RESPIRATORY PROTECTION PROGRAM

Penn Fencing, Inc.
647 Pittsburgh Road
Butler, PA 16002

Prepared by:

Lancaster Safety Consulting, Inc.
100 Bradford Road, Suite 100
Wexford, PA 15090
(888) 403-6026
www.LancasterSafety.com
# Respiratory Protection Program

## Penn Fencing, Inc.

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RESPIRATORY PROTECTION PROGRAM

Penn Fencing, Inc.

1.1 PURPOSE
At Penn Fencing, we are dedicated to the safety and health of our employees. We have determined that employees may be exposed to atmospheric hazards in the work environment. Our primary objective is to prevent atmospheric contamination through the use of accepted engineering control methods. When engineering controls are not feasible, or while they are being instituted, appropriate respirators will be used in accordance with this plan.

This program has been designed to comply with OSHA’s respiratory protection requirements set forth in 29 CFR 1910.134. A copy of these standards can be found in Attachment A of this program. This plan will be maintained in the production office and is available for review upon request.

This program applies to all employees who are required to wear respirators during normal work operations or during some non-routine or emergency operations, as well as employees who voluntarily use respiratory protection other than dust masks.

1.2 RESPONSIBILITY
When it has been determined that respiratory protection is necessary to protect the safety and health of our employees, respirators will be provided to affected employees. Respirators which are applicable and suitable for the intended purpose will be provided by Penn Fencing at no cost to affected employees. In addition, any expenses associated with training, medical evaluations, and respiratory protection equipment will be borne by Penn Fencing.

PROGRAM ADMINISTRATOR - CHAD GALBREATH
- Identify work areas, processes, or tasks that require workers to wear respirators
- Evaluate hazards & select respiratory protection options
- Monitor respirator use to ensure that respirators are used in accordance with their specifications
- Arrange for and/or conduct training
- Ensure proper storage and maintenance of respiratory protection equipment
- Conduct or arrange qualitative fit testing
- Maintain records required by the program
- Evaluate and update the written program, as needed
FOREMEN

- Ensure that employees under their supervision (including new hires) receive appropriate training, fit testing, and annual medical evaluation
- Ensure the availability of appropriate respirators and accessories
- Be aware of tasks requiring the use of respiratory protection
- Enforce the proper use of respiratory protection, when necessary.
- Ensure that respirators are properly cleaned, maintained, and stored according to this program
- Ensure that respirators fit well and do not cause discomfort
- Continually monitor work areas and operations to identify respiratory hazards
- Coordinate with the Program Administrator on how to address respiratory hazards or other concerns regarding this program

EMPLOYEES

- Wear respirators when and where required and in the manner in which they are trained. Employees must also:
  - Care for and maintain respirators as instructed, guard them against damage, and store them in a clean, sanitary location
  - Inform the foreman if the respirator no longer fits well and request a new one that fits properly
  - Inform the foreman or the Program Administrator of any respiratory hazards that may not be adequately addressed in the workplace and of any other concerns regarding this program
  - Use the respiratory protection in accordance with the manufacturer’s instructions and the training received

1.3 Exposure Assessment

An exposure assessment will be conducted whenever it is anticipated that our employees are exposed to hazardous atmospheres. Assessments will be performed whenever there is an OSHA standard that applies to a specific substance that our employees are exposed to, when work processes change, when employees report symptoms or complain of respirator effects, or when the workplace contains visible emissions such as fumes, dust, aerosols, vapors, gasses, or mists.

The exposure assessment will serve as a tool to categorize the nature and magnitude of employee exposures to respiratory hazards and will include:

- Identification of hazardous substances used in the workplace by department or work process.
- A review of work processes to determine where potential exposures to hazardous substances may occur. This review will be conducted by surveying the workplace, reviewing the process records, and talking with employees and foremen.
- Exposure monitoring to quantify potential hazardous exposures.
The exposure assessment will be conducted and reviewed by the Program Administrator to evaluate the potential hazard and arrange for outside assistance as necessary. The results of the exposure assessment will be communicated to all affected employees. If it is determined that respiratory protection is necessary, all other elements of the respiratory protection program will be in effect for those tasks, and this respiratory program will be updated accordingly. Hazard evaluation will be maintained in Attachment B of this plan.

1.4 CONTROLS

Engineering and administrative controls will be utilized to the extent feasible to prevent contamination of the workplace atmosphere. When engineering controls are not feasible, or while engineering controls are being put in place, appropriate respirators must be used.

