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## **Self-Contained Self-Rescuer Field Evaluation: Sixth-Phase Results**



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES  
Public Health Service  
Centers for Disease Control and Prevention  
National Institute for Occupational Safety and Health



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**By Nicholas Kyriazi and John P. Shubilla**

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES  
Public Health Service  
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National Institute for Occupational Safety and Health  
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### UNIT OF MEASURE ABBREVIATIONS USED IN THIS REPORT

breaths/min	breaths per minute	L/min	liter(s) per minute
hr	hour(s)	min	minute(s)
kg	kilogram(s)	mL/min	milliliter(s) per minute
L	liter(s)	mm H <sub>2</sub> O	millimeter(s) of water (pressure)
L/breath	liter(s) per breath	ppm	parts per million

# SELF-CONTAINED SELF-RESCUER FIELD EVALUATION: SIXTH-PHASE RESULTS

By Nicholas Kyriazi<sup>1</sup> and John P. Shubilla<sup>2</sup>

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## ABSTRACT

The National Institute for Occupational Safety and Health (NIOSH), Pittsburgh Research Laboratory, has undertaken a study to determine how well self-contained self-rescuers (SCSRs), deployed in accordance with Federal regulations (30 CFR 75.1714), hold up in the underground environment with regard to both physical damage and aging. This report presents findings regarding laboratory-tested SCSRs in the sixth phase of testing from mid-1996 to early 1998. The SCSRs were tested on human subjects and on a breathing and metabolic simulator. These results indicate that most of the apparatus, if they pass their inspection criteria, perform satisfactorily. However, the deployed CSE SR-100s exhibited significantly higher inhaled CO<sub>2</sub> levels than new units, as in the previous phase. This will cause higher ventilation rates in most users, which will, in turn, result in higher breathing pressures, possibly causing users to prematurely remove the apparatus. CSE Corp. has developed a noise test that can identify apparatus suffering from chemical-bed degradation causing the early CO<sub>2</sub> breakthrough. This test was added to the inspection criteria for the SR-100. In addition, several of the MSA Portal-Packs that passed their inspection criteria were found to have KO<sub>2</sub> dust in their mouthpieces. Further investigations by NIOSH and the Mine Safety and Health Administration confirmed these findings, which resulted in the decertification of the apparatus and their removal from service.

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## INTRODUCTION

On June 21, 1981, U.S. coal mine operators were required to make available to each underground coal miner a self-contained self-rescuer (SCSR). The regulations (30 CFR 75.1714) require that each person in an underground coal mine wear, carry, or have immediate access to a device that provides respiratory protection with an O<sub>2</sub> source for at least 1 hr, as rated by the certifying agencies—the National Institute for Occupational Safety and Health (NIOSH) in Morgantown, WV, and the Mine Safety and Health Administration (MSHA). The NIOSH Pittsburgh Research Laboratory (PRL) is conducting a long-term evaluation of SCSRs deployed in underground coal mines. This work is in support of PRL's disaster prevention research program to improve safety for underground mine workers. PRL locates mines willing to participate in the study and trades deployed SCSRs for new ones. PRL then tests the deployed SCSRs. The objective of this long-term program is to evaluate the in-mine operational durability of deployed SCSRs. Of utmost concern is the successful performance of any SCSR that passes its inspection criteria. PRL is interested only in apparatus that pass their inspection criteria. Such apparatus must function successfully to enable a miner to escape safely during a mine emergency. Apparatus that fail inspection criteria are expected to be removed from service.

This study involves testing approximately 100 SCSRs in each phase. This report describes findings in the sixth phase of testing occurring from mid-1996 through early 1998. Previous reports describe phases 1 through 5 [Kyriazi et al. 1986; Kyriazi and Shubilla 1992, 1994, 1996]. Testing was conducted using a breathing and metabolic simulator (BMS) (figure 1) and human subjects on a treadmill.



Figure 1.—Breathing and metabolic simulator at the NIOSH Pittsburgh Research Laboratory, Bruceton, PA.

## EXPERIMENTAL PROCEDURE

The SCSRs tested were manufactured by CSE Corp., Draegerwerk AG, Mine Safety Appliances Co., Inc. (MSA), and Ocenco, Inc., and were sampled according to estimated market share (table 1). The apparatus are shown in figures 2 through 6. Ninety percent of the apparatus were tested on the BMS; 10%, on human subjects.

The O<sub>2</sub> constant-flow rate is checked on compressed-O<sub>2</sub> apparatus; the NIOSH-required flow is 1.5 L/min at ambient temperature and pressure (at NIOSH in Morgantown, WV), dry (ATPD).

All apparatus are checked for breathing circuit leak tightness after opening. The leak test used is that recommended by Draeger for its BG-174A rescue breathing apparatus. It is performed to determine how well the apparatus isolates the user from the environment, which may be irrespirable in an emergency. Passing the test is not a requirement of the regulations, however. The test permits a decay in breathing circuit pressure

Table 1.—SCSRs received for evaluation

Apparatus	No. received	No. tested
CSE SR-100 . . . . .	30	27
Draeger OXY K Plus . .	10	9
MSA PORTAL-PACK	10	8
Ocenco EBA 6.5 . . . . .	40	38
Ocenco M-20 . . . . .	10	10
Total . . . . .	100	92

from -70 to -60 mm H<sub>2</sub>O in 1 min. We have determined that just passing the test is equivalent to a leak rate of approximately 1 mL/min given an internal volume for both the apparatus and test stand of 1 L (all volumes in this report are given at standard temperature and pressure, dry, unless otherwise noted). To give this some perspective, an in-leakage rate of 87 mL/min in a 10% CO atmosphere at a peak inhalation flow rate of 250 L/min would result in an 8-hr threshold limit value (TLV) for CO of



Figure 2.—Cased and uncased CSE SR-100 self-rescuer.



