



Vendor Screening Process 3/31/2020 1248

Initiated by Department who is requesting vendor services, prior to arrival to facility. Used for vendors who are to present to a SIH facility to repair or service a critical piece of equipment during COVID-19 Pandemic.

Directions:

Requesting department completes the top section of form prior to Vendor arrival. Vendor is notified to call requesting department upon arrival to facility (prior to entering). Manager/Asst Manager/Supervisor/Biomedical Engineer Tech will meet Vendor at the employee entrance. When Manager/Asst Manager/Supervisor/Biomedical Engineer Tech gets call that Vendor is on site, inform Vendor where employee entrance is and bring this form to get remainder of screening completed.

Prior to Arrival

Vendor Company: _____

Vendor Representative Name: _____
Last First

Where is Vendor Representative coming from? _____

*If travel from US affected geographic area, vendor will be masked during entire visit. If Vendor has any checks in the Symptom Screening, Vendor will not be allowed into facility *

What department is equipment located: _____

Equipment to be repaired/serviced: _____

What makes this critical or urgent? _____

Upon Arrival

Symptom Screening:

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Fever > 100°F [Recorded Temp: _____]

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Self-medicated with fever reducing agent (Tylenol or Ibuprofen) in the last 24° to treat fever >100°F

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Cough new or worsening in the last 7 days

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Shortness of breath new or worsening in the last 7 days

*If travel from US affected geographic area, vendor will be masked during entire visit. If Vendor has any checks in the Symptom Screening, Vendor will not be allowed into facility *

Facility Rep Printed Name (First Last)

Date/Time

SEND COMPLETED FORM TO CORINNA WARREN, INFECTION PREVENTION

Author: Infection Prevention Med Tech Specialist