Appendix A

29 CFR 1910.134

Respiratory Protection
Respiratory Protection Standard

This section applies to General Industry (part 1910), Shipyards (part 1915), Marine Terminals (part 1917), Longshoring (part 1918), and Construction (part 1926).

1910.134(a) Permissible practice.

1910.134(a)(1) In the control of those occupational diseases caused by breathing air contaminated with harmful dusts, fogs, fumes, mists, gases, smokes, sprays, or vapors, the primary objective shall be to prevent atmospheric contamination. This shall be accomplished as far as feasible by accepted engineering control measures (for example, enclosure or confinement of the operation, general and local ventilation, and substitution of less toxic materials). When effective engineering controls are not feasible, or while they are being instituted, appropriate respirators shall be used pursuant to this section.

1910.134(a)(2) Respirators shall be provided by the employer when such equipment is necessary to protect the health of the employee. The employer shall provide the respirators which are applicable and suitable for the purpose intended. The employer shall be responsible for the establishment and maintenance of a respiratory protection program which shall include the requirements outlined in paragraph (c) of this section.

1910.134(b) Definitions.
The following definitions are important terms used in the respiratory protection standard in this section.

Air-purifying respirator means a respirator with an air-purifying filter, cartridge, or canister that removes specific air contaminants by passing ambient air through the air-purifying element.

Assigned protection factor (APF) means the workplace level of respiratory protection that a respirator or class of respirators is expected to provide to employees when the employer implements a continuing, effective respiratory protection program as specified by this section.

Atmosphere-supplying respirator means a respirator that supplies the respirator user with breathing air from a source independent of the ambient atmosphere, and includes supplied-air respirators (SARs) and self-contained breathing apparatus (SCBA) units.

Canister or cartridge means a container with a filter, sorbent, or catalyst, or combination of these items, which removes specific contaminants from the air passed through the container.

Demand respirator means an atmosphere-supplying respirator that admits breathing air to the facepiece only when a negative pressure is created inside the facepiece by inhalation.

Emergency situation means any occurrence such as, but not limited to, equipment failure, rupture of containers, or failure of control equipment that may or does result in an uncontrolled significant release of an airborne contaminant.

Employee exposure means exposure to a concentration of an airborne contaminant that would occur if the employee were not using respiratory protection.

End-of-service-life indicator (ESLI) means a system that warns the respirator user of the approach of the end of adequate respiratory protection, for example, that the sorbent is approaching saturation or is no longer effective.

Escape-only respirator means a respirator intended to be used only for emergency exit.

Filter or air purifying element means a component used in respirators to remove solid or liquid aerosols from the inspired air.

Filtering facepiece (dust mask) means a negative pressure particulate respirator with a filter as an integral part of the facepiece or with the entire facepiece composed of the filtering medium.

Fit factor means a quantitative estimate of the fit of a particular respirator to a specific individual, and typically estimates the ratio of the concentration of a substance in ambient air to its concentration inside the respirator when worn.

Fit test means the use of a protocol to qualitatively or quantitatively evaluate the fit of a respirator on an individual. (See also Qualitative fit test QLFT and Quantitative fit test QNFT.)

Helmet means a rigid respiratory inlet covering that also provides head protection against impact and penetration.
High efficiency particulate air (HEPA) filter means a filter that is at least 99.97% efficient in removing monodisperse particles of 0.3 micrometers in diameter. The equivalent NIOSH 42 CFR 84 particulate filters are the N100, R100, and P100 filters.

Hood means a respiratory inlet covering that completely covers the head and neck and may also cover portions of the shoulders and torso.

Immediately dangerous to life or health (IDLH) means an atmosphere that poses an immediate threat to life, would cause irreversible adverse health effects, or would impair an individual's ability to escape from a dangerous atmosphere.

Interior structural firefighting means the physical activity of fire suppression, rescue or both, inside of buildings or enclosed structures which are involved in a fire situation beyond the incipient stage. (See 29 CFR 1910.155)

Loose-fitting facepiece means a respiratory inlet covering that is designed to form a partial seal with the face.

Maximum use concentration (MUC) means the maximum atmospheric concentration of a hazardous substance from which an employee can be expected to be protected when wearing a respirator, and is determined by the assigned protection factor of the respirator or class of respirators and the exposure limit of the hazardous substance. The MUC can be determined mathematically by multiplying the assigned protection factor specified for a respirator by the required OSHA permissible exposure limit, short-term exposure limit, or ceiling limit. When no OSHA exposure limit is available for a hazardous substance, an employer must determine an MUC on the basis of relevant available information and informed professional judgment.

Negative pressure respirator (tight fitting) means a respirator in which the air pressure inside the facepiece is negative during inhalation with respect to the ambient air pressure outside the respirator.

Oxygen deficient atmosphere means an atmosphere with an oxygen content below 19.5% by volume.

Physician or other licensed healthcare professional (PLHCP) means an individual whose legally permitted scope of practice (i.e., license, registration, or certification) allows him or her to independently provide, or be delegated the responsibility to provide, some or all of the healthcare services required by paragraph (e) of this section.

Positive pressure respirator means a respirator in which the pressure inside the respiratory inlet covering exceeds the ambient air pressure outside the respirator.

Powered air-purifying respirator (PAPR) means an air-purifying respirator that uses a blower to force the ambient air through air-purifying elements to the inlet covering.

Pressure demand respirator means a positive pressure atmosphere-supplying respirator that admits breathing air to the facepiece when the positive pressure is reduced inside the facepiece by inhalation.

Qualitative fit test (QLFT) means a pass/fail fit test to assess the adequacy of respirator fit that relies on the individual's response to the test agent.

Quantitative fit test (QNFT) means an assessment of the adequacy of respirator fit by numerically measuring the amount of leakage into the respirator.

Respiratory inlet covering means that portion of a respirator that forms the protective barrier between the user's respiratory tract and an air-purifying device or breathing air source, or both. It may be a facepiece, helmet, hood, suit, or a mouthpiece respirator with nose clamp.

Self-contained breathing apparatus (SCBA) means an atmosphere-supplying respirator for which the breathing air source is designed to be carried by the user.

Service life means the period of time that a respirator, filter or sorbent, or other respiratory equipment provides adequate protection to the wearer.

Supplied-air respirator (SAR) or airline respirator means an atmosphere-supplying respirator for which the source of breathing air is not designed to be carried by the user.

This section means this Respiratory Protection standard.

Tight-fitting facepiece means a respiratory inlet covering that forms a complete seal with the face.

User seal check means an action conducted by the respirator user to determine if the respirator is properly seated to the face.
1910.134(c) Respiratory protection program.
This paragraph requires the employer to develop and implement a written respiratory protection program with required worksite-specific procedures and elements for required respirator use. The program must be administered by a suitably trained program administrator. In addition, certain program elements may be required for voluntary use to prevent potential hazards associated with the use of the respirator.

Note: The Small Entity Compliance Guide contains criteria for the selection of a program administrator and a sample program that meets the requirements of this paragraph.

1910.134(c)(1) In any workplace where respirators are necessary to protect the health of the employee or whenever respirators are required by the employer, the employer shall establish and implement a written respiratory protection program with worksite-specific procedures. The program shall be updated as necessary to reflect those changes in workplace conditions that affect respirator use. The employer shall include in the program the following provisions of this section, as applicable:

1910.134(c)(1)(i) Procedures for selecting respirators for use in the workplace;

1910.134(c)(1)(ii) Medical evaluations of employees required to use respirators;

1910.134(c)(1)(iii) Fit testing procedures for tight-fitting respirators;

1910.134(c)(1)(iv) Procedures for proper use of respirators in routine and reasonably foreseeable emergency situations;

1910.134(c)(1)(v) Procedures and schedules for cleaning, disinfecting, storing, inspecting, repairing, discarding, and otherwise maintaining respirators;

1910.134(c)(1)(vi) Procedures to ensure adequate air quality, quantity, and flow of breathing air for atmosphere-supplying respirators;

1910.134(c)(1)(vii) Training of employees in the respiratory hazards to which they are potentially exposed during routine and emergency situations;

1910.134(c)(1)(viii) Training of employees in the proper use of respirators, including putting on and removing them, any limitations on their use, and their maintenance; and

1910.134(c)(1)(ix) Procedures for regularly evaluating the effectiveness of the program.

1910.134(c)(2) Where respirator use is not required:

1910.134(c)(2)(i) An employer may provide respirators at the request of employees or permit employees to use their own respirators, if the employer determines that such respirator use will not in itself create a hazard. If the employer determines that any voluntary respirator use is permissible, the employer shall provide the respirator users with the information contained in Appendix D to this section (“Information for Employees Using Respirators When Not Required Under the Standard”); and

1910.134(c)(2)(ii) In addition, the employer must establish and implement those elements of a written respiratory protection program necessary to ensure that any employee using a respirator voluntarily is medically able to use that respirator, and that the respirator is cleaned, stored, and maintained so that its use does not present a health hazard to the user. Exception: Employers are not required to include in a written respiratory protection program those employees whose only use of respirators involves the voluntary use of filtering facepieces (dust masks).

1910.134(c)(3) The employer shall designate a program administrator who is qualified by appropriate training or experience that is commensurate with the complexity of the program to administer or oversee the respiratory protection program and conduct the required evaluations of program effectiveness.

1910.134(c)(4) The employer shall provide respirators, training, and medical evaluations at no cost to the employee.
1910.134(d)
Selection of respirators.
This paragraph requires the employer to evaluate respiratory hazard(s) in the workplace, identify relevant workplace and user factors, and base respirator selection on these factors. The paragraph also specifies appropriately protective respirators for use in IDLH atmospheres, and limits the selection and use of air-purifying respirators.

1910.134(d)(1)
General requirements.

1910.134(d)(1)(i)
The employer shall select and provide an appropriate respirator based on the respiratory hazard(s) to which the worker is exposed and workplace and user factors that affect respirator performance and reliability.

1910.134(d)(1)(ii)
The employer shall select a NIOSH-certified respirator. The respirator shall be used in compliance with the conditions of its certification.

1910.134(d)(1)(iii)
The employer shall identify and evaluate the respiratory hazard(s) in the workplace; this evaluation shall include a reasonable estimate of employee exposures to respiratory hazard(s) and an identification of the contaminant’s chemical state and physical form. Where the employer cannot identify or reasonably estimate the employee exposure, the employer shall consider the atmosphere to be IDLH.

1910.134(d)(1)(iv)
The employer shall select respirators from a sufficient number of respirator models and sizes so that the respirator is acceptable to, and correctly fits, the user.

1910.134(d)(2)
Respirators for IDLH atmospheres.

1910.134(d)(2)(i)
The employer shall provide the following respirators for employee use in IDLH atmospheres:

1910.134(d)(2)(i)(A)
A full facepiece pressure demand SCBA certified by NIOSH for a minimum service life of thirty minutes, or

1910.134(d)(2)(i)(B)
A combination full facepiece pressure demand supplied air respirator (SAR) with auxiliary self-contained air supply.

1910.134(d)(2)(ii)
Respirators provided only for escape from IDLH atmospheres shall be NIOSH-certified for escape from the atmosphere in which they will be used.

1910.134(d)(2)(iii)
All oxygen-deficient atmospheres shall be considered IDLH. Exception: If the employer demonstrates that, under all foreseeable conditions, the oxygen concentration can be maintained within the ranges specified in Table II of this section (i.e., for the altitudes set out in the table), then any atmosphere-supplying respirator may be used.

1910.134(d)(3)
Respirators for atmospheres that are not IDLH.

1910.134(d)(3)(i)
The employer shall provide a respirator that is adequate to protect the health of the employee and ensure compliance with all other OSHA statutory and regulatory requirements, under routine and reasonably foreseeable emergency situations.

1910.134(d)(3)(i)(A)
Assigned Protection Factors (APFs) Employers must use the assigned protection factors listed in Table I to select a respirator that meets or exceeds the required level of employee protection. When using a combination respirator (e.g., airline respirators with an air-purifying filter), employers must ensure that the assigned protection factor is appropriate to the mode of operation in which the respirator is being used.
# Table I: Assigned Protection Factors

<table>
<thead>
<tr>
<th>Type of Respirator</th>
<th>Quarter mask</th>
<th>Half mask</th>
<th>Full facepiece</th>
<th>Helmet/Hood</th>
<th>Loose-fitting facepiece</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Air-Purifying Respirator</td>
<td>5</td>
<td>10³</td>
<td>50</td>
<td>—</td>
<td>—</td>
</tr>
<tr>
<td>2. Powered Air-Purifying Respirator (PAPR)</td>
<td>—</td>
<td>50</td>
<td>1,000</td>
<td>25/1,000⁴</td>
<td>25</td>
</tr>
<tr>
<td>3. Supplied-Air Respirator (SAR)</td>
<td>—</td>
<td>10</td>
<td>50</td>
<td>—</td>
<td>—</td>
</tr>
<tr>
<td>or Airline Respirator</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Demand mode</td>
<td>—</td>
<td>10</td>
<td>50</td>
<td>—</td>
<td>—</td>
</tr>
<tr>
<td>• Continuous flow mode</td>
<td>—</td>
<td>50</td>
<td>1,000</td>
<td>25/1,000⁴</td>
<td>25</td>
</tr>
<tr>
<td>• Pressure-demand or other</td>
<td>—</td>
<td>50</td>
<td>1,000</td>
<td>—</td>
<td>—</td>
</tr>
<tr>
<td>positive-pressure mode</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Self-Contained Breathing Apparatus (SCBA)</td>
<td>—</td>
<td>10</td>
<td>50</td>
<td>50</td>
<td>—</td>
</tr>
<tr>
<td>• Pressure-demand or other</td>
<td>—</td>
<td></td>
<td></td>
<td>10,000</td>
<td>10,000</td>
</tr>
<tr>
<td>positive-pressure mode (e.g., open/closed circuit)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Notes:

1. Employers may select respirators assigned for use in higher workplace concentrations of a hazardous substance for use at lower concentrations of that substance, or when required respirator use is independent of concentration.

2. The assigned protection factors in Table I are only effective when the employer implements a continuing, effective respirator program as required by this section (29 CFR 1910.134), including training, fit testing, maintenance, and use requirements.

3. This APF category includes filtering facepieces, and half masks with elastomeric facepieces.

4. 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. This level of performance can best be demonstrated by performing a WPF or SWPF study or equivalent testing. 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.

5. These APFs do not apply to respirators used solely for escape. For escape respirators used in association with specific substances covered by 29 CFR 1910 subpart Z, employers must refer to the appropriate substance-specific standards in that subpart. Escape respirators for other IDLH atmospheres are specified by 29 CFR 1910.134(d)(2)(ii).

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1910.134(d)(3)(i)(B)

**Maximum Use Concentration (MUC)**

The employer must select a respirator for employee use that maintains the employee’s exposure to the hazardous substance, when measured outside the respirator, at or below the MUC.

Employers must not apply MUCs to conditions that are immediately dangerous to life or health (IDLH); instead, they must use respirators listed for IDLH conditions in paragraph (d)(2) of this standard.

When the calculated MUC exceeds the IDLH level for a hazardous substance, or the performance limits of the cartridge or canister, then employers must set the maximum MUC at that lower limit.

1910.134(d)(3)(ii)
The respirator selected shall be appropriate for the chemical state and physical form of the contaminant.

1910.134(d)(3)(iii)
For protection against gases and vapors, the employer shall provide:

1910.134(d)(3)(iii)(A)
An atmosphere-supplying respirator, or

1910.134(d)(3)(iii)(B)
An air-purifying respirator, provided that:

The respirator is equipped with an end-of-service-life indicator (ESLI) certified by NIOSH for the contaminant; or

If there is no ESLI appropriate for conditions in the employer’s workplace, the employer implements a change schedule for canisters and cartridges that is based on objective information or data that will ensure that canisters and cartridges are changed before the end of their service life. The employer shall describe in the respirator program the information and data relied upon and the basis for the canister and
cartridge change schedule and the basis for reliance on the data.

1910.134(d)(3)(iv)
For protection against particulates, the employer shall provide:

1910.134(d)(3)(iv)(A)
An atmosphere-supplying respirator; or

1910.134(d)(3)(iv)(B)
An air-purifying respirator equipped with a filter certified by NIOSH under 30 CFR part 11 as a high efficiency particulate air (HEPA) filter, or an air-purifying respirator equipped with a filter certified for particulates by NIOSH under 42 CFR part 84; or

1910.134(d)(3)(iv)(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 filter certified for particulates by NIOSH.

