

This Respiratory Protection Program Evaluation will help you assess the strengths and weaknesses of your existing programs and policies. If no program or policy exists, it will help guide the development and implementation of an effective Respiratory Protection Program at your worksite. This evaluation should take no more than 10 - 15 minutes to complete.

Y = Yes, N = No, N/I = Needs Improvement

I. RESPIRATORY PROTECTION PLAN	Υ	N	N/I
A. A written Respiratory Protection Program is in place			
B. A qualified Program Administrator has been designated			
C. The written program is periodically reviewed and evaluated			
D. Management commitment to the Respiratory Protection Program is evident			
E. Appropriate respirators are provided to employees			
F. Employees are actively involved in the Respiratory Protection Program			
II. WORK ASSESSMENT	Υ	N	N/I
A. Work areas with contaminated air have been adequately identified			
B. Feasible engineering control options have been exhausted			
C. Worksite assessments to identify the need for respiratory protection are conducted:			
Periodically to ensure appropriate employee protection			
When new equipment or changes in work procedures may affect air quality			
D. IDLH conditions have been accurately identified			
III. RESPIRATOR SELECTION	Υ	N	N/I
A. Respirators are selected based on their ability to protect employees from contaminants			
B. Only NIOSH certified respirators are selected			
C. Employees are provided a reasonable number of respirators from which to select	ct		
D. Respirators are used in compliance with stated conditions of use			
E. Work areas where employees' exposure to contaminated air cannot be fully evaluated are considered IDLH			
F. Employees are provided with appropriate respirators for IDLH conditions			

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IV. MEDICAL EVALUATIONS		Υ	N	N/I
A. A medical evaluation is provided safely use a respirator	I to determine each employee's ability to			
B. A physician or other licensed he medical evaluations	althcare professional performs required			
C. Medical evaluations follow the p questionnaire	prescribed format provided in the medical			
D. Procedures are in place to provide	de follow-up medical examinations			
E. The medical questionnaire and e confidential manner	examinations are administered in a			
F. Necessary supplemental inform professional as part of the evaluation	ation is provided to the healthcare lation process			
G. The healthcare professional's was ability to use the respirator	ritten evaluation determines the employee's			
H. Additional medical evaluations a	are provided (as determined necessary)			
V. FIT TESTING		Υ	N	N/I
A. Comprehensive fit testing is con respirators in potentially harmful	npleted prior to allowing employees to wear I atmospheres			
-	of respirator is used in the fit test as the employee			
will routinely use				
,	itative fit test procedures are followed			
C. Appropriate qualitative or quanti	itative fit test procedures are followed whenever any change in equipment occurs, i.e.			
C. Appropriate qualitative or quantiD. Fit test procedures are followed make, brand, style, size, etc.	·			
C. Appropriate qualitative or quantiD. Fit test procedures are followed make, brand, style, size, etc.	whenever any change in equipment occurs, i.e.	Y	N	N/I
 C. Appropriate qualitative or quanti D. Fit test procedures are followed make, brand, style, size, etc. E. Employees are given reasonable VI. RESPIRATOR USE 	whenever any change in equipment occurs, i.e. e opportunity to change respirators and be refitted a good respirator seal are expressly prohibited	Y	N	N/I



VI. RESPIRATOR USE (CONTINUED)	Υ	N	N/I
C. Respirator effectiveness is continually monitored			
D. Procedures for IDLH atmospheres are strictly followed			
E. Appropriate respirator storage areas are provided			
F. Respirators are appropriately cleaned and disinfected			
G. Respirators are periodically inspected for condition and cleanliness			
H. Damaged and/or dirty respirators are removed from service until repaired and/or disinfected			
Appropriate specifications are followed in using supplied air respirators (if applicable)			
J. Filters, cartridges and canisters used are marked with the appropriate NIOSH approval label			
K. Air-purifying respirator cartridges have appropriate "change-out" schedules			
VII. TRAINING AND INFORMATION	Υ	N	N/I
A. Employees receive training in proper respirator fit testing, use, and care prior to use			
B. Employees demonstrate knowledge of proper respirator use and care			
VIII. RECORDKEEPING	Υ	N	N/I
A. A copy of the written Respiratory Protection Program is available for review by employees, regulatory agencies or others			
B. Medical evaluation records are maintained for the employee's length of employment plus 30 years			
C. Fit test records are maintained until replaced with more current records			
D. Training records are maintained until replaced with more current records			



COMMENTS:				
valuation for (Company)	Evaluation Completed by	Date	Evaluation Reviewed by	Date