Respiratory Protection Program

Department of Environmental Health & Safety
AUG 2020 Version 1

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RECORD OF REVISIONS

Version	By	Date	Description of Revision
0	RL	04/2019	Completely re-written program for simplification.
1.0	RL	08/2020	Added section 6.1 for mandatory language for voluntary use of respirators, section 8.0 to account for wildfire events, and Appendices A and B (Employee Protection from Wildfire Smoke and How to Don/Doff Disposable Respirators).

Legend:

RL: Ruth LeBlanc, Director of EH&S

DEFINITIONS

Approved - Tested and listed as satisfactory by the National Institute for Occupational Safety and Health (NIOSH).

Cartridge - A small container filled with air-purifying media.

Contaminant - A harmful, irritating, or nuisance agent that is foreign to the normal atmosphere.

Exhalation Valve - A device that allows exhaled air to leave a respiratory device and prevents outside air from entering through the valve.

Face piece - The portion of a respiratory that covers the wearer's nose, mouth, and eyes in a full-face piece. It is designed to make a gas-tight or dust-tight fit with the face and includes the headbands, exhalation valve(s), and connections for an air-purifying device.

Filter - A fibrous medium used in respirators to remove solid or liquid particles from the air stream entering the respiratory enclosure.

National Institute for Occupational Safety and Health (NIOSH) - A Federal agency that tests, approves, and certifies respiratory protection equipment.

Particulate Matter - A suspension of fine solid or liquid particles in air, such as dust, fog, fume, mist, smoke, or sprays.

Qualitative Fit Test - A test procedure to determine the effectiveness of the seal between the face and the wearer's face, usually performed during the fitting process.

Respirator - A device designed to protect the wearer from inhalation of harmful atmospheres.

Vapor - The gaseous state of a substance that is solid or liquid at ordinary temperature and pressure

1.0 INTRODUCTION

In order to control the risk of inhaling air contaminated with hazardous dust, pesticides, vapors, smoke, gases, mists, or fumes, the primary objective should be to prevent atmospheric contamination. This goal may be accomplished by providing protection through the use of proper engineering controls such as exhaust systems or fume hoods. Another step to ensure that the potential for hazardous atmospheres does not exist is by promoting administrative controls such as substituting a harmful material with a less toxic substance, and/or shift rotations to reduce employee's amount of exposure. Finally, if the above techniques cannot be met the use of personal respiratory protection equipment is necessary.

At Sonoma State University, only air purified respirators will be used. Individual department supervisors and/or managers will determine if air-purifying respirators will be required for an employee's use. While specific job duties may not require the use of a respirator to be used daily, the occasional use of a respirator will require the employee to be a part of the Respiratory Protection Program.

The first process in respirator selection and usage is a medical examination. A medical examination is conducted to determine if the employee is capable of utilizing a respirator safely. Upon passing the medical examination and/or the medical questionnaire, the Department of Environmental Health and Safety (EHS) will conduct or assign training on the Respiratory Protection Program. Upon completion of employee training, the Department of Environmental Health and Safety will conduct a fit test for University employees with their designated respirator. Upon passing the medical examination, training of the Respiratory Protection Program, and the fit test, the employee may use the respirator for task where respiratory protection is required.

Activities involving the use of respiratory protection equipment are conducted in compliance with Title 8, Section 5144 and Title 3, Section 6739 of the California Code of Regulations (CCR), and Title 29, Section 10910.134 of the Code of Federal Regulations (CFR). For more information regarding respiratory protection regulations please refer to the regulations noted above.

2.0 RESPONSIBILITIES

2.1 Environmental Health and Safety

- Develop, implement, and update as necessary a written Respiratory Protection Program.
- Provide or assign initial and annual respirator training which will include: use, maintenance, storage, limitations and capabilities.
- Conduct initial, annual, and other required fit tests for employee's who utilize respiratory protective equipment.
- Coordinate medical evaluations for employee's required to use a respirator.
- Conduct inspections, upon request, for respiratory equipment usage, maintenance, and storage.

2.2 Supervisor

- Identify those employees that may need respiratory protective equipment.
- Notify EHS of the need for respiratory equipment for individual employees.
- Notify EHS if there are any changes to work environments that may present new respiratory hazards.
- Purchase respirators, filters, cartridges, and respirator cleaning supplies.
- Conduct periodic inspections of respirators to ensure the devices are kept in good condition and maintained in a sanitary manner.

