

# DECEMBER RESPIRATORS

## RESPIRATOR PROGRAM ADMINISTRATOR:

### MEMBER TRAINING

All firefighters will be trained on the selection, use, limitations, and maintenance of respirators per the manufacturers instructions annually.

More than just SCBAs are used in the fire service. Each type of respirator selected and used must meet the requirements of this program, including SCBAs, Supplied Air Respirators, Air Purifying Respirators (APRs) and disposable particulate masks.

Firefighters shall be thoroughly trained in accordance with the manufacturer's instructions on emergency procedures such as use of regulator bypass valve, corrective action for facepiece and breathing tube damage, and breathing directly from the regulator (where applicable).

Firefighters shall be **tested at least annually on the knowledge of respiratory protection** equipment operation, safety, organizational policies and procedures, and facepiece seals, to the fire department's standard and document results.

After completing such training, each firefighter **shall practice at least quarterly**, for each type and manufacture of respirator available for use, the step-by-step procedure for donning the respirator and checking it for proper function.

### RESPIRATOR SELECTION

Only firefighters with a properly fitting facepiece shall be permitted by the fire department to function in a hazardous atmosphere wearing a SCBA.

Firefighters shall only use department issued respirators, cartridges, and filters on the included chart. If additional products or activities requiring a respirator are done by a member, the Respirator Program Administrator will use a respirator selection guide, the SDS sheet, the AHJ adopted NFPA standard or the manufacturer's recommendation for the proper respirator cartridge and filter and update the selection and change schedule chart on this page. A negative pressure respirator, any self-contained breathing

apparatus, or any respirator which is used in an atmosphere immediately dangerous to life or health (IDLH) equipped with a facepiece shall not be worn if facial hair comes between the sealing periphery of the facepiece and the face or if facial hair interferes with the valve function.

The wearer of a respirator shall not be allowed to wear contact lenses if the risk of eye damage is increased by their use.

### MEDICAL EVALUATIONS

Every firefighter who must wear a respirator will be required to have an approved medical evaluation before they are allowed to use the respirator. We will use:

as our medical evaluator. Completed questionnaires are confidential and will be sent directly to the medical provider without review by the department. We will get a recommendation from this medical provider on whether or not the firefighter is medically able to wear a respirator. Failure to pass a respirator medical evaluation will result in the inability to perform structural firefighting duties of any kind.

#### Additional Medical Evaluations required if:

- Our medical provider recommends it.
- Our Respirator Program Administrator decides it is needed.
- A firefighter shows signs of breathing difficulty.
- Changes in work conditions that increase firefighter physical stress (such as confined spaces).

### RESPIRATOR FIT TESTING

All firefighters who wear tight fitting respirators will be fit-tested before using their respirator. Firefighters will only be allowed to use the specific size and model of respirator they are fit tested for. Fit-testing will be repeated at least annually. Fit-testing will also be done when a different respirator facepiece is chosen; when there is a physical change in a firefighter's face

Fill-in General Product used or Activity Below	Requirements for Respirator	Department Issued Model of Respirator and Cartridge Used	Fill-In Frequency of Cartridge Change Response Conditions
Fire Fighting Activities in IDLH or Hazardous Atmospheres	SCBA - NIOSH or 2007 edition of NFPA 1981 Compliant		N/A
Overhaul	SCBA - NIOSH or 2007 edition of NFPA 1981 Compliant		N/A
Post Overhaul prior to Exposure Evaluation	SCBA - NIOSH or 2007 edition of NFPA 1981 Compliant		N/A
Asbestos Present	SCBA - NIOSH or 2007 edition of NFPA 1981 Compliant		N/A
IDLH/Hazardous Atmospheres	SCBA - NIOSH or 2007 edition of NFPA 1981 Compliant		N/A
EMS Calls with possible TB Exposure	NIOSH-approved, 95% efficient particulate APR		After each response, or if plugged, damaged or soaked change cartridge, filter or mask immediately
EMS Calls with Aggressive Viral or Airborne Pathogens	Current CDC Recommended Guidelines		After each response, or if plugged, damaged or soaked change cartridge, filter or mask immediately

that would affect fit, or when our firefighters or medical provider notify us that the fit is unacceptable.

*No facial hair is allowed between the skin and the sealing surface of the mask for fit testing or tight fitting respirator use.*

Respirators are chosen for fit-testing following procedures in WAC 296-842. We perform fit-testing annually using one or more of the following fit-testing protocols or using a quantitative fit-testing instrument:

The fit-testing instruments we use for the following types of respirators are:

**SCBAs** - Testing is done by quantitative Fit Testing with Manufacturer approved test piece only. The fit testing is done only in a negative-pressure mode. If the facepiece is modified for fit testing, the modification shall not affect the normal fit of the device. Such modified devices shall only be used for fit testing.

### Air Purifying Respirators

#### N95 or P95 Disposable Mask Respirators

Documentation of our fit-test results is kept in each firefighter's personnel file at the station.

### USER SEAL CHECK PROCEDURES

Firefighters need to conduct a seal check each time you put their respirator on to make sure the respirator is properly positioned to prevent leakage during use and to detect functional problems. If you can't pass both parts, your respirator is not functioning properly, see the OIC for further instruction.