Engineering controls physically change the work environment to reduce employee exposure to air contaminants. Such engineering controls may include:

- Change of the work process
- Isolation or enclosure of the work process or of employees
- Local exhaust or general dilution ventilation
- Substitution of less hazardous substances for harmful materials

Administrative controls involve changes in the length of time or the time of day in which an employee can be exposed. Examples of administrative controls are:

- Employee rotation
- Rescheduling work in area to times when air contaminant levels are low

1.5 RESPIRATOR SELECTION

The Program Administrator 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 employee exposure cannot be identified or reasonably estimated, the atmosphere will be considered Immediately Dangerous to Life & Health (IDLH).

Respirators, to be used on site, will be selected based on the hazards in which workers are exposed to in accordance with the OSHA Respiratory Protection Standard. The proper type of respirator for the specific hazard involved will be selected in accordance with the manufacturer’s instructions. A list of employees and appropriate respiratory protection will be maintained in Attachment B of this document. The program administrator will select and provide appropriate respirators to affected employees. The following guidelines will be followed when making this selection:

- Respirators will be selected based on the respiratory hazards that employees are exposed to along with workplace and user factors that affect respirator performance and reliability.
• All respirators will be certified by the National Institute for Occupational Safety and Health (NIOSH) and shall be used in compliance with the conditions of its certification.
• All filters, cartridges, and canisters must also be labeled with the appropriate NIOSH approval label. The label must not be removed or defaced while the respirator is in use.
• Respirators will be selected from a sufficient number of respirator models and sizes so that the respirator is acceptable to, and correctly fits, the user.

Selection of respirators will be made in accordance with the assigned protection factor (APF) of the respirator, as well as the workplace and exposure factors. The APF of a respirator reflects the level of protection that a properly functioning respirator would be expected to provide to a population of properly fitted and trained users. The APFs listed in Table 1 of 29 CFR 1910.134(d)(3)(i)(A) will be used to select a respirator that meets or exceeds the required level of employee protection.

1.6 TYPES OF RESPIRATORS USED AT PENN FENCING

AIR PURIFYING RESPIRATORS
• Combination Respirators
  o Are normally used in atmospheres that contain hazards of both particulates and gases
  o Have both particulate filters and gas/vapor filters
  o May be heavier than other types of respirators

1.7 RESPIRATOR USE

VOLUNTARY RESPIRATOR USE

Employees who wish to wear respirators on a voluntary basis must make a request to the program administrator. Voluntary use will be determined on a case-by-case basis, depending on specific workplace conditions and the results of medical evaluations.

All employees who choose to wear respirators voluntarily will be provided with a copy of Appendix D of the OSHA Respiratory Protection Standard, which details the requirements for voluntary use of respirators by employees. Employees who choose to wear a half face piece APR must comply with the procedures for medical evaluation, respirator use, cleaning, storage, and maintenance portions of this program.

Employees who voluntarily wear filtering face pieces (dust masks) are not subject to the medical evaluation, cleaning, storage, and maintenance provisions of this program. However, the following applies:

• Dust masks may only be worn by an employee on a voluntary basis for the purpose of comfort against nuisance-level particulates.
• All dust masks must be NIOSH certified.
• Dust masks must be stored in a bag or box or otherwise protected from dirt or contamination.
• All instructions provided by the manufacturer on use, maintenance, cleaning and care, and warnings regarding the dust mask’s limitations must be read and adhered to.
• Dust masks may not be worn into atmospheres containing contaminants for which the dust mask is not designed to protect against.
• Dust masks must be stored properly so that an employee does not mistakenly use someone else’s dust mask.
• All dust masks should be replaced whenever they are damaged, soiled, or causing noticeable increased breathing resistance.