2.3 Employee

- Utilize the issued respirator in accordance with instructions and training provided by EHS.
- Ensure proper respiratory maintenance such as storage, cleaning and disinfecting.
- Notify supervisor if there are any changes to health that may prevent respiratory protector's effectiveness.
- Follow the guidance provided in this program.

3.0 MEDICAL EVALUATIONS

It is the University's responsibility to provide medical evaluations to determine the employee's ability to use a respirator before the employee is fit tested or required to use a respirator in the workplace. Each employee whose duties require the use of a respirator is required to complete a medical examination by a Physician or Other Licensed Health Care Professional (PLHCP) before using a respirator. This confidential medical examination will consist of a Medical Evaluation Questionnaire and satisfactory completion of a pulmonary function test. A copy of the Respirator Medical Evaluation Questionnaire is available by contacting EHS. After the medical evaluation the PLHCP will submit a Health Status Medical Report to EHS.

3.1 Visual Impairment

3.1.1 Contact Lens

- Contact lenses are not be permitted while wearing a full-face piece respirator, helmet, hood or suit.

3.1.2 Prescription Glasses

- Prescription eyeglasses with temple bars must not be used while wearing a full-face piece respirator.
- As a temporary measure, glasses with short temple bars may be taped to the respirator wearer's head.
- Special corrective lenses, which are made to be mounted inside a full-face piece, must be used by a person who needs corrective lenses.

3.2 Additional Medical Evaluations

Additional Medical Evaluations shall be conducted if any of the following exist:

- An employee reports medical signs or symptoms that change their ability to use a respirator.
- A doctor, supervisor, or respirator protection program administrator informs the employee they need to be re-evaluated.
- Information from the Respiratory Protection Program, including observations made during fit testing and program evaluation indicates a need for employee reevaluation.
- A change occurs in workplace conditions such as physical work effort, protective clothing, temperature, or any other situation which may result in a substantial increase in the physiological burden placed on an employee.

4.0 FIT TESTING PROCEDURES

It is only when a respirator fits properly that it protects the employee. Many different factors can affect the fit of the respirator, such as face shape, facial hair, eye glasses, missing teeth, and certain skin conditions. In addition, facial hair or any facial condition that interferes with the proper seal of the respirator to the face will not be permitted to wear a respirator and a fit test will not be conducted. When choosing a respirator, it must fit properly and provide protection from the specific type of contaminant.

When an employee requires a fit test, the employee must provide their designated respirator for use during the test. A pre-fit assessment, fit testing exercises, and a quantitative or qualitative test will be performed.

4.1 General Requirements

4.1.1 Pre-Fit Assessment

The respirator must be donned and worn to assess comfort prior to the fit test. During this time, assessment on the comfort of the respirator will be conducted. This assessment includes the following:

- The position of the mask on the nose;
- Room for eye protection;
- Room to talk; and
- Position of mask on face and cheeks.

The following criteria will help determine the adequacy of the respirator fit:

- Chin properly placed;
- Adequate strap tension, not overly tightened;
- Fit across nose bridge;
- Respirator of proper size to span distance from nose to chin;
- Tendency of respirator to slip; and
- Self-observation in mirror to evaluate fit and respirator position.

4.1.2 Fit Testing Exercises

The respirator must be worn for 5-minutes before fit testing exercises begin. The fit test exercises consist of the following (each exercise shall be performed for one minute except for the grimace exercise which shall be performed for 15-seconds):

- Normal breathing: In a normal standing position, without talking, the subject shall breathe normally.
- Deep breathing: In a normal standing position, the subject shall breathe slowly and deeply.
- Standing in place and turning head from side to side.

- Standing in place and moving head up and down.
- Talking: Speaking out loud slowly and loud enough to be heard clearly, the subject shall read the Rainbow Passage. (Text to be provided at time of fit test.)
- Grimace: The test subject shall grimace by smiling or frowning.
- Standing in a bent over position: The employee will bend at the waist and touch their toes.
- Normal breathing for conclusion of the fit test.

4.1.3 Positive/Negative Pressure Test

A positive or negative pressure test will be performed as part of the fit testing protocol.

4.1.4 Qualitative Fit Testing

Qualitative fit testing is a pass or fail test that relies on the sensory response of the individual being tested to detect the agent being introduced. The protocol outlined by OSHA for respirator fit testing is followed using an irritant smoke.

