# Respirator Program Template

# for COVID-19 Prevention in K-12 Schools

# Instructions and Limitations (for users of this template)

Respirator use and a written Respiratory Protection Program are required if employees perform tasks considered as high- or extremely-high risk for transmission during the COVID-19 pandemic, including those identified in the [*Employer Health & Safety Requirements for School Scenarios*](https://www.k12.wa.us/sites/default/files/public/communications/Employer-Health-and-Safety-Requirements-for-School-Scenarios.pdf) publication from OSPI, DOH, and LNI.

If you use this template, be sure to tailor it (e.g., delete, edit, or add content) to accurately reflect your school’s current practices.

This template only addresses the use of filtering facepiece respirators (e.g. N95s, P100s) used for protection from the coronavirus (also called SARS CoV-2).For any other type of respirator (e.g., half- or full-facepiece elastomeric respirators equipped with air-purifying cartridges) or airborne hazard (e.g. exposure to chemicals in the air), please use the standard template, [*Written Respiratory Protection Program Template & Guide*](https://lni.wa.gov/safety-health/_docs/RespProtectguide2.doc).

There are 5 basic categories of workplace transmission risk recognized by L&I for SARS COV-2; Negligible, Low, Medium, High, and Extremely-High. Use of NIOSH-approved (or equivalent foreign approved) particulate respirators (e.g., N95s, P100s) are generally required for High and Extremely-High risk scenarios; but, in non-aerosol generating high-risk scenarios, schools are permitted (when respirators cannot be reasonably obtained) to use a face shield with a, FDA-approved surgical mask or a fit-tested foreign-approved mask included on the [FDA’s Appendix A list](https://www.fda.gov/medical-devices/coronavirus-disease-2019-covid-19-emergency-use-authorizations-medical-devices/personal-protective-equipment-euas#appendixa) (e.g, some KN95s).

This template does not address use of cloth face coverings for low-risk scenarios or non-approved masks such as dust masks, procedure masks, and KN95s used for medium risk scenarios.

In addition to becoming familiar with the requirements of the [Respirators Rule, Chapter 296-842 WAC](https://lni.wa.gov/safety-health/safety-rules/rules-by-chapter/?chapter=842), first-time respirator program administrators should review the Respirator Basics and Resources sections found at the end of this template. More information can be found at [Lni.wa.gov/COVIDsafety](https://www.lni.wa.gov/safety-health/safety-topics/topics/coronavirus).

*Please remove this page when you are done since it’s not part of your program and edit out any italicized instructional content found throughout this template.*

# Respiratory Protection Program for COVID-19 Prevention at (*add school name)*

Our school recognizes that respirators, in addition to social distancing and other prevention measures, can help prevent the spread of the coronavirus (also called SARS-CoV-2) at work. This written program is necessary to guide our school’s respirator selection, medical evaluation, fit testing, and use processes so that respirators provide reliable protection for our staff.

Our school’s respirator program administrator is: *(add name of person or job position)*

Their duties include:

* overseeing the development and implementation of this respiratory protection program
* ensuring respirator use is monitored
* evaluating the program regularly to make sure procedures are appropriate and continue to provide adequate protection when job conditions change
* *(add other duties as needed)*

# Types of Respirators Used in Our School

We have evaluated our school’s scenarios that could present “high” or “extremely-high” risk for coronavirus transmission based on OSPI,LNI, and [OSPI/DOH/LNI guidance](https://www.k12.wa.us/sites/default/files/public/communications/Employer-Health-and-Safety-Requirements-for-School-Scenarios.pdf). This table shows the types of respirators we provide and require (at no cost to employees).

|  |  |
| --- | --- |
| **Scenario with High or Extremely-High Risk for Transmission** | Make and Model of NIOSH-approved filtering facepiece respirators (or foreign-approved equivalent) for COVID-19 Protection |
| *(These “generic” examples are provided for instructional purposes only. Delete or modify them to include details specific to your school’s scenarios)*  *Providing instructional support to individuals or small groups when staff could have sustained, close contact (within 3 feet) for more than 10 minutes an hour multiple times per day* | *(Fill out these blank spaces based on what your school uses for each scenario. You aren’t limited to one make/model for each scenario.)* |
| *Providing direct medical or behavioral support to students in a health or isolation room* |  |
| *Driving or occupying a school bus or other vehicle while in sustained, close contact with others* |  |
| *(These spaces are left blank in case you have additional scenarios)* |  |
|  |  |
|  |  |

# Medical Evaluations

Staff (employees) who must wear a NIOSH-approved filtering facepiece respirator (or foreign-approved equivalent such as FDA-cleared KN95s used with face shields) are provided with a medical evaluation, at no cost to them, before they are fit tested. Here is our process:

*(Customize the content below to reflect your school’s actual practices)*

**Step 1:** We provide a free copy of L&I’s medical questionnaire (found in Table 10 of the Respirators rule; [WAC 296-842-22005](https://lni.wa.gov/safety-health/safety-rules/chapter-pdfs/WAC296-842.pdf)) to staff and have them fill out Parts 1 and 2 in private during paid work time.

**Step 2:** Staff will directly send or deliver their completed questionnaire, free of charge, to the licensed health care professional (LHCP) conducting medical evaluations. Completed questionnaires contain confidential medical information and will NOT be reviewed by school administrators or other non-LHCP personnel at our school or district. Here is contact information for the LHCP:

* *(Provide the contact information needed such as an appropriate email address and/or postal address. If the employee isn’t going to hand-deliver the questionnaire be sure to provide them an envelope, pre-paid postage, and the address for the LHCP.)*

**Step 3:** The LHCP reviews the questionnaire and determines whether further evaluation is necessary. If an in-person exam or virtual consultation is needed, arrangements will be made to provide either to the employee at no cost to them during paid work time.

If no further evaluation is necessary, the LHCP will simply notify the employee and school (at the same time) of their written recommendation as to whether or not the employee is able to wear a respirator with or without limitations. **No details about the employee’s medical status will be revealed in the written recommendation due to confidentiality laws**.

Copies of written recommendations (but not completed questionnaires) are kept at the following location for recordkeeping and access purposes:

* *(describe the location)*

Additional medical evaluations will be done if any of the following occur:

* The medical provider recommends it
* The respirator program administrator decides it is needed
* The employee shows signs of breathing difficulty
* Changes in work conditions occur that could increase the employee’s physical stress (such as high temperatures or greater physical exertion).

#### Fit-testing

All staff (employees) required to wear NIOSH-approved filtering facepiece respirators (or foreign-approved equivalent such as FDA-cleared KN95s used with face shields) for high- and extremely-high risk tasks must pass an **initial** fit-test before using their respirator; an employee’s initial fit-test must be repeated when a different make or model of respirator is used.

No fit testing is required for non-approved masks such as dust masks, surgical-style masks, and KN95s used for medium risk activities.

During the pandemic, **annual** fit-testing (i.e., routine fit testing repeated each year) is temporarily suspended by L&I; however, additional fit-testing will be conducted anytime there is a significant physical change in an employee’s face that would affect fit or when an employee or medical provider notifies us that the fit is unacceptable.

No beard, stubble, or other facial hair in the mask-to-face seal area is allowed during fit testing (or during work use).

Fit testing is conducted by *(add name of person, job title, or vendor)* using the *(add the name/s of the fit testing protocol/s the school uses*) as detailed in [WAC 296-842-22010](https://lni.wa.gov/safety-health/safety-rules/chapter-pdfs/WAC296-842.pdf#WAC_296_842_22010) of the Respirators rule.

We use the Filtering Facepiece Respirator Fit Test Record form found at the end of this written program to document fit-testing results. The most current fit test record for each employee is kept at the following location for documentation and access purposes:

* *(describe the location and how to access the records)*

After passing a fit-test, each employee will be trained on proper use and issued a respirator.

Use of Respirators

**Donning, Seal Checks, & Doffing**: We require all staff (employees) who use filtering facepiece respirators to use the following procedure to properly put on, seal check, and safely remove their respirator.

*(describe what employees need to do; for example, if employees must follow the respirator manufacturer procedure be sure to mention the specific procedure here and include a reference copy as part of your written program).*

**Facial Hair:** No beard, stubble, or other facial hair in the mask-to-face seal area is allowed.

**Glasses:** If employees must wear corrective glasses or other personal protective equipment, it must be **put on after the respirator is situated** on the face. This is important to preserve an effective mask-to-face seal.

