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# STANDARD OPERATING GUIDELINES



Guideline 5.2.0  
3/15/2010

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## RESPIRATORY PROTECTION PROGRAM

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### PURPOSE

This guideline is to provide members of the City of SeaTac Fire Department with a written respiratory protection program in accordance with WAC 296-305 and 296-842.

### DEFINITIONS

**Air-purifying respirator (APR)** are non-powered respirators that range from the simple disposable N95 filter mask, the heavier P100 filter mask and the cartridge style half-mask.

**Face piece** means that portion of a respirator that covers the wearer's nose and mouth and chin in a half-mask facepiece or that covers the nose, mouth, and eyes in a full facepiece. It is designed to make a gas-tight or particle-tight fit with the face and includes the headbands, exhalation valve(s), and connections for an air-purifying device.

**Filter mask** will refer to two classes of non-powered respirators used by the City of SeaTac Fire Department that come in the N95 or P100 classifications.

**Fit check** (WAC 296-305-22010 table 11) is a 5 minute test conducted by the wearer prior to a "fit test" to determine if the respirator is properly seated to the face and purge any ambient particles from the respirator.

**Fit test** is a test conducted at least annually to certify the member on each respirator issued.

**Half-mask** will refer to MSA advantage 200 LS with low profile cartridge filter. This is a non powered respirator and will be equipped with a P-100 cartridge.

**Hazardous atmosphere** means any atmosphere, either immediately or not immediately dangerous to life or health, which is oxygen deficient or which contains a toxic or disease producing contaminant.

**High Efficiency Particulate Air (HEPA) Filter** means a filter that removes from the air 99.95% or more of particles having a mean particle diameter of 0.5 microns.

**Immediately Dangerous to Life or Health (IDLH)** means any atmosphere that poses an immediate hazard to life or produces immediate irreversible debilitating effects on health.

**Medical evaluation** means the use of subjective (e.g., medical questionnaires) or objective methods (e.g. medical examinations), as well as other available medical, occupational, and respirator information, to make a determination or recommendation about an employee's ability to wear and use a respirator.

**Medical examination** means the use of objective methods (i.e., manipulative, physiological, biochemical, or psychological devices, techniques, or procedures) to directly assess the employee's physical and mental status for the purpose of making a recommendation regarding the employee's medical ability to use the respirator.

**NIOSH** means National Institute for Occupational Safety and Health.

**N95** means a class of non-powered respirators certified for use in protecting against the transmission of tuberculosis and other airborne diseases (95% filter efficiency level).

**Oxygen deficiency** means an atmosphere containing less than 19.5 percent oxygen by volume and is considered an IDLH atmosphere.

**Oxygen enriched** means an atmosphere containing more than 23.5 percent oxygen by volume and is considered an IDLH atmosphere.

**PLHCP** refers to Physician or Licensed Health Care Professional.

**P100** is particulate non-powered filtering facepiece respirator that filters at least 99.97% of airborne particles and is strongly resistant to oil.

**Respirator** means a device designed to protect the wearer from the inhalation of harmful atmospheres which includes filter masks, SCBA, SAR, SABA, etc.

**SABA** means Supplied Air Breathing Apparatus.

**SAR** means Supplied Air Respirator. The City of SeaTac Fire Department uses the terminology "SABA" and will use it here on out when discussing supplied air respirators.

**SCBA** means Self-Contained Breathing Apparatus.

**User Seal check** commonly referred to as "checking your seal" is done every time the user dons a respirator (this check is unique for each respirator and is described below). This check ensures that there are no leaks and the respirator is properly seated to the face. This check is done prior to entering an IDLH or contaminated environment.

## **RESPONSIBILITY**

Management is responsible for:

- A. Providing all members assigned to or who may be assigned to work in hazardous atmospheres a National Institute of Occupational Safety and Health (NIOSH) approved respirator.
- B. Identifying personnel who are required and authorized to wear respiratory protection equipment in the course of performing their duties.
- C. Ensuring that members covered by this guideline comply with this program.
- D. The overall implementation of this program.
- E. To ensure an annual evaluation of the respirator program's effectiveness is completed.

