





Risk Management Manual Program

Complete Program Title: Respiratory Protection Program	Risk Management Manual (RMM) Number: 311
Approved by: <div style="border: 1px solid black; padding: 5px; width: fit-content; margin: 0 auto;"> <small>DocuSigned by:</small>  <small>A336B06F11DE407...</small> </div> Vice-President, Administration  President and Vice-Chancellor	Date of Most Recent Approval: September 2020
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1 Purpose

- 1.1 To protect all faculty, staff, students and visitors from exposure to airborne contaminants, e.g. harmful dusts, fumes, gases, mists, smoke and or vapours, biological and radiological hazards.
- 1.2 To ensure compliance with the Occupational Health and Safety Act (OHSA), O. Reg. 490/09. O. Reg. 833 / 90 Control of Exposure to Biological or Chemical Agents, Sections 3,7, and Schedule (1) and CSA: Z94.4-18: Selection, Use, and Care of Respirators)

2 Scope

- 2.1 All faculty, staff, students, and visitors.

3 Related Documents

- 3.1 The Occupational Health and Safety Act of Ontario /
- 3.2 Canadian Standards Association (CSA).
 - Z. 94.4-18 Selection, Use and Care of Respirators
 - Z180.1- 19 Compressed Breathing Air and Systems.
- 3.3 NIOSH Standard 42 CFR 84 (1995) for Non – Powered Particulate Filtering Respirators

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- 3.4 McMaster University RMM #100 Workplace & Environmental Health and Safety Policy
 - 3.5 McMaster University RMM #101 Risk Management System
 - 3.6 McMaster University RMM #300 Safety Orientation and Training Program
 - 3.7 McMaster University RMM #305 Confined Space Entry Program
 - 3.8 McMaster University RMM #401 Asbestos Management Control Program
 - 3.9 McMaster University RMM #600 Biohazards Safety Program
 - 3.10 McMaster University RMM #700 Radiation Safety Program
 - 3.11 McMaster University RMM #701 X-Ray Safety Program

4 Definitions

- 4.1 **Aerosols** - Airborne solid or liquid particles.
- 4.2 **Air – line Respirator** – a respirator and air supply hose with a hood/helmet, a tight fitting facepiece or a loose fitting facepiece/visor that is supplied with compressed breathing air from a compressed breathing air system.
- 4.3 **Air – Purifying Respirator** - Removes contaminants from workplace air by passing it through a filter, a cartridge or a combination of both, to provide protection from particulates, vapours or gases. Types of air-purifying respirators include the full - face piece (fits over the nose, mouth and eyes) and the half-face piece (fits over the nose and mouth) that have attachments for filters and/or cartridges. Air-purifying respirators will not provide protection in oxygen deficient atmospheres.
- 4.4 **Assigned Protection Factor (APF)** - A measure of the minimum anticipated workplace level of respiratory protection that would be provided by a properly functioning respiratory or class of respirators to a percentage of properly fitted and trained users.
- 4.5 **Chemical Cartridge** - Removes specific gases or vapours from the workplace atmosphere. High concentrations of contaminants, high humidity and high breathing rates will shorten the break through times and usefulness of chemical cartridges.
- 4.6 **Dusts** - Solid, mechanically produced particles or fibres; airborne solid particles caused by abrasive procedures such as grinding and cutting.
- 4.7 **Fit Testing** - Procedures to ensure a good seal between the respirator face piece and the face: may be qualitative (i.e. negative and positive pressure tests and tests relying on personal sensory response) or quantitative (i.e. utilize a particle generator and particle counter). Fit testing to be performed by a competent individual in accordance with the CSA standard.
- 4.8 **Fumes** - Occur when metal is heated and suddenly cooled; regarded as airborne condensation of solid particles from hot processes involving metal, e.g. welding, brazing.

