TITLE 11 LABOR AND WORKERS' COMPENSATION
CHAPTER 5 OCCUPATIONAL HEALTH AND SAFETY
PART 2 OCCUPATIONAL HEALTH AND SAFETY - GENERAL INDUSTRY

11.5.2.1 ISSUING AGENCY: Environmental Improvement Board.
[5/1/95; 11.5.2.1 NMAC - Rn, 11 NMAC 5.2.1, 10/30/08]

11.5.2.2 SCOPE: All employment and places of employment subject to the Occupational Health and Safety Act, except as otherwise covered by 11.5.3 NMAC, Occupational Health and Safety - Construction Industry, or 11.5.4 NMAC, Occupational Health and Safety - Agriculture. In addition to this part, convenience stores are specifically covered in 11.5.6 NMAC.
[5/1/95; 11.5.2.2 NMAC - Rn & A, 11 NMAC 5.2.1, 10/30/08]

11.5.2.3 STATUTORY AUTHORITY: Sections 50-9-7, 50-9-13 and 74-1-8 NMSA 1978.
[5/1/95; 11.5.2.3 NMAC - Rn, 11 NMAC 5.2.3, 10/30/08]

11.5.2.4 DURATION: Permanent.
[5/1/95; 11.5.2.4 NMAC - Rn, 11 NMAC 5.2.4, 10/30/08]

11.5.2.5 EFFECTIVE DATE: May 1, 1995, unless a later effective date is indicated in the history note at the end of a section.
[5/1/95, 7/15/96, 3/16/97; 11.5.2.5 NMAC - Rn & A, 11 NMAC 5.2.5, 10/30/08]

11.5.2.6 OBJECTIVE: To establish standards related to employee occupational health and safety in general industry.
[5/1/95; 11.5.2.6 NMAC - Rn, 11 NMAC 5.2.6, 10/30/08]

11.5.2.7 DEFINITIONS:

A. The provisions of 11.5.1.7 NMAC are applicable to this part.

B. Additional definitions: The following definitions, in addition to these contained in 11.5.1.7 NMAC and the state act, are applicable to this section:

(1) "ANSI" means American national standards institute;

(2) "approved" means tested and listed as satisfactory by the bureau of mines of the United States department of interior, or jointly by the MSHA and NIOSH;

(3) "confined space" means an enclosure, usually having limited means of access or egress, or both, and poor natural ventilation, which may contain hazardous contaminants or be oxygen deficient, including but not limited to a storage tank, process tank, tank car, boiler, duct, sewer, tunnel, pipeline, pit or tube;

(4) "contaminant" means a harmful, irritating or nuisance material that is foreign to the normal atmosphere;

(5) "controlled breathing" means the ability of the wearer of an SCBA to maintain a breathing rate that is near normal for the activities being performed;

(6) "corrective lens" means a lens ground to the wearer's individual corrective prescription;

(7) "dB" means decibel(s), a unit for measuring the relative loudness of sounds equal approximately to the smallest degree of difference of loudness ordinarily detectable by the human ear;

(8) "education" means the process of imparting knowledge or skill through systematic instruction, whether or not through formal classroom instruction;

(9) "exhalation valve" means a device that allows exhaled air to leave a facepiece and prevents outside air from entering through the valve;

(10) "eyepiece" means a gas-tight, transparent window or lens in a full facepiece through which the wearer can see;

(11) "face shield" means a heat and flame resistant device worn in front of the eyes and face, the predominant function of which is protection of the wearer's eyes and face;

(12) "firefighter" means an individual who is assigned to firefighting activity, and is required to respond to alarms and performs emergency action at the location of a fire or fire danger;

(13) "firefighting activity" means physical action taken in the direct act of fire suppression, and rescue or hazardous duties performed at the location of a fire emergency and supportive activities related to firefighting;

(14) "fire department" means a paid or volunteer service group organized and trained for the prevention and control of loss of life and property from any fire or disaster;

(15) "full facepiece" means the portion of an SCBA covering the wearer's nose, mouth, and eyes and designed to make a gas-tight fit with the face, including the head harness, exhalation valves, and connections for a source of respirable gas;

(16) "gas" means an aeriform fluid that is in the gaseous state at standard temperature and pressure;

(17) "hazardous atmosphere" means any atmosphere, whether or not immediately dangerous to life or health, that is oxygen deficient or that contains a toxic or disease-producing contaminant;

(18) "hazardous substance" means a substance which by reason of being explosive, flammable, poisonous, corrosive, oxidizing, irritant or otherwise harmful, is likely to cause injury;