GENERAL RESPIRATOR USE PROCEDURES

• Employees will use their respirators under conditions specified in this program, and in accordance with the training they receive on the use of each particular model. In addition, the respirator shall not be used in a manner for which it is not certified by NIOSH or by its manufacturer.
• All employees shall conduct user seal checks each time they wear their respirators. Employees shall use either the positive or negative pressure check (depending on which test works best for them) as specified in the OSHA Respiratory Protection Standard.
  o Positive Pressure Test: This test is performed by closing off the exhalation valve with your hand. Breathe air into the mask. The face fit is satisfactory if some pressure can be built up inside the mask without any air leaking out between the mask and the face of the wearer.
  o Negative Pressure Test: This test is performed by closing of the inlet openings of the cartridge with the palm of your hand. Some masks may require that the filter holder be removed to seal off the intake valve. Inhale gently so that a vacuum occurs within the face piece. Hold your breath for ten (10) seconds. If the vacuum remains, and no inward leakage is detected, the respirator is fit properly.
• After notifying their foreman, employees shall be permitted to leave the work area to maintain their respirator for the following reasons:
  o to clean their respirator if it is impeding their ability to work;
  o to change filters or cartridges;
  o to replace parts; or
  o to inspect respirator if it stops functioning as intended.
  o Employees are not permitted to wear tight-fitting respirators if they have any condition, such as facial scars, facial hair, or missing dentures that would prevent a proper seal. Employees are not permitted to wear headphones, jewelry, or other items that may interfere with the seal between the face and the face piece.
• Before and after each use of a respirator, an employee or immediate foreman must make an inspection of tightness or connections and the condition of the face piece, headbands, valves, filter holders and filters. Questionable items must be addressed immediately by the foreman and/or Program Administrator.
1.8 **MEDICAL EVALUATIONS**

Respirator use generally places a burden on the employee by restricting breathing, causing claustrophobia, or increasing neck strain from the weight of the respirator. Each of these conditions may adversely affect the health of some employees who wear respirators.

1.9 **FIT TESTING**

All respirators that rely on a mask-to-face seal need to be annually checked to determine whether the mask provides an acceptable fit to a wearer. Employees who are required wear half-face piece APRs will be fit tested annually. Voluntary respirator-wearers may be fit tested at the company’s discretion. Acceptable methods of fit testing include:

- **Qualitative** - A pass/fail fit test to assess the adequacy of respirator fit that relies on the individual’s response to the test agent, (like smoke)
  - OSHA has required standardized procedures
  - Required upon issue and annually thereafter
  - Irritant smoke, isoamyl acetate, saccharin solution, or bitrex solution can be used
  - Usually required to recite the “Rainbow Passage”
  - Has a subjective response

- **Quantitative**: An assessment of the adequacy of respirator fit by numerically measuring the amount of leakage into the respirator.
  - OSHA has required standardized procedures
  - Measures concentration inside mask
  - Takes approximately 15 minutes per mask
  - Requires expensive equipment and trained personnel
  - Ensures correct fit for model

Employees will be fit tested with the make, model, and size of respirator that they wear. Several models and sizes of respirators will be available so that an optimal fit can be obtained for each person. Fit testing will be conducted in accordance with the OSHA Respiratory Protection standard at the following intervals:

- Prior to being allowed to wear any respirator with a tight-fitting face piece
- Annually
- When there are changes in the employee’s physical condition that could affect respiratory fit (e.g., obvious change in body weight, facial scarring, etc.).

1.10 **RESPIRATOR CARE & MAINTENANCE**

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

Each respirator user is initially provided with an individual respirator that is clean, sanitary, and in good working condition. Respirators must be cleaned and disinfected using OSHA’s Respiratory Cleaning Procedures (Appendix B-2 to 29 CFR 1910.134) or by procedures recommended by the respirator manufacturer, as long as such procedures are of equivalent effectiveness.

The Program Administrator will ensure an adequate supply of appropriate cleaning and disinfection materials are available. If supplies are low, the foreman should be notified.

STORAGE

All respirators will be stored in such a manner as to protect them from damage, contamination, dust, sunlight, extreme temperatures, excessive moisture, and damaging chemicals. Respirators will be stored in accordance with the manufacturer’s recommendations in order to prevent deformation of the facepiece and exhalation valve. Respirators will not be placed in places such as lockers or toolboxes unless they are in carrying cartons.

Each employee will clean and inspect their own air-purifying respirator in accordance with the provisions of this program, and will store their respirator in a plastic bag in the designated area. Each employee will have his/her name on the bag and that bag will only be used to store that employee’s respirator.

RESPIRATOR MALFUNCTIONS AND DEFECTS

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/her foreman. foremen 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; or
- dispose of the respirator due to an irreparable problem or defect.

1.11 CHANGE SCHEDULES

Respirator cartridges shall be replaced as determined by the Program Administrator, foremen, and manufacturers’ recommendations. The following guidelines shall be followed.

