**Notice of Workplace Exposure to a Communicable Disease**

Date:

To:

From:

Subject: Notice of Workplace Exposure to a Communicable Disease

We have been notified that one of our employees has been diagnosed with [name of communicable disease]. As such, employees working at [location] may have been exposed to this communicable disease. More information about [name of communicable disease] is available from the Centers for Disease Control and Prevention at [website URL or other location].

If you experience symptoms of [name of communicable disease] illness, please inform human resources at [contact information] and contact your health care provider. [Company name] will keep all medical information confidential and will only disclose it on a need-to-know basis.

[Company name] is taking measures to ensure the safety of our employees during this time, including:

 [Describe the measures taken, such as disinfecting workspaces, offering telework, etc.]

Please contact [name and phone number] if you have any further questions.