(19) "Hg" means the element mercury;

(20) "head harness" means a device for holding the facepiece securely in place on the wearer's head;

(21) "health professional" means a licensed physician, registered nurse, practical nurse, or certified emergency medical technician;

(22) "helmet" means a head protective device consisting of a shell, energy absorption system, and chin strap intended to be worn to provide protection for the head or portions thereof, against impact, flying or falling objects, electric shock, penetrations, heat and flame;

(23) "Hz" means hertz, a unit of frequency equal to one cycle per second;

(24) "immediately dangerous to life or health" means posing an immediate hazard to life or producing immediate irreversible effects on health that may be debilitating;

(25) "inhalation valve" means a device that allows respirable air or oxygen to enter the facepiece and prevents exhaled air or oxygen from leaving the facepiece through the intake opening;

(26) "MSHA" means the mine safety and health administration of the United States department of labor;

(27) "negative-pressure type apparatus" means an open or closed-circuit apparatus in which the pressure inside the facepiece, in relation to the immediate environment, is positive during exhalation and negative during inhalation;

(28) "NIOSH" means the national institute for occupational safety and health of the United States department of health and human services;

(29) "NFPA" means national fire protection association;

(30) "overhaul" means:

(a) the final stages of fire control, following suppression of the main body of fire, during which smoke conditions and visibility gradually improve and pockets of fire are sought out to complete extinguishment, searching for victims continues, and salvage operations may be carried out; or

(b) in a situation other than fire, the cleanup stage following the elimination of the emergency phase of the incident;

(31) "oxygen-deficient atmosphere" means an atmosphere that causes an oxygen partial pressure of 100 millimeters of mercury or less in the freshly inspired air saturated with water vapor in the upper portion of the lungs;

(32) "positive-pressure apparatus" means an open- or closed-circuit apparatus in which the pressure inside the facepiece in relation to the immediate environment is positive during both inhalation and exhalation;

(33) "provide" means to furnish, supply or to make arrangements for monetary reimbursement;

(34) "qualitative SCBA fitting test" means a fitting test in which the person wearing an SCBA is exposed to an irritant smoke, an odorous vapor, or another suitable test agent;

(35) "quantitative SCBA fitting test" means a fitting test in which a person wears an SCBA in a test atmosphere containing a test agent in the form of an aerosol, vapor, or gas, and instrumentation that samples the test atmosphere and the air inside the facepiece of the SCBA is used to measure quantitatively the penetration of the test agent into the facepiece;

(36) "sanitization" means the removal of dirt and the inhibiting of the action of agents that cause infection or disease;

(37) "SCBA" means self-contained breathing apparatus, which is a portable device that includes the supply of respirable breathing gas for the firefighter, but does not include a rebreather;

(38) "smoke" means the products of incomplete combustion or organic substances in the form of solid and liquid particles and gaseous products in air;

(39) "speaking diaphragm" means a device integral with the facepiece, designed to improve direct voice communication;

(40) "structural firefighting" means physical activity of fire suppression, rescue or both, of buildings or structures that are involved in a fire situation beyond the incipient stage; and

(41) "training" means the process of making proficient through instruction and hands-on practice in the operation of equipment, including respiratory protection equipment, that is expected to be used in the performance of assigned duties.

[9/12/84; 2/21/86; 5/1/95; 11.5.2.7 NMAC - Rn & A, 11 NMAC 5.2.7, 10/30/08]

11.5.2.8 AMENDMENT AND SUPERSESSION OF PRIOR REGULATIONS; REFERENCES IN OTHER REGULATIONS:

A. Amendment and supersession: This part shall be construed as amending and superseding:

(1) EIB/OHSR 200, General Standards, filed July 9, 1992, as amended; and

(2) EIB/OHSR 202, Firefighting, filed June 12, 1989, as amended.

B. References in other regulations: Any reference to EIB/OHSR 200 or EIB/OHSR 202 in any other rule shall be construed as a reference to the corresponding section of this part.

[5/1/95; 11.5.2.8 NMAC - Rn, 11 NMAC 5.2.8, 10/30/08]

11.5.2.9 INCORPORATED FEDERAL STANDARDS:

A. General: Except as otherwise provided in Subsection B of this section, the provisions of 29 CFR Part 1910, Occupational Safety and Health Standards (internet: www.osha.gov), are hereby incorporated into this section.