4.1.5 Quantitative Fit Testing

Quantitative fit testing measures the effectiveness of the respirator seal in the ambient atmosphere. A special device is used to measure the pressure concentration both outside the mask and inside the mask. This ratio is known as the fit factor. A fit factor of 100 is considered for passing in a half face respirator and a 500 fit factor minimum for passing in a full-face respirator based on regulatory guidelines.

4.2 Repeated Fit Testing

Fit testing must be repeated at least annually or sooner if there is any change to an employee's health or environment. Some of these changes include, weight change of 20-pounds or more, significant facial scarring, significant dental changes, cosmetic surgery, and any other condition that may interfere with the seal. If an employee experiences changes in work conditions, degree of exposure, or stress that may affect the effectiveness of the respirator, they need to be re-evaluated.

4.3 Facial Hair & Seal Integrity

Facial hair prevents a proper face-to-face piece seal. A respirator equipped with a face piece must not be worn:

- If facial hair is between the sealing periphery of the face piece and the face, or;
- If the facial hair interferes with the valve function. (ANSI 3.5.8, Z88.2-1980)

5.0 RESPIRATOR SELECTION

Each respirator issued is equipped with a filter cartridge(s) for the specific hazard to be protected against. Respiratory protective equipment such as air supplied respirators, which include airline respirators, and Self-Contained Breathing Apparatus (SCBA), that are used when ambient air is harmful to breathe, will NOT be used by University employees. If conditions exist where there is the possibility that air supplied respirators are necessary, emergency personnel will respond appropriately.

5.1 General Requirements to Follow when Selecting a Respirator

Respirators must be worn based on the hazard to which the worker is (or has the potential to be) exposed to, the workplace and the possibility of the work performed to affect the respirator's reliability.

Respirators shall be National Institute for Occupational Safety & Health (NIOSH) certified and shall be used according to manufacturer's recommendations.

The supervisor or manager shall identify hazards in the work place. This evaluation shall demonstrate a reasonable estimate of employee exposure to respiratory hazard(s) and an identification of the contaminant's properties.

Air-purifying respirators are not designed to be in any atmosphere:

- that is immediately dangerous to your life or health;
- where oxygen is less than 19.5% or greater than 23.5%; or
- with unknown contaminants.

Respirators can only be worn after medical examinations have been approved and EHS has conducted a fit test with passing results.

5.2 Filter Selection

When selecting a respirator filter, be aware that each filter is made to filter out a specific or a few specific contaminants. Protection of filters varies in three levels of filter efficiency, 95%, 99%, and 100%. There are three categories of resistance to filter efficiency degradation labeled N, R, and P. The selection of N, R, or P series filters depends on the presence or absence of oil particles as follows:

- If there are no oil particles present, all filters N, P, and R are acceptable.
- If there is the possibility for oil to be present, N filters are NOT acceptable. Only P or R filters may be used.
- If there are oil particles and the filter may be used in more than one, eight (8) hour work shift, only a P filter may be used.

Cartridges and canisters are color coded, as specified in the American National Standards Institute (1973). Always check the written description on the cartridges and canisters to ensure the filter selected is appropriate for the respiratory hazards present.

6.0 VOLUNTARY USE

An employee may voluntarily use a respirator as long as his/her workplace atmosphere does/will not exceed threshold limits.

6.1 Voluntary Use of Respirators

If a supervisor provides respirators for voluntary use, or if an employee provides their own respirator, certain precautions need to be done to ensure that the respirator itself does not present a hazard. To ensure that the respirator itself does not present a hazard, a medical evaluation will be performed, the employee must be trained and fit tested, and these guidelines must be followed (language from Appendix D of Title 8, Section 5144):

- Read and heed all instructions provided by the manufacturer on use, maintenance, cleaning, and warnings regarding the respirator limitations.
- Choose respirators certified for the use to protect against the contaminant of concern. Only NIOSH certified respirators shall be worn. 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.
- Do not wear your respirator into atmospheres containing contaminants for which your respirator is not designated 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.
- Keep track of your respirator do that you do not mistakenly use someone else's respirator.

6.2 Voluntary Use of Dust Masks

Dust masks may be worn at any time where an employee feels necessary to protect against any non-hazardous dust, fume, or mist. Dust masks shall be changed out regularly. No medical evaluation, training or fit test is required for an employee to wear a dust mask. The employee must abide by the guidelines of Appendix D of Title 8, Section 5144 listed above.

