



POSITIVE EVD HEALTH SCREENING
SAFETY OFFICER CHECKLIST

Effective: December 8, 2014
Replaces: New
Review: November, 2017

Purpose:

This checklist is to be used by the personnel assigned to the Safety Officer position at incidents in which a patient is positive for the EVD Health Screening Questions. Completion of the checklist ensures that all needed tasks are completed. The Incident Commander shall fill any unassigned roles.

Resources:

- Policy 700-S09: Infectious Disease Control Measures*
- Policy 916: Positive EVD Health Screening Incident Commander Checklist*
- Policy 918: Positive EVD Health Screening Ambulance Operator Checklist*

Completed By: _____ **Date:** _____

I. Initial Actions:

Action #	Tasks	Time	Initial
1.	The entire contents of this checklist must be completed and submitted to your supervisor/agency chief upon completion.		
2.	Establish and maintain communication with Incident Commander, Ambulance Operator, and patient care providers.		
3.	Don Standard Precautions and remain a minimum of 3 feet from the patient.		
4.	Collect all personal items (e.g., jewelry, watches, cell phones, pagers, pens) from responders that will be donning full High Risk PPE.		
	A. Place all items into a clear plastic bag		
	B. Document Items:		

II. PPE Donning Actions:

Action #	Tasks	Time	Initial
1.	<p>Inspect PPE prior to donning:</p> <p>A. Visually inspect the PPE ensemble to be worn to ensure that it is in serviceable condition, that all required PPE and supplies are available.</p> <p>B. Ensure PPE is correct sizes for care providers.</p> <p>C. Review the donning sequence (Section II) with the providers before they begin the donning process in a step-by-step fashion.</p>		
2.	Have patient care providers perform hand hygiene using an alcohol based hand rinsing solution.		
3.	Put on inner gloves		
4.	<p>Put on coverall or gown:</p> <p>A. Ensure gown or coverall is large enough to allow the user to perform patient care activities.</p> <p>B. Ensure cuffs of inner gloves are tucked under the sleeve of the gown or coverall.</p> <p>C. If needed to cover exposed skin; a single-use (disposable) hood that extends to the shoulders and fully covers the neck must also be used. Be sure that the hood covers all of the hair and the ears, and that it extends past the neck to the shoulders.</p>		
5.	Put on boot or shoe covers		
6.	Put on Outer Gloves: Put on second pair of gloves (with extended cuffs). Ensure the cuffs are pulled over the sleeves of the gown or coverall		
7.	Put on Respirator; don N95, P100, or PAPR as indicated in Policy. Ensure that mask is sealed on providers with no air escaping around sides.		
8.	Put on Outer Apron (if used): Put on full-body apron to provide additional protection to the front of the body against exposure to body fluids or excrement from the patient.		
9.	Put on Face Shield (N95 and P100 only): Put on full face shield over the N95 or P100 respirator and surgical hood to provide additional protection to the front and sides of the face, including skin and eyes.		
10.	Verify: The care provider should be able to conduct all patient care activities while all areas of the body remain covered.		
11.	Observe: Observe responders from a distance of at least 3 feet and outside of the patient care area for breaks, tears, or failures of PPE. Maintain observation until patient is secured in the back of the ambulance and departing the scene.		

Action #	Tasks	Time	Initial
12.	Hand Off: Hand off responsibilities to ambulance personnel.		
13.	Hand off personal belongings to Ambulance Operator: Name(s) of person (s) to whom Items were returned:		
14.	Continue to monitor safety of all personnel remaining on scene		

