

Description

As part of CDC's ongoing COVID-19 response, facilities enrolled in the National Healthcare Safety Network (NHSN) Healthcare Personnel Safety (HPS) Component have the ability to report healthcare personnel (HCP) COVID-19 vaccination data through the HPS Component. Group and supergroup users can import data on behalf of their member facilities who report through the NHSN HCP COVID-19 Vaccination Module. The purpose of this guidance document is to provide important information and instructions for how groups and supergroups can import .CSV files and view summary data in the NHSN HCP COVID-19 Vaccination Module.

Please note that a facility should decide which of the groups that it has granted access to NHSN for the purpose of viewing their data will upload their data as these same groups will also have access to upload data on their behalf using the .CSV bulk upload process. If data have been uploaded into NHSN for a facility by one group or supergroup via the .CSV bulk upload, these data can be overwritten by a second group uploading data for the facility at a later time or date. Therefore, NHSN recommends that facilities only grant access to one group/supergroup to upload data on their behalf. Groups or supergroups can include health departments. It is also important to note that if a facility has entered its own data, it will not be overwritten by a bulk upload by a group/supergroup.

Facilities looking to upload their data by working directly with a vendor will need to work with the vendor directly to provide their OrgID and establish the process. Vendors (e.g., EHR providers, EOC providers, etc.) intending to provide COVID-19 .CSV uploads on behalf of NHSN facilities please submit an inquiry to <u>NHSN@cdc.gov</u> with the title "Vendor Support for NHSN COVID-19 HCP Vaccination Reporting." NHSN will follow up to confirm procedural details as the process may differ by vendor.

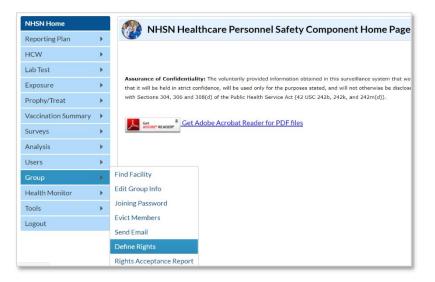
Please note: If accessing NHSN through different level of SAMS credentials, the interface will look slightly different as shown here, but all functionality related to COVID-19 data reporting is the same.



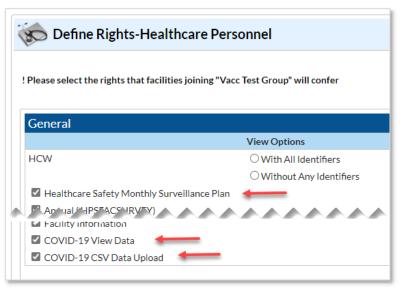


Instructions for Groups and Supergroups: Defining and Conferring Rights

1. **Group** – After logging into an NHSN component, select Group from the menu bar and then select Define Rights.



2. Group – After selecting Define Rights, the Define Rights for the component will be displayed. Under General, there are new Rights for COVID-19 vaccination data. The new Rights allow viewing of COVID-19 Vaccination Module summary data for facilities that are a part of the group. Check "COVID-19 View Data" and "COVID-19 CSV Data Upload". By selecting "COVID-19 CSV Data Upload" the group will have the ability to import .CSV data files for facilities who accept the define rights. Group users can also select "Healthcare Safety Monthly Surveillance Plan" to view monthly reporting plan data for facilities within the group. Select Save at the bottom of the page to define the additional Rights.





3. **Group** – The **Facility** group member will need to confer rights (accept the newly defined right(s)) by clicking on Confer Rights Not Accepted under Action Items.

	NHSN Healthcare	e Personnel Safety Component Home Page						
•	Action Items							
c	COMPLETE THESE ITE	MS						
	Confer Rights							
	Not							
	Accepted							

4. **Group** – The **Facility** will see a Confer Rights Not Accepted List. From the list, select the group for which the facility would like to view the new Defined Rights.

Confer Rights Not Accepted List								
A Define rights have been changed affecting the Groups below. You may accept new rights or leave the groups. Click the Group Name to view and accept new rights.								
Name 🗢	Group ID	Status	Status Date					
÷	Group ID 15183	Status Not Accepted	Status Date Dec 6 2020 8:31AM					
amb surg group for op AnR testing								
Name 🗢 amb surg group for op AnR testing Another Test Group Just in TIme Group	15183	Not Accepted	Dec 6 2020 8:31AM					



5. Group –The group will have added defined COVID-19 Rights if there is a check in the boxes next to "COVID-19 View Data" and "COVID-19 CSV Data Upload." The group will have added defined Rights for monthly reporting plan data if the box next to "Healthcare Safety Monthly Surveillance Plan" is checked. The facility may select "Accept" to save the newly conferred Rights. The facility must accept the newly defined Rights for its data to be viewable to the group.

