Respirator Protection Program (RPP)
REVISION HISTORY

This program is reviewed annually per Colby College policy and amended as necessary to reflect workplace changes that affect respirator use, including but not limited to the following:

- Equipment or process changes
- Introduction of new respiratory hazards
- Changes in respirators
- Issues noted by respirator users

<table>
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<th>REVISION</th>
<th>DESCRIPTION OF CHANGE</th>
<th>REVISION EFFECTIVE DATE</th>
<th>REVISION COMPLETED BY: NAME / COMPANY</th>
<th>MANAGER APPROVAL / DATE</th>
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<tr>
<td>A</td>
<td>• Initial program</td>
<td>2/2015</td>
<td>Wade Behnke / Colby College</td>
<td>Mark Crosby</td>
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<tr>
<td>B</td>
<td>• Updated Appendix G, Authorized Respirator Users</td>
<td>2/2016</td>
<td>Wade Behnke / Colby College</td>
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<tr>
<td>C</td>
<td>• Updated Appendix G, Authorized Respirator Users</td>
<td>3/2017</td>
<td>Wade Behnke / Colby College</td>
<td>Mark Crosby</td>
</tr>
</tbody>
</table>

This plan is maintained by the Environmental, Health, and Safety Director. Please direct and concerns or comments to the Director.
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1.0 PURPOSE

1.1 This program is intended to protect Colby College employees from respiratory hazards that they may encounter in the workplace and to ensure compliance with United States Occupational Safety and Health Administration (OSHA) Respiratory Protection Standard (29 Code of Federal Regulations [CFR] 1910.134).

1.2 Good industrial hygiene practice emphasizes exposure prevention and minimization. Colby will minimize the use of respirators/PPE by following the hierarchy of safety controls in the order listed below:
   - Materials elimination or substitution,
   - Engineering controls,
   - Administrative controls and work practices, and
   - Personal protective equipment (PPE).

2.0 SCOPE

2.1 This written RPP applies to all Colby employees who are required to use respirators.

2.2 Voluntary use of respirators at Colby is limited to the use of dust masks only. Employees who are authorized to use respirators even though their use is not required by OSHA will be provided OSHA 29 CFR 1910.134 Appendix D (reprinted and included herein as Appendix A, Voluntary Respirator Use Documentation Form). Employees will be required to sign a copy of Appendix D, which Colby's RPP Administrator will maintain in a file for documentation purposes. The RPP Administrator will answer any questions employees may have regarding their voluntary use of respirators.

3.0 RESPONSIBILITIES

3.1 Responsibilities for oversight and implementation of Colby College’s RPP are assigned below. Identified personnel may designate tasks assigned to them to a qualified employee or consultant, as appropriate.

3.2 Environmental, Health, and Safety (EHS) Director
   - Act as Colby College’s RPP Administrator;
   - Provide training to required respirator wearers in compliance with this Program and the OSHA standard;
   - Maintain and annually review the written Program;
   - Implement and oversee this Program;
➤ Ensure that each employee included in the RP Program is provided the medical evaluation, fit test, equipment and information necessary to fulfill the requirements and purposes specified within the scope of this RPP; and
➤ Identifying processes or areas where respiratory protection may be required and determine applicability.

3.3 Respirator Wearing Employees
➤ Follow all Colby College and respirator use procedures to ensure the effectiveness of this program;
➤ Attend and actively participate in training provided by Colby to ensure their health and safety;
➤ Properly clean, store, and wear their respirator in accordance with this Program;
➤ Answer medical questionnaires truthfully and completely in order for the medical evaluation to effectively protect their health (note that these questionnaires are confidential medical records and will not be reviewed by Colby College); and
➤ Notify the RPP Administrator or, in his absence, their supervisor, of any questions or concerns regarding respiratory hazards that may be encountered in the workplace.

4.0 PROCEDURE
4.1 Respirator Selection
4.1.1 Respirator selection requires correctly matching the respirator with the hazard, the user, and the work environment. The respirator selected must be adequate to effectively reduce the exposure of the user under all conditions of use, including reasonably foreseeable emergency situations. Proper respirator selection involves choosing a device that fully protects the employee from the respiratory hazard and permits the employee to perform the job with minimal physical burden.

4.1.2 Applicable industrial hygiene air monitoring results have been included in Appendix B, Respirator Selection Table, which lists the results for a required task alongside applicable PELs and/or TLVs as well as the appropriate respirator for the task as determined by the air monitoring or Colby College policy.