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- 4.9 **Gases** - Substances that are in the gaseous state at ambient temperature and pressure.
- 4.10 **HEPA Filter** - High efficiency particulate air filter (99.7% efficient removal of 0.3 um particles).
- 4.11 **Mists** - Tiny liquid droplets caused by spraying or blowing operations;
- 4.12 **Particulate Filter** - Removes particulates (i.e. dusts, mists and fumes) from workplace air.
- 4.13 **Powered Air–Purifying Respirator** - Utilizes a blower which passes air through a filter or cartridge and then supplies air to the face piece; may be suitable for persons with facial hair or respiratory difficulties.
- 4.14 **Respirator** - Device worn over the mouth and nose to protect the respiratory tract by filtering out hazardous contaminants.
- 4.15 **Respiratory Protection** - Systems of personal protective equipment designed to protect individual employees from exposure to airborne contaminants.
- 4.16 **Smoke** Airborne solid and liquid particulates and gases emitted when a material undergoes combustion.
- 4.17 **Supervisor** - A person who has charge of a workplace or authority over a worker.
- 4.18 **Supplied Air Breathing Apparatus** - An-air line breathing apparatus that supplies breathing air to the wearer in accordance with CSA Standard Z180.1-00.
- 4.19 **Vapours** - Substances that evaporate from a liquid or solid at ambient temperature and pressure.
- 4.20 **Worker** – means any of the following, but does not include an inmate of a correctional institution or like institution or facility who participates inside the institution or facility in a work project or rehabilitation program:
1. A person who performs work or supplies services for monetary compensation.
 2. A secondary school student who performs work or supplies services for no monetary compensation under a work experience program authorized by the school board that operates the school in which the student is enrolled.
 3. A person who performs work or supplies services for no monetary compensation under a program approved by a college of applied arts and technology, university or other post-secondary institution.
 4. Other persons who work or provide services to an employer for no money, who may be prescribed by regulation.
- 4.21 **Acronyms:**
ACGIH - American Conference of Governmental Industrial Hygienists

APF - Assigned Protection Factor

CJHSC - Central Joint Health and Safety Committee

CSA - Canadian Standards Association

EOHSS - Environmental & Occupational Health Support Services

FHSSO - Faculty of Health Sciences Safety Office

IDLH - Immediately dangerous to Life or Health

McIARS - McMaster Institute of Applied Radiation Sciences

MOLTSD - Ministry of Labour, Training and Skills Development

NIOSH - National Institute for Occupational Safety and Health

QLFT - Qualitative Respirator Fitting Tests

QNFT - Quantitative Respirator Fitting Tests

RMSG - Risk Management Support Group

SCBA - Self Contained Breathing Apparatus

SOP - Standard Operating Procedure

5 Responsibilities

5.1 Role of Senior Managers (Deans / Directors / Chairs / Managers):

Senior Managers shall:

- provide the required resources and direction to support and maintain an effective respiratory protection program.

5.2 Role of Supervisors (Administrative and Academic):

The responsible supervisor shall:

- Implement engineering controls before implementing procedures which call for the use of respirators;
- contact Environmental & Occupational Health Support Services (EOHSS) and Faculty of Health Sciences Safety Office (FHSSO) where applicable, before implementing respiratory protection procedures which call for the use of respirators;
- contact EOHSS, and FHSSO to arrange for respirator fit testing when required;
- develop a Standard Operating Procedure (SOP) for all work involving the use of respirators and have all such SOP's reviewed by EOHSS/FHSSO if assistance is required;
- ensure that all persons required to wear SCBA undergo pre-use and annual cardiorespiratory performance evaluations;

- maintain a list of authorized individuals within supervision that wear respirators along with specific respirator details, including make/model/size;
- ensure that all persons required to use respiratory protection receive initial and ongoing fit testing/training as prescribed in Section 6 of the Respiratory Protection Program and as required by the conditions outlined in the SOP;
- ensure that all persons required to use respiratory protection, use and maintain the respirator in the prescribed manner;
- evaluate the effectiveness of the respiratory protection program on an ongoing basis in consultation with the JHSC; and
- Specific areas such as Health Physics may have additional SOPs that satisfies their requirements.

5.3 **Role of Individual (Faculty, Staff, Students, Contractors and Visitors):**

People authorized by their supervisor to wear respiratory protective equipment shall:

- work in compliance with the procedures outlined in the Respiratory Protection Program and the Standard Operating Procedure (SOP) related to the work being conducted;
- in the case of a tight-fitting respirator, maintain their respirator seal interference free, that is refrain from having any object or material on their person that interfere with the seal or operation of the respirator;
- use, clean and store respiratory equipment in the prescribed manner;
- perform user seal checks upon each donning of a tight fitting respirator;
- participate in safety training, annual respirator fit testing, medical assessment and medical surveillance as required by the program;
- notify the supervisor immediately when respiratory equipment needs servicing or replacement;
- remove from service any respirator that is determined to be defective and report to supervisor; and
- provide input on the effectiveness of the program and participate in regular assessments of the program as scheduled by the CJHSC.

5.4 **Role of Environmental & Occupational Health Support Services and Faculty of Health Sciences Safety Office**

EOHSS & FHSSO shall:

- implement and coordinate the Respiratory Protection Program;
- provide advice and consultation for engineering controls to eliminate potential exposure to atmospheric contaminants;
- provide advice on the selection and use of supplied air and air purifying respirators when requested;

- provide training in the care, use and storage of respirators;
- provide for respirator fit testing by competent and approved persons;
- arrange for atmospheric monitoring to be conducted in suspect environments where exposure limits have been established where applicable (i.e. confined space);
- advise employees, required to use respirators, to seek medical assessments, prior to using if required;
- maintain records of respirator use which include:
 - i. the names and departments of persons required to wear respirators;
 - ii. information on the assigned NIOSH approved respirator;
 - iii. fit testing records for all persons registered in the program;
- conduct periodic audits to determine the effectiveness of the Respiratory Protection Program to ensure that the
 - (a) proper types of respirators are being selected;
 - (b) wearers are properly trained
 - (c) correct respirators are issued and used;
 - (d) respirators are worn properly;
 - (e) respirators are properly maintained;
 - (f) respirators are inspected; and
 - (g) respirators are properly stored
- provide copies of the registry of persons required to wear respirators to the JHSC's, if requested;

5.5 **Central Joint Health and Safety Committees (CJHSC):**

- shall review and comment on the Respiratory Protection Program on a scheduled basis.

6 Training

6.1 The following persons shall be given adequate training by a qualified person(s) to ensure the proper use of respirators:

- (a) The respirator user
- (b) The supervisor of persons using respirators
- (c) The person issuing respirators
- (d) The person performing fit tests; and,
- (e) The person maintaining and repairing respirators.

6.2 A minimum training program for every person required to wear respirators shall consist of

- (a) A discussion of the nature, extent, and effects of respiratory hazards to which the person may be exposed;
- (b) An explanation of the operation, limitations, and capabilities of the selected respirator(s);
- (c) Instructions in procedures for the inspection, donning and removal, checking the fit and seals, and in wearing the respirator. Sufficient practical experience shall be provided and enable the person to become thoroughly familiar and confident with the use of the respirator;
- (d) Ensure employee is aware of the need to be free from interference of hair where the respirator seals to the skin of the face or neck during fit-testing procedures as well as future respirator use;
- (e) An explanation of the procedure for maintenance and storage of the respirator;
- (f) Instruction in how to deal with emergency situations involving the use of different respirators or the malfunction of respirators; and
- (g) A SCBA training program shall include instruction and practice in controlled breathing and simulated use conditions at least once per year.

6.3 Every person required to use a respirator shall be trained/fit tested at least annually. Where necessary, more frequent training shall be performed.

6.4 A training record system that meets the requirements of the regulator authority shall be maintained (see Section 8).

7 General Procedures

In drafting a Standard Operating Procedure (SOP) for the use of respirators the following procedural guidelines shall be followed:

7.1 Engineering Controls:

Whenever possible respiratory hazards in the workplace must first be evaluated and controlled by engineering methods before considering the use of air purifying respirators. NB. Atmospheric contaminant concentrations are usually measured in mg/m³ for solids and parts per million (ppm) for gases. Potential exposure levels of such contaminants must be compared with MOL or ACGIH occupational exposure limits to determine the potential for respiratory risk.

7.2 Standard Operating Procedures (SOP):

An SOP identifying the task requiring the use of respirators, the contaminants involved, the names of the persons to be placed on the Respiratory Protection Program, the selected respiratory protection and training requirements shall be prepared by the supervisor and filed within the department.

7.3 Medical Evaluation:

Subject to a person's fitness or ability, a medical opinion may be required before wearing a respirator. If required, that person shall obtain a medical opinion from a

physician who is knowledgeable about the work and the condition of the work of that person. The physician shall inform the Occupational Health Nurse as to the fitness or ability of that person to wear a respirator; however, details of any medical examination shall not be disclosed unless consent has been obtained from the person examined.

7.4 **Respirator Selection:**

As identified in CSA Z 94.4-18, in selecting a respirator, consideration must be given to (a) Air sampling and analyses, (b) Characteristics of the hazardous operation or process; (c) Use-time period; (d) Nature of work; (e) Physical characteristics, functional capabilities, and limitations of respirators of various types; (f) Respirator fit; and (g) Interaction with other protective equipment.