K Confer	Confer Rights-Healthcare Personnel					
! Please review the data rights that "QA TEST Prod Group" is requesting from your facility: - Verify locations - Press "accept" button to confer rights						
General						
	View Options					
HCW	With All Identifiers					
	 Without Any Identifiers 					
Healthcare S	Safety Monthly Surveillance Plan 🛛 🛶 🛶 🛶					
Annual (HPS)	SFACSURVEY)					
Seasonal Flu	J Survey					
🔄 HPS Data A	Inalysis					
Facility Information	rmation					
COVID-19 V	/iew Data 🔶					
COVID-19 C	CSV Data Upload 🛛 🗲 🛶 🛶 🛶					
	Accept Back					



Instructions to Upload and Export .CSV Files for both Group and Supergroup Users

1. **Group/Supergroup** – Select "Vaccination Summary" from the menu bar to get to the "COVID-19 Weekly Vaccination Summary" page.

NHSN Home		MHSN Healthcare Personnel Safety Component Home Page
Reporting Plan	•	W Whow heathcare reisonnersarety component home rage
HCW	•	
Lab Test	•	
Exposure	•	Assurance of Confidentiality: The voluntarily provided information obtained in this surveillance system that would only for the purposes stated, and will not otherwise be disclosed or released without the consent of the individual, or
Prophy/Treat	•	242m(d)).
Vaccination Summary	•	Annual Vaccination Flu Summary 🕨
Surveys	•	COVID-19 Weekly Vaccination Summary
Analysis	•	
Users	•	
Group	•	

A list of facilities in your group or supergroup that have vaccination data by month will be displayed. Select the Facility ID/Month to view the data for that month. (All data in screenshots for illustration only.)

NHSN Home		Se covi	D-19 Vaccination Su	nmary Data		
Reporting Plan	- F	COVI	D-17 vaccination Su	innary Data		
HCW						
Lab Test		Facility ID 🚖	Facility Name	of 1 == == 10 Vaccination Type	View	w 1 - 1 of 1 Year
Exposure	-		Rikki's Hospital LTC	COVID19	December	2020
Prophy/Treat			In In Page 1	of 1 🗁 🗠 10 💙	View	w 1 - 1 of 1
Vaccination Summ	ary 🕨		_			
Surveys		Upload CS\	V			
Analysis						
Users						
Group	- + -					



 Download Template – The .CSV template for COVID-19 Weekly Vaccination Summary Data for Healthcare Personnel can be found at the NHSN Weekly HCP COVID-19 Vaccination webpage: <u>https://www.cdc.gov/nhsn/hps/weekly-covid-vac/index.html</u>. Please note, this template only includes variables applicable for NHSN version 9.5.4 and forward.

Data Collection Forms and Instructions

All Data Collection Forms are Print-only

- Weekly COVID-19 Vaccination Summary Data Form for Healthcare Personnel at non-LTCFs (57.220) August 2021 [PDF 150 KB]
 - Table of Instructions 📕 [PDF 200 KB]

Supporting Materials

- Uploading Group COVID-19 .CSV Data Files August 2021 🖪 [PDF 1 MB]
- <u>.CSV File Template for Healthcare Personnel COVID-19 Vaccination Data August 2021</u> [CSV 2 KB]
 <u>Example CSV File Healthcare Personnel COVID-19 Vaccination Data August 2021</u> [ICSV 4 KB]
- Weekly COVID-19 Vaccination Data Reporting Guidance December 2020 🖪 [PDF 200 KB]
- Quick Reference Guide: Data Quality Alerts July 2021 🖪 [PDF 400 KB]
- Data Tracking Worksheet for COVID-19 Vaccination among Healthcare Personnel July 2021 🕼 [XLS 800 KB]
- Line List of COVID-19 Vaccination Data December 2020 🖪 [PDF 600 KB]



3. Enter Data – Using the provided.CSV template for healthcare personnel data, populate each variable with the appropriate data. Multiple facilities (those that are a part of the group and have conferred rights) may be included. A valid facility identifier is required. After entering all data, save each file to upload the .CSV file in NHSN.