Figure 3.—Cased and uncased Draeger OXY K Plus self-rescuer.



Figure 4.—Cased and uncased MSA Portal-Pack self-rescuer.

35 ppm. The 250 L/min peak inhalation flow rate is used because this occurs at roughly a 100 L/min ventilation rate, the highest likely rate that can reasonably be expected of a user. At such a maximal work rate, inhalation pressure should not exceed  $-300$  mm H<sub>2</sub>O, the highest negative pressure tolerated by 80% of test subjects in a recent study [Hodgson 1993]. At a leak test pressure of  $-70$  mm H<sub>2</sub>O, the proportional in-leakage rate resulting in an 8-hr TLV would be 20 mL/min at a peak inhalation flow rate of 58 L/min. The Draeger leak test, therefore, can be considered very conservative.

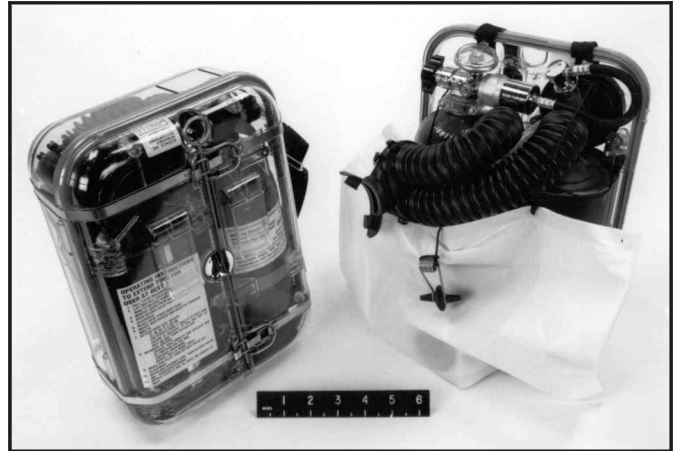


Figure 5.—Cased and uncased Ocenco EBA 6.5 self-rescuer.



Figure 6.—Cased and uncased Ocenco M-20 self-rescuer.

PRL selected the participating mines with regard to type of mining operation, coalbed height, and SCSR deployment mode in order to obtain a wide range of deployment impact. Deployment modes included permanent storage on the ground, on a mantrip or mining machine, or belt-worn.

The BMS test consisted of the average metabolic work rate exhibited by the 50th-percentile miner weighing 87 kg while performing the 1-hr man test 4 as described in 42 CFR 84. In the treadmill testing, the human subjects walked at whatever speed and grade resulted in an O<sub>2</sub> consumption rate of 1.35 L/min. The CO<sub>2</sub> production rate, ventilation rate, and respiratory frequency varied in the test subjects. The metabolic workloads are given in table 2.

The parameters monitored were inhaled levels of CO<sub>2</sub> and O<sub>2</sub>, end-of-inhalation wet- and dry-bulb temperatures, and inhalation and exhalation peak breathing pressures in both the BMS and treadmill testing. In the BMS testing, however, *average* inhaled levels of gas concentration were measured, as opposed to *minimum* values of CO<sub>2</sub> and *maximum* values of O<sub>2</sub> in the treadmill testing. *Average* inhaled gas levels include the effect of apparatus dead space, whereas *minimum* values of



Table 2.—BMS and human-subject metabolic parameters

Metabolic workload	BMS	Subject A	Subject B	Subject C
O <sub>2</sub> consumption rate . . . . . L/min . .	1.35	1.35	1.35	1.35
CO <sub>2</sub> production rate . . . . . L/min . .	1.30	1.12	1.18	1.15
Ventilation rate . . . . . L/min . .	30.0	27	22	30
Tidal volume . . . . . L/breath . .	1.68	1.59	2.20	3.33
Respiratory frequency . . . breaths/min . .	17.9	17	10	9
Peak respiratory flow rate:				
Inhalation . . . . . L/min . .	89	( <sup>1</sup> )	( <sup>1</sup> )	( <sup>1</sup> )
Exhalation . . . . . L/min . .	71	( <sup>1</sup> )	( <sup>1</sup> )	( <sup>1</sup> )

<sup>1</sup>Not measured.

CO<sub>2</sub>, for example, are only the lowest level of gas concentration during inhalation. The BMS measures average inhaled values by electronically summing all of the CO<sub>2</sub> and O<sub>2</sub> over each inhalation cycle, weighted by the instantaneous flow rate. The BMS also measures minimum inhaled CO<sub>2</sub> levels.

Tests on the BMS were terminated upon exhaustion of the O<sub>2</sub> supply as indicated by negative pressures reaching -200 mm H<sub>2</sub>O, coinciding with an empty breathing bag. Some BMS tests

were terminated when average inhaled CO<sub>2</sub> levels reached 10% or O<sub>2</sub> levels went below 15%. Treadmill tests were terminated in the same manner, but using a limit of 4% minimum inhaled CO<sub>2</sub> or if the test subject stopped because of subjectively high breathing pressures or temperatures. Because the BMS is unaffected by high CO<sub>2</sub> levels, in order to gain more information about the performance of an apparatus, tests were continued to the higher CO<sub>2</sub> level in BMS testing.

## RESULTS AND DISCUSSIONS

Experience with each model of apparatus is discussed separately. The minute-average values of the monitored stressors were averaged over the entire test duration and are presented graphically (figures 7-11) for each apparatus by stressor. The values for new units tested on the BMS can be compared with those for deployed units tested on the BMS and, to some extent, with those for deployed units tested on human subjects on a treadmill, which are plotted afterward. Because human subjects may differ from each other and from the BMS in terms of CO<sub>2</sub> production rate, ventilation rate, and respiratory frequency, all of which affect apparatus duration as well as all of the monitored stressors, these tests cannot be considered equivalent to the BMS tests even though the O<sub>2</sub> consumption rate is the same. Missing data points for wet-bulb temperature indicate equipment malfunction or inability to instrument apparatus.

The Wilcoxon rank-sum test was performed for each monitored stressor to determine whether the deployed units behaved differently from new units. It tests the hypothesis that the two samples are from populations with the same mean. The values from both samples are ranked in ascending order of magnitude. If the sum of the ranks of the smaller sample (T) (in this case, new units) falls within the acceptable range for the given sample sizes, then there is not sufficient evidence at the specified probability level ( $\alpha = .05$ , two-sided) to say that the means of the two samples differ. The rank-sum test does not rely upon the assumptions that either the new- or deployed-unit data are normal distributions or that they have identical variances, as does the t-test for two populations of independent

samples. One limitation of the Wilcoxon rank-sum test is that it does not distinguish between large and small differences in values. The results of the two-sided,  $\alpha = 0.05$ , Wilcoxon rank-sum tests are presented in table 3. The probability of T, the rank sum of the new units, falling outside the given range is 0.05 if the populations have the same mean.

### CSE SR-100

Three deployed apparatus tests had instrument problems, and their data were not used. Regarding leak testing, 17 of 25 deployed units passed, and 3 of 4 new apparatus passed.

The Wilcoxon rank-sum test for average inhaled CO<sub>2</sub> showed a significant difference between new and deployed units, with deployed units having higher values than new ones (table 3). This was also found to be true in the previous phase of this study [Kyriazi and Shubilla 1996].

Table 4 shows that 19 of 24 apparatus tested on the BMS experienced CO<sub>2</sub> breakthrough before expenditure of the O<sub>2</sub> supply; 15 of these occurred before 60 min. Of the new units, two of four experienced premature breakthrough, but only by several minutes and neither before 60 min. The effect of high inhaled levels of CO<sub>2</sub> will be increased ventilation rates in most users. Increased ventilation rates will result in higher breathing pressures experienced by the user, possibly resulting in premature removal of the apparatus. Breathing pressures in the SR-100 increase rapidly toward end-of-life even in new apparatus; elevated CO<sub>2</sub> levels will accelerate this rise.

Table 3.—Wilcoxon rank-sum test results

Apparatus	Duration		Average inhaled CO <sub>2</sub>		Average inhaled O <sub>2</sub>		Wet-bulb temperature		Dry-bulb temperature		Inhalation pressure		Exhalation pressure	
	Range	T	Range	T	Range	T	Range	T	Range	T	Range	T	Range	T
SR-100 . . . . .	28-88	55	28-88	26	28-88	44	28-88	55	28-88	75	28-88	28	28-88	31
OXY K Plus . . . . .	8-28	7	7-26	16	8-28	14	8-28	11	8-28	21	8-28	10	8-28	11
Portal-Pack . . . . .	7-26	15	7-26	20	7-26	24	7-26	21	7-26	25	7-26	23	7-26	21
EBA 6.5 . . . . .	13-53	23	13-53	18	13-53	19	13-53	18	13-53	26	13-53	46	13-53	43
M-20 . . . . .	8-31	19	8-31	14	8-31	18	8-31	33	8-31	33	8-31	18	8-31	12

T = Sum of the ranks of the smaller sample (new units).

Table 4.—CSE SR-100 CO<sub>2</sub> breakthrough times, minutes

Type of unit and test method	CO <sub>2</sub> breakthrough time	Test duration	Maximum CO <sub>2</sub>
Deployed: BMS . . . . .	29	63	7.9
	42	62	8.1
	12	50	10.2
	32	51	8.5
	55	65	7.3
	56	65	6.5
	59	65	6.1
	57	64	8.0
	60	73	9.9
	46	65	7.3
	49	66	8.6
	57	65	7.0
	37	63	10.6
	34	66	10.3
	34	59	10.5
	69	70	4.8
	29	71	11.9
66	71	6	
69	69	4.3	
Deployed: Human subject on treadmill . . . . .	60	60	4
New: BMS . . . . .	64	65	4.8
	63	66	5.1

CO<sub>2</sub> breakthrough for BMS - 4% average inhaled; for treadmill - 4% minimum inhaled.

The termination of one treadmill test (human subject C) at 40 min was for high breathing pressures (-480 to +210 mm H<sub>2</sub>O) even though there was sufficient volume in the breathing bag to permit continued use. This occurred with minimum inhaled CO<sub>2</sub> levels of only 0.9%. This unit was dissected at CSE Corp.'s facility and found to have a canister dented on three sides; this damage was not evident from external inspection according to present inspection criteria. As a result of this incident, the manufacturer has added an inspection criterion to closely inspect the end-cap seals for damage. Another treadmill test was terminated at 60 min when the minimum inhaled CO<sub>2</sub> level reached 4% with unmeasured *average* inhaled level necessarily higher. This test subject also coughed repeatedly at the start of the test, but was able to continue.

One unit had to be manually started by exhaling several times into the mouthpiece when the starter O<sub>2</sub> cylinder provided no O<sub>2</sub> to the breathing circuit.

Two units had breathing hoses that were stuck together and required some effort to open them for use. One also required some effort to remove the case top and bottom.

## DRAEGER OXY K PLUS

All deployed and new units tested failed the leak-tightness test. The Wilcoxon rank-sum tests showed that the durations of the new units were statistically significantly lower than those of the deployed units. If deployment caused the bed chemical to break into smaller particles, resulting in more surface area, this could cause better chemical utilization, resulting in longer duration. It might also result in higher breathing pressures. Since this was not found to be the case, longer durations on deployed apparatus are not viewed as a problem.

