**NEGATIVE PRESSURE RESPIRATOR MEDICAL RELEASE**

Western Oregon University Respiratory Protection Program requires a medical release for employees who wear a negative pressure respirator.

Employee / Student Job Title / Activity

Hazards exposed to requiring respirator use

The employee noted above is medically capable of wearing a negative pressure respirator.

Yes No

If the employee is not able to wear a negative pressure respirator, please provide reason.

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Physician's Name Print / Typed Physician's Signature Date