<table>
<thead>
<tr>
<th>Table II: Oxygen Deficient Atmospheres</th>
</tr>
</thead>
<tbody>
<tr>
<td>Altitude (ft.)</td>
</tr>
<tr>
<td>---------------</td>
</tr>
<tr>
<td>Less than 3,001</td>
</tr>
<tr>
<td>3,001-4,000</td>
</tr>
<tr>
<td>4,001-5,000</td>
</tr>
<tr>
<td>5,001-6,000</td>
</tr>
<tr>
<td>6,001-7,000</td>
</tr>
<tr>
<td>7,001-8,000\textsuperscript{1}</td>
</tr>
</tbody>
</table>

\textsuperscript{1} Above 8,000 feet the exception does not apply. Oxygen-enriched breathing air must be supplied above 14,000 feet.

1910.134(e)
Medical evaluation.
Using a respirator may place a physiological burden on employees that varies with the type of respirator worn, the job and workplace conditions in which the respirator is used, and the medical status of the employee. Accordingly, this paragraph specifies the minimum requirements for medical evaluation that employers must implement to determine the employee’s ability to use a respirator.

1910.134(e)(1)
General. The employer 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. The employer may discontinue an employee’s medical evaluations when the employee is no longer required to use a respirator.

1910.134(e)(2)
Medical evaluation procedures.

1910.134(e)(2)(i)
The employer shall identify a physician or other licensed health care professional (PLHCP) to perform medical evaluations using a medical questionnaire or an initial medical examination that obtains the same information as the medical questionnaire.

1910.134(e)(2)(ii)
The medical evaluation shall obtain the information requested by the questionnaire in Sections 1 and 2, Part A of Appendix C of this section.

1910.134(e)(3)
Follow-up medical examination.

1910.134(e)(3)(i)
The employer shall ensure that a follow-up medical examination is provided for an employee who gives a positive response to any question among questions 1 through 8 in Section 2, Part A of Appendix C or whose initial medical examination demonstrates the need for a follow-up medical examination.

1910.134(e)(3)(ii)
The follow-up medical examination shall include any medical tests, consultations, or diagnostic procedures that the PLHCP deems necessary to make a final determination.

1910.134(e)(4)
Administration of the medical questionnaire and examinations.

1910.134(e)(4)(i)
The medical questionnaire and examinations shall be administered confidentially during the employee’s normal working hours or at a time and place convenient to the employee. The medical questionnaire shall be administered in a manner that ensures that the employee understands its content.

1910.134(e)(4)(ii)
The employer shall provide the employee with an opportunity to discuss the questionnaire and examination results with the PLHCP.
1910.134(e)(5)
Supplemental information for the PLHCP.

1910.134(e)(5)(i)
The following information must be provided to the PLHCP before the PLHCP makes a recommendation concerning an employee's ability to use a respirator:

1910.134(e)(5)(i)(A)
(A) The type and weight of the respirator to be used by the employee;

1910.134(e)(5)(i)(B)
The duration and frequency of respirator use (including use for rescue and escape);

1910.134(e)(5)(i)(C)
The expected physical work effort;

1910.134(e)(5)(i)(D)
Additional protective clothing and equipment to be worn; and

1910.134(e)(5)(i)(E)
Temperature and humidity extremes that may be encountered.

1910.134(e)(5)(ii)
Any supplemental information provided previously to the PLHCP regarding an employee need not be provided for a subsequent medical evaluation if the information and the PLHCP remain the same.

1910.134(e)(5)(iii)
The employer shall provide the PLHCP with a copy of the written respiratory protection program and a copy of this section.

Note to Paragraph (e)(5)(iii): When the employer replaces a PLHCP, the employer must ensure that the new PLHCP obtains this information, either by providing the documents directly to the PLHCP or having the documents transferred from the former PLHCP to the new PLHCP. However, OSHA does not expect employers to have employees medically reevaluated solely because a new PLHCP has been selected.

1910.134(e)(6)
Medical determination. In determining the employee's ability to use a respirator, the employer shall:

1910.134(e)(6)(i)
Obtain a written recommendation regarding the employee's ability to use the respirator from the PLHCP.

The recommendation shall provide only the following information:

1910.134(e)(6)(i)(A)
Any limitations on respirator use related to the medical condition of the employee, or relating to the workplace conditions in which the respirator will be used, including whether or not the employee is medically able to use the respirator;

1910.134(e)(6)(i)(B)
The need, if any, for follow-up medical evaluations; and

1910.134(e)(6)(i)(C)
A statement that the PLHCP has provided the employee with a copy of the PLHCP's written recommendation.

1910.134(e)(6)(ii)
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, the employer 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 the employer is no longer required to provide a PAPR.

1910.134(e)(7)
Additional medical evaluations. At a minimum, the employer shall provide additional medical evaluations that comply with the requirements of this section if:

1910.134(e)(7)(i)
An employee reports medical signs or symptoms that are related to ability to use a respirator;

1910.134(e)(7)(ii)
A PLHCP, supervisor, or the respirator program administrator informs the employer that an employee needs to be reevaluated;

1910.134(e)(7)(iii)
Information from the respiratory protection program, including observations made during fit testing and program evaluation, indicates a need for employee reevaluation; or

1910.134(e)(7)(iv)
A change occurs in workplace conditions (e.g., physical work effort, protective clothing, temperature) that may result in a substantial increase in the physiological burden placed on an employee.
1910.134(f)  
**Fit testing.**  
This paragraph requires that, before an employee may be required to use any respirator with a negative or positive pressure tight-fitting facepiece, the employee must be fit tested with the same make, model, style, and size of respirator that will be used. This paragraph specifies the kinds of fit tests allowed, the procedures for conducting them, and how the results of the fit tests must be used.

1910.134(f)(1)  
The employer shall ensure that employees using a tight-fitting facepiece respirator pass an appropriate qualitative fit test (QLFT) or quantitative fit test (QNFT) as stated in this paragraph.

1910.134(f)(2)  
The employer shall ensure that an employee using a tight-fitting facepiece respirator is fit tested prior to initial use of the respirator, whenever a different respirator facepiece (size, style, model or make) is used, and at least annually thereafter.

1910.134(f)(3)  
The employer shall conduct an additional fit test whenever the employee reports, or the employer, PLHCP, supervisor, or program administrator makes visual observations of, changes in the employee's physical condition that could affect respirator fit. Such conditions include, but are not limited to, facial scarring, dental changes, cosmetic surgery, or an obvious change in body weight.

1910.134(f)(4)  
If after passing a QLFT or QNFT, the employee subsequently notifies the employer, program administrator, supervisor, or PLHCP that the fit of the respirator is unacceptable the employee shall be given a reasonable opportunity to select a different respirator facepiece and to be retested.

1910.134(f)(5)  
The fit test shall be administered using an OSHA-accepted QLFT or QNFT protocol. The OSHA-accepted QLFT and QNFT protocols and procedures are contained in Appendix A of this section.

1910.134(f)(6)  
QLFT may only be used to fit test negative pressure air-purifying respirators that must achieve a fit factor of 100 or less.

1910.134(f)(7)  
If the fit factor, as determined through an OSHA-accepted QNFT protocol, is equal to or greater than 500 for tight-fitting full facepieces, the QNFT has been passed with that respirator.

1910.134(f)(8)  
Fit testing of tight-fitting atmosphere-supplying respirators and tight-fitting powered air-purifying respirators shall be accomplished by performing quantitative or qualitative fit testing in the negative pressure mode, regardless of the mode of operation (negative or positive pressure) that is used for respiratory protection.

1910.134(f)(8)(i)  
Quantitative fit testing of these respirators shall be accomplished by temporarily converting the respirator user's actual facepiece into a negative pressure respirator with appropriate filters, or by using an identical negative pressure air-purifying respirator facepiece with the same sealing surfaces as a surrogate for the atmosphere-supplying or powered air-purifying respirator facepiece.

1910.134(f)(8)(ii)  
Qualitative fit testing of these respirators shall be accomplished by temporarily converting the respirator user's actual facepiece into a negative pressure respirator with appropriate filters, or by using an identical negative pressure air-purifying respirator facepiece with the same sealing surfaces as a surrogate for the atmosphere-supplying or powered air-purifying respirator facepiece.

1910.134(f)(8)(iii)  
Any modifications to the respirator facepiece for fit testing shall be completely removed, and the facepiece restored to NIOSH-approved configuration, before that facepiece can be used in the workplace.

