

Standards of Practice

Respiratory Protection

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I. PURPOSE

The purpose of the Respiratory Protection Program is to verify that all employees have adequate respiratory protection in the workplaces on the Kansas State University campus where engineering controls or work practices are inadequate or not feasible to reduce the exposure to airborne contaminants.

In all cases, engineering controls must be considered and implemented to the extent that they are feasible. Definitions are found in [Appendix C](#) of this document.

II. SCOPE

This Program shall cover all Kansas State University employees who wear respiratory protection during work activities and those who anticipate wearing respiratory equipment during an emergency incident. This Respiratory Protection Program specifically excludes those employees whose primary job function is to abate or work with asbestos.

III. CONSEQUENCES OF DEVIATION

The Respiratory Protection procedure serves as an essential element in identifying and managing respirable material risk to faculty, staff and students. Ignoring this procedure could result in serious injuries or fatalities.

IV. RESPONSIBILITIES

Kansas State University shall provide respirators, training, fit testing, and medical evaluations at no cost to the employee.

Program Administrator

The Designated Program Administrator shall be the EH&S Coordinator or his/her designated representative. EH&S shall:

1. Have the authority to make decisions and implement changes to the Program as necessary.
2. Administer/oversee the Program.
3. EH&S shall conduct the required evaluations of Program effectiveness.
4. Verify that all respirator users are properly trained and fit tested.
5. Verify that all employees who wear a negative or positive pressure tight-fitting facepiece shall be fit tested before use in the workplace.
6. Provide a copy of the Respiratory Protection Program to Alliance Health Resources.
7. Assist departments in identifying, evaluating, and surveying work areas that require respiratory

protection.

8. Maintain required records.

Supervisory Personnel

This section refers to those supervisory personnel who have at least one work area that requires the use of respiratory equipment. Supervisory personnel would include such people as foremen and superintendents. Supervisors shall:

1. Be trained and familiarized with this Program.
2. Verify that workers are identified, medically evaluated, trained, fit tested, and equipped for respiratory protection usage.
3. Check to see that respiratory equipment is available.
4. Enforce the proper use and maintenance of respiratory equipment as necessary.
5. Monitor work areas to identify potential respiratory hazards.
6. Coordinate and consult with the Program Administrator on the administration of this Program.

Employees

1. The employee shall be responsible for the routine care and maintenance of the respirator. The employee shall inform his/her supervisor for remediation of any problems with the respirator.
2. The employee shall inform his/her supervisor of any respiratory hazards or any aspects of the Program that the employee feels is not being adequately addressed.
3. The employee shall maintain a facial surface consistent with a proper fit of the respiratory device; i.e., no beards and clean-shaven.

Health Care Professional

Alliance Health Resources are designated as the Physician or other Licensed Health Care Professional (PLHCP) as defined in 29 CFR 1910.134(b) for the University, they shall:

1. Make the determination whether an employee is medically fit to wear respiratory protection equipment.
2. Determine what tests, evaluations, etc. are necessary to make the determination whether an employee is medically fit to wear respiratory protection equipment.
3. Maintain records as prescribed in KSU's Medical Records Retention Policy.

V. ENGINEERING CONTROLS

Engineering controls shall be used when feasible. Examples of engineering controls are:

1. Changes in the work process that reduce or eliminate worker exposure;
2. Substitute less hazardous chemicals or products for more hazardous materials;
3. Enclose or isolate the work process from the affected workers; and/or
4. Use ventilation to dilute or remove the contaminant.

VI. TYPES OF RESPIRATORY PROTECTION

This Program covers the use of both air-filtered and air-supplied respirators.

