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ERMC Pamphlet
No. 385-2

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RESPIRATORY PROTECTION PROGRAM

1. REFERENCES:

- a. AR 11-34, The Army Respiratory Protection Program, 15 Feb 90.
- b. AR 40-5, Preventive Medicine, 15 Oct 90.
- c. AR 385-10, The Army Safety Program, 23 May 88.
- d. USAREUR REG 40-11, USAREUR Occupational Health Services Contract and German Translation, (Medizinische Leistungen, Vertrag der US Armee, Europa über Arbeitsmedizinische Leistungen), 5 Mar 92.
- e. USAREUR Memo, Appointment of USAREUR Respiratory Protection Monitors, 13 Oct 97.
- f. USAREUR Memo, Employee Refusal of Occupational Health Examinations, 29 May 95.
- g. Title 29, Code of Federal Regulations (CFR), Part 1910.139, Respiratory Protection, 8 Jan 98.
- h. TB Med 502, Occupational and Environmental Health Respiratory Protection Program, 15 Feb 82.
- i. ANSI Z88.2, Practices for Respiratory Protection, American National Standards Institute, 6 Aug 92.
- j. CDC Guidelines for Preventing the Transmission of Mycobacterium Tuberculosis in Health Care Facilities, 94.

2. **PURPOSE:** This pamphlet establishes policies, procedures, and responsibilities for implementing an ERMC Respiratory Protection Program (RPP) in accordance with Federal Law, Title 29 Code of Federal Regulations Part 1910.139. In addition, all local host nation policies and regulations must be adhered to.

3. **SCOPE:** This pamphlet covers air purifying (APR) negative pressure (half and full facepiece) respirators to include respirators used for the control of tuberculosis (TB). This pamphlet does not cover supplied air respirators (SARs) or self-contained breathing apparatus (SCBA).

4. **APPLICABILITY:** This pamphlet is applicable to all active duty, U.S. civilian and local national employees within the Europe Regional Medical Command (ERMC), to include the Landstuhl Regional Medical Center, the Heidelberg MEDDAC, the Wuerzburg MEDDAC and their outlying clinics.

5. **RESPONSIBILITIES:**

a. MEDDAC/MEDCEN Commanders will:

(1) Implement the Respiratory Protection Program at the MEDDAC/MEDCEN level.

(2) Appoint an individual or office who will have oversight and monitor the implementation of the Respiratory Protection Program.

(3) Appoint Respiratory Protection Monitor(s) RPM(s) and ensure they are appropriately trained and allotted enough time to perform their duties. These personnel should have a minimum of one year retainability.

(4) Ensure when possible the use of engineering controls, the use of less toxic substances and alternate procedures to preclude the use of respirators.

(5) Ensure safety personnel, supervisors and employees are trained in the Respiratory Protection Program.

b. MEDDAC/MEDCEN Safety Office will:

(1) Provide guidance and policy for local implementation of the Respiratory Protection Program.

(2) Provide guidance and assistance to supervisors as required to train their personnel.

(3) Conduct random work site inspections.

(4) Notify commanders and supervisors of deficiencies detected in compliance with the Respiratory Protection Program.

c. The Industrial Hygienist will:

(1) Coordinate with the Safety Manager to assist in implementing and evaluating the Respiratory Protection Program.

(2) Assist in determining which areas and operations require the use of respirators.

(3) Provide guidance and assistance to supervisors as required to train their personnel.

(4) Review and endorse the respirator training course given to the Respiratory Protection Monitors.

(5) Advise supervisors on the selection of respiratory protection equipment required for each operation.

(6) Notify commanders and supervisors of deficiencies detected in compliance with the Respiratory Protection Program.

(7) Conduct random work site inspections.

d. The Occupational Health Physician/or other Licensed Health Care Professional will:

(1) Coordinate with the Safety Manager to assist in planning, implementing and evaluating the Respiratory Protection Program.

(2) Coordinate/conduct medical evaluations to determine if the worker is physically able to wear a respirator in accordance with Appendix A (MCEU OP 35).

(3) Inform the Respiratory Protection Monitor(s) in writing as to whether each employee is medically cleared.

(4) Conduct periodic review of the medical status of worker's enrolled in the Respiratory Protection Program (see Appendix B/MCEU OP 34).