III. PPE Doffing and Demobilization Actions:

Action #	Tasks	Time	Initial
1.	Doffing shall occur at a hospital in a designated PPE removal area for all care providers whenever possible: A. Providers shall place all PPE waste in a leak proof infectious waste container. B. Prior to doffing PPE, remind providers to avoid reflexive actions that may put them at risk, such as touching their face.		
2.	Inspect PPE prior to doffing: A. Inspect the PPE to assess for visible contamination, cuts, or tears before starting to remove. B. Review the doffing sequence with the providers before they begin the doffing process in a step-by-step fashion. C. Disinfect the PPE using a 0.5% bleach solution.		
3.	Disinfect Outer Gloves: Disinfect outer-gloved hands with a 0.5% bleach solution.		
4.	Remove Apron (if used): Remove and discard apron taking care to avoid contaminating gloves by rolling the apron from inside to outside.		
5.	Inspect: Following apron removal, inspect the PPE ensemble to assess for visible contamination or cuts or tears. If visibly contaminated, then disinfect affected PPE using a 0.5% bleach solution.		
6.	Disinfect Outer Gloves Again: Disinfect outer-gloved hands with a 0.5% bleach solution.		
7.	Remove Boot or Shoe Covers: While sitting down, remove and discard boot or shoe covers.		
8.	Disinfect and Remove Outer Gloves: Disinfect outer-gloved hands with a 0.5% bleach solution. Remove and discard outer gloves taking care not to contaminate inner gloves during removal process.		
9.	Inspect and disinfect Inner gloves: Inspect the inner gloves' outer surfaces for visible contamination, cuts, or tears. If an inner glove is visibly soiled, cut, or torn, then disinfect the glove with a 0.5% bleach solution. Disinfect gloved hands with a 0.5% bleach solution. Then remove the inner gloves, perform hand hygiene with an alcohol based hand rinsing solution on bare hands, and don a clean pair of gloves		
10.	Remove Face Shield: Remove the full face shield by tilting the head slightly forward, grabbing the rear strap and pulling it over the head, gently allowing the face shield to fall forward and discard. Avoid touching the front surface of the face shield.		
11.	Disinfect Inner Gloves Again: Disinfect gloved hands with a 0.5% bleach solution.		

Action #	Tasks	Time	Initial
12.	Remove Surgical Hood: Unfasten (if applicable) surgical hood, gently remove, and discard. The trained observer may assist with unfastening hood.		
13.	Disinfect Inner Gloves Again: Disinfect gloved hands with a 0.5% bleach solution.		
14.	Remove Gown or Coverall: Remove and discard. A. Depending on gown design and location of fasteners, the provider can either untie fasteners, receive assistance by the trained observer to unfasten to gown, or gently break fasteners. Avoid contact with outer surface of gown during removal. Pull gown away from body, rolling inside out and touching only the inside of the gown. B. To remove coverall, tilt head back to reach zipper or fasteners. Unzip or unfasten coverall completely before rolling down and turning inside out. Avoid contact of scrubs with outer surface of coverall during removal, touching only the inside of the coverall.		
15.	Disinfect and Change Inner Gloves: Disinfect gloved hands with a 0.5% bleach solution. Remove and discard gloves taking care not to contaminate bare hands during removal process. Perform hand hygiene with an alcohol based hand rinsing solution. Don a new pair of inner gloves.		
16.	Remove N95 or P100 Respirator: Remove the N95 or P100 respirator by tilting the head slightly forward, grasping first the bottom tie or elastic strap, then the top tie or elastic strap, and remove without touching the front of the N95 or P100 respirator. Discard N95 P100 respirator.		
17.	Disinfect and Remove Inner Gloves: Disinfect gloved hands with a 0.5% bleach solution. Remove and discard gloves taking care not to contaminate bare hands during removal process.		
18.	Inspect: Perform a final inspection of providers for any indication of contamination of the surgical scrubs or disposable garments. If contamination is identified, immediately inform the Incident Commander. The Incident Commander shall take the following actions: Request additional resources to assist in decontamination. Notify the EMS Duty Chief through County Communications and request advice from the Public Health Officer. Advise supervisors or agency chiefs of affected providers. Complete unprotected exposure reports as per agency protocols and procedures. Follow any additional actions as recommended by the Public Health Officer		
19.	Perform hand hygiene using an alcohol based hand rinsing solution.		
20.	Submit all documentation to supervisor or agency chief (All documentation must be submitted by responding agency to the EMS Duty Chief within 24 hours.) Name:		