1910.134(g)  
**Use of respirators.**  
This paragraph requires employers to establish and implement procedures for the proper use of respirators. These requirements include prohibiting conditions that may result in facepiece seal leakage, preventing employees from removing respirators in hazardous environments, taking actions to ensure continued effective respirator operation throughout the work shift, and establishing procedures for the use of respirators in IDLH atmospheres or in interior structural firefighting situations.

1910.134(g)(1)  
**Facepiece seal protection.**  
1910.134(g)(1)(i)  
The employer shall not permit respirators with tight-fitting facepieces to be worn by employees who have:
Facial hair that comes between the sealing surface of the facepiece and the face or that interferes with valve function; or

Any condition that interferes with the face-to-facepiece seal or valve function.

If an employee wears corrective glasses or goggles or other personal protective equipment, the employer shall ensure that such equipment is worn in a manner that does not interfere with the seal of the facepiece to the face of the user.

For all tight-fitting respirators, the employer shall ensure that employees perform a user seal check each time they put on the respirator using the procedures in Appendix B-1 or procedures recommended by the respirator manufacturer that the employer demonstrates are as effective as those in Appendix B-1 of this section.

Continuing respirator effectiveness.

Appropriate surveillance shall be maintained of work area conditions and degree of employee exposure or stress. When there is a change in work area conditions or degree of employee exposure or stress that may affect respirator effectiveness, the employer shall reevaluate the continued effectiveness of the respirator.

The employer shall ensure that employees leave the respirator use area:

To wash their faces and respirator facepieces as necessary to prevent eye or skin irritation associated with respirator use; or

If they detect vapor or gas breakthrough, changes in breathing resistance, or leakage of the facepiece; or

To replace the respirator or the filter, cartridge, or canister elements.

If the employee detects vapor or gas breakthrough, changes in breathing resistance, or leakage of the facepiece, the employer must replace or repair the respirator before allowing the employee to return to the work area.

Procedures for IDLH atmospheres. For all IDLH atmospheres the employer shall ensure that:

One employee or, when needed, more than one employee is located outside the IDLH atmosphere;

Visual, voice, or signal line communication is maintained between the employee(s) in the IDLH atmosphere and the employee(s) located outside the IDLH atmosphere;

The employee(s) located outside the IDLH atmosphere are trained and equipped to provide effective emergency rescue;

The employer or designee is notified before the employee(s) located outside the IDLH atmosphere enter the IDLH atmosphere to provide emergency rescue;

The employer or designee authorized to do so by the employer, once notified, provides necessary assistance appropriate to the situation;

Employee(s) located outside the IDLH atmospheres are equipped with:

Pressure demand or other positive pressure SCBAs, or a pressure demand or other positive pressure supplied-air respirator with auxiliary SCBA; and either

Appropriate retrieval equipment for removing the employee(s) who enter(s) these hazardous atmospheres where retrieval equipment would contribute to the rescue of the employee(s) and would not increase the overall risk resulting from entry; or

Equivalent means for rescue where retrieval equipment is not required under paragraph (g)(3)(vi)(B).

Procedures for interior structural firefighting. In addition to the requirements set forth under paragraph (g)(3), in interior structural fires, the employer shall ensure that:
1910.134(g)(4)(i) At least two employees enter the IDLH atmosphere and remain in visual or voice contact with one another at all times;

1910.134(g)(4)(ii) At least two employees are located outside the IDLH atmosphere; and

1910.134(g)(4)(iii) All employees engaged in interior structural firefighting use SCBAs.

Note 1 to paragraph (g): One of the two individuals located outside the IDLH atmosphere may be assigned to an additional role, such as incident commander in charge of the emergency or safety officer, so long as this individual is able to perform assistance or rescue activities without jeopardizing the safety or health of any firefighter working at the incident.

Note 2 to paragraph (g): Nothing in this section is meant to preclude firefighters from performing emergency rescue activities before an entire team has assembled.

1910.134(h) Maintenance and care of respirators. This paragraph requires the employer to provide for the cleaning and disinfecting, storage, inspection, and repair of respirators used by employees.

1910.134(h)(1) Cleaning and disinfecting. The employer shall provide each respirator user with a respirator that is clean, sanitary, and in good working order. The employer shall ensure that respirators are cleaned and disinfected using the procedures in Appendix B-2 of this section, or procedures recommended by the respirator manufacturer, provided that such procedures are of equivalent effectiveness. The respirators shall be cleaned and disinfected at the following intervals:

1910.134(h)(1)(i) Respirators issued for the exclusive use of an employee shall be cleaned and disinfected as often as necessary to be maintained in a sanitary condition;

1910.134(h)(1)(ii) Respirators issued to more than one employee shall be cleaned and disinfected before being worn by different individuals;

1910.134(h)(1)(iii) Respirators maintained for emergency use shall be cleaned and disinfected after each use; and

1910.134(h)(1)(iv) Respirators used in fit testing and training shall be cleaned and disinfected after each use.

1910.134(h)(2) Storage. The employer shall ensure that respirators are stored as follows:

1910.134(h)(2)(i) All respirators shall be stored to protect them from damage, contamination, dust, sunlight, extreme temperatures, excessive moisture, and damaging chemicals, and they shall be packed or stored to prevent deformation of the facepiece and exhalation valve.

1910.134(h)(2)(ii) In addition to the requirements of paragraph (h)(2)(i) of this section, emergency respirators shall be:

1910.134(h)(2)(ii)(A) Kept accessible to the work area;

1910.134(h)(2)(ii)(B) Stored in compartments or in covers that are clearly marked as containing emergency respirators; and

1910.134(h)(2)(ii)(C) Stored in accordance with any applicable manufacturer instructions.


1910.134(h)(3)(i) The employer shall ensure that respirators are inspected as follows:

1910.134(h)(3)(i)(A) All respirators used in routine situations shall be inspected before each use and during cleaning;

1910.134(h)(3)(i)(B) All respirators maintained for use in emergency situations shall be inspected before each use and during cleaning; and

1910.134(h)(3)(i)(C) All respirators maintained for use in emergency situations shall be inspected at least monthly and in accordance with the manufacturer’s recommendations, and shall be checked for proper function before and after each use; and

1910.134(h)(3)(i)(C) Emergency escape-only respirators shall be inspected before being carried into the workplace for use.

1910.134(h)(3)(ii) The employer shall ensure that respirator inspections include the following:
A check of respirator function, tightness of connections, and the condition of the various parts including, but not limited to, the facepiece, head straps, valves, connecting tube, and cartridges, canisters or filters; and

A check of elastomeric parts for pliability and signs of deterioration.

In addition to the requirements of paragraphs (h)(3)(i) and (ii) of this section, self-contained breathing apparatus shall be inspected monthly. Air and oxygen cylinders shall be maintained in a fully charged state and shall be recharged when the pressure falls to 90% of the manufacturer’s recommended pressure level. The employer shall determine that the regulator and warning devices function properly.

For respirators maintained for emergency use, the employer shall:

Certify the respirator by documenting the date the inspection was performed, the name (or signature) of the person who made the inspection, the findings, required remedial action, and a serial number or other means of identifying the inspected respirator; and

Provide this information on a tag or label that is attached to the storage compartment for the respirator, is kept with the respirator, or is included in inspection reports stored as paper or electronic files. This information shall be maintained until replaced following a subsequent certification.

Repairs. The employer shall ensure that respirators that fail an inspection or are otherwise found to be defective are removed from service, and are discarded or repaired or adjusted in accordance with the following procedures:

Repairs or adjustments to respirators are to be made only by persons appropriately trained to perform such operations and shall use only the respirator manufacturer’s NIOSH-approved parts designed for the respirator;

Repairs shall be made according to the manufacturer’s recommendations and specifications for the type and extent of repairs to be performed; and

Reducing and admission valves, regulators, and alarms shall be adjusted or repaired only by the manufacturer or a technician trained by the manufacturer.

Breathing air quality and use.

This paragraph requires the employer to provide employees using atmosphere-supplying respirators (supplied-air and SCBA) with breathing gases of high purity.

The employer shall ensure that compressed air, compressed oxygen, liquid air, and liquid oxygen used for respiration accords with the following specifications:

Compressed and liquid oxygen shall meet the United States Pharmacopoeia requirements for medical or breathing oxygen; and

Compressed breathing air shall meet at least the requirements for Grade D breathing air described in ANSI/Compressed Gas Association Commodity Specification for Air, G-7.1-1989, to include:

Oxygen content (v/v) of 19.5-23.5%;

Hydrocarbon (condensed) content of 5 milligrams per cubic meter of air or less;

Carbon monoxide (CO) content of 10 ppm or less;

Carbon dioxide content of 1,000 ppm or less; and

Lack of noticeable odor.

The employer shall ensure that compressed oxygen is not used in atmosphere-supplying respirators that have previously used compressed air.
1910.134(i)(3) The employer shall ensure that oxygen concentrations greater than 23.5% are used only in equipment designed for oxygen service or distribution.

1910.134(i)(4) The employer shall ensure that cylinders used to supply breathing air to respirators meet the following requirements:

1910.134(i)(4)(i) Cylinders are tested and maintained as prescribed in the Shipping Container Specification Regulations of the Department of Transportation (49 CFR part 173 and part 178);

1910.134(i)(4)(ii) Cylinders of purchased breathing air have a certificate of analysis from the supplier that the breathing air meets the requirements for Grade D breathing air; and

1910.134(i)(4)(iii) The moisture content in the cylinder does not exceed a dew point of -50 deg.F (-45.6 deg.C) at 1 atmosphere pressure.

1910.134(i)(5) The employer shall ensure that compressors used to supply breathing air to respirators are constructed and situated so as to:

1910.134(i)(5)(i) Prevent entry of contaminated air into the air-supply system;

1910.134(i)(5)(ii) Minimize moisture content so that the dew point at 1 atmosphere pressure is 10 degrees F (5.56 deg.C) below the ambient temperature;

1910.134(i)(5)(iii) Have suitable in-line air-purifying sorbent beds and filters to further ensure breathing air quality. Sorbent beds and filters shall be maintained and replaced or refurbished periodically following the manufacturer’s instructions.

1910.134(i)(5)(iv) Have a tag containing the most recent change date and the signature of the person authorized by the employer to perform the change. The tag shall be maintained at the compressor.

1910.134(i)(6) For compressors that are not oil-lubricated, the employer shall ensure that carbon monoxide levels in the breathing air do not exceed 10 ppm.

1910.134(i)(7) For oil-lubricated compressors, the employer shall use a high-temperature or carbon monoxide alarm, or both, to monitor carbon monoxide levels. If only high-temperature alarms are used, the air supply shall be monitored at intervals sufficient to prevent carbon monoxide in the breathing air from exceeding 10 ppm.

1910.134(i)(8) The employer shall ensure that breathing air couplings are incompatible with outlets for nonrespirable worksite air or other gas systems. No asphyxiating substance shall be introduced into breathing air lines.

1910.134(i)(9) The employer shall use breathing gas containers marked in accordance with the NIOSH respirator certification standard, 42 CFR part 84.


The employer shall ensure that all filters, cartridges and canisters used in the workplace are labeled and color coded with the NIOSH approval label and that the label is not removed and remains legible.

1910.134(k) Training and information.

This paragraph requires the employer to provide effective training to employees who are required to use respirators. The training must be comprehensive, understandable, and recur annually, and more often if necessary. This paragraph also requires the employer to provide the basic information on respirators in Appendix D of this section to employees who wear respirators when not required by this section or by the employer to do so.

1910.134(k)(1) The employer shall ensure that each employee can demonstrate knowledge of at least the following:

1910.134(k)(1)(i) Why the respirator is necessary and how improper fit, usage, or maintenance can compromise the protective effect of the respirator;

1910.134(k)(1)(ii) What the limitations and capabilities of the respirator are;
1910.134(k)(1)(iii) How to use the respirator effectively in emergency situations, including situations in which the respirator malfunctions;

1910.134(k)(1)(iv) How to inspect, put on and remove, use, and check the seals of the respirator;

1910.134(k)(1)(v) What the procedures are for maintenance and storage of the respirator;

1910.134(k)(1)(vi) How to recognize medical signs and symptoms that may limit or prevent the effective use of respirators; and

1910.134(k)(1)(vii) The general requirements of this section.

1910.134(k)(2) The training shall be conducted in a manner that is understandable to the employee.

1910.134(k)(3) The employer shall provide the training prior to requiring the employee to use a respirator in the workplace.

1910.134(k)(4) An employer who is able to demonstrate that a new employee has received training within the last 12 months that addresses the elements specified in paragraph (k)(1)(i) through (vii) is not required to repeat such training provided that, as required by paragraph (k)(1), the employee can demonstrate knowledge of those element(s). Previous training not repeated initially by the employer must be provided no later than 12 months from the date of the previous training.

1910.134(k)(5) Retraining shall be administered annually, and when the following situations occur:

1910.134(k)(5)(i) Changes in the workplace or the type of respirator render previous training obsolete;

1910.134(k)(5)(ii) Inadequacies in the employee’s knowledge or use of the respirator indicate that the employee has not retained the requisite understanding or skill; or

1910.134(k)(5)(iii) Any other situation arises in which retraining appears necessary to ensure safe respirator use.

1910.134(k)(6) The basic advisory information on respirators, as presented in Appendix D of this section, shall be provided by the employer in any written or oral format, to employees who wear respirators when such use is not required by this section or by the employer.

1910.134(l) Program evaluation.
This section requires the employer to conduct evaluations of the workplace to ensure that the written respiratory protection program is being properly implemented, and to consult employees to ensure that they are using the respirators properly.

1910.134(l)(1) The employer shall conduct evaluations of the workplace as necessary to ensure that the provisions of the current written program are being effectively implemented and that it continues to be effective.

1910.134(l)(2) The employer shall regularly consult employees required to use respirators to assess the employees’ views on program effectiveness and to identify any problems. Any problems that are identified during this assessment shall be corrected. Factors to be assessed include, but are not limited to:

1910.134(l)(2)(i) Respirator fit (including the ability to use the respirator without interfering with effective workplace performance);

1910.134(l)(2)(ii) Appropriate respirator selection for the hazards to which the employee is exposed;

1910.134(l)(2)(iii) Proper respirator use under the workplace conditions the employee encounters; and


1910.134(m) Recordkeeping.
This section requires the employer to establish and retain written information regarding medical evaluations, fit testing, and the respirator program. This in-
formation will facilitate employee involvement in the respirator program, assist the employer in auditing the adequacy of the program, and provide a record for compliance determinations by OSHA.

1910.134(m)(1) **Medical evaluation.** Records of medical evaluations required by this section must be retained and made available in accordance with 29 CFR 1910.1020.

1910.134(m)(2) **Fit testing.**

1910.134(m)(2)(i) The employer shall establish a record of the qualitative and quantitative fit tests administered to an employee including:

1910.134(m)(2)(i)(A) The name or identification of the employee tested;

1910.134(m)(2)(i)(B) Type of fit test performed;

1910.134(m)(2)(i)(C) Specific make, model, style, and size of respirator tested;

1910.134(m)(2)(i)(D) Date of test; and

1910.134(m)(2)(i)(E) The pass/fail results for QLFTs or the fit factor and strip chart recording or other recording of the test results for QNFTs.

1910.134(m)(2)(ii) Fit test records shall be retained for respirator users until the next fit test is administered.

1910.134(m)(3) A written copy of the current respirator program shall be retained by the employer.

1910.134(m)(4) Written materials required to be retained under this paragraph shall be made available upon request to affected employees and to the Assistant Secretary or designee for examination and copying.

1910.134(n) **Effective date.** Paragraphs (d)(3)(i)(A) and (d)(3)(i)(B) of this section become effective November 22, 2006.

1910.134(o) **Appendices.**

1910.134(o)(1) Compliance with Appendix A, Appendix B-1, Appendix B-2, and Appendix C of this section is mandatory.

1910.134(o)(2) Appendix D of this section is non-mandatory and is not intended to create any additional obligations not otherwise imposed or to detract from any existing obligations.

[63 FR 1152, Jan. 8, 1998; 63 FR 20098, April 23, 1998; 71 FR 16672, April 3, 2006; 71 FR 50187, August 24, 2006]
Appendix A to §1910.134: Fit Testing Procedures (Mandatory)

Part I. OSHA-Accepted Fit Test Protocols

A. Fit Testing Procedures -- General Requirements

The employer shall conduct fit testing using the following procedures. The requirements in this appendix apply to all OSHA-accepted fit test methods both QLFT and QNFT.

1. The test subject shall be allowed to pick the most acceptable respirator from a sufficient number of respirator models and sizes so that the respirator is acceptable to, and correctly fits, the user.

2. Prior to the selection process, the test subject shall be shown how to put on a respirator, how it should be positioned on the face, how to set strap tension and how to determine an acceptable fit. A mirror shall be available to assist the subject in evaluating the fit and positioning of the respirator. This instruction may not constitute the subject's formal training on respirator use, because it is only a review.

3. The test subject shall be informed that he/she is being asked to select the respirator that provides the most acceptable fit. Each respirator represents a different size and shape, and if fitted and used properly, will provide adequate protection.

4. The test subject shall be instructed to hold each chosen facepiece up to the face and eliminate those that obviously do not give an acceptable fit.

5. The more acceptable facepieces are noted in case the one selected proves unacceptable; the most comfortable mask is donned and worn at least five minutes to assess comfort. Assistance in assessing comfort can be given by discussing the points in the following item A.6. If the test subject is not familiar with using a particular respirator, the test subject shall be directed to don the mask several times and to adjust the straps each time to become adept at setting proper tension on the straps.

6. Assessment of comfort shall include a review of the following points with the test subject and allowing the test subject adequate time to determine the comfort of the respirator:
   (a) Position of the mask on the nose
   (b) Room for eye protection
   (c) Room to talk
   (d) Position of mask on face and cheeks

7. The following criteria shall be used to help determine the adequacy of the respirator fit:
   (a) Chin properly placed;
   (b) Adequate strap tension, not overly tightened;
   (c) Fit across nose bridge;
   (d) Respirator of proper size to span distance from nose to chin;
   (e) Tendency of respirator to slip;
   (f) Self-observation in mirror to evaluate fit and respirator position.

8. The test subject shall conduct a user seal check, either the negative and positive pressure seal checks described in Appendix B-1 of this section or those recommended by the respirator manufacturer which provide equivalent protection to the procedures in Appendix B-1. Before conducting the negative and positive pressure checks, the subject shall be told to seat the mask on the face by moving the head from side-to-side and up and down slowly while taking in a few slow deep breaths. Another facepiece shall be selected and retested if the test subject fails the user seal check tests.

9. The test shall not be conducted if there is any hair growth between the skin and the facepiece sealing surface, such as stubble beard growth, beard, mustache or sideburns which cross the respirator sealing surface. Any type of apparel which interferes with a satisfactory fit shall be altered or removed.

10. If a test subject exhibits difficulty in breathing during the tests, she or he shall be referred to a physician or other licensed health care professional, as appropriate, to determine whether the test subject can wear a respirator while performing her or his duties.

11. If the employee finds the fit of the respirator unacceptable, the test subject shall be given the opportunity to select a different respirator and to be retested.

12. Exercise regimen. Prior to the commencement of the fit test, the test subject shall be given a description of the fit test and the test subject's responsibilities during the test procedure. The description of the process shall include a description of the test exercises that the subject will be performing. The respirator to be tested shall be worn for at least 5 minutes before the start of the fit test.

13. The fit test shall be performed while the test subject is wearing any applicable safety equipment that may be worn during actual respirator use which could interfere with respirator fit.
14. Test Exercises.

(a) Employers must perform the following test exercises for all fit testing methods prescribed in this appendix, except for the CNP quantitative fit testing protocol and the CNP REDON quantitative fit testing protocol. For these two protocols, employers must ensure that the test subjects (i.e., employees) perform the exercise procedure specified in Part I.C.4(b) of this appendix for the CNP quantitative fit testing protocol, or the exercise procedure described in Part I.C.5(b) of this appendix for the CNP REDON quantitative fit-testing protocol. For the remaining fit testing methods, employers must ensure that employees perform the test exercises in the appropriate test environment in the following manner:

(1) Normal breathing. In a normal standing position, without talking, the subject shall breathe normally.

(2) Deep breathing. In a normal standing position, the subject shall breathe slowly and deeply, taking caution so as not to hyperventilate.

(3) Turning head side to side. Standing in place, the subject shall slowly turn his/her head from side to side between the extreme positions on each side. The head shall be held at each extreme momentarily so the subject can inhale at each side.

(4) Moving head up and down. Standing in place, the subject shall slowly move his/her head up and down. The subject shall be instructed to inhale in the up position (i.e., when looking toward the ceiling).

(5) Talking. The subject shall talk out loud slowly and loud enough so as to be heard clearly by the test conductor. The subject can read from a prepared text such as the Rainbow Passage, count backward from 100, or recite a memorized poem or song.

Rainbow Passage

When the sunlight strikes raindrops in the air, they act like a prism and form a rainbow. The rainbow is a division of white light into many beautiful colors. These take the shape of a long round arch, with its path high above, and its two ends apparently beyond the horizon. There is, according to legend, a boiling pot of gold at one end. People look, but no one ever finds it. When a man looks for something beyond reach, his friends say he is looking for the pot of gold at the end of the rainbow.

(6) Grimace. The test subject shall grimace by smiling or frowning. (This applies only to QNFT testing; it is not performed for QLFT)

(7) Bending over. The test subject shall bend at the waist as if he/she were to touch his/her toes. Jogging in place shall be substituted for this exercise in those test environments such as shroud type QNFT or QLFT units that do not permit bending over at the waist.

(8) Normal breathing. Same as exercise (1).

(b) Each test exercise shall be performed for one minute except for the grimace exercise which shall be performed for 15 seconds. The test subject shall be questioned by the test conductor regarding the comfort of the respirator upon completion of the protocol. If it has become unacceptable, another model of respirator shall be tried. The respirator shall not be adjusted once the fit test exercises begin. Any adjustment voids the test, and the fit test must be repeated.

B. Qualitative Fit Test (QLFT) Protocols

1. General

(a) The employer shall ensure that persons administering QLFT are able to prepare test solutions, calibrate equipment and perform tests properly, recognize invalid tests, and ensure that test equipment is in proper working order.

(b) The employer shall ensure that QLFT equipment is kept clean and well maintained so as to operate within the parameters for which it was designed.

2. Isoamyl Acetate Protocol

Note: This protocol is not appropriate to use for the fit testing of particulate respirators. If used to fit test particulate respirators, the respirator must be equipped with an organic vapor filter.

(a) Odor Threshold Screening

Odor threshold screening, performed without wearing a respirator, is intended to determine if the individual tested can detect the odor of isoamyl acetate at low levels.

(1) Three 1 liter glass jars with metal lids are required.
Odor-free water (e.g., distilled or spring water) at approximately 25 deg. C (77 deg. F) shall be used for the solutions.

The isoamyl acetate (IAA) (also known as isopentyl acetate) stock solution is prepared by adding 1 ml of pure IAA to 800 ml of odor-free water in a 1 liter jar, closing the lid and shaking for 30 seconds. A new solution shall be prepared at least weekly.

The screening test shall be conducted in a room separate from the room used for actual fit testing. The two rooms shall be well-ventilated to prevent the odor of IAA from becoming evident in the general room air where testing takes place.

The odor test solution is prepared in a second jar by placing 0.4 ml of the stock solution into 500 ml of odor-free water using a clean dropper or pipette. The solution shall be shaken for 30 seconds and allowed to stand for two to three minutes so that the IAA concentration above the liquid may reach equilibrium. This solution shall be used for only one day.

A test blank shall be prepared in a third jar by adding 500 cc of odor-free water.

The odor test and test blank jar lids shall be labeled (e.g., 1 and 2) for jar identification. Labels shall be placed on the lids so that they can be peeled off periodically and switched to maintain the integrity of the test.

The following instruction shall be typed on a card and placed on the table in front of the two test jars (i.e., 1 and 2): "The purpose of this test is to determine if you can smell banana oil at a low concentration. The two bottles in front of you contain water. One of these bottles also contains a small amount of banana oil. Be sure the covers are on tight, then shake each bottle for two seconds. Unscrew the lid of each bottle, one at a time, and sniff at the mouth of the bottle. Indicate to the test conductor which bottle contains banana oil."

The mixtures used in the IAA odor detection test shall be prepared in an area separate from where the test is performed, in order to prevent olfactory fatigue in the subject.

If the test subject is unable to correctly identify the jar containing the odor test solution, the IAA qualitative fit test shall not be performed.

If the test subject correctly identifies the jar containing the odor test solution, the test subject may proceed to respirator selection and fit testing.

(b) Isoamyl Acetate Fit Test

The fit test chamber shall be a clear 55-gallon drum liner suspended inverted over a 2-foot diameter frame so that the top of the chamber is about 6 inches above the test subject's head. If no drum liner is available, a similar chamber shall be constructed using plastic sheeting. The inside top center of the chamber shall have a small hook attached.

