

ISRP 1999 abstract

Presenter/author	Title	Abstract
Grose, Dennis W. Young, R. O. Hale, J. M. Campbell, D. L. Day, B. T. Hoffman, W. A.	Surveillance of Respirator Use and Programs	<p>This report describes currently existing United States data regarding nationwide patterns of respirator programs and practices. This review was one step toward surveillance of respirator use and practices within the U.S.</p> <p>The United States Occupational Safety and Health Administration (OSHA) compliance data for general industry during October 1997-September 1998 indicate that respirator regulations were the third most frequently-cited OSHA health-related regulation (1,784 citations), preceded by hazard communications (7,701) and general personal protective equipment regulations (2,168). The OSHA citation information for the period of 1993-1997 indicated the lack of proper instruction was the most frequent deficiency of respirator programs, followed by lack of written program, and lack of respirators being provided. A survey of U.S. general industry (National Occupational Exposure Survey-NOES) in the early 1980's indicated the manufacturing industry had the highest number (400,000) of respirators observed at work sites. The NOES also found that the construction industry had the highest ratio of respirators observed per hundred workers (4.0). A similar survey of the U.S. mining industry (National Occupational Health Survey of Mining-NOHSM), in the late 1980's, suggested that coal is the mineral industry with the highest percentage (26.3%) of workers using respirators. The most frequently-used types of respirators, based on observations of the NOES and NOHSM, were found to be particulate filter half-mask respirators (including the so-called quarter-mask type). Across all of the U.S. general industry, respirators were most often associated with potential exposures to crystalline silica (as many as 125,000 workers), followed by xylene, titanium oxide, and toluene. No information was found regarding fit testing methods.</p> <p>While some data are now available to provide a historical perspective, no combination of current nationwide data provides what the authors believe to be a complete set of essential information. Additional surveillance of respirator programs and practices will be necessary to obtain that essential information. Consideration is also recommended for a survey of workers' perceptions, perhaps in a parallel effort, to identify modifiable characteristics of respirators that would encourage wider acceptance and appropriate use of respirators.</p>

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