The Training Officer/ Health and Safety Administrator is responsible for:

- A. The supervision and administration of the Respiratory Protection Program and shall be referred to as the "Program Administrator".
- B. Ensuring that members covered by this guideline comply with this program.
- C. Ensuring the overall implementation of this policy.
- D. Ensuring annual fit tests are completed and records of completed fit tests are maintained for each type of respirator used.
- E. Evaluating the effectiveness of the respirator program on a regular basis.
- F. Conducting an annual review and submit a written report of the respirator program's effectiveness to the Fire Chief at the end of each calendar year.
- G. Training, testing, and requiring practice of all members who will have occasion to use a respirator.
- H. Providing training and standard operating guidelines in accordance with Department policy and the manufacturer's recommendations for each type of respirator used.
- I. Ensuring that an annual test is completed by each member on their knowledge of respiratory equipment operation, safety, and Department operational guidelines. The training officer will maintain related training records.

Officers are responsible for:

- A. Verifying daily/weekly checks are completed on SCBA , SABA and RIT equipment.
- B. Ensuring that members are using the proper level of respiratory protection commensurate with the hazards they encounter.
- C. Ensuring quarterly training requirements are completed.

Each member covered by this policy shall:

- A. Adhere to the policy to the fullest extent.
- B. Consistently use the proper level of respiratory protection that is commensurate with the hazards they encounter.
- C. Maintain the level and proficiency of use expected by the Department
- D. Maintain issued SCBA face pieces in sanitary and proper operating condition.
- E. Guard against damage to respiratory equipment.
- F. Inspect their respirators as specified when coming on duty and after each use in accordance with the manufacturer's recommendations.

The Shift/Personnel in charge of SCBA/Compressors is responsible for:

- A. Maintaining certifications as required by manufacturer.
- B. The research, purchase/procurement, assignment, maintenance and repairs of SCBA's, SABA's, and other assigned respirators
- C. Keeping Department records for SCBA's, SABA's and other assigned respirators to include model, serial numbers, inspection logs, annual flow testing data, repairs made including parts used for each unit.
- D. Maintain Department compressors and air storage units. Ensure quarterly air quality testing is conducted and review results. Maintain records of all air quality testing and repair work.

### **Authorized Respirator Users**

Personnel assigned to the following Divisions of this Department are authorized to use respiratory protection equipment and are required to comply with this program.

- A. Administration

B. Suppression

C. Training

## **GUIDELINE**

### **RESPIRATOR SELECTION**

All respirators used by the City of SeaTac Fire Department are NIOSH-approved. Selecting respirators entails knowing what level of respiratory protection the employee needs, as well as which size respirator you have been fit tested to. Under no circumstances shall an employee wear a respirator that has not been properly fit tested.

Respiratory protection devices vary in design, application and protective capability. Thus, the user must assess the specific use limitations of available equipment to assure proper selection. The following is a list of respirator type and the environments that it can be used in.

SCBA: MSA Fire hawk MMR, CBRN compliant with 30 minute ULTR-LITE bottle.



Environment:

- A. In an IDLH atmosphere.
- B. In an atmosphere that is suspected or known to be oxygen deficient (below 19.5 % oxygen) or oxygen rich (above 23.5 % oxygen)
- C. In an atmosphere of particulate, gas and vapor contaminants.
- D. In an atmosphere that may rapidly become hazardous or oxygen deficient.
- E. In an atmosphere where Asbestos is suspected or known to exist.

The types of incidents that members of the City of SeaTac Fire Department will require SCBA include:

- A. In an active fire area.
- B. Directly above a fire area.
- C. Directly under the active fire area.
- D. In potential explosive fire area, including gas leaks or fuel spills.