- Replace cartridges when the end-of-service-life indicator (ESLI) indicates that replacement is required (if respirator is equipped with an ESLI certified by NIOSH)
- Replace cartridges on a change schedule for canisters and cartridges based on objective information that will ensure that canisters and cartridges are changed before the end of their service life. That information shall be based on: (1) experimental tests, (2) manufacturer’s limitations, or (3) use of a math model.
1.12  TRAINING
The Program Administrator will provide training to respirator users and their foremen on the contents of the Penn Fencing Respiratory Protection Program and their responsibilities under it, and on the OSHA Respiratory Protection Standard. All affected employees and their foremen will be trained prior to using a respirator in the workplace. foremen will also be trained prior to supervising employees that must wear respirators. The training course will cover the following topics:

- the Penn Fencing Respiratory Protection Program;
- the OSHA Respiratory Protection Standard (29 CFR 1910.134);
- respiratory hazards encountered at Penn Fencing and their health effects;
- proper selection and use of respirators;
- limitations of respirators;
- respirator donning and user seal (fit) checks;
- fit testing;
- emergency use procedures;
- maintenance and storage; and
- medical signs and symptoms limiting the effective use of respirators.

Employees will be retrained annually or as needed (e.g., if they change departments or work processes and need to use a different respirator). Employees must demonstrate their understanding of the topics covered in the training through hands-on exercises and a written test. Respirator training will be documented by the Program Administrator and the documentation will include the type, model, and size of respirator for which each employee has been trained and fit tested.

1.13  PROGRAM EVALUATION
The Program Administrator will conduct periodic evaluations of the workplace to ensure that the provisions of this program are being implemented. The evaluations will include regular consultations with employees who use respirators and their foremen, site inspections, air monitoring and a review of records. Items to be considered will include:

- comfort;
- ability to breathe without objectionable effort;
- adequate visibility under all conditions;
- provisions for wearing prescription glasses;
- ability to perform all tasks without undue interference; and
- confidence in the face piece fit.

Identified problems will be noted in an inspection log and addressed by the Program Administrator. These findings will be reported to Penn Fencing management, and the report will list plans to correct deficiencies in the respirator program and target dates for the implementation of those corrections.
1.14 DOCUMENTATION & RECORDKEEPING

Copies of training and fit test records shall be maintained by the Program Administrator. These records will be updated as new employees are trained, as existing employees receive refresher training, and as new fit tests are conducted.

For employees covered under the Respiratory Protection Program, the Program Administrator shall maintain copies of the physician’s written recommendation regarding each employee’s ability to wear a respirator. The completed medical questionnaires and evaluating physician’s documented findings will remain confidential in the employee’s medical records at the location of the evaluating physician’s practice. Records of medical evaluations will be retained and made available in accordance with 29 CFR 1910.1020.
ATTACHMENT A: OSHA STANDARD FOR RESPIRATORY PROTECTION

(29 CFR 1910.134)
<table>
<thead>
<tr>
<th>Process</th>
<th>Noted Hazards</th>
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<tbody>
<tr>
<td>Drilling Concrete</td>
<td>Silica Dust Exposure</td>
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</tbody>
</table>

Include documentation of the sampling data that hazard evaluation is based on.
ATTACHMENT C: RECORD OF RESPIRATOR USE
<table>
<thead>
<tr>
<th><strong>Required and Voluntary Respirator Use</strong></th>
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<tbody>
<tr>
<td><strong>Type of Respirator</strong></td>
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<td>Dust Mask</td>
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</table>
## Personnel in Respiratory Protection Program

Respiratory protection has been issued to the following personnel:

<table>
<thead>
<tr>
<th>Name</th>
<th>Job Description/Work Procedure</th>
<th>Type of Respirator</th>
<th>Required or Voluntary</th>
<th>Date Issued</th>
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ATTACHMENT D: MEDICAL RELEASE & VOLUNTARY DUST MASK USE (OSHA APPENDIX D) FORMS
Medical Release Form for Respirator Use

Employee Name: ______________________________________

Company: Penn Fencing

I have reviewed the Medical Respirator Questionnaire that you completed in order to obtain clearance to use a respirator at work.

Based on your answers:

☐ You are CLEARED for respirator use.

If in the future you are diagnosed with severe medical illness, or develop symptoms, such as shortness of breath, chest pain, dizziness, or any other troubling symptom while using a respirator, you should obtain a medical evaluation to determine your continued ability to safely wear a respirator.

☐ You are NOT CLEARED for respirator use.

In order to obtain medical clearance for respirator use, you will need a medical evaluation, as required under OSHA regulations. To make an appointment for a medical evaluation for respirator clearance, call (______) _____ - ___________.

Signature: ___________________________________________ Date: ___________________

PLHCP Information:

Name: ________________________________________________

Address: ______________________________________________

_____________________________________________________

** This form is to be completed by a Physician or other licensed health care professional (PLHCP), in absence of a more detailed form, in response to the medical evaluation form (29 CFR 1910.134 App C). No employee is authorized to wear a respirator until they have been evaluated (and fit tested).
Voluntary Dust Mask Use Acknowledgement

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 respirators 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.