7.0 PROPER USE OF RESPIRATORS

Improper use of a respirator may result in the decline of an individual's health. Before using a respirator, check for cleanliness, and signs of wear, tear, and other damage. Perform a seal check each time a respirator is put on by either performing a positive or negative pressure check. Make sure filters are replaced as often as necessary.

7.1 Positive and Negative Pressure Check

7.1.1 Positive Pressure Check

Positive pressure check requires the user to block the exhaust port(s) with the palm of the hand and exhale gently into the face-piece to cause a slight positive pressure inside the face-piece. If the face-piece bulges slightly, and no air leaks are detected between the face and the face-piece, then a proper fit has been obtained.

7.1.2 Negative Pressure Check

Negative pressure check requires the user to block the intake ports with the palm of the hand and inhale for five to ten seconds. If the face-piece collapses slightly and no air leakage is detected between the face and the face-piece, a proper fit has been obtained.

7.2 Filter Change Schedule

Do not wait to smell or taste a chemical through the filter of the respirator. Filters need to be changed out before the end of their filter life. The University's policy on changing filters relies on a number of factors, which will determine the length of the filter. These factors include:

- The concentration of the chemical being used.
- How long the employee is being exposed.
- Manufacturer's recommendations for filter use found on the SDS.

When in doubt, change it out

8.0 RESPIRATOR USE – WILDFIRE EVENT

An emergency regulation (Title 8, Section 5141.1) was adopted on July 29, 2019, to protect employees from small particulate matter (“PM2.5”) caused by wildfire smoke.

8.1 Voluntary Use of Filtering Facepiece for Protection from Wildfire Smoke

When the Air Quality Index (AQI) for PM2.5 is greater than 150, but does not exceed 500, the University will make available filtering facepieces (“N95 mask”) for voluntary use to “covered employees”. A covered employee is defined as an employee who, for more than one hour per shift, works outside or in a building which is unenclosed or does not provide filtered air. Covered employees are not required to wear a N95 mask but are encouraged to do so.

All employees who are covered under this standard are required to read and adhere to Appendix B of Title 8, Section 5141.1 (found in Appendix A of this program). No medical evaluation or fit test is required; however, a Wildfire Smoke-specific training is required. An employee must not wear any other type of respirator other than a N95 mask if they are not currently enrolled in the Respiratory Protection Program.

8.2 Mandatory Use of Respirator for Protection from Wildfire Smoke

When the current air quality index for PM2.5 exceeds 500, respirator use is required in accordance with section 5144. Respirators will have an assigned protection factor such that the PM2.5 levels inside the respirator correspond to an AQI less than 151. Any employee who will be required to wear a respirator to protect themselves from particulate matter during a wildfire smoke event must be enrolled into the Respiratory Protection Program prior to wearing a respirator. This includes having a medical evaluation, fit test, and training. See Section 3.0 of this plan for more information.

9.0 MAINTENANCE OF RESPIRATORS

The responsibility for maintaining respirators is with the employee. The maintenance and care of respirators includes inspecting for defects, cleaning and disinfecting, and storage.

9.1 Storage

All respirators shall be stored to protect them from damage, contamination, dust, sunlight, extreme temperatures, moisture, and damaging chemicals. Respirators shall be packed or stored to prevent deformation of the face-piece and exhalation valve. A loose plastic zip lock bag can be used to store respirators. Do not store your respirator in the trunk of your car.

9.2 Cleaning and Disinfecting

As necessary, the employee shall clean and disinfect the respirator using detergent and a disinfecting agent. During this operation, it is also a good opportunity to examine the respirator and check for damage. Procedures for proper cleaning of respirators include:

1. Remove filters or cartridges. Discard or repair any defective parts.
2. Wash components in warm water (110°F; 43°C maximum) with a mild detergent or with a manufacturer recommended cleaner. A non-wire stiff bristle brush may be used to facilitate the removal of dirt.
3. Rinse components in warm (110°F; 43°C maximum) running water.
4. When the detergent being used does not contain a disinfecting agent, respirator components should be immersed for 2 minutes in a hypochlorite solution made my adding approximately 1 milliliter of bleach to one liter of warm water (110°F; 43°C).
5. Rinse components thoroughly in warm (110°F; 43°C maximum) running water.
6. Components should be hand-dried with a clean lint-free cloth or air-dried.
7. Reassemble respirator and test the respirator to ensure its proper function.

