**Commonwealth of Massachusetts**

**Department of Labor Standards**

**OSHA Consultation Program**

[**mass.gov/dols/consult**](http://www.mass.gov/dols/consult)

# Written Respirator Program for the

# Voluntary Use of Respirators

(29 CFR 1910.134)

(Revised March of 2024)

***Note:*** *The following model written respirator program is provided as a guideline only.   
Employers must develop written programs that are specific to their companies’ needs.*

In order to comply with *OSHA Standard 29 CFR 1910.134, the Respiratory Protection Standard*, the following written respirator program has been established for *company name* . The written program will be available at *location* for review by any interested employee.

**I. Voluntary Use of Respirators** *(29 CFR 1910.134(c)(2))*

This program applies to all employees who are ***not required*** to wear respirators during normal work operations but are using respirators on a voluntary basis. Voluntary use is when an employee chooses to wear a respirator even though the use of a respirator is not required by *(company name)* or by an OSHA standard.

**If the company will provide respirators, use this:**

Employees participating in the respiratory protection program do so at no cost to themselves. All expenses associated with training, medical evaluations and respiratory protective equipment will be paid for by the company.

**Note:** The company does not need to pay for respiratory equipment used voluntarily by employees but must pay for training and medical evaluations that may be needed as a result of wearing a respirator.]

**If the company will not provide respirators, use this:**

Employees can provide their own respirators, but all expenses associated with training and medical evaluations (if needed) will be paid for by the company.

*(Supervisor)* will track the voluntary use of respirators and assure that the employee is medically able to use the respirator. *(Supervisor)*  will also assure that employees keep their respirator clean, stored properly and maintained so that it does not present a health hazard to the user.

Employees will follow all the procedures outlined in this program to make sure that their respirator is clean, stored properly and maintained so that it does not present a health hazard.

Employees will not use any respirator without the knowledge and permission of their supervisor.

**Voluntary Respirator Use At *Company Name***

The hazard assessment has determined that exposures on the following jobs are unlikely to exceed the OSHA Permissible Exposure Limits and therefore respiratory protection is not required to be worn by employees. However, employees in these departments are allowed to wear respirators on a voluntary basis.

|  |  |
| --- | --- |
| Department | Process |
|  |  |
|  |  |
|  |  |

**Medical Evaluation**

Employees are not permitted to wear tight-fitting respirators (including cartridge respirators and N-100 paper respirators) until a physician or other licensed healthcare professional (PLHCP) has determined that they are medically able to do so. Any employee refusing the medical evaluation will not be allowed to work in an area **requiring** respirator use.

A physician or other licensed healthcare professional at *Name of clinic conducting medical evaluations*  will provide the medical evaluations. Medical evaluation procedures are as follows:

* The medical evaluation will be conducted using the *Questionnaire* provided in *Appendix C* of the respiratory protection standard. The Program Administrator will provide a copy of this questionnaire to all employees requiring medical evaluations.
* To the extent feasible, the company will assist employees who are unable to read the questionnaire (by providing help in reading the questionnaire). When this is not possible, the employee will be sent directly to the physician/PLHCP for medical evaluation.
* The confidentiality of the employees being evaluated must be protected. This can be done, for example, by supplying affected employees with a copy of the medical questionnaire to fill out along with a stamped pre-addressed envelope for mailing to the company physician/PLHCP. Employees will be permitted to fill out the questionnaire on company time.
* Follow-up medical exams will be granted to employees as required by the standard, and/or as deemed necessary by the physician/PLHCP.
* All employees will be granted the opportunity to speak with the physician/PLHCP about their medical evaluation if they so request.

The Program Administrator will provide the physician/PLHCP with a copy of this program, a copy of the *Respiratory Protection Standard CFR 29 1910.134* and the *List Of Hazardous Substances* by work area.

In addition, for each employee requiring evaluation, the Program Administrator will provide the physician/PLHCP with:

1. His or her work area or job title
2. The proposed respirator type and its weight
3. The length of time that the employee will be required to wear the respirator
4. The expected physical workload (light, moderate, or heavy)
5. Any potential temperature and humidity extremes that may be encountered
6. Any additional protective clothing that may be required

Any employee required for medical reasons to wear a positive pressure air purifying respirator will be provided with a powered air purifying respirator (PAPR).

After an employee has received clearance, and has begun to wear his or her respirator, additional medical evaluations will be provided under the following circumstances:

1. The employee reports signs and/or symptoms related to their ability to use a respirator, such as shortness of breath, dizziness, chest pains, or wheezing.
2. The physician/PLHCP or supervisor informs the Program Administrator that the employee needs to be reevaluated.
3. Information from this program, including observations made during fit testing and program evaluation, indicates a need for reevaluation.
4. A change occurs in workplace conditions that may result in an increased physiological burden on the employee.

All examinations and questionnaires are to remain confidential between the employee and the physician/PLHCP.

**List of employees cleared**

**The following employees** have been medically cleared to wear a tight-fitting respirator:

*List employees who have medical clearance on file.*

The completed medical questionnaires and the physician/PLHCP’s documented findings are confidential and will remain at *Indicate identity and address of physician/PLHCP maintaining these records* . The company will only retain the physician/PLHCP’s written recommendation regarding each employee’s ability to wear a respirator.

