ESTVOLD OILFIELD SERVICES

RESPIRATORY PROTECTION POLICY

Document Number: EST-HSE-303
Title: Respiratory Protection Policy
Revision: 1
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Policy Control Item	Policy Information
Company	Estvold Oilfield Services
Document Type	Policy / Field Forms / Respiratory Protection and Audit Package
Applies To	All employees, contractors, customer sites, shops, yards, vehicles, confined spaces, hazardous environments, and field operations requiring respiratory protection
Program Intent	Respiratory hazard protection, exposure reduction, fit testing compliance, medical evaluation coordination, and continuous improvement
Regulatory Alignment	OSHA respiratory protection expectations, exposure control principles, fit testing and medical evaluation requirements
Revision	Comprehensive V2 - Editable Master
Approval	Management / HSE / Operations

INCLUDED IN THIS PACKAGE

- Policy manual
- Supervisor quick response guide
- Respiratory hazard assessment form
- Respirator inspection checklist
- Fit test verification form
- Medical clearance tracking form
- Air monitoring verification checklist
- Respirator cartridge replacement log
- Supervisor audit and observation form
- Corrective action tracking form
- Respiratory exposure incident review form
- Respiratory protection training acknowledgment

DOCUMENT CONTROL

Revision	Date	Description of Change	Approved By
0	Initial Release	Original controlled document issue	Management
1	Current Draft	Expanded respiratory protection manual and forms package	Management
2	Current Revision	BBS master format clone with full management-system depth, expanded operational guidance, tables, forms, audit tools, and leadership review structure	Management / HSE / Operations

This document is considered a controlled safety management document. Printed copies are considered uncontrolled unless verified current through the company safety management system or authorized document control location.

DISTRIBUTION AND CONTROL

Controlled copies may be distributed to HSE, operations management, field supervision, environmental coordinators, training coordinators, company shared safety systems, and client-required safety documentation platforms. Document users are responsible for confirming they are working from the current revision before applying program requirements.

IMPLEMENTATION NOTE

This manual is written to function as both a management standard and a supervisor reference. The forms at the end are intentionally detailed enough for field use, respiratory exposure review, air monitoring verification, fit testing confirmation, corrective action tracking, and audit support. Supervisors should use this program before work begins, during field verification, and after work completion to confirm respiratory hazards were adequately controlled.

HOW TO USE THIS MANUAL

- Use Sections 1 through 24 as the governing respiratory protection program standard.
- Use the matrices and supervisor guide during planning, field verification, and response to changing respiratory exposure conditions.
- Use the forms package for field documentation, air monitoring verification, respirator inspection, fit test verification, corrective action tracking, and management review.
- Review program data periodically for recurring exposure trends, fit testing gaps, cartridge change-out issues, air monitoring concerns, and training needs.
- Escalate unresolved respiratory hazards, repeated deficiencies, or potential overexposure events to management and HSE immediately.

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1. PURPOSE AND POLICY STATEMENT

Estvold Oilfield Services is committed to protecting employees, contractors, visitors, and client representatives from airborne hazards and respiratory exposure during company operations. Respiratory hazards may include toxic vapors, airborne particulates, oxygen-deficient atmospheres, chemical exposure, dust, fumes, gases, smoke, and environmental contaminants. This program establishes a comprehensive framework for respiratory hazard recognition, respirator selection, exposure monitoring, fit testing, medical evaluation, employee protection, and continuous improvement. No production expectation, operational pressure, or client demand shall take priority over employee health and safety.

2. SCOPE AND APPLICATION

This program applies to all Estvold Oilfield Services employees, temporary workers under company supervision, supervisors, management personnel, contractors, and company-controlled worksites where respiratory hazards may exist. The program applies to confined spaces, hazardous material operations, abrasive blasting, hydroblast activities, chemical handling, environmental response, welding, dusty operations, vapor-producing activities, and airborne exposure conditions requiring respiratory protection or air monitoring.

