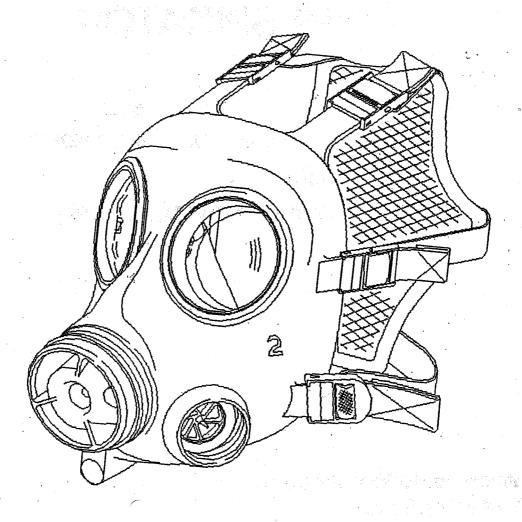
USER HANDBOOK CT12 & FM12

RESPIRATOR





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USER HANDBOOK AVON CT12 & FMI2 RESPIRATOR

Document No: NC/70508/39

Issue : 1

Date: NOVEMBER 1999

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Amendment Record

Amdt. No.	Amendment	Incorporated By (Signature)	Date
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WARNINGS - LIMITATIONS OF USE:

General

The respirator must be correctly sized and fitted to the individual in accordance with this user handbook.

The term respirator in this handbook refers to a full face mask fitted with a filter canister.

The respirator should only be used when fitted with a canister suitable for use in the environment for which it is intended. Failure to do so may mean that the respirator will not provide adequate protection.

The respirator must not be brought into contact with strong acids or alkalis. If this occurs then the respirator must be discarded and replaced.

It is vital that the valves, canister and secondary speech transmitter are properly and securely fitted to ensure that the respirator provides adequate protection.

The fabric harness must not be exposed to naked flames.

Limitations Of Respiratory Protection

The respirator is designed to filter air contaminated with specific agents used in riot control situations such as CN and CS Gas.

The respirator must not be used in an oxygen deficient atmosphere, unless used with suitable breathing apparatus, as it will not supply or replace oxygen, nor will it remove all poisonous fumes.

If the nature and concentration of fumes is unknown or an oxygen depleted or irrespirable atmosphere is present, use of full compressed air breathing apparatus is strongly recommended.

Impact Protection

The respirator is not specifically designed to protect against impact from objects. Should an impact occur the respirator should be inspected for signs of damage. If damage has occurred then the respirator must be discarded and replaced.

Filter Canister

If the canister becomes damaged or water logged it should be replaced immediately. The canister becomes ineffective if immersed in, or heavily soaked with water.

General Cleaning

Do not use abrasive or solvent based cleaners on the respirator or any of its components as they will impair the performance of the respirator as a whole and may result in loss of protection.

Beard Growth

For maximum protection the user should be clean shaven.

If the respirator is to be used for more than 24 hours, shaving is necessary to remove facial hair.

The respirator does not give protection when a full beard is worn.

Respirator Operation

The respirator will operate in climates ranging from hot dry to cold.

Sight Correction

When wearing the respirator the monocle assemblies recommended and supplied by the manufacturer must be the only form of sight correction used. No other methods of sight correction such as, but not limited to, side arm spectacles, are acceptable.

Storage

The respirator should always be stored in accordance with local guidelines which should conform as a minimum to the storage guidelines as set out in section 2.5.3 of this handbook.

Maintenance

The life and efficiency of your respirator will be prolonged if it is properly maintained. A dirty respirator is uncomfortable and may lead to loss of performance.

FAILURE TO ADHERE TO THE WARNINGS SET OUT IN THIS HANDBOOK WILL MEAN THAT THE RESPIRATOR MAY NOT PROVIDE ADEQUATE PROTECTION.

1 INTRODUCTION

1.1 General

The purpose of this handbook is to give the user fundamental knowledge of the correct handling and use of the CT12/FM12 respirator (see fig 1).

The handbook has been prepared to be used by personnel utilising the respirator and contains descriptions of the construction and functioning of the respirator.

1.2 Abbreviations

Primary Speech Module Assembly - PSM Secondary Speech Transmitter Assembly - SST

1.3 General Description

The CT12/FM12 respirator is designed to give a low breathing resistance whilst providing a very high level of protection for the user. It offers a high degree of systems compatibility and a high degree of visibility for the user.

The FM12 variant offers the ability to easily interface with canteen's providing physical relief during during extended periods of wear. The respirator is easily donned and removed.

During use the top four harness straps are fixed, whilst the bottom two harness straps are tightened or slackened as required.

An approved canister may be fitted into either canister mount, repositioning the SST into the opposite one. If sight correction is required, monocles are available for use with the CT12/FM12.

