

COLD STRESS HAZARD ASSESSMENT CHECKLIST

Risk Factor	Yes	No	Control Measures Taken to Control Risk	
TEMPERATURE				
Is work performed outdoors?				
Is work directly affected by the temperature of outdoor environment?				
Does the workplace temperature generally fall below 0°C (32°F)?				
Does radiation from the sun make the air feel warmer?				
HUMIDITY				
Is the workplace damp?				
Is the air in the workplace humid?				
Does moisture or humidity make the air feel colder?				
Does workers' skin get wet?				
WIND				
Are there winds or breezes in the workplace?				

What is the approximate speed of sustained winds or breezes? • 5 mph • 10 mph • 15 mph • 20 mph or higher			
What is the approximate speed of wind gusts? • 5 mph • 10 mph • 15 mph • 20 mph or higher			
OTHER FACTORS			
Are workers in contact with cold or wet surfaces while performing the work?			
Are there other factors affecting how cold air in the workplace actually feels to exposed skin?			
If so, describe:			
WORKLOAD			
Is the workload heavy, such as carrying of heavy objects long distances?			
Do workers perform intensive physical work at a fast pace?			
Are there any physical characteristics of workers that affect their tolerance to cold conditions (age, diabetes, etc.)?			

If the answer to the above is yes, please describe:			
CLOTHING			
Do workers wear at least 3 layers of clothing, including: Inner layer for insulation Middle layer for extra insulation Outer layer to protect against wind or moisture			
Do workers wear appropriate protective clothing, including: • Hat or hood • Mask • Insulated, water-proof gloves • If necessary, insulated boots or footwear			
ACCLIMATIZATION & COUNTERMEASURES			
Do workers lack acclimatization to the cold work environment?			
Are heaters available?			
Are shelters or warming stations available?			
EDUCATION & TRAINING			
Do workers know the signs and symptoms of hypothermia?			
Do workers warm-up and stretch prior to tasking?			

Do workers know that hydration with warm, sweetened liquids (not coffee and no alcohol), is important in cold conditions?		
Do workers understand how to communicate symptoms, challenges and hazards?		
Summary of risk assessment results:		
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Recommended control measures, including details and timing of implementation:		
Name of person conducting hazard assessment:		
Signature:	Date:	