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Respiratory Protection Checklists



Checklist for Written Procedures

Does your program contain written procedures for:

- Your specific workplace
- Selecting respirators
- Medical evaluations of employees required to wear respirators
- Fit testing
- Routine, and if applicable, emergency respirator use
- Schedules for cleaning, disinfecting, storing, inspecting, repairing, discarding and maintaining respirators
- Ensuring adequate air quality for supplied-air respirators if utilized
- Training in respiratory hazards
- Training in proper use and maintenance of respirators
- Program evaluation
- If applicable, ensuring that employees who voluntarily wear respirators (excluding filtering facepieces) comply with the medical evaluation and cleaning, storing and maintenance requirements
- A designated program administrator who is qualified to administer the program
- Updating the written program as necessary to account for changes in the workplace affecting respirator use
- Providing equipment, training and medical evaluations at no cost to employees



Checklist for Respirator Selection

General:

- Respiratory hazards in your workplace have been identified and evaluated
- Employees exposures that have not been, or cannot be evaluated must be considered IDLH
- Respirators are NIOSH-certified, and used under the conditions of certification
- Respirators are selected based on the workplace hazards evaluated, and workplace and user factors affecting respirator performance and reliability
- Respirators are selected based on the APFs and calculated MUCs
- A sufficient number of respirator sizes and models are provided for selection purposes

For IDLH atmospheres:

- Full facepiece pressure demand SARs with auxiliary SCBA unit or full facepiece pressure demand SCBAs, with a minimum service life of 30 minutes are provided
- Respirators used for escape only are NIOSH-certified for the atmosphere in which they will be used
- Oxygen deficient atmospheres must be considered IDLH (d)(2)(B)(iii)

For non-IDLH atmospheres:

- Respirators selected are appropriate for the APFs and MUCs
- Respirators selected are appropriate for the chemical nature and physical form of the contaminant
- Air-purifying respirators used for protection against gases and vapors are equipped with ESLIs or a change schedule has been implemented
- Air-purifying respirators used for protection against particulates are equipped with NIOSH-certified HEPA filters or other filters certified by NIOSH for particulates under 42 CFR part 84



Checklist for Medical Evaluation

- All employees have been evaluated to determine their ability to wear a respirator prior to being fit tested for or wearing a respirator for the first time
- A physician or other licensed healthcare professional (PLHCP) has been identified to perform the medical evaluations
- The medical evaluations obtain the information requested in Sections 1 and 2, Part A of Appendix C of the standard, 29 CFR 1910.134
- Employees are provided follow-up medical exams if they answer positively to any of questions 1 through 8 in Section 2, Part A of Appendix C of the standard, or if their medical examination reveals that a follow-up exam is needed
- Medical evaluations are administered confidentially during normal work hours, and in a manner that is understandable to employees
- Employees are provided the opportunity to discuss the medical evaluation results with the PLHCP
- The following supplemental information is provided to the PLHCP before he or she make a decision about respirator use:
 - Type and weight of respirator
 - Duration and frequency of respirator use
 - Expected physical work effort
 - Additional protective clothing to be worn
 - Potential temperature and humidity extremes
 - Written copies of the respiratory protection program and the Respiratory Protection standard
- Written recommendations are obtained from the PLHCP regarding each employee's ability to wear a respirator, and that the PLHCP has given the worker a copy of these recommendations
- Employees who are medically unable to wear a negative pressure respirator are provided with a powered air-purifying respirator (PAPR) if they are found by the PLHCP to be medically able to use a PAPR (29 CFR 1910.134(e)(6)(ii))

Employees are given additional medical evaluations when:

- The employee reports symptoms related to his or her ability to use a respirator
- The PLHCP, respiratory protection program administrator, or supervisor determines that a medical reevaluation is necessary
- Information from the respiratory protection program suggests a need for reevaluation
- Workplace conditions have changed in a way that could potentially place an increased physiological burden on the employee



Checklist for Fit Testing

- Employees who are using tight-fitting respirator facepieces have been medically approved and have passed an appropriate fit test prior to be required to use a respirator
- Fit testing is conducted with the same:
 - Make
 - Model
 - Style, and
 - Size that the employee will be expected to use
- Fit tests are conducted annually and when different respirator facepieces are to be used
- Provisions are made to conduct additional fit tests in the event of physical changes in the employee that may affect respirator fit such as:
 - Obvious Weight loss or gain
 - Dental changes
 - Facial scarring
 - Cosmetic surgery
- Employees are given the opportunity to select a different respirator facepiece and be retested if their respirator fit is unacceptable to them
- Fit tests are administered using OSHA-accepted QNFT or QLFT protocols
- QLFT is only used to fit test either PAPRs, SCBAs or negative pressure APRs that must achieve a fit factor of 100 or less
- QNFT if used in all situations where a negative pressure respirator is intended to protect workers from contaminant concentrations greater than 10 times the PEL
- When QNFT is used to fit negative pressure respirators, a minimum fit factor of 100 is achieved for tight-fitting half facepieces and 500 for full facepieces

For tight-fitting atmosphere-supplying respirators and powered air-purifying respirators:

- Fit tests are conducted in the negative pressure mode
- QLFT is achieved by temporarily converting the facepiece into a negative pressure respirator with appropriate filters, or by using an identical negative pressure APR
- QNFT is achieved by modifying the facepiece to allow for sampling inside the mask midway between the nose and mouth. If the facepiece is permanently converted during fit testing, the respirator is no longer approved for workplace use



