



## “Respirator Medical Evaluation Questionnaire” Student Instructions

### PART A, SECTION 1

- 2a. Your Supervisor’s name (or safety supervisor, if different): **List Course Instructor**
- 7. Your Job title: **Art Student**
- 7a. Your department name: **Art**
- 10. Has your employer told how to contact the health care professional who will review this questionnaire? **Yes (eoh@uhs.wisc.edu)**
- 10a. A phone number for your supervisor (or safety supervisor, if different): **course instructor e-mail**
- 11. Check the type of respirator...Failure to complete this question may result in a delay of services. Select: **Half-Mask (Cartridge)**

### PART B, SECTION 2

- 12. Will you be using any of the following items with your respirator(s)?  
HEPA Filters (Magenta colored N100, R100, P100) Select: **yes**  
Canisters (for example, gas masks): Select: **no**  
Cartridges: Select: **yes**
- 18. Describe the work you’ll be doing while you’re using your respirator(s): **Learning Art techniques in \_\_\_\_\_ Course(s)**
- 19. Describe any special hazardous... **Not applicable**
- 20. Provide **Name of toxic substance(s)** from “Potential Exposure” column for course(s) with respirator:

ART CLASS/MEDIUM	POTENTIAL EXPOSURE
3D Design (plaster)	<i>Silica</i>
Ceramics	<i>Silica/metals</i>
Foundry	<i>Metal fumes/silica</i>
Glass	<i>Silica</i>
Lithography/print making (acid etching)	<i>Acid mist/metals</i>
Neon	<i>Mercury</i>
Painting (spray, solvent based)	<i>Organic solvents</i>
Sculpture: ceramic/plaster	<i>Silica</i>
Sculpture: metal	<i>Metal fumes/particles</i>
Welding	<i>Metal fumes</i>
Wood working	<i>Wood dust</i>

Estimated maximum exposure level per shift of each substance: **unknown**

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