RESPIRATOR FIT TEST TRAINING "Train the Fitter"

117	Trainee's Name: Depa	rument:
Ph	Phone/extension: Title:	
		CHECK BOX IF COMPLET
1.	1. Observed the training video for the 3M 1860 Fit test	····
2.	2. Read and verbalized understanding of the N95 Respirator Re	e-Don/Re-use policy.
3.	3. Verbally explains the general reasons why Fit test is perform	ned
4.	4. Demonstrates the 7 steps appropriately	
5.	5. Properly explains how to don the mask correctly	
6.	6. Verbally explains the use of the solution #1 or #2 whether it	is Bitrex or Saccharin
7.	7. Demonstrates how to unclog nebulizers, if needed	
8.	3. Demonstrates or understands how to clean both hood and net	oulizer.
9.	 States the policy and procedures in handling all paperwork/recordkeeping that needs to be returned to OHS. 	
10.	Performed a minimum of 2 fit tests on other students	
Web	ebsite for 3M training video	
Wate Medi	atch a YouTube video with the title: edical Respirator N95 Fit Test Instructions 3M Health Care Resp	pirator & Surgical Mask
https	ps://www.youtube.com/watch?v=xl4qX6qEYXU	
Fit To	Test training was performed under the direct observation of an	RN, NP, or MD.
Instru	tructor's Signature:	Date:
Depar	partment:	

Revised: 3/11/2020. Employee Health, N95, Respirator Fit Test Training, Train the Fitter

3M Science.
Applied to Life.™

Helping You Wear it Right

3M™ Health Care Particulate Respirator and Surgical Masks, 1860/1860S

Application

Always read and follow User Instructions.

1



Cup the respirator in your hand with the nosepiece at fingertips, allowing the head straps to hang freely

2



Position the respirator under your chin with the nosepiece up.

3



While holding the respirator in place, pull the top strap over your head so it rests high on the back of your head.

4.



While continuing to hold the respirator firmly in place, pull the bottom strap over your head and position it around your neck, below your ears. Untwist the straps. Position the respirator low on your nose.

5



Using both hands, mold the nosepiece to the shape of your nose by pushing inward while moving your fingertips down both sides of the nosepiece.

Note: Always use two hands when molding nosepiece. Pinching with one hand may result in improper fit and less effective respirator performance. 6



Perform a User Seal Check

Check the seal of your respirator each time you use the respirator.

To perform the user seal check, place both hands completely over the respirator, being careful not to disturb the position, and exhale sharply. If air leaks around your nose, adjust the noseplece as described in step 5. If air leaks at respirator edges, adjust the straps back along the sides of your head. Perform seal check again if an adjustment is made. If you cannot achieve a proper fit, see your supervisor. Do not enter area requiring respirator use.

Removal

1



Without touching the respirator, slowly lift the bottom strap from around your neck up and over your head.

2



Lift off the top strap. Do not touch the respirator

3



Store or discard according to your facility's infection control policy.

3M Health Care Medical Solutions Division 2510 Conway Avenue St. Paul, MN 55144-1000 USA 1-800-228-3957 3M.com/medical

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For additional information on all 3M[®] Health Care Particulate Respirator and Surgical Masks, visit 3M.com/healthcaremasks WARNING

Respiratory help protect against cartain sirborne contaminante. Before use, the wesser must read and understand the User Instructions provided as a part of the product packaging. Follows all local (regulations, in the US, a written respiratory protects programmus to insignament or enging all the respiratory protects programmus to insignament and enging all the respiratory protects and understand the US, a standard 284 4 requirements of the another requirements of the applicable prediction, are composited with energy result in sidicases or death for corrections, committed product of direct patriculous, call 3M Personal Stricty Division (PSD) Technical Service in the USA at 4-800-243-4830 in Carada, pa\$4-800-267-4744.

Donning Your N95 Respirator

3M Models 1860 & 1860S "Cup" Respirators

Moldex Model 1500 and 2200 "Mesh" Respirators

- 1. Wash your hands or use alcohol gel.
- 2. Visually inspect respirator to verify that it is clean and undamaged. Be on the lookout for rips, tears or punctures in the filtering material.
- 3. Cup the respirator in your hand so the face (concave) side is facing you and the metal nosepiece is at your fingertips. Let the headbands (elastic straps) hang freely below your hand.



3. Cup the respirator in your hand so the face (concave) side is facing you and the pointy nose end is at your fingertips. Let the headbands (elastic straps) hang freely below your hand.



4. Raise the respirator up to your face, placing your chin into the cup first. Remember that the metal nosepiece goes over your nose, not under your chin!



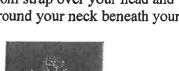
4. Raise the respirator up to your face, placing your chin into the cup first. Remember that the pointy end at your fingertips goes over your nose, not under your chin, and that the thin styrofoam-like nose seal doesn't catch, fold over, or crease as you adjust it on your nose.



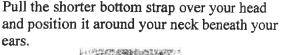
5. Pull the top (upper) strap over your head and place it on the crown (flat spot) at the top back of your head



Pull the bottom strap over your head and position it around your neck beneath your ears.



5. Pull the top (upper, longer) strap over your head and place it on the crown (flat spot) at the top back of your head.





Do NOT wear your respirator by one strap!



Warning: Do not "pinch" the nosepiece around your nose with one hand – doing so puts a crease in the nosepiece where contaminants can leak into the facepiece. Use both hands starting from the center and moving outward!

7. Perform a "user seal check" ("blow test") to verify the respirator is fitting. Place both hands completely over the respirator (a plastic bag may help) and exhale. If air leaks around the nose repeat step 5. If air leaks around the edges of the respirator readjust the straps, working them back along the sides of your head.



6. Perform a "user seal check" ("suck test") to verify the respirator is fitting. Place both hands completely over the respirator and sharply inhale. You should feel a slight vacuum inside the facepiece. If air leaks adjust the straps by pulling back along the sides, and reposition (wiggle) the respirator on your face. Repeat the test.



Removing (Doffing) Your N95 Respirator

- 1. Remove soiled/potentially contaminated gloves. Wash your hands or use alcohol gel.
- 2. Using one hand to hold the respirator on your face, draw the bottom (neck) strap up and over your head.
- 3. Draw the top (crown) strap over your head.
- 4. Dispose of the used respirator.
- 5. Wash your hands.

OSHA requires fit testing for all employees who are required to wear tight-fitting facepiece respirators. To ensure that HALYARD' N95 Particulate Filter Respirators and Surgical Masks provide the intended level of protection, every wearer should receive training. This includes demonstrations and practice time on how to properly don the respirator and to determine if it fits correctly.

DIRECTIONS FOR PROPER DONNING:

Proper donning of a N95 Particulate Filter Respirator and Surgical Mask may feel a little awkward at first, but it will become easier with repeated applications. The following instructions should be followed when donning this product (see below and enclosed poster for clarification):

- 1. Separate the edges of the respirator to fully open it.
- 2. Slightly bend the nose wire to form a gentle curve.
- 3. Hold the respirator upside down to expose the two headbands.
- 4. Using your index fingers and thumbs, separate the two headbands.
- 5. While holding the headbands with your index fingers and thumbs, cup the respirator under your chin.
- 6. Pull the headbands up over your head.
- 7. Release the lower headband from your thumbs and position it at the base of your neck.
- 8. Position the remaining headband on the crown of your head.
- 9. Conform the nosepiece across the bridge of your nose by firmly pressing down with your fingers.
- Continue to adjust the respirator and secure the edges until you feel you have achieved a good facial fit. Now, perform a Fit Check.
- The respirator must be User Seal Checked each and every time it is donned, and
- He/She should not proceed with activities until a successful User Seal Check has been completed.

DIRECTIONS FOR USER SEAL CHECKING:

To ensure N95 Particulate Filter Respirators and Surgical Masks are providing the intended level of protection, a User Seal Check must be conducted each and every time they are worn.

To User Seal Check a respirator, the wearer should forcefully inhale and exhale several times. The respirator should collapse slightly upon inhaling and expand upon exhaling. The wearer should not feel any air leaking between his/her face and the respirator. This is the sign of a good facial fit and a successful User Seal Check.

If the respirator does not collapse and expand OR if air is leaking out between the wearer's face and the respirator, then this is NOT a good facial fit. The wearer should adjust the respirator until the leakage is corrected and he/she is able to successfully User Seal Check the respirator.