Note:

It must be understood that the CT12/FM12 respirator will only be effective when used with a suitable canister. The canister is an integrated part of the respirator's protective capabilities.

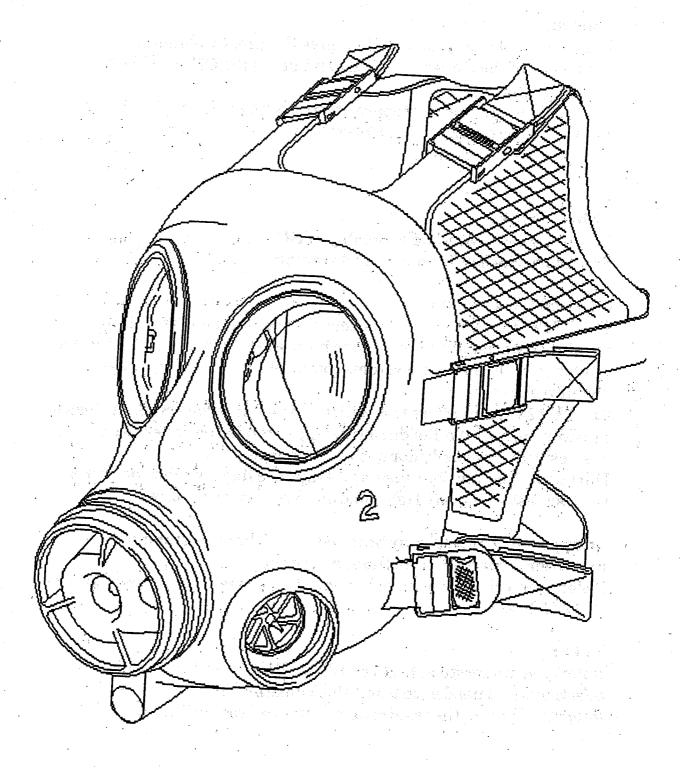


Fig 1 CT12 Respirator

2 OPERATION AND PERFORMANCE

2.1 General

For the user to achieve maximum protection and performance from the CT12/FM12 respirator the following procedures must be observed.

2.1.1 Sizing

The user must be sized correctly.

If the respirator is too small, the user will lose seal performance and protection. The respirator will be uncomfortable to wear. Also the user will lose some field of view.

If the respirator is too large the user will lose seal performance and protection. The user will also experience a very loose fit with subsequent respirator slippage.

2.1.2 Fitting

The user must know how to don and remove the respirator correctly. A badly fitted respirator will lose seal performance and protection. A loose harness will allow the respirator to slip down the face which might cause the user to lose maximum seal performance. Conversely, a harness that is too tight will bring discomfort and may actually reduce seal performance.

2.1.3 Removable Components

When using the respirator the following items (see fig 2) that can be removed by the user without specialist tools are still vital to the respirator's performance and must be in place for the respirator to perform effectively.

Any maintenance performed upon the respirator must be carried out by trained personnel only.

2.1.3.1 Canister

The canister is an integral part of the respirator's protective system. The canister must be securely fitted into one of the canister mounts. The other canister mount must be sealed with the SST. The canister must be approved for use with the respirator and must still be within its usable life-span.

2.1.3.2 SST

The SST (fig 2/1) also acts as a sealing plug and must be securely fitted into the second canister mount.

Failure to do so will result in a leak path and loss of protection.

2.1.3.3 Harness

The harness (fig 2/2) retains the respirator on the head. If it becomes damaged it may not hold the respirator on the head well enough to maintain a positive seal.

2.1.3.4 Valves

Valves (fig 2/3 and fig 2/5) must be fitted into both canister mounts and PSM correctly.

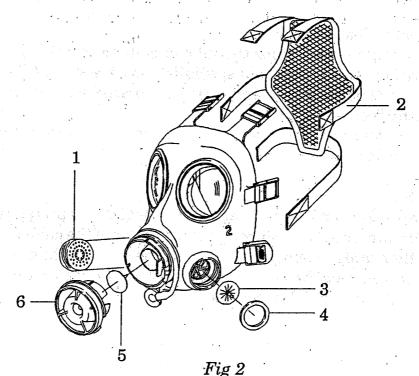
Failure to do so will result in total loss of protection.

2.1.3.5 Gaskets

Gaskets (fig 2/4) must be fitted into both canister mounts. The canister and SST both seal against the gaskets.
Without gaskets a seal will not be achieved.

2.1.3.6 PSM Front Cover

The PSM front cover (fig 15/5) must be securely fitted to the front of the PSM body to protect the outlet valve and aid speech.



FM12 Variant Option Shown With Removable Components

2.2 Safety Regulations

- Always follow the user instructions before using the respirator.
- Do not store any sharp or heavy objects in the haversack with the respirator.
- Do not insert any object through the holes in the SST.
- Do not dismantle the respirator without authority.
- Do not use SST's at the same time.
- Remove any covers or plugs from the canister before fitting to the respirator.
- Always inspect the respirator and canister for damage before use.
- Do not attempt to repair any damage to the rubber mask or any component.