#### Positive Pressure Check:

- If removable, take exhalation valve cover off.
- Cover the exhalation valve completely with the palm of your hand while exhaling gently to inflate the facepiece slightly.
- The respirator facepiece should remain inflated (indicating a build-up of positive pressure and no outward leakage).
- If you detect no leakage, replace the exhalation valve cover (if removed).
- If you detect evidence of leakage, reposition the respirator (after removing and inspecting it), and try the positive pressure check again.

#### Negative Pressure Check:

- Completely cover the inhalation opening(s) on the cartridges or canister with the palm(s) of your hands while inhaling gently to collapse the face piece slightly.

- Once the facepiece is collapsed, hold your breath for 10 seconds while keeping the inhalation openings covered.
- The facepiece should remain slightly collapsed, indicating negative pressure and no inward leakage.
- If you detect no evidence of leakage, the tightness of the facepiece is considered adequate, the procedure is completed and you may now use the respirator.
- If you detect leakage, reposition the respirator (after removing and inspecting it) and repeat both the positive and negative pressure fit checks.

#### RESPIRATOR CLEANING, STORAGE, AND MAINTENANCE

Our non-disposable respirators will be stored in the following clean locations: \_\_\_\_\_.

Respirators will be **cleaned and sanitized after every use in a training or emergency setting** (does not apply to disposable N95 or P95 masks which are disposed daily). Respirators will be cleaned according to the manufacturers and attached instructions.

#### RESPIRATOR CLEANING PROCEDURE

- Remove filters, cartridges, canisters, speaking diaphragms, demand and pressure valve assemblies, hoses or any components recommended by the manufacturer. Discard and repair any defective parts.
- Wash components in warm 110°F maximum water with a mild detergent or with a cleaner recommended by the manufacturer.
- Rinse components thoroughly in clean, warm 110°F maximum, preferably, running water.  
**Note:** *The importance of thorough rinsing can't be overemphasized.*
- Drain components.
- Air dry or hand dry components with a clean, lint-free cloth. (WFC Sample Policy 12.04.01)

- Reassemble the facepiece components. Replace filters, cartridges, and canisters, if necessary.

- Test the respirator to make sure all components work properly.  
In cases where there is a reported failure of a respirator, it shall be removed from service, tagged and recorded as such, and tested before being returned to service.  
SCBA cylinders shall be hydrostatically tested within the periods specified by the manufacturer and the applicable governmental agencies.

#### RESPIRATOR RECORDS

Records will be kept at the Main Station office (service plus 30 years) in firefighter files and firefighters will have access to their own records.

- A copy of this completed respirator program.
- Firefighters' latest fit-test results.
- Firefighter training records.
- Written recommendations from our medical provider.

#### RESPIRATOR PROGRAM EVALUATION

We annually evaluate our respiratory program for effectiveness by the following:

1. Checking fit-test results and health provider evaluations to identify trends.
2. Asking firefighters who wear respirators: How they fit? Do they feel the respirator is adequately protecting them? Do they notice any difficulties in breathing while wearing them? Do they notice any odors while wearing them, etc?
3. Periodically checking firefighter job duties for changes in chemical exposure.
4. Periodically checking maintenance and storage of respirators.
5. Periodically checking how firefighters use their respirators.
6. Date Reviewed by Department Respirator Program Administrator: \_\_\_\_\_

## DECEMBER SUGGESTED TRAINING SCHEDULE

	TRAINING SUGGESTION	DEPARTMENT ACTUAL TRAINING SCHEDULE
WEEK 1 DATE:	RESPIRATOR PROGRAM REVIEW AND FIT TESTING	
WEEK 2 DATE:	EMERGENCY CARE FOR FIREFIGHTER RESPONDERS	
WEEK 3 DATE:	OPTIONAL	
WEEK 4 DATE:	OPTIONAL	
OPTIONAL FULL DAY:		
OPEP DATE:		

#### BREATHING AIR FOR SCBA BOTTLES

When the fire department makes its own breathing air or uses vendor supplied breathing air, they shall maintain documentation certifying breathing air quality. The breathing air shall:

- (a) Be tested at least quarterly by using an air sample taken from the same outlet and in the same manner as the respirator breathing air cylinders are filled or air line respirators are connected.
- (b) Meet the requirements of either the 2003 edition of NFPA 1989, Standard on Breathing Air Quality for Fire and Emergency Services Respiratory Protection or the 1997 edition of ANSI/CGA G6-1 - *Commodity Specification for Air*, with a minimum air quality of grade.
- (c) Meet a water vapor level of 24 ppm or less.
- (d) SCBA cylinders shall be hydrostatically tested within the periods specified by the manufacturer and the applicable governmental agencies.

#### MORE TRAINING REQUIRED:

1. **Fill Out:** Respirator Selection and Chart.
2. **Train:** <http://www.lni.wa.gov/Safety/TrainTools/Trainer/Kits/Respirators>
3. **Test:** Annually test knowledge of respiratory protection equipment operation, safety, organizational policies and procedures, and facepiece seals.
4. **Medical Evaluation:** Include respiratory evaluation in annual medical exam.
5. **Fit Testing:** Professional or in-house fit test for each type of Respirator.

Reference: WAC 296-305-04001, WAC 296-842

Customize Your Program: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_