4. Please check the protective clothing or equipment you use at the job you have now:

- gloves
- coveralls
- respirator
- dust mask
- safety glasses, goggles

Please circle your answer of yes or no.

5. Does your protective clothing or equipment fit you properly?

   yes   no

6. Have you ever made changes in your protective clothing or equipment to make it fit better?

   yes   no

7. Have you been exposed to BD when you were not wearing protective clothing or equipment?

   yes   no