

FIT TEST REPORT

4/8/2020

ID NUMBER	SBH		
LAST NAME	BERENA	CUSTOM1	
FIRST NAME	CHARLENE	CUSTOM2	
COMPANY		CUSTOM3	
LOCATION		CUSTOM4	
TEST DATE	4/8/2020 11:03	PORTACOUNT S/N	8038201220
DUE DATE	4/8/2022	N95 COMPANION	Y
RESPIRATOR	AOSAFETY PLEATS PLUS N95 [100]	PROTOCOL	CSA Z94.4-2011
MANUFACTURER	AOSAFETY	PASS LEVEL	100
MODEL	PLEATS PLUS		
MASK STYLE	N95	APPROVAL	
MASK SIZE	S/M	EFFICIENCY<99%	True

<u>EXERCISE</u>	<u>DURATION (sec.)</u>	<u>FIT FACTOR</u>	<u>PASS</u>
NORMAL BREATHING	60	200+	Y
DEEP BREATHING	60	200+	Y
TURN HEAD SIDE TO SIDE	60	200+	Y
NOD HEAD UP AND DOWN	60	200+	Y
TALK OUT LOUD	60	200+	Y
BENDING OVER	60	200+	Y
NORMAL BREATHING	60	200+	Y
OVERALL FF		200+	Y

FIT TEST OPERATOR	_____	DATE	_____
	Q. R.		
NAME	_____	DATE	_____
	CHARLENE BERENA		

Note:

Respirator Fit Test Card

Name: CHARLENE BERENA	Test Date: 4/8/2020
ID: SBH	Next Test Date: 4/8/2022
Respirator	Results
Mfg: AOSAFETY	Overall FF: 200+
Model: PLEATS PLUS	FF Pass Level: 100
Style: N95	Pass: Y
Size: S/M	Operator: Q. R.

Protocol: CSA Z94.4-2011

Fit Test Method: QNFT using TSI PortaCount

*** Your company contact information here ***