Honeywell Safety Products

900 Douglas Pike, Smithfield, RI 02917 (800) 430-4110 - Fax (800) 572-6346

Honeywell

Respiratory Medical Evaluation Process

Registration Information

Company Name:							
Address:							
City:							
State:							
Zip:							
Distributor Name:							
Customer Approvals							
Thank you for selecting OSH This process provides a simp employee's ability to wear a	ole and effecti	•			•		
1. Please review the following This site was designed to sate Questionnaire. The certificate half mask air purifying or atmospherical certification. It is the to specific regulatory requirements.	tisfy OSHA rection provided mosphere sup Approved Sta e responsibilit	quirements for 19 by OSHA <i>med</i> Ce oplying respirators ate Plans and loca ty of the employe	110.134, Ap ert covers di s and full fa al jurisdiction er to detern	pendix C, OSH isposable respacepiece air puons may have anine applicabil	oirators with N, urifying or atmo additional requ	R, or P ratings, osphere iirements for	
2. If requested, I agree to p		ctronic copy of o		respiratory pr	otection progr	am.	
Agree	Yes:		No:				
3. Please review the followi	ng usage pro	files and indicate	your respo	onse.			

Dust Masks and Half Masks

Usage Profile:	Standard occupational applications - Air Purifying or atmosphere supplying respirators
Possible Exposures:	Dust, particulate, mist, vapors and fumes
Respirator Type:	Air purifying disposable mask or half masks and atmosphere supplying half mask respirators
Use:	Personal protective equipment
Conditions:	Temperature may be higher than 77 F or lower than 50F; humidity may be high; potential for confined space entry and activity; may be used at elevations up to 7,500 ft.
Exertion Level:	Light to medium with periods of heavy physical exertion (lifting and carrying up to 50 lbs)
Additional PPE:	May include hard hats, safety glasses, steel toed footwear, hearing protectors, welding leathers and gloves
Work Performed:	Labor, grinding, welding, assembling, machining, painting, and other industrial tasks and equipment operation
Other Conditions:	Potential periods of low level lighting and poor visibility

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Agree Yes:		No:	
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Full Face Respirators

Usage Profile:	Standard general industry, construction and law enforcement occupational applications for air purifying or atmosphere supplying respirators				
Possible Exposures:	Dust, particulate, mist, vapors and fumes				
Respirator Type:	Full face piece air purifying or atmosphere supplying respirators				
Use:	Personal protective equipment				
Conditions:	Temperature may be higher than 77 F or lower than 50F; humidity may be high; potential for confined space entry and activity; may be used at elevations up to 7,500 ft.				
Exertion Level:	Primarily light to medium with periods of heavy physical exertion - May include short periods of running (law enforcement) as well as lifting and carrying up to 50 lbs.				
Additional PPE:	May include hard hats, safety glasses, steel toed footwear, hearing protectors, welding leathers, gloves, for general industry and construction. Law enforcement may include helmet, gloves, body armor, Level C personal protection suit, and boots or other specialized personal protective equipment				
Work Performed:	Labor, grinding, welding, assembling, machining, painting, and other industrial tasks and equipment operation. Law enforcement may include emergency response, search/rescue, crowd control, incident site security, terrorist attack response				
Other Conditions:	Potential periods of low level lighting and poor visibility				
Aį	gree Yes: No:				

Definitions:

Air Purifying Respirator: a respirator with an air-purifying filter, cartridge, or canister that removes specific air contaminants by passing ambient air through the air-purifying element. By definition this includes powered air purifying respirators (PAPRs).

Atmosphere Supplying Respirator: a respirator that supplies the respirator user with breathing air from a source independent of the ambient atmosphere, and includes supplied-air respirators (SARs) and self-contained breathing apparatus (SCBA) units.

Customer Approval:

Name:	
Title:	
Phone #:	
Email:	
Date:	