Voluntary Use of Filtering Facepieces (N-95)

This document serves to document the voluntary use of filtering facepieces (N-95s).

Respirators are an effective method of protection against designated hazards when properly selected and worn. 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 designated 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.

In addition to steps listed above, all personnel voluntarily wearing an N-95 must be medically cleared (either through Student Health if a Student, or Occupational Health if Staff or Faculty), in addition to having a fit test conducted through Occupational Health (752-6051)

Employee’s Statement:

I have read and received a copy of this document and agree to take the precautions outlined within.

__________________________  ____________________________  ___________
Employee Name (Print)     Signature     Date

Supervisor’s Statement:

I have reviewed the employee’s job duties and have determined that the voluntary use of a filtering facepieces will not in itself create a hazard.

__________________________  ____________________________  ___________
Supervisor Name (Print)     Signature     Date

Please forward a copy of this document to Occupational Health for recordkeeping purposes.

Note: Mandatory use of respirators or filtering facepieces for the protection of workplace hazards as well as the voluntary use of half face or full face respirators with removable filters or cartridges requires enrollment in the Respiratory Protection Program. Please contact Occupational Health at 752-6077 for more information.