

**OSHA's  
Respiratory Protection Standard  
29 CFR 1910.134**



This program is intended to be a resource for instructors of occupational safety and health and is not a substitute for any of the provisions of the Occupational Safety and Health Act of 1970 or for any standards issued by the U.S. Department of Labor's Occupational Safety and Health Administration (OSHA).

OSHA's Office of Training and Education wishes to acknowledge 3M Occupational Health and Safety Division, MSA, North Safety Products and TSI for contributing some of the graphics used in this program. Appearance of their products does not imply endorsement by the U.S. Department of Labor.

# Scope and Dates

- ! This standard applies to General Industry (Part 1910), Shipyards (Part 1915), Marine Terminals (Part 1917), Longshoring (Part 1918), and Construction (Part 1926)
- ! The effective date of this standard is 4/8/98
- ! Determination that respirator use is required [paragraph (a)] must be completed no later than 9/8/98
- ! Compliance with all other provisions of this standard must be completed no later than 10/5/98
- ! Employers may use results of training, fit testing, program or medical evaluation conducted within 12 months prior to 4/8/98 if they meet this standard's requirements

# Revisions to Specific OSHA Standards

- ! Respirator-related provisions of OSHA's existing standards are revised to conform to each other and to revised 29 CFR 1910.134
- ! All provisions addressing respirator use, selection, and fit testing are deleted from OSHA's substance-specific standards
- ! Entire previous respirator standard, 29 CFR 1910.134, is redesignated as 29 CFR 1910.139 Respirator protection for M. tuberculosis, and will continue to apply to respirator use for protection against exposure to TB until the TB standard is finalized (proposed at 62 FR 54160, Oct. 17, 1997)

# Organization of Standard

- (a) Permissible practice
- (b) Definitions
- (c) Respirator program
- (d) Selection of respirators
- (e) Medical evaluation
- (f) Fit testing
- (g) Use of respirators
- (h) Maintenance and care
- (i) Breathing air quality and use
- (j) Identification of filters, cartridges, and canisters
- (k) Training and information
- (l) Program evaluation
- (m) Recordkeeping
- (n) Dates
- (o) Appendices (mandatory)
  - A: Fit Testing Procedures
  - B-1: User Seal Checks
  - B-2: Cleaning Procedures
  - C: Medical Questionnaire
  - D: Information for Employees Wearing Respirators When Not Required Under the Standard

# Permissible Practice

- ! The primary means to control occupational diseases caused by breathing contaminated air is through the use of feasible engineering controls, such as enclosures, confinement of operations, ventilation, or substitution of less toxic materials
- ! When effective engineering controls are not feasible, or while they are being instituted, appropriate respirators shall be used pursuant to this standard
- ! Employer shall provide respirators, when necessary, which are applicable and suitable for the purpose intended
- ! Employer shall be responsible for establishment and maintenance of a respirator program which includes the requirements of paragraph (c), *Respiratory protection program*

# Employee Exposure

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

# Respiratory Inlet Covering

- ! That portion of a respirator that forms the protective barrier between the user's respiratory tract and an air-purifying device or breathing air source, or both
- ! May be a facepiece, helmet, hood, suit, or a mouthpiece respirator with nose clamp

# Tight -Fitting Coverings



**Quarter Mask**



**Half Mask**



**Full Facepiece**



**Mouthpiece/Nose Clamp**  
(no fit test required)

# Loose-Fitting Coverings



**Hood**



**Helmet**



**Loose-Fitting  
Facepiece**



**Full Body Suit**

# Filter

A component used in respirators to remove solid or liquid aerosols from the inspired air. Also called air purifying element.



# High Efficiency Particulate Air Filter (HEPA)

Filter that is at least 99.97% efficient in removing monodisperse particles of 0.3 micrometers in diameter.



Equivalent NIOSH 42 CFR 84 particulate filters are the N100, R100, and P100 filters.



