DREAMLINE AVIATION, LLC

SECTION 8: RESPIRATORY PREVENTION PLAN

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OSHA Compliance and Training Manual Section 8. RESPIRATORY PREVENTION PLAN

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RESPIRATORY PREVENTION PLAN

1. INTRODUCTION

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In the control of those occupational diseases caused by breathing air contaminated with dusts, fogs, fumes, mists, gases, smokes, sprays or vapors, the primary objective shall be to prevent atmospheric contamination. This shall be accomplished as far as feasible by accepted engineering control measures (for example, enclosure or confinement of the operation, general and local ventilation, and substitution of less toxic materials). When effective engineering controls are not feasible, or while they are being instituted, appropriate respirators shall be used.

2. PURPOSE AND SCOPE

The practices and procedures described here constitute the respiratory protection program under which respirators are effectively utilized at Dreamline Aviation.

3. **RESPONSIBILITY**

- **3.1** Administrator The Director of Maintenance is the respirator program administrator. He/she is responsible for:
 - 1. Administering the overall program.
 - 2. Implementing training and instruction programs.
 - 3. Ensuring that medical evaluation procedures are implemented.
 - 4. Selection and provision of appropriate respirators.
- **3.2 Supervisors** Supervisors are responsible for ensuring that the respiratory protection procedure is implemented in their particular areas. Supervisors include:
 - Allan Athas Maintenance
 - Bill Barrett Maintenance

Duties of supervisors include:

- 1. Ensuring that employees under their supervision have received appropriate training, fit testing, and annual medical evaluations.
- 2. Ensuring the availability of appropriate respirators and accessories.
- 3. Being aware of tasks requiring the use of respiratory protection.
- 4. Enforcing the proper use of respiratory protection when necessary.
- 5. Ensuring that respirators are properly cleaned, maintained and stored according to the respiratory protection plan.
- 6. Ensuring that respirators fit well and do not cause discomfort.
- 7. Monitoring work areas and operations to identify respiratory hazards.

- **3.3** Each Maintenance and Line Service Employee -Each employee has the responsibility to wear his or her respirator when and where required and in the manner in which they were trained and:
 - 1. Care for and maintain their respirators as instructed and store them in a clean sanitary location.
 - 2. Inform the supervisor if the respirator no longer fits well and request a new one.
 - 3. Inform the supervisor or program administrator of any respiratory hazards that they feel are not adequately addressed in the work place and of any other concerns that they have regarding the program.

4. **RESPIRATOR SELECTION**

The Director of Maintenance will select respirators to be used on site, based on the potential hazards to which workers are exposed. He will conduct a hazard evaluation for each operation, process, or work area that will include:

- 1. Identification and development of a list of hazardous substances used in the workplace, by department, or work process.
- 2. Review of work processes to determine where potential exposures to these hazardous substances may occur.
- 3. Exposure monitoring to quantify potential hazardous exposures.

End of Service Life Indicators will be used. If there is no ESLI appropriate for conditions in the employer's workplace, the employer implements a change schedule for canisters and cartridges that is based on objective information or data that will ensure that canisters and cartridges are changed before the end of their service life. The employer shall describe in the respirator program the information and data relied upon and the basis for the canister and cartridge change schedule and the basis for reliance on the data.

Dept.	Contaminants	Exposure Level (8 hr TWA)	PEL	Controls
Maint.				

5. MEDICAL EVALUATIONS

- 1. The Director of Maintenance is responsible for seeing that employees who are allowed to voluntarily wear respirators are medically able to do so.
- 2. For those employees requiring medical evaluations to determine their ability to wear a respirator and the type of respirator to use, Valley Presbyterian Hospital will provide employees with an examination and a recommendation
- 3. Follow-up medical exams will be granted as found necessary by the hospital.
- 4. The Director of Maintenance will provide Valley Presbyterian Hospital with a copy of this program, a copy of the OSHA respirator standard, a list of hazardous substances in the work place, the employee's job title, proposed respirator type and weight, length of time required to wear respirator, expected physical work load, potential temperature and humidity extremes and protective clothing required.
- 5. After an employee has received clearance and begun to wear a respirator, additional medical evaluations will be provided when:
 - a. The employee reports signs/symptoms related to their ability to use a respirator, such as shortness of breath, dizziness, chest pains, or wheezing.
 - b. Valley Presbyterian Hospital or supervisor informs the program administrator that the employee needs to be re- evaluated.
 - c. Information from this program, including observations made during fit tests and program evaluation indicates a need for re-evaluation.
 - d. A change occurs in workplace conditions that may impose an additional physiological burden on the employee.

Name	Dept.	Job Description	Respirator Type
Allan Athas	Maint.	Maint. Technician	3M Dual Cartridge - 5201
Bill Barrett	Maint.	Maint. Technician	3M Dual Cartridge - 5201
Albert Ramos	Maint.	Maint. Technician	3M Dual Cartridge - 5201
Leo Ku Rosen	Maint.	Maint. Technician	3M Dual Cartridge - 5201

Personnel Included in Medical Surveillance Program

6. FIT TESTS

- 1. The Director of Maintenance is responsible for conducting fit tests for all employees required to wear tight-fitting respirators.
- 2. Fit tests must be conducted:
 - a. Before employees are allowed to wear any tight-fitting facepiece respirator.
 - b. When there are changes in the employee's physical condition that could affect respiratory fit.
 - c. At least annually thereafter.
 - d. Using the make, model, and size of respirator they will actually use.

