

## State of Illinois Respirator Regulations – Assembled and Presented by ILEAS

This document is a summary of State of Illinois Respiratory Protection Regulations and Guidelines applicable to first responders as reviewed by the Illinois Law Enforcement Alarm System (ILEAS) and the Illinois Department of Labor (IDOL) with input from the Department of Health. While this is NOT an all-inclusive document, it can be used as a guide to ensure the proper use of respiratory protection. Individual agency managers are responsible for complying with OSHA's Respiratory Protection Standard, 29 CFR 1910.134.

Issuance Conditions	Standard Medical Form	Annual Training	Annual Fit Testing	Policy	Records	Selection of Respirator	Physical Exam
<b>“Avon” or Other Air Purifying Respirators</b>  Required use for SWAT, Riot Agents, etc.	Medical Evaluation to be completed by a PLHCP*. Medical Evaluation forms can be found at <a href="#">OSHA 29 CFR 1910.134 (e) Appendix C</a> or the online 3M evaluation service.	Training on the use, maintenance, limitations and assigned protection factor of current Respirators in use. <a href="#">OSHA 29 CFR 1910.134(g) &amp; (k)</a>	Qualitative or Quantitative fit test. <a href="#">OSHA 29 CFR 1910.134 (f)(1)</a>	Respiratory protection program administered by a Respiratory equipment manager. <a href="#">OSHA 29 CFR 1910.134 (c)</a>	Training, fit test & Respirator records shall be kept with the written program and available for review. <a href="#">OSHA 29 CFR 1910.134 (f), (k) &amp; (m)</a>	Masks selected and distributed by ILEAS and ITTF have been evaluated by NIOSH and meet the appropriate standards. <a href="#">OSHA 29 CFR 1910.134 (g)</a>	Physical Examination required based on a PLHCP's* review of the Medical Evaluation & recommendation. <a href="#">OSHA 29 CFR 1910.134 (e)</a>
<b>“Avon”, “Scott”, “Patriot” or Other SCBA Respirators</b>  Required use for ILEAS WMD SRT, and other special teams	Medical Evaluation to be completed by a PLHCP*. Medical Evaluation forms can be found at <a href="#">OSHA 29 CFR 1910.134 Appendix C</a> or the online 3M evaluation service.	Training on the use, maintenance, limitations, assigned protection factor of current Respirators and accessories. <a href="#">OSHA 29 CFR 1910.134(g) &amp; (k)</a>	Quantitative fit test. <a href="#">OSHA 29 CFR 1910.134 (f)(8)(ii)</a>	Respiratory protection program administered by a Respiratory equipment manager. <a href="#">OSHA 29 CFR 1910.134 (c)</a>	Training, fit test & Respirator records shall be kept with the written program and available for review. <a href="#">OSHA 29 CFR 1910.134 (f), (k) &amp; (m)</a>	Masks selected and distributed by ILEAS and ITTF have been evaluated by NIOSH and meet the appropriate standards. <a href="#">OSHA 29 CFR 1910.134 (g)</a>	Physical Examination required based on a PLHCP's* review of the Medical Evaluation & recommendation. <a href="#">OSHA 29 CFR 1910.134 (e)</a>
<b>N95 Respirators</b>  For routine use	Medical Evaluation to be completed by a PLHCP*. Medical Evaluation forms can be found at <a href="#">OSHA 29 CFR 1910.134 Appendix C</a> or the online 3M evaluation service.	Training on the use, maintenance, limitations, assigned protection factors and proper disposal of respirators. <a href="#">OSHA 29 CFR 1910.134(g) &amp; (k)</a>	Qualitative or Quantitative fit test. <a href="#">OSHA 29 CFR 1910.134 (f)(1)</a>	Respiratory protection program administered by a respiratory protection equipment manager. <a href="#">OSHA 29 CFR 1910.134 (c)</a>	Training, fit test & Respirator records shall be kept with the written program and available for review. <a href="#">OSHA 29 CFR 1910.134 (f), (k) &amp; (m)</a>	Approved N95 3M 8000 series or other approved respirators acceptable N95. <a href="#">OSHA 29 CFR 1910.134 (g)</a>	Physical Examination required based on a PLHCP's* review of the Medical Evaluation & recommendation. <a href="#">OSHA 29 CFR 1910.134 (e)</a>
<b>N95 Respirators</b>  Only Voluntary Use of Personal Respirators**	Not required based on <a href="#">OSHA 29 CFR 1910.134 Appendix D</a> and USDOL/OSHA Safety and Health Bulletin ( <a href="#">SHIB 08-29-03-(A)</a> )	Training on the use, maintenance, limitations, assigned protection factors and proper disposal of respirators. <a href="#">OSHA 29 CFR 1910.134(g) &amp; (k)</a>	Qualitative or Quantitative fit test. <a href="#">OSHA 29 CFR 1910.134 (f)(1)</a>	Written policy outlining the “Voluntary” use of the Respirator administered by a respiratory equipment manager. <a href="#">OSHA 29 CFR 1910.134 (c)</a>	Training, fit test & Respirator records shall be kept with the written program and available for review. <a href="#">OSHA 29 CFR 1910.134 (f), (k) &amp; (m)</a>	Approved N95 3M 8000 series or other approved respirators acceptable N95. <a href="#">OSHA 29 CFR 1910.134 (g)</a>	Not required based on <a href="#">Appendix D</a> and USDOL/OSHA Safety and Health Bulletin ( <a href="#">SHIB 08-29-03-(A)</a> )

\*PLHCP = Physician or other Licensed Health Care Professional

\*\*This category applies only when the first responder chooses to use an N95 Respirator that he or she provides for himself or herself. This category should not be consulted when agency has issued the N95 Respirator to the first responder.