

## Salt River Fire Department – COVID-19 Emergency Response Guidelines



SOG Number:	410.02.6a	Effective Date:	3-18-2020
Division:	Operations – EMS Division	Revised Date:	Draft
Approved By:	Daryl Dash, Fire Chief	Author:	SRFD Operations Group
Subject:	Active Monitoring of Employees for Infectious Diseases – Employee Evaluation Form		

### COVID-19 Employee Evaluation Form

Date: \_\_\_\_\_ Shift: \_\_\_\_\_ Station: \_\_\_\_\_

Rank	Name	Time	Temperature above 100.4	Cough	Shortness of Breath
Captain			Yes / No	Yes / No	Yes / No
Engineer			Yes / No	Yes / No	Yes / No
Engine FF 1			Yes / No	Yes / No	Yes / No
Engine FF 2			Yes / No	Yes / No	Yes / No
Rescue FF 1			Yes / No	Yes / No	Yes / No
Rescue FF 2			Yes / No	Yes / No	Yes / No
Rover FF 1			Yes / No	Yes / No	Yes / No
Rover FF 2			Yes / No	Yes / No	Yes / No

If any member has a fever, immediately place a mask on the member, begin isolation protocols, and contact the On-duty Battalion Chief.

Scan and email this document to the on-duty Battalion Chief.

Notes: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reported illnesses have ranged from mild symptoms to severe illness and death for confirmed coronavirus disease 2019 (COVID-19) cases.

The following symptoms may appear 2-14 days after exposure

#### Common Signs and Symptoms

- Fever
- Dry Cough
- Shortness of Breath

Captains Signature: \_\_\_\_\_