9.3 Inspection for Defects

Before each use, inspect equipment for defects, signs of wear, or damage. This process requires a check of the respirators function, tightness of connections, condition of the face piece, head straps, connecting tube, and filters. If repairs or adjustments need to be made to respirators that have the potential for affecting the effectiveness of the respirator, bring the respirator to the Department of Environmental Health and Safety.

10.0 TRAINING

It is the responsibility of the Department of Environmental Health and Safety to retrain employees in the Respiratory Protection Program annually and/or when the following occur:

- Changes in the workplace or the type of respirator render previous training obsolete;
- Inadequacies in the employee's knowledge or use of the respirator; or
- Any additional situation that may arise in which retraining appears necessary to ensure proper respirator use.

Training will consist of the following:

- Why the respirator is necessary;
- What the limitations and capabilities of the respirator are;
- How to use respirator effectively;
- How to inspect, put on and remove, use, and check the seals of the respirator;
- What the procedures are for maintenance and storage of the respirator; and
- How to recognize medical signs and symptoms that may limit the effectiveness of respirators.

11.0 RECORDKEEPING & PROGRAM EVALUATION

11.1 Recordkeeping

11.1.1 Medical Evaluations

The Medical Evaluation Questionnaire is maintained by the Physician or Other License Health Care Professional (PLHCP). Both must be kept on file for 30-years after separation from the University.

11.1.2 Health Status Medical Report

The Health Status Medical Report that is provided to EHS by the PLHCP will be kept on file at the Department of Environmental Health and Safety.

11.1.3 Fit Tests

Fit test records must be kept on file until a new fit test is completed. Fit test records will be kept at the Department of Environmental Health and Safety.

11.2 Program Evaluation

The Respiratory Protection Program will be evaluated for effectiveness, as necessary, by administering a questionnaire to those who are enrolled in the Program.

Appendix A:

Mandatory Language for Employee Protection from Wildfire Smoke (Appendix B of Title 8, Section 5141.1)

Employee Protection from Wildfire Smoke

Cal/OSHA Appendix B to Title 8 Section 5141.1: (Mandatory) Protection from Wildfire Smoke Information to Be Provided to Employees

Note: This Cal/OSHA standard is only applicable when the current Air Quality Index (AQI) for small particulate matter (PM2.5) exceeds 150 and only covers employees who work outside or in non-filtered buildings and vehicles for more than one hour per shift.

(1) The health effects of wildfire smoke.

Although there are many hazardous chemicals in wildfire smoke, the main harmful pollutant for people who are not very close to the fire is "particulate matter," the tiny particles suspended in the air. The smallest, and usually the most harmful, particulate matter is called PM2.5 because it has a diameter of 2.5 micrometers or smaller. Particulate matter can irritate the lungs and cause persistent coughing, phlegm, wheezing, or difficulty breathing. Particulate matter can also cause more serious problems, such as reduced lung function, bronchitis, worsening of asthma, heart failure, and early death. People over 65 and people who already have heart and lung problems are the most likely to suffer from serious health effects.

(2) The right of obtain medical treatment without fear of reprisal.

Employers must have effective provisions made in advance for prompt medical treatment of employees in the event of serious injury or illness caused by wildfire smoke exposure.

(3) How to obtain the current Air Quality Index for PM2.5.

Various government agencies monitor the air at locations throughout California and report the current Air Quality Index (AQI) for those places. The AQI is a measurement of how polluted the air is. An AQI over 100 is unhealthy for sensitive people and an AQI over 150 is unhealthy for everyone. Although there are AQIs for several pollutants, Cal/OSHA's regulation about wildfire smoke only uses the AQI for PM2.5. The easiest way to find the current and forecasted AQI for PM2.5 is to go to www.AirNow.gov and enter the zip code of the place where you will be working. The current AQI is also available from the U.S. Forest Service at https://tools.airfire.org or a local air district, which can be located at www.arb.ca.gov/capcoa/dismap.htm. Employees who do not have access to the internet can contact their employer for the current AQI. The EPA website www.enviroflash.info can transmit daily and forecasted AQIs by text or email for particular cities or zip codes.

(4) The requirements in Cal/OSHA's regulation about wildlife smoke.

If employees may be exposed to wildfire smoke, and the current AQI for PM2.5 at the worksite is 150 or more, Cal/OSHA requires employers to take several actions:

1. Find out what the current AQI is at the location.
2. Provide training to employees.
3. Lower employee exposures.
4. Provide respirators and encourage their use.

