List (1) and Log (2) for Healthcare Personnel that have Contact with Suspect and/or Confirmed COVID-19

1) LIST ALL STAFF WHO ARE/WERE IN CONTACT WITH PATIENT

Patient Sticker:	**Date:**
	Room #:

Instructions: List information for healthcare personnel that have patient contact. Utilize new sheet daily.

Name	Title	Department	Extension	Home phone	PPE worn

Fax completed forms daily to Employee Health at 802-447-5378