B. Modifications, exceptions and amendments: The following modifications, exceptions and amendments are made to 29 CFR Part 1910 incorporated by Subsection A of this section:

(1) omit 1910.1;

(2) omit 1910.2(c), (d) and (e);

(3) omit 1910.4;

(4) omit 1910.5(a) and (f); and

(5) amend 1910.1200 Hazard Communication, as follows:

(a) 1910.1200(g)(9) is amended to read: Where employees must travel between workplaces during a workshift, i.e., their work is carried out at more than one geographical location, the material safety data sheets may be kept at a central location at the primary workplace facility. In this situation, the employer shall ensure that employees can immediately obtain the required information in an emergency. The information shall be readily accessible by telephone, two-way communication, computer or actual copies of the material safety data sheets.

(b) The introductory paragraph to 1910.1200(h) is amended to read: Employee information and training: (1) employers shall provide employees with effective information and training on hazardous chemicals in their work area at the time of their initial assignment, and whenever a new physical or health hazard the employees have not been trained about is introduced to their work area, with the exception that a new employee shall be deemed to have been trained provided the employer can demonstrate the employee has received training regarding the same hazards within the past twelve months. Information and training may be designed to cover categories of hazards (e.g. flammability, carcinogenicity or specific chemicals). Chemical-specific information must always be available through labels and material safety data sheets.

[1/20/80, 5/1/95, 7/15/96; 3/16/97, 9/15/97, 8/15/98; 11.5.2.9 NMAC - Rn & A, 11 NMAC 5.2.9, 10/30/08]

11.5.2.10 FIREFIGHTING:

A. Scope and application:

(1) Scope and purpose: This standard establishes minimum requirements for personal protective clothing and equipment, training, respiratory protection, and medical surveillance for firefighters when exposed to the hazards of firefighting activity. This standard is not intended to supersede any more stringent requirements in effect at any fire department in the state. Fire departments are encouraged to provide protection that exceeds the

minimum requirements specified in the standard. This standard is not intended to cover catastrophic situations where private citizens not trained in firefighting are pressed into service.

(2) Application: The requirements of this standard apply to public fire departments, including those composed of private or contractual type fire departments primarily performing duties normally performed by public fire departments, and forest firefighting operations. For the requirements applicable to fire brigades, industrial fire departments, and private or contractual type fire departments generally, see 29 CFR Part 1910.156, Fire Brigades.

B. Firefighting equipment:

(1) General requirements:

(a) All firefighting equipment acquired after July 1, 1989 shall meet or exceed the requirements of the appropriate NFPA standard as published in the national fire codes as specified in Subsection K of this section.

(b) The employer shall inspect firefighting equipment at least annually and maintain records of such inspections. Firefighting equipment that is damaged or in an unserviceable condition shall be repaired or removed from service.

(c) A visual inspection of all equipment which has been utilized for firefighting shall be performed after each fire run or daily, whichever is less frequent.

(d) Personal protective clothing and equipment specified in this regulation shall be provided at no cost to the employee, or the employee shall be reimbursed for the purchase of such clothing and equipment. The protective clothing and equipment shall be used whenever such employees are required to work in a hazardous environment that may be encountered during firefighting activities or under similar conditions during training activities.

(e) The employer shall assure that protective clothing protects the head, body, and extremities, and consists of at least the following components: foot and leg protection; hand protection; eye, face and head protection.

(f) The employer shall assure proper maintenance and use of all protective clothing and equipment.

(g) Employees shall be instructed to wear or utilize appropriate personal protective clothing and equipment when directed to work in a hazardous environment until such time as the officer in charge determines that such protection is no longer required.

(h) Personal protective clothing and equipment that has become damaged or otherwise defective to the point of voiding its intended protection shall be repaired or removed from service.

(2) Foot and leg protection:

(a) Foot and leg protection for structural firefighting may be achieved by either of the following methods:

(i) fully extended boots which provide protection for the entire leg; or

(ii) protective shoes or boots worn in combination with protective trousers that meet the requirements of Subsection E of this section.

(b) Protective footwear for structural firefighting or turnout boots shall meet the requirements of ASTM F2412-05 *"test methods for foot protection"* and ASTM F2413-05 *"specification for performance requirements for foot protection"* for class 75 footwear and shall have sole penetration resistance of 300 pounds (1330N) when tested in accordance with MIL-B-2885D (1973) and amendment dated 1975, "Military Specification for Firemen's Boots". In addition, protective footwear shall be water resistant for at least five inches (12.7 cm) above the bottom of the heel and shall be equipped with slip resistant outer soles.

(c) Foot and leg protection provided for other than structural fires shall be appropriate for the potential hazards.