- E. Where products of combustion are visible in an atmosphere, including vehicle fires and dumpster fires.
- F. Where invisible contaminants or toxic products are present or suspected; **this includes the overhaul stage of a fire.**
- G. In an active chemical spill area where the chemical present is an inhalation hazard.
- H. In any confined space rescue that involves the “rapid rescue mode” and the team can safely enter wearing an SCBA.
- I. In areas where “transient smoke” has shifted and exposed personnel who were not previously in the hot zone.

SCBA are not Self-Contained Underwater Breathing Apparatus (SCUBA) gear and are not approved or safe for that use.

Members using a properly functioning SCBA shall not compromise the protective integrity of the SCBA by removing the face piece for any reason in a hazardous/IDLH atmosphere or in atmospheres where the quality of the air is unknown.

The Department shall provide annual Asbestos training to each member certified to wear respirators. All Department training exercises requiring respirators shall be in compliance with the Firefighter’s Training and Asbestos in Structures Chart (**Appendix A**).

MSA Fire Hawk MMR, (CBRN Compliant)owner’s manual attached as **Appendix B**.

SABA: MSA PremAire Supplied-Air system with 10 minute escape bottle.



Environment:

- A. A confined space involving an IDLH atmosphere.
- B. In an atmosphere that is suspected or known to be oxygen deficient (below 19.5 % oxygen) or oxygen rich (above 23.5 % oxygen)
- C. In an atmosphere of particulate, gas and vapor contaminants.
- D. In an atmosphere that may rapidly become hazardous or oxygen deficient.

The types of incidents that members of the City of SeaTac Fire Department will be allowed a SABA include:

- A. Confine space rescue.
- B. Any IDHL atmosphere that is non-active Firefighting.
- C. Extended periods of working in a non-IDLH atmosphere.

Anytime members are working inside a permit required confined space, they shall wear SCBA or a Supplied Air Respirator (SABA) with escape bottle (10 minute minimum capacity), unless the safety of the atmosphere can be established by testing and continuous monitoring.

MSA PremAire Supplied-Air owner's manual attached as **Appendix C**.

Half-mask: P100, MSA Advantage 200 LS with P100 low profile filter.



Environment:

- A. In a normal oxygen atmosphere (19.5% to 20.8 % oxygen).
- B. In an atmosphere suspected or known to have particulate contagious contaminants.
- C. In a non Firefighting activity.
- D. Non-toxic simulated smoke.

The types of incidents that members of the City of SeaTac Fire Department shall use the half mask include:

- A. When transporting or treating an individual with suspected or confirmed influenza (H5N1, H1N1)
- B. When transporting or treating an individual with suspected or confirmed infectious Tuberculosis.
- C. When any other airborne pathogen is suspected or confirmed to be present.
- D. Training fire scenario (search and rescue).
- E. Cartridges will be changed after each use.
- F. The Half-mask shall not be used during the overhaul stage of a fire.**

MSA Advantage 200 LS owner's manual attached as **Appendix D**.

Filter Mask: P100 TruAir Ultra, particulate respirator with vent



Environment:

- A. In a normal oxygen atmosphere (19.5% to 20.8 % oxygen)
- B. In an atmosphere suspected or known to have particulate contagious contaminants.
- C. In a non Firefighting activity.

The types of incidents that members of the City of SeaTac Fire Department will require P100 include:

- A. When transporting or treating an individual with suspected or confirmed influenza (H5N1, H1N1).
- B. When transporting or treating an individual with suspected or confirmed infectious Tuberculosis.
- C. When any other airborne pathogen is suspected or confirmed to be present.
- D. The P100 is an one time use respirator.
- E. **The P100 shall not be used during the overhaul stage of a fire.**

P100 TruAir Ultra owner's manual attached as **Appendix E**.

Filter Mask: N95, 3M 1860 Health Care Particulate Respirator and Surgical mask.



Environment:

- A. In a normal oxygen atmosphere (19.5% to 20.8 % oxygen)
- B. In an atmosphere suspected or known to have particulate contagious contaminants.
- C. In a non Firefighting activity.
- D. Non-toxic simulated smoke.

