



American Road
& Transportation
Builders Association



November 1, 2025

Honorable David Keeling
Assistant Secretary of Labor
Occupational Health and Safety Administration
200 Constitution Avenue NW
Washington D.C. 20210

Re: Amending the Medical Evaluation Requirements in the Respiratory Protection Standard for Certain Types of Respirators, Docket No. OSHA-2025-0006

Dear Mr. Keeling,

The Associated General Contractors of America (AGC), American Road & Transportation Builders Association (ARTBA), Mason Contractors Association of America (MCAA), National Paving Association of America (NAPA), and National Roofing Contractors Association (NRCA) welcome the opportunity to submit comments in response to the Occupational Safety and Health Administration's (OSHA) Notice of Proposed Rulemaking (NPRM) concerning the [Amending the Medical Evaluation Requirements in the Respiratory Protection Standard for Certain Types of Respirators](#).

The Associated General Contractors (AGC) is the nation's leading construction trade association. It dates to 1918 and today represents more than 28,000 member firms including construction contractor firms both union and open-shop, suppliers, and service providers. Through a nationwide network of 87 chapters in all 50 states, D.C., and Puerto Rico, AGC contractors are engaged in the construction of the nation's highways, bridges, utilities, airports, transit systems, public and private buildings, water works facilities and multi-family housing units, among other projects critical to the economy.

The American Road & Transportation Builders Association (ARTBA) represents all facets of the transportation construction industry including public and private sector members, that plan, design, build and maintain the nation's roadways, waterways, bridges, ports, airports, rail and transit systems. ARTBA's members are comprised of contractors, planning and design firms, materials suppliers, state and local agencies, and safety equipment manufacturers. ARTBA's nearly 8,000 members generate more than \$650 billion annually in U.S. economic activity, sustaining more than 4.4 million American jobs.

The Mason Contractors Association of America (MCAA) is the national trade association representing mason contractors. The MCAA is committed to preserving and promoting the masonry industry by providing continuing education, advocating fair codes and standards, fostering a safe work environment, recruiting future manpower, and marketing the benefits of masonry materials.



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The National Asphalt Pavement Association (NAPA) is the only trade association nationally representing over 1,000 companies associated with the production and (road paving) application of over 400 million tons of asphalt pavement mixtures annually. NAPA members operate pavement mix plants in virtually every Congressional district, coast to coast, border to border. More than 94 percent of America's roadways and over 80 percent of airfields are surfaced with asphalt.

The National Roofing Contractors Association (NRCA) is one of the nation's oldest trade associations and the voice of roofing professionals worldwide. NRCA's over 4,000 member companies represent all segments of the industry, including contractors, manufacturers, distributors, consultants and other employers in all 50 states and internationally. NRCA members are typically small, privately held companies, with the average member employing 45 people and generating \$4.5 million in annual sales.

We are writing today in measured support of the proposed rule. While safety is a top priority for our associations and our members, not every best practice on the job site needs to be required by regulation. To be clear, we do consider the use of medical questionnaires and evaluations for filtering facepiece respirators (FFR) and loose-fitting powered air-purifying respirators (PAPR) to be a best practice. However, based on feedback from our members, we think this best practice can be included as a newly adopted Nonmandatory Appendix E within 1910.134. This strategy would provide our members with guidance on whether a medical evaluation might be beneficial, while providing flexibility in situations where the process may be unnecessary.

We appreciate OSHA's commitment to provide that flexibility, but we respectfully recommend that such practices be noted deliberately in both the preamble of the rule and in the new *Appendix E*, as a best practice.

I. Justification and Suggested Language for a Nonmandatory Appendix E to Subpart I §1910.134

In some instances, the use of respiratory protection may cause a physiological burden on the employee. The existing medical questionnaire and a follow-up medical evaluation are best practices used to identify underlying medical conditions that could result in adverse effects while wearing certain types of respiratory protection. This may include filtering facepiece respirators (FFR) and loose-fitting powered air-purifying respirators (PAPR)."

We suggest that OSHA create and adopt a Nonmandatory Appendix E to § 1910.134, *Guidance on OSHA Respirator Medical Evaluation for Filtering Facepiece Respirators (FFR) and Loose-Fitting Powered Air-Purifying Respirators (PAPR)*. This newly created nonmandatory appendix could include the following language:



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“Respirator medical evaluations are designed to ensure employees required to wear respirators to protect against airborne contaminants are able to do so safely. The results of the respirator medical evaluation also help employers make informed decisions about which employees can use respirators under specific environmental conditions and physical demands. Some medical conditions may make it difficult for an employee to wear a respirator at work. A respirator medical evaluation can help detect if wearing a respirator will aggravate or exacerbate any of these conditions.

Employers who choose to administer respirator medical evaluations and facilitate consultation with a healthcare professional, may continue to follow the Appendix C to § 1910.134: OSHA Respirator Medical Evaluation Questionnaire (Mandatory).”

II. Conclusion

Our collective associations take the safety of our members very seriously. As such, we evaluate any deregulatory proposal from OSHA with caution. In this instance, we support the proposed rule as it gives employers flexibility in cases where a medical evaluation is clearly not necessary. However, we do consider such evaluations to be a best practice and respectfully request that OSHA designate it as such both in the preamble of the Final Rule, and Appendix E to Subpart I of Part 1910. Thank you for the opportunity to comment. If you have any questions or require further information, please contact kevin.cannon@agc.org.

Very Respectfully,

Associated General Contractors of America (AGC)
American Road & Transportation Builders Association (ARTBA)
Mason Contractors Association of America (MCAA)
National Asphalt Paving Association (NAPA)
National Roofing Contractors Association (NRCA)