(3) Body protection:

(a) Body protection shall be provided for each firefighter when exposed to the hazards of structural firefighting activity. Body protection shall consist of turnout clothing or an appropriate combination of a turnout coat and protective clothing meeting the requirements of this section.

(b) Performance, construction, testing and certification of firefighter turnout clothing and protective clothing shall be at least equivalent to the requirements of NFPA standard no. 1971 "*protective ensemble for structural fire fighting*" (2007 edition).

(c) Turnout coats in combination with turnout trousers, or turnout coats and protective clothing meeting these requirements shall be worn on all structural fires until such time as the officer in charge determines

that such protection is no longer required. Body protection provided for other than structural fires shall be appropriate for the potential hazards.

(4) Hand protection:

(a) Protective gloves shall be provided for each firefighter when exposed to the hazards of structural firefighting activity. Such protective gloves shall be properly sized and suitable to the hazards encountered in fires and fire related emergencies.

(b) Protective gloves for firefighting shall be made of durable material designed to withstand the effects of flame, heat, vapor, liquids, sharp objects and other hazards encountered in fires and firefighting or shall be appropriate for the hazards encountered.

(c) Protective gloves shall meet the requirements of NFPA standard no. 1971, "*protective ensemble for structural firefighting*" (2007 edition), or a similar nationally approved standard.

(5) Head protection:

(a) Head protection shall be provided for each firefighter, and shall be maintained in a location of readiness for immediate response to fires and like emergencies. Head protection shall be worn by firefighters whenever they are exposed to head injury hazard. Head protection is normally provided for firefighters through the use of helmets.

(b) Helmets provided for use in structural firefighting shall meet the performance, construction, and testing requirements of NFPA standard no. 1971, "*protective ensemble for structural firefighting*" (2007 edition).

(6) Eye and face protection: employees exposed to eye or facial hazards shall be protected in accordance with the following provisions.

(a) Face shields of plastic or glass shall meet the optical qualities, impact resistance, and light transmission standards specified in ANSI Z87.1-2003, *"practice for occupational and educational eye and face protection"*.

(b) Whenever eye and face protection is not provided by the breathing apparatus facepiece, the face of the firefighter engaged in structural firefighting shall be protected by a face shield attached to the helmet or goggles and either heat and flame resistant hood or high collar and throat strap.

(c) Eye and face protection provided for other than structural fires shall be appropriate for the potential hazards.

C. Medical review:

(1) Firefighting activity requires that a firefighter be able to work with extreme exertion and with agility and endurance in a wide variety of hazardous situations in order to assure the safety of the firefighter and others. The exposures include ranges of heat and cold, smoke, possible allergens and toxins, and noise. The settings include those with poor lighting, slippery surfaces, confined spaces, and heights. The firefighter must be able to work using a self-contained breathing apparatus. The firefighter's life and safety as well as the lives and safety of others depend upon the firefighter's being physically and emotionally fit to work effectively in such situations.

(2) The employer shall assure that firefighters are physically and emotionally capable of performing the specific duties which may be assigned to them by instituting a program of medical review.

(3) Medical review is not intended to eliminate those volunteer firefighters from performing firefighting activities consistent with their medical limitations.

(4) Initial requirements:

(a) At the time of initial assignment the employer shall ensure that each firefighter completes the following forms or equivalents: "*medical history for firefighters*" Subsection L of this section; "*performance criteria for firefighters*" Subsection M of this section; and a medical screening examination, performed in conformance with the "*medical screening form for firefighters*" Subsection N of this section.

(b) Candidates for firefighting activities answering "yes" to any of the questions or with responses left blank or specified as uncertain on the *"medical history for firefighters"* Subsection L of this section shall be certified for firefighting activities by a physician in accordance with the *"physician's certification criteria for firefighters"* Subsection O of this section with the following exceptions: if a firefighter answers "yes" to item 21 or 22 of the *"medical history for firefighters"* Subsection L of this section, a certification from a specialist (e.g. optometrist, ophthalmologist, or audiologist) that the individual can function as a firefighter will suffice in lieu of a complete physician's certification; and if a firefighter answers "no" to item 27 of the *"medical history for firefighters"* Subsection L of this section, the employer is required to make a tetanus immunization available to the firefighter.

(c) A physician certifying a firefighter shall be provided with a copy of the medical requirements of this section.

(d) Candidates for firefighting activities answering "yes" to any of the questions or with responses left blank or specified as uncertain on the *"performance criteria for firefighters"* Subsection M of this section may be allowed to perform only those duties for which the employer determines they are fit.

