It is the policy of the above-mentioned unit to comply with the University of Illinois Respiratory Protection Program. The purpose of this document is to complement the University Program with site-specific written standard operating procedures.

**PROGRAM ADMINISTRATION**

The University of Illinois recognizes the fact that supervisors are not necessarily experts in the area of respiratory protection. However, as outlined in the Campus Administrative Manual policy number RB-13, “The immediate managers of employees or supervisors of other members of the campus community are responsible for maintaining a healthy and safe environment within their areas under their supervision and are responsible for the safety of activities, procedures and operations under their control or direction.” OSH and other qualified personnel will assist supervisors and individuals in fulfilling these obligations upon request.

The following individual has responsibility for the administration of respiratory protection in the above-mentioned unit. It is the responsibility of this person to supervise the use of respirators and to ensure that respirators are used when they are required and in a manner in which the wearer has been trained.

(Name) (Title)

**SELECTION**

Respirator types selected for use (include manufacturer and model number):

<table>
<thead>
<tr>
<th>Manufacturer</th>
<th>Model</th>
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Cartridges and filters to be worn and hazard:

<table>
<thead>
<tr>
<th>Hazard</th>
<th>Cartridge/Air Source</th>
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**MEDICAL EVALUATIONS**

A determination of the capability of each individual to physically and psychologically perform his or her normal work duties while wearing a respirator is made by a physician or other licensed health care professional (PLHCP) from ________________________________.

Copies of the PLHCP’s written opinion determining an individual capability of wearing a respirator can be located in the individual’s personnel file in the following location: ________________________________.
RESPIRATOR TRAINING AND FIT-TESTING
Annual training for the individuals in this unit wearing respirators will be provided by _______.

Annual fit-testing for the individuals in this unit wearing respirators will be provided by _______.

Records of training and fit-testing for the individuals in this unit who will be wearing respirators can be found in _______.

INSPECTION AND MAINTENANCE OF SHARED OR EMERGENCY USE RESPIRATORS
_______ is responsible for the overall maintenance and inspection of respirators that are shared or for emergency-use.

Emergency-use respirators are found in the following locations: ____________________________________________
________________________________________________________________________________________
________________________________________________________________________________________

Inspection records of these emergency-use respirators are found in _______.

INSPECTION
All respirators shall be inspected before each use and during cleaning.

Respirators shall be checked for tightness of connection and general condition of the various parts including, but not limited to the facepiece, head straps, valves, connecting tube, cartridges, and a check of elastomeric parts for pliability and signs of deterioration.

Emergency use respirators shall be inspected at least monthly and in accordance with the manufacturer's recommendations. Emergency use respirators shall be checked for proper function before and after each use, before being carried into the workplace for use, have documentation that lists the date the inspection was performed, the name (or signature) of the person who made the inspection, the findings and required remedial action needed; and a serial number or other means of identifying the inspected respirator.

All information provided above shall be 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 inspection.

Breathing cylinders of any self-contained breathing apparatus (SCBA) shall be inspected to assure that the cylinder pressure is maintained at 90% of the manufacturer’s recommended pressure level and that regulator and low-pressure warning devices function properly.
REPAIRS AND REPLACEMENT PARTS
Respirators that fail an inspection, or are otherwise found to be defective, shall be removed from service, and discarded or repaired in accordance with the following procedures:

- Only persons appropriately trained to perform such operations, using parts designed for the particular respirator shall make repairs;
- No repairs shall be performed that are outside the manufacturer's recommendations concerning the type and extent of repairs that can be performed; and
- Only the manufacturer or appropriately trained technician shall conduct repairs of reducing or admission valves on a SCBA.

Where air-purifying respirators are routinely used, filters and cartridges shall be replaced on a regular basis.

- When filters become difficult to breathe through they shall be replaced; and
- Chemical cartridges shall be replaced:
  - After being exposed to the contaminant hazard for 8 hours;
  - When the end-of-service-life indicator indicates replacement; or
  - Where it is evident by odor or irritant properties that a contaminant has broken through the filtering parts, the chemical cartridges shall be replaced immediately.