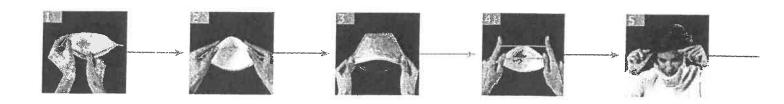
Note: User Seal Checking is NOT a substitute for Fit Testing.

User Seal Checking is a simple procedure intended to help the wearer verify that he/she has properly donned the respirator. Fit Testing is designed to determine the appropriate size respirator for each wearer. Fit Testing should be conducted according to schedule outlined in your facility's Written Respiratory Protection Program.

TIPS FOR ACHIEVING A GOOD FIT:

If the wearer is having a problem successfully User Seal Checking the respirator, he/she should try the following tips:

- Use a mirror while adjusting the respirator.
- Ask someone to look for hair or earrings that might be caught in the seal.
- Make sure the headbands are positioned properly. It is especially important that the top headband is on the crown of your head, as it is designed to hold the bottom of the respirator snug against your chin.



QUALITATIVE FIT TESTING PROTOCOL:

The Qualitative Fit Testing protocol consists of two parts: a Threshold Check and a Fit Test. The Threshold Check determines the subject's ability to taste a weak solution of the challenge agent. The Fit Test uses the full strength solution to verify that the wearer can achieve an acceptable facial fit with the respirator. A medical evaluation to assess the ability to wear a respirator should be conducted prior to fit testing or respirator use.

The following items are not included in this Kit but should be available to assist in Fit Testing:

- Covered pitcher or container of water and drinking cups (or a nearby water fountain)
- Disposable towels / napkins or baby wipes
- · Stop watch or wrist watch with a second hand
- Adequate supply of the respirator style your facility will be using
- Training files or other record-keeping system your facility will be using

Note: This Kit contains saccharin-based Threshold Check and Fit Test solutions. The same protocol, however, can be followed using BITREX® (extremely bitter taste) as the challenge agent. Both saccharin and BITREX® are OSHA-accepted challenge agents. Supplies of both saccharin and BITREX® are available at a nominal charge by calling your local distributor.

PREPARATION:

- Pour the contents of Threshold Check Solution into the Threshold Check nebulizer. Prepare the Fit Test nebulizer with the Fit Test Solution in the same manner.
- Assemble the hood by pressing the VELCRO® strips together and fitting the bouffant cap over the top, securing the seam of the cap under the tabs on the hood.
- 3. The Fit Test protocol should be explained to the test subject prior to testing. The test subject should not eat, chew gum, or drink anything but water for at least 15 minutes prior to the test.
- 4. Record the name of the test subject, type of respirator (N95), brand and size of respirator, and date of the test.

THRESHOLD CHECK PROCEDURE:

- 1. Have the test subject put on the hood without a respirator.
- 2. Instruct the subject to breathe through his/her mouth with tongue extended.
- 3. Instruct the subject to immediately report when the challenge agent is tasted.
- 4. Insert the nozzle of the Threshold Check nebulizer into the hole at the front of the hood and squeeze the bulb firmly 10 times. The nozzle should be directed away from the nose and mouth of the person. (If the person reports a taste during this process, stop squeezing. Record "10" as the number of squeezes required, regardless of when the person reported the taste.)
- 5. If the subject has not tasted the solution, administer another 10 squeezes. (If the person reports a taste during this process, stop squeezing. Record "20" as the number of squeezes required, regardless of when the person reported the taste.)
- 6. If the subject has not tasted the solution, administer another 10 squeezes and ask again if they have tasted the solution. (If the person reports a taste during this process, stop squeezing. Record "30" as the number of squeezes required, regardless of when the person reported the taste.)

(cont'd)



THRESHOLD CHECK PROCEDURE: (CONT'D)

- 7. If no taste has been detected, and if saccharin is being used, then the subject should be tested with the alternative BITREX® Solution using these same procedures. If the subject is unable to taste either saccharin or BITREX,® then the subject cannot be tested using this protocol. Instead, Quantitative Fit Testing is suggested.
- 8. Remove the hood and allow the subject to rinse his/her mouth with water and wipe his/her face. The subject should not proceed to the Fit Test until the taste of the challenge agent has been allowed to clear, which usually takes several minutes.