(e) Candidates for firefighting activities who have been screened in accordance with the *"medical screening for firefighters"* Subsection N of this section and the health professional has designated an answer as "yes", the candidate shall be certified by a physician in accordance with the *"physician's certification criteria for firefighters"* Subsection O of this section with the following exception.

(f) If the response to item 4, 5, 6 or 7 is "yes", a certification from an optometrist or ophthalmologist that the individual can function as a firefighter in accordance with item 2 of the *"physician's certification criteria for firefighters"* Subsection O of this section will suffice in lieu of a complete physician's certification.

(5) Periodic requirements: The employer shall ensure that the medical surveillance required by this standard be performed every five years for firefighters below age 35, every two years from ages 35 to 45, and annually after age 45.

(6) Removal: A firefighter may be removed from firefighting activities when the employer becomes aware of a physical or mental condition as specified in Subsections K through R of this section which would affect the safe performance of specifically assigned duties. A firefighter shall be removed from those firefighting duties when it is certified that a firefighter has a physical or mental condition as specified in Subsections K through R of this section which would affect the safe performance of specifically assigned duties. The firefighter may return to such activities only after the changed capability is restored or the firefighter has been approved for those duties by a physician.

(7) Records:

(a) The employer shall maintain the medical records required in this standard for the length of employment of each firefighter plus five years.

(b) The employer shall make available upon request all records required to be maintained by this standard to the bureau for examination and copying.

D. Training:

(1) The employer shall provide training and education for all firefighters commensurate with those duties and functions that firefighters are expected to perform. Such training and education shall be provided to firefighters before they perform emergency activities.

(2) Formal training or education shall be provided at least annually, and at least quarterly for those expected to perform interior structural firefighting.

(3) Suggested training sources are included in Subsection P of this section.

E. Respiratory protection equipment: Employers shall comply with the provisions of 29 CFR Part 1910.134, Respiratory Protection (internet: www.osha.gov).

F. Confined spaces: All confined spaces shall be considered to be immediately dangerous to life or health unless proven otherwise. No firefighter shall be permitted to enter a confined space for firefighting operations, including emergency rescue operations, without wearing a SCBA. Confined spaces include, but are not limited to, wells, cisterns, tunnels, pits and other such spaces where oxygen deficiency or hazardous airborne materials, or both, may be present.

G. Vision: Corrective lenses, if required, shall be fitted in the facepiece in way that provides good vision and shall be worn in such a manner as not to interfere with the seal of the face of the facepiece.

H. Absorption through or irritation of the skin: If toxic materials which irritate or can be absorbed through the skin are encountered or suspected and protective clothing worn by firefighters as specified in Subsection E of this section does not provide adequate protection, an effective fully body covering suit of impermeable materials shall be worn with the SCBA, as specified in hazardous chemical data, NFPA *"fire protection guide to hazardous materials 2001 edition"*.

I. Effects of ionizing radiation on the skin and whole body: The SCBA will not protect the skin or whole body against ionizing radiation from airborne concentrations of certain radioactive materials. All users of SCBA in such contaminated atmospheres shall be made aware of the fact that special protection is necessary in addition to the SCBA.

J. Notification requirements: Employers shall comply with the provisions of 11.5.1.16 NMAC, Recordkeeping and Reporting Occupational Injuries and Illnesses.

K. References:

(1) The following references are published by the National Fire Protection Association, Batterymarch Park, Quincy, Massachusetts 02269:

(a) NFPA standard no. 1500, *"fire department occupational safety and health program"* (2007 edition);

(b) NFPA standard no. 1901, "*automotive fire apparatus*" (2003 edition);

(c) NFPA standard no. 1961, *"fire hose"* (2007 edition);

(d) NFPA standard no. 1962, *"inspection, care, and use of firehose, couplings, and nozzles and the service testing of fire hose"* (2003 edition);

(e) NFPA standard no. 1971, *"protective ensemble for structural fire fighting"* (2007 edition);

(f) NFPA standard no. 1981, *"open-circuit self-contained breathing apparatus (SCBA) for emergency services"* (2007 version); and

(g) NFPA *"fire protection guide to hazardous materials"* (2001 edition).

