54-197

DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

Address Reply To:

USPHS Indian Hospital
101 S. Moore Ave.
Claremore, Oklahoma 74017
April 5, 1995

The Docket Office, Docket H-049
U.S. Department of Labor
Occupational Safety and Health Administration
Room N2625
200 Constitution Avenue, NW
Washington, DC 20210

To Whom It May Concern:

OSHA
DOCKET OFFICER
DATE APR 5 1995
TIME

Comments on the proposed TB standard:

Selection of Respirators

As proposed, the employer would be required to provide employees with a choice of respirators from at least two manufacturers. At present, the only requirement is that a respirator be available in three sizes. The cost of maintaining multiple respirators from two manufacturers is excessive, in particular, for those facilities with small numbers of workers using respirators, like Claremore.

The cost of providing and the burden of using the HEPA filtered respirators is also excessive and I believe that other types of masks would provide the same protection for HCW's.

Medical Evaluation

Three alternatives for medical evaluation are proposed. These include: (1) a written opinion from a licensed physician with medical exam optional; (2) mandatory medical exam by physician or designee; or (3) use of a questionnaire by an appropriate individual to identify workers in need of further evaluation. The requirement for the use of a licensed physician in alternative one is unnecessary. Although a physician will be overseeing the program, it should allow for an appropriately trained healthcare professional to conduct the medical screening evaluation. Further, mandatory medical exams are unnecessary because those workers in need of further medical evaluations/exams can be identified through screening. I certainly support the third alternative that would utilize a questionnaire administered by an appropriately trained individual to identify workers in need of further evaluation. This alternative would eliminate the need for costly, needless medical evaluations.

Fit Testing

Under the proposal, fit testing would be required annually. This is a significant change from the current standard that requires only initial fit testing. Further, the current requirement is that additional fit testing is necessary if a new/different style of respirator is adopted or an employee experiences a significant change in facial structure. I believe that after the initial fit test, there should not be an arbitrary frequency for additional fit testing because changes that affect a proper fit occur at random. As such, additional fit testing should be required only when there are individual changes in facial structuring, such as weight loss.

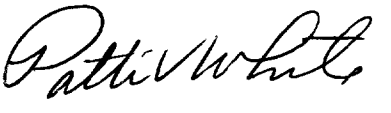
Use of Respirators

According to the proposed standard, disposable respirators that cannot be cleaned and sanitized would need to be discarded at the end of the task or the work shift, whichever comes first. The current standard allows the use of disposable respirators until the structural integrity is compromised, which in practice, is usually well beyond one work shift. I believe it would be cost prohibitive to require a new respirator for every new task in the health care setting.

Fit Checking

OSHA asks for comments on the proposal for use of challenge agents for daily fit checking procedures. Currently, challenge agents are only required for fit testing not fit checking. I believe that the use of challenge agents for fit checking is unnecessary and burdensome and will adversely affect the prompt delivery of health care.

Thank you for your attention.



Patti V. White
Safety/Infection
Control Officer