FIT TEST PROCEDURE:

- 1. Have the subject put on the respirator and perform a User Seal Check. The subject should be allowed to wear the respirator for at least five minutes, adjusting it as needed.
- Place the hood on the subject, making sure that there is sufficient room for the subject to move his/her head from side to side and up and down without the mask touching the sides of the hood.
- 3. Instruct the subject to breathe through his/her mouth with tongue extended for the duration of the test and to report if the taste of the solution is detected at any time during the test.
- 4. Insert the nozzle of the Fit Test nebulizer into the hole at the front of the hood and spray 10, 20, or 30 squeezes into the hood, depending on which number was recorded from the Threshold Check.
- 5. Maintain the aerosol concentration in the hood throughout the test by squeezing one half the initial number of squeezes every 30 seconds into the hood.
- 6. Instruct the subject to perform the series of exercises below for 60 seconds each:
 - I. Normal Breathing
 - II. Deep Breathing
 - III. Turning head from side to side (pausing for a breath when head is to side)
 - IV. Moving head up and down slowly (pausing for a breath while head is up)
 - V. Talking (reading the enclosed "Rainbow Passage," reciting the alphabet, etc.)
 - VI. Jogging in Place
 - VII. Normal Breathing

- 7. If the exercises are completed without the subject tasting the aerosolized solution, then an acceptable fit has been demonstrated and the subject has passed the test.
- 8. If the subject reported tasting the aerosolized solution during the test, then the subject has failed to achieve an acceptable fit. The test subject should be allowed to re-test with the same model respirator or with another model respirator of his/her choice. Wait at least 15 minutes before re-testing and begin by repeating the Threshold Check.

CLEANING UP:

- Rinse the nebulizers with warm water to prevent clogging. If clogging is found at the end of the test, clean the nebulizer and re-test. The nebulizers should be thoroughly rinsed and refilled at least every four hours during testing.
- Wipe out the inside of the hood with a damp cloth or paper towel to remove any solution residue. A disinfectant, such as isopropyl alcohol, may be used for cleaning to reduce potential contamination.

Additional Resources:

OSHA Websites:

Tuberculosis Information, http://www.osha-slc.gov/SLTC/tuberculosis/index.html

OSHA Standard 1910.134 Respiratory Protection http://www.osha.gov/pls/oshaweb/owadisp.show_document?p_table+STAND-ARDS&p_id+12716

Health Care Information, http://www.osha-sic.gov/SLTC/healthcarefacilities/index.html

CDC NIOSH Websites:

Tuberculosis Information, http://www.cdc.gov/niosh/tb/

Respirators: Your TB Defense http://www.cdc.gov/niosh/docs/video/tb.html

TB Respiratory Protection Program in Health Care Facilities Administrator's Guide, http://www.cdc.gov/niosh/99-143.html

Guidelines for Preventing the Transmission of Mycobacterium Tuberculosis in Health Care Facilities, 1994, http://www.cdc.gov/epo/mmwr/preview/mmwrhtmt/00035909.html

Core Curriculum on Tuberculosis, What the Clinician Should Know, http://www.cdc.gov/nchstp/tb/pubs/corecurr/default.html



Safety Bulletin Bulletin #9, November 2017

ZSFG Facial Hair Policy

Staff are required to be clean shaven when wearing a N95 mask or when being fit tested for a N95 mask. This is to comply with the following Cal/OSHA requirement:

"The employer shall not permit respirators with tight-fitting facepieces to be worn by employees who have:

- 1. Facial hair that comes between the sealing surface of the facepiece and the face or that interferes with valve function; or
- 2. Any condition that interferes with the face-to-facepiece seal or valve function."

Why does Cal/OSHA have this requirement?

The reason Cal/OSHA instituted this requirement is that facial hair interferes with the respirator seal. This allows airborne contaminants to enter the mask and be inhaled by the wearer. Numerous studies have shown that as little as one day's beard growth significantly reduces the amount of protection provided by a respirator.

What does clean shaven mean?

Not having facial hair that comes in contact with the respirator sealing surface (where the respirator seals against your skin, shown in the shaded area below).





What if I can't shave due to a medical condition or because of my religious beliefs?