For complete information on the variables included on the .CSV template, refer to the table at end of this document ("Table 1: NHSN Non-Long-Term Care Facility Staff COVID-19 Vaccination Data Import File Format"). An example .CSV file that includes test data in required fields is available for download from the NHSN Weekly HCP COVID-19 Vaccination webpage: https://www.cdc.gov/nhsn/hps/weekly-covid-vac/index.html.

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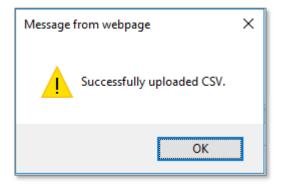
4. Upload CSV – To upload the completed .CSV file in NHSN, select "Vaccination Summary" from the menu bar. Then, select "COVID-19 Weekly Vaccination Summary". A list of facilities by month will be displayed. Click on the "Upload CSV" button. A prompt will appear where a file must be provided for submission. Browse for the file and then click "Upload CSV" to begin the import.

NHSN Home		So covi	D-19 Vaccinatior	n Summary Data		
Reporting Plan	•	Wes con	D 17 Vaccination	rounnur y Dutu		
HCW	•					
Lab Test	•			e 1 of 1 ⇒ ⊳ <u>10 ♥</u>		w 1 - 7 of 7
		Facility ID 🗢	Facility Name	Vaccination Type	Month	Year
Exposure	•	<u>10563</u>	Rikki's Hospital	COVID19	December	2020
Prophy/Treat		<u>10563</u>	Rikki's Hospital	COVID19	January	2021
Propriy/ rreat				COVID19	February	2021
Vaccination Summa	y 🕨	Annual Vaccination	n Flu Summary 🕨	COVID19	April	2021
Surveys	•	COVID-19 Weekly	Vaccination Summary	COVID19	May	2021
54110,5		<u>15428</u>	LA PS Facility	COVID19	February	2021
Analysis	•	<u>15428</u>	LA PS Facility	COVID19	May	2021
Users	•		💷 🛹 🏻 Pag	e 1 of 1 ⊨ ⊨ 10 ¥	Viev	v 1 - 7 of 7
Group	•					
Tools	•	Upload CS	V			
					(80 CC	DVID-:

10563 R							
	Rikki's Ho	Upload CS	V file			×	
<u>10563</u> R	Rikki's Ho						
<u>10563</u> R	Rikki's Ho	Please se	elect a CSV file contair	ning.			
<u>10563</u> R	Rikki's Ho	r reuse se					
<u>10563</u> R	Rikki's Ho	COVID-19	Weekly Vaccination Sum	mary			
<u>15428</u> L	.A PS Faci	(
<u>15428</u> L	A PS Faci	Choose F	File 1 2 chosen				
			-				
Upload CSV	-						
				3	Upload CSV	Cancel	



5. View Data – A message that indicates the upload was successful will be generated. The vaccination module will automatically populate the uploaded data. Users can then select a facility for which data was added to view the record.



If errors are found during upload, please review the alerts and refer to the table at end of this document ("Table 1: NHSN Non-Long-Term Care Facility Staff COVID-19 Vaccination Data Import File Format") for complete information on the variables included on the .CSV template. Questions can be submitted to <u>NHSN@CDC.GOV</u> with "Weekly COVID-19 Reporting CSV upload" in the subject line.

6. View and Export Line List Data Reports – Users are encouraged utilize the analysis and reporting functionality built within NHSN to view and export line list data reports for COVID-19 vaccination data for healthcare personnel. For more information, view the Quick Reference Guide on how to modify and export line lists available under the 'Supporting Materials' section of NHSN's Weekly HCP COVID-19 Vaccination webpage: <u>https://www.cdc.gov/nhsn/hps/weekly-covid-vac/index.html</u>.



