



SD 22 Fit Test Record

Test Subject Information		
Employee Full Name	Job Title	Date of Test

QUALITATIVE TESTING AGENT SELECTION (select one)			
<input type="radio"/> BITREX™	<input type="radio"/> ISOAMYL ACETATE	<input type="radio"/> SODIUM SACCHARIN	<input type="radio"/> STANNIC CHLORIDE
RESPIRATOR SECTION (select one)			
TYPE	MANUFACTURER	MODEL	SIZE
<input type="radio"/> AIR PURIFYING <input type="radio"/> ATMOSPHERE SUPPLYING			
Fit test must be performed on the same make, model, and size of the respirator to be used. If the respirator is uncomfortable or does not fit properly, another respirator must be selected.			

Note: Fit test cannot commence if the subject is not clean shaven

PRE-TEST PROCEDURES	YES	NO
1. Test subject has stated they are fit to wear a respirator.	0	0
2. Test subject received a description of the Fit Test.	0	0
3. Test subject instructed on techniques to don, adjust and remove respirator.	0	0
4. Test subject selected the respirator with the most acceptable fit.	0	0
5. Test subject conducted a seal check.	0	0
6. Test subject assessed comfort with regard to size, positioning on the nose, face, and cheeks; room for corrective eyewear, and room to talk.	0	0
7. Test subject assessed fit with regard to placement of chin, fit across nose bridge, tendency to cling, strap tension and self-observation in a mirror.	0	0
8. Test subject conducted positive and negative pressure checks.	0	0
9. Test subject wore respirator for five minutes prior to the test to assess comfort.	0	0
10. Test subject donned applicable safety equipment that could interfere with acceptable fit during normal respirator use (if applicable).	0	0



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FIT TEST EXERCISES – Each test shall be performed for one full minute	PASS	FAIL
1. Normal breathing in a normal standing position, without talking.	o	o
2. Deep breathing in a normal standing position, breathe slowly and deeply.	o	o
3. Turn head side to side while standing in place: Slowly turn head to extreme left position, inhale then exhale. Slowly turn head to extreme right position, inhale then exhale.	o	o
4. Move head up and down while standing in place: Slowly lower head to extreme low position, inhale then exhale. Slowly raise head to extreme high position, inhale then exhale.	o	o
5. Read The Rainbow Passage	o	o
6. Normal breathing in a bent over at the waist position, as if touching toes.	o	o
7. Normal breathing in a normal standing position, without talking.	o	o



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TEST ADMINISTRATOR INFORMATION	
NAME:	TITLE:
SIGNATURE:	DATE:

TEST VERIFICATION	YES	NO
1. Test administrator verified respirator comfort after each exercise.	<input type="radio"/>	<input type="radio"/>
2. Test subject completed test without making any adjustments to the respirator.	<input type="radio"/>	<input type="radio"/>
3. Test subject confirmed clothing did not interfere with acceptable fit.	<input type="radio"/>	<input type="radio"/>
4. Test subject did not detect testing agent odor at any time during the test.	<input type="radio"/>	<input type="radio"/>

FIT TEST RESULTS
<input type="radio"/> PASSED – Respirator made a tight seal over a smooth face.
<input type="radio"/> FAILED – Respirator failed to make a tight seal.

COMMENTS:

TEST SUBJECT ACKNOWLEDGMENT OF RESULTS	
SIGNATURE:	DATE: