



Employee Fit Test/Personal Protective Equipment (PPE)

Employee Name: _____ Job Title: _____ Date: _____

Medical questionnaire reviewed by: RN Signature: _____ RN Date: _____

I have received and understood training on each of the following:

Attestation	Initials
Review of written Respiratory Protection Program	
Description of the activities and circumstances for which respirator use is required	
Importance of proper fit and the consequences of improper fit	
Importance of proper use, storage, or inspection and when to discard or reuse	
Limitations of this type of respirator	
Appropriate action if respirator becomes damaged, a leak is detected or breathing becomes difficult	
Review of manufacturer instruction sheet: proper donning, performing user seal check, and removing respirator	
Appropriate use of a respirator when necessary to protect against infectious disease when providing patient care	

Initial fit test Annual fit test Re-test fit test

Sensitivity Test		
<input type="checkbox"/> Bitrix <input type="checkbox"/> Saccharin	<input type="checkbox"/> Bitrix <input type="checkbox"/> Saccharin	<input type="checkbox"/> Bitrix <input type="checkbox"/> Saccharin
# of squeezes _____ *if not detected after 30 squeezes, repeat with another solution	# of squeezes _____ *	# of squeezes _____

Seal check/proper fit assessed by participant Respirator worn for 5 minutes prior to fit test

Qualitative Fit Test		
Test Solution	<input type="checkbox"/> Bitrix <input type="checkbox"/> Saccharin	<input type="checkbox"/> Bitrix <input type="checkbox"/> Saccharin
Breathe normally (60 seconds)	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail
Breathe deeply (60 seconds)	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail
Turn head side to side (60 seconds)	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail
Talking (60 seconds)	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail
Move head up and down (60 seconds)	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail
Bend over at waist (60 seconds)	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail
Breathe normally (60 seconds)	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail

Unable to complete test: Reason _____

Failed Fit test: Manufacturer _____ Model Type _____ Size _____

Successfully completed fit test: Manufacturer _____ Model Type _____ Size _____

N95 Fit Test - Each Employee MUST Be Fit Tested			
1. Breathe normally	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	3. Turn head side to side	<input type="checkbox"/> Pass <input type="checkbox"/> Fail
2. Breathe deeply	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	4. Nod head	<input type="checkbox"/> Pass <input type="checkbox"/> Fail

Back Brace - The use of back braces is optional. If you choose to wear one Aveanna will provide one for your use.

Yes, I want a back brace No, I do not want a back brace. I understand I can change my mind in the future.

Back Brace Size: _____ Available in Patient Care Area Distributed to employee

PPE: Available in Patient Care Area (PCA) Distributed to employee (E) (Check appropriate box and circle location)

<input type="checkbox"/> N95 Respirator	PCA	E	N/A	<input type="checkbox"/> Apron	PCA	E	N/A	<input type="checkbox"/> Hair Covering	PCA	E	N/A
<input type="checkbox"/> KN95	PCA	E	N/A	<input type="checkbox"/> Gown	PCA	E	N/A	<input type="checkbox"/> Biohazard Bag	PCA	E	N/A
<input type="checkbox"/> Surgical Mask	PCA	E	N/A	<input type="checkbox"/> Sterile Gloves	PCA	E	N/A	<input type="checkbox"/> Sharps Container	PCA	E	N/A
<input type="checkbox"/> Eye Protection	PCA	E	N/A	<input type="checkbox"/> Non-Sterile Gloves	PCA	E	N/A	<input type="checkbox"/> Shoe Covers	PCA	E	N/A
<input type="checkbox"/> Face Protection	PCA	E	N/A	<input type="checkbox"/> Utility Gloves	PCA	E	N/A	<input type="checkbox"/> Other _____	PCA	E	N/A

Employee Signature

Date

Company Representative Signature

Date

Rainbow Passage

When the sunlight strikes raindrops in the air, they act like a prism and form a rainbow. The rainbow is a division of white light into many beautiful colors. These take the shape of a long round arch, with its path high above, and its two ends apparently beyond the horizon. There is, according to legend, a boiling pot of gold at one end. People look, but no one ever finds it. When a man looks for something beyond reach, his friends say he is looking for the pot of gold at the end of the rainbow.

3M™ FT-10 (sweet) and 3M™ FT-30 (bitter) fit test kits are suitable for disposable respirators, half facepiece fitted with particulate filters, and full facepieces fitted with particulate filters.¹



! Wearers must be clean-shaven to get a proper fit with a respirator.

! Please note, in order to carry out a full fit test, all the steps detailed below must be followed (Parts 1 & 2).

Part 1 - Sensitivity Testing (The “Taste Test”)

1. Add 1/2 teaspoon of sensitivity solution (in red labeled bottle) into the sensitivity nebulizer (marked in red). Visually confirm that the nebulizer produces a cloud of aerosol when the bulb is squeezed.
2. Place test hood on participant. A respirator should not be worn during the sensitivity test.
3. Ask the participant to breathe through their mouth with their tongue slightly extended and ask them to indicate immediately when they taste the solution.
4. Squeezing the bulb completely and aiming the nebulizer to the side rather than directly at the subject, squeeze solution into the hood and count the number of squeezes it takes for the solution to be tasted.
5. If desired, participant may drink some water.