# Canister or Cartridge

A container with a filter, sorbent, or catalyst, or combination of these items, which removes specific contaminants from the air passed through the container.



# Service Life

The period of time that a respirator, filter or sorbent, or other respiratory equipment provides adequate protection to the wearer.

# End-of-Service-Life Indicator (ESLI)

A system that warns the user of the approach of the end of adequate respiratory protection; e.g., the sorbent is approaching saturation or is no longer effective.



# Negative Pressure Respirator

A respirator in which the air pressure inside the facepiece is negative during inhalation with respect to the ambient air pressure outside the respirator.

# 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.



# **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.



# Positive Pressure Respirator

A respirator in which the pressure inside the respiratory inlet covering exceeds the ambient air pressure outside the respirator.

# Powered Air-Purifying Respirator (PAPR)

An air-purifying respirator that uses a blower to force the ambient air through air-purifying elements to the inlet covering.



# Atmosphere-Supplying Respirator

- ! A respirator that supplies the user with breathing air from a source independent of the ambient atmosphere
- ! Includes supplied-air respirators (SARs) and self-contained breathing apparatus (SCBA) units

# Classes of Atmosphere-Supplying Respirators

- ! **Continuous Flow.** Provides a continuous flow of breathing air to the respiratory inlet covering
- ! **Demand.** Admits breathing air to the facepiece only when a negative pressure is created inside the facepiece by inhalation
- ! **Pressure Demand.** Admits breathing air to the facepiece when the positive pressure inside the facepiece is reduced by inhalation

# Supplied Air Respirator (SAR)

An atmosphere-supplying respirator for which the source of breathing air is not designed to be carried by the user. Also called airline respirator.



# Self-Contained Breathing Apparatus (SCBA)

An atmosphere-supplying respirator for which the breathing air source is designed to be carried by the user.



# Escape-Only Respirator

A respirator intended to be used only for emergency exit.



# User Seal Check

An action conducted by the respirator user to determine if the respirator is properly seated to the face.



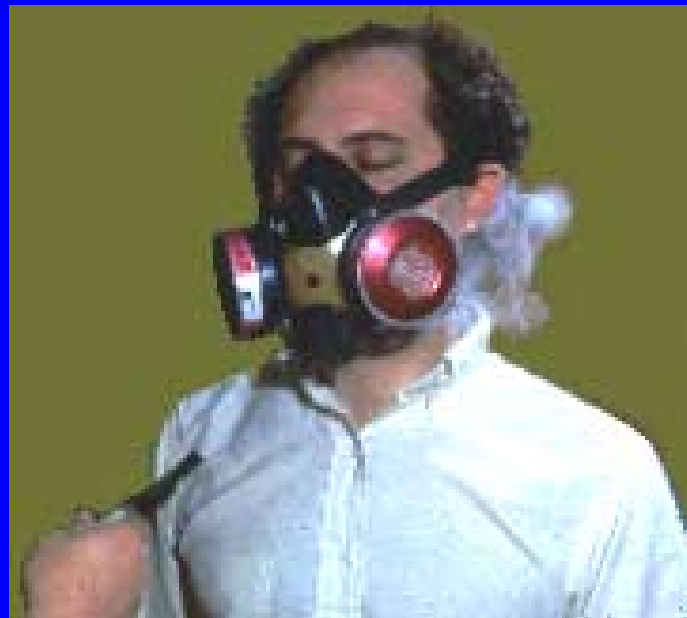
**Positive Pressure Check**



**Negative Pressure Check**

# 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.



# Quantitative Fit Test (QNFT)

An assessment of the adequacy of respirator fit by numerically measuring the amount of leakage into the respirator.



# Fit Factor

A quantitative estimate of the fit of a particular respirator to a specific individual, and typically estimates the ratio:

$$\frac{\text{Concentration of a substance in ambient air}}{\text{Concentration inside the respirator when worn}}$$

# **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.

# Oxygen Deficient Atmosphere

An atmosphere with an oxygen content below 19.5% by volume.

# Physician or Other Licensed Health Care Professional (PLHCP)

An individual whose legally permitted scope of practice (i.e., license, registration, or certification) allows him/her to independently provide, or be delegated the responsibility to provide, some or all of the health care services required by paragraph (e), *Medical evaluation*.

# Respirator Program

- ! Must develop a written program with worksite-specific procedures when respirators are necessary or required by the employer
- ! Must update program as necessary to reflect changes in workplace conditions that affect respirator use
- ! Must designate a program administrator who is qualified by appropriate training or experience to administer or oversee the program and conduct the required program evaluations
- ! Must provide respirators, training, and medical evaluations at no cost to the employee

Note: OSHA has prepared a *Small Entity Compliance Guide* that contains criteria for selection of a program administrator and a sample program.

# Respirator Program (cont'd)

## Where Respirator Use is Not Required

- ! Employer may provide respirators at employee's request or permit employees to use their own respirators, if employer determines that such use in itself will not create a hazard
- ! If voluntary use is permissible, employer must provide users with the information contained in Appendix D
- ! Must establish and implement those elements of a written program necessary to ensure that employee is medically able to use the respirator and that it is cleaned, stored, and maintained so it does not present a health hazard to the user

Exception: Employers are not required to include in a written program employees whose only use of respirators involves voluntary use of filtering facepieces (dust masks).

# Respirator Program Elements

1. Selection
2. Medical evaluation
3. Fit testing
4. Use
5. Maintenance and care
6. Breathing air quality and use
7. Training
8. Program evaluation

# Selection of Respirators

Employer must select and provide an appropriate respirator based on the respiratory hazards to which the worker is exposed and workplace and user factors that affect respirator performance and reliability.



# **Selection of Respirators (cont'd)**

- ! Select a NIOSH-certified respirator that shall be used in compliance with the conditions of its certification
- ! Identify and evaluate the respiratory hazards in the workplace, including a reasonable estimate of employee exposures and identification of the contaminant's chemical state and physical form
- ! Where exposure cannot be identified or reasonably estimated, the atmosphere shall be considered IDLH
- ! Select respirators from a sufficient number of models and sizes so that the respirator is acceptable to, and correctly fits, the user

# Respirators for IDLH Atmospheres



**Full Facepiece Pressure Demand SCBA certified by NIOSH for a minimum service life of 30 minutes**



**Combination Full Facepiece Pressure Demand SAR with Auxiliary Self-Contained Air Supply**

# Respirators for IDLH Atmospheres (cont'd)

- ! Respirators provided only for escape from IDLH atmospheres shall be NIOSH-certified for escape from the atmosphere in which they will be used
- ! All oxygen-deficient atmospheres are considered IDLH

Exception: Employers may use *any* atmosphere-supplying respirator, provided they can demonstrate, under all foreseeable conditions, that oxygen levels in the work area can be maintained within the ranges specified in Table II (i.e., between 19.5% and a lower value that corresponds to an altitude-adjusted oxygen partial pressure equivalent to 16% oxygen at sea level)

# Respirators for Atmospheres Not IDLH

- ! For protection against gases/vapors, employer must provide:
  - > an atmosphere-supplying respirator, or
  - > an air-purifying respirator, provided that:
    - = respirator is equipped with an end-of-service-life indicator (ESLI) certified by NIOSH for the contaminant; or
    - = if there is no ESLI appropriate for conditions in the workplace, employer implements a change schedule for canisters and cartridges based on objective information or data that will ensure that they are changed before the end of their service life
      - employer must describe the information and data relied upon and basis for the change schedule and reliance on the data