(5) Conduct random work site inspections.

(6) Coordinate Spirometry examinations when necessary.

(7) Coordinate eye examinations when eye inserts are needed.

(8) Notify commanders and supervisors of deficiencies detected in compliance with the Respiratory Protection Program.

e. Respiratory Protection Monitor(s) will:

(1) Follow the local MEDDAC/MEDCEN Respiratory Protection Program guidance and policy.

(2) Perform required initial fit testing for respirator users. Repeat fit testing at least annually thereafter, or as required due to a significant physical change with the employee or when a new type of respirator is introduced into the workplace.

(3) Maintain written documentation of fit testing results to include manufacturer, model, and size of respirator for each individual fit tested.

(4) Issue initial and subsequent respirators and provide written documentation which will be kept in the employee's six sided folder after determining that all requirements for medical evaluations, training, and fit testing are met.

f. Infection Control Office will: Serve as the functional expert in the area of tuberculosis control and disease prevention.

g. Education Service Division will:

(1) Maintain training records of individuals who are on the Respiratory Protection Program who have received annual training.

(2) Report the status of individuals trained in respiratory protection to the Safety and Environment of Care Committee.

h. Logistics Division will:

(1) Develop engineering solutions to eliminate respiratory hazards. Implement projects within available resources.

(2) Purchase only approved/required respiratory protection equipment and replacement parts as requested by the Respiratory Protection Monitor(s).

(3) Correct hazards identified through the installation hazard abatement program.

i. Supervisors on Units Requiring the use of Respiratory Protection Equipment will:

(1) Submit in writing the name of an individual who will be appointed as the section Respiratory Protection Monitor (RPM) to the Infection Control, Occupational Health or Safety Office. These personnel should have a minimum of one year retainability.

(2) Ensure that the designated RPM has received the respiratory protection certification training course.

(3) Ensure that all operations have been analyzed for safety and health hazards.

(4) Enforce proper respirator use and adherence to the local Respiratory Protection Program regulation.

(5) Ensure work areas are inspected on a periodic basis to detect, eliminate or effectively control safety and health hazards.

(6) Submit work orders for engineering solutions to safety hazards after coordinating with the Industrial Hygiene and Safety Office.

(7) Prohibit employees from working in areas where respirator use is required until the employee has completed all requirements for medical evaluation, training, fit testing and that proper written documentation has been issued by the Respiratory Protection Monitor.

(8) Ensure necessary supply of respirators are maintained.

(9) Include a statement in the employee's job description that the proper use of personal protective equipment is a significant job element.

(10) Ensure workers perform user level respirator maintenance and care.

(11) Ensure employees who must wear full face respirators and wear prescription lenses are offered prescription lens inserts at no cost to the employee.

j. Respirator Users will:

(1) Be familiar with the local Respiratory Protection Program regulation.

(2) Be responsible for all personal protective equipment issued to them.

(3) Perform positive and negative pressure tests to ensure satisfactory fit and function each time respirators are used.

(4) Perform primary cleaning and maintenance of assigned respirators.

(5) Notify the Respiratory Protection Monitor of a nonfunctional respirator.

(6) Store respiratory protection equipment in a clean and sanitary location within the work site to protect against dust, sunlight, heat, extreme cold, excessive moisture or damaging chemicals.

(7) Store respiratory protection equipment so the facepiece and exhalation valve will not be damaged.

(8) Undergo prescribed medical surveillance when scheduled by the supporting Occupational Health Physician or other Licensed Health Care Professional.

6. POLICY.

a. Respiratory protective equipment (RPE) will only be used as a means of controlling employee exposures to hazardous airborne contaminants under the following circumstances:

(1) When it has been determined that there are no feasible engineering or work practice controls which can be used to adequately control the hazard.

(2) During interim periods while engineering controls are being designed and installed to eliminate the hazard.

b. Whenever economically feasible and the technology exists for eliminating or reducing an environmental respiratory hazard, engineering control methods will be implemented. Such methods shall include, but not be limited to:

- (1) Substitution by less toxic substances.
- (2) Installation of local exhaust systems.
- (3) Natural or mechanical ventilation.
- (4) Enclosure or isolation of the process or operation.

c. The ability to use respiratory protection equipment will be a condition of employment when required by the job.

d. Supervisors will not allow workers to perform tasks requiring the use of respirators unless the employee has written documentation from the Respiratory Protection Monitor verifying medical surveillance, fit testing, and training has been accomplished.

