

**BY ORDER OF THE COMMANDER
TRAVIS AIR FORCE BASE**

**TRAVIS AIR FORCE BASE
INSTRUCTION 48-104**

18 MAY 2004

Aerospace Medicine

***RESPIRATORY PROTECTION PROGRAM
(RPP)***



COMPLIANCE WITH THIS PUBLICATION IS MANDATORY

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This instruction implements AFD 48-1, *Aerospace Medical Program* and AFOSH Std 48-137, *Respiratory Protection Program*. It establishes responsibilities and outlines procedures for conducting the base Respiratory Protection Program. It applies to all Travis Air Force Base (TAFB) directorates, 60 AMW and tenant organizations on and supported by Travis Air Force Base.

SUMMARY OF REVISIONS

This publication updates the requirements and regulations implementing the Respiratory Protection Program at Travis AFB. A **bar (|)** indicates revision from the previous edition.

1. Application.

1.1. The specific requirements outlined by this instruction are based on AFOSH Std 48-137, *Respiratory Protection Program* at the time of publication. Should additional Occupational Safety and Health Administration (OSHA) requirements be published that are more stringent than the requirements in this directive, they shall apply and this directive will be changed. The respiratory protection requirements outlined for specific contaminants in the Code of Federal Regulation (CFR) shall apply.

2. Responsibilities.

2.1. Unit Commanders, Directors, and Functional Managers will:

2.1.1. Ensure the RPP, which conforms to the requirements of AF directives and applicable OSHA standards, is properly established when respiratory protection is used by any of their work centers.

2.1.2. Ensure personnel using or supervising others who use respiratory protection devices are provided training as outlined in this instruction.

- 2.1.3. Ensure personnel obtain required annual medical evaluation, if required.
 - 2.1.4. Identify to Bioenvironmental Engineering Flight (BEF) the individual responsible for day-to-day compressed breathing air system(s) maintenance and inspection.
 - 2.1.5. Purchase respirator insert frames for employee use with prescription eyeglass lenses.
- 2.2. Workplace supervisors, where respirators are used and who have direct responsibility for protection for their employees, will:
- 2.2.1. Maintain this instruction, and develop a workplace specific RPP operating instruction (OI) using the template OI provided by BEF. Each workplace OI must be coordinated and approved by the BEF prior to publication.
 - 2.2.2. Coordinate with BEF whenever workplace operations change. Appropriate evaluations must be made when new chemicals are introduced, processes or procedures are changed, or engineering controls are modified.
 - 2.2.3. Ensure personnel obtain required annual medical evaluation, if required.
 - 2.2.4. Document initial and annual training on AF Form 55, **Employee Safety and Health Record**.
 - 2.2.5. Operate all compressed breathing air systems according to T.O. 42B-1-22, *Quality Control of Compressed and Liquid Breathing Air*, and manufacturer operating instructions.
 - 2.2.6. Ensure personnel on the RPP wear only the respirator(s) with which they have been fit tested and trained. Employees must wear the respirator listed on the AF Form 2772, **Certificate of Respirator Fit Test**.
 - 2.2.7. Appoint an individual to be responsible for the use, maintenance, inspection, and care of common use, emergency or escape respirators, as appropriate.
 - 2.2.8. Do not provide respiratory protection to base contractors.
- 2.3. Individuals who wear respirator will:
- 2.3.1. Guard against damage and contamination to the respirator. Store cleaned respirators in clean plastic bag or other sealable container away from contamination between uses.
 - 2.3.2. Wear only those respirators for which they have received fit testing and training, (AF Form 2772) and only for the tasks specified by their workplace RPP OI.
 - 2.3.3. Not mix parts from different respirator models manufacturers or modify respirator(s). Mixing parts and or modification of the respirator could result in an accident and will void the National Institute for Occupational Safety and Health (NIOSH)/Mine, Safety and Health Administration (MSHA) certification.
 - 2.3.4. Ensure contact lens requirements outlined in AFOSH Std 48-137 are followed.
 - 2.3.5. Not have accumulation of any hair on the face of an individual which interferes with a normal face-to-respirator seal. This includes beards, sideburns, mustache, goatees, stubble, or more than one day's facial hair growth.
- 2.4. Bioenvironmental Engineering Flight (BEF):
- 2.4.1. Is the office of primary responsibility for the base RPP.