Tables 1 and 2 in CSA Z 94.4-18 describe the minimum respiratory protection based on the degree of hazard and Assigned Protective Factors (APF), respectively.

The atmospheric hazards may be assessed by air sampling or by evaluation of the potential for exposure created by the task being considered. Extra care must be taken when selecting respirators for contaminants that exist as both particles and vapours. Information on the contaminant phase is contained in the ACGIH TLV listings. Low vapour pressure contaminants with a TLV listed only as mg/m³ are assumed to exist in the particle phase and would require a particle filter. Contaminants with TLV are listed in both ppm and mg/m³ are generally found in the vapour phase and would require a chemical cartridge. Mixtures of contaminants in the workplace air indicate that both filters with particle and vapour removing capabilities are required. **NB. As professional advice and assistance is essential for proper respirator selection, EOHSS must be consulted and all respirators must be NIOSH approved**

7.5 **Respirator Fit Testing:**

Initial fit tests, using one of the following procedures must be provided for all persons required to wear a respirator:

- Qualitative Respirator Fitting Tests (QLFT) is a pass/fail test method that relies on the subject's sensory response to detect a challenge agent in order to assess the accuracy of a respirator fit;
- Quantitative Respirator Fitting Tests (QNFT) a test method that uses an instrument to assess the amount of leakage into the respirator in order to assess the adequacy of respirator fit;
- Negative and positive user seal tests can be conducted on respirators equipped with face pieces that contain both inhalation and exhalation valves.

NB. All respirator fit tests must be arranged by EOHSS or FHSSO, where applicable, and conducted by authorized individuals. All users of respirators must be trained in the proper method for conducting user seal checks for the respirator being used, Appendix 1.

- Fit testing records shall be kept by the supervisor and EOHSS/FHSSO (Section 8)

7.6 **Assigned Protection Factor (APF):**

In selecting a respirator the APF must be greater than the expected air contaminant concentration divided by its exposure limit e.g. if the expected air concentration of the contaminant is 60 ppm and exposure limit is 2ppm a respirator with an APF >30 must be used.

The following table illustrates values of assigned protection factors for various types of respirators:

Respirator Type		APF
Air Purifying	Half-face piece	10
	Full-face piece	50
Powered Air Purifying	Full-face piece Hood or Helmet	1000 (dusts/mists for) 25/1000 (Manufacturer APR)
Air-Line	Full-face piece pressure demand	1,000
SCBA	Full-face piece pressure demand	10,000

The employer must have evidence provided by the respirator manufacturer that testing of these respirators demonstrates performance at a level of protection of 1,000 or greater to receive an APF of 1,000. Absent such testing, all other PAPRs and SARs with helmets/hoods are to be treated as loose-fitting facepiece respirators, and receive an APF of 25.

7.7 Supplied Air Respirators and SCBA's:

Supplied air respirators and SCBA's are subject to different standards than those for particulate or gas filtering respirators (See Appendix A).

Supplied air respirators and SCBA's provide protection against oxygen deficiency and toxic atmospheres. Positive pressure demand units protect against the inward leakage of contaminants.

NB. A risk assessment will be conducted by the Supervisor and reviewed with EOHSS and FHSSO to determine if SCBA is required. **Extensive training is mandatory for persons who must rely on this type of respiratory protection. Training exercises with SCBA's must be conducted every three months.**

Air line respirators provide no protection if the air supply fails. These respirators are therefore limited to use in areas from which the wearer can escape unharmed.

Supplied-air respirators used in high and low temperature environments are subject to the potential for serious functional changes that affect performance and safety.

Users must be aware of such limitations and seek professional assistance prior to using Supplied Air Respirators or SCBA's.

8 Records

To facilitate regulatory compliance and management of the Respiratory Protection Program, the following information shall be documented and retained:

8.1 **Documentation:** A Standard Operating Procedure (SOP) which provides the following information:

- The nature of the atmospheric hazard and work location; (e.g. dust, fumes, mists, vapours, gases or oxygen deficiency;
- The name of the supervisor and department responsible for the safety of the persons required to wear respiratory protection;
- The names of all persons required to wear air purifying, supplied air or SCBA;
- The names of persons requiring annual medical reviews (e.g. cardiorespiratory performance evaluations);
- The selected NIOSH or CSA approved respiratory protection and date when fit testing was conducted;
- Confirmation of initial training and schedule for retraining (See Respiratory Protection Program Section 6.)