One deployed apparatus reached an average inhaled CO<sub>2</sub> level of 4% at 81 min before exhaustion of the oxygen supply at 83 min (table 5). No new units experienced CO<sub>2</sub> breakthrough.

Table 5.—Draeger OXY K Plus CO<sub>2</sub> breakthrough times, minutes

Type of unit and test method	CO <sub>2</sub> breakthrough time	Test duration	Maximum CO <sub>2</sub>
Deployed: BMS . . . . .	81	83	4.4

CO<sub>2</sub> breakthrough for BMS - 4% average inhaled; for treadmill - 4% minimum inhaled.

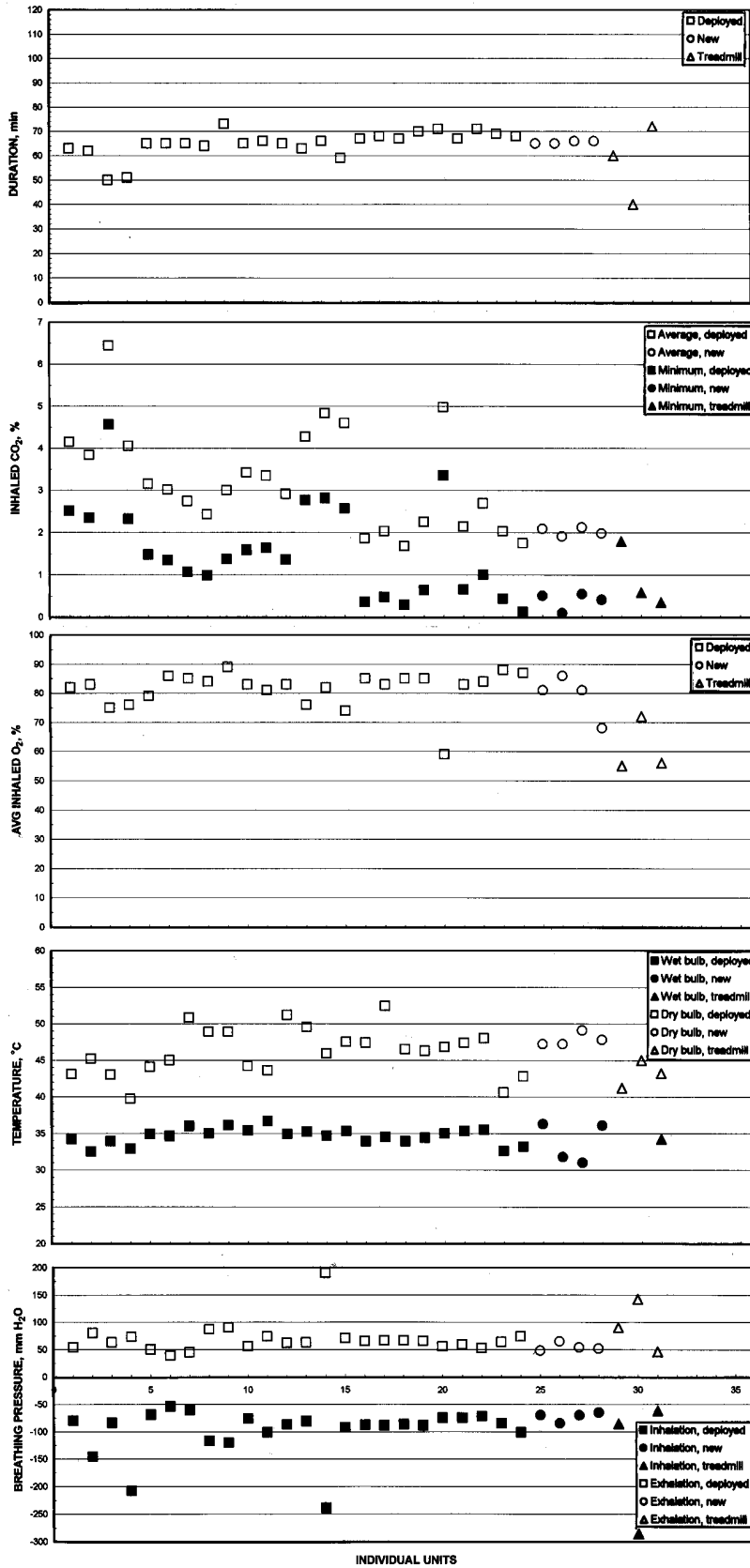


Figure 7.—CSE SR-100 test results.