(5) The employer's communication system.

Employers must establish a two-way communication system to alert employees when the air quality is harmful and what protective measures are available to employees. Employers must also have a system that encourages employees to inform their employers if they notice the air quality is getting worse, or if they are suffering from any symptoms due to the air quality, without fear of reprisal. The University's will communicate with the campus community when the AQI for PM2.5 exceeds 150 in the following ways:

- Email communication to managers;
- An All Announcement to the entire campus community; and
- When feasible, sandwich boards will be placed around campus.

(6) The employer's methods to protect employees from wildfire smoke.

Each employer must take action to protect employees from PM2.5 in wildfire smoke. Examples of protective methods include relocating work in enclosed structures or vehicles where the air is filtered; changes in procedures such as moving workers to place with a lower AQI, reducing worktime in areas with unfiltered air, increasing rest time and frequency, providing a rest area with filtered air, and reducing the physical intensity of the work to help lower the breathing rate and heart rate. The University's control system is to provide covered employees with N95 masks while they are working outside or in unfiltered, unenclosed buildings or vehicles.

(7) The importance, limitations, and benefits of using a respirator when exposed to wildfire smoke.

When the current AQI for PM2.5 is over 150, employers must provide their workers with proper respirators for voluntary use. If the AQI is over 500, respirator use is mandatory. Respirators can be an effective way to protect employee health by reducing exposure to wildfire smoke when they are properly selected and work. Respirator use can be beneficial even when the AQI for PM2.5 is less than 150, to provide additional comfort and protection. A respirator should be used properly and kept clean. The following precautions must be taken:

1. Choose respirators certified for the use to protect against the contaminant of concern. NIOSH, the National Institute of Occupational Safety and Health of the U.S. Centers for Disease Control and Prevention, certifies respirators. A label or statement of certification should appear on the respirator or respirator packaging. It will list what the respirator is designed for (particulates, for example). Surgical masks or items worn over the nose and mouth such as scarves, T-shirts, and bandannas will not provide protection against smoke. A N95 filtering facepiece respirator, shown in the image below, is the minimum level of protection for wildfire smoke.

2. Read and follow all instructions provided by the manufacturer on use, maintenance, cleaning and care, and warnings regarding the respirator's limitations.
3. Do not wear a respirator into atmospheres containing contaminants for which the respirator is not designed. A respirator designed to filter particles will not protect employees against gases or vapor, and it will not supply oxygen.
4. Employees should keep track of their respirator so that they do not mistakenly use someone else's respirator.
5. Employees who have a heart or lung problem should ask their doctor before using a respirator.

(8) How to properly put on, use, and maintain the respirators provided by the employer.

To get the most protection from a respirator, there must be a tight seal around the face. A respirator will provide much less protection if facial hair interferes with the seal.

The proper way to put on a respirator can depend on the type and model of the respirator.

For those who use an N95 or other filtering facepiece respirator, a mask that is made of filter material:

1. Place the mask over the nose an under the chin, with one strap placed below the ears and one strap above.
2. Pinch the metal part (if there is one) of the respirator over the top of the nose so it fits securely.

Appendix B:

How to Properly Put On (Don) and Take Off (Doff) a Disposable Respirator

HOW TO PROPERLY PUT ON (DON) AND TAKE OFF (DOFF) A DISPOSABLE RESPIRATOR

During an emergency event where, disposable respirators have been made available, below are instructions on how to properly fit an N95 or other types of disposable respirators.

Putting On The Respirator

Position the respirator in your hands with the nose piece at your fingertips.

Cup the respirator in your hand allowing the headbands to hang below your hand. Hold the respirator under your chin with the nosepiece up.

The top strap (on single or double strap respirators) goes over and rests at the top back of your head. The bottom strap is positioned around the neck and below the ears. Do not

Place your fingertips from both hands at the top of the metal nose clip (if present). Slide fingertips down both sides of the metal strip to mold the nose area to the shape of your nose.

Checking Your Seal[2]

Place both hands over the respirator, take a quick breath in to check whether the respirator seals tightly to the face.

Place both hands completely over the respirator and exhale. If you feel leakage, there is not a proper seal.

If air leaks around the nose, readjust the nosepiece as described. If air leaks at the mask edges, re-adjust the straps along the sides of your head until a proper seal is achieved.

Remove by pulling the bottom strap over back of head, followed by the top strap, without touching the respirator.

Discard in waste container. WASH YOUR HANDS!