**Inspections:** Staff will alwayscheck their respirator before putting it on to make sure the straps and other parts are intact.

**Reuse:** Filtering facepiece respirators are disposable and will not be reused beyond the period of time the respirator manufacturer recommends or beyond the work shift, whichever ends first.

Storage and Replacement

**Temporary Storage:** Filtering facepiece respirators may be removed and stored for short times only (e.g., when the employee goes on break) as long as the respirator is removed correctly and stored in a way that doesn’t contaminate work surfaces or the inside of the facepiece.

Here is specifically what our school requires for proper temporary storage:

*(describe where and how to do this without contaminating the inside of the mask or work surfaces. For example, “the respirator is placed in a clean paper bag labeled with the employee’s name, date, and “front” or “back” to consistently situate the mask inside the bag”)*

**Replacement:** Users must discard and replace their respirator when it’s damaged, visibly soiled, deformed, and according to the manufacturer’s recommendations.

**Cleaning or disinfecting an N95 or other disposable respirator is NOT permitted.**

# Training

Staff (employees) are trained by *(add name of person, job title, or training vendor)* before they wear a respirator and annually after that. Training must include those who supervise respirator users since we rely on them to help monitor use.

Training covers each of these areas:

* How the respirator protects wearers from the coronavirus
* When to use a respirator
* It’s capabilities and limitations
* Why medical evaluations are necessary
* How poor fit and improper use and storage can make respirators ineffective
* How to properly inspect, put on, seal check, use, remove, and store the respirator
* What users should do if their respirator is defective, gets damaged, or somehow doesn’t perform as it should
* Our schools obligations under the Respirators Rule

Training is done as follows:

*(describe how training is done; e.g., by videos and online course, virtual methods, etc. Include the title of any courses or videos. Include how employees will be able to ask, and get answers to, questions they may have during training)*

We use the Filtering Facepiece Respirator Training Record found at the end of this written program to document training and keep track of who has been trained.

# Respirator Program Evaluation and Updates

We evaluate our respirator program for effectiveness by doing the following steps:

1. Talk with employees who wear respirators to get their feedback about their respirators – how they fit, do they feel they are adequately protecting them, do they notice any difficulties in breathing while wearing them, etc.
2. Periodically check employee job duties for changes that may require respirators other than a disposable filtering facepiece respirator.
3. Have staff who supervise respirator users do daily checks to ensure proper use, storage, and replacement.
4. *(add any other measures you use)*

Should Washington State experience a severe shortage in the availability of filtering facepiece respirators and cause our school to take measures to conserve our supply, the respirator program administrator will update our program to address any changes in use or other practices (and make sure we follow the current DOH and L&I specifications).

We keep this written program updated and make it available for review when requested by an employee or their representative.

This program was last updated on: *(add most recent date)*

*(End of Respirator Program)*

Filtering Facepiece Respirator Fit Test Record

Attention: A medical evaluation must be completed before fit-testing.

Date:

Name of employee:

Has this employee been medically cleared for filtering facepiece respirator use? If not, then do not proceed with the fit test.

Yes \_\_\_ No\_\_\_

Is this employee clean shaven (i.e., no facial hair or stubble) in the mask-to-face seal area? If not then do not proceed with the fit test.

Yes \_\_\_ No \_\_\_

The employee was shown how to properly put on, seal check, and remove the respirator and was able to demonstrate this correctly. If not, provide additional instruction until the employee succeeds.

Yes \_\_\_ No \_\_\_

Fit-testing procedure/protocol used: Bitrex™ \_\_\_ Saccharin \_\_\_ Other:

|  |  |  |
| --- | --- | --- |
| Filtering Facepiece Make, Model, & Approval # | Size | Result: Pass or Fail? (circle one) |
| *(complete this row of information based on each fit test for this employee)* |  | P F |
|  |  | P F |
|  |  | P F |

Name of person conducting this fit test:

**NOTES**:

# Filtering Facepiece Respirator Training Record

Employee Name (printed)

I certify that I have been trained in the use of filtering facepiece respirators, including:

* How the respirator protects me from the coronavirus and when I need to wear it.
* The respirator’s capabilities and limitations
* Why I needed to get medical clearance for respirator use
* How improper fit, use, or storage can make my respirator ineffective
* How to properly inspect, put on, seal check, use, and remove it
* When and how to temporarily store it so it doesn’t get damaged, contaminated inside, or spread contamination at work
* What to do if my respirator is defective, gets damaged, or somehow doesn’t perform as it should
* The school’s obligations under the Respirators Rule, Chapter 296-842 WAC and where to review a copy of our school’s written respirator program.

I now feel confident to use my respirator. If I have a problem with comfort or other use issue or if I could benefit from additional respirator user training I can contact my supervisor or the Respirator Program Administrator for assistance.

Employee Signature

Instructor Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date

**Respirator Basics**

An Overview for New Respirator Program Administrators at K-12 Schools During the COVID-19 Pandemic

**Overview Purpose & Limitations**

Due to the current COVID-19 pandemic, some schools who have never had to consider mandatory respirator use, and the requirement for a written respirator program, must now do so. This overview can help schools get started right away on their written respirator program.

Users of this overview will still need read, become familiar with, and follow requirements in the [Respirators rule, Chapter 296-842 WAC](https://lni.wa.gov/safety-health/safety-rules/rules-by-chapter/?chapter=842#296842$!item.section).

During the COVID-19 pandemic, respirators are required in high- or extremely-high risk scenarios, including those identified in the [*Employer Health & Safety Requirements for School Scenarios*](https://www.k12.wa.us/sites/default/files/public/communications/Employer-Health-and-Safety-Requirements-for-School-Scenarios.pdf) publication from OSPI, DOH, and LNI.

Each section in this overview explains a required respirator program element and provides useful information and resources for further learning. Schools (or districts) should first decide on who will be the Respirator Program Administrator. This person is usually the one to develop the written program and ensure it’s tailored to accurately reflect current practices.

This overview covers only the use of disposable filtering-facepiece respirators approved by NIOSH (or by a foreign system equivalent to NIOSH and included on [FDA’s Appendix A list](https://www.fda.gov/medical-devices/coronavirus-disease-2019-covid-19-emergency-use-authorizations-medical-devices/personal-protective-equipment-euas#appendixa)).

**Respirator Program Administrator**

This is a person selected and designated by the school (or district) to have overall responsibility for the development, implementation, and ongoing evaluation of the written respirator program.

**Respirator Selection**

The Respirator Program Administrator, or their designee, must ensure appropriate respirators are selected for and provided to staff. Learning about the different types of respirators, their capabilities and limitations are key to fulfilling those responsibilities.

Respirators come in a variety of models and sizes. Any approved model designed to filter out harmful particles from the air is considered appropriate for high-risk or extremely high-risk tasks.

NIOSH approval (or equivalent) is important. Without it, you have no way of knowing whether a mask can provide adequate protection. To learn more about NIOSH-approval and how to spot counterfeit or altered respirators visit [NIOSH’s Trusted-Source Information page](https://www.cdc.gov/niosh/npptl/topics/respirators/disp_part/RespSource.html) and watch this OSHA [OSHA video: Counterfeit and Altered Respirators: The Importance of NIOSH Certification](https://www.osha.gov/video/respiratory_protection/niosh.html)

Below are photos of several types of NIOSH-approved respirators schools can use for COVID-19 prevention. *The models shown below are examples.* All types, except for the loose-fitting PAPR shown on the far right, rely on a tight mask-to-face seal to work effectively. The models shown belong to one of two categories of respirators: the air-purifying category. The other category is atmosphere-supplying respirators (not shown) and includes SCBAs and airline models that aren’t typically used for COVID-19 prevention due to expense and complexity of use. *If you use air-purifying respirators equipped with filter cartridges or atmosphere-supplying respirators, you’ll need more information than this overview and template provides (*[*contact your local L&I consultant*](https://lni.wa.gov/safety-health/preventing-injuries-illnesses/request-consultation/consultant-near-you) *for assistance, if needed).*

    

Photos (left to right): a cup-shaped filtering facepiece respirator (N95), a surgical N95, an elastomeric half-facepiece respirator with HEPA (High Efficiency Particulate Air) cartridge filters, an elastomeric full-facepiece respirator with HEPA cartridge filters, and a loose-fitting PAPR (Powered-Air-Purifying Respirator) with a fabric chin bib and HEPA cartridge filters.