4.1.3 Appendix B, Respirator Selection Table, identifies all job tasks and process areas at Colby where a respirator use is required. The RPP Administrator is responsible for identifying new tasks and/or areas where respiratory protection may be required. In addition, all Colby employees are expected to inform the RPP Administrator, or, in his absence, their direct supervisor, of any respiratory hazard concerns. All potentially applicable respiratory hazard areas or activities should be entered into Appendix B.
4.1.4 When exposure levels have the potential to exceed the PELs but have not been tested, the area or task will be considered respirator required until air monitoring can be conducted.

4.1.5 Ensure that affected employees are medically cleared to use the respirator type(s) that will be required for their specific job tasks. Ensure that all other RPP elements are satisfied (i.e. affected employees must be fit tested and trained with the new respirators).

4.2 Additional Respirator Selection Criteria

4.2.1 When the atmosphere is immediately dangerous to life and health (IDLH), OSHA requires the use of full-face Pressure Demand Respirators with minimum 30-minute air supply. Supplied air respirators are required when a gas or vapor has an odor threshold below the PEL or TLV.

*Note: Colby College employees are not allowed to enter into an IDLH atmosphere or an atmosphere where a supplied air respirator or SCBA is required.*

4.2.2 Corrective lens inserts, or contacts, are encouraged for persons requiring vision correction in order to avoid interference with the respirator facepiece seal. If an employee wears corrective eyeglasses, they must be worn during the fit testing procedure and must not interfere with the seal of the facepiece to the face.

4.2.3 Respirators assigned to higher protection factor classes may be used for lower class exposures (i.e., an employee authorized to wear a cartridge respirator for working in the spray booth, for example, is permitted to use the respirator for a less hazardous activity).

4.2.4 All respirators and respirator parts, including filters and cartridges/canisters, must be NIOSH-certified.

4.2.5 For protection against gases and vapors, an air-purifying respirator (APR) equipped with appropriate organic vapor (OV) cartridges or canisters may be used, provided that it is suitable to the work being performed and that there is an end of service life indicator (ESLI) or an adequate cartridge or canister change-out schedule. See Appendix C, Cartridge Change Out Schedule and Appendix B, Respirator Selection Table for more information.

4.2.6 Respirators and cartridges/canisters that are selected will be specifically rated for all anticipated substances to which personnel may be exposed. In cases where protection from multiple contaminants is necessary, Colby will ensure that the respirator is appropriate for each contaminant and can handle the maximum anticipated concentration of each substance.

4.3 Medical Evaluations

4.3.1 Due to the physical burden associated with respirator use, a medical evaluation is required to ensure that it will not create a health hazard for the employee. The degree of burden varies with the type of respirator,
task, workplace conditions, and physical health of the employee. The medical evaluation will include completion of the confidential Respirator Medical Evaluation Questionnaire (Appendix D) and may include a medical exam if deemed appropriate by medical provider.

4.3.2 The medical provider (physician or other PLHCP) clinic for Colby College is Workplace Health (WPH), Waterville, Maine.

4.3.3 Colby will provide WPH with a copy of this RP Program, and the following additional information as needed:
- The type of the respirator(s) the employee will use,
- The duration and frequency of respirator use,
- The expected physical work effort and conditions, and/or
- Additional protective clothing and equipment the employee will use.

4.3.4 WPH will provide follow-up medical evaluations/physicals if deemed necessary by the physician reviewing the evaluation or in the following instances:
- The employee reports medical signs or symptoms related to their ability to wear a respirator;
- The employee’s supervisor, RPP Administrator or physician requests a new evaluation;
- A change in workplace conditions (e.g., physical/work effort, PPE, temperature, etc.) or a RPP evaluation warrants re-examination; and/or
- The employee gives a positive response to any question among questions 1 through 8 of Part A, Section 2 on the Respirator Medical Evaluation Questionnaire (included in this RP Program as Appendix D). These questions pertain to tobacco use, previous medical conditions, existing medications and a history of problems with respirator use.

4.3.5 Colby will obtain a written recommendation (determination) from WPH regarding the employee’s ability to use a respirator. The determination shall provide the following information:
- Whether the employee is medically able to use the respirator, including any limitations placed on respirator use related to the employee’s medical condition or relating to workplace conditions where the respirator will be used;
- The need, if any, for follow-up medical evaluations; and
- A statement that the physician or PLHCP has provided the employee with a copy of the physician or PLHCP’s written recommendation.

