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Submitted via [regulations.gov](https://www.regulations.gov).

RE: Notice of Proposed Rulemaking (NPRM) for “Amending the Medical Evaluation Requirements in the Respiratory Protection Standard for Certain Types of Respirators,” Docket No. OSHA-2025-0006.

Dear Assistant Secretary Keeling:

The American Federation of State, County and Municipal Employees (AFSCME) represents 1.4 million members across the country, serving in hundreds of occupations and providing the vital services that make America happen. We build infrastructure, staff corrections and enforcement, maintain cultural institutions, provide healthcare and emergency services, operate transit systems, generate and deliver power, handle waste and provide clean water. AFSCME advocates for fairness in the workplace, excellence in public service and freedom and opportunity for all working families. We advocate to protect the lives and health of all working people.

AFSCME strongly opposes OSHA’s proposal, “Amending the Medical Evaluation Requirements in the Respiratory Protection Standard for Certain Types of Respirators.” OSHA’s Respiratory Protection Standard, 29 C.F.R. § 1910.134, has been protecting AFSCME members from airborne occupational hazards since 1998. Despite the extensive rulemaking process to support and implement this rule, OSHA is now proposing an amendment to weaken the rule without any evidence-based justification. The proposed amendment privileges employer flexibility and cost-saving to the detriment of worker safety and health.

OSHA’s proposed amendment weakens worker safety for those who use two types of respirators: filtering facepiece respirators (FFRs) and loose-fitting powered air-purifying respirators (PAPRs). The amendment removes employer responsibilities and worker protections found in 1910.134 Subpart (e) that require the employer to provide both initial and follow-up medical evaluations to any worker required to use respiratory protection. Workers assigned to FFRs and loose-fitting PAPRs lose the right to receive free, confidential respirator clearance

American Federation of State, County and Municipal Employees, AFL-CIO

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screening consultations by a physician or licensed health care practitioner (PLHCP), stripping away a strong layer of worker protection.

Those assigned to FFRs and loose-fitting PAPRs will become less protected from injury and illness compared to coworkers assigned other types of respiratory protection such as elastomeric negative-pressure respirators or tight-fitting PAPRs, which still require medical clearance before any fit-testing or respirator use. Subpart (e) protections will be lost in the following ways:

- Removing initial medical screening requirements removes **the right of workers to be medically assessed for health conditions that could be worsened when using a respirator**. Medical screening should be implemented before fit-testing occurs and before the worker is required to use a respirator in a contaminated work environment that could potentially kill, injure or sicken them.
- Removing access to free potential follow-up medical testing, consultations or diagnostic procedures after the initial screening evaluation by a PLHCP **prevents workers from identifying why they failed their health screening and why they should not wear a respirator**. Respirator medical screening and follow-up testing serves to identify health conditions through early diagnosis. Medical clearance requirements protect workers from the adverse effects of using respirators they are not physically or medically fit to wear. Removing access to the protection in Subpart (e) strips workers who use FFRs and loose-fitting PAPRs of that protection and endangers their health.
- OSHA's proposed amendment **erases workers' right to receive a new medical screening evaluation when they experience new medical signs or symptoms associated with respirator use**. Under current regulations, even when a worker was initially cleared to use a respirator, if their health status changes, workers can request another free, confidential medical screening evaluation to ensure that the respirator does not endanger their health. OSHA's proposed amendment removes this screening right for no reasons other than employer cost-saving and flexibility.
- While FFRs are lightweight, cheap and disposable, use of any respirator can exacerbate common medical conditions such as asthma, long COVID, Chronic Obstructive Pulmonary Disease, cancer, heart disease, claustrophobia, eczema and more. OSHA's 1910.134 Subpart (e) mandates that **when workers cannot safely wear an FFR, they have the right to request and receive a loose-fitting PAPR from the employer if they have been medically cleared by the PLHCP to use that device**. The proposed amendment strips this right from those who experience difficulty wearing an FFR. While often heavier, loose-fitting PAPRs provide better protection and are far easier to breathe in than negative-pressure FFRs.
 - During the height of the COVID-19 pandemic, many AFSCME health care workers experienced loss of lung function or were diagnosed with long COVID due to workplace exposures to COVID-19. For these workers, all of whom had passed an initial fit-test in an FFR, **requesting a new medical evaluation and receiving a loose-fitting PAPR was vital for them to continue performing despite health impairment**. The proposed amendment strips workers of this right.

- Evaluation screening by a PLHCP can determine that extended respirator use (whether FFR or loose-fitting PAPR) is hazardous and that limitations should be set on the duration of respirator use during a shift. The duration of a worker’s labor in a hazardous atmosphere can be limited for the sake of their health. Under Subpart (e), the employer must respect those limitations. There is no other way for workers with medical issues to be protected from using a respirator at work when it is not healthy for them to do so. **The proposed amendment robs workers of the right to not wear an FFR or loose-fitting PAPR that the PLHCP attests can damage their health.**

The OSH Act strives “to assure so far as possible every working man and woman in the Nation safe and healthful working conditions and to preserve our human resources.” OSHA standards have required employers to protect workers from workplace hazards, including airborne poisons, irritants, carcinogens and infection. If workers cannot tolerate keeping their FFR or loose-fitting PAPR on for an entire shift because of their unacknowledged health issues, workers may feel forced to remove their respiratory protection in a contaminated work environment just to be able to breathe easily — especially if the airborne contaminant is not easily perceived, such as with asbestos or measles. Losing access to medical screening evaluations puts workers with preexisting conditions at risk of exposure to the very same hazards from which a NIOSH-approved respirator is supposed to protect them. Potential harms to unscreened workers include:

- Discomfort or difficulty breathing when using a FFR or loose-fitting PAPR, leading to workers having to remove their respirator in a contaminated atmosphere.
- Personal and team safety can be endangered when workers use a respirator that impedes hearing, vision or communication.
- Loss of medical privacy rights. Under current regulations, when someone fails medical screening for a respirator, their privacy is protected. The employer is not permitted to learn details behind a workers’ non-approval or clearance to use a respirator. Employers are only informed of the scope of the worker’s restrictions for respirator use. **OSHA’s proposed amendment strips FFR- and PAPR- using workers of this right-to-privacy and potentially exposes workers to employer retaliation** when workers must advocate (without the support of the standard or the PLHCP) for safer use of respirators based upon their health limitations.

We appreciate the opportunity to share these comments and member experiences and urge OSHA to withdraw the “Amending the Medical Evaluation Requirements in the Respiratory Protection Standard for Certain Types of Respirators” proposal. If you have questions or would like additional information, please contact Ellie Barbarash, Senior Health and Safety Advocate, at ebarbarash@afscme.org.

Sincerely,

/s/ Dalia R. Thornton

Dalia R. Thornton
Director
Department of Research and Collective
Bargaining Service