The types of incidents that members of the City of SeaTac Fire Department will require N95 include:

- A. When transporting or treating an individual with suspected or confirmed influenza (H5N1, H1N1) .
- B. When transporting or treating an individual with suspected or confirmed infectious Tuberculosis.
- C. When any other airborne pathogen is suspected or confirmed to be present.
- D. Search and Rescue Training or Drill Prep.
- E. The N95 is an one time use respirator.
- F. The N95 shall not be used during the overhaul stage of a fire.**

The N95, 3M 1860 Health Care Particulate Respirator and Surgical mask owner's manual is attached as **Appendix F**.

The first choice for an Air-Purifying Respirator (APR) will be the MSA Advantage 200 LS as it provides the highest level of protection. The member may choose to use the P100 or the N95 depending on the incident circumstances. All APR's provided by the Department require specific fit tests and in the event a member has not been fit tested for an APR, an SCBA shall be utilized.

**User seal check**

A User Seal Check shall be performed each time the respirator is used. This check insures an adequate seal has been achieved to prevent leakage during use and to detect functional problems with the respirator itself. The “User Seal Check” requires specific procedures for each respirator type as listed below.

MSA MMR Fire Hawk mask:

First Don the Facepiece:

1. Place standby strap around your neck so that the facepiece lens is against the body.
2. Loosen all the harness straps.
3. Insert chin well into the lower part of facepiece, then pull the harness back over head.
4. Pull the back of harness downward until centered at the back of the head.
5. Tighten the two lower straps first by pulling them straight back, not out. Tighten the facepiece until the mask is snug against the face.
6. Tighten the two side temple straps in the same manner as described above. Ensure that the facepiece tabs are not tucked under the face seal.
7. Adjust the top strap if necessary. Make sure the back of the harness is centered on the back of the head and the mask seal is providing uniform pressure on the face at all points. Readjust straps if needed.

Next check your seal:

1. To perform a user seal check, hold the palm of your hand over the inlet facepiece adapter and inhale. Hold your breath at least 10 seconds. The facepiece should collapse and stay collapsed against your face. If it does not, re-adjust the facepiece and test again. **If this does not correct the leak, do not use the facepiece.**
2. Test the exhalation valve; take a deep breath and hold it. Block the inlet facepiece adapter with the palm of your hand and exhale. If the exhalation valve is stuck, you may feel a heavy rush of air around the facepiece. You may need to exhale sharply to open the valve. If this does not release the valve, do not use the facepiece.

MSA Advantage 200LS

First don the respirator:

1. Loosen all the straps by pulling the tab back on the latch with your finger.
2. Pull the neck strap over your head and place it around your neck. The neck strap must lay flat against your neck, not twisted.
3. Place the top portion of the facepiece on the bridge of your nose and swing the bottom of the facepiece inward. The facepiece should fit comfortably around your nose, mouth and chin.
4. Pull the cradle headband over your head until it straddles the crown of your head. The cradle headband must lie flat, not twisted.
5. Pull the ends of the cradle headband straps to tighten the cradle around the crown of your head.
6. Pull the ends of the neck strap to tighten the neck strap around your neck.
7. Adjust the cradle headband and neck straps for a comfortable and secure fit. The straps should be just snug enough so that no air leaks around the facepiece. The straps should

not be pulled so tight that the respirator digs into your face. Be careful not to over-tighten.

Next check your seal:

1. Negative Pressure Method — Place your palms over cartridges lightly. Gently inhale so that the facepiece collapses slightly and hold breath for ten seconds. The facepiece will remain collapsed while the breath is held unless there is a leak in the seal.
2. Positive Pressure Method — Place your palm lightly over exhalation valve cover and gently exhale. If any leakage is detected around the facial seal, readjust head harness straps and repeat test until there is no leakage. If other than facial seal leakage is detected, the condition must be investigated and corrected before another test is made. The respirator must pass one of the above tightness tests before the respirator is used.