# Respirators for Atmospheres Not IDLH (cont'd)

- ! For protection against particulates, employer must provide:
  - > an atmosphere-supplying respirator; or
  - > an air-purifying respirator equipped with HEPA filters certified by NIOSH under 30 CFR Part 11 or with filters certified for particulates under 42 CFR Part 84; or
  - > an air-purifying respirator equipped with any filter certified for particulates by NIOSH for contaminants consisting primarily of particles with mass median aerodynamic diameters of at least 2 micrometers

# **NIOSH Respirator Certification Requirements**

## **42 CFR Part 84**

- ! On July 10, 1995, 30 CFR 11 (“Part 11”) was replaced by 42 CFR 84 (“Part 84”)
- ! Only certifications of nonpowered, air-purifying, particulate-filter respirators are affected by this change
- ! Remaining portions of Part 11 are incorporated into Part 84 without change

# Effective Dates

- ! As of July 10, 1995, NIOSH no longer accepts applications for new approvals or for extension of approvals under Part 11
- ! Part 84 permits the manufacture and sale of nonpowered particulate respirators certified under Part 11 until July 10, 1998
- ! Distributors who will have purchased nonpowered 30 CFR 11 particulate filters and respirators prior to July 10, 1998, will be able to sell them as approved until inventories are depleted
- ! End-users who will have purchased these products will be able to use them until their inventories are depleted, or until the shelf or service life for the product expires

# Classes of Filters

- ! While Part 11 classifications were substance-specific (dust, fume, mist, etc.), Part 84 classifies particulate filters by efficiency and performance characteristics against non-oil and oil-containing hazards
- ! There are nine classes of filters (three levels of filter efficiency, each with three categories of resistance to filter efficiency degradation)
- ! Levels of filter efficiency are 95%, 99%, and 99.97%
- ! Categories of resistance to filter efficiency degradation are labeled N, R, and P
- ! Use of the filter will be clearly marked on the filter, filter package, or respirator box (e.g., N95 means N-series filter at least 95% efficient)

# Selection

Selection of N-, R-, and P-series filters depends on the presence or absence of oil particles, as follows:

- ! If no oil particles are present, use any series (N, R, or P)
- ! If oil particles are present, use *only* R or P series
- ! If oil particles are present and the filter is to be used for more than one work shift, use *only* P series

**N for *Not* resistant to oil**

**R for *Resistant* to oil**

**P for oil *Proof***

Selection of filter efficiency (i.e., 95%, 99%, or 99.97%) depends on how much filter leakage can be accepted.

# Respiratory Protection for Tuberculosis (TB)

- ! The only respirators certified by NIOSH under Part 11 that meet CDC filtration performance criteria for protection against TB are those with HEPA filters
- ! All nine classes of nonpowered, air-purifying, particulate-filter respirators certified under Part 84 meet or exceed the CDC filtration efficiency performance criteria [CDC 1994]
- ! Several of the Part 84 particulate-filter respirators will be less expensive and more comfortable than Part 11 HEPA-filter respirators

# Medical Evaluation Procedures

- ! Must provide a medical evaluation to determine employee's ability to use a respirator, before fit testing and use
- ! Must identify a PLHCP to perform medical evaluations using a medical questionnaire or an initial medical examination that obtains the same information
- ! Medical evaluation must obtain the information requested by the questionnaire in Sections 1 and 2, Part A of App. C
- ! Follow-up medical examination is required for an employee who gives a positive response to any question among questions 1 through 8 in Section 2, Part A of App. C or whose initial medical examination demonstrates the need for a follow-up medical examination

# Medical Evaluation

## Additional Medical Evaluations

- ! Annual review of medical status is not required
- ! At a minimum, employer must provide additional medical evaluations if:
  - > Employee reports medical signs or symptoms related to the ability to use a respirator
  - > PLHCP, supervisor, or program administrator informs the employer that an employee needs to be reevaluated
  - > Information from the respirator program, including observations made during fit testing and program evaluation, indicates a need
  - > Change occurs in workplace conditions that may substantially increase the physiological burden on an employee

# Fit Testing

Before an employee uses any respirator with a negative or positive pressure tight-fitting facepiece, the employee must be fit tested with the same make, model, style, and size of respirator that will be used.