Any filtering respirator used for COVID-19 protection must have a filter efficiency rating of at least 95 (e.g., N95). Filtering respirators with higher efficiencies (e.g, N99, P100 or HEPA) are also acceptable.

**Medical Evaluations**

The Respirator Program Administrator, or designee, needs to ensure each staff person who will use a filtering facepiece respirator, is cleared by a medical evaluation before fit-testing or actual use.

Medical evaluations are necessary to determine whether respirator use could pose a negative health risk to the wearer.

Only licensed health care professionals (LHCPs) are allowed to perform these evaluations. You can use LHCPs from outside services or, if available, LHCPs you may have on staff at your school.

Some outside services that offer medical evaluations also offer fit-testing and basic user training as part of their service.

You will need to decide how you want to conduct medical evaluations. You can either have staff fill out the questionnaire found in WAC 296-842-22005 (see Table 10, Parts 1, 2, plus any additional questions the LHCP might want to add from Part 4) or default to a medical exam that obtains at least the same information as in the questionnaire. Regardless of which you choose follow the steps outlined in WAC 296-842-14005.

If you use the questionnaire, make arrangements ahead of time to ensure staff will feel comfortable providing complete and correct health information for the LHCP. Here are some ideas to consider when planning how to administer the questionnaire:

* Have the LHCP administer the questionnaire at the workplace or at their health care facility.
* Allow the employee to self-administer and mail a paper questionnaire (postage paid) to the LHCP.
* Use an on-line questionnaire. Preview that questionnaire before the employee uses it to make sure it includes the mandatory questions listed in Table 10 Parts 1 and 2. It’s acceptable for online questionnaires to have additional questions like the ones in Part 4 of Table 10, as long as the mandatory questions are included.

Employees must have opportunity to get questions about medical issues answered while filling out the questionnaire. If an LHCP isn’t administering the questionnaire, take steps to arrange for the LHCP to be readily available (e.g., by text or phone).

If you decide to have a staff person who isn’t the LHCP administer the questionnaire, take steps to ensure privacy and confidentiality for the employee, for example:

* Instruct the individual administering the questionnaire to not look at the employee’s questionnaire at any time.
* Provide a pre-addressed, stamped envelope for the completed questionnaire. Instruct the employee to place their completed questionnaire in the envelope, seal it, and mail or forward it to the LHCP.

If an employee could need reading or language translation help when using the questionnaire, make arrangements ahead of time for an individual trusted by the employee to assist (e.g., a co-worker, friend, or family member); and instruct that individual to maintain confidentiality and privacy.

**Fit-Testing**

Fit testing is required to ensure filtering facepiece respirators can maintain an adequate seal to the wearer’s face during use.

The Respirator Program Administrator, or designee, will need to choose the fit testing protocol/s that will be used and, if fit-testing is done “in house”, secure the necessary supplies. They will also need to ensure “initial” fit testing is set up, conducted, and documented per requirements in the Respirators rule.

No specific training or certification is required for those who conduct fit tests, but the Respirators rule outlines some basic capabilities and provides step-by-step instructions in the protocols.

If the school hires a mobile fit-testing service or some other off-site party conduct fit testing; check first to make sure they will follow required protocols, have appropriate supplies, know to prohibit facial hair that can interfere with mask to face seal during the test, and provide appropriate documentation for each employee.

Certain **qual**itative fit-testing methods (i.e., those that provide pass or fail results) are appropriate for N95s and other disposable filtering facepeice respirators. These include the Bitrex™ aerosol protocol and Saccharine aerosol protocol outlined the Respirators rule. The Banana oil protocol (also called Isoamyl acetate or IAA) uses a vapor so it isn’t an appropriate protocol for fit testing N95s or other filtering facepiece respirators. The Irritant Smoke protocol is also a possibility for some filtering facepiece respirators (e.g., P100s).

While **quant**itative fit testing methods are also acceptable (e.g. using ambient aerosol counters or controlled negative pressure devices), they aren’t recommended due to N95 shortages.

The person conducting fit tests will need to follow step-by-step preparation and other instructions in WAC 296-842-22010. For filtering facepiece respirators, this includes:

* Table 11 to get the employee ready for their fit test
* Table 13 if the Saccharin Aerosol protocol will be used; **or** Table 14 if the Bitrex™ Aerosol protocol will be used; **or** Table 15 if the Irritant Smoke protocol will be used for P100 filtering facepiece respirators.
* Table 19 fit test exercises for all protocols

An “initial” fit test is required each time an employee switches to a different make, model, or size of respirator.

