





## Health Care Facility Preparedness Checklist for Ebola Virus Disease (EVD)

All U.S. health care facilities need to be prepared for managing patients with infectious diseases such as Ebola virus disease (EVD). Facilities should review infection control policies and procedures and incorporate plans for administrative, environmental, and communication measures. Facilities should also define the individual work practices that will be required to detect the introduction of a patient with EVD or other emerging infectious disease, prevent spread, and manage the impact on patients, the facility, and staff.

The following checklist highlights some key areas for health care facilities to review in preparation for a person with EVD arriving for medical care. The checklist format is not intended to set forth mandatory requirements or establish national standards. In this checklist health care personnel (HCP) refers to all persons, paid and unpaid, working in healthcare settings who have the potential for exposure to patients and/or to infectious materials, including body substances, contaminated medical supplies and equipment, contaminated environmental surfaces, or contaminated air. HCP include, but are not limited to, physicians, nurses, nursing assistants, therapists, technicians, laboratory personnel, autopsy personnel, students and trainees, contractual personnel, and persons not directly involved in patient care (e.g., house-keeping, laundry, volunteers)

□ Monitor the situation at CDC's EVD website: http://www.cdc.gov/vhf/ebola/index.html ☐ Assess and ensure availability of appropriate personal protective equipment (PPE) and other infection control supplies (e.g., hand hygiene supplies) to all health care personnel (HCP) ☐ Review facility infection control policies for consistency with the Centers for Disease Control and Prevention's Infection Prevention and Control Recommendations for Hospitalized Patients with Known or Suspected EVD in U.S. Hospitals (http://www.cdc.gov/vhf/ebola/hcp/infection-prevention-andcontrol-recommendations.html). ☐ Review environmental cleaning procedures and provide education/refresher training for cleaning staff (http://www.cdc.gov/vhf/ebola/hcp/infection-prevention-and-control-recommendations.html) ☐ Begin education and refresher training for HCP on EVD signs and symptoms, diagnosis, how to obtain specimens for testing, appropriate PPE use (including putting on and taking off PPE), triage procedures (including patient placement), HCP sick leave policies, how and to whom EVD cases should be reported, and procedures to take following unprotected exposures (i.e., not wearing recommended PPE) to suspected EVD patients at the facility ☐ Review triage procedures and ensure relevant questions (e.g., exposure to case, travel within 21 days from affected country) are asked during the triage process for patients arriving with compatible illnesses (http://www.cdc.gov/vhf/ebola/hcp/case-definition.html) ☐ Ensure laboratories review procedures for appropriate specimen collection, transport, and testing of specimens from patients who are suspected to be infected with Ebola virus.

(http://www.cdc.gov/vhf/ebola/hcp/interim-guidance-specimen-collection-submission-patients-suspected-infection-ebola.html)
$\ \square$ Review policies and procedures for screening and work restrictions for exposed or ill HCP, and ensure that HCP have ready access to medical consultation, including via telephone.
□ Designate points of contact within the facility responsible for communicating with public health officials and providing internal updates for HCPs and volunteers.
☐ Confirm the local or state health department contacts for reporting EVD cases. EVD is a nationally notifiable disease and must be reported to local, state, and federal public health authorities.