# Employee Respirator Use Profile

**RHODE ISLAND DEPARTMENT OF ENVIRONMENTAL MANAGEMENT**

**Employee Respirator Use Profile**

Supplemental Information Issued to Physician or Health Care Professional

*(To be completed by the employee’s/applicant’s supervisor and then to be taken to the physician/health care professional by the applicant/employee.)*

| Employee/Applicant’s Name:  _____________________________________________ |
| Date:  _____________________    Site:  ____________________________________ |

### 1. Type of respirator to be worn
- [ ] ½-face air purifying
- [ ] full-face air purifying
- [ ] other (describe)  ______________________________________________

### 2. The subject will wear the respirator (maximum use per month)
- [ ] more than 15 times a month
- [ ] 5-15 times a month
- [ ] 1-4 times a month
- [ ] less than once per month

### 3. During those times, the respirator will be worn
- [ ] 8 hours/day
- [ ] 4-7 hours/day
- [ ] 1-3 hours
- [ ] less than one hour/day

### 4. The kind of work to be done while wearing the respirator includes:

____________________________________________________________________________

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____________________________________________________________________________

### 5. In addition to the respirator, the subject may also be wearing the following personal protective equipment:
- [ ] face shield
- [ ] apron
- [ ] safety glasses
- [ ] goggles
- [ ] rubber gloves
- [ ] coveralls (plastic)
- [ ] coveralls (cotton)
- [ ] rubber boots
- [ ] safety shoes
- [ ] other (specify):  _________________________

### 6. Temperature and humid conditions anticipated while wearing respirator:
- [ ] all types of inside and outside temperature and humid extremes
- [ ] hot, humid weather
- [ ] indoor conditioned air only
- [ ] indoor unconditioned air
- [ ] other (specify):  ______________________________________________

Other factors which may cause physical stress to the respirator user:

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Information provided by:  _________________________    Telephone Number:  ____________

(Print Name)