During the pandemic, “annual” fit-testing (i.e., routine fit testing repeated every year) is suspended (i.e., for employees who don’t switch). However, any employee who passes an initial fit test will need an “additional” fit test if they later report the fit has become unacceptable or when someone notices a significant physical change in their face that could affect fit.

**User Education & Training**

Informed staff are essential to an effective respirator program. Along with a general understanding of what their respirator can and can’t do, staff need practical instruction on how to properly put on, use (i.e., how to prevent mask-to-face seal problems), safely take off, temporarily store, and dispose of their N95s.

When planning for employee education and training, remember to include anyone who supervises respirator users since they will need to readily recognize and resolve improper use situations and other issues that can reduce respirator effectiveness.

Plan for how you will accomplish education and training. Schools may use a combination of methods to educate staff. For example, short videos or online training may work well for addressing basic concepts (e.g., why respirators are necessary and what they can/can’t do) while in-person instruction is better for ensuring staff can demonstrate correct technique for putting on, seal checking, and removing their respirator. Other planning considerations include addressing any language limitations (for example, provide training in the language staff understand best).

Outside services used for fit-testing can often provide training on respirator user basics, but the school will still need to provide its own on-the-job instruction to ensure staff know how the school will issue respirators, when use is required, how and where to temporarily store respirators (e.g., when going on break), etc.

Include a review of any written procedures or policies the school has on use (e.g., such as facial hair prohibitions) when educating staff. Also, make sure they know what to expect based on the school’s written respirator program.

Posters and even occasional safety talks or texts can help reinforce consistency for certain use practices.

Document your school’s education & training methods in your respirator program and keep records of each employee’s training for documentation and access purposes.

**Proper Use**

Supervisors are required to periodically evaluate staff use of respirators to identify and resolve any use issues that compromise effectiveness of respirators.

Set up a plan to accomplish this task; you may want to create your own checklist for supervisors to use to ensure respirator effectiveness isn’t compromised.

If use issues are found, ensure corrective follow up, such as additional training for employees who don’t consistently, correctly, and safely use their respirator.

**Program Evaluation**

Job tasks and conditions may change and the school’s respirator program will need to get updated when such changes could impact respirator selection and other aspects of the respirator program.

Set up a way to get employee feedback on respirator use to identify any individual or staff-wide problems with use and any ideas to improve effectiveness.

**Resources**

for New Respirator Program Administrators at K-12 Schools

See the [Respirators rule, Chapter 296-842 WAC](https://lni.wa.gov/safety-health/safety-rules/chapter-pdfs/WAC296-842.pdf) to learn requirements and find a copy of the medical questionnaire and fit testing procedures.

Compliance guidance specific to COVID-19 prevention can be found in [DOSH Directive 11.80, Annual Fit-Testing, Respiratory Protection and Face Coverings during the COVID-19 Pandemic](https://www.lni.wa.gov/safety-health/safety-rules/enforcement-policies/DD1180.PDF).

[Respiratory Protection Program - Template and Guide](https://lni.wa.gov/safety-health/_docs/RespProtectguide2.doc) is an alternative template in case you want to use elastomeric respirators; it’s not specific to schools but it can be adapted.

OSHA’s video, [Respiratory Fit Testing in English (12 minutes) or Spanish (15 minutes)](https://www.osha.gov/video/respiratory_protection/fittesting.html) isn’t specific to schools, but gives good background on fit-test protocols and considerations during a fit test.

The Power Point, [Using face masks at work: Including dust masks, surgical masks and N-95 masks](http://wisha-training.lni.wa.gov/training/presentations/facemasks.ppsx) (26 slides), isn’t specific to schools, but it covers some general capabilities and limitations, some Dos and Don’ts, and why medical evaluation, fit testing, seal checks are important to ensure effectiveness. If you use it as part of your staff training, you’ll still need to provide school-specific training to meet the requirements in the Respirators rule.

**Ask an L&I Safety & Health Consultant**

Call [your local Industrial Hygienist consultant](https://lni.wa.gov/safety-health/preventing-injuries-illnesses/request-consultation/consultant-near-you)  if you need assistance when using the respirator program template.