CLEANING AND DISINFECTING PROCEDURES
Respirators shall be cleaned and disinfected using the following procedures, or procedures recommended by the respirator manufacturer, provided that such procedures are of equivalent effectiveness. Equivalent effectiveness simply means that the procedures used must ensure that the respirator is properly cleaned and disinfected in a manner that prevents damage to the respirator and does not cause harm to the user.

1. Remove filters, cartridges, or canisters. Disassemble facepieces by removing speaking diaphragms, demand and pressure-demand valve assemblies, hoses, or any components recommended by the manufacturer. Discard or repair any defective parts.

2. Wash components in warm (110° F maximum) water with a mild detergent or with a cleaner recommended by the manufacturer. A stiff bristle (not wire) brush may be used to facilitate the removal of dirt.

3. Rinse components thoroughly in clean, warm (110° F maximum), preferably running water. Drain.

4. When the cleaner used does not contain a disinfecting agent, respirator components should be disinfected by using a respirator approved disinfectant wipe or by the procedure listed below:

5. Run 2 gallons of warm water in a bucket. The water temperature should not be above 110° F.

6. Add 1 oz. of household bleach per 2 gallons of water to make a hypochlorite solution.

7. Immerse the components in the hypochlorite solution for 2 minutes.
8. Rinse components thoroughly in clean, warm (110° F maximum), preferably running water. Drain. The importance of thorough rinsing cannot be overemphasized. Detergents or disinfectants that dry on facepieces may result in dermatitis. In addition, disinfectants may cause deterioration of rubber or corrosion of metal parts if not completely removed.

9. Components should be hand-dried with a clean lint-free cloth and then air-dried in a clean environment for 30 minutes. Keep the respirator out of sunlight and direct heat.

10. Reassemble facepiece, replacing filters, cartridges, and canisters where necessary.

11. Test the respirator to ensure that all components work properly.

The respirators shall be cleaned and disinfected at the following intervals:
• 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;
• Respirators issued to more than one employee shall be cleaned and disinfected before being worn by different individuals;
• Respirators maintained for emergency use shall be cleaned and disinfected after each use; and
• Respirators used in fit-testing and training shall be cleaned and disinfected after each use.

Storage
Respirators shall be properly stored to protect against damage, contamination, excessive moisture, extreme temperatures, sunlight, and damaging chemicals.

Emergency use respirators shall be stored in compartments or in covers, both of which shall be clearly marked as containing the emergency respirators. They shall be stored in compartments that will protect them from weathering, contamination, and deterioration.

Non-emergency respirators shall be stored in an airtight storage medium.

If cartridges are stored for reuse, they shall be placed in an airtight bag with the date indicating when the cartridge was put into service and amount of time the cartridge has been exposed to a hazard (e.g., 1hr, 2hrs, 2.5hrs, etc.).
The employee listed above has been fit-tested on the following respirator(s). This fit-testing is good only for the brand, model and size respirator listed. Respirators shall not be worn when conditions prevent a seal of the respirator to the wearer. If there are any factors which change after the fit-testing such as growth of facial hair which might affect the seal of the respirator, the use of spectacles or protective devices which interfere with the seal, or obvious changes in facial features (scars, missing dentures or weight gain), the fit-testing will be void.

**Brand and model of respirator:**

**Type of respirator:**
- Dust mask
- Powered Air Purifying Respirator
- Half-mask
- Self-Contained Breathing Apparatus
- Full-face

**Size of respirator:**
- Small
- Small/Medium
- Medium
- Medium/Large
- Large
- Other

**Cartridges expected to be used:**
- HEPA
- Organic Vapor (OV)
- Acid Gas (AG)
- OV/AG
- OV/HEPA
- AG/HEPA
- OV/AG/HEPA
- N/A
- Other

**Fit-test protocol:**
- Irritant Smoke
- Saccharin
- Isoamyl acetate
- Bitrex
- Portacount
- Other

**Fit-test:**
- Pass
- Fail

**List of units and sizes that failed the fit-test:**

**Comments:**

**Fit-tester Name**

**Fit-tester Signature**

**Employee Signature**