(1) Medical surveillance evaluations will be accomplished through preplacement, initial inprocessing, or interim medical evaluation when respirator use is determined appropriate for an employee.

(2) Occupational Health will provide documentation of medical clearance for respirator users to the Respiratory Protection Monitor. This clearance will enable the employee to perform work while wearing respiratory protection.

(3) The Respiratory Protection Monitor will issue written documentation along with the respirator after determining that all requirements for medical evaluations, training, and fit testing have been met.

(4) Occupational Health will review the respirator user's medical status on a periodic basis.

f. Each area and operation requiring respiratory protection equipment will be posted.

g. Respirator Equipment.

(1) Respiratory protection equipment will be given at no cost to the employee.

(2) Respirator selection shall be based upon the nature and extent of the hazards to which the worker is exposed, the conditions and requirements of job tasks, and the characteristics and limitations of the respirator. The respiratory protection equipment shall be used only for the purposes intended and no modifications of the equipment shall be made.

(3) It is highly recommended that employees be allowed to choose between at least two different manufacturers of respirators and at least three different sizes (small, medium and large).

h. Respirator Certification.

(1) Soldiers and Department of the Army (DA) civilians can only use National Institute for Occupational Safety and Health (NIOSH) approved respirators.

(2) Local national employees working in Germany can only use respirators that are approved by NIOSH or Deutsche Industrie Norm (DIN).

(3) Local national employees working in Belgium can only use respirators that are approved by the Labor Ministry or it's delegate (Belgium Labor Law, Art 160-10).

(4) Local national employees working in Italy can only use respirators that are approved by NIOSH or stamped with the Minister of Health verification seal.

i. Initial and annual training for Respiratory Protection Monitors will be coordinated by Industrial Hygiene and Safety personnel on an annual basis.

j. Supervisors and workers will be instructed in the care, use and limitations of their respective respiratory protection equipment on an annual basis.

k. Fit Testing will be done by the Respiratory Protection Monitor.

l. The Respiratory Protection Monitor and user will adhere to the proper procedures for maintenance and care of respirators.

7. RECORD KEEPING.

a. Each activity RPM will keep records of respirator training and fit testing for those individuals wearing TB respirators for at least the duration of employment for each soldier, civilian and local national employee or as specified for a specific contaminant exposure.

b. Each activity RPM will keep records of respirator training and fit testing for those individuals wearing air purifying negative pressure half and full facepiece respirators. These records will be kept for at least the duration of employment for each soldier, civilian, and local national employee or as specified for a specific contaminant exposure.

c. Occupational Health will keep records of exposures on each worker for the duration of employment plus 30 years as prescribed by 29 CFR 1910.20(d) and AR 385-10.

8. TRAINING.

a. Respirator Users. This training applies to those workers who will wear a respirator. Training will cover respiratory hazards, respirator fit testing, care and maintenance, and individual responsibilities and will be given on an annual basis.

b. Supervisors. This training applies to those individuals who supervise employees who will wear respirators. Training will be approximately one hour in length and include responsibilities, respiratory hazards, respiratory fit testing, care and maintenance, and record keeping. This training will be given on an annual basis.

c. Respiratory Protection Monitors (RPMs). This training is intended for the designated individual that will be doing the actual fit testing, training, and record keeping for the employees in their particular work area or department. This can be the supervisor or other individual assigned as the Respiratory Protection Monitor (RPM).

The training will be approximately eight hours in length and will include initial training, responsibilities, fit testing procedures, care and maintenance of respirators, procurement, conduct of respiratory protection training for respirator users and supervisors, and documenting procedures. This training will be a train the trainer type course and must be attended on an annual basis.

The proponent agency of this publication is the Safety Officer, HQ, Europe Regional Medical Command. Send comments and suggested improvements on DA Form 2028 (Recommended Changes to Publications and Blank Forms) to Cdr, U.S. Army Europe Regional Medical Command, ATTN: MCEU-S, CMR 442, APO AE 09042.

FOR THE COMMANDER:

2 APPENDIXES
A-MCEU OP 35
B-MCEU OP 34

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