Selection of Respirators - General Requirements

1. KSU shall use NIOSH-certified respiratory equipment. A Certified Equipment List can be found on the [NIOSH website](#).
2. KSU shall use respirators and cartridges that are:
 - a. Jointly approved by the Mine Safety and Health Administration (MSHA) and NIOSH as specified in 30 CFR 11, and manufactured after any date; or
 - b. Approved by IOSH as specified in 42 CFR 84. Only those cartridges manufactured after July 10, 1998, shall be used.
3. KSU shall select and provide an appropriate respirator for the hazard. KSU shall use the following as guidance in the selection: 29 CFR Parts 1910.134, 1910.135, 1910.1001, 1926.1101, 1910.1017, 1910.1045, and 1910.1051; the ANSI *Standard for Respiratory Protection* Z88.2-1992; and any applicable federal and/or state regulations.
4. KSU shall identify and evaluate respirator hazards. Where KSU cannot identify or reasonably estimate the employee exposure, KSU shall consider the atmosphere to be IDLH. Criteria for this shall be based on the following:
 - a. The activity or process the employee will be engaged in,
 - b. The type of respiratory hazard. This would include the physical, chemical, and physiological properties of the respiratory hazard or air contaminant;
 - c. The concentration of the air-borne contaminate that would be encountered in the work area;
 - d. The time spent wearing respiratory equipment;
 - e. The published TLV, PEL, EDLH, C (ceiling), STEL or any other available exposure limit for the particular contaminant;
 - f. The existence of a specific standard for a particular process or chemical that may require specific respiratory protection equipment;
 - g. The actual and potential oxygen content in the work area's ambient air, i.e., the determination of an oxygen-deficient atmosphere;
 - h. The capabilities and limitations of respiratory protection equipment used;
 - i. The ability of the cartridges to protect the wearer from the air-borne contaminants; and
 - j. The respirator-assigned protection factors.
5. KSU shall select respirators from a sufficient number of respirator models and sizes so that the respirator is acceptable to and correctly fits the user.

Selection of Respirators for IDLH Atmospheres

If KSU determines that the atmosphere is an IDLH atmosphere, then KSU shall provide one of the following respirators for the employee:

1. Pressure demand SCBA minimum 30 min; or

2. SAR with auxiliary self-contained air supply; or
3. Respirator provided only for escape from IDLH atmosphere shall be NIOSH-certified for escape from that atmosphere.

Oxygen deficient atmospheres shall be considered IDLH, unless demonstrated that the oxygen concentration is above 19.5% by volume. (Elevation for Manhattan, Kansas is 1,020 ft. Altitude guidelines are found in 29CFR 1910.134, Table II.)

Selection of Respirators for Non-IDLH Atmospheres

1. KSU shall provide respirators adequate to protect the health of the user and verify compliance.
2. KSU shall verify that the respirator selected is appropriate for the chemical state and physical form of the contaminant.
3. For protection against gases and vapors, KSU shall provide:
 - a. Atmosphere-supplying respirator or
 - b. Air-purifying respirator, providing that:
 - Respirator equipped with an End-of-Service-Life-Indicator (ESLI) (NIOSH-certified) for the contaminate; or
 - Implement a change schedule for canisters and cartridges before ESLI. Describe the information and data relied upon and the basis for this schedule and the basis for reliance on the data.
4. For protection against particulates, KSU shall provide:
 - a. Atmosphere-supplying respirator; or
 - b. Air-purifying respirator equipped with a NIOSH-certified HEPA filter; or
 - c. For contaminants consisting primarily of particles with mass median aerodynamic diameters (MMAD) of at least 2 micrometers, an air-purifying respirator equipped with any NIOSH-certified particulates filter shall be provided. To determine the class of particulate respirator and cartridge needed, the following table shall be used:
 - d. Filter Classifications under NIOSH 42 CFR 84. (Note that additional restrictions may be needed when using a particulate respirator.)

Minimum Efficiency	No Oil Aerosol ExpKSure (not oil-proof)	Some Oil Aerosol ExpKSure (oil-resistant)	Total Oil Aerosol ExpKSure (oil-proof)
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95%	N95	R95	P95
99%	N97	R97	P97
99.97%	N100	R100	P100

- e. The voluntary use of particulate masks in an area where respiratory protection is deemed to not be needed shall be limited to disposable N95 masks only. These masks are commonly referred to as "paper masks" or "dust masks." Voluntary respirator use requires employee completion of (Appendix D) which shall be kept on file with the departmental supervisor. More information is available at https://www.osha.gov/video/respiratory_protection/voluntaryuse.html.

