

COVID -19 Resource Request Form

Reference List of Questions Asked on Electronic Form

Section 1: General Information

Instructions: This form should be used by facilities that are requesting resources that specifically relating to the COVID-19 incident. This includes medical and non-medical supplies, pharmaceuticals (medications, vaccines, antidotes, etc.), medical personnel, decontamination supplies, surge supplies, etc. This form is to be filled out completely and with enough detail that a non-medical logistics person would know EXACTLY what, and how much is needed. Please be as specific as possible. Indicate if a generic or similar product might suffice. This also assumes that there is an immediate need (not projected) and ALL avenues to procure material have been fully exhausted.

Date of Request

Facility Name

Facility Address

Point of Contact Name

Point of Contact Phone #

Point of Contact Email

Delivery Location - include address, phone number and specific location, e.g. loading dock in back of building

Section 2: Resource Needs

Do you have an immediate and significant need?

1. Yes 2. No

Have you exhausted your supply, or is exhaustion imminent?

1. Yes 2. No

Have you checked with your internal, corporate supply chain, and/or local jurisdictional partners?

1. Yes 2. No

Have you checked for availability of supplies with your normal external vendors and new vendors to procure materials?

1. Yes 2. No

Section 3: Request Details (Can do up to 10 requests per form)

Item Description

Quantity

Unit of Measure

Do you have additional resource requests?

1. Yes 2. No

Section 4: PPE Questions (Required by State)

Personal Protective Equipment (PPE) Requests

*If you are requesting PPE, you *MUST* answer the following four questions.*

Indicate your intended use for your request. (Check all the apply.)

Personnel dealing with an individual that meets PUI definition/confirmed case.

Personnel performing patient screening.

Personnel working in a quarantine zone.

What is your current stock of requested PPE? (Please include model number/types of masks.)

Are the requested PPE solely to replenish a cache or to be immediately utilized?

1. Replenish a cache 2. Immediate use

What is your projected two-week burn rate of requested PPE at this current time?

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