unifies the etiology of lower back disorders (LBD) and biomechanical function of exoskeletons. It can be used to assess or predict the effect of exoskeletons on LBD risk without EMG testing.

The table below shows examples of simple prediction results. Reductions in LBD Risk are shown for different exoskeleton

Light Objects (5 kg) Moderate Objects (12 kg) (19 kg)

Strong exo assist (35Nm) N/A 27% 20%

Moderate exo assist (25Nm) 22% 20%

12%

8%

# Source

Karl E. Zelik, Cameron A. Nurse, Mark C. Schall, Richard F. Sesek, Matthew C. Marino, Sean Gallagher, An ergonomic assessment tool for evaluating the effect of back exoskeletons on injury risk, Applied Ergonomics, Volume 99, 2022, 103619, ISSN 0003-6870

15%

