

Frequently Asked Questions about Respiratory Protection at the UCD Health System

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What is the difference between airborne and droplet exposure?

Airborne means that disease is potentially transmissible via an aerosol. An aerosol is tiny particles that do not settle out in an area near a patient. You could be exposed anywhere in the room. You must wear an N-95 or PAPR for protection. Droplets are larger particles that do not travel far from the patient. Droplet masks are adequate protection. An N-95 respiratory is also effective against droplets but is less comfortable for long duration wear than a simple droplet mask.

How do I know when I have to wear an N-95 or PAPR?

The room or area is posted with a sign stating "Airborne Precautions ". You'll see an icon for a tight fitting respirator.

What is a PAPR (Powered Air Purifying Respirator) and when does it have to be worn?

A PAPR is a kind of respirator where filtered air is supplied to a hood by an active pump. The filtered air pressurizes the hood, and escapes through vents in the bottom of the hood. It provides very effective protection from airborne pathogens, but PAPRs are complex and require maintenance. PAPRs must be used if a fit cannot be obtained with a N-95 or Elastomeric respirator. They are required if a department opts to provide PAPRs instead of N-95's to all staff who need respiratory protection. Finally, they must be used during the performance of High Hazard Procedures. Note – There is a specialized PAPR that is used for sterile procedures. The most common one here still requires the use of surgical mask underneath it for sterile procedures.

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Who must be fit tested for an N-95?

Under Hospital P & P 2002, Employees who are considered “high risk” of exposure or who perform “high-hazard procedures” must be trained and fit tested and/or trained and wear a PAPR.

High Risk Employees are those who: (1) Are assigned to higher risk locations; (2) Perform high- hazard procedures; or (3) Have extended or high-volume contact with patients subject to airborne precautions.

Work locations at higher risk for exposure to airborne exposure are:

- A. Davis 5, 6, 7, 10, 11, 12, and 14; Tower 7
- B. Hematology/Oncology staff (adult and pediatric infusions centers only); Obstetrics Department, Pulmonary-Bronchoscopy, Renal (South 6);
- C. Main Operating Room and Recovery, Emergency Department;
- D. Radiology, Respiratory Therapy, Patient Escort, Housekeeping, Phlebotomy, Family Practice, SOS staff, Interpreters and ER Registration/Admitting, Cardiac Cath Lab, Interventional Radiology, and Ambulatory Clinics.

High Hazard Procedures: Procedures performed on a person who is a case or suspected case of an aerosol transmissible disease... Such procedures include, but are not limited to, suctioning (except closed circuit suctioning), sputum induction, bronchoscopy, aerosolized administration of pentamidine or other medications, and pulmonary function testing. High Hazard Procedures also include, but are not limited to, autopsy, clinical, surgical and laboratory procedures that may aerosolize pathogens.

Is fit testing really necessary? I pass year after year.

Yes! It is a requirement of our policies and CalOSHA regulation. You wear gloves under universal precautions – you must wear effective respiratory protection when required to do so for you, and others, health including your family and friends.

How often do I have to take respirator training and how do I get it?

Respiratory Protection training is available through lms.ucdavis.edu. Course 06708. Users must be trained no less than annually. Training includes N-95, Elastomeric, and PAPR.

I have a pulmonary condition that makes it hard for me to breathe sometimes – what do I do?

As part of your fit test, you will fill out a questionnaire that asks if you have a condition such as described above. If you check “yes”, you will need to contact Employee Health Services and make an appointment for a **respirator fitness evaluation**. Be sure to use that term! Employee Health will not do fit tests and their appointment staff will sometime confuse the two.

How often do I have to be fit tested for a N95?

You must be fit tested no less than every 12 months and anytime you feel your fit test might not be valid such as weight gain or loss, significant dental or facial procedures, or facial injury.

I just had a baby and am coming back to work. I was fit tested 3 months ago before my leave. Do I need to be fit tested?

Congratulations! Any change in the physical conformation of your face should trigger another fit test. You'll have to judge for yourself if that has happened to you, but if in doubt, get tested again.

I have a beard and I don't want to shave.

You don't have to shave unless that is department policy and that policy meets labor relations standards. You use a PAPR instead of an N-95 for protection from airborne disease. The required annual training includes PAPRs.

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I have a facial hair, but it isn't touching the part of the N-95 that seals on the face. Is that ok if I can pass a fit test?

Yes, but... It must never touch the face seal for the respirator to remain effective. It is up to the user to make sure that doesn't happen.

The fit tester wouldn't test me because I had a day's worth of stubble due to a long shift. Why can't I be fit tested until I shave?

It is a longstanding CalOSHA and Health System requirement that you be clean-shaven if you wear a tight fitting respirator. Even a little stubble (past 12 hours or so,) might break the seal and cause exposure. Even if it fits when tested, it might not fit later. If in doubt after a long shift, wear a PAPR.

Who does Fit Testing?

Fit testing and respiratory protection program administration is the responsibility of your department. Ask your supervisor for assistance if you are not sure if or when you need training and fit testing. Most departments have trained fit testers who do fit testing as part of their other duties annually.

Can I just wear a PAPR instead of fit testing?

Yes, under a number of situations. Contact your supervisor or EH&S for more information. But you still need the training all others take.

How do I get fitted for a PAPR?

You can't be fitted for a PAPR! No fit test is possible. Use a unit that is tested and maintained as required and as demonstrated in your training and you will be protected.

My department doesn't have a PAPR, should we buy one?

It depends on your service and need. PAPRs are provided on carts for inpatient isolation rooms. Clinics, PCNs, and other locations that do high hazard procedures or have staff that must wear PAPRs must buy them for their staff. With clean hoods, they can be shared so you likely do not need a large supply of PAPRs. EH&S can provide assistance with this determination – call us.

How can I be trained to become a fit tester?

With your supervisor's permission, take LMS course 06708 and obtain hands on skill building with an experienced fit tester from your department.

How often do I need fit tester training?

Annually – do just before your next fit test cycle.

Where do I get respirators and fit test kits and supplies?

There is a list of resources at the EH&S Respiratory Protection Page, where you most likely found this document.

What is the paperwork needed for training and fit testing, and who keeps it?

There are paperwork packages for N-95, Elastomeric, and PAPR training on the EH&S Respiratory Protection web site. Download a master and copy it for your use. The Department keeps the signed documentation on file (paper or electronic) for their employees until the next fit test cycle. The old documents may be discarded. These documents are subject to regulatory and accreditation agency audit so have them in order.

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Should I use the Fit Test Database for recordkeeping?

The FTD was set up for departments to use because a number of people could see the status of fit testing without having to sort through paper work. Ask your manager what they want to do but remember you could be asked to present the paper record (or an electronic copy) so that is needed also.

I can't get into the Fit Test Database for some reason. How do I get access?

Ask your manager if you need access and, if so, if they can give it to you. Many managers at the department level have "super user" status. If they don't or can't, contact EH&S and we can put you in. Send the following information to hs-safety@ucdavis.edu and you'll get a reply when you are in. Include your name (as on your official paperwork as an employee) and the cost center(s) you need access for.