



# SUPPLY CHAIN ANALYSIS

Please complete the form below with as much information as possible.

## 1. FACILITY/SYSTEM AGENCY INFORMATION

Name of person completing the form:

First: \_\_\_\_\_ Last: \_\_\_\_\_

Facility/System Agency: \_\_\_\_\_

Email: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Link to on-line form: <https://nc.readyop.com/fs/4duK/ea3>

## 2. PRODUCT INFORMATION

Considering your organization/agency as a whole, please provide the information below. Assume current operations and amounts currently on-hand. Circle your response.

Product Supplier: (Provide one of the options below) <ul style="list-style-type: none"> <li>• Yes</li> <li>• No</li> <li>• N/A</li> </ul>		Given current conditions, how long could your organization maintain operations? <ul style="list-style-type: none"> <li>• Less than 12 hours</li> <li>• 13-24 hours</li> <li>• 24-36 hours</li> <li>• 36-48 hours</li> <li>• 48-72 hours</li> <li>• Greater than 72 hours</li> <li>• N/A</li> </ul>	Do you have access to an external or vendor-maintained stockpile? <ul style="list-style-type: none"> <li>• Yes</li> <li>• No</li> <li>• N/A</li> </ul>
Blood/Blood Products Supplier			
Medical Gas Supplier			
Fuel Supplier			
Water Supplier			
Emergency Power Supplier			
Telecommunications Supplier			
Transportation			
Food/Dietary Supplier			
Pharmaceuticals Wholesaler			
Leasing Entities for DME & Biomedical Equipment			
Medical Supplies Vendor			
PPE Distributor			
Hazardous Waste Disposal Services			
Linen Services			

### 3. VENDOR INFORMATION

Please list the primary, secondary, and/or emergency vendor(s) your organization/system uses for each category below. Alternatively, you can upload this information in the "Attachments" section on the on-line form. Use that area if you have documents containing the requested information below (e.g. excel, word, or pdf).

Blood/Blood Products Supplier	
Medical Gas Supplier	
Fuel Supplier	
Water Supplier	
Emergency Power Supplier	
Telecommunications Supplier	

Transportation	
Food/Dietary Supplier	
Pharmaceuticals Wholesaler	
Leasing Entities for DME & Biomedical Equipment	
Medical Supplies Vendor	
PPE Distributor	
Hazardous Waste Disposal Services	
Linen Services	