P100 TruAir Ultra

First don the filter mask:

1. Hold the mask in one hand with the straps around the back hand. Place over mouth and nose with the nose clip over the bridge of your nose. Pull lower strap over head and fit around neck. Pull upper strap over your head and place it above your ears.
2. Form the nose clip around nose. To achieve a tighter fit, hold buckle on one side and pull end of strap. Repeat on other side. To loosen, hold the buckle on one side and pull the main strap. Continue adjustments until you obtain a positive face seal.

Next check your seal:

1. Cup both hands over the respirator and inhale vigorously. Negative pressure should be felt inside the respirator. If leakage is detected around the nose or edges or respirator, tighten the nosepiece and reposition or tighten straps until negative pressure is felt.
2. DO NOT enter a contaminated environment without a proper user seal check.

N95

First don the filter mask:

1. Cup the respirator in your hand, with the nosepiece at your fingertips, allowing the headbands to hang freely below your hands.
2. Position the respirator under your chin with the nosepiece up. Pull the top strap over your head resting it high at the top back of your head. Pull the bottom strap over your head and position it around the neck below the ears.
3. Place your fingers from both hands at the top of the metal nosepiece. Using two hands mold the nose by pushing inward while moving your fingertips down both sides of the nosepiece.

**Pinching the nosepiece using one hand may result in an improper fit and less effective respirator performance. Use two hands.**

Next check your seal:

1. To perform the User seal check place both hands completely over the respirator and exhale. Be careful not to disturb the position of the respirator. If air leaks around the nose, readjust the nosepiece as described in step 3. If air leaks at the respirator edge, work the straps back along the sides of head.

## **Training**

Members shall be trained in the proper function, use, cleaning and maintenance of any respiratory protection device provided for their use including the step-by-step procedures for donning and doffing the respirator, user seal check, and assessing proper function.

Required Annual Training shall include:

- A. Recognizing hazards that may be encountered.
- B. Understanding the components of the respirator.
- C. Understanding the safety features and limitations of the respirator.
- D. Inspecting and cleaning of the respirator.
- E. Use of the respirator as designed.
- F. Use of the respirator in emergency situations/extraordinary circumstances.
- G. Annual written examination.

In addition to annual training requirements, each member shall practice at least quarterly, each type of respirator available for use, the step-by-step procedure for donning and doffing the respirator and checking it for proper function. Refer to Respirator Quarterly Task Performance sheet, **Appendix G**.

Retraining shall be administered whenever:

- A. Changes in specific respirator models make previous training obsolete.
- B. Inadequacies in the member's knowledge or use of the respirator indicate the member has not retained the requisite understanding or skill.
- C. Any other situation arises in which retraining appears necessary to ensure safe respirator or related equipment use.

Annual training and testing shall be conducted on the member's knowledge of SCBA equipment operation, face piece seals, Cylinder handling/refilling, respirator-related safety, and Departmental policies and guidelines. All respirator-related training records shall remain part of the member's permanent training file.

## **Respirator Fit Testing**

All members shall be properly fit tested and certified annually for each respirator issued or worn prior to using the respiratory equipment in a hazardous or contaminated atmosphere. A Quantitative Fit Test method shall be used by the department utilizing a Portacount Plus Model 8020. The N95 Companion Model 8095 adaptor will be used for our P-100 and N95 filter masks. Portacount manuals are attached in **Appendix H**. Fit tests shall be conducted by “in house” technicians who have been certified to perform these tests. The following process shall be utilized to certify our in house technicians:

1. Review of the manufacturer’s training video
2. Prepare the equipment for testing, including the computer based testing program.
3. Perform pre-test functions, including proper “fit check”.
4. Administer a complete fit test for each respirator type.
5. Print and complete hard copy paperwork.
6. Evaluator must complete the Certified Fit Test Technician Evaluation Form. (attached **Appendix I**).

