



Personal Protective Equipment (PPE) Group Training Template

Purpose: This template is intended to help supervisors document the PPE training of employees in clinical and public health laboratory settings. Employees must be trained on PPE usage before they are allowed to perform work in areas requiring PPE. The types of PPE and their processes (e.g., donning and doffing) will be determined by the laboratory's site- or procedure-specific risk assessment.

This template should be customized to address site-specific needs and used as a supplement to — not a replacement for — a laboratory's established policies or procedures. PPE training is recommended:

- Annually.
- Whenever a change in the workplace (e.g., PPE, procedure, or facility) renders previous training obsolete.
- Whenever there is reason to believe an employee lacks the understanding or skill to use PPE properly.

How to use: Complete the first section, including the site or procedure for which this PPE training is required. During the training, utilize the checklist under Topics Discussed in Training to ensure you provide employees with the minimum information required by Occupational Safety and Health Administration (OSHA) standards <u>29 CFR 1910 Subpart 1</u>. After the training is complete, the employee(s) should sign the form and acknowledge that they understand the information given during the training. Finally, the trainer should verify that the listed employee(s) received adequate training and sign the form.

| Method of Training: OIn-Person Demonstration | | Presentation | Self-Review | |
|--|---------------|-------------------|-------------|--|
| Name of Training: | | | | |
| Site/Procedure: | | Date of Training: | | |
| Training Type: Initial | Annual | Other | | |
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| Topics Discussed in Training | Was this topic covered in this training Y/N |
|--|---|
| When PPE is necessary | |
| What PPE is necessary | |
| What the PPE's limitations are | |
| How to properly don, doff, adjust, and wear PPE | |
| How to properly care for, maintain, and dispose of the PPE | |
| What the PPE's useful life is | |





The following employees have attended the above-listed training session. By signing below, they acknowledge they understand the information presented during the training.

| Printed Name | Signature | Job Title | Date Completed |
|--------------------|-----------|-----------|-------------------|
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| Trainer Signature: | Date: | | |
| Trainer Job Title: | | | |