

QUALITATIVE FIT-TEST RECORD (AE Reg 385-7)		1. Date
2. Employees's name		3. Instructor's name
4. Respirator selection		
1st Choice		2d Choice
Make	Model	Make
Composition	Size	Composition
5. Safety equipment worn during test		
6. Test equipment and materials used		
7. Sensitivity test method (check one)		
<input type="checkbox"/> Irritant smoke		<input type="checkbox"/> Saccharin aerosol
8. Unusual conditions		9. Reactions
<input type="checkbox"/> Beard		<input type="checkbox"/> Unusual facial configuration
<input type="checkbox"/> Mustache		<input type="checkbox"/> Head covering passing between the respirator and the face
<input type="checkbox"/> Scars		<input type="checkbox"/> Claustrophobia
<input type="checkbox"/> Wrinkles		<input type="checkbox"/> Other
<input type="checkbox"/> Dentures		
10. Qualitative fit-test results		
<input type="checkbox"/> Pass		<input type="checkbox"/> Fail
11. Instructor's signature		12. Employee's signature