(2) The following references are published by the American National Safety Institute Inc. (ANSI), 1430 Broadway, New York, 10018:

(a) ASTM F2412-05 *"test methods for foot protection"* and ASTM F2413-05 *"specification for performance requirements for foot protection,"*;

(b) standard no. Z89.1-2003, *"American national standard for industrial head protection"*;

(c) ANSI standard no. Z87.1-2003, *"practice for occupational and educational eye and face protection"*;

(d) ANSI/CGA G-7.1-2004, *"American national standard commodity specification for air"*;

(e) ANSI Z88.2-1980, *"standard practices for respiratory protection"*; and

(f) ANSI S3.6-2004 *"specification[s] for audiometers"*.

(3) Copies of the references listed in Paragraphs (1) and (2) of this subsection are available for review in the Santa Fe office of the bureau.

L. Medical history form: The following form shall be used to record each firefighter's medical history:

MEDICAL HISTORY FOR FIREFIGHTERS

Name of Individual: _____

Social Security No: _____

Check appropriate response to each question.

Do you have or have you ever had:

		NO	**YES**
1.	Emphysema	( )	( )
2.	Chronic bronchitis	( )	( )
3.	Asthma	( )	( )
4.	Daily cough persistent for more than eight (8) weeks	( )	( )
5.	Coronary heart disease (heart attack or angina pectoris)	( )	( )
6.	History of heart murmur, congenital heart problem or rheumatic fever.	( )	( )
7.	Shortness of breath, difficulty staying up with healthy adults, or walking briskly 1/4 mile.	( )	( )
8.	Irregular heart beat or palpitations of heart	( )	( )
9.	Chest pain with exertion	( )	( )
10.	Other heart problem	( )	( )
11.	High blood pressure	( )	( )
12.	Diabetes	( )	( )
13.	Epilepsy or seizures	( )	( )

14.	Emotional illness	( )	( )
15.	Arthritis	( )	( )
16.	Back disease or injury	( )	( )
17.	Neurologic disorder (nerve or brain disease)	( )	( )
18.	Disease of muscle or bone	( )	( )
19.	Recurrent fainting or dizziness	( )	( )
Do you now have:			
20.	Other respiratory problem (severe or persistent)	( )	( )
21.	Impaired hearing	( )	( )
22.	Impaired vision (unless corrected with glasses)	( )	( )
23.	Hernia	( )	( )
24.	Allergies to substances in the environment or to smoke	( )	( )
25.	Other chronic serious disorders or disease requiring medication or medical care	( )	( )
26.	Alcohol or drug abuse problems	( )	( )
27.	Tetanus immunization within 10 years is important. For prevention of Tetanus. Have you had a Tetanus immunization within 10 years?	( )	( )

I certify that the answers to the above questions are true to the best of my knowledge.

_____ _____

DATE SIGNATURE

M. Performance criteria form. The following form shall be used to record each firefighter's performance criteria:

PERFORMANCE CRITERIA FOR FIREFIGHTERS

Name of Individual: _____

Social Security No: _____

Check appropriate response to each question. When in doubt record "Yes". You need only answer the questions which apply to your work.

Do you have any physical or mental condition that would hamper your ability to do any of the following:

		NO	**YES**
1.	Use self-contained breathing apparatus (SCBA)	( )	( )
2.	Run	( )	( )
3.	Stand continuously for three (3) hours	( )	( )
4.	Keep balance	( )	( )
5.	Crawl	( )	( )
6.	Kneel	( )	( )
7.	Climb/work at heights greater than 10 feet	( )	( )
8.	Work in tight or enclosed places	( )	( )
9.	Reach above shoulder height with both arms	( )	( )
10.	Fully use both hands	( )	( )
11.	Use heavy exertion suddenly and continuously	( )	( )

Is there any reason that you cannot work under any of the following environmental conditions?

		NO	**YES**
1.	Very dry air	( )	( )
2.	Very humid air	( )	( )
3.	On slippery surfaces	( )	( )
4.	Heat	( )	( )

5.	Cold	( )	( )
6.	Very bright light	( )	( )
7.	Very dim light	( )	( )
8.	Noise	( )	( )
9.	Dust	( )	( )
10.	Smoke	( )	( )

I certify that my answers to the above questions are true to the best of my knowledge.

_____ _____

DATE SIGNATURE

N. Medical screening form. The following form shall be used for medical screening of each firefighter:

MEDICAL SCREENING FORM FOR FIREFIGHTERS

Name of Individual: _____

Social Security No: _____

Check appropriate response to each question. When in doubt record "Yes".