# Fit Testing

- ! Employees using tight-fitting facepiece respirators must pass an appropriate qualitative fit test (QLFT) or quantitative fit test (QNFT):
  - > prior to initial use,
  - > whenever a different respirator facepiece (size, style, model or make) is used, and
  - > at least annually thereafter
- ! Must conduct an additional fit test whenever the employee reports, or the employer or PLHCP makes visual observations of, changes in the employee's physical condition (e.g., facial scarring, dental changes, cosmetic surgery, or obvious change in body weight) that could affect respirator fit

# Fit Testing (cont'd)

- ! The fit test must be administered using an OSHA-accepted QLFT or QNFT protocol contained in Appendix A
  - > QLFT Protocols:
    - = Isoamyl acetate
    - = Saccharin
    - = Bitrex
    - = Irritant smoke
  - > QNFT Protocols:
    - = Generated Aerosol (corn oil, salt, DEHP)
    - = Condensation Nuclei Counter (PortaCount)
    - = Controlled Negative Pressure (Dynatech FitTester 3000)

## Fit Testing (cont'd)

- ! QLFT may only be used to fit test negative pressure APRs that must achieve a fit factor of 100 or less
- ! If the fit factor is determined to be equal to or greater than 100 for tight-fitting half facepieces or equal to or greater than 500 for tight-fitting full facepieces, the QNFT has been passed with that respirator

# Use of Respirators

## Facepiece Seal Protection

- ! Respirators with tight-fitting facepieces must not be worn by employees who have facial hair or any condition that interferes with the face-to-facepiece seal or valve function
- ! Corrective glasses or goggles or other PPE must be worn in a manner that does not interfere with the face-to-facepiece seal
- ! Employees wearing tight-fitting respirators must perform a user seal check each time they put on the respirator using the procedures in Appendix B-1 or equally effective manufacturer's procedures

# Use of Respirators

## Continuing Respirator Effectiveness

- ! Maintain appropriate surveillance of work area conditions and degree of exposure or stress; reevaluate the respirator's effectiveness when it may be affected by changes in these
- ! Employees must leave the respirator use area:
  - > to wash their faces and respirator facepieces as necessary
  - > if they detect vapor or gas breakthrough, changes in breathing resistance, or leakage of the facepiece
  - > to replace the respirator or filter, cartridge, or canister
- ! If employee detects vapor or gas breakthrough, changes in breathing resistance, or leakage of the facepiece, employer must replace or repair the respirator before allowing employee to return to the work area

# **Use of Respirators**

## **Procedures for IDLH Atmospheres**

- ! One employee or, when needed, more than one employee must be located outside the IDLH atmosphere
- ! Visual, voice, or signal line communication must be maintained between employees inside and outside
- ! Employees located outside must be trained and equipped to provide effective emergency rescue
- ! Employer or authorized designee must be notified before any employee outside the IDLH atmosphere enters to provide emergency rescue
- ! Employer or authorized designee, once notified, must provide necessary assistance appropriate to the situation

# Use of Respirators

## Procedures for IDLH Atmospheres (cont'd)

- ! Employees located outside the IDLH atmosphere must be equipped with:
  - > a pressure demand or other positive pressure SCBA or SAR with auxiliary SCBA; and either
  - > appropriate retrieval equipment for removing employees who enter, where retrieval equipment would contribute to the rescue of employees and would not increase the overall risk resulting from entry; or
  - > equivalent means for rescue where retrieval equipment is not required per above

# Use of Respirators

## Procedures for Interior Structural Firefighting

In addition to the procedures for respirator use in IDLH atmospheres, in interior structural fires:

- ! At least two employees must enter and remain in visual or voice contact with one another at all times
- ! At least two employees must be located outside
- ! All employees engaged in interior structural firefighting must use SCBAs
- ! One employee located outside may be assigned an additional role (e.g., incident commander), so long as this doesn't interfere with their assistance or rescue activities
- ! This standard does not preclude firefighters from performing emergency rescue before an entire team has assembled

# Maintenance and Care

- ! Provide each user with a respirator that is clean, sanitary and in good working order
- ! Use procedures in Appendix B-2 or equivalent manufacturer's recommendations
- ! Clean and disinfect at the following intervals:
  - > as often as necessary when issued for exclusive use
  - > before being worn by different individuals when issued to more than one employee
  - > after each use for emergency respirators and those used in fit testing and training



# Breathing Air Quality and Use

- ! Compressed breathing air must meet at least the requirements for Type 1 - Grade D breathing air described in ANSI/CGA G-7.1-1989:
  - > Oxygen content (v/v) of 19.5 - 23.5%
  - > Hydrocarbon (condensed) content of 5 milligrams per cubic meter (mg/m<sup>3</sup>) of air or less
  - > CO content of 10 parts per million (ppm) or less
  - > CO<sub>2</sub> content of 1,000 ppm or less
  - > Lack of noticeable odor
- ! Compressors supplying breathing air to respirators must be equipped with suitable in-line air-purifying sorbent beds and filters that are maintained and replaced or refurbished per manufacturer's instructions

# Breathing Air Quality and Use (cont'd)

- ! For compressors not oil lubricated, CO levels in the breathing air must not exceed 10 ppm
- ! For oil-lubricated compressors, a high-temperature or CO alarm, or both, must be used to monitor CO levels
  - > if only high-temperature alarms are used, the air supply must be monitored at sufficient intervals to prevent CO levels from exceeding 10 ppm

# Identification of Filters, Cartridges, and Canisters

- ! All filters, cartridges and canisters used in the workplace must be labeled and color coded with the NIOSH approval label
- ! The label must not be removed and must remain legible
- ! “TC number” is no longer on cartridges or filters (Part 84)
- ! Marked with “NIOSH”, manufacturer’s name and part number, and an abbreviation to indicate cartridge or filter type (e.g., N95, P100, etc.)
- ! Matrix approval label supplied, usually as insert in box



# Training and Information

Employers must provide effective training to employees who are required to use respirators.



# Training and Information

- ! Employees who are required to use respirators must be trained such that they can demonstrate knowledge of at least:
  - > why the respirator is necessary and how improper fit, use, or maintenance can compromise its protective effect
  - > limitations and capabilities of the respirator
  - > effective use in emergency situations
  - > how to inspect, put on and remove, use and check the seals
  - > maintenance and storage
  - > recognition of medical signs and symptoms that may limit or prevent effective use
  - > general requirements of this standard

# Training and Information (cont'd)

- ! Training must be provided prior to use, unless acceptable training has been provided by another employer within the past 12 months
- ! Retraining is required annually, and when:
  - > changes in the workplace or type of respirator render previous training obsolete
  - > there are inadequacies in the employee's knowledge or use
  - > any other situation arises in which retraining appears necessary
- ! The basic advisory information in Appendix D must be provided to employees who wear respirators when use is not required by this standard or by the employer

# Program Evaluation

- ! Must conduct evaluations of the workplace as necessary to ensure effective implementation of the program
- ! Must regularly consult employees required to use respirators to assess their views on program effectiveness and to identify and correct any problems
  - > factors to be assessed include, but are not limited to:
    - = respirator fit (including effect on workplace performance)
    - = appropriate selection
    - = proper use
    - = proper maintenance

# Recordkeeping

- ! Records of medical evaluations must be retained and made available per 29 CFR 1910.1020
- ! A record of fit tests must be established and retained until the next fit test is administered
- ! A written copy of the current program must be retained
- ! Written materials required to be retained must be made available upon request to affected employees and OSHA