2.3 Sizing

The CT12/FM12 respirator is available in three sizes (1 to 3). Size 1 is the largest and size 3 the smallest. The size number is on the side of the rubber mask.

It is likely that the majority of men will wear size 2, whilst the majority of women will wear size 3.

Initial sizing can be most easily accomplished using a respirator with the harness removed.

A trained fitter can then use the following method to size a subject:

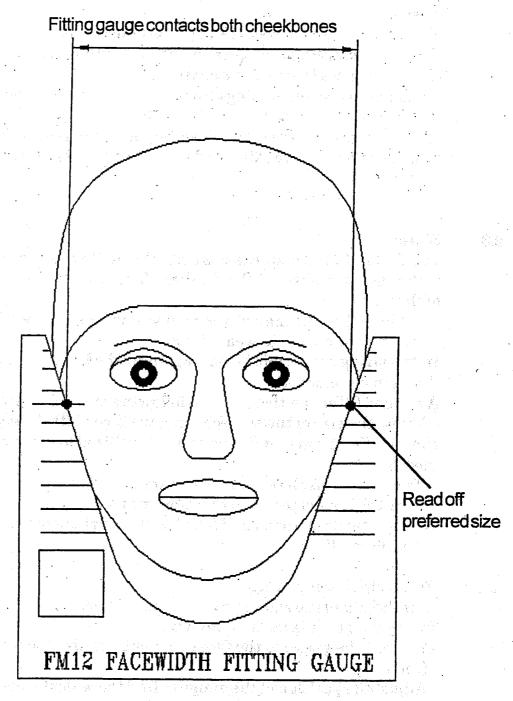
- Assess the size of the subject using the facewidth fitting gauge. (note that the FM12 variant fitting guage is utilized for both variant models.)
- Choose the most likely size of respirator
- Offer the respirator up to the subject's face
- Complete the eye level and facial contact sizing procedures
- Complete a fit test.

2.3.1 Facewidth Fitting Gauge

A useful aid to the sizing procedure is the facewidth fitting gauge. It is used as follows:

- Present the gauge to the face of the subject just above the ears (see fig 3)
- Adjust the position of the gauge to find the widest measurement across the subject's cheekbones
- Read off the dimension and the preferred size.

If on or near the boundary between two sizes, the smaller size should be selected, as this will give a better seal.



 $Fig\,3\\ Use of The FM 12 / CT 12 Facewidth \,Fitting \,Gauge$

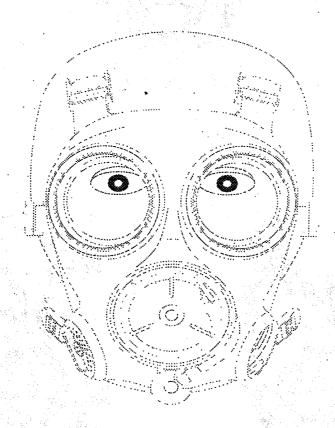
2.3.2 Eye level

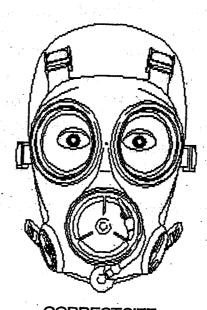
- The fitter selects the preferred size of respirator as indicated by the facewidth fitting gauge
- Offer the respirator up to the subject's face
- The subject holds the respirator in the most comfortable position
- The fitter now checks the eye level in the respirator.

The centre of the pupil of the eye should ideally be slightly above the horizontal centreline of the eyepiece (see fig 4).

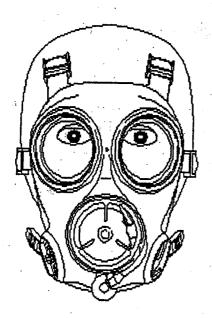
If the eyes appears far too high, then the respirator is probably too small.

If the eyes appear very low, then the respirator is probably too large.

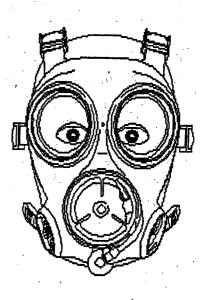








RESPIRATOR TOO SMALL



RESPIRATOR TOOLARGE

Fig 4 Eye Level 2.3.3 Facial Contact

With the respirator still held in place by the subject, check the following indicators:

A correctly fitted respirator should make firm contact with the face around the entire length of the seal (see fig 5).

The chin must be positively located in the chin cup.

If there are large gaps at the forehead and chin, the respirator is probably too large.

If the respirator is perched on the end of the chin or forehead, the respirator is probably too small.

The distance between the edge of the respirator and the lobe of the ear should be typically in the range of 15 to 25mm.