		NO	**YES**
1.	Systolic blood pressure (sitting) above 150 mm Hg	( )	( )
2.	Diastolic blood pressure (sitting) above 100 mm Hg	( )	( )
3.	Pulse (sitting) above 95 beats/min.	( )	( )
	Snellen test (contact lens not allowed)		
4.	Left eye (corrected) worse than 20/30	( )	( )
5.	Right eye (corrected) worse than 20/30	( )	( )
6.	Left eye (uncorrected) worse than 20/200	( )	( )
7.	Right eye (uncorrected) worse than 20/200	( )	( )

I certify that the findings are accurate.

_____ _____

DATE SIGNATURE

_____

PRINT NAME

_____

PRINT PROFESSIONAL TITLE

O. Physician's certification criteria. The following criteria shall be used by any physician in the examination of any firefighter for certification:

PHYSICIAN'S CERTIFICATION CRITERIA FOR FIREFIGHTERS

1. Hearing threshold level (corrected) in both ears not over 30 dB average at 500, 1000 and 2000 Hz, with no single frequency over 35 dB and not over 55 dB at 4,000 Hz based on the zero reference level as specified in the American National Standards Institute (ANSI) S3.6-1969 (R1973) "Specifications for Audiometers".
2. Vision acuity worse than 20/30 (corrected) or 20/200 (uncorrected) in either eye. (Contact lenses are not permitted.)
3. Cardiovascular disease including (a) either history or electrocardiographic evidence of myocardial infraction or angina pectoris, (b) abnormal electrocardiogram with dysrhythmia, conduction block, or chamber hypertrophy, unless specifically waived as being at risk for firefighting duties by a physician, and (c) systemic

arterial hypertension uncontrolled down to levels below 150 mm Hg systolic and 100 mm Hg diastolic blood pressure.

4. Seizure disorder of any type unless free of seizures and not taking anti-seizure medication throughout previous five (5) years.

5. Chronic obstructive or chronic restrictive lung disease with vital capacity or forced expiratory volume in one second (FEV_1) less than 75% predicted, or bronchial asthma requiring chronic or intermittent medication.

6. Other physical or mental conditions that preclude (a) strenuous effort (b) mobility, agility or alertness in dangerous situations, or (c) the carrying out of the duties of a firefighter without excess risk of harm to the firefighter's health or safety.

7. Incomplete tetanus immunization.

P. Suggested training sources:

(1) International Fire Service Training Association, Oklahoma State University, Fire Protection Publication, Stillwater, Oklahoma 74078-0118.

(2) National Fire Protection Association, Batterymarch Park, Quincy, Massachusetts 02269.

(3) New Mexico State Fire Marshal's office, P.O. Box 1269, Santa Fe, NM 87504.

(4) National Inter-agency Qualification System, Publication Management System, 3833 S. Development Way, Boise, Idaho 83705.

Q. Inspection and maintenance check list for self-contained breathing apparatus:

SERIAL #_____ MANUFACTURER _____ MODEL #_____ LOCATION #_____

REGULATOR CHECK	CYLINDER CHECK	AUDI-LARM CHECK	APPARTUS CHECK	FACEPIECE CHECK	GASKET & AIRLEAK TEST	REMARKS	INSPECTED BY & DATE

1. Regulator Check: The functions of the reducing value and of the emergency by-pass valve shall be checked for proper operation.

2. Cylinder Check: Cylinder pressure shall be at least 80% of the full operating pressure. Observation of cylinder pressure gauge and regulator guage for corresponding pressure.

3. Audi-Larm Check: Check for Audi-Larm function when system is activated and again when system is deactivated and pressure falls below 400-600 psi.

4. Apparatus Check: Inspect conditions of straps on harness, tightness of screws and fasteners, and locking devices.

5. Facepiece Check: Inspect facepiece components for damage and the condition of headband straps, exhalation valve, speaking diaphragm, breathing tube and facepiece lens.

6. Gasket & Airleak Test: Inspect condition of breathing tube, "O" rings, and speaking diaphragm. If a leak is suspected, apply soapy water to the threaded connection between the valve body and the cylinder, to the pressure gage and its connection between the valve body, to the safety plug, and to the regulator. Open the cylinder valve and apply soapy water to the valve stem and packing gland nut. Expanding bubbles indicate leaks.