Our goal is to fit test each member at 12 month intervals. Fit testing may be required more frequently. Physical changes in the user that prompt a medical re-evaluation may also require a repeat fit test refer to medical evaluation section. Any change in manufacturer or respirator type or model shall require retesting. Facial hair is not permitted to come in contact with the sealing surface of the face piece, refer to SOG # 3.1.4.

Members will only be permitted to wear the make, model, size and type of respirators for which they were specifically certified for during their annual fit test. Documentation of our fit-testing results will be kept in the members training file and within the fit testing computer program itself. Members shall receive copies of their results at the completion of the test.

### **Air Cylinders and Storage Bottles**

The MSA cylinders used on all City of SeaTac Fire Department SCBA’s and RIT kits are composite carbon fiber and require and hydrostatic test every 5 years with an overall service life of 15 years. (Refer to 30/60 minute cylinder inventory sheet **Appendix K**) Large capacity storage bottles used in the cascade systems are of steel construction and have a 5 year hydrostatic testing requirement. When filling cylinders, required information shall be completed on the SCBA cylinder fill log (**Appendix L**).

All respirator users shall perform an exterior inspection of each in-service cylinder before and after use and before each fill. Each cylinder shall be inspected for the following defects;

- A. Blistering or peeling from a chemical exposure
- B. Gouging (1/8 inch deep or deeper, fibers showing)
- C. Discoloration due to excessive heat exposure
- D. Cylinder valve damage
- E. Hydrostatic test date not current

### **Breathing Air Quality**

The Department will take all reasonable steps necessary to ensure all compressors are constructed, situated and used in a manner that will prevent entry of contaminated air into the air-supply system, minimize moisture content build-up and provide suitable in-line air purifying filters to further ensure breathing air quality.

Air quality tests shall be performed quarterly on all compressors and storage systems in use by the department to ensure air quality meeting or exceeding the requirements of ANSI/CGA G-7 Commodity Specification with a minimum air quality of Grade D and meet a water vapor level of 24 ppm or less.

Quarterly air testing shall be certified by Breathing Air Systems. Air quality samples shall be taken by an authorized Department technician utilizing the following procedures:

- A. Utilize the “Air Sample Test Kit” as provided by Breathing Air Systems.
- B. Take air sample following the written directions provided within kit.
- C. Complete the information sheet provided for each sample kit.
- D. Send samples via U S Mail – Self addressed postage provided.
- E. Review and file compliance certificate and testing data.

Reference air sample test kit instructions and information sheet **Appendix M**.

Air quality records shall be maintained for not less than 30 years after employment in accordance with WAC 296-802-20010 Retention of Medical and Exposure Records.

The City of SeaTac Fire Department may establish cooperative agreements with local organizations and neighboring Fire/Emergency Service providers regarding shared use of breathing air compressors, storage systems and fill stations (fixed and mobile).

Members not included as users in this program and/or who have not received specialized training may not operate breathing air compressors and/or breathing air fill stations. This includes in station and mobile systems used by the Department.

The SeaTac Fire Department maintains 2 compressors and 2 cascade systems as follows:

- A. Mako model BAM07E3 – compressor at Station 45
- B. Cascade Air Fill Station – Station 45
- C. Bauer model P5/SCURUS – compressor on Rescue 46
- D. Cascade Air Fill Station – on Rescue 46

### **Repair/Recharge**

Any SCBA that is not operating properly shall be removed from service, tagged, and sent to Station 45 for repair.

Respirator repairs shall be performed by “in house” manufacturer authorized and certified technicians or approved certified vendors. All parts used in repairs shall be authentic and brand specific.

When exchanging air supply bottles during suppression or overhaul activities, reasonable precautions shall be taken to ensure contaminated atmosphere or material does not enter the changing zone.

Primary trans-fill capability (respirator to respirator) shall be maintained on each SCBA. Secondary source (RIT kit) trans-filling equipment shall be available at any location where members operate in IDLH or potential IDLH conditions.

