

# Exposure Mitigation Checklist

Completion status	Procedure Step	
<i>At Patient Home</i>		
<input type="checkbox"/>	<b>Don PPE</b>  Tier 1 for basic medical responses  Tier 2 for suspected COVID-19 patient or if invasive procedure to be done	Tier 1: <ul style="list-style-type: none"> <li>● Gloves</li> <li>● Mask</li> <li>● Eye shield</li> </ul> Tier 2: <ul style="list-style-type: none"> <li>● Disposable gown</li> <li>● Boot covers</li> <li>● N95 respirator</li> </ul>
<input type="checkbox"/>	Provide mask to patient	
<input type="checkbox"/>	Move patient to open-air area if ambulatory	<ul style="list-style-type: none"> <li>● 6-12 foot distance</li> <li>● Bring in only necessary equipment</li> <li>● Minimize number of personnel for suspected COVID-19 cases</li> </ul>
<i>Loading/Transporting Patient</i>		
<input type="checkbox"/>	Wrap patient, with one arm out for vitals	<ul style="list-style-type: none"> <li>● Limit their contact with gurney</li> </ul>
<input type="checkbox"/>	Driver: doff PPE before driving	
<i>After the Call</i>		
<input type="checkbox"/>	<b>Disinfect equipment</b>  <u>Cabin:</u> <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  <u>Cab:</u> <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  <u>Personal items:</u> <input type="checkbox"/> Cell phone <input type="checkbox"/> Glasses/sunglasses	<ul style="list-style-type: none"> <li>● Use EPA-registered surface disinfectants</li> <li>● Observe proper contact time (time for surface to remain wet before drying)</li> <li>● Use disposable towels if using spray</li> </ul>
<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**