8.2 **Retention:** Copies of SOP's for respiratory protection shall be retained as follows:

- SOP's will be retained by the responsible supervisor for a period of three years beyond the completion date of the task or project;
- A list of SOP's involving the use of respiratory protection will be filed with and retained by EOHSS and/orFHSSO, where applicable, for a period of three years beyond the completion date of the task or project.
- Copies of the current SCBA maintenance records shall be retained by EOHSS/FHSSO, where applicable.

8.3 **Fit Testing Records:**

Records of respiratory fitting tests shall be made and held in safe-keeping EOHSS/FHSSO. The records shall include, but are not limited to the

- (a) Name of the person tested;
- (b) Date and time of tests;
- (c) Specific make, model, style and size of respirator
- (d) Type of fitting test and test agent used
- (e) Results of fitting tests
- (f) Comments on test difficulties, interference by clothing, protective equipment that needs to be worn in conjunction with the respirator, personal fitting problems, eg, eyeglasses, dentures, unusual facial features, or facial hair; and
- (g) Name of person giving the test

8.4 **Training Records:**

Records shall be kept on the type of training each person has received and the dates these training sessions occurred. The records shall be kept by the program administrator as well as supervisor for at least the duration of employment of the person trained.

Appendix A

Codes and Standards

Canadian Respiratory Protection Standard, CSA Z94.4-18:

Canada's respiratory protection standard, CSA Z94.4-93 Selection Care and Use of Respirators is intended to promote the correct use of respiratory protection, not to specify performance criteria. In this regard, it defaults to NIOSH requirements. The NIOSH standards are important to respirator users because they help define selection criteria.

NIOSH Standard 42 CFR 84 (1995) for Non-Powered Particulate Filtering Respirators:

After July 1998, all non-powered particulate-filtering respirators used in Canada must comply with one of nine classes of NIOSH-approved respirators. There are three basic series of filters: N, R, and P, and each series comes in three filtration efficiencies: 95% 99% and 99.7% at 0.3 microns where particle capture processes are least efficient. The respirator series are defined as follows:

N Series: Non-oil, for dust, mist or fume that is not an oil;

R Series: oil-Resistant, can be used for up to eight hours in an atmosphere containing a particulate oil or oil based substance;

P Series: oil-Proof, can be used indefinitely in an atmosphere containing particulate oil, subject to considerations of hygiene, damage and breathing resistance.

NIOSH Respirator Standard 30 CFR 11 (1972):

This NIOSH respirator standard still applies to respirators worn to protect against gases (e.g. ammonia) and vapours (e.g. from evaporated fuel or solvent).

For further information about NIOSH Standards, see web site: www.cdc.gov/niosh

How to Don a Respirator and Conduct User Seal Check

<https://www.ccohs.ca/oshanswers/prevention/ppe/wearing.html>

Appendix B

**McMaster University
Respirator Program (RMM 311) Fit Testing Record**



McMaster University Respirator User Screening Form
(as required by RMM #311, Respirator Protection Program)

Record to be maintained by appropriate RMSG office
EOHSS, Gilmour Hall, Room 304
Faculty of Health Sciences, HSC 1J11A

Name: _____ ID#: _____
Date: _____ Department: _____ Ext.: _____
Supervisor: _____ Location: _____
Job Title: _____

A. Conditions of Use

Activities requiring respirator use: _____

Frequency of respirator use: Daily Weekly Monthly Yearly Uncertain

Duration of respirator use per shift: < ¼ hr > ¼ hr >2 hr Variable Unknown

Temperature during use: < 0°C > 0 and < 25°C > 25°C

Physical exertion level during use: Light Moderate Heavy Other

B. Special Work Considerations

Emergency Escape Rescue Operations Hazardous Materials Confined Space

Other Personal Protective Equipment

Please specify additional personal protective equipment required: _____

Estimated total weight of tools/equipment carried during respirator use: Max: _____ Avg: _____

