

MCLB ALBANY QUALITATIVE FIT TEST FORM

(Summarized from Appendix A, 29 CFR 1910.134)

Note: Qualitative fit testing is only for respirators worn in an atmospheres when the concentration is ≤ 10 x the contaminant's PEL.

Prior to Fit Testing:

1. Put on facepiece.
2. Position on face by adjusting left & right and up & down.
3. Set strap tension on head harness.
4. Put on rest of PPE (hard hat, goggles, faceshield, etc.)
5. Check for comfort:
 - Position of the mask on the bridge of nose.
 - Room to talk.
 - Interference with and/or room for other PPE.
 - Position of mask on face and cheeks.
6. Check Fit:
 - Chin in chin cup.
 - Adequate tension. Not too tight.
 - Proper span distance nose to chin.
 - Position of eyes in lens using a mirror or buddy system.
 - Tendency to slip.
 - Fit across bridge of nose.
 - Absence of hair under seal.
7. Perform + and – pressure user seal checks.
8. Wear for 5 minutes prior to fit testing. (*no adjustments can be made to the respirator once fit testing has begun*)

Employee's Name _____ Date of Test _____

Division/Center _____ Shop/Section _____
(Verify that employee is medically qualified and enrolled in the RP Medical Surveillance Program)

Type of Test (*circle one*): Initial Annual Additional

Challenge Agent (*circle one*): Irritant smoke Banana oil Saccharin aerosol Bitrex™

Sensitivity Check (*circle one*): Pass Fail

Exercises (*do each for one minute while standing*):

PASS

Y Normal breathing

Y Deep breathing (*slowly and deeply*)

Y Move head side to side (*inhale when head is to side*)

Y Nod head up and down (*inhale when head is up*)

Y Talk (*loud and slow*) (*count, recite, etc.*)

Y Bend over and touch toes (*jog in place if shroud is used*)

Y Normal breathing

Respirator
Make _____ Model/Size _____ Type Filters _____

Employee Signature _____

Tested By _____

Card Issued On _____