### **Inspection and Cleaning**

Members shall inspect their SCBA on a daily basis and after each use. Special attention shall be given to the tightness of the coupling nut.

Refer to inspection procedures within the manufacturer's recommendations in **Appendix B**.

Members shall be (field) decontaminated prior to removal of SCBA face piece whenever response operations activities result in exposure to a hazardous substance.

All respirator types shall be kept clean, sanitary and in good working order.

SCBA face pieces or respirators issued as personal equipment shall be cleaned and disinfected as often as necessary to maintain a sanitary condition.

SCBA face pieces or respirators assigned to apparatus shall be cleaned and disinfected after each use.

SABA units shall be inspected on a weekly basis as outline in the manufacturer's recommendations, see **Appendix C**.

### **Use of Respirators by Fire Investigation Personnel**

Members of the King County Fire Investigation Unit (KCFIU) or other agency may create and/or encounter particulate and fume/vapor hazards in the performance of their duties at an emergency scene; as such, they should wear appropriate respiratory protection.

Regardless of the actions of the Fire Investigator, members of the SeaTac Fire Department that are involved in the fire investigation phase shall wear appropriate level of respiratory protection. Overhaul shall be performed wearing SCBA's. During fire investigations where products of combustion are visible (smoke, particulate, heat) members shall wear SCBA's.

Should CO levels rise above 35 ppm, only SCBA/SABA users shall be allowed to occupy the area.

Should oxygen levels rise above 23.5% or drop below 19.5%, the atmosphere shall be considered IDLH and only SCBA/SABA users shall be allowed to occupy the area.

### **Air Management**

Each member of an entry team using SCBA shall evaluate their safe working time by evaluating how much air they have used, manage the air left in the cylinder and leave the hazardous atmosphere before the low air warning bell begins to ring.

The Company Officer or team leader will check SCBA air levels before entering a hazardous atmosphere.

No member will enter the hazardous atmosphere with less than 4000 PSI reading on their chest gauge. Unless in the judgment of the team member the task involved and hazards present, an entry can be made with a reduced pressure.

When the first member of the team reaches a chest gauge pressure of 2700 PSI, the team leader will have a plan for leaving the hazardous atmosphere.

The team leader will use his/her judgment based on knowledge of workload, distance and hazards in order to determine actual turn around pressure. Communication to the IC will be in Conditions, Actions, Needs and Air (CANANA) format when giving progress reports. Team air may be reported in psi or amount left in cylinder. This allows the IC to preplan for replacing teams and insures companies are evaluating their entry time.

If a team member is working with their reserve air (low air warning bell ringing) in the hazardous area, the officer/team leader shall notify the IC with: team name, low air alarm ringing, location of exit. Example: "Command Engine 45 with a low pressure alarm ringing, leaving on side B."

If members hear a low air warning bell ringing in a hazardous atmosphere, that bell should be considered an emergency and the member shall be escorted to a safe area.

Any alarm bell that rings while a member is operating inside a hazardous atmosphere will be considered a "Near Miss" incident and a Near Miss report shall be completed by the user and the user's supervisor.

All reports of low air warning bells ringing will be considered as issues for continued training and general safety issues in the Department.

### **SCBA Facemask Glasses (Spec Kit)**

Members in need of spectacle kits for the face piece shall contact the Program Administrator for approval. Lenses shall be made to the following specification:

- A. Lens material: CR-39 (basic plastic resin lens material).
- B. No lens treatment (such as scratch resistance, anti-reflection, etc.) Special treatments are not needed because the lenses will be protected inside the SCBA face piece.

- C. Bifocal lenses are not recommended because of limited need to read and consequent reduction in overall field of sight. However, if you choose to wear bifocal lenses they must meet the following requirements: “D-28” or “Flat top 28” style lens with small bifocal field.
- D. Lined lens, no progressive lens.

### **Medical Evaluation**

Every member considered for inclusion in the respiratory protection program shall participate in the department's medical surveillance program. The Department shall provide a medical evaluation to determine the member's ability to use a respirator, before the member is fit tested or required to use the respirator.