VII. MEDICAL EVALUATIONS OF EMPLOYEES

KSU shall provide a medical evaluation to determine the employee's ability to use a respirator before the employee is fit tested or required to use the respirator in the workplace. KSU will discontinue an employee's medical evaluations when the employee is no longer required to use a respirator.

Medical Evaluation Procedures

1. KSU has designated Alliance Health Resources as the PLHCP.
2. KSU EHS shall use the [OSHA Respirator Medical Evaluation Questionnaire](#) (Appendix E of this document) to gather pertinent medical information.

Follow-up Medical Examination

3. KSU shall provide an opportunity for the employee to discuss the questionnaire and/or examination/medical results with the PLHCP.
4. KSU shall provide a follow-up examination to any employee who gives a positive response to any question among questions 1 through 8 in Section 2, Part A of the OSHA Respirator Medical Evaluation Questionnaire, or whose initial medical exam demonstrates the need for a follow-up medical examination.
5. The follow-up medical examination shall include any medical tests, consultation, or diagnostic procedures that the PLHCP deems necessary to make a final determination.

Administration of the Medical Questionnaire and Examinations

The OSHA Respirator Medical Evaluation Questionnaire shall be administered confidentially during the employee's normal working hours or at a time and place convenient to the employee. If the employee needs assistance in filling out or understanding the questionnaire, Alliance Health Resources will provide assistance, so as to maintain confidentiality.

Supplemental Information for the PLHCP

1. KSU shall provide the PLHCP the following information for each employee. This information only needs to be supplied once, as long as there have been no changes. If there are changes, KSU shall provide the PLHCP with those changes.
 - a. The type and weight of the respirator
 - b. The duration and frequency of respirator use, including use for rescue and escape
 - c. The expected physical work effort

- d. Additional protective clothing and equipment to be worn
 - e. Temperature and humidity extremes that may be encountered
- 2. KSU shall provide the PLHCP a copy of this Program.
- 3. The PLHCP shall provide a written recommendation regarding the employee's ability to use a respirator. In this recommendation, the PLHCP shall provide the following information:
 - a. Any limitations on respirator use related to the medical condition of the employee, or related to the workplace conditions in which the respirator will be used, including whether or not the employee is medically able to use the respirator.
 - b. The need, if any, for follow-up medical evaluations.
 - c. A statement that the LHCP has provided the employee with a copy of the PLHCP's written recommendation.
- 4. If the respirator is a negative-pressure respirator and the PLHCP finds a medical condition that may place the employee's health at increased risk if the respirator is used, KSU shall provide a PAPR if the PLHCP's medical evaluation finds that the employee can use such a respirator. If a subsequent medical evaluation finds that the employee is medically able to use a negative-pressure respirator, then KSU is no longer required to provide a PAPR.

Additional Medical Evaluations

At a minimum, KSU shall provide additional medical evaluations that comply with the requirements of this section, if:

- 1. An employee reports medical signs or symptoms that are related to his ability to use a respirator;
- 2. The PLHCP, a supervisor, the Program Administrator determines that an employee needs to be reevaluated; or
- 3. A change occurs in the workplace conditions that may result in a substantial increase in the physiological burden placed on an employee. Examples are physical work effort, protective clothing, and temperature.

VIII. FIT TESTING PROCEDURES

Before an employee wears a negative or positive pressure tight-fitting facepiece, the employee must be fit tested with the same make, model, style and size of respirator to be used.

- 1. The employee must pass an appropriate QLFT or QNFT. (See [Appendix B](#) for procedures to perform a QLFT or QNFT.)