3. REGULATORY ALIGNMENT AND REFERENCES

This program is written to align with OSHA respiratory protection expectations, exposure control principles, fit testing requirements, medical evaluation expectations, air monitoring practices, applicable client standards, and company safety management expectations. Where customer, regulatory, or site-specific requirements are more stringent than this program, the more protective requirement shall be followed.

4. DEFINITIONS

Respirator means protective equipment designed to reduce employee exposure to airborne hazards. Fit testing is the evaluation process used to verify respirator fit and seal effectiveness. Medical evaluation is the occupational health review used to determine whether an employee is able to safely wear respiratory protection. Air monitoring means evaluation of airborne hazards, oxygen levels, toxic contaminants, or atmospheric conditions to support work planning and exposure control.

5. RESPIRATORY HAZARD RECOGNITION

Respiratory hazards may not be visible or immediately noticeable. Employees shall recognize that odor is not a reliable indicator of exposure and that respiratory hazards may change quickly due to wind, ventilation, temperature, chemical reaction, process upset, confined spaces, or task changes. Potential exposures include toxic vapors, dusts, fumes, gases, smoke, oxygen-deficient atmospheres, chemical mists, welding fumes, silica-containing dust, hydrocarbon vapors, and contaminants generated during environmental or maintenance activities.

6. PROGRAM PHILOSOPHY AND CORE PRINCIPLES

The Respiratory Protection Program is based on the principle that respiratory protection is the final layer of defense after hazards have been evaluated and feasible exposure controls have been considered. Respirators shall not be used as a shortcut around poor planning, inadequate ventilation, missing engineering controls, or unclear work methods. The program is intended to support proactive hazard recognition, proper exposure assessment, employee involvement, and documented control verification before work begins.

7. ROLES AND RESPONSIBILITIES

Employees are responsible for recognizing respiratory hazards, using respirators properly, inspecting equipment before use, reporting exposure concerns, maintaining equipment in acceptable condition, and stopping unsafe work. Supervisors are responsible for ensuring respiratory hazard assessments are completed, respirator requirements are implemented, fit testing is current, medical clearance is verified, air monitoring is performed where required, and unsafe conditions are corrected. Management is responsible for supporting resources, medical evaluations, fit testing, corrective actions, and program oversight.

8. RESPIRATORY HAZARD ASSESSMENT REQUIREMENTS

Respiratory hazard assessments shall evaluate airborne exposure potential, atmospheric conditions, oxygen concentration, toxic exposure, ventilation, task duration, employee positioning, emergency response access, and exposure control requirements. Assessments shall be completed before work begins and updated when conditions change. Respiratory protection selection shall be based on known or reasonably anticipated hazards rather than assumption.

9. AIR MONITORING AND EXPOSURE EVALUATION

Air monitoring shall be conducted where airborne exposure hazards exist or where required by operational conditions, environmental exposure, regulatory expectations, permit requirements, or supervisor direction. Monitoring results shall be documented and used to determine whether additional controls, respiratory protection, ventilation, evacuation, or work stoppage is required.

10. RESPIRATOR SELECTION AND USE REQUIREMENTS

Respirators shall be selected according to exposure conditions, airborne contaminants, oxygen concentration, task duration, work environment, and manufacturer limitations. Employees shall use only approved respiratory protection appropriate for the identified hazard. Respirators shall be used according to training, manufacturer instructions, fit test limitations, cartridge change-out requirements, and company expectations.

11. MEDICAL EVALUATION AND FIT TESTING REQUIREMENTS

Employees required to wear tight-fitting respirators shall complete medical evaluations and fit testing according to company expectations and applicable regulatory requirements before respirator use. Fit testing shall be current for the respirator type, model, and size used. Employees shall not use respiratory protection when facial hair, medical limitations, improper fit, damaged equipment, or other conditions prevent an effective seal or safe use.

12. RESPIRATOR INSPECTION AND MAINTENANCE EXPECTATIONS

Respirators shall be inspected before each use for damage, contamination, worn components, missing parts, cracked facepieces, damaged straps, valve condition, cartridge installation, and overall operational readiness. Damaged respirators shall be removed from service immediately. Respirators shall be cleaned, stored, and maintained to prevent deformation, contamination, damage, or exposure to extreme conditions.

