



CARTER LAUREN CONSTRUCTION

Bitrex® TSI-QFit Qualitative Fit Test Record

Date: 19TH MAY 2021
Company: CELTIC PRECAST LIMITED
Employee: DAVID COLE
Respirator Used: MOLDEX 7000
Timing Protocol - Sensitivity Screening*: 5
Timing Protocol - Fit Test*: 15

In order to pass, the subject must not detect BITREX® during any of the exercises.

- | | | |
|----------------------------|--|-------------------------------|
| Normal Breathing: | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Deep Breathing: | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Turning Head Side to Side: | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Moving Head Up and Down: | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Talking: | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Jogging: | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Normal Breathing: | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Overall Result | <input checked="" type="checkbox"/> Pass | <input type="checkbox"/> Fail |

Comments: _____

Person Conducting Test: DAVE CRIFTHS

Employee I have been instructed in the proper use of the respirator.
I will follow all procedures, instructions, and warnings when wearing this type of respirator.

Signed:  Date: 19.05.21