The employee shall be fit tested:

- a. Prior to initial use of a respirator, and
 - b. Whenever a different respirator facepiece (size, style, model or make) is used, and
 - c. On an annual basis.
- 2. The employee shall be given additional fit testing whenever the employee reports or the PLHCP, supervisors, or Program Administrator makes visual observations of, changes in the employee's physical condition that could affect respirator fit. Such conditions are, but not

limited to:

- a. Facial scarring
 - b. Dental changes
 - c. Cosmetic surgery
 - d. Obvious change in body weight
3. If after passing a QLFT or QNFT the employee subsequently notifies the supervisor, Program Administrator, or the PLHCP that the fit of the respirator is unacceptable, the employee shall be given a reasonable opportunity to select a different respirator facepiece and be retested.

QLFT may be only used to fit test negative pressure air-purifying respirators that must achieve a fit factor of 100 or less.

The acceptable pass level for QNFT for tight-fitting facepieces:

1. For full facepieces, the QNFT pass level shall be equal to or greater than 500.
2. For half facepieces, the QNFT pass level shall be equal to or greater than 100.

Fit testing of tight-fitting atmosphere-supplying respirators and tight-fitting powered air-purifying respirators shall be accomplished by performing QLFT or QNFT in the negative pressure mode regardless of which pressure-mode the respirator is used in work practices.

IX. USE OF RESPIRATORS

1. Facepiece Seal Protection

- A. General use limitations. KSU shall **not** permit employees to wear tight-fitting respirators under the following conditions:
1. Atmospheric oxygen content is less than 19.5% by volume.
 2. An IDLH condition.
 3. Air contaminant(s) is extremely toxic in minute quantities.
 4. Air contaminant(s) cannot be sufficiently detected by odor or the odor threshold is at or above the listed TLV or PEL.
 5. Air contaminant(s) is highly irritating to the eyes, unless the worker is using a full-face respirator mask or equivalent eye protection.
 6. The selected cartridge is not rated for the air contaminate(s).
 7. A fast cartridge breakthrough time for that particular air contaminant(s).
 8. Concentration(s) of the air contaminant(s) exceed the maximum filter concentration for that air-purifying filter as specified by the manufacturer.
- B. Workers with facial hair that may interfere with the facepiece seal or valve function on fitting respirators shall not use a tight-fitting respirator. This would include beards.
- C. Other personal protective equipment such as head coverings, eye goggles, etc., shall be worn outside of the respirator. They shall be worn in a manner that does not interfere with the seal of the respirator. "Beard socks" shall not be worn between the respirator and the employee's face.

- D. KSU will provide respirator spectacle kits for those employees who must have corrective eyewear. The kits shall be provided at no cost to the employee.
- 2. The respirator shall not be altered in any manner.
- 3. All cartridges, replacement parts, etc., shall be from the same manufacturer as the respirator, e.g., use only 3M™ cartridges and parts for a 3M™ respirator.
- 4. When wearing a respirator, an employee shall be permitted to leave the hazardous area for any respirator-related reason. Some reasons, but not all, are listed below:
 - A. The respirator fails to provide adequate protection.
 - B. The respirator malfunctions.
 - C. The respirator wearer detects air leakage around the face seal.
 - D. The respirator wearer detects an odor or tastes a chemical.
 - E. The respirator wearer has increased breathing resistance.
 - F. The respirator wearer experiences any illnesses or discomforts such as dizziness, nausea, weakness, breathing difficulties, sneezing, fever, chills, distorted thought processes, etc.
 - G. The respirator wearer experiences extreme discomfort from wearing the respirator.
 - H. The respirator wearer needs to wash his/her face and facepiece to minimize skin irritation.
 - I. Components (including air tanks) or purifying devices need change-out.
 - J. The respirator wearer takes his/her periodic break.

For all tight-fitting respirators, the employee must perform a user seal check each time they put on the respirator using the procedures listed in [Appendix A](#) or procedures recommended by the respirator manufacturer.

- 5. Procedures for IDLH atmospheres - including emergency rescues
 - A. Only employees who have had specific training for IDLH atmospheres may enter an IDLH area.
 - B. Employees shall wear either a positive-pressure SCBA or an airline supplied-air respirator with an escape SCBA.
 - C. Entry teams shall consist of a minimum of two (2) people.
 - D. A minimum of two (2) additional, trained and equipped employees (standby team) shall be posted outside the IDLH atmosphere to provide **emergency rescue**. Communication shall be maintained between the entry team and the standby team. Equipment shall include positive-pressure SCBAs or an airline supplied-air respirator with an escape SCBA and appropriate retrieval equipment. Before the Standby Team enters the IDLH area for rescue, they shall first notify the Environmental Health and Safety Department.

Maintenance and Care of Respirators

Cleaning and Disinfecting

- 1. KSU shall provide each respirator user with a respirator that is clean, sanitary, and in good

working order.

2. KSU shall provide the materials needed to clean and disinfect the respirators.
3. Each respirator user shall clean and disinfect his/her respirator according to the manufacturer's recommendations. This includes:
 - A. Disassembly, cleaning and disinfecting, rinsing, drying and reassembly.
 - B. Frequency of cleaning is recommended at least after each use and according to conditions listed below:
 1. If the respiratory equipment is used exclusively by an individual employee, then it shall be cleaned and disinfected as often as necessary to maintain cleanliness.
 2. If the respiratory equipment is used by more than one employee, then it shall be cleaned and disinfected before each use.
 3. If the respiratory equipment is used for emergencies, training or testing, then the equipment shall be cleaned and disinfected after each use.

Storage

1. The respiratory equipment shall be stored in a manner that protects the equipment from damage, contamination, dust, sunlight, extreme temperatures, excessive moisture, and damaging chemicals.
2. The respiratory equipment shall be stored in a manner that prevents the deformation of the facepiece and the exhalation valve.
3. In addition, emergency-use respiratory equipment shall be stored in the following manner
 - A. The respiratory equipment shall be stored in the work area where the equipment is readily accessible.
 - B. The respiratory equipment shall be stored in compartments or covers that are clearly labeled or marked as containing respiratory equipment.
 - C. The respiratory equipment is stored according to any applicable manufacturer's instructions.

Inspection of the Respiratory Equipment

KSU shall verify that the respiratory equipment is inspected according to the following schedule.

1. The respiratory equipment shall be visually inspected for damaged or missing parts before each use and during cleaning.
2. Emergency-use respiratory equipment shall be inspected on a monthly basis and in accordance with the manufacturer's recommendations. The equipment shall also be checked for proper function before and after each use.
3. Emergency escape-only respiratory equipment shall be inspected before being carried into the workplace for use.
4. Self-Contained Breathing Apparatus (SCBA) shall be inspected monthly.
5. The respiratory equipment inspections shall consist of the following:
 - A. A check of the condition of the parts such as valves, cartridges, canisters or filters, head

straps, facepiece, connecting tube, and gaskets.

- B. A check for respirator function.
- C. A check for signs of deterioration or lack of pliability.
- D. For SCBAs, the air or oxygen cylinders shall have and maintain a minimum of 90% of the recommended pressure level. A check to determine if the regulator and warning devices are also functioning properly shall also be performed on a regular schedule.

Replacement and Repair

- 1. The employee or his/her supervisor shall replace defective or missing valve flaps, gaskets and head straps on air-purifying respirators. This is considered to be routine maintenance and not repair.
- 2. Repairs shall be made by qualified technicians.
- 3. The employee shall immediately inform his/her supervisor of any repairs to be made to the defective respirator equipment and take the equipment out of service.
- 4. The supervisor shall require that the defective respiratory equipment is either repaired or replaced. He/she shall also verify that the defective equipment is not used in the interim.

Cartridge Life (End-of-Service Life) and Change-Out Schedule

- 1. If available, the respirator wearer shall use the End-of-Service-Life Indicator (ESLI) to determine when to change out air-purifying elements. If no ESLI is available for the selected air-purifying elements, then EHS shall be consulted to determine a change-out schedule to verify that the air-purifying elements are changed out before the end of their useful service life.
- 2. The following factors may be utilized to estimate ESLI:
 - A. The relative humidity of the work area. Humidity above 85% can reduce an air-purifying element's estimated service life by approximately 50%.
 - B. The type of air contaminant.
 - C. The concentration of the air contaminant. By reducing the amount of contaminant by a factor of ten (10), the service life of an air-purifying element can be increased by a factor of five (5).
 - D. The breathing demand of the respirator wearer. The harder and faster one breathes due to work stresses, the shorter the air-purifying element's service life.
 - E. The presence of multiple contaminants.
 - F. How variable the contaminant's concentration(s) will be.
 - G. The breakthrough time(s) of the contaminant(s).
- 3. If the respirator wearer experiences any odor, taste, or irritation, or experiences excessive breathing resistance, the wearer shall:
 - A. Immediately leave the contaminated area,
 - B. Change-out the air-purifying element(s) regardless of the ESLI change-out schedule,
 - C. Adjust the change-out schedule to shorter times, and

- D. Contact EHS for possible changes to the existing change-out schedule.
4. The respirator wearer shall change-out and discard any air-purifying elements that have reached their ESLI, failed during use, become damaged or wet, or become difficult to breathe through.
 5. If conditions are causing the air-purifying elements to fail before their ESLI, then EHS shall be contacted to determine if the job function requires the use of a supplied-air respirator.
 6. For those cartridges that do not have an ESLI, a computer program such as OSHA's Advisor Genius can be used to determine a change-out schedule. The web site for the Advisor Genius is http://www.osha.gov/SLTC/etools/respiratory/advisor_genius_wood/advisor_genius.html

X. BREATHING AIR QUALITY AND USE

Only compressed breathing air that meets the specifications below shall be used for air-supplying respirators.

1. Oxygen in concentrations greater than 23.5% by volume shall not be used in compressed air equipment. Oxygen in concentrations greater than 23.5% shall be used in oxygen equipment only.
2. Oxygen content in compressed breathing air shall be between 19.5% and 23.5% by volume.
3. Condensed hydrocarbon content shall be 5 mg/m³ or less
4. Carbon monoxide content shall be 10 ppm or less.
5. Carbon dioxide content shall be 1000 ppm or less.
6. There shall be a lack of noticeable odor in the compressed air.

Cylinders of purchased compressed breathing air

7. Cylinders shall be tested and maintained according to 49 CFR 173-178, "Shipping Container Specification Regulations." (US Department of Transportation)
8. The supplier of the cylinder shall provide a certificate indicating that the breathing air has been tested and meets the criteria for Class D breathing air.
9. The compressed breathing air shall have a moisture level that does not exceed the dew point of -50°F (-45.6°C).

Air Compressors used for breathing air

10. For compressors that are not oil-lubed, the carbon monoxide level shall be 10 ppm or lower.
11. Oil-lubed compressors shall have high-temperature alarms or carbon monoxide alarms.
12. Air compressors shall be located away from any source of air contamination such as the air from the hazardous work area, combustion exhaust from the compressor or vehicles, or plant process exhausts.
13. The moisture content shall have a dew point of 10°F (-5.56°C) or below.
 - Breathing air couplings shall be different from non-breathing air couplings.
 - Carbon monoxide levels shall be monitored. An in-line carbon monoxide filter shall be used that meets the manufacturer's recommendations.

- All sorbents and filters shall be labeled with a tag stating the last change-out date.
- All breathing air containers shall be labeled according to 42 CFR 84.