The medical questionnaire and evaluations shall be administered confidentially during the member's normal working hours or at a time and place convenient to the member and in accordance with the procedures established through the Occupational Health Services of Valley Medical (OHS). The Department recognizes Dr. Karen L Nilson, M.D. as our program's Physician. Licensed health care professionals (PLHCP) associated with OHS are also authorized under the direction of Dr. Nilson to perform medical evaluations using a medical questionnaire recognized by OSHA and WISHA for aiding in determining a respirator user's medical status. A copy of the cover letter and medical questionnaire in use by the Department can be found in **Appendix N**.

The Program Administrator shall distribute the medical questionnaire with cover letter to the employee along with a sealable envelope with the employee's name on the outside of the envelope. The employee shall complete the questionnaire, place it in the envelope provided, seal it and return it to the Program Administrator. He/She shall track completion of questionnaires on a roster and once they have all been returned, forward the questionnaires to the PLHCP for review.

The Department shall ensure that follow up evaluations are done in accordance with the letter issued by Dr. Nilson dated March 25<sup>th</sup> 2010 and attached in **Appendix O**. The follow up medical examinations shall include any medical tests, consultations, or diagnostic procedures that the PLHCP deems necessary to make a final determination and be of no cost to the employee.

Following a successful review, the PLHCP will inform the member directly that they are certified for respirator use. The Program Administrator will receive 2 copies of the written notice from the PLHCP indicating that the member is certified for respirator use; a copy for the Fire Department records, and the other for the Fire Fighter.

If the PLHCP determines that a follow-up interview, examination or test(s) is/are necessary, the PLHCP will contact the employee directly. The Program Administrator will receive a written notice that further evaluation is necessary.

If the PLHCP determines the employee cannot be certified for respirator use, the PLHCP will notify the employee directly. The Program Administrator will receive a written notice of this determination. The employee will be removed from fire suppression activities until the PLHCP certifies the employee for respirator use.

Communication of the reason(s) for additional evaluation or non-certification will remain confidential between the PLHCP and the employee. The PLHCP will not inform the Department of specific reasons at anytime.

### **Appeal of Employer's PLHCP Findings**

In the event the employee disagrees with the result provided by the employer's PLHCP, the employee may elect to have the questionnaire and health issue reviewed by a PLHCP of their choice. The employee's PLHCP must have reviewed and be familiar with the employee's working conditions and job description and provide a declaration of such fact to the employer. The employee's PLHCP must also make available to the employer their medical qualifications to make a medical determination of the employee's ability to wear a respirator.

In the event that there is a disagreement the employees do not waive any rights or protections provided under the current Collective Bargaining Agreement and rehabilitation options shall be explored within the Wellness Fitness Initiative.

### **Medical Reevaluation**

All employees shall be reevaluated on a year basis or if any of the following occur:

- A. Obvious change in body weight.
- B. Scarring of the face in the seal area.
- C. Dental changes.
- D. Cosmetic surgery.
- E. Employee's inability to perform assigned duty(s) while wearing a respirator.
- F. Any other condition that may affect the fit of the face piece seal.
- G. The Department's PLHCP recommends a reevaluation.
- H. The Program Administrator decides it is needed.
- I. Changes in work conditions that increase employee physical stress (such as high temperatures or greater physical exertion).
- J. Observation of respiratory difficulty.
- K. Ruptured ear drum.

### **Program Evaluation**

An annual evaluation of the Respiratory Protection Program shall be completed by the Program Administrator. The focus of this evaluation shall be to determine the overall effectiveness and personnel's compliance to the program. The evaluation shall include the Employee Evaluation of Respiratory Protection Program form and the Annual Respiratory Program Review and Evaluation Guide – both in **Appendix P**. The Program Administrator shall provide a written report of his/her findings to the Fire Chief with recommendations for improvements and any other necessary changes.

Approval,



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Brian Wiwel, Acting Fire Chief