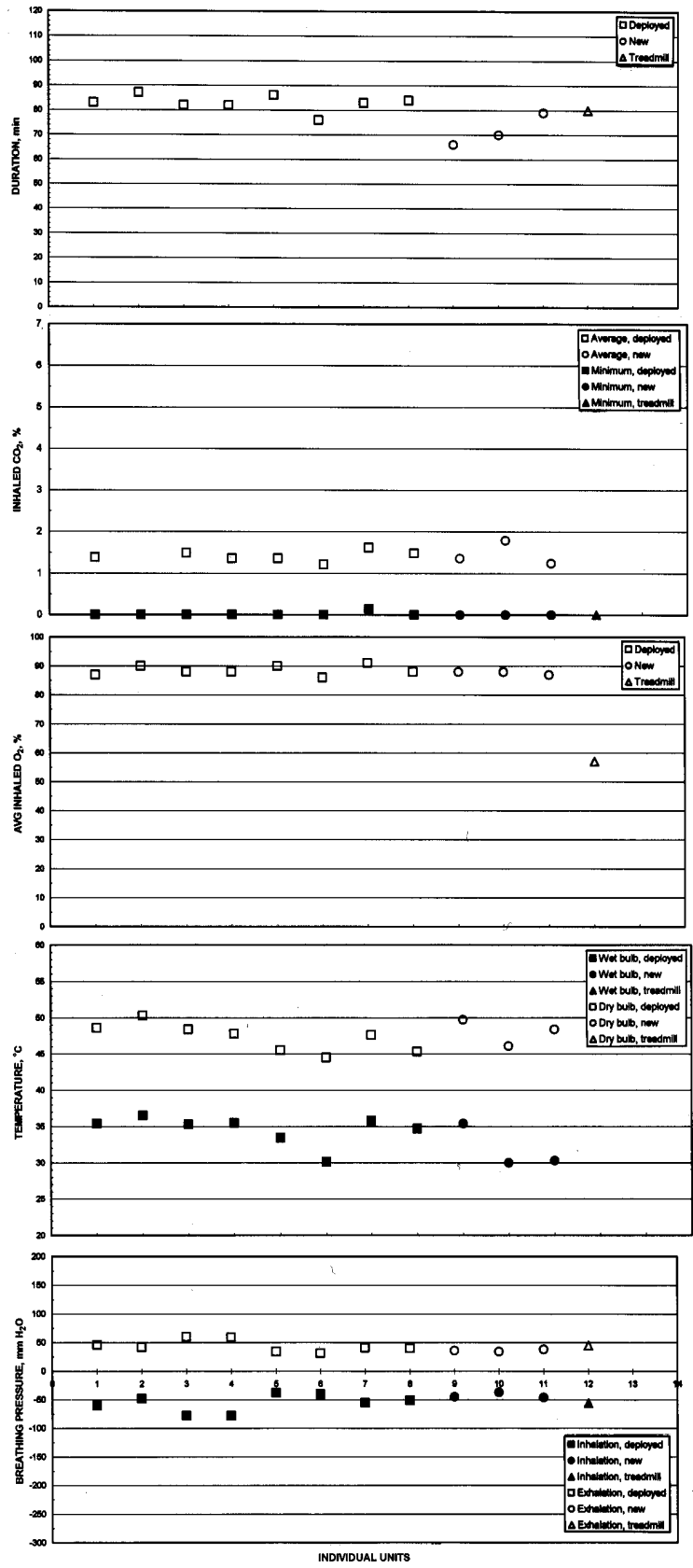


Figure 8.—Draeger OXY K Plus test results.

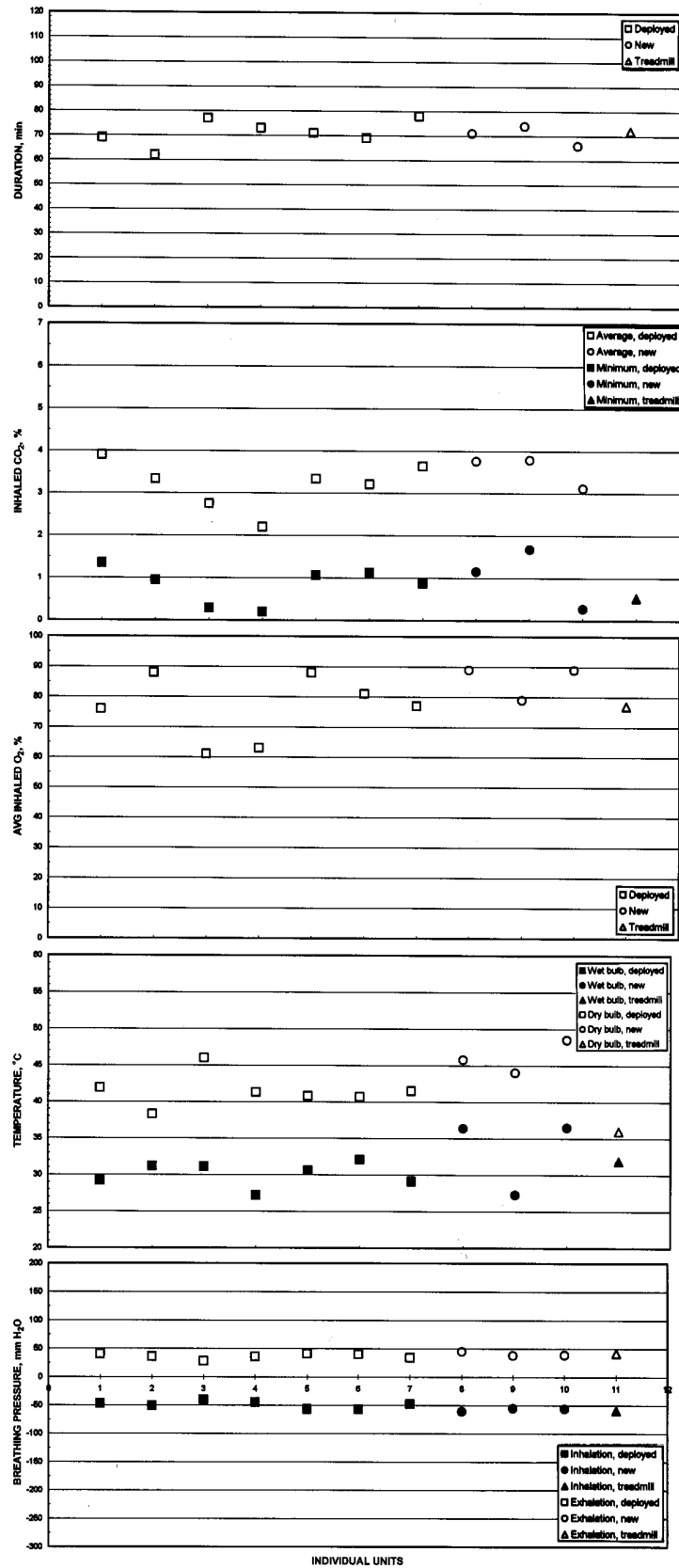


Figure 9.—MSA Portal-Pack test results.

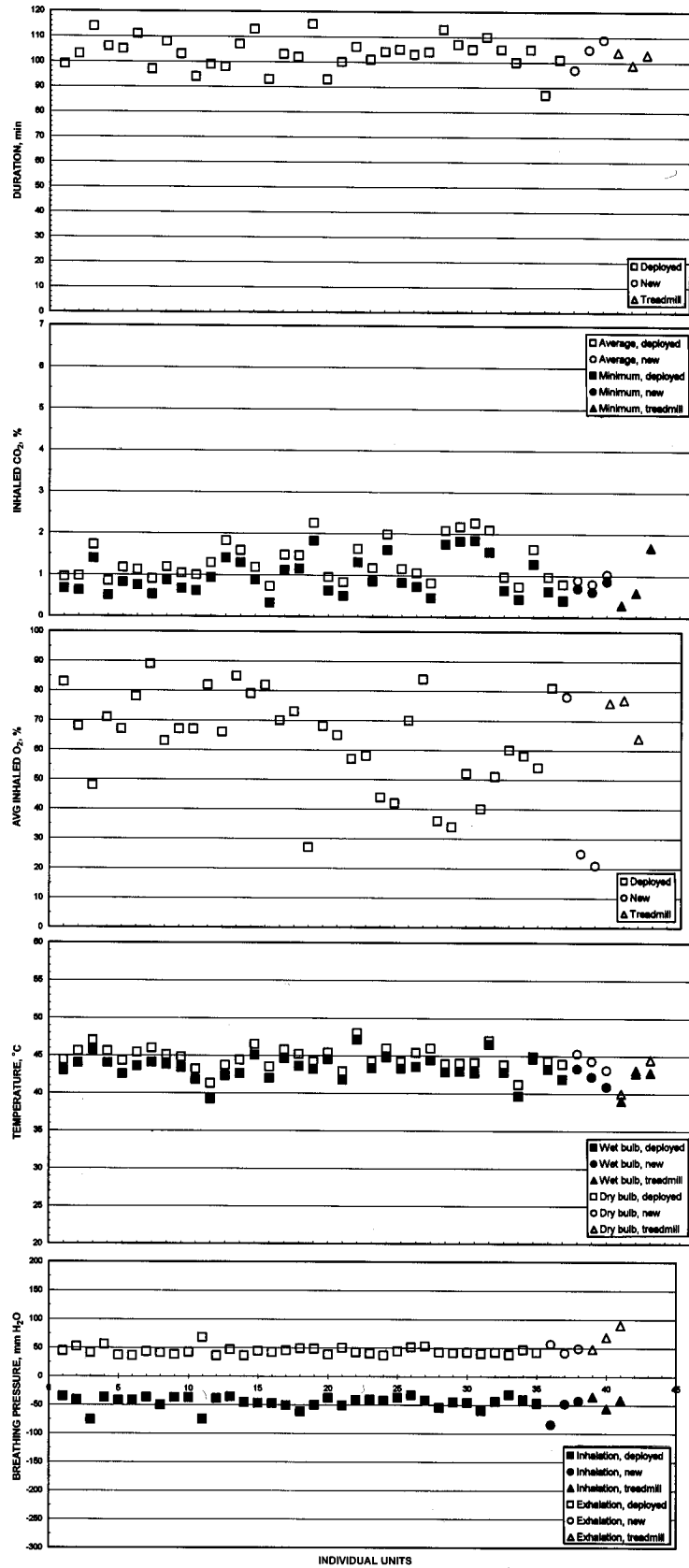


Figure 10.—Ocenco EBA 6.5 test results.