2.3.4 Fit Testing

The indicators described previously are only guidelines and an element of compromise may be required.

The sizing should be confirmed by the subject completing a fit test such as a negative pressure faceseal leakage test as detailed in section 2.3.5.

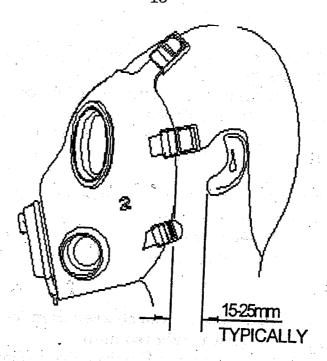
If possible a total inward leakage fit test such as a Portacount Test or similar should be carried out.

2.35 Faceseal Leakage Test (Negative Pressure)

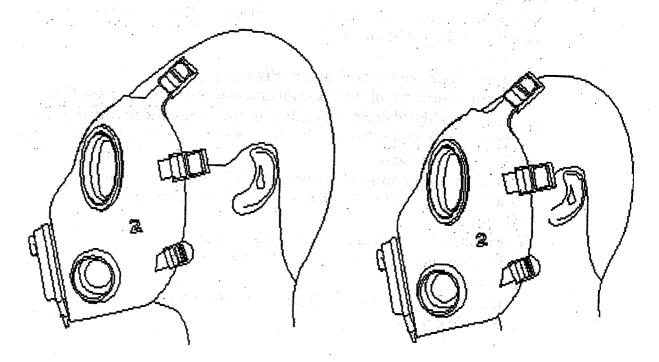
Choose a respirator of the appropriate size with the harness fitted. The subject should don the respirator (following the fitting procedure in section 2.3). Note: insure the drink tube valve is OFF if using the FM12 variant model.

When the respirator is secure use the following procedure:

- Place the palm of the hand over the open canister mount
- -Inhale deeply
- The respirator should collapse onto the face
- -If this does not happen readjust the harness
- Repeat the test
- If there is still no seal the fitter should follow the sizing procedure again.



CORRECTSIZE



RESPIRATOR TOO SMALL

Fig 5 Facial Contact

RESPIRATOR TOOLARGE

2.2 Adjusting And Fitting The Respirator

When the wearer is issued with the appropriate size of respirator, the harness must be correctly adjusted using the following procedure:

2.2.1 Initial Adjustment

- Fully slacken the harness

- The top four buckles are cam buckles (see fig 6) which are used as preset buckles

- Lift the clamp plates. This allows free travel of the harness straps

- Pull the harness straps through the buckle until the folded end reaches the restraining bar

- The bottom two ladder lock buckles (see fig 7) are running buckles

- Lift the buckle body away from the harness strap

- Pull through the harness strap until the folded end reaches the buckle body.

2.2.2 Fitting

The wearer should hold the respirator up to their face with the chin positively located in the chin cup

Pull the harness over the head

Adjust the top four harness straps as follows:

- Pull the free ends of the harness straps, one at a time, until light tension is felt

- Press down the clamp plates. The top four harness straps are now fixed.

Adjust the bottom two harness straps as follows:

- Pull the free ends of the harness straps until light tension is felt (see fig 8)

- The respirator should now be a firm, comfortable fit.

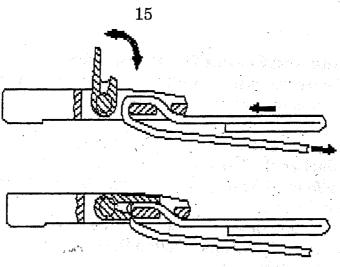


Fig 6 Cam Buckle Adjustment

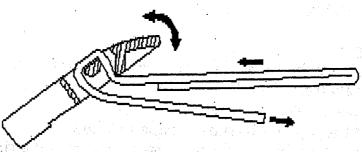
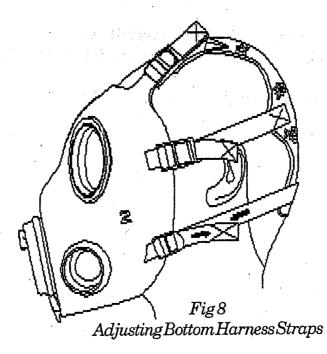


Fig 7 LadderLockBuckleAdjustment



2.4.3 Testing

The wearer should check the stability of the respirator by vigorously shaking the head.

If the respirator moves, then readjust the harness. Do not overtighten the harness straps as this could become uncomfortable and may lead to loss of protection.

Having finalised the harness position the wearer should complete a faceseal leakage test as described in section 2.3.5.

2.4.4 Removal

Remove the respirator by fully slackening the bottom two harness straps (see fig 9).

The top four buckles should remain closed ready for rapid donning. Removal is described in more detail in section 2.5.2.

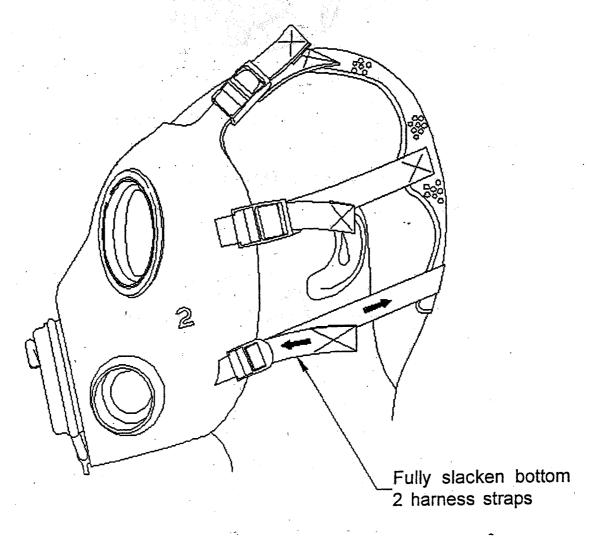
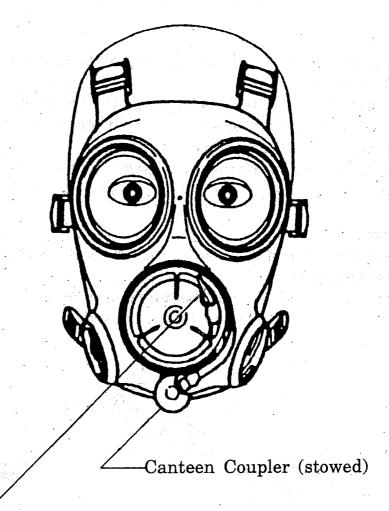


Fig 9
Remove The Respirator After Fitting



- Drink Valve (in OFF position)

Fig 10 FM12 Variant Canteen / Drink Tube Components

2.5 Using The Respirator

2.5.1 Donning The Respirator

- The respirator must have a canister fitted

- The top four harness straps should have been preadjusted as in section 2.4
- The bottom two harness straps should be fully slackened
- Hold breath
- Grasp the bottom two or four harness straps either side of the head pad

- Stretch apart to make a wide opening (see fig 11)

- Insert the chin into the respirator, locating into the chin cup

- Pull the harness over the head

- Tighten the bottom two harness straps by grasping the free ends and pulling until a light tension is felt (see fig 12)
- Run the hands quickly over the harness and the edge of the respirator to ensure it is correctly fitted to the head and that there are no twisted straps
- Blow out hard.

Please note that the canister is not shown in any of the figures to maintain clarity of the diagram.

2.5.2 Using the FM 12 Variant Drink Tube

-Unplug the canteen coupler from the storage slot under the primary speach module and unwrap the flexible external drink tube line (ref. Fig. 10).

-Attach the canteen coupler to a compatable canteen.

-Turn the drink valve ON by rotating the internal drink tube to the mouth with the valve located on the left side of the primary speach module (ref. Fig. 10).

-Insure the valve is OFF with internal drink tube stowed aside prior to removal of canteen (ref. Fig. 10).

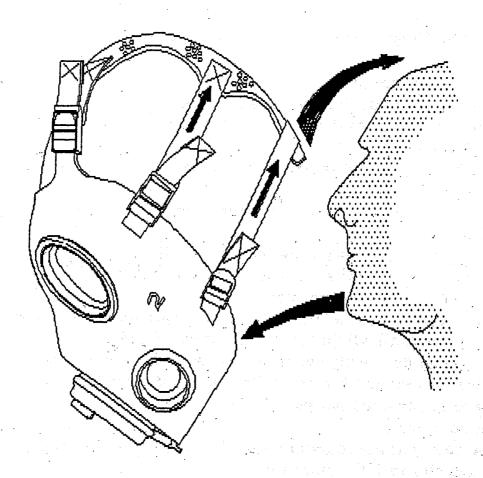


Fig 11 Donning The Respirator

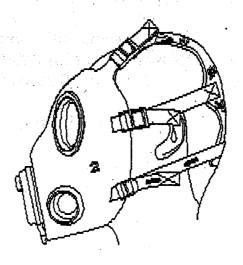


Fig 12
Tightening The Bottom Two Harness Straps

2.5.3 Removal Of The Respirator

- Slacken fully the bottom two harness straps as follows:
- Grasp the ends of the buckle bodies
- Lift them away from the harness
- Pull the harness straps through the buckles up to the folded free ends (see fig 13)
- Remove the respirator (see fig 14)
- Grasp the respirator by the PSM in one or both hands
- Pull the respirator well forward off the face
- Lift the respirator upwards then backwards off the head.

2.5.4 Storage Of The Respirator

The storage of the respirator is an important aspect for maintaining its performance. If these are not adhered to the respirator may not provide adequate protection.