Checklist for Proper Use of Respirators

- Employees using tight-fitting respirators have no conditions, such as facial hair, that would interfere with a face-to-facepiece seal or valve function
- Employees wear corrective glasses, goggles, or other protective equipment in a manner that does not interfere with the face-to-facepiece seal or valve function
- Employees perform user seal checks prior to each use of a tight-fitting respirator
- There are procedures for conducting ongoing surveillance of the work area for conditions that affect respirator effectiveness, and that, when such conditions exist, you take steps to address those situations
- Employees are permitted to leave their work area to conduct respirator maintenance, such as washing the facepiece, or to replace respirator parts
- Employees do not return to their work area until their respirator has been repaired or replaced in the event of a breakthrough, a leak in the facepiece, or a change in breathing resistance
- There are procedures for respirator use in IDLH atmospheres and during interior structural firefighting to ensure that:
 - The appropriate number of standby personnel are deployed
 - Standby personnel and workers in the IDLH environment maintain communication
 - Standby personnel are properly trained, equipped and prepared
 - You will be notified when standby personnel enter an IDLH atmosphere
 - You will respond appropriately to this notification
- Standby personnel are equipped with a pressure demand or other positive pressure SCBA, or a positive pressure supplied-air respirator with an escape SCBA, and appropriate retrieval equipment or other means for rescue
- Procedures for interior structural firefighting require that:
 - at least two employees enter the IDLH atmosphere and remain in contact with one another at all times
 - at least two standby personnel are used
 - all firefighting employees use SCBAs



Checklist for Respirator Maintenance and Care

Cleaning and disinfecting:

- Respirators are provided that are clean, sanitary, and in good working order
- Respirators are cleaned and disinfected using the procedures specified in Appendix B-2 of the Respiratory Protection Standard

Respirators are cleaned and disinfected:

- As often as necessary when issued for the exclusive use of one employee
- Before being worn by different individuals
- After each use for emergency use respirators
- After each use for respirators used for fit testing and training

Storage:

- Respirators are stored to protect them from damage from the elements, and from becoming deformed

Emergency respirators are stored:

- To be accessible to the work area
- In compartments marked as such
- In accord with manufacturer's instructions

Inspections:

- Routine-use respirators are inspected before each use and during cleaning
- SCBAs and emergency respirators are inspected monthly and checked for proper functioning before and after use
- Emergency escape-only respirators are inspected before being carried into the workplace for use

Inspections include:

- Check of respirator function
- Tightness of connections
- Condition of the facepiece, head straps, valves, cartridges, and other parts
- Condition of elastomeric parts



Checklist for Respirator Maintenance and Care, cont.

For SCBAs, inspections include:

- Check that cylinders are fully charged
- Check that regulators function properly
- Check that warning devices function properly

For emergency use respirators, inspections include:

- Certification by documenting the inspection, and by tagging the information either to the respirator or its compartment, or storing it with inspection reports.

Repairs:

- Respirators that have failed inspection are taken out of service
- Repairs are made only by trained personnel
- Only NIOSH-certified parts are used
- Reducing and admission valves, regulators, and alarms are adjusted or repaired only by the manufacturer or a technician trained by the manufacturer



Checklist for Breathing Air Quality and Use

General:

- Compressed breathing air meets the requirements for Grade D breathing air
- Compressed oxygen is not used in respirators that have previously used compressed air
- Oxygen concentrations greater than 23.5 percent are used only in equipment designed for oxygen service or distribution
- Breathing air couplings are incompatible with outlets for other gas systems
- Breathing gas containers are marked in accord with the NIOSH certification standard
- Carbon monoxide levels are monitored for both oil and gas compressors

Breathing Air Cylinders:

- Cylinders are tested and maintained according to DOT 49 CFR Parts 173 and 178
- A certificate of analysis for breathing air has been obtained from the supplier
- Moisture content in the cylinder does not exceed a dew point of -50°F at 1 atmosphere pressure

Compressors:

- Are constructed and situated to prevent contaminated air from getting into the system
- Are set up to minimize the moisture content
- Are equipped with in-line air-purifying sorbent beds and filters that are maintained or replaced following manufacturer's instructions
- Are tagged with information on the most recent change date of the filter and an authorizing signature
- Carbon monoxide does not exceed 10 ppm in the breathing air from compressors that are not oil lubricated
- High-temperature or carbon monoxide alarms are used on oil-lubricated compressors; monitor the air often enough to ensure that carbon monoxide does not exceed 10 ppm if only a high-temperature alarm is used



Checklist for Training and Information

Demonstration of employees' knowledge of:

- Why the respirator is necessary and the consequences of improper fit, use or maintenance
- The limitations and capabilities of the respirator
- How to effectively use the respirator in emergency situations, including respirator malfunction
- How to inspect, put on, remove, use and check the seals of the respirator
- Maintenance and storage procedures
- The general requirements of the Respiratory Protection standard
- How to recognize medical signs and symptoms that may limit or prevent effective use of the respirator

Check that your facility satisfies the general requirements of the respirator standard by providing the following:

- Training that is understandable to employees
- Training prior to employee use of a respirator
- Retraining as specified below:
 - Annually
 - Upon changes in workplace conditions that affect respirator use
 - When knowledge and skills for respirator use are not retained by the employee
 - Whenever retraining appears necessary to ensure safe respirator use
- Appendix D of the standard to voluntary users



Checklist for Program Evaluation

- Conducts workplace evaluations as necessary to ensure that the written respiratory protection program is being effectively implemented
- Regularly consults with employees required to wear respirators to assess their views on the respiratory protection program and to identify problems with respirator fit, selection, use and maintenance
- Corrects any problems identified during assessments

Checklist for Recordkeeping

- Retains records of medical evaluations
- Retains fit testing records
- Retains a copy of the current respiratory protection program
- Provides access to the above records by affected employees and government agencies