

YES | NO

YES | NO

YES | NO

YES | NO YES | NO

YES | NO

	resp	ection and limitations of the PPE, as well as facility management's participation and onsibility for the program. Also, ensure each employee understands his/her personal in the program.
Yes	No	Is there a request from an employee to wear a respirator at work on a voluntary basis (not required for employment)?
Yes	No	Is there is an established respiratory protection program in place at your work site?
Yes	No	Is management is aware of the request for voluntary respiratory protection on the site?
Yes	No	Are measures in place to purchase approved types/sizes of voluntary protection respirators, and are employees advised of this?
Yes	No	Have audits, analysis, and industrial hygiene monitoring (if needed) been conducted to establish that respiratory protection is not needed on site for employees' safety and health?
Yes	No	Is each employee aware of various health hazards and routes of exposure associated with workplace activities
Yes	No	Is each employee informed that his/her use of the respiratory protection is not required for continued employment?
Yes	No	Have you made each employee aware he/she will not be provided medical surveillance physicals at the employer's expense and that no monitoring will be conducted?
Yes	No	Is each employee provided the opportunity to ask questions concerning potential workplace contaminants?
Yes	No	Is information available for discussion of potential contaminant sources (such as non-aromatic wood dust or grass cuttings) if requested by employees?
Yes	No	Do you have an educational/awareness program in place for any employee requesting information on workpla contaminants and voluntary respiratory protection? This could include handouts, Web sites, meetings, etc.
Yes	No	Is each employee who requests PPE in the form of voluntary respiratory protection provided access to a copy of the appropriate OSHA respiratory standard?
Yes	No	Has each employee who requests PPE in the form of voluntary respiratory protection been required to sign indicating he/she received a copy of Appendix D of the standard?
Yes	No	Is each employee aware of the various limitations of respiratory protection at the work site?
Yes	No	Is each employee aware of potential illnesses associated with respiratory conditions requiring a respirator?
Yes	No	Have you offered each employee the opportunity to discuss various PPE (respirator) types and which is allowed for use at his/her site?
Yes	No	Is each employee offered the opportunity to discuss why certain PPE (respirators) are not allowed at his/her sit