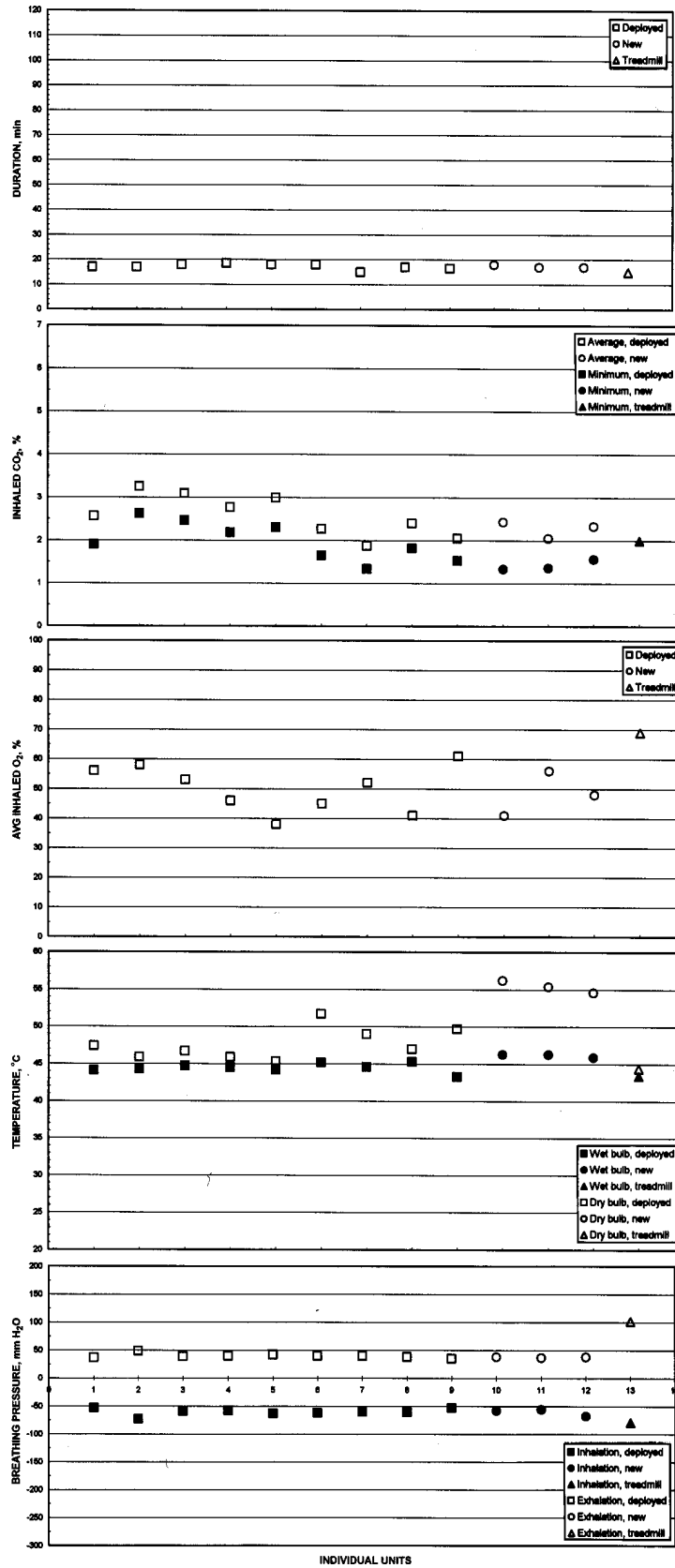


Figure 11.—Ocenco M-20 test results.

**MSA PORTAL-PACK**

Three deployed units evidenced potassium superoxide (KO<sub>2</sub>) dust in their mouthpieces; two of these were dissected without testing at MSHA's request to inspect for damage. The other unit was tested on the BMS and was found to perform normally. Exhaling 5 to 10 times into the breathing hose of an apparatus found to have fine dust in the mouthpiece wets down the dust, permitting the apparatus to be worn. However, the certification agencies, after inspecting a number of other units, decided that this was too much to expect of a user in an emergency and de-certified the apparatus after they could all be replaced with the new MSA Life-Saver 60 or other certified SCSR.

Of seven deployed apparatus tested for leaks, six failed while all of the three new apparatus passed. The Wilcoxon rank-sum tests showed that new units did not perform differently from deployed units in any performance measure.

All deployed and new units tested on the BMS reached 4% CO<sub>2</sub> before the O<sub>2</sub> supply was expended; five of the deployed and two of the new units occurred before 60 min (table 6).

Activation of the sodium chlorate candle, which provides an initial volume of oxygen, sometimes results in visible white smoke emanating from the mouthpiece. This occurred in the treadmill test, and the test subject did not want to breathe the smoke. Instead, after the smoke stopped, a manual start was performed consisting of exhaling into the mouthpiece eight times and then donning the apparatus. The test subject reported feeling nauseated for the first 10 min of wear and terminated the test at 72 min after feeling light-headed. All measured stressors were within acceptable ranges, although minimum inhaled CO<sub>2</sub> levels were climbing and reached 2.1% by test termination. It should also be noted that, because of large apparatus dead space, average inhaled CO<sub>2</sub> levels would be significantly higher than this. The difference between minimum and average inhaled CO<sub>2</sub> levels with a 1.67-L tidal volume as used in the BMS tests is approximately 2%.

**OCENCO EBA 6.5**

Ten apparatus were found to have been altered from their original manufacturer's condition. The units had been opened, their service life indicators changed to extend their service lives, some components replaced, and then reassembled without applying new tamper seals. Some of these units exhibited cracks in their cases, dents in their canisters, had lithium hydroxide (LiOH) dust in their mouthpieces and breathing bags and had very high breathing circuit leak rates. Several apparatus were tested on the BMS before we discovered that they had been altered; they performed normally, however. The perpetrator of the unauthorized alterations was discovered and ordered by MSHA to stop.

Two of the thirty-eight deployed apparatus tested for breathing circuit tightness passed the leak test; none of the three new apparatus passed. Many units passed the test

when their relief valves were capped, however, implying backflow through the valves.

The Wilcoxon rank-sum tests showed that, in all performance measures, new units could not be distinguished from deployed units.

Twenty-two deployed units tested on the BMS and one on the treadmill reached average inhaled levels of 4% CO<sub>2</sub> before the O<sub>2</sub> supply was expended; none occurred before 60 min (table 7). No new units experienced this phenomenon.

The large range of average inhaled O<sub>2</sub> level test averages is due to the difference in the apparatus O<sub>2</sub> regulator flow rates, which ranged in this phase from 1.51 to 2.62 L/min ATPD (approximately 1.36 to 2.36 L/min STPD). The O<sub>2</sub> concentration in a breathing circuit will rise if the O<sub>2</sub> supply rate is higher than the O<sub>2</sub> consumption rate.

**Table 6.—MSA Portal-Pack CO<sub>2</sub> breakthrough times, minutes**

Type of unit and test method	CO <sub>2</sub> breakthrough time	Test duration	Maximum CO <sub>2</sub>
Deployed: BMS . . .	43	69	10
	47	62	10
	72	77	4.5
	72	73	4.9
	50	71	10
	49	69	7.3
	51	78	9.1
New: BMS . . . . .	49	71	11.5
	54	74	15.8
	61	66	4.6

CO<sub>2</sub> breakthrough for BMS - 4% average inhaled; for treadmill - 4% minimum inhaled.

