

FIT TEST REPORT

4/9/2020

ID NUMBER [REDACTED]
LAST NAME 5.1.2e **CUSTOM1**
FIRST NAME [REDACTED] **CUSTOM2**
COMPANY **CUSTOM3**
LOCATION **CUSTOM4**
TEST DATE 4/9/2020 16:45 **PORTACOUNT S/N** 8038200910
DUE DATE 4/9/2021 **N95 COMPANION** N
RESPIRATOR 5.1.2e
 SNORKELMASKER_FILTE
 R **PROTOCOL** OSHA 29CFR1910.134
 SEAHORSE_TRUMPET_SI
 NGL [25]
MANUFACTURER 5.1.2e **PASS LEVEL** 25
MODEL SNORKELMASKER_FILTE
 R
MASK STYLE SEAHORSE_TRUMPET_SI
 NGL
MASK SIZE S/M **APPROVAL**
EFFICIENCY<99% False

<u>EXERCISE</u>	<u>DURATION (sec.)</u>	<u>FIT FACTOR</u>	<u>PASS</u>
NORMAL BREATHING	64	8714	Y
DEEP BREATHING	64	7525	Y
HEAD SIDE TO SIDE	64	8677	Y
HEAD UP AND DOWN	64	9975	Y
TALKING	64	2500	Y
GRIMACE	15	Excl.	
BENDING OVER	64	8887	Y
NORMAL BREATHING	64	12031	Y
OVERALL FF		6611	Y

FIT TEST OPERATOR _____ **DATE** _____
 [REDACTED] 5.1.2e

NAME _____ **DATE** _____
 [REDACTED] 5.1.2e

Note: OUD TYPE MASKER

Respirator Fit Test Card

Name [REDACTED] 5.1.2e **Test Date:** 4/9/2020
ID 5.1.2e **Next Test Date:** 4/9/2021
Respirator **Results**
Mfg [REDACTED] 5.1.2e **Overall FF:** 6611
Model: SNORKELM... **FF Pass Level:** 25
Style: SEAHORSE_TRU... **Pass:** Y
Size: S/M **Operator:** [REDACTED] 5.1.2e
Protocol: OSHA 29CFR1910.134
Fit Test Method: QNFT using TSI PortaCount
 *** Your company contact information here ***