

**Appendix D of 29CFR 1910.134 - Information for Employees Using Respirators Voluntarily:**

Respirators are an effective method of protection against designated hazards when properly selected and worn. Respirator use is encouraged, even when exposures are below the exposure limit, to provide an additional feel of comfort and protection for workers. However, if a respirator is used improperly or not kept clean, the respirator itself can become a hazard to the worker. Sometimes, workers may wear respirators to avoid exposures to hazards, even if the amount of hazardous substance does not exceed the limits set by OSHA standards. If your employer provides respirators for your voluntary use, or if you provide your own respirator, you must take certain precautions to be sure that the respirator itself does not present a hazard.

Individuals using respiratory protection on a voluntary basis shall do the following:

1. Read and acknowledge all instructions provided by the manufacturer and your employer's respiratory protection plan on use, maintenance, cleaning and care, and warnings regarding the respirators limitations.
2. Choose respirators certified for use to protect against the contaminant of concern. NIOSH, the National Institute for Occupational Safety and Health of the U.S. Department of Health and Human Services, certifies respirators. A label or statement of certification should appear on the respirator or respirator packaging. It will tell you what the respirator is designed for and how much it will protect you.
3. Do not wear your respirator into atmospheres containing contaminants for which your respirator is not designed to protect against. For example, a respirator designed to filter dust particles will not protect you against gases, vapors or very small solid particles of fumes or smoke.
4. Keep track of your respirator so that you do not mistakenly use someone else's respirator

**Employee Acknowledgment:**

I have been given a copy of 29 CFR 1910.134 Appendix D regarding the proper respirator use and I have read and understand it. Contact your supervisor or the program administrator with any related questions.

Job / Task:

Respirator Make / Model:

Name (print):

Sign:

Date:

*This document (or a copy) must be kept on site for record keeping at all times.*