

## WV No-Notice Ebola Readiness Drill

\*\*\*For Drill Purposes Only\*\*\*

HOSPITAL NAME: \_\_\_\_\_

### NO-NOTICE DRILL: PLANNING INFORMATION

<b>Drill Date</b>	
<b>Drill Time</b> (start/end)	
<b>Physical Location(s) within the Hospital Involved in Drill</b>	
<b>Hospital Departments Involved in the Drill</b>	
<b>Drill Manager</b>	<b>Name:</b>  <b>Email Address:</b>  <b>Phone #:</b>

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<b>Drill Planner(s) –</b> names and email addresses	
<b>LiveProcess Operator</b>	<b>Name:</b>  <b>Email Address:</b>
<b>Partner Agencies Involved (if any):</b> list by agency name and contact person (name/email)	

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### DRILL EVALUATION ASSIGNMENTS

Evaluator	Assigned Role	Response Actions to Observe and Document
Name:  Email:	Evaluator 1	<ol style="list-style-type: none"><li>1. Registration</li><li>2. Emergency Department Triage</li><li>3. Communications: Infection Control and Local Health Department</li><li>4. PPE Donning and Doffing Activities</li></ol>
Name:  Email:	Evaluator 2	<ol style="list-style-type: none"><li>1. Patient's Isolation Room: Clinical Activities and Specimen Collection/Handling</li><li>2. Cleaning and Waste Management</li><li>3. Patient Preparation for Transfer</li></ol>

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### DRILL COMMUNICATIONS DIRECTORY

(for use during the drill)

<b>Drill Manager</b> Name:	Cell Phone #: Radio Frequency:
<b>Evaluator 1</b> Name:	Cell Phone #: Radio Frequency:
<b>Evaluator 2</b> Name:	Cell Phone #: Radio Frequency:
<b>Live Process Operator</b> Name:	Cell Phone #: Radio Frequency: