HEALTHCARE PERSONNEL AND VISITOR MONITORING LOG
Suspected or Confirmed COVID-19
04/29/2020

SIH

Place Patient Sticker Here

Instructions: This log should be completed by every healthcare worker and visitor accessing the room of a COVID-19 patient. This log is to help healthcare providers and local health department personnel make sure that providers and visitors are protected from the virus and keep track of people who may have been exposed to the virus.

NAME Of Healthcare Personnel or Visitor	Date	Time In 0000-2300	Time Out 0000-2300	PPE Required	Additional PPE for Aerosol Generating Procedures [Neg Pressure preferred]	Any identified exposures or breaches in infection control? (If yes, explain in comments)	Relationship to patient (HCP or Visitor)	Phone number (if visitor)	Comments
				□ CAPR □ N95 & Goggles* □ N95 & Face Shield □ Gloves □ Gown	□ *Procedure mask placed over N95 when goggles in use	□ Yes □ No	□ HCP □ Visitor		
				□ CAPR □ N95 & Goggles* □ N95 & Face Shield □ Gloves □ Gown	□ *Procedure mask placed over N95 when goggles in use	□ Yes □ No	□ HCP □ Visitor		
				□ CAPR □ N95 & Goggles* □ N95 & Face Shield □ Gloves □ Gown	□ *Procedure mask placed over N95 when goggles in use	□ Yes □ No	□ HCP □ Visitor		
				□ CAPR □ N95 & Goggles* □ N95 & Face Shield □ Gloves □ Gown	□ *Procedure mask placed over N95 when goggles in use	□ Yes □ No	□ HCP □ Visitor		
				□ CAPR □ N95 & Goggles* □ N95 & Face Shield □ Gloves □ Gown	□ *Procedure mask placed over N95 when goggles in use	□ Yes □ No	□ HCP □ Visitor		
				□ CAPR □ N95 & Goggles* □ N95 & Face Shield □ Gloves □ Gown	□ *Procedure mask placed over N95 when goggles in use	□ Yes □ No	□ HCP □ Visitor		
				□ CAPR □ N95 & Goggles* □ N95 & Face Shield □ Gloves □ Gown	□ *Procedure mask placed over N95 when goggles in use	□ Yes □ No	□ HCP □ Visitor		

Completed log must be sent to Occupational Health & Safety Supervisor

Author: Infection Prevention Med Tech Specialist