[63 FR 1152, Jan. 8, 1998; 63 FR 20098, April 23, 1998]

I have read and understand the above information regarding Appendix D of 1910.134.

_____________________________  ______________________  ________________
Print Name                     Signature                     Date
ATTACHMENT E: FIT TEST RECORDS
## Respirator Fit Test Log

<table>
<thead>
<tr>
<th>Employee</th>
<th>Make, Model, Style and Size of Respirator</th>
<th>Type of Fit Test</th>
<th>Pass or Fail</th>
<th>Person Administering Fit Test</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>

Fit test records must be retained for respirator users until the next fit test is administered.
### Respirator Fit Test Form

<table>
<thead>
<tr>
<th>Employee Name (print):</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Test Administrator (print):</td>
<td></td>
</tr>
<tr>
<td>Respirator Brand &amp; Model:</td>
<td></td>
</tr>
<tr>
<td>Conditions that could affect respirator fit:</td>
<td></td>
</tr>
<tr>
<td>- Clean-Shaven</td>
<td>- Beard</td>
</tr>
<tr>
<td>- Facial Scar</td>
<td>- Glasses</td>
</tr>
<tr>
<td>Comments:</td>
<td></td>
</tr>
<tr>
<td>Type of Fit Test:</td>
<td></td>
</tr>
<tr>
<td>- Qualitative with:</td>
<td></td>
</tr>
<tr>
<td>- Saccharin</td>
<td>- Isoamyl Acetate</td>
</tr>
<tr>
<td>Employee Signature:</td>
<td>Date:</td>
</tr>
<tr>
<td>Administrator Signature:</td>
<td>Date:</td>
</tr>
</tbody>
</table>

Penn Fencing, Inc.
ATTACHMENT F: RESPIRATOR INSPECTION CHECKLIST
# Respirator Inspection Checklist

<table>
<thead>
<tr>
<th>Type of Respirator:</th>
<th>Location:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Respirator Issued to:</td>
<td>Type of Hazard:</td>
</tr>
</tbody>
</table>
| Face piece | □ Cracks, tears, or holes  
□ Face mask distortion  
□ Cracked or loose lenses/face shield |
| Head straps | □ 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 |
| Air Supply Systems | □ Breathing air quality/grade  
□ Condition of supply hoses  
□ Hose connections  
□ Settings on regulators and valves |
| Rubber/Elastomer Parts | □ Pliability  
□ Deterioration |

<table>
<thead>
<tr>
<th>Inspected by:</th>
<th>Date:</th>
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<tbody>
<tr>
<td>Action Taken:</td>
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</table>
OSHAs Employee Responsibilities

- Read the OSHA Poster at the workplace.
- Comply with all applicable OSHA standards.
- Follow all lawful employer safety and health rules and regulations and wear or use prescribed protective equipment while working.
- Report hazardous conditions to the supervisor.
- Report any work-related injury or illness to the employer, and seek treatment promptly.
- Exercise rights under the Act in a responsible manner.

New Hire Training Summary:

The following information must be reviewed with employees, and they shall demonstrate an understanding of the training before being allowed to wear a respirator.

- Review of this written Respiratory Protection Program
- Respiratory hazards encountered and their health affects
- Convey all hazards associated with the companies work practices and their health effects.
- Review the importance of selecting the proper respirator and cartridges for the specific contaminant they to which they will be exposed.
  - Particulate
  - Chemical
  - Combination
- Each employee who wears a respirator must complete the medical evaluation (Appendix C) and be medically cleared by a physician to prove they are capable of wearing the respirator.
- Before issuance of the respirator the individual must past a qualitative or quantitative fit test.
- Review the self test procedure (Positive & negative pressure test).
- Review any emergency use procedures
- Review proper techniques for cleaning and storing.
- Medical signs and symptoms limiting the effective use of respirators
- If respirator use is voluntary, the employee uses their own respirator, or paper dust masks are used, refer to 29 CFR 1910.134 Appendix D located in Attachment D.

Upon completing the review of the above information, have new employees sign the new hire training log on the following page.
I have read the information contained in this document and understand the health and safety policies and procedures contained herein. I have been advised of my OSHA required employee responsibilities and hereby pledge to abide by them. I also understand that it is my responsibility to work safely and to notify my supervisor regarding any questions I have or unsafe working conditions that I observe.

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