Alternate accommodations will be made for people who have documented medical conditions or religious beliefs that prevent them from shaving.

What if my beard looks really cool?

Sorry, you've still got to shave it before you wear a respirator. There are no exemptions for personal style.

Can I sign a waiver that I voluntarily choose not to wear a respirator?

No, Ca!/OSHA does not allow employees to voluntarily decline wearing proper PPE. Also, while you may be okay with putting yourself at risk, if you were to contract a disease due to not wearing a respirator, you would also be putting your coworkers at risk.

For additional info see EOC Policy 16.01 Respiratory Protection Program, Appendix F.



Infection Control Know-Do-Share

Date: 4/15/20 Topic: N95 Respirator and Eye Protection Extended Wear and Re-Don/Re-Use (Updated) –

Know

- The guidance in this KDS applies to all patients in isolation, to include COVID-19 (suspect and confirmed) in our patient care units.
- N95 respirators and eye protection may be worn in accordance with the following guidance:
- Extended Wear: refers to the practice of wearing the same N95 and eye protection for repeated close contact encounters with several patients, without removing between patient encounters. Extended use may be implemented when multiple isolation patients are placed together in dedicated waiting rooms or hospital units (cohorting).
- Re-use/Re-don: refers to the practice of using the same N95 and eye protection for multiple
 encounters with patients but removing it ('doffing') after each encounter. The N95 and eye
 protection is stored in between encounters to be put on again ('donned') prior to the next
 encounter with a patient.
- Staff will select the appropriate method (extended wear, re-use/re-don, combination of both) based upon their workflow; e.g. staff working on a single unit may do extended wear while on the unit and then follow the re-use/re-don steps when leaving the unit for breaks, meals, etc. Staff working on multiple units will follow the re-use/re-don each time they travel to a new location. Unit/Department directors/managers may request consultation with Employee Health & Safety and Infection Control if necessary to assist in determining best practice for their area.
- Discard & DO NOT continue extended wear or re-don/re-use disposable N95 when:
 - o The patient has a co-infection with *C. difficile*, Carbapenem-resistant Enterobacteriaceae (CRE) or *Candida auris*, **unless** covered by full face shield.
 - o The item is contaminated with blood, respiratory or nasal secretions, or other bodily fluids from patients.
 - The N95 fails to pass the seal check even after readjustments made.
 - The item is obviously damaged (torn strap) or becomes hard to breathe through.
- DO continue to redon/reuse eye protection following instructions in "Do" section:
 - Snug-fitting goggles w/ head strap reusable, good so long as parts function correctly
 - Loose-fitting goggles w/ ear piece disposable, good so long as unimpeded visibility, ear pieces hold securely in place, visibly clean and no cracks or damage
 - o Clean/disinfect using PDI bleach wipes after using with patients co-infected with *C. difficile*, Carbapenem-resistant Enterobacteriaceae (CRE) or *Candida auris*.
- Place N95 in clean brown paper bag with employee's name and date clearly visible; properly clean eye protection and store in a protected manner, brown bag or cabinet, and ensure name and date visible; store both items in the designated location. For High Level Respiratory patients, the anteroom is an acceptable location. DO NOT store N95 respirators in plastic bags.
- Clean hands with soap and water or an alcohol-based hand sanitizer before and after touching or adjusting the N95 and eye protection (if necessary for comfort or to maintain fit).
- Avoid touching the inside of the N95. If inadvertent contact is made with the inside of the N95, perform hand hygiene as described above to avoid risk of contamination from hands.
- Per CDC's "Strategies for Optimizing the Supply of N95 Respirators" document, N95s can be used beyond their anticipated shelf life as long as the clinician visually inspects the N95 respirator for defects and degrading, and it passes a seal check after donning.



Infection Control Know-Do-Share

Do

- o Instructions for Re-donning N95 respirator and eye protection after initial use:
 - Don a pair of clean (non-sterile) gloves before retrieving N95 respirator; pick up using the head straps to avoid contact with exterior surface
 - Put on N95 respirator and perform a seal check.
 - o Cover respirator completely w/ both hands, inhale gently and exhale sharply; if air blows on your face or eyes, readjust the respirator.
 - After N95 respirator properly secured remove gloves and perform hand hygiene.
 - Put on eye protection and perform hand hygiene. No gloves required as item has been disinfected and is safe to handle without gloves.

o Instructions for Removal of eye protection and N95 respirator

- N95 respirator will be the last piece of the PPE ensemble to be removed.
- Perform hand hygiene and don a pair of clean (non-sterile) gloves before removing eye protection (if used)
- If applicable; remove eye protection using the back strap or ear pieces, clean / disinfect using the following steps:
 - o Face Shield:
 - First: clean the interior plastic surfaces of eye protection
 - Second: using same wipe clean the exterior surface of eye protection
 - Goggles: 2 styles snug-fitting with full contact and head strap or loose-fitting with partial contact and ear pieces





2.

- · First: clean interior surface
- Second: clean head strap or ear pieces based on goggle style
- Third: clean exterior surface
- o Disinfectant to Use:
 - Clorox H2O2 wipes wait 1 minute to allow proper contact time
 - PDI bleach wipes for C. diff, CRE, Candida auris wait 4 minutes to allow proper contact time
- Wipe with clean, damp paper towel to remove H2O2 or bleach film residue
- o Place in appropriate location, remove gloves and perform hand hygiene
- Don clean (non-sterile) gloves and remove N95 respirator and place in clean brown paper bag in appropriate storage area if it will be re-used
- Remove gloves and perform hand hygiene

o Instructions for obtaining brown paper bags for a unit or clinic

- Brown paper bags will be issued at the CPD window from 9AM-3PM daily
- These bags will be provided in packs of 25; number of packs requested is determined by estimated usage for the next 24 hours.
- Units/clinics are limited to one pick-up of brown paper bags per day. CPD staff will maintain a
 daily log of units/clinics who have been issued bags.

Share

> All inpatient and ambulatory care areas

N95 Respirator Fit Test Record Zuckerberg San Francisco General Hospital Respiratory Protection Program

For Employee to Complete												
PLEASE PRINT LEGIBLY AND FULLY COMPLETE EMPLOYEE SECTION												
Name:	last	first		Employer:	☐ UCSF	□ SFGH/	CCSF Ot	her:				
Signature:			Job Title: Class:					14				
Date: Date of Birth:				Department: Location:								
SS #:	xxx-xx		100	Cell Phone:			M	anager:				
For Occupational Health Service to Complete												
Medically cleared: Yes No * Previous medical evaluation is on record. There are no new stated medical problems that would preclude N95 respirator use. Hazard: Mycobacterium Tuberculosis												
_		ls/Use (2) Limitations dure & Results (1)		ing on a Resp	irator (4)	Seal Checks	(5) Insp	ection (6)	Storage (7) Disposal		
	it Test Solution		of Squeezes	for Fit Test every 30 sec	onds-							
☐ Sacc	harin 🗌 Bitrex	10/5	20/10	30/15								
Selection				Qualitative Fit Test Results -one minute per section-								
Test #	N95 Mask	Size	Normal Breaths	Deep Breaths	Side to Side	Up and Down	Speak Talk	Jog In Place	Normal Breaths	Pass Fail*		
1	☐ 3M N95 1860									☐ Pass ☐ Fail		
	☐ 3M N95 1860	☐ Regular ☐ Small								☐ Pass		
2		Regular								☐ Fail		
3	☐ Halyard N95	☐ Small 46827 ☐ Regular 46727								☐ Pass ☐ Fail		
4	☐ Halyard N95	☐ Small 46827 ☐ Regular 46727								☐ Pass ☐ Fail		
5	☐ Moldex N95	☐ 1510XS☐ 2211Small☐ 1512Medium☐ 2212GM/L☐ 1517Low Profile☐ 1513Large								Pass Fail		
	omments:			·								
• At • If	this time, the enpatients or enter failed due to factorized current employers.	to employees who apployee is not permit respiratory isolation all hair, the employees, please submit the	itted to per rooms. e may retunis form to	rform patien urn to clinic your mans	of the form of the	suspected	or confir	med respir	atory isola	tion		
 □ For new employees, please submit this form to Human Resources. □ For those who failed all N95 mask testing, a Quantitative Fit Test is recommended. Please call OHS @ (628) 206-6581 to schedule an appointment for a quantitative fit test. 												
Fit Tester: Printed Name/Title Signature Date												