13. CARTRIDGE AND FILTER REPLACEMENT EXPECTATIONS

Respirator cartridges and filters shall be replaced according to manufacturer recommendations, exposure conditions, service life calculations, odor breakthrough, damage, breathing resistance, contamination, or company change-out schedules. Cartridge selection shall match the contaminant of concern and shall not be used beyond its protective capability. Employees shall report unusual odor, taste, irritation, breathing difficulty, or suspected cartridge failure immediately.

14. WORKSITE HAZARD ASSESSMENT AND PRE-TASK PLANNING

Before work begins, supervisors and employees shall evaluate respiratory exposure, atmospheric conditions, ventilation, work location, weather, confined space potential, emergency access, PPE requirements, and communication needs. Respiratory hazards shall be discussed during pre-task planning and JSA review so employees understand expected controls and response actions.

15. CONFINED SPACE AND IDLH CONSIDERATIONS

Confined spaces, oxygen-deficient environments, unknown atmospheres, immediately dangerous to life or health conditions, or atmospheres with potential rapid change require additional controls, permits, monitoring, rescue planning, and respiratory protection evaluation. Entry shall not proceed when atmospheric conditions are unknown, uncontrolled, or beyond approved respiratory protection capabilities.

16. CONTRACTOR AND THIRD-PARTY EXPECTATIONS

Contractors working on company-controlled sites are expected to comply with respiratory protection expectations, fit testing requirements, air monitoring expectations, exposure control requirements, permit requirements, and stop work authority. Contractors shall provide documentation of qualification, respiratory protection capability, and compliance where required.

17. DOCUMENTATION AND RECORDKEEPING

The company shall maintain respiratory hazard assessments, air monitoring records, fit testing records, medical evaluation documentation, respirator inspections, cartridge change-out logs, corrective action records, audit documentation, training records, and incident review documentation according to company retention requirements.

18. INCIDENT REPORTING AND INVESTIGATION

Respiratory exposure incidents, atmospheric alarms, respirator failures, air monitoring concerns, overexposure symptoms, cartridge breakthrough, improper respirator use, or unsafe respiratory conditions shall be reported immediately. Incident reviews shall identify contributing factors, environmental conditions, communication issues, work planning concerns, equipment concerns, and corrective actions.

19. STOP WORK AUTHORITY

All employees and contractors have the authority and responsibility to stop work when respiratory hazards exist, exposure cannot be controlled, monitoring results are unclear, respiratory protection is unavailable, fit testing is not current, or serious injury exposure exists. Work shall not resume until hazards have been reassessed and controls are verified.

20. TRAINING REQUIREMENTS

Training may include respiratory hazard recognition, respirator selection, proper use, limitations, inspection, cleaning, storage, fit testing awareness, medical evaluation expectations, air monitoring practices, cartridge replacement expectations, emergency response, and stop work authority. Training shall be provided before required use and refreshed as needed based on program requirements, incidents, deficiencies, or changes in exposure conditions.

RESPIRATORY EXPOSURE CONTROL MATRIX

Exposure Condition	Required Review	Typical Controls
Known airborne particulate hazard	Hazard assessment and respirator selection	Dust control, ventilation, appropriate filters, PPE, housekeeping
Toxic vapor or gas potential	Air monitoring and cartridge selection review	Ventilation, restricted access, chemical-specific cartridge or supplied air evaluation
Confined space or oxygen deficiency concern	Permit, atmospheric monitoring, rescue planning	Do not enter until acceptable conditions and controls are verified
Unknown atmosphere	Stop work and escalate to supervisor/HSE	Air monitoring, hazard characterization, respiratory protection reassessment
Respirator failure or breakthrough	Stop work and remove employee from exposure	Replace equipment, evaluate exposure, document incident and corrective actions

21. TREND ANALYSIS, KPIs, AND DATA REVIEW

Respiratory protection data shall be reviewed periodically to identify recurring exposure concerns, fit testing gaps, monitoring trends, respirator inspection deficiencies, cartridge replacement issues, training needs, and corrective action status. The intent of trend review is to improve exposure prevention before overexposure or program failure occurs.