XI. IDENTIFICATION OF FILTERS, CARTRIDGES AND CANISTERS

1. All filters, cartridges and canisters used shall be NIOSH-approved.
2. All labels on the filters, cartridges and canisters shall be labeled and color-coded with the NIOSH approval label.
3. During respirator use, the labels shall not be defaced, obscured or removed. The information on them shall remain legible. Any marking on the filters, cartridges or canisters by the user is acceptable if the marking does not compromise the integrity of the filter, cartridge or canister and it does not obscure the information on the label.

XII. TRAINING AND INFORMATION

1. KSU shall verify that the employee can demonstrate knowledge in the following areas:
 - A. Why respiratory protection is necessary
 - B. The limitations and capabilities of respiratory equipment
 - C. The use of respiratory equipment in an emergency
 - D. How to inspect, put on and remove a respirator, and how to perform user checkseals
 - E. Procedures for maintenance and storage of respiratory equipment
 - F. How to recognize medical signs and symptoms
 - G. General requirements of the Respiratory Protection Program.
2. The training shall be understandable to the employee.
3. The employee shall be trained before respiratory equipment usage.
4. Employees shall be retrained any time...
 - A. There are changes in the workplace environment where respiratory protection is used; or
 - B. There are changes in the procedures or policies of respiratory equipment usage; or
 - C. Whenever the employee demonstrates inadequacies in knowledge; or
 - D. Any other situation that might warrant retraining.

XIII. PROGRAM EVALUATION

The Program Administrator shall evaluate the Respiratory Protection Program for the workplace. This Evaluation is dependent upon various workplace practices.

1. At a minimum, he/she shall assess:
 - A. The proper respirator fit on the employee.
 - B. Whether the respirator use is interfering with effective work performance.
 - C. Whether appropriate respiratory protection has been selected.
 - D. Whether the respirator is used properly.

- E. Whether the respiratory equipment is used properly.
- 2. The Program Administrator shall talk with the workers about their respiratory equipment usage and its effect on them:
 - A. Interference with hearing or vision
 - B. Fatigue
 - C. Breathing difficulties
 - D. Interference with movement or job performance
 - E. Comfort
 - F. Confidence in using the respirator correctly
 - G. Confidence that respiratory equipment is performing adequately
- 3. The Program Administrator shall have any problems corrected.

XIV. RECORDKEEPING

- 1. The Program Administrator shall maintain a minimum of the following documents:
 - A. A written record from Alliance Health Resources or local medical provider that certifies that the employee is medically fit to wear a respirator and any limitations.
 - B. A written record of the last Respiratory Fit Test administered to the employee. At a minimum, the record shall contain:
 - i. Name of the employee tested
 - ii. Type of fit test used
 - iii. Make, model and size of the respirator tested
 - iv. Date of the respiratory fit test
 - v. Test results
 - C. A current, written copy of the Respiratory Protection Program.
- 2. Alliance Health Resources, as the PLHCP, shall maintain all written medical records of the employees who wear respiratory equipment.
- 3. Access to Records:
 - A. Only the affected employee and the PLHCP shall have access to the affected employee's medical records.
 - B. The Program Administrator shall made available for review and copying the written records of an affected employee.
 - C. An employee is restricted to his/her records only.

XV. VOLUNTARY USAGE (WHERE RESPIRATOR USE IS NOT REQUIRED)

This section is for those employees who voluntarily use Dust Masks (Paper Masks) when respiratory protection is not required. The employee shall either verbally or in writing be given the information contained in Appendix D of 29 CFR 1910(134).

Appendix A	Appendix B	Appendix C	Appendix D	Appendix E
User Seal Check Instructions (Fit Check)	Fit Test Procedures for Tight-Fitting Respirator Masks	Definition of Terms	OSHA Respirator Voluntary Use	OSHA Medical Surveillance Questionnaire

Revision Log			
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08.14.15	0	EH&S Director	Date of Original Document Issuance
01.30.18	1	OH&S Director	Appendix revision

Controlled documents are maintained electronically.
Printed documents are UNCONTROLLED.
Prior to relying on a printed document, verify that it is current.