C. Type of Respirator Used (check all that apply)

- | | | |
|---|---|---|
| <input type="checkbox"/> Tight fitting | <input type="checkbox"/> Combination supplied air with air-purifying elements | <input type="checkbox"/> SCBA-open circuit |
| <input type="checkbox"/> Mouth Bit | <input type="checkbox"/> Loose fitting (i.e. hood) | <input type="checkbox"/> SCBA-closed circuit |
| <input type="checkbox"/> Air-purifying, non-powered | <input type="checkbox"/> Supplied air, demand | <input type="checkbox"/> SCBA-escape |
| <input type="checkbox"/> Air-purifying, powered | <input type="checkbox"/> Supplied air, continuous-flow | <input type="checkbox"/> SCBA-closed circuit escape |
| <input type="checkbox"/> Combination pressure demand/supplied air with escape | <input type="checkbox"/> Supplied air, pressure demand | <input type="checkbox"/> Supplied – air suit |
| | | <input type="checkbox"/> Other: _____ |

D. Respirator User's Health Conditions (Check YES or NO only do not specify)

Some conditions seriously affect your ability to safely use a respirator.

(a) Do you have or do you experience any of the following, or another condition that may affect respirator use?

Shortness of breath	control a condition	Reduced sense of smell	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Lung disease	Breathing difficulties	Facial features/skin		Asthma
Neuromuscular disease	Chest pain or exertion	conditions		Reduced sense of taste
Temperature susceptibility	Cardiovascular disease	Chronic bronchitis		Emphysema
Panic attacks	Fainting spells	Heart problems		Allergies
Vision impairment	Claustrophobia/fear of	Thyroid problems		Diabetes
Back/neck problems	heights	Dizziness/nausea		Seizures
Prescription medication to	Colour blindness	Hearing impairment		Dentures
				pacemaker

Other condition(s) affecting respirator use:

(b) Have you had previous difficulty using a respirator? YES NO

(c) Do you have any concerns about your future ability to use a respirator safely? YES NO

A "YES" answer to (a), (b) or (c) indicated future assessment by a health care professional is required prior to respirator use. Please note: MEDICAL INFORMATION IS NOT TO BE OFFERED ON THIS FORM.

Signature: _____ (Respirator user) Date: _____

E. Health Care Professional Primary Assessment (if required)

Assessment date: _____

Respirator use permitted: YES NO UNCERTAIN

Refereed for medical assessment YES NO

Reassessment Date: _____

Name of Health Care Professional: _____

Title: _____ Signature: _____

F. Medical Assessment (if required)

Class 1 NO Restrictions
 Class 2 Specific restrictions apply: _____
 Class 3 Respirator use is NOT permitted.

Name of Physician: _____ Signature: _____

1. Name (individual being fit tested): _____
2. Individual administering test: _____
3. Date: _____
4. Respirator individual is being fit tested for: (make, model, style & size):

Brand & Type	Model	Size	Cartridge type	Hazard
5. Type of fit test (circle): Quantitative Qualitative
6. Results (circle): Pass Fail
7. Tester's Signature: _____ Date: _____

Re-certification Medical Questionnaire (This portion needs to be completed annually to evaluate whether medical conditions have changed since the previous respirator approval.) If any of the questions below are marked YES, the employee must contact Occupational Health for further medical review:

1. Do you have any known or suspected major health problems at the present (i.e. heart, lungs, high blood pressure) or are you under the care of a doctor for diagnosis or treatment?
 NO ____ YES ____ (if yes, please explain _____)
2. Have you had any major health or physical problems in the past that has left you with any lasting impairment of bodily function, limitation, or restriction in normal physical activity?
 NO ____ YES ____ (if yes, please explain _____)
3. Do you have any significant symptom or health problem that you believe would be made worse by using respiratory protective equipment?
 NO ____ YES ____ (if yes, please explain _____)
4. Other than the mild discomfort of and/or annoyance experienced while wearing respirators do you have any major objections to using respiratory protective equipment?
 NO ____ YES ____ (if yes, please explain _____)

Employee's Signature: _____ Date: _____

Respirator Protection

Training Topics:

1. Nature, extent, and effects of respiratory hazards to which the person may be exposed
2. Operation, limitations, and capabilities of the selected respirator(s)
3. Procedures for inspection, donning and removal, checking the fit and seals, and in wearing the respirator
4. The need to be free from interference of hair where the respirator seals to the skin of the face or neck during fit-testing procedures as well as future respirator use
5. Maintenance and storage of the respirator
6. Instruction in how to deal with emergency situations involving the use of different respirators or the malfunction of respirators

I have received the training indicated above and understand my responsibility to work safely and in compliance with the Risk Management Manual 311 – Respiratory Protection Program.

<hr/>	<hr/>	<hr/>	<hr/>
Employee's Signature	Date	Trainer Signature	Date