Metric	Purpose	Review Frequency
Fit Test Currency	Verifies employees required to wear tight-fitting respirators remain qualified	Monthly / as assigned
Medical Clearance Status	Confirms employees are medically cleared before respirator use	Monthly
Respirator Inspection Quality	Identifies damaged equipment, storage problems, or maintenance gaps	Field / audit cycle
Air Monitoring Completion	Confirms exposure evaluations are completed when required	Task-based / monthly review
Corrective Action Closure	Tracks unresolved respiratory protection deficiencies	Monthly
Respiratory Incident Trends	Identifies repeat exposure concerns or program weaknesses	Management review

22. LEADERSHIP ACCOUNTABILITY

Leadership personnel shall demonstrate ownership of respiratory protection performance through visible field engagement, resource support, timely corrective action closure, and review of exposure-related trends. Employees judge the strength of a respiratory protection program by whether leaders consistently support safe decisions when exposure controls slow the job down.

Leadership Expectation	Evidence of Completion
Support exposure control decisions	Work is delayed, modified, or stopped when respiratory hazards are not controlled
Review fit testing and medical clearance gaps	Records reviewed and deficiencies assigned corrective action
Remove barriers to proper respirator use	Respirators, cartridges, storage, and monitoring equipment made available
Participate in field verification	Supervisor or manager observations documented
Review recurring findings	Trends discussed during safety or management review meetings

23. AUDITING AND CONTINUOUS IMPROVEMENT

The company shall periodically review respirator usage, fit testing compliance, medical clearance records, air monitoring practices, cartridge replacement practices, corrective action completion, incident trends, documentation quality, employee feedback, and program consistency. Audit findings shall be tracked to completion and used to strengthen respiratory hazard recognition and exposure control planning.

Audit Focus Area	Minimum Evidence Expected
Respirator availability and condition	Respirators inspected, stored properly, and suitable for assigned hazards
Fit testing and medical clearance	Records current and aligned with respirator type used
Air monitoring and hazard assessment	Monitoring performed when required and results documented
Cartridge and filter management	Change-out practices understood and documented where required
Training and employee knowledge	Employees understand use, limitations, inspection, and stop work expectations

24. SUPERVISOR QUICK RESPONSE GUIDE

Situation	Immediate Action	Key Documentation / Control
Respiratory hazard identified	Stop work and reassess controls	Respiratory hazard assessment
Respirator deficiency identified	Remove from service and replace before use	Respirator inspection checklist
Air monitoring concern identified	Initiate monitoring review and control evaluation	Air monitoring verification checklist
Fit test or medical clearance concern identified	Suspend respirator use until verified	Fit test verification / medical clearance tracking
Cartridge breakthrough suspected	Exit exposure area and replace cartridge / reassess exposure	Cartridge replacement log
Respiratory exposure incident occurs	Initiate emergency response and incident review	Respiratory exposure incident review form

25. FORMS PACKAGE

The following forms are provided as editable field tools. They may be converted to electronic forms, fillable PDF, shared drive logs, or safety management software entries as needed. Supervisors shall complete applicable forms when respiratory hazards are identified, respiratory protection is required, air monitoring is performed, fit testing or clearance must be verified, or corrective actions are assigned.

FORM A - RESPIRATORY HAZARD ASSESSMENT FORM

Field	Entry
Date	
Jobsite / Location	
Supervisor	
Task / Operation	
Airborne Hazard Identified	
Air Monitoring Required	
Respirator Type Required	
Ventilation Controls Present	
Environmental Concerns	
Additional Controls Required	
Employee Review Completed	
Supervisor Signature / Date	

FORM B - RESPIRATOR INSPECTION CHECKLIST

Item	Yes	No	N/A	Comments
Respirator condition acceptable	☐	☐	☐	
Straps intact and adjustable	☐	☐	☐	
Cartridges / filters installed properly	☐	☐	☐	
No contamination present	☐	☐	☐	
Seal surfaces acceptable	☐	☐	☐	
Valves present and functional	☐	☐	☐	
Storage condition acceptable	☐	☐	☐	
Defective respirator removed from service	☐	☐	☐	

