

Abstract #: 334

Presented by: Lynn Henderson, MS, Graduate Student

Carpal Tunnel Syndrome: An Occupational Health Risk for Dental Hygienists

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Keywords: carpal tunnel syndrome, dental hygiene, musculoskeletal disorders, occupational illness

Objective: The repetitious hand and wrist movements of dental hygienists' daily work activities place them at extremely high risk for CTS. Occupational health goals for CTS management in dental hygienists should be teaching and emphasizing prevention with ergonomics, early diagnosis of the disease, and high-quality treatment with an occupational focus.

Methods: A literature review was completed that included systematic reviews of studies on the prevalence of CTS, occupational factors, dental ergonomics, and clinical management of the disease.

Results: Dental Hygienists must take preventive ergonomic measures to protect their most valuable asset, their hands. Some occupational health measures for CTS prevention include: identifying existing medical predispositions, causes, and exacerbating activities. Ergonomic interventions include using: lighter weight, larger diameter, padded instruments; interchanging tools during repetitious activities; ergonomic work station design; optimal seat and mirror positioning; frequent hand rest breaks; and adequate lighting. Some non-operative treatment recommendations include: minimizing forceful and repetitious activities; 6 weeks of wearing a neutral positioned splint; not exceeding 4 steroid injections; and avoiding the use of opioids, laser therapy, muscle relaxants, opioids, diuretics, and non-steroidal anti-inflammatory drugs (NSAIDS).

Conclusion: CTS is an extremely complex illness to manage, especially in a field like dental hygiene where hand activities are the dominate practice. Occupational health is essential in keeping this population healthy, keeping them working, and keeping them in their profession.

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Presented by: Derek Hutchinson, BA, Graduate Student

Development of a General Organizational Climate Scale

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Keywords: Scale Development, Organizational Climate, Workplace Wellbeing

Objective: A number of studies have shown a relationship between organizational climate perceptions (e.g., safety and violence prevention) and injuries, accidents, and acts of violence in the workplace. To date, the literature has treated safety climate and violence prevention climate as separate constructs that predict different workplace outcomes. Safety climate is concerned with exposure to workplace accidents and injuries, while violence prevention climate is concerned with workplace physical and/or verbal aggression. Emerging research indicates that injury and violence exposure are related. The purpose of this study was to create a generalized organizational climate scale that measures organizational safety and violence prevention climate without focusing on a particular facet.

Methods: The sample consists of 114 employed participants who were recruited online through an electronic participant pool at a large public university in the southeastern U.S. Students completed our measure of general workplace climate and measures of safety compliance, reported accidents, job satisfaction, experienced incivility, aggression, and interpersonal conflict.

Results: Our general climate scale was significantly related to one's compliance to safety procedures, job satisfaction, experienced incivility, experienced aggression, and experienced interpersonal conflict.

Conclusion: Overall, the results of this study suggest that a general organizational climate scale is suitable to measure both an organization's promotion of safety and prevention of violence in the workplace. The results of this study support the use of a single unified scale to measure both facets of workplace climate when differential predictions between constructs are not being investigated.

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