The minimum guidelines set out below should be adhered to wherever possible.

Where local guidelines exist, if these exceed the stated minimum requirements then the local guidelines should be followed.

- Store the respirator in its own haversack
- Do not place sharp objects in the haversack with the respirator
- Do not store the respirator where it will be subject to high temperatures (i.e. against radiators or hot water pipes)
- Do not store the respirator where it can come into contact with dirt or dust
- Do not store the respirator where it could be crushed by heavy objects
- Do not store the respirator in the open air where it could be subject to extremes of weather (i.e. direct sunlight, rain, etc...)
- Store the respirator in a warm, dry room at room temperature
- Always clean and thoroughly dry the respirator before storage

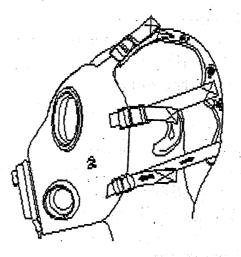


Fig 13 Slacken Bottom Two Harness Straps

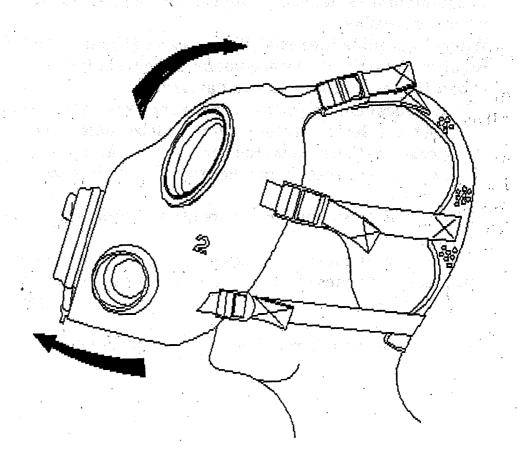


Fig 14
Pull Respirator Forward Then Backwards Off The Head

2.5.5 Canister And SST Interchange

- -Remove the canister
- Unscrew the SST
- Locate the SST into the opposite canister mount and screw down until fully tightened onto the rubber gasket
- -Don the respirator
- Complete the faceseal leakage test as described in section 2.3.5.

If the seal is not satisfactory:

- Remove and refit the SST
- -Repeat the faceseal leakage test
- Remove the respirator and refit the canister
- Ensure that the canister is fully tightened onto the rubber gasket
- The respirator is now ready for use.

2.5.6 Fitting And Removal Of The Monocle

Monocles for sight correction are supplied as a pair.

The monocle frame has a wide and narrow arm to avoid incorrect fitting (see fig 15).

All monocle frames are produced with an identifying mark to indicate which is the left frame and which is the right.

This mark is to be found on the wide arm.

Each monocle is fitted with the curve of the lens away from the eye (see fig 16).

The wider arm is fitted towards the centre of the respirator (see fig 17).

- Feed the wide arm into the wide socket of the eyepiece body
- Spring the narrow arm into the narrow socket on the opposite side of the eyepiece body
- Ensure both arms are securely located into the sockets
- To remove the monocles, reverse the above procedure.

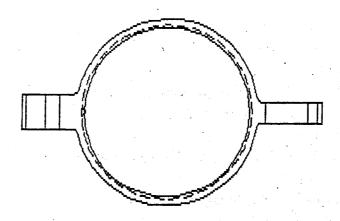


Fig 15
Monocle Frame With Wide And Narrow Arm

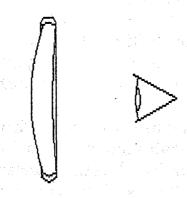


Fig 16 Curve Of The Lens Is Away From The Eye

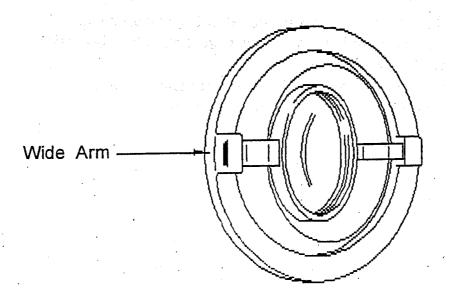


Fig 17
The Wide Arm Is Fitted Towards The Centre Of The Respirator

2.5.7 Fitting And Removing The Outsert
The outsert assembly (see fig 18/1) consists of 2 components.
The rubber outsert clamp ring (see fig 19/1) and a tinted lens (see fig 19/2).

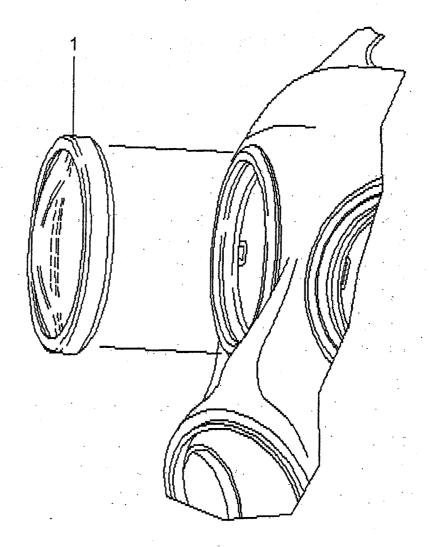


Fig 18 Outsert Assembly

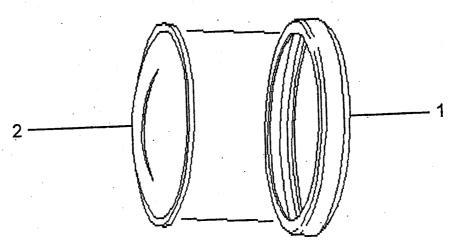


Fig 19 Outsert Components

3 MAINTENANCE

3.1 General

3.1.1 Basic Care And Maintenance

To maintain maximum performance and protection for the user, the CT12/FM12 respirator must be properly maintained. Great care should be taken when cleaning the respirator. Abrasive, spirit, solvent cleaners and undiluted detergents are not to be used. The following respirator maintenance should be carried out by the user:

- 1. General inspection and cleaning.
- 2. Eyepieces.
- 3. Inlet and outlet valves.

The respirator should be cleaned as soon as practical following use. The procedures are detailed in section 3.4

3.2. Maintenance Categories

The maintenance categories in section 3.3 are defined as follows:

- 1. No tools required to perform maintenance operation.
- 2. Special is tools required as supplied within the maintenance kit
- $3. Items\, are \,not \, service able \, and \, must be \, properly \, disposed \, of.$

3.3 Maintenance Allocation Chart

	Maintenance Category				
Component/Assembly	1	2	3		
	•				
Cleaning			1 .		
- Cleaning eyepieces	*	i .			
- Cleaning valves	*				
- Cleaning valve seats	*	1			
- Cleaning canteen drinking tub assembly	*				
	,		,		
Replacement Of Components And Assemblies					
-Mask			*		
-Airguide		*			
-Harness	*				
-Valve(outlet and inlet)	*				
-PSM front cover	*				
-PSM assembly		*			
-PSMclampring		*			
- Airguide clamp ring		*			
- Canteen drinking tub assembly		*			
- Canister gasket	*				
- Canister mount body		*			
- Canister mount clamp ring	J-	*			
- SST assembly	* *				
- Monocle assembly	*	*	i		
- Eyepiece assembly		*	.		
- Eyepiece body and eyepiece clamp ring		. .	*		
- Cam buckle		*			
- Ladder lock buckle		1			
- Buckle clamp plate		Φ			
	• • •	·			

3.3.1 Maintenance Categories

The maintenance categories in section 3.3 are defined as follows:

- 1. No tools required to perform maintenance operation.
- 2. Specialist tools required as supplied within the maintenance kit
- 3. Items are not serviceable and must be properly disposed of.

3.4 Description Of User Maintenance Procedures

3.4.1 General Cleaning

The respirator can be cleaned or disinfected without deterioration to any aspect of its performance using the following procedure:Remove the canister (on no account must the canister be immersed in water). Totally immerse the respirator in a warm soap or dilute detergent solution (i.e Hibitane or Savlon).

Warm water up to a maximum temperature of 40°C (104°F) may be used. No abrasives of any sort should be used. The cleaned respirator should then be totally immersed in clean, warm water and then dried thoroughly.

The following cleaning procedure is recommended:

- Obtain a suitable clean vessel to hold the water
- -Remove the canister
- Remove the PSM front cover
- Remove monocles if fitted
- Immerse the respirator in a warm water solution containing a small amount of mild non-allergic soap for 5 minutes
- Do Not Use Spirit or Solvent Cleaners or Undiluted Detergents
- After 5 minutes gently agitate the respirator in the water solution, whilst wiping with a clean lint-free cloth
- Take particular care to clean under the reflex seal and airguide
- Lift out the respirator and shake off excess water
- Immerse the respirator in clean, warm water, ensuring that all trace of soap is removed
- Lift out the respirator and shake off excess water
- Invert the respirator so that the top is pointing to the ground.

 This will allow water to accumulate in the brow of the respirator.

- After a short wait, peel back the reflex seal to allow any water to escape out of the respirator
- Moisture remaining in the respirator may be wiped away using a clean, dry, lint-free cloth
- The respirator will dry naturally at room temperature (20°C / 70° F).

Warm air may be used up to a maximum of 40°C (104°F)

- Ensure that the respirator is fully dried before storage.

The cleaning solution should be changed when it has become saturated with solids removed from the respirators

- Replace the monocles, and PSM front cover.
- Refit the canister.

The respirator is now ready for use.

3.4.2 Eyepieces

Eyepieces can be cleaned at any time using a damp lint-free cloth. Do Not Use Abrasive Or Solvent Cleaners.

3.4..3 Inlet And Outlet Valves

The respirator is designed to be fully functional during at least 10 years of normal use and maintenance. The valves are common to the inlet and outlet sides of the respirator and normally do not need maintaining other than routine cleaning of the valve and valve seat. Valves must be immediately replaced if any deterioration or damage is suspected and must be routinely replaced after 7 years.

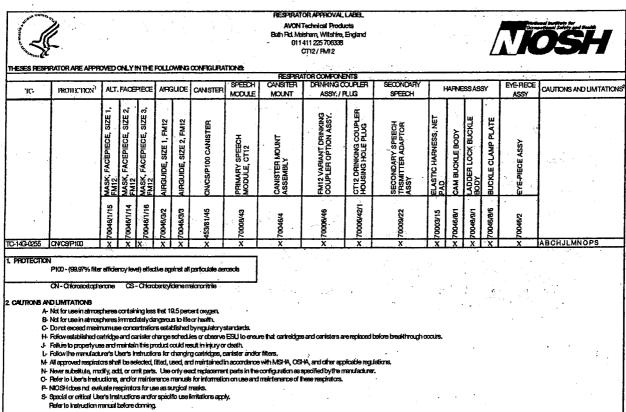
If, after prolonged storage or on first donning the respirator after washing, the valves stick to their seats, they may be freed by inhaling and exhaling deeply.

Should this not work, remove the respirator and gently release the valves using the index finger.

The valves are cleaned by lifting the edge of the valve and wiping the valve seat with a soft, lint-free cloth. In the case of the outlet valve the PSM front cover must be removed first.

APPENDIX

4.1 Respirator Approval Label



NO845-34-45-DL1 Pev.B 10/22/2000

NC645-34-45-DL2 Rev.B 10/22/2000

HS CANISTE	FR IS APPROVED C	ONLY #	t THE	POLLO	·	CONFR	gurations:		AVON Bath Rd. Me 011	Technical Problems Witsh 1411 225 7063 CT12 / FM12	oducts re, England 138						V	ÖSH
1703-	PROTECTION ¹	ALT, FACEPIECE		AIRGUIDE		CANISTER	SPEECH MODULE	CANSITER MOUNT	DRINKING COUPLER ASSY. / PLUG		SECONDARY SPEECH TRANSMITTER	HAFINESS ASSY			SY	EYE-PIECE ASSY	E CAUTIONS AND LIMITATIONS	
	\$75 m.c	MASK, FACEPIECE, SIZE 1, FM12	MASK, FACEPIECE, SIZE 2, FM12	MASK, FACEPIECE, SIZE 3, FM12	AIRGUIDE, SIZE 1, PM12	AIRGUIDE, SIZE 2, FM12	CNCS/P100 CANISTER	PRIMARY SPEECH MODULE, CT12	CANISTER MOUNT ASSEMBLY	FA12 VARIANT DRINGING COUPLER OPTION ASSY.	CT12 DRINIGNG COUPLER HOUSING HOLE PLUG	SECONDARY SPEECH TRANSMITTER ADAPTOR ASSY	ELASTIC HARNESS, NET PAD	CAM BUCKLE BODY	LADDER LOCK BUCKLE BODY	BUCKLE CLAMP PLATE	EYE-PIECE ASSY	
		70046/1/15	10046/1/14	70046/1/16	0046/3/2	70046/3/73	153/81/45	70008/43	70046/4	70005/46	70006/42/1	70009/22	70003/15	70046/8/1	70046/9/1	70046/8/8	70046/2	
-14G-0255	CN/CS/P100	X	X	X	X	X	x	X	X	Х	X	X	Х	X	X	Х	X	ABCHILMNOPS
A-	P100 - (99.97% fit CN - Chloroscetop NO LIMITATIONS Not for use in simi	henone	C contr	S-Chk	robenz	ylidene 19.5 pa	majononitrile ment oxygen.	terosols			ang,	Nija Bijiji				. 4		
M M N O P	Not for use in arms Do not exceed me Follow established Failure to properly Follow, the manufact All approved respin Never substitute, in Refer to User's Iris NIOSH does not e Special or critical U Refer to Instruction	cartrict use and sturer's ators st nodify, a truction valuate Jser's h	use con ge and i maint User's neil be add, or as, and respira netruct	caniste lain lhis lnstruz selecter ornit pe for main itors for ions and	ions es r chang produc tions fi d, fitted ints. Us itenano use as tivor spe	tablishe pe scheo or chang Lused, se only c se manu surgica	d by regulatory dules or observes the injury ing centridges, and maintained exact replacements for informal	ve ESU to en or death, canister and din accordan ent parts in t tion on use a	d'or filters. nce with MSHA, the configuration	OSHA, and o	her applicable by the manufa	aced before breektron regulations. cturer,	ugh occ	urs.				