Each respirator used for the fitting and fit testing shall be equipped with organic vapor cartridges or offer protection against organic vapors.

After selecting, donning, and properly adjusting a respirator, the test subject shall wear it to the fit testing room. This room shall be separate from the room used for odor threshold screening and respirator selection, and shall be well-ventilated, as by an exhaust fan or lab hood, to prevent general room contamination.

A copy of the test exercises and any prepared text from which the subject is to read shall be taped to the inside of the test chamber.

Upon entering the test chamber, the test subject shall be given a 6-inch by 5-inch piece of paper towel, or other porous, absorbent, single-ply material, folded in half and wetted with 0.75 ml of pure IAA. The test subject shall hang the wet towel on the hook at the top of the chamber. An IAA test swab or ampule may be substituted for the IAA wetted paper towel provided it has been demonstrated that the alternative IAA source will generate an IAA test atmosphere with a concentration equivalent to that generated by the paper towel method.

Allow two minutes for the IAA test concentration to stabilize before starting the fit test exercises. This would be an appropriate time to talk with the test subject; to explain the fit test, the importance of his/her cooperation, and the purpose for the test exercises; or to demonstrate some of the exercises.

If at any time during the test, the subject detects the banana-like odor of IAA, the test is failed. The subject shall quickly exit from the
test chamber and leave the test area to avoid olfactory fatigue.

(8) If the test is failed, the subject shall return to the selection room and remove the respirator. The test subject shall repeat the odor sensitivity test, select and put on another respirator, return to the test area and again begin the fit test procedure described in (b) (1) through (7) above. The process continues until a respirator that fits well has been found. Should the odor sensitivity test be failed, the subject shall wait at least 5 minutes before retesting. Odor sensitivity will usually have returned by this time.

(9) If the subject passes the test, the efficiency of the test procedure shall be demonstrated by having the subject break the respirator face seal and take a breath before exiting the chamber.

(10) When the test subject leaves the chamber, the subject shall remove the saturated towel and return it to the person conducting the test, so that there is no significant IAA concentration buildup in the chamber during subsequent tests. The used towels shall be kept in a self-sealing plastic bag to keep the test area from being contaminated.

3. Saccharin Solution Aerosol Protocol

The entire screening and testing procedure shall be explained to the test subject prior to the conduct of the screening test.

(a) Taste threshold screening. The saccharin taste threshold screening, performed without wearing a respirator, is intended to determine whether the individual being tested can detect the taste of saccharin.

(1) During threshold screening as well as during fit testing, subjects shall wear an enclosure about the head and shoulders that is approximately 12 inches in diameter by 14 inches tall with at least the front portion clear and that allows free movements of the head when a respirator is worn. An enclosure substantially similar to the 3M hood assembly, parts # FT 14 and # FT 15 combined, is adequate.

(2) The test enclosure shall have a 3/4-inch (1.9 cm) hole in front of the test subject's nose and mouth area to accommodate the nebulizer nozzle.

(3) The test subject shall don the test enclosure. Throughout the threshold screening test, the test subject shall breathe through his/her slightly open mouth with tongue extended. The subject is instructed to report when he/she detects a sweet taste.

(4) Using a DeVilbiss Model 40 Inhalation Medication Nebulizer or equivalent, the test conductor shall spray the threshold check solution into the enclosure. The nozzle is directed away from the nose and mouth of the person. This nebulizer shall be clearly marked to distinguish it from the fit test solution nebulizer.

(5) The threshold check solution is prepared by dissolving 0.83 gram of sodium saccharin USP in 100 ml of warm water. It can be prepared by putting 1 ml of the fit test solution (see (b)(5) below) in 100 ml of distilled water.

(6) To produce the aerosol, the nebulizer bulb is firmly squeezed so that it collapses completely, then released and allowed to fully expand.

(7) Ten squeezes are repeated rapidly and then the test subject is asked whether the saccharin can be tasted. If the test subject reports tasting the sweet taste during the ten squeezes, the screening test is completed. The taste threshold is noted as ten regardless of the number of squeezes actually completed.

(8) If the first response is negative, ten more squeezes are repeated rapidly and the test subject is again asked whether the saccharin can be tasted. If the test subject reports tasting the sweet taste during the second ten squeezes, the screening test is completed. The taste threshold is noted as twenty regardless of the number of squeezes actually completed.

(9) If the second response is negative, ten more squeezes are repeated rapidly and the test subject is again asked whether the saccharin is tasted. If the test subject reports tasting the sweet taste during the third set of ten squeezes, the screening test is completed. The taste threshold is noted as thirty regardless of the number of squeezes actually completed.

(10) The test conductor will take note of the number of squeezes required to solicit a taste response.

(11) If the saccharin is not tasted after 30 squeezes (step 10), the test subject is unable to taste saccharin and may not perform the saccharin fit test.
Note to paragraph 3. (a): If the test subject eats or drinks something sweet before the screening test, he/she may be unable to taste the weak saccharin solution.

(12) If a taste response is elicited, the test subject shall be asked to take note of the taste for reference in the fit test.

(13) Correct use of the nebulizer means that approximately 1 ml of liquid is used at a time in the nebulizer body.

(14) The nebulizer shall be thoroughly rinsed in water, shaken dry, and refilled at least each morning and afternoon or at least every four hours.

(b) Saccharin solution aerosol fit test procedure.

(1) The test subject may not eat, drink (except plain water), smoke, or chew gum for 15 minutes before the test.

(2) The fit test uses the same enclosure described in 3. (a) above.

(3) The test subject shall don the enclosure while wearing the respirator selected in section I. A. of this appendix. The respirator shall be properly adjusted and equipped with a particulate filter(s).

(4) A second DeVilbiss Model 40 Inhalation Medication Nebulizer or equivalent is used to spray the fit test solution into the enclosure. This nebulizer shall be clearly marked to distinguish it from the screening test solution nebulizer.

(5) The fit test solution is prepared by adding 83 grams of sodium saccharin to 100 ml of warm water.

(6) As before, the test subject shall breathe through the slightly open mouth with tongue extended, and report if he/she tastes the sweet taste of saccharin.

(7) The nebulizer is inserted into the hole in the front of the enclosure and an initial concentration of saccharin fit test solution is sprayed into the enclosure using the same number of squeezes (either 10, 20 or 30 squeezes) based on the number of squeezes required to elicit a taste response as noted during the screening test. A minimum of 10 squeezes is required.

(8) After generating the aerosol, the test subject shall be instructed to perform the exercises in section I. A. 14.of this appendix.

(9) Every 30 seconds the aerosol concentration shall be replenished using one half the original number of squeezes used initially (e.g., 5, 10 or 15).

(10) The test subject shall indicate to the test conductor if at any time during the fit test the taste of saccharin is detected. If the test subject does not report tasting the saccharin, the test is passed.

(11) If the taste of saccharin is detected, the fit is deemed unsatisfactory and the test is failed. A different respirator shall be tried and the entire test procedure is repeated (taste threshold screening and fit testing).

(12) Since the nebulizer has a tendency to clog during use, the test operator must make periodic checks of the nebulizer to ensure that it is not clogged. If clogging is found at the end of the test session, the test is invalid.

4. BitrexTM (Denatonium Benzoate) Solution Aerosol Qualitative Fit Test Protocol

The BitrexTM (Denatonium benzoate) solution aerosol QLFT protocol uses the published saccharin test protocol because that protocol is widely accepted. Bitrex is routinely used as a taste aversion agent in household liquids which children should not be drinking and is endorsed by the American Medical Association, the National Safety Council, and the American Association of Poison Control Centers. The entire screening and testing procedure shall be explained to the test subject prior to the conduct of the screening test.

(a) Taste Threshold Screening.

The Bitrex taste threshold screening, performed without wearing a respirator, is intended to determine whether the individual being tested can detect the taste of Bitrex.

(1) During threshold screening as well as during fit testing, subjects shall wear an enclosure about the head and shoulders that is approximately 12 inches (30.5 cm) in diameter by 14 inches (35.6 cm) tall. The front portion of the enclosure shall be clear from the respirator and allow free movement of the head when a respirator is worn. An enclosure substantially similar
to the 3M hood assembly

Shortness of breath that interferes with your job: Yes/No
Coughing that produces phlegm (thick sputum): Yes/No
Coughing that wakes you early in the morning: Yes/No
Coughing that occurs mostly when you are lying down: Yes/No
Coughing up blood in the last month: Yes/No
Wheezing: Yes/No
Wheezing that interferes with your job: Yes/No
Chest pain when you breathe deeply: Yes/No
Any other symptoms that you think may be related to lung problems: Yes/No

5. Have you ever had any of the following cardiovascular or heart problems?
   Heart attack: Yes/No
   Stroke: Yes/No
   Angina: Yes/No
   Heart failure: Yes/No
   Swelling in your legs or feet (not caused by walking): Yes/No
   Heart arrhythmia (heart beating irregularly): Yes/No
   High blood pressure: Yes/No
   Any other heart problem that you’ve been told about: Yes/No

6. Have you ever had any of the following cardiovascular or heart symptoms?
   Frequent pain or tightness in your chest: Yes/No
   Pain or tightness in your chest during physical activity: Yes/No
   Pain or tightness in your chest that interferes with your job: Yes/No
   In the past two years, have you noticed your heart skipping or missing a beat: Yes/No
   Heartburn or indigestion that is not related to eating: Yes/No
   Any other symptoms that you think may be related to heart or circulation problems: Yes/No

7. Do you currently take medication for any of the following problems?
   Breathing or lung problems: Yes/No
   Heart trouble: Yes/No
   Blood pressure: Yes/No
   Seizures (fits): Yes/No

8. If you’ve used a respirator, have you ever had any of the following problems? (If you’ve never used a respirator, check the following space and go to question 9:)
   Eye irritation: Yes/No
   Skin allergies or rashes: Yes/No
   Anxiety: Yes/No
   General weakness or fatigue: Yes/No
   Any other problem that interferes with your use of a respirator: Yes/No

9. Would you like to talk to the health care professional who will review this questionnaire about your answers to this questionnaire: Yes/No

Questions 10 to 15 below must be answered by every employee who has been selected to use either a full-facepiece respirator or a self-contained breathing apparatus (SCBA). For employees who have been selected to use other types of respirators, answering these questions is voluntary.

10. Have you ever lost vision in either eye (temporarily or permanently): Yes/No

11. Do you currently have any of the following vision problems?
   Wear contact lenses: Yes/No
   Wear glasses: Yes/No
   Color blind: Yes/No
   Any other eye or vision problem: Yes/No

12. Have you ever had an injury to your ears, including a broken ear drum: Yes/No

13. Do you currently have any of the following hearing problems?
   Difficulty hearing: Yes/No
   Wear a hearing aid: Yes/No
   Any other hearing or ear problem: Yes/No

14. Have you ever had a back injury: Yes/No

15. Do you currently have any of the following musculoskeletal problems?
   Weakness in any of your arms, hands, legs, or feet: Yes/No
Back pain: Yes/No
Difficulty fully moving your arms and legs: Yes/No
Pain or stiffness when you lean forward or backward at the waist: Yes/No
Difficulty fully moving your head up or down: Yes/No
Difficulty fully moving your head side to side: Yes/No
Difficulty bending at your knees: Yes/No
Difficulty squatting to the ground: Yes/No
Climbing a flight of stairs or a ladder carrying More than 25 lbs: Yes/No
Any other muscle or skeletal problem that interferes with using a respirator: Yes/No
If “yes,” describe these exposures:_________________
__________________________________________

4. List any second jobs or side businesses you have:_________________
__________________________________________

5. List your previous occupations:_________________
__________________________________________

6. List your current and previous hobbies:_________________
__________________________________________

7. Have you been in the military services? Yes/No
If “yes,” were you exposed to biological or chemical agents (either in training or combat): Yes/No

8. Have you ever worked on a HAZMAT team? Yes/No

9. Other than medications for breathing and lung problems, heart trouble, blood pressure, and seizures mentioned earlier in this questionnaire, are you taking any other medications for any reason (including over-the-counter medications): Yes/No
If “yes,” name the medications if you know them:_________________
__________________________________________

10. Will you be using any of the following items with your respirator(s)?
HEPA Filters: Yes/No
Canisters (for example, gas masks): Yes/No
Cartridges: Yes/No

11. How often are you expected to use the respirator(s) (circle “yes” or “no” for all answers that apply to you)?:
Escape only (no rescue): Yes/No
Emergency rescue only: Yes/No
Less than 5 hours per week: Yes/No
Less than 2 hours per day: Yes/No
2 to 4 hours per day: Yes/No
Over 4 hours per day: Yes/No

12. During the period you are using the respirator(s), is your work effort:
Light (less than 200 kcal per hour): Yes/No
If “yes,” how long does this period last during the average shift:__________ hrs.__________ mins.
Examples of a light work effort are sitting while
writing, typing, drafting, or performing light assembly work; or standing while operating a drill press (1-3 lbs.) or controlling machines.

Moderate (200 to 350 kcal per hour): Yes/No

If “yes,” how long does this period last during the average shift: ________ hrs. ________ mins.

Examples of moderate work effort are sitting while nailing or filing; driving a truck or bus in urban traffic; standing while drilling, nailing, performing assembly work, or transferring a moderate load (about 35 lbs.) at trunk level; walking on a level surface about 2 mph or down a 5-degree grade about 3 mph; or pushing a wheelbarrow with a heavy load (about 100 lbs.) on a level surface.

Heavy (above 350 kcal per hour): Yes/No

If “yes,” how long does this period last during the average shift: ________ hrs. ________ mins.

Examples of heavy work are lifting a heavy load (about 50 lbs.) from the floor to your waist or shoulder; working on a loading dock; shoveling; standing while bricklaying or chipping castings; walking up an 8-degree grade about 2 mph; climbing stairs with a heavy load (about 50 lbs.).

13. Will you be wearing protective clothing and/or equipment (other than the respirator) when you’re using your respirator: Yes/No

If “yes,” describe this protective clothing and/or equipment: ____________________________

14. Will you be working under hot conditions (temperature exceeding 77 deg. F): Yes/No

15. Will you be working under humid conditions: Yes/No

16. Describe the work you’ll be doing while you’re using your respirator(s): ____________________________

17. Describe any special or hazardous conditions you might encounter when you’re using your respirator(s) (for example, confined spaces, life-threatening gases): ____________________________

18. Provide the following information, if you know it, for each toxic substance that you’ll be exposed to when you’re using your respirator(s):

   Name of the first toxic substance: ____________________________
   Estimated maximum exposure level per shift: ____________________________
   Duration of exposure per shift: ____________________________
   Name of the second toxic substance: ____________________________
   Estimated maximum exposure level per shift: ____________________________
   Duration of exposure per shift: ____________________________
   Name of the third toxic substance: ____________________________
   Estimated maximum exposure level per shift: ____________________________
   Duration of exposure per shift: ____________________________
   The name of any other toxic substances that you’ll be exposed to while using your respirator: ____________________________

19. Describe any special responsibilities you’ll have while using your respirator(s) that may affect the safety and well-being of others (for example, rescue, security): ____________________________

20. Describe any special or hazardous conditions you might encounter when you’re using your respirator(s) (for example, confined spaces, life-threatening gases): ____________________________
Appendix D to §1910.134: Information for Employees Using Respirators When Not Required Under the Standard (Mandatory)

Respirators are an effective method of protection against designated hazards when properly selected and worn. Respirator use is encouraged, even when exposures are below the exposure limit to provide an additional level of comfort and protection for workers. However, if a respirator is used improperly or not kept clean, the respirator itself can become a hazard to the worker. Sometimes, workers may wear respirators to avoid exposures to hazards, even if the amount of hazardous substance does not exceed the limits set by OSHA standards. If your employer provides respirators for your voluntary use, or if you provide your own respirator, you need to take certain precautions to be sure that the respirator itself does not present a hazard.

You should do the following:

1. Read and heed all instructions provided by the manufacturer on use, maintenance, cleaning and care, and warnings regarding the respirator's limitations.

2. Choose respirators certified for use to protect against the contaminant of concern. NIOSH, the National Institute for Occupational Safety and Health of the U.S. Department of Health and Human Services, certifies respirators. A label or statement of certification should appear on the respirator or respirator packaging. It will tell you what the respirator is designed for and how much it will protect you.

3. Do not wear your respirator into atmospheres containing contaminants for which your respirator is not designed to protect against. For example, a respirator designed to filter dust particles will not protect you against gases, vapors, or very small solid particles of fumes or smoke.

4. Keep track of your respirator so that you do not mistakenly use someone else's respirator.