- 2.4.2. Will determine if respiratory protection is required for the tasks being performed.
- 2.4.3. Will evaluate all Filtering Face Piece Device (FFPD) requests for approval.
- 2.4.4. Will give guidance to shop supervisors as necessary in the preparation of the shop respiratory protection program OI and annual training program.
- 2.4.5. Will conduct an annual RPP review at base and unit level.
- 2.4.6. Will establish and maintain a respirator authorized user list of workplaces with required respirators. This list will be coordinated with Customer Service Center in both Logistics Readiness Squadron to ensure only authorized workplaces receive respirators.
- 2.4.7. Ensures all personnel who wear respirators are identified in the BEF Flight database.
- 2.5. Force Health Management of Aerospace Medicine Squadron will arrange for and conduct initial and routine medical surveillance of respirator users required by applicable OSHA standards.
- 2.6. Optometry Clinic will provide respirator eyeglasses, prescriptions and lenses. Contact lenses will be purchased by the individual.
- 2.7. Aeromedical Council will be the approval body for medical evaluation protocol for respirator users, developed/recommended by the Occupational Health Working Group (OHWG).
- 2.8. Public Health Flight will ensure all respirator users have been correctly coded to receive baseline and annual medical evaluations.
- 2.9. The Commander, Aerospace Medicine Squadron, will ensure a physician makes the determination that a worker is physically able to wear a respirator. The physician will review individual's RPP questionnaire.
- 2.10. The Chief, Ground Safety will refer any suspected problems on respirator usage discovered during their inspections to the BEF.
- 2.11. The Chief, Fire Department:
 - 2.11.1. Provides training on the use and maintenance of self-contained breathing apparatuses (SCBA).
 - 2.11.2. Ensures required maintenance for regulating or admission valves, regulators, and alarms for SCBAs is performed by the respirator manufacturer or appointed individual(s) trained and certified by the manufacturer to conduct such maintenance.
 - 2.11.3. Provides BEF with a copy of all compressed breathing air tests results, AFTO Form 213, **Cryogenic Materials Laboratory Test Report**.
- 2.12. 60th Logistics Readiness Squadron (LRS).
 - 2.12.1. Coordinates all customer requests for respirators and respirator components through BEF except for the Fire Department.
 - 2.12.2. Assigns issue exception (IEX) or local code(s) to RPP items with a Federal Stock Class (FSC) of 4240 as identified by BEF.
 - 2.12.3. Issues respirators and components only to organizations/workplaces that are approved by BEF.

- 2.12.4. Ensures a “suitable substitute” for a particular respirator or respirator part is not issued.
- 2.12.5. Provides a computer listing to BEF of all FSC 4240 issues that have IEX or local codes loaded.

3. Medical Clearance/Evaluation: Medical clearance/evaluation is required for individuals:

- 3.1. Initially prior to being assigned duties requiring the use of a respirator.
- 3.2. Annually thereafter as long as the respirator is required or recommended.
- 3.3. Filtering Face Piece Device (FFPD): Medical Clearance is not required.

4. Respiratory Protection Program Training.

- 4.1. Initial respirator training is provided to employees only after being medically cleared (clearance must not be over 12 months old).
- 4.2. Respirator training is required annually (unless specified otherwise in a substance specific standard). Fire Protection (FP) Flight personnel are certified at technical school, base level and by the fire protection flight training section in the wear and use of Self-Contained Breathing Apparatus (SCBAs).
- 4.3. Initial and update FFPD training shall be provided by the shop supervisor using a lesson plan/operating instruction coordinated and approved by the BEF.
- 4.4. All requests for respirator training should be coordinated by the unit.
- 4.5. BEF will provide training to all duty section’s requesting assistance.
- 4.6. BEF will provide initial and update training to respirator maintainers as identified by supervisors.
- 4.7. All employees required to wear respirators for substance specific contaminants (i.e., asbestos, lead) must complete the substance specific training prior to reporting for respirator training.
- 4.8. BEF will provide initial and annual respirator training to all personnel required to maintain emergency, escape and rescue respiratory protection equipment.

5. General Requirements and Procedures.

- 5.1. All personnel who use a respirator will clean the respirator face-piece sealing area, before using the respirator.
- 5.2. Gas permeable and soft contact lens may be worn with respirator at the individual’s own cost.
- 5.3. Spectacles with straps or temple bars that pass through the sealing surface of either negative or positive pressure, tight-fitting, full-face respirators shall not be used.
- 5.4. If the employee must wear corrective lenses with a full-face respirator, the lenses for the respirator eyeglass frames must be manufactured by the respirator manufacturer.
- 5.5. Air supplied respirators must be operated at the NIOSH certification pressure as designated for the length of air supply hose utilized.
- 5.6. Point of Attachment (POA) for air supplied respirators must have pressure gauges, pressure release and air regulators.

- 5.7. Positive and negative pressure fit check of tight-fitting face-piece respirators must be accomplished by the respirator user prior to each entry into the respirator area.
- 5.8. Using the template provided by BEF, shop supervisors will develop a shop specific RPP OI for each workplace that uses respiratory protection. The OI must be coordinated and approved by BEF.
- 5.9. All workplaces that use compressed breathing must provide the BEF a copy of all compressed breathing air tests results, AFTO Form 213, **Cryogenic Materials Laboratory Test Report**.
- 5.10. Employees must be re-fit tested if:
 - 5.10.1. They experience difficulty when conducting positive or negative pressure checks.
 - 5.10.2. Their weight changes by more than 20 pounds.
 - 5.10.3. They receive extensive dental work facial cosmetic surgery, excessive scarring, or disfigurement.

6. Care, Inspection and Maintenance: See AFOSHSTD 48-137, *Respiratory Protection Program*.

7. Terms.

- 7.1. Base Respiratory Protection Program (BRPP): This includes respirator training and fit testing.
- 7.2. Base Respiratory Protection Program Administrator (BRPPA): A Bioenvironmental Engineering Flight (BEF) staff member who is the point of contact (POC) for all base Respiratory Protection Program (RPP) matters.
- 7.3. Immediate Danger to Life and Health (IDLH): Any atmosphere that poses an immediate threat to life or health, or conditions that pose an immediate threat of severe exposure to contaminants which are likely to have adverse delayed effects on health (includes oxygen deficient atmospheres).
- 7.4. Emergency Use Respirator: A respirator used for escape or rescue from an IDLH atmosphere or in an area where the contaminant concentration is unknown but likely to cause a severe health hazard.
- 7.5. Confined Space: A space that is large enough and configured so that a worker can bodily enter and perform assigned work; and has limited or restricted means for entry or exit (for example: tanks, vessels, silos, storage bins, hoppers, vaults, manholes, and pits are spaces that may have limited means of entry and is not designed for continuous human occupancy. Follow requirements of T.O. 1-1-3, *Inspection and Repair of Aircraft Integral Tanks and Fuel Cells*, AFOSH Std 91-25, *Confined Spaces* and all other applicable confined space directives. Coordinate all confined space entry respiratory protection and industrial hygiene requirements with BEF.
- 7.6. National Institute for Occupational Safety and Health (NIOSH)/Mine, Safety and Health Administration (MSHA): Approval agencies for respirators and respirator parts.
- 7.7. Filtering Face Piece Device (FFPD), formally referred to as disposable facemask. Authorized for use only after a workplace evaluation and approval by BEF. Use is for comfort only.
- 7.8. Self Contained Breathing Apparatus (SCBA): Supplied air respirator which consists of an air tank, hoses, regulator valve, and full-face respirator.
- 7.9. Point of Attachment (POA): Location where the compressed air supply hose is connected to Grade D breathing air supply.

8. Forms Adopted. AF Form 55, **Employee Safety and Health Records**, AF Form 2772, **Certificate of Respirator Fit Test** and AFTO Form 213, **Cryogenic Materials Laboratory Test Report**.

ALLARD R. CARNEY, Col, USAF
Director Wing Staff

Attachment 1

GLOSSARY OF REFERENCES AND SUPPORTING INFORMATION

References

AFPD 48-1, *Aerospace Medical Program*, Jul 93

AFOSH Standard 48-137, *Respiratory Protection Program*, Nov 98

AFOSH Standard 91-25, *Confined Spaces*, Feb 98

T.O. 1-1-3, *Inspection and Repair of Aircraft Integral Tanks and Fuel Cells*, 28 Feb 03

T.O. 42B-1-22, *Quality Control of Compressed and Liquid Breathing Air*, 15 Sep 98