

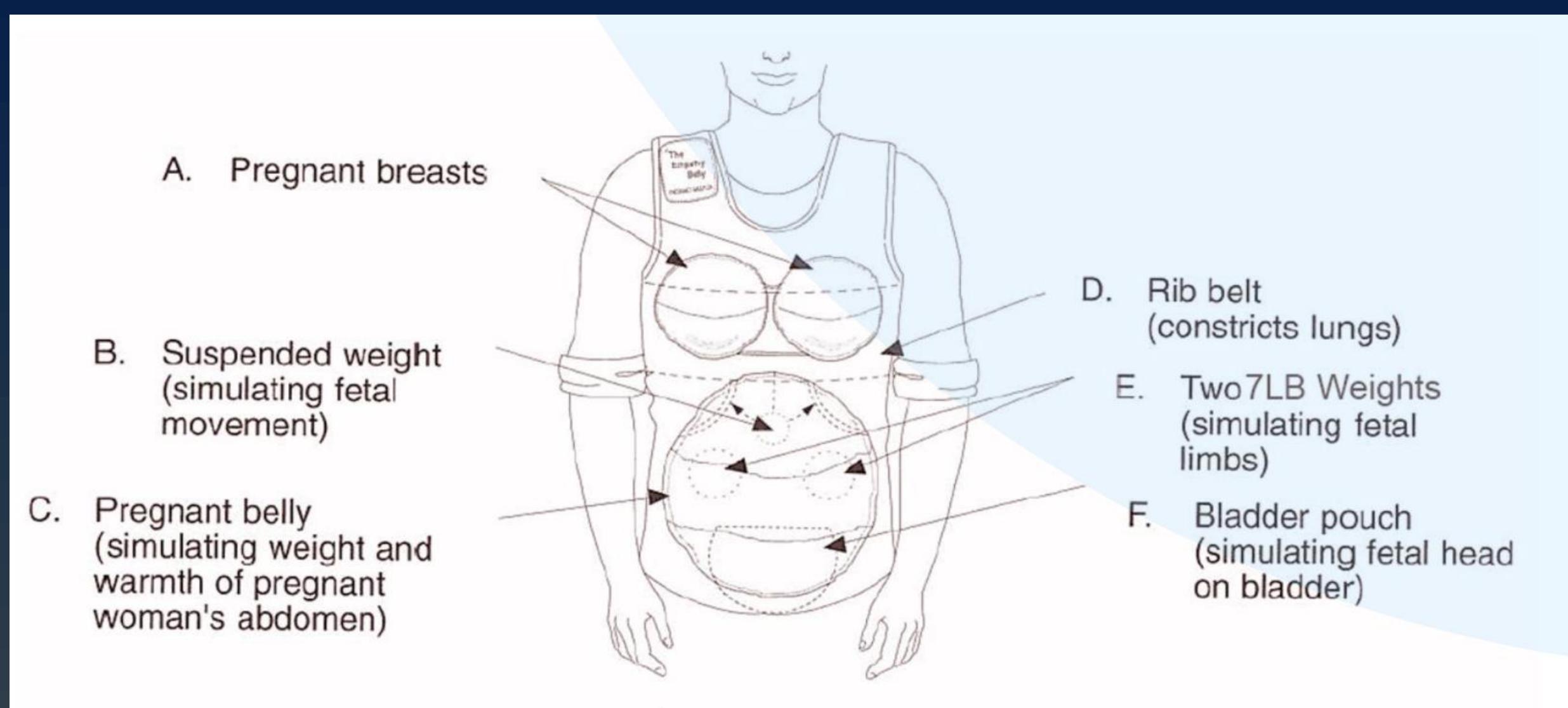


Investigating Ergonomics for Pregnant Clinicians During Flexible Laryngoscopy

Alyssa M. Civantos MD MS,¹ Nina Patel MS MPhil,¹ Alexandra D. D’Oto MD,¹ Camryn R. Marshall BS,¹ Rohith M. Bhethanabotla MS,¹ Clark A. Rosen MD,¹ VyVy N. Young MD,¹ Andrea M. Park MD²

¹UCSF Voice & Swallowing Center, Department of Otolaryngology-Head and Neck Surgery, University of California San Francisco, San Francisco, CA

²Division of Facial Plastics & Reconstructive Surgery, Department of Otolaryngology-Head and Neck Surgery, University of California San Francisco, San Francisco, CA



Introduction

- Pregnancy introduces physiological and biomechanical changes that may lead to discomfort, fatigue, and increased risk of injury.
- Limited literature exists on the ergonomics of flexible laryngoscopy (FL) in pregnancy.

Materials and Methods

- Prospective cohort study of Otolaryngology – Head and Neck Surgery (OHNS) trainees.
- Performed awake FL simulation task twice, one of which while wearing a third trimester pregnancy simulation suit (Empathy Belly).

RULA Measurements

Simulation	RULA Right	RULA Left	Combined RULA
With	3.90 (3-6)	3.75 (3-6)	3.83 (3-6)
Without	3.65 (3-5)	3.55 (3-4)	3.60 (3-4.5)

REBA Measurements

Simulation	REBA Right	REBA Left	Combined REBA
With	4.30 (3-6)	5.0 (3.5-6)	4.65 (3.75-6)
Without	4.25 (3-6)	4.65 (3-6.5)	4.45 (3.25-6.25)

RULA Scoring	
Score	Level of MSD Risk
1-2	negligible risk, no action required
3-4	low risk, change may be needed
5-6	medium risk, further investigation, change soon
6+	very high risk, implement change now

REBA Scoring	
Score	Level of MSD Risk
1	negligible risk, no action required
2-3	low risk, change may be needed
4-7	medium risk, further investigation, change soon
8-10	high risk, investigate and implement change
11+	very high risk, implement change



Objective

- To assess the ergonomics of flexible laryngoscopy during pregnancy.

Results

- 10 OHNS trainees participated.
 - Mean age = 31.5 (range 28-37)
 - 60% male
- Average Rapid Upper Limb Assessment (RULA): 3.83 with the simulation and 3.60 without
- Average Rapid Entire Body Assessment (REBA): 4.65 with the simulation and 4.45 without
- All participants indicated that the pregnancy simulation altered their comfort with the task, quantified as 5.9 on scale of 0-10.
- Inter-rater reliabilities = 1.0, intra-rater reliabilities = 1.0

Conclusions

- Pregnant clinicians face ergonomic challenges in their day-to-day practices.
- Efforts are needed to consider inclusive workplace designs that support pregnant healthcare professionals while maintaining clinical performance and patient safety.

References

- Kutler RB, Rameau A. Female Surgical Ergonomics in Otolaryngology. *Oper Tech Otolaryngol Head Neck Surg*. 2025;36(2):132-138. doi:10.1016/j.otot.2025.05.008
- Wang CN, Shah M, Cerier E, et al. The impact of procedural activities on musculoskeletal pain experienced by pregnant surgeons. *Am J Surg*. 2024;227:90-95. doi:10.1016/j.amjsurg.2023.09.039
- Middleworth M. A Step-by-Step Guide to the RULA Assessment Tool. ErgoPlus. Accessed October 2, 2025. <https://ergoplus.com/rula-assessment-tool-guide/>
- Middleworth M. A Step-by-Step Guide to the REBA Assessment Tool. ErgoPlus. Accessed October 2, 2025. <https://ergoplus.com/reba-assessment-tool-guide/>