Group - Importing via .csv file - *COVID-19 Weekly HCP Vaccination Summary Non-LTC Staff* - HPS Component - NHSN release 10.0 (September 2021)

Table 1: NHSN Non-Long-Term Care Facility Staff COVID-19 Vaccination Data Import File Format

Field	Requirement	Values	Format [†]	Description of Field
orgid	Required	_	_	Must be a valid NHSN Facility ID (organization
				identifier)
summarytype	Required	VACCSUMWK	_	Summary Type
vacctype	Required	COVID19	_	Vaccination Type
vaccLoc	Conditionally Required Required if vaccType = COVID19 and survWeekEnd >=10/03/2021	VACCHOSP VACCIPF VACCIRF		 Vaccination Type Vaccination location type VACCHOSP – For data reported for all non-LTC facility types, including acute care facilities and dialysis facilities. This includes all inpatient and outpatient units/departments of the acute care facility sharing the same CCN as the acute care facility. Free-standing in-patient psychiatric facilities or free-standing in-patient rehabilitation facilities should also use VACCHOSP. VACCIPF – For data reported by acute care facility for an inpatient psychiatric unit, as indicated in the monthly reporting plan. This selection is only available for acute care facilities reporting data for IPF units with a different CCN from the acute care facility. VACCIRF - for data reported by acute care facility for an inpatient rehabilitation unit, as indicated in the monthly reporting plan. This selection is only available for acute care facilities reported by acute care facility for an inpatient rehabilitation unit, as indicated in the monthly reporting plan. This selection is only available for acute care facilities reported by acute care facility for an inpatient rehabilitation unit, as indicated in the monthly reporting plan. This selection is only available for acute care facilities reported by acute care facility for an inpatient rehabilitation unit, as indicated in the monthly reporting plan. This selection is only available for acute care facilities reporting data for IRF units with

Field	Requirement	Values	Format ⁺	Description of Field
survweekstart	Required	MM/DD/YYYY (Monday through Sunday reporting)	-	Week of data collection, start date (date must be a Monday; must be no later than current date)
survweekend	Required	MM/DD/YYYY (Monday through Sunday reporting)	-	Week of data collection, end date (date must be a Sunday; must be no later than current date)
numEmpHCP	Required	Must be = sum of (hpsvc19vaccVOs[0].numEmpVacc + hpsvc19vaccVOs[1].numEmpVacc + hpsvc19vaccVOs[2].numEmpVacc + hpsvc19vaccVOs[3].numEmpVacc + hpsvc19vaccVOs[4].numEmpVacc + hpsvc19vaccVOs[5].numEmpVacc) + numEmpMed + numEmpDec + numEmpUnk AND Sum of numEmpHCP, numLIPHCP, numVoIHCP, and numOCPHCP must be <= 50,000	Must be a whole number	Number of employee HCP that were eligible to have worked at this healthcare facility for at least 1 day during the week of data collection
numLIPHCP	Required	Must be = sum of (hpsvc19vaccVOs[0].numLIPVacc + hpsvc19vaccVOs[1].numLIPVacc + hpsvc19vaccVOs[2].numLIPVacc + hpsvc19vaccVOs[3].numLIPVacc + hpsvc19vaccVOs[4].numLIPVacc + hpsvc19vaccVOs[5].numLIPVacc)+ numLIPMed + numLIPDec + numLIPUnk)	Must be a whole number	Number of licensed independent practitioner HCP that were eligible to have worked at this healthcare facility for at least 1 day during the week of data collection

Field	Requirement	Values	Format [†]	Description of Field
		AND Sum of numEmpHCP, numLIPHCP, numVoIHCP, and numOCPHCP must be <= 50,000		
numVolHCP	Required	Must be = sum of (hpsvc19vaccVOs[0].numVolVacc + hpsvc19vaccVOs[2].numVolVacc + hpsvc19vaccVOs[2].numVolVacc + hpsvc19vaccVOs[3].numVolVacc + hpsvc19vaccVOs[4].numVolVacc + hpsvc19vaccVOs[5].numVolVacc)+ numVolMed + numVolDec + numVolMed + numVolDec + numVolUnk) AND Sum of numEmpHCP, numLIPHCP, numVolHCP, and numOCPHCP must be <= 50,000	Must be a whole number	Number of adult student/trainee and volunteer HCP that were eligible to have worked at this healthcare facility for at least 1 day during the week of data collection
numOCPHCP	Required	Must be = sum of (hpsvc19vaccVOs[0].numOCPVacc + hpsvc19vaccVOs[1].numOCPVacc + hpsvc19vaccVOs[2].numOCPVacc + hpsvc19vaccVOs[3].numOCPVacc + hpsvc19vaccVOs[4].numOCPVacc + hpsvc19vaccVOs[5].numOCPVacc)+ numOCPMed + numOCPDec + numOCPUnk)	Must be a whole number	Number of other contract personnel HCP that were eligible to have worked at this healthcare facility for at least 1 day during the week of data collection

Field	Requirement	Values	Format [†]	Description of Field
		AND		
		Sum of numEmpHCP, numLIPHCP, numVoIHCP, and numOCPHCP must be <= 50,000		
numEmpMed	Required	Must be <= numEmpHCP	Must be a whole number	Cumulative number of employee HCP with a medical contraindication reason to not receive COVID-19 vaccine
numLIPMed	Required	Must be <= numLIPHCP	Must be a whole number	Cumulative number of licensed independent practitioner HCP with a medical contraindication reason to not receive COVID-19 vaccine
numVolMed	Required	Must be <= numVolHCP	Must be a whole number	Cumulative number of adult student/trainee & volunteer HCP with a medical contraindication reason to not receive COVID-19 vaccine
numOCPMed	Required	Must be <= numOCPHCP	Must be a whole number	Cumulative number of other contract personnel with a medical contraindication reason to not receive COVID- 19 vaccine
numEmpDec	Required	Must be <= numEmpHCP	Must be a whole number	Cumulative number of employee HCP who were offered but declined COVID-19 vaccine
numLIPDec	Required	Must be <= numLIPHCP	Must be a whole number	Cumulative number of licensed independent practitioner HCP who were offered but declined COVID- 19 vaccine
numVolDec	Required	Must be <= numVolHCP	Must be a whole number	Cumulative number of adult student/trainee and volunteer HCP who were offered but declined COVID- 19 vaccine
numOCPDec	Required	Must be <= numOCPHCP	Must be a whole number	Cumulative number of other contract personnel HCP who were offered but declined COVID-19 vaccine
numEmpUnk	Required	Must be <= numEmpHCP	Must be a whole number	Cumulative number of employee HCP with an unknown COVID-19 vaccination status
numLIPUnk	Required	Must be <= numLIPHCP	Must be a whole number	Cumulative number of licensed independent practitioner HCP with an unknown COVID-19 vaccination status

Field	Requirement	Values	Format [†]	Description of Field
numVolUnk	Required	Must be <= numVolHCP	Must be a whole number	Cumulative number of adult student/trainee & volunteer HCP with an unknown COVID-19 vaccination status
numOCPUnk	Required	Must be <= numOCPHCP	Must be a whole number	Cumulative number of other contract personnel with an unknown COVID-19 vaccination status
vaccprovider	Required	Y for Yes N for No	-	Is your facility enrolled as a COVID-19 vaccination provider?
vaccsuffsupplyoffer	Conditionally Required Required if vaccProvider = Y	Y for Yes N for No	-	Did your facility have a sufficient supply of COVID-19 vaccine(s) to offer all staff the opportunity to receive COVID-19 vaccine(s) from your facility in the current reporting week?
vaccOthSuffSupplyoffer	Conditionally Required Required if vaccProvider = N or vaccSuffSupply = N	Y for Yes N for No	-	Did your facility have other arrangements sufficient to offer all staff the opportunity to receive COVID-19 vaccine(s) in the current reporting week?
vaccsupplyissue	Optional	-	Alpha numeric up to 200 characters	Describe any other COVID-19 vaccination supply- related issue(s) at your facility
hpsvc19vaccVOs[0].covid19vaccinename	Conditionally Required Required if reporting Pfizer- BioNTech COVID-19 vaccine	PFIZBION	-	COVID-19 Vaccine Name (PFIZBION – Pfizer-BioNTech COVID-19 vaccine)

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JU	picin	DCI	2021

Field	Requirement	Values	Format ⁺	Description of Field
hpsvc19vaccVOs[0].covid19vaccine	Conditionally Required	PFIZBION1	-	COVID-19 Vaccine – PFIZBION1 (only dose 1 of Pfizer- BioNTech COVID-19 vaccine)
	Required if reporting Pfizer-			
	BioNTech COVID-19 vaccine			
hpsvc19vaccVOs[0].numEmpVacc	Conditionally Required	-	Must be a whole number	Cumulative number of employee HCP who have received only 1 dose of Pfizer-BioNTech COVID-19 vaccine
	Required if reporting Pfizer- BioNTech			
	COVID-19 vaccine			
hpsvc19vaccVOs[0].numