

Voluntary Use of Respiratory Protection Agreement

All University of Virginia-Facilities Management employees who are required to wear a respirator to limit exposure must be enrolled in the Facilities Management Occupational Health and Safety (FM-OHS) Respiratory Protection Program. Employees who are not required to wear respiratory protection may request permission for voluntary use from FM-OHS. Employees who receive permission to voluntarily use respiratory protection are responsible for maintaining the requirements of this *Voluntary Use of Respiratory Protection Agreement*.

Appendix-D to Sec. 1910.134 (Mandatory): Information for Employees Using Respirators When Not Required Under the 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 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.

See reverse side

The following requirements should be reviewed by both the Supervisor and their Employee:

- Employees approved to voluntarily use respiratory protection are permitted to wear a NIOSH-approved filtering face piece only. A filtering face piece means a negative pressure particulate respirator with a filter as an integral part of the face piece or with the entire face piece composed of the filtering medium. FM-OHS allows filtering face pieces which have an N designation and are 95-99% efficient (ex: N-95, N-99). Other respirators such as elastomeric half or full face respirators are not permitted for voluntary use.
- By agreeing to voluntarily use respiratory protection, the employee is ensuring that they are medically healthy enough to use a filtering face piece.
- The employee must inspect the filtering face piece for damage and contamination before each use. It is their responsibility to ensure the filtering face piece is clean, stored, and maintained so that its use does not present a health hazard. If the filtering face piece becomes damaged or soiled, it must be disposed of.
- If the employee experiences issues, such as difficulty breathing, while wearing a filtering face piece, they should leave the area, discontinue using the respirator, and contact their supervisor and FM-OHS before proceeding with the task.
- When modifications to a job task involving the use of a respirator occur or if new hazards are introduced into the work area, the employee must contact their supervisor and FM-OHS to evaluate these changes before proceeding.

By signing below, you are indicating that you have read and understand the information provided on this form, and are accepting responsibility for the requirements of this agreement for voluntary use of respiratory protection. This form must be signed by both the supervisor and their employee. Retain a completed copy of this form for both the supervisor's and employee's records, and return a copy to FM-OHS for recordkeeping.

Employee Name (Print)

Employee Signature

Date

Supervisor Name (Print)

Supervisor Signature

Date