4.4 A respirator fit test must be completed following a successful medical evaluation and before an employee is required/allowed to use any respirator. The fit test
must be completed with the same make, model, style, and size of respirator that will be used. Fit testing will be performed at the following frequency:

- Prior to the employee's initial use of the respirator;
- At least annually;
- Whenever a different respirator facepiece is used (size, style, model or make); and
- Whenever the employee, RPP Administrator, physician or PLHCP, supervisor, or others report or observe that a change in the employee's physical condition could affect the fit of the respirator (e.g., scarring, dental changes, or large weight gain/loss).

4.5 The RPP Administrator or WPH will conduct qualitative fit tests. Fit tests will be conducted in accordance with OSHA/manufactured recommended fit test protocols and procedures. If after passing a fit-test the employee notices that the respirator fit is unacceptable, they must inform their supervisor or the RPP Administrator. In such an instance, the employee will be provided an opportunity to select a different respirator and be retested. Fit test records will include the following minimum information:

- Name and identification of the employee tested;
- Type of fit test performed;
- Specific make, model, style, and size of the respirator tested;
- Date of the test; and
- Result of the test.

4.6 Employee Fit Check Procedure

4.6.1 Each employee is required to perform a facepiece seal check (also known as “fit check”, “seal check” or “leak test”) every time they put on a respirator. The user has the option of using either positive or negative seal checks or the respirator manufacturer’s recommended method (technical data sheets for respirators used at Coby, including manufacturer’s recommended fit check procedures, are provided in Appendix E, Respirator Manufacturer Technical Information). Basic pressure checks are summarized below.

- **Positive Pressure Check** -- Close off the exhalation valve and exhale gently into the facepiece. The fit is considered satisfactory if a slight positive pressure can be built up inside the facepiece without any evidence of outward leakage of air at the seal. For most respirators, this method of leak testing requires the wearer to first remove the exhalation valve cover before closing off the exhalation valve and then carefully replacing it after the test.

- **Negative Pressure Check** -- Close off the inlet opening of the canister or cartridge(s) by covering it with the palm of the hands or by replacing the filter seals. Inhale gently so that the facepiece collapses slightly, and hold your breath for 10 seconds. If the
cartridge inlet opening cannot be fully covered with your palm, the test can be performed by covering the inlet opening with a latex glove. If the facepiece remains slightly collapsed and no air leakage is detected then the respirator seal is satisfactory.

4.7 General Respirator Use Requirements

4.7.1 Only authorized and trained employees may use respirators; and they may use only the respirator that they were trained on and properly fitted to use. Appendix G list all current authorized Colby College respirator users.

4.7.2 Employees must use the proper respirator for the job as is called for by this Program or determined by the RPP Administrator or consulting industrial hygienists.

4.7.3 Employees who are required to wear a respirator shall notify their supervisor and/or the RPP Administrator of any physical stress resulting from using a respirator.

4.7.4 Respirator wearers shall maintain and store respirators in accordance with this RPP and associated training.

4.7.5 Colby employees shall leave the respirator use area:

- To clean the face-piece, etc;
- If they detect or suspect respiratory failure; or
- To replace respirator filters, cartridges, or canisters.

4.8 Respirator Use Prohibitions

4.8.1 Any condition which interferes with the face-to-facepiece seal, such as facial hair.

4.8.2 Using a defective or damaged respirator.

4.8.3 Using defective or damaged canisters or cartridges or those with illegible or removed labels.

4.8.4 Removing respirators in hazardous environments.

4.8.5 Improper storage of a respirator.

4.8.6 Sharing of a respirator resulting in the use of a respirator by an employee who is not authorized and trained to do so.

4.8.7 Any other activity or condition which could adversely impact the effectiveness of the respirator or is otherwise in contrast to this RPP.

4.10 Procedures for Emergency Use or Unknown Atmospheres

4.10.1 Colby employees are not permitted to use respirators for emergency use.

4.10.2 Colby employees must leave the respirator use area if there is any indication of respirator failure, including but not limited to if the employee:

- Detects contaminant odor or taste;
- Experiences dizziness, headache, or other adverse medical symptoms;
Experiences changes in breathing resistance, shortness of breath, coughing, chest pain or wheezing; and/or
Identifies facepiece leakage or other respirator deficiency.

4.10.3 Colby employees are prohibited from entering IDLH atmospheres. Unknown potentially hazardous atmospheres must be treated as if they are immediately dangerous to life and health. If these situations arise, contact the RPP Administrator.

4.11 Respirator Cleaning
4.11.1 Respirators are to be maintained in good sanitary and operational condition by the wearer. Respirators must be cleaned, disinfected, and dried using the procedures recommended by the manufacturer (refer to Appendix E for respirator manufacturer technical information). In general respirators (including those used in fit testing/training) must be cleaned after each use and between users (note that Colby does not currently allow sharing of respirators) using the following procedures:
- Disassemble the respirator and check for defects and damage;
- Wash all components in warm running water with a mild detergent or respirator manufacturer-recommended cleaner (use a soft [not wire] brush to facilitate removal of dirt);
- Rinse all components in clean, warm running water;
- Drain to remove excess water;
- Rinse all components in warm running water; and
- Air dry or hand dry components with a clean and lint free cloth.

4.11.2 Colby provides all necessary respirator cleaning products such as respirator wipes and mild detergents.

4.12 Storage
4.12.1 All respirators and filters or cartridges must be stored to protect them from the following:
- Damage
- Contamination
- Dust
- Sunlight
- Extreme temperatures
- Excessive moisture
- Damaging chemicals

4.12.2 The respirator must be fully dry before storing. Respirators must be kept in a storage container (e.g. plastic bag or container) which can be sealed, and put away in the employee’s locker or other secure place. The storage container and space must be of adequate size so as to not distort the respirator face piece or exhalation valve. Temporary storage (mid-shift) must also protect the respirator and filters or cartridge from the conditions listed above.
4.13 Routine Inspections

4.13.1 All non-disposable (N95s) respirators used in routine situations shall be inspected before each use and during cleaning. Respirator inspections should be formally documented routinely, typically at least once per month, depending on use. Appendix F, Respirator Inspection Form, provides the inspection elements and a means of documentation.

4.13.2 The documented inspection must specifically address all elements required by OSHA, including:

- 4.13.2.1 A check of respirator function;
- 4.13.2.2 A check of tightness of connections;
- 4.13.2.3 A check of the condition of various parts, including but not limited to:
  - Facepiece;
  - Head straps;
  - Valves;
  - Connecting/breathing tube (if applicable);
  - Cartridges, canisters or filters; and
  - A check of elastomeric parts for pliability and signs of deterioration.

5.0 RECORDS

5.1 Colby's recordkeeping under the RPP is as follows:

- 5.1.1 Medical records such as medical questionnaires and physician or PLHCP respirator determinations will be retained for the duration of employment plus thirty (30) years;
- 5.1.2 Fit test records will be retained until the next fit test is administered (at least annually);
- 5.1.3 Training records will be retained until the next training is received by the employee; and
- 5.1.4 Monthly respirator inspection forms will be retained until the next inspection is completed.

5.2 Recordkeeping is intended to provide employees and their designated representatives a right of access to relevant exposure and medical records, and to provide representatives of OSHA a right of access to these records in order to fulfill responsibilities under the Occupational Safety and Health Act.

6.0 EMPLOYEE TRAINING

6.1 Training will be presented in a comprehensive and understandable way. Employees may be trained using videotapes or online training courses; these training materials will be supplemented with Colby specific information. Such
information may be distributed in a classroom setting, during a routine safety
meeting, or other appropriate means.

6.2 Required Training Frequency
- Before the employee initially uses a respirator in the workplace; and
- No less than annually thereafter;
- Whenever changes in the workplace or respirator type render previous
  training obsolete or insufficient;
- Whenever an employee’s respirator use or knowledge demonstrates a
  lack of understanding or skill; and
- Whenever any other situation arises in which retraining appears
  necessary to ensure safe respirator use and compliance with the RPP.

6.3 Required Training Elements
- Why the respirator is necessary and how improper fit, usage, or
  maintenance can compromise the protective effect of the respirator;
- An overview of Colby’s specific respiratory hazards, the extent of
  employee exposures to those hazards, and the potential health effects of
  such exposure;
- Limitations and capabilities of respirators used at Colby College;
- An explanation of how to use respirators effectively in emergency
  situations, including when the respirator malfunctions;
- Instructions and demonstrations on how to inspect, put on and remove,
  use and check the seal of the respirator;
- The procedures for respirator maintenance and storage; and
- An explanation of how to recognize medical signs and symptoms that
  may limit or prevent the effective use of respirator.

7.0 DEFINITIONS

7.1 **Air-purifying respirator (APR)**: A respirator with an air-purifying filter,
cartridge, or canister that removes specific air contaminants by passing ambient
air through the air-purifying element.

7.2 **Assigned protection factor (APF)**: 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

7.3 **Canister or cartridge**: A container with a filter, sorbent, or catalyst, or
combination of these items, which is attached to a respirator facepiece and
removes specific contaminants from the air passed through the container.

7.4 **Ceiling (C)**: limit is the amount or concentration of a regulated air contaminant
which may not be exceeded at any time; and is enforceable by OSHA. This is
applied to materials that have immediate effects.
7.5 **Emergency situation**: 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.

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

7.7 **End-of-service-life indicator (ESLI)**: 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.

7.8 **Filter or air purifying element**: A component used in respirators to remove solid or liquid aerosols from the inspired air.

7.9 **Filtering facepiece (dust mask)**: 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.

7.10 **Fit factor**: 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.

7.11 **Fit test**: A protocol to qualitatively or quantitatively evaluate the fit of a respirator on an individual.

7.12 **Immediately dangerous to life or health (IDLH)**: 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.

7.13 **Permissible Exposure Limit (PEL)**: The maximum amount or concentration of a regulated air contaminant that a worker may be exposed to over a specified period of time; and it is enforceable by OSHA. It is expressed as an 8-hour time weighted average (TWA) or as a 15- or 30-minute Short Term Exposure Limit (STEL), usually in milligrams per cubic meter of air (mg/m³) or parts per million (ppm).

7.14 **Physician or other privately licensed health care professional (PLHCP)**: 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 health care services required by 29 CFR 1910.134(e).

7.15 **Qualitative fit test (QLFT)**: A pass/fail fit test to assess the adequacy of respirator fit that relies on the individual’s response to the test agent.

7.16 **Quantitative fit test (QNFT)**: An assessment of the adequacy of respirator fit by numerically measuring the amount of leakage into the respirator.

7.17 **Threshold Limit Value (TLV)**: The maximum amount of a regulated air contaminant which a worker may be exposed to as recommended (non-enforceable) by the American Conference of Governmental Industrial Hygienists (ACGIH).

7.18 **Time-weighted average (TWA)**: The average exposure over a specified period of time, usually 8-hours
7.19 **User seal check**: An action conducted by the respirator user to determine if the respirator is properly seated to the face.
Appendix A: Voluntary Use Respirator Form
Mandatory Information for Employees Using Respirators
When Not Required Under the OSHA Respiratory Protection Standard

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 for what purpose the respirator is designed 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 particles of fumes or smoke.

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

NOTE: Voluntary use of respirators at Colby College is limited to the use of filtering facepieces (dust masks); and voluntary use of other respirator types is prohibited without authorization.

Employee Signature: __________________________ Date: __________________________

RP Program Administrator Notes/Conditions of Use (if applicable):
____________________________________________________________
____________________________________________________________
____________________________________________________________
____________________________________________________________
____________________________________________________________

Colby College
5500 Mayflower Hill
Waterville ME 04901
Appendix B: Respirator Selection Table
# RESPIRATOR SELECTION TABLE

<table>
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<tr>
<th>Department</th>
<th>Task</th>
<th>Air Contaminant(s)</th>
<th>Highest Result (in mg/m³ unless otherwise noted)</th>
<th>OSHA PEL (8-hour TWA in mg/m³ unless otherwise noted)</th>
<th>ACGIH TLV (8-hour TWA in mg/m³ unless otherwise noted)</th>
<th>Respirator &amp; Cartridge Required³</th>
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<td>Health Center</td>
<td>Contagious Disease Response</td>
<td>Various biological agents</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>Cardinal N95</td>
</tr>
<tr>
<td>Central Heating Plant (PPD)</td>
<td>Cleaning hydraulic alley</td>
<td>Respirable Particulates</td>
<td>.0792</td>
<td>5</td>
<td>NA</td>
<td>Moldex N95</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Total Particulates</td>
<td>.144</td>
<td>15</td>
<td>NA</td>
<td></td>
</tr>
<tr>
<td>Paint Department</td>
<td>Solvent based wood treatment spray application</td>
<td>Various organic solvents</td>
<td>Not tested</td>
<td>Various based on product</td>
<td>Various based on product</td>
<td>North 7700/N75001 cartridge</td>
</tr>
</tbody>
</table>

Notes:
OSHA = United States Occupational Safety and Health Administration.
ACGIH = American Conference of Governmental Industrial Hygienists.
PEL = Permissible Exposure Limit, enforceable limit set by OSHA.
TLV = Threshold Limit value, recommended (non-enforceable) limit set by ACGIH.
Appendix C: Cartridge Change Out Schedule
# RESPIRATOR CARTRIDGE CHANGE-OUT SCHEDULE/LOG

Use the following log form to determine when respirator cartridges have reached their end of service and should be replaced with a new cartridge.

<table>
<thead>
<tr>
<th>Cartridge Change-Out Information</th>
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<tbody>
<tr>
<td>Date</td>
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<tr>
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<tr>
<td>1.</td>
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<td>13.</td>
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<td>14.</td>
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<td>15.</td>
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<td>16.</td>
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<tr>
<td>17.</td>
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</tbody>
</table>

Each time you use the respirator/set of cartridges, record the time it was used under “Amount of Time Respirator is Worn”, add that amount to the time in the “Total/Cumulative Time” column. Replace the cartridge after a maximum of 30 hours of use.
Appendix D: Medical Evaluation Questionnaire
Appendix E: Respirator Manufacturer Technical Information
Appendix F: Respirator Inspection Form
RESPIRATOR INSPECTION FORM

Inspector’s signature: __________________________________________________________
Date:__________________   Respirator Type: _____________________

USER MUST COMPLETE A VISUAL INSPECTION EACH TIME BEFORE USE. COMPLETE THIS
DOCUMENTED INSPECTION AT LEAST MONTHLY. Submit to RP Program Administrator for filing
if no defects noted OR immediately correct any failed safety items, note the correction, and submit
to the RP Program Administrator.

<table>
<thead>
<tr>
<th>REQUIREMENT (place check mark in pass/fail column)</th>
<th>PASS</th>
<th>FAIL</th>
</tr>
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<tbody>
<tr>
<td>Rubber Face-piece</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Excessive dirt</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Cracks, tears, or holes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Distorted</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Cracked, stretched, or loose lenses</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Head Straps</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Breaks or tears</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Loss of elasticity</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Broken or malfunctioning buckles or attachments</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Excessively worn head harness</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Inhalation/Exhalation Valves</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Coated with detergent residue, dust, or dirt</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Cracks, tears, or distortion</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Missing or defective valve cover</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Filter Elements</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Properly named and color coded</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• NIOSH approved correct for hazard</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Missing or worn gaskets</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Worn threads</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Cracks or dents in filter housing</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Appendix G: Authorized Respirator Users
Authorized Respirator Users

Colby employees who are required to use respirators are listed below. Employees who are not listed are not currently authorized to use respirators or engage in tasks where respiratory protection is needed.

**TABLE 1: LIST OF EMPLOYEES WHO ARE REQUIRED TO USE RESPIRATORS**

<table>
<thead>
<tr>
<th>Employee Name</th>
<th>Department</th>
<th>Respirator Type</th>
<th>Size</th>
<th>Tasks Requiring Respirator</th>
<th>Medical Exam Date</th>
<th>Fit Test Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Paul Berkner</td>
<td>Health Center (HC)</td>
<td>Cardinal N95</td>
<td>M</td>
<td>Contagious disease response</td>
<td>1/26/17</td>
<td>2/9/17</td>
</tr>
<tr>
<td>Laura Patterson</td>
<td>HC</td>
<td>Cardinal N95</td>
<td>S</td>
<td>Contagious disease response</td>
<td>1/26/17</td>
<td>2/9/17</td>
</tr>
<tr>
<td>Holly Weidner</td>
<td>HC</td>
<td>Cardinal N95</td>
<td>S</td>
<td>Contagious disease response</td>
<td>1/26/17</td>
<td>2/9/17</td>
</tr>
<tr>
<td>Judy Whyte</td>
<td>HC</td>
<td>Cardinal N95</td>
<td>M</td>
<td>Contagious disease response</td>
<td>1/26/17</td>
<td>2/9/17</td>
</tr>
<tr>
<td>Lydia Bolduc-Marden</td>
<td>HC</td>
<td>Cardinal N95</td>
<td>S</td>
<td>Contagious disease response</td>
<td>1/26/17</td>
<td>2/9/17</td>
</tr>
<tr>
<td>Helen Balgooyen</td>
<td>HC</td>
<td>Cardinal N95</td>
<td>M</td>
<td>Contagious disease response</td>
<td>1/26/17</td>
<td>2/9/17</td>
</tr>
<tr>
<td>Robin Shafer</td>
<td>HC</td>
<td>Cardinal N95</td>
<td>S</td>
<td>Contagious disease response</td>
<td>1/26/17</td>
<td>4/14/2017</td>
</tr>
<tr>
<td>Jennifer Riddle</td>
<td>HC</td>
<td>Cardinal N95</td>
<td>M</td>
<td>Contagious disease response</td>
<td>1/26/17</td>
<td>4/13/17</td>
</tr>
<tr>
<td>Alison Gagliardi</td>
<td>HC</td>
<td>Cardinal N95</td>
<td>M</td>
<td>Contagious disease response</td>
<td>1/26/17</td>
<td>2/9/17</td>
</tr>
<tr>
<td>Jeff Jason</td>
<td>PPD</td>
<td>North 7700/N75001 cartridge</td>
<td>L</td>
<td>Spray Booth</td>
<td>6/13/17</td>
<td>6/13/17</td>
</tr>
<tr>
<td>Employee Name</td>
<td>Department</td>
<td>Respirator Type</td>
<td>Size</td>
<td>Tasks Requiring Respirator</td>
<td>Medical Exam Date</td>
<td>Fit Test Date</td>
</tr>
<tr>
<td>--------------------</td>
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</tr>
<tr>
<td>Stephen Chestnut</td>
<td>PPD</td>
<td>North 7700/N75001</td>
<td>M</td>
<td>Spray Booth</td>
<td>1/27/17</td>
<td>6/9/17</td>
</tr>
<tr>
<td>Gary Rollins</td>
<td>PPD</td>
<td>North 7700/N75001</td>
<td>L</td>
<td>Spray Booth</td>
<td>1/27/17</td>
<td>3/24/17</td>
</tr>
<tr>
<td>Paul Anderson</td>
<td>PPD</td>
<td>Moldex N95</td>
<td>M</td>
<td>Biomass Cleaning</td>
<td>1/27/17</td>
<td>3/24/17</td>
</tr>
<tr>
<td>Greg Nadeau</td>
<td>PPD</td>
<td>Moldex N95</td>
<td>M</td>
<td>Biomass Cleaning</td>
<td>1/27/17</td>
<td>3/24/17</td>
</tr>
<tr>
<td>Russell Rollins</td>
<td>PPD</td>
<td>Moldex N95</td>
<td>M</td>
<td>Biomass Cleaning</td>
<td>1/27/17</td>
<td>3/24/17</td>
</tr>
<tr>
<td>Ray Rayeski</td>
<td>PPD</td>
<td>Moldex N95</td>
<td>M</td>
<td>Biomass Cleaning</td>
<td>1/27/17</td>
<td>3/24/17</td>
</tr>
<tr>
<td>Wil Bachelder</td>
<td>PPD</td>
<td>Moldex N95</td>
<td>M</td>
<td>Biomass Cleaning</td>
<td>1/27/17</td>
<td>3/24/17</td>
</tr>
<tr>
<td>George Cole</td>
<td>PPD</td>
<td>Moldex N95</td>
<td>M</td>
<td>Biomass Cleaning</td>
<td>3/28/17</td>
<td>3/24/17</td>
</tr>
<tr>
<td>James Knowlton</td>
<td>PPD</td>
<td>Moldex N95</td>
<td>M</td>
<td>Biomass Cleaning</td>
<td>3/13/17</td>
<td>3/24/17</td>
</tr>
</tbody>
</table>

Notes:
1. Cardinal N95 is a National Institute for Occupational Safety and Health (NIOSH)-approved dust mask. This mask is not effective against gases or vapors and is not to be sued in environments with suspended oil particles in air.
2. Moldex 2300N95 N95 is a National Institute for Occupational Safety and Health (NIOSH)-approved dust mask. This mask is not effective against gases or vapors and is not to be sued in environments with suspended oil particles in air.
3. North® 7700 is a National Institute for Occupational Safety and Health (NIOSH)-approved half-face air purifying respirator (APR).