

Health and Safety Services

Respirator Medical Evaluation

Issue Date 11/21/05

3M facilitates two convenient methods for employers to obtain medical evaluation of respirator wearers as required by the OSHA Respiratory Protection Standard, 29 CFR 1910.134*. Employers can choose either or both of these services:

- On-Line Respirator Medical Evaluation, a Web-based interactive questionnaire which provides immediate notification of the results
- Mail-In Respirator Medical Evaluation Service, a simple-to-use paper questionnaire

Both the On-Line and Mail-In Respirator Medical Evaluation Services offer:

Convenience

- Respirator medical evaluation for all brands and types of respirators
- Most employees do not need to leave the work site
- Questionnaires available in both English and Spanish

Speed

- It takes most employees only 15 to 30 minutes to complete the questionnaire

Consistency

- All employees are evaluated using the same expanded OSHA Respirator Medical Evaluation Questionnaire

Quality

- Expanded OSHA Respirator Medical Evaluation Questionnaire is designed to cover work conditions and respirator type
- Board-certified occupational medicine physicians complete the reviews and, where needed, make recommendations for further medical testing by the employee's physician

* This service is not designed to meet the medical surveillance requirements of substance-specific OSHA health standards.

Option 1: On-Line

Respirator Medical Evaluation

- Using any computer with Internet access, the employer creates one or more Respirator Profiles describing the respirator type, the work being done and the conditions under which the respirator(s) is used.
- Each employee logs on to a secure web site using a unique personal password. The employee then fills out the on-line questionnaire and submits it for evaluation.
- The employee receives immediate notification of his/her respirator use status.
- Within minutes after employees have completed the questionnaire, the employer can find out the respirator use status of those employees.
- Employees and the employer are notified within one (1) business day after completion of the questionnaire regarding status of any employees requiring further evaluation.
- All data is stored behind a firewall on a secure server. The employer does not have access to the employees' private health information.
- ONLY \$25 PER PERSON (can create up to five different respirator profiles).
 - No minimum orders or hidden costs.

Ordering Instructions

Order on-line at www.respexam.com or call **1-800-383-3393**

Option 2: Mail-In

Respirator Medical Evaluation

- 3M mails the employer a printed medical questionnaire for each employee.
- The employer creates one or more Respirator Profiles describing the respirator type, the work being done and the conditions under which the respirator(s) is used. Profiles can be created on-line or on paper.
- Each employee fills out the printed questionnaire and places it in a confidential envelope.
- The employer collects the confidential envelopes from employees and mails them along with the respirator profile(s) for evaluation.
- The employer receives notification of the respirator use status of each employee by e-mail or FAX. Results are also available on-line.
 - The employer notifies each employee of his/her respirator use status.
 - Private employee health information is mailed to the employer in confidential envelopes for distribution to the employee.
- ONLY \$35 PER QUESTIONNAIRE.
 - No minimum orders or hidden costs.

Ordering Instructions

Order Mail-In Respirator questionnaires on-line at www.respexam.com, or fill out the form on the following page and send it to 3M by FAX at **1-877-609-3832** or mail.

Mail-In Respirator Medical Evaluation Order Form

Company _____
Address _____
City _____ State _____ Zip _____
Contact _____ Phone (_____) _____

Which category best describes your company?

- Abatement Hospital Marine/RV Utilities
 Auto body Repair Industrial/Manufacturing Painting Contractor Other _____

Number of questionnaires at \$35 each:

_____ English _____ Spanish
Total number of questionnaires _____ x \$35 = \$ _____

Tax: Sales tax will be added to your order if your company is located in HI, MS, NM or SD.
Refunds: Although we have a "No Refund" policy, purchased evaluations do not have an expiration date and can be saved for future use.

Send results via:

- E-mail to _____
 FAX to (_____) _____

If no e-mail or fax available, results will be mailed first class to the contact information provided above.

Payment Method:

Credit Card:

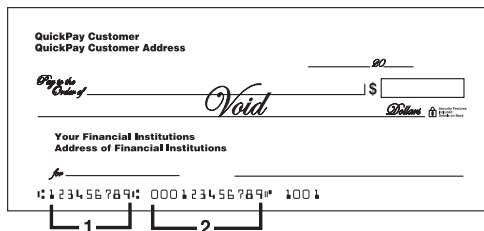
- Visa MasterCard American Express
Card Number _____ Exp. Date _____

Billing Name and Address:

Authorized Signature: _____

Electronic Funds Transfer:

- Personal checking Business checking
Bank Routing Number (1) _____
Bank Account Number (2) _____



Send this form to 3M via FAX to
1-877-609-3832 or mail it to:
3M Health and Safety Services
219 SE Main St, Suite 306
Minneapolis MN 55414

For more information, please contact:
3M Occupational Health and Environmental Safety Division (OH&ESD)
In the U.S., contact:
Sales Assistance
1-800-328-1667
Technical Assistance
1-800-243-4630
Fax On Demand
1-800-646-1655
Internet
www.3M.com/occsafety
For other 3M products
1-800-3M HELPS
In Canada, contact:
3M Canada Company, OH&ESD
P.O. Box 5757
London, Ontario N6A 4T1
Sales Assistance
1-800-265-1840, ext. 6137
Technical Assistance (Canada only)
1-800-267-4414
Fax On Demand
1-800-646-1655
Internet
www.3M.com/CA/occsafety
Technical Assistance In Mexico
01-800-712-0646
5270-2255, 5270-2119 (Mexico City only)
Technical Assistance In Brazil
0800-132333
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1-651-732-6530

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