

Exposure Mitigation Checklist

Completion status	Procedure Step	
<i>At Patient Home</i>		
<input type="checkbox"/>	<p>Don PPE</p> <p>Tier 1 for basic medical responses</p> <p>Tier 2 for suspected COVID-19 patient or if invasive procedure to be done</p>	<p>Tier 1:</p> <ul style="list-style-type: none"> ● Gloves ● Mask ● Eye shield <p>Tier 2:</p> <ul style="list-style-type: none"> ● Disposable gown ● Boot covers ● N95 respirator
<input type="checkbox"/>	Provide mask to patient	
<input type="checkbox"/>	Move patient to open-air area if ambulatory	<ul style="list-style-type: none"> ● 6-12 foot distance ● Bring in only necessary equipment ● Minimize number of personnel for suspected COVID-19 cases
<i>Loading/Transporting Patient</i>		
<input type="checkbox"/>	Wrap patient, with one arm out for vitals	<ul style="list-style-type: none"> ● Limit their contact with gurney
<input type="checkbox"/>	Driver: doff PPE before driving	
<i>After the Call</i>		
<input type="checkbox"/>	<p>Disinfect equipment</p> <p><u>Cabin:</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Grab bars <input type="checkbox"/> Counter tops <input type="checkbox"/> Seatbelts <input type="checkbox"/> Gurney <input type="checkbox"/> Chords <input type="checkbox"/> Screens <input type="checkbox"/> Keyboards <input type="checkbox"/> Seats <input type="checkbox"/> Handles <p><u>Cab:</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Radio <input type="checkbox"/> Steering wheel <input type="checkbox"/> Keys <input type="checkbox"/> Gear shift <input type="checkbox"/> Door handles <input type="checkbox"/> Seatbelts <p><u>Personal items:</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Cell phone <input type="checkbox"/> Glasses/sunglasses 	<ul style="list-style-type: none"> ● Use EPA-registered surface disinfectants ● Observe proper contact time (time for surface to remain wet before drying) ● Use disposable towels if using spray
<input type="checkbox"/>	Wash hands (at least 20 seconds)	
<input type="checkbox"/>	<u>Before entering the station:</u> Remove boots	
<input type="checkbox"/>	Use hand sanitizer (enough to cover front and back of hands)	
<input type="checkbox"/>	If patient was suspected to be highly infectious, document the call with department SOP	



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& Risk Assessment Center**