

COVID-19 EMS Survey

The NH DHHS-ESU and GSHCC have assembled this survey to capture a baseline of current PPE stock and preparedness in ambulance provider planning efforts and response for COVID-19. This information will help inform resource availability and project future resource needs and shortages in the state level response to this event. *Please submit by 12:00pm on Friday, March 6th.* If you can submit before this date, it would be appreciated. Thank you for your quick response in completing this survey as we look at overall healthcare system preparedness.

1. Contact Information

Name:	
Organization:	
Title:	
Email:	

Personal Protective Equipment (PPE)

2. What is your total current inventory in boxes for the following items?

Exam gloves	
N95 Respirators	
Surgical Masks	
Isolation Gowns	

3. What is your current average daily burn rate in boxes for the following items?

Exam gloves	
N95 Respirators	
Surgical Masks	
Isolation Gowns	

How concerned is you				
Not at all concerned		Somewhat concerned		Very concerned
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you answered 'Somewhat co	ncerned' or "very cor	ncerned', please comment:		
How concerned is you	r organization ab	oout your potential future P	PE needs?	
Not at all concerned		Somewhat concerned		Very concerned
\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Please list your PPE s	upply vendor(s).			
Please include your loca	al hospital if you r	receive supplies from them):		
Please include your loca	al hospital if you r edness	receive supplies from them):		
Please include your loca General Prepar 7. Does your organiza Ves	al hospital if you r edness			

8. Would you or a representative fit testing?	from your agency be willing to p	articipate in a train-the-trainer event for N95
Yes		
Νο		
9. Please provide any additional cor	nments:	

Thank you!