Part 2 - Fit Testing

1. Add 1/2 teaspoon of test solution (in black labeled bottle) into the test nebulizer (marked in black). Visually confirm that the nebulizer produces a cloud of aerosol when the bulb is squeezed.
2. Don the respirator and make sure respirator is fitted correctly. Refer to the 3M fitting instructions or poster for correct procedure. After the respirator is correctly donned, wait five minutes before beginning the next step.
3. Place test hood on participant.

4. Introduce solution in an initial dose and start the exercises. Add a replenishing dose after every 30 second per the table below.
5. After the initial dose, ask the participant to carry out the 7 exercises shown in turn for 1 minute each and indicate immediately if solution is tasted. Remember to add a replenishing dose every 30 seconds. **Throughout the test, remind the participant to breathe through their mouth and visually confirm that the nebulizer is not clogged.**
6. Record all results. If solution is not tasted after all 7 exercises. they have passed the test with that specific respirator. **If solution is tasted, stop the test, rinse mouth, face, and hands, refit respirator and restart at Part 1 - Sensitivity Testing.** If solution is still tasted on the second attempt, stop the test, rinse hands, mouth, and face, and consider trying an alternative 3M respirator.
7. Discard all unused solution.

Number of Squeezes Needed in Part 1	Number of Squeezes for Initial Dose	Number of Squeezes for a Replenishing Dose Every 30 Seconds
1-10	10	5
11-20	20	10
21-30	30	15

! Stop the test if solution is not tasted after 30 squeezes. Try an alternative solution from below.

Sweet taste 3M-FT11 (sensitivity solution)
3M-FT12 (test solution)

Bitter taste 3M-FT31 (sensitivity solution)
3M-FT32 (test solution)

7 Exercises



This product is part of a system that helps reduce exposures to certain airborne contaminants. Before use, the wearer must read and understand these User Instructions. Follow all local regulations. In the U.S., a written respiratory protection program must be implemented meeting all the requirements of 29 CFR 1910.134, including training, fit testing and medical evaluation. In Canada, CSA standard Z94.4 requirements must be met and/or requirements of the applicable jurisdiction, as appropriate. Misuse may result in injury, sickness or death. For correct use, consult supervisor and User Instructions, or call 3M Technical Service in USA at 1-800-243-4630 and in Canada at 1-800-267-4414.

¹Quantitative fit testing must be used when an assigned protection factor higher than 10 is needed for a full facepiece used in negative pressure mode, per 29 CFR 1910.134



Helping You Wear it Right

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

Application



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



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.

PERFORM A USER SEAL CHECK



6 The respirator must be checked before each use. 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 nosepiece 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.

Infection Prevention Division
3M Health Care
2510 Conway Avenue
St. Paul, MN 55144-1000
U.S.A.
1-800-228-3957
www.3m.com/infectionprevention

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70-2009-0557-1



WARNING

This respirator helps protect against certain particulate contaminants, but does not eliminate exposure to or risk of contracting disease or infection. **Misuse may result in sickness or death.** For proper use, see your supervisor, or User Instructions, or call 3M Health Care Helpline at 1-800-228-3957. In Canada, call 3M Helpline at 1-800-563-2921.



Respiratory Protection Program Employee Education

Aveanna Healthcare's Respiratory Protection Program applies to all home health and Aveanna employees who may at times require respiratory protection for infection control purposes. This program is intended to provide each employee with a respirator where applicable to protect the health of such employee.

A respirator may be used to provide protection from infectious diseases such as measles, varicella, smallpox, tuberculosis, SARS, pandemic influenza or COVID. It is important to ensure a proper fit. An improper fit, improper use, failure to store properly or failure to inspect prior to each use can compromise protective equipment. For questions related to respirator use, contact your supervisor.

Limitations of a respirator:

- Respirators are intended for biologic agents.
- Respirators limit but do not provide a 100% guarantee to eliminate risk.
- Respirators do not protect against gasses, vapors, oil, aerosol, asbestos, arsenic, cadmium, lead or sandblasting.
- Respirators do not provide oxygen.
- Respirators should not be used with beards or facial hair that can obstruct a good seal.

Respirator malfunction:

- If the respirator becomes damaged or soiled, a leak is detected, or breathing becomes difficult, leave the contaminated area immediately and replace the respirator.

Donning and Removing the Respirator:

- Review the 'Helping You Wear It Right' manufacturer instruction sheet for proper donning, user seal check, and removal of the respirator.
- You must perform a user seal check to ensure that an adequate seal is achieved each time the respirator is put on using the respirator manufacturer's recommended user seal check method.

Storage, Cleaning and Reuse of the Respirator:

- Store in a clean, dry area with no exposure to direct sunlight or temperature extremes.
- The respirator can be stored in a paper bag.
- Do not crush the respirator.
- Respirators cannot be cleaned or disinfected.
- There are no manufacturer recommendations on time use limit.
- If the medical condition requires only airborne precautions (e.g., TB):
 - Discard the respirator if it is soiled, if breathing becomes labored, or if structural integrity is compromised.
- If the condition also requires contact and/or droplet precautions:
 - The respirator must be discarded after a single use. However, in times of shortage, users may be instructed to cover the respirator with a surgical mask and discard the mask after use but reuse the respirator. This decision will be made by the Respiratory Protection Program Administrator based on supply and available epidemiological data. Decisions will be clearly communicated to the staff.