**Table 7.—Ocenco EBA 6.5 CO<sub>2</sub> breakthrough times, minutes**

Type of unit and test method	CO <sub>2</sub> breakthrough time	Test duration	Maximum CO <sub>2</sub>
Deployed: BMS . . .	102	103	4.2
	106	114	5.7
	105	105	4
	111	111	4
	96	97	4.3
	104	108	5.1
	102	103	4.4
	94	94	4
	97	99	4.2
	92	107	7.1
	107	113	5.3
	93	103	6.7
	92	102	7.2
	94	115	8.3
	94	106	7.7
	88	104	9.3
	102	103	4.2
	99	113	5.8
	91	107	5.9
	87	105	6.2
97	110	5.5	
94	105	8	
Deployed: Human subject on treadmill . .	103	103	4

CO<sub>2</sub> breakthrough for BMS - 4% average inhaled; for treadmill - 4% minimum inhaled.



## OCENCO M-20

Of the nine deployed units tested for leak tightness, four passed; of the three new units, one passed. All except one deployed BMS-tested apparatus, all of the new BMS-tested apparatus, and the one treadmill-tested apparatus experienced average inhaled CO<sub>2</sub> levels of 4% before exhaustion of the oxygen supply (table 8).

The Wilcoxon rank-sum tests revealed that the wet- and dry-bulb temperatures of new units were statistically significantly higher than those of the deployed units. This is not viewed as a problem.

The breathing bag and mouthpiece of one unit had somewhat taken a set in their folded packing orientations, but not to the extent that donning of the apparatus was compromised.

**Table 8.—Ocenco M-20 CO<sub>2</sub> breakthrough times, minutes**

Type of unit and test method	CO <sub>2</sub> breakthrough time	Test duration	Maximum CO <sub>2</sub>
Deployed: BMS . . . . .	14.5	17	6.6
	13.5	17	6.7
	14	18	6.9
	15	18.5	6.2
	15	18	5.3
	15	18	5.7
	15	17	4.8
Deployed: Human subject on treadmill . . . . .	14	15	4.4
	15.5	18	6.6
New: BMS . . . . .	15.5	17	5.2
	15	17	5.8
	15	17	5.8

CO<sub>2</sub> breakthrough for BMS - 4% average inhaled; for treadmill - 4% minimum inhaled.

## CONCLUSIONS

The results of this sixth-phase SCSR test study at PRL suggest that the large majority of SCSRs that pass their inspection criteria can be relied upon to provide a safe level of life support capability to allow miners to escape safely during a mine emergency. However, the mining environment seems to have caused some performance degradation in the CSE SR-100 and the MSA Portal-Pack. Several Portal-Packs were found to have KO<sub>2</sub> dust in their mouthpieces. NIOSH-Morgantown and MSHA, after finding more instances of this problem, decided to decertify the Portal-Pack. CO<sub>2</sub> levels were found to be higher in deployed CSE SR-100s than in new ones (table 3 and figure 7). No

statistically significant worsening in any other performance category was detected in the SR-100 or any other apparatus. The SR-100 has been belt-worn longer than any other SCSR. It may be that this type of impact is in store for all belt-worn apparatus and will become evident as other belt-worn apparatus have more field time.

The smoke sometimes emitted from the chlorate candle of the MSA Portal-Pack may suggest that the apparatus is malfunctioning and lead the user to abandon it. Since the apparatus is no longer being used, the point is moot, but should be remembered by manufacturers in future design efforts.

## ACKNOWLEDGMENTS

Without the cooperation of the coal mines and MSHA field offices, this study would not be possible. The following coal mines and MSHA field offices participated in the sixth phase of this study:

Cooperating mine or MSHA office		Assisting MSHA office
Mining company	Mine name	
MSHA District 2:		
Rosebud Mining Co. . . . .	Rosebud No. 3 . . . . .	Kittanning, PA, Field Office.
Rosebud Mining Co. . . . .	Roaring Run . . . . .	Kittanning, PA, Field Office.
Dunkard Mining Co. . . . .	Dunkard Mine . . . . .	Waynesburg, PA, Field Office.
Canterbury Coal Co. . . . .	DiAnne Mine . . . . .	Indiana, PA, Field Office.
Consolidation Coal Co. . . . .	Bailey Mine . . . . .	Washington, PA, Field Office.
Consolidation Coal Co. . . . .	Enlow Fork Mine . . . . .	Washington, PA, Field Office.
MSHA . . . . .	Johnstown, PA, Field Office . . . . .	—
MSHA District 4:		
Elk Run Coal Co. . . . .	White Knight Mine . . . . .	Mt. Hope, WV, Field Office.
Eastern Associated Coal Corp. . . . .	Harris No. 1 . . . . .	Mt. Hope, WV, Field Office.
Maple Meadow Mining Co. . . . .	Maple Meadow Mine . . . . .	Mt. Hope, WV, Field Office.
Mystic Energy, Inc. . . . .	Candice 2 Mine . . . . .	Madison, WV, Field Office.
RWJ Mining, Inc. . . . .	Mine No. 7 . . . . .	Princeton, WV, Field Office.
DuPaul Resources, Inc. . . . .	Mine No. 1 . . . . .	Pineville, WV, Field Office.
Terry Eagle Coal Co. . . . .	Bald Eagle No. 1 Mine . . . . .	Summerville, WV, Field Office.
MSHA District 5:		
Crystal Bay Corp. . . . .	Mine No. 2 . . . . .	Richlands, VA, Field Office.
Island Creek Coal Co. . . . .	Virginia Pocahontas No. 3 . . . . .	Richlands, VA, Field Office.
Lebo Mining, Inc. . . . .	Mine No. 5 . . . . .	Norton, VA, Field Office.
MSHA District 9:		
Twentymile Coal Co. . . . .	Foidel Creek Mine . . . . .	Price, UT, Field Office.
MSHA District 11:		
U.S. Steel Mining Co. . . . .	Oak Grove Mine . . . . .	Hueytown, AL, Field Office.

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