7. Remarks: Use this column to list and describe any replacement parts used or any repairs made to the SCBA.

R. Qualitative fit test protocols (QLFT):

(1) Irritant smoke test: The irritant smoke is produced by air flowing through a commercially available stannic tetrachloride or titanium tetrachloride smoke tube normally used to check the performance of ventilation systems. Ventilation should be provided in the test room to prevent contamination of the room with

smoke. If the respirator wearer detects penetration of smoke in the respirator during the test, the wearer should be permitted to readjust the seal of the SCBA. The test operator operates the smoke tube to direct smoke over the SCBA while the wearer is inhaling, keeping the smoke tube about one foot from the facepiece, and watches the reactions of the wearer. If the wearer does not detect penetration of smoke into the facepiece, the test operator moves the smoke tube closer to the facepiece and observes the reactions of the wearer. When the smoke tube has moved to within six inches of the facepiece and the wearer still has not detected penetration of smoke, the smoke may be directed at potential sources of leakage (for example, beneath the chin and around the cheeks, temples and forehead) in the seal of the facepiece to the wearer. If the wearer still does not detect penetration of smoke, the wearer should carry out a series of exercises such as deep breathing, turning the head from side to side, nodding the head up and down, frowning, and talking while smoke is directed at the respirator. If the wearer is unable to detect penetration of smoke, a satisfactory fit has been achieved.

(2) Odorous vapor test:

(a) A material commonly used in the odorous vapor test is isoamyl acetate. The simplest means of carrying out the test is to saturate a piece of fabric or sponge or fill a stencil brush with liquid isoamyl acetate and then move the fabric, sponge or stencil brush around the facepiece of a respirator worn by a person. The fabric, sponge, or stencil brush should be passed close to the potential sources of leakage in the seal of the facepiece while the wearer is inhaling and performing the recommended exercises. If the wearer detects the odor of isoamyl acetate vapor during the test, the wearer should be permitted to readjust the seal of the facepiece. If the wearer is unable to detect the odor of isoamyl acetate vapor when inhaling, a satisfactory fit has been achieved.

(b) A major drawback of a test using isoamyl acetate vapor as the test agent is that the odor threshold varies widely among people. Most can detect by odor a concentration of isoamyl acetate vapor in air as low as 0.1 parts per million by volume. After a person has smelled the odor for a long period of time, olfactory fatigue may cause a failure to detect the odor of low concentration of isoamyl acetate vapor in the air. Several hours before a facepiece fitting test is performed, all those who are to undergo the test should first be tested to determine their ability to detect the odor of isoamyl acetate vapor in air. It should also be noted that people being tested can fake the test by indicating that they do not detect the odor when they actually do, or vice versa.

S. Availability of forms: The forms illustrated in Subsections L through Q of this section are available from the bureau.

[9/12/84, 2/21/86, 6/16/88, 7/11/89, 2/13/90, 4/13/90, 5/1/95, 9/15/98; 11.5.2.10 NMAC - Rn & A, 11 NMAC 5.2.10, 10/30/08]

HISTORY OF 11.5.2 NMAC:

Pre-NMAC History: The material in this part was derived from that previously filed with the state records center.
OHSR 73-1, Occupational Health and Safety Regulations, filed 7/31/73.
OHSR 75-1, Occupational Health and Safety Regulations, No. 101 through 109, 200, 300 and 400, filed 9/9/75.
EIB/OHSR 200, General Standards, filed 12/21/79.
EIB/OHSR 200, Occupational Health and Safety Regulation 200, General Standards, filed 7/14/80.
OHSR 200, Occupational Health and Safety Regulation 200, General Standards, filed 2/7/83.
EIB/OHSR 200, Occupational Health and Safety Regulation 200, General Standards, filed 6/1/87.
EIB/OHSR 200, Occupational Health and Safety Regulation 200, General Standards, filed 2/5/91.
EIB/OHSR 200, Occupational Health and Safety Regulation 200, General Standards, filed 7/9/92.
EIB/OHSR 202, Occupational Health and Safety Regulation 202, Firefighting, filed 8/13/84.
EIB/OHSR 202, Occupational Health and Safety Regulation 202, Firefighting, filed 1/22/86.
EIB/OHSR 202, Occupational Health and Safety Regulation 202, Firefighting, filed 6/12/89.

History of Repealed Material: [RESERVED]

Other History:
EIB/OHSR 200, Occupational Health and Safety Regulation 200, General Standards (filed 7/9/92) and EIB/OHSR 202, Occupational Health and Safety Regulation 202, Firefighting (filed 6/12/89) were renumbered, reformatted, amended and replaced by 11 NMAC 5.2, Occupational Health and Safety - General Industry, effective 5/1/95.
11 NMAC 5.2, Occupational Health and Safety - General Industry (filed 4/26/95) was renumbered, reformatted, amended and replaced by 11.5.2 NMAC, Occupational Health and Safety - General Industry, effective 10/30/08.