FORM C - FIT TEST VERIFICATION FORM

Field	Entry
Employee Name	
Respirator Type / Model / Size	
Fit Test Date	
Medical Clearance Verified	
Fit Test Current	
Restrictions Identified	
Facial Hair / Seal Interference Verified	
Supervisor Verification	

FORM D - RESPIRATORY PROTECTION MEDICAL CLEARANCE TRACKING FORM

Employee	Respirator Type	Medical Clearance Date	Expiration / Review Date	Restrictions	Reviewed By

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FORM E - AIR MONITORING VERIFICATION CHECKLIST

Date / Time	
Location	
Monitoring Equipment Used	
Calibration / Bump Test Verified	
Oxygen Reading	
LEL / Flammable Reading	
Toxic Gas / Airborne Hazard Reading	
Action Taken	
Supervisor Review	

FORM F - RESPIRATOR CARTRIDGE REPLACEMENT LOG

Employee / Crew	Respirator Type	Cartridge / Filter Type	Date Installed	Replacement Trigger	Date Replaced	Supervisor Review

FORM G - SUPERVISOR AUDIT AND OBSERVATION FORM

Item	Yes	No	N/A	Comments
Hazard assessment completed	☐	☐	☐	
Respirator selection appropriate	☐	☐	☐	
Fit test and medical clearance verified	☐	☐	☐	
Respirator inspected before use	☐	☐	☐	
Air monitoring completed where required	☐	☐	☐	
Cartridge / filter condition acceptable	☐	☐	☐	
Employees understand limitations and stop work expectations	☐	☐	☐	
Corrective actions assigned where needed	☐	☐	☐	

FORM H - CORRECTIVE ACTION TRACKING FORM

Action ID	Issue Identified	Responsible Person	Due Date	Completion Date	Effectiveness Verified

FORM I - RESPIRATORY EXPOSURE INCIDENT REVIEW FORM

Field	Entry
Date / Time	
Location	
Personnel Involved	
Exposure Concern / Incident Description	
Respiratory Protection Used	
Monitoring Results	
Immediate Actions Taken	
Medical Evaluation Required	
Root / Contributing Factors	
Corrective Actions Required	
Management Review Completed	

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FORM J - RESPIRATORY PROTECTION TRAINING ACKNOWLEDGMENT

Employee Name	Training Date	Topics Reviewed	Employee Signature	Trainer / Supervisor
		Respiratory hazards, respirator use, inspection, limitations, fit testing, cartridge replacement, air monitoring, stop work authority		

APPENDIX A - RESPIRATORY PROTECTION REFERENCE SUMMARY

This program is intended to support respiratory hazard awareness, exposure control practices, fit testing requirements, medical evaluation expectations, air monitoring practices, cartridge management, and respiratory protection management expectations. Respiratory protection shall be integrated into work planning and shall not be treated as a substitute for effective hazard assessment and exposure control.

APPENDIX B - AIR MONITORING EXPECTATIONS

- Evaluate atmospheric conditions before exposure work begins where airborne hazards may exist.
- Verify equipment calibration or bump testing according to manufacturer requirements.
- Document oxygen concentration, flammable atmosphere readings, toxic exposure readings, or task-specific monitoring results as applicable.
- Reassess conditions when work scope, ventilation, weather, product, or operating conditions change.
- Escalate elevated or unexpected readings immediately and stop work when conditions cannot be confirmed safe.

APPENDIX C - RESPIRATOR INSPECTION AND STORAGE EXPECTATIONS

- Inspect respirators before each use for damage, contamination, worn straps, missing parts, valve condition, and seal surfaces.
- Store respirators in clean, dry, protected conditions to prevent damage or contamination.
- Remove defective equipment from service immediately and document replacement or corrective action.
- Verify cartridges and filters are compatible with the identified hazard and replaced according to change-out expectations.
- Confirm employees understand respirator limitations and know when to stop work or leave the exposure area.