7. **RESPIRATOR USE**

- 1. Employees must use their respirators in accordance with the training they receive.
- 2. Employees shall conduct user seal checks each time they wear their respirator, using either the positive or negative pressure check specified in appendix B-1 of the respiratory protection standard.
- 3. Employees must be permitted to leave the work area to clean their respirator, change filters or cartridges, replace parts, or to inspect their respirator if necessary.
- 4. Employees must not be permitted to wear tight-fitting respirators if they have any condition such as facial scars, facial hair, or missing dentures, that prevents them from achieving a good seal.

5. **Emergency use procedures**

The following work areas have been identified as having foreseeable emergencies. Respirators may be for responding to emergencies or for escape only.

Work Area	Foreseeable Emergency	Respirator Type	Respirator Location
Ramp	Aircraft Fire	3M Dual Cartridge - 5201	Hangar Cabinet
Hangar	Aircraft Fire	3M Dual Cartridge - 5201	Hangar Cabinet
Hangar	Hazardous Materials Spill	3M Dual Cartridge - 5201	Hangar Cabinet

- 6. IDLH (Immediately dangerous to life and health) procedures
 - a. One or more trained and equipped standby person stays outside the IDLH atmosphere.
 - b. Visual, voice or signal line communication is maintained with the employee in the IDLH atmosphere.
 - c. The employer is notified before the standby person enters the IDLH atmosphere to provide emergency rescue.
 - d. The employer must provide assistance appropriate to the situation.

8 CLEANING, MAINTENANCE, CHANGE SCHEDULES AND STORAGE

- a. Respirators are to be cleaned and disinfected at the cleaning station located at
- b. Respirators issued for exclusive use of one employee must be cleaned and disinfected as often as necessary to be kept clean.
- c. Respirators issued to more than one person must be cleaned and dis- infected before being worn by different individuals.
- d. Respirators maintained for emergency use must be cleaned and dis- infected after each use.
- e. Respirators used in fit testing and training must be cleaned and dis- infected after each use.
- f. Procedures for cleaning respirators.
 - i. Remove filters, cartridges, or canisters. Disassemble facepieces by removing diaphragms, valve assemblies, hoses or other components recommended by the manufacturer, removing and discarding or repairing defective parts.
 - ii. Wash components in warm (43 C, 110 F) water with a mild detergent or with a cleaner recommended by the manufacturer. A stiff-bristled brush may be used to remove dirt.
 - iii. Rinse components in warm running water, then drain.
 - iv. When the cleaner used does not contain a disinfecting agent, respirator components should be immersed for 2 minutes in either a solution made by adding 1 milliliter of laundry bleach to one liter of water, an aqueous solution of iodine made by adding approximately 0.8 milliliters of tincture of iodine/100 cc of 45 % alcohol to 1 liter of warm water, or another cleanser of equivalent disinfectant quality when used as recommended or approved by the manufacturer.
 - v. Components should be hand-dried with a clean lint-free cloth or air dried.
 - vi. Reassemble facepiece, replacing filters, cartridges and canisters where necessary.
 - vii. Test the respirator to ensure that all components work properly.
- g. Respirators must be stored in a clean, dry place, so as not to deform the facepiece.
 - i. Respirators will be stored in
- h. Maintenance of respirators.
 - i. Emergency use respirators must be inspected at least monthly and as recommended by the manufacturer.
 - ii. Emergency escape-only respirators must be inspected before being placed in service.
 - iii. Respirator inspections must include at least the following:
 - 1. A check of respirator function, tightness of connections, and the condition of the facepiece, head straps, valves, connecting tubes, and cartridges, canisters or filters.
 - 2. A check of elastomeric parts for pliability and signs of deterioration.
 - iv. Respirators that fail inspection will be discarded and a new replacement(s) will be made immediately.

9. TRAINING

- 1. Employees who are allowed to voluntarily wear dust masks must be provided the basic information on respirators in Appendix D.
- 2. Employees must be able to demonstrate at least :
 - a. why the respirator is necessary and how improper fit, usage, or maintenance can compromise the protection of the respirator;
 - b. what the limitations and capabilities of the respirator are;
 - c. how to use the respirator effectively in emergency situations, including situations in which the respirator malfunctions.
 - d. how to inspect, put on and remove, use, and check the seal;
 - e. what the procedures are for maintenance and storage of the respirator;
 - f. how to recognize medical signs and symptoms that may limit or prevent the effective use of the respirator.
 - g. the general requirements of the OSHA respirator standard.
- 3. Retraining must be given when:
 - a. changes in the workplace or the type of respirator used occur;
 - b. it becomes obvious by employees' knowledge or use of the respirator that the employee has not retained the necessary understanding or skill.
 - c. other situations arise in which retraining appears necessary.

10. PROGRAM EVALUATION

- a. The Director of Maintenance is responsible for ensuring that the written respiratory protection program is being followed and for consulting employees to see if they are using the respirators properly.
- b. The Director of Maintenance is responsible for assessing the effectiveness of the respiratory protection program by:
 - i. consulting employees required to use respirators to identify any problems and corrective measures necessary.
 - ii. determining if appropriate respirator selection is made for the hazards to which the employee is exposed.
 - iii. determining if respirator fit allows the use of the respirator without interfering with effective workplace performance.
 - iv. determining if respirators are being maintained properly.

11. RECORDKEEPING

- a. A written copy of this program and the OSHA standard is kept in the Director of Maintenance office
- b. The Director of Maintenance keeps copies of any medical evaluations.
- c. The Director of Maintenance has copies of fit test results that show the employees' names, type of fit test performed, specific make, model, style, and size of respirator tested, date of test, the pass/fail results for qualitative fit tests or the fit factor and strip chart recording or other recording of the fit test results for quantitative fit tests.