**Respirator Use and Cleaning, Maintenance and Storage**

***-Cleaning***

The following procedure is to be used when cleaning and disinfecting respirators:

* Disassemble respirator, removing any filters, canisters, or cartridges
* Wash the facepiece and associated parts in a mild detergent with warm water and do not use organic solvents
* Rinse completely in clean warm water
* Wipe the respirator with disinfectant wipes (70% Isopropyl Alcohol or benzalkonium chloride) to kill germs
* Air dry in a clean area
* Reassemble the respirator and replace any defective parts
* Place in a clean, dry plastic bag or other airtight container

**Note:** The Program Administrator will ensure an adequate supply of appropriate cleaning and disinfection material.

***-Maintenance***

Respirators are to be properly maintained at all times in order to ensure that they function properly. Maintenance involves a thorough visual inspection for cleanliness and defects. Worn or deteriorated parts will be replaced prior to use. No components will be replaced, or repairs made beyond those recommended by the manufacturer.

The following checklist will be used when inspecting respirators:

* Facepiece:
* Cracks, tears, or holes
* Facemask distortion
* Cracked or loose lenses/face shield
* Headstraps:
* Breaks or tears
* Broken buckles
* Valves:
* Residue or dirt
* Cracks or tears in valve material
* Filters/Cartridges:
  + Approval designation
  + Gaskets
  + Cracks or dents in housing
  + Proper cartridge for hazard

***Storage***

Respirators must be stored in a clean, dry area, and in accordance with the manufacturer’s recommendations. Each employee will clean and inspect his or her own air-purifying respirator in accordance with the provisions of this program and will store the respirator in a plastic bag in   
 *(indicate respirator storage location)* . Each employee will have his/her name on the bag, and that bag will only be used to store that employee’s respirator.

## **Defective Respirators**

Respirators that are defective or have defective parts shall be taken out of service immediately. If, during an inspection, an employee discovers a defect in a respirator, he/she is to bring the defect to the attention of his or her supervisor. Supervisors will give all defective respirators to the Program Administrator. The Program Administrator will decide whether to:

* Temporarily take the respirator out of service until it can be repaired
* Perform a simple fix on the spot, such as replacing a head strap
* Dispose of the respirator due to an irreparable problem or defect

When a respirator is taken out of service for an extended period of time, the respirator will be tagged out of service, and the employee will be given a replacement of similar make, model, and size. All tagged out respirators will be kept  *(indicate storage location)* .

**NIOSH Certification**

All respirators must be certified by the National Institute for Occupational Safety and Health (NIOSH) and must be used in accordance with the terms of that certification. Also, all filters, cartridges, and canisters must be labeled with the appropriate NIOSH approval. The label must not be removed or defaced while it is in use. As required by the NIOSH approval, employees will use only filters and cartridges made by the manufacturer of the respirator facepiece. The filters of one manufacturer will not be used on the facepiece made by another manufacturer.

**Voluntary Use of Filtering Facepieces (“dust masks”)**

If employees wear filtering facepiece respirators (N-95) on a voluntary basis, the (Company) will provide these employees with the information contained in *Appendix D* of the standard. (*Appendix D* details the requirements for voluntary use of respirators by employees.)

Employees must also follow the procedures for ***Respirator Use and Cleaning, Maintenance and Storage*** that may apply to filtering facepieces.

The following employees have received training in the use, maintenance, and storage of filtering facepieces, as well as a copy of *Appendix D* of *Respiratory Protection Standard*:

|  |  |
| --- | --- |
| Employee | Date of training |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

**How to use an N-95 respirator (dust-mask):**

**Inspect the respirator:**

* Check the facepiece for cuts, tears, frays, dirt, etc.
* Check for damage or missing components
* Check the elasticity of the headbands

**Don the respirator:**

* Cup the respirator in your hand with the nosepiece at your fingertips
* Position the respirator under your chin with the nosepiece up
* Pull the top strap over your head so it rests high on the back of your head, so it rests high on the back of your head
* Pull the bottom strap over your head and position it around your neck below your ears
* Using two hands mold the nosepiece to the shape of your nose.

**Self-Fit Check Procedure** (follow manufacturer’s recommendations)

* + Place your hands over the outside of the mask.
  + Forcefully inhale and exhale several times. The mask should collapse and expand.
  + If the respirator does not collapse and expand, or if air is leaking out between your face and the respirator, then this is not a good fit. You should adjust the respirator until the leakage is corrected and you are successfully able to fit check the respirator.

**Storing The Respirator**

When not in use, respirators should be sealed in plastic bags and stored in a single layer with the face piece and exhalation valve (if applicable) in a non-distorted position. The bag must be labeled with the employee’s name.

**When to Get a New N-95 Respirator**

Respirators should be changed or discarded if:

* The employee experiences a significant increase in the amount of resistance to breathing
* The respirator collapses due to excess moisture
* The employee senses breakthrough
* The respirator is visibly soiled or distorted
* The respirator no longer seals to the user’s face
* You have exceeded the manufacturer’s service life or 8 hours

**Limitations of N-95 Respirators**

* If the respirator becomes wet, soiled, or exposed to oil aerosols, it must be discarded
* Does not protect against hazardous vapors or gases (vapors or gases will pass through the particulate filtering facepiece)
* Does not supply oxygen and therefore must not be worn in an atmosphere with less than 19.5% oxygen
  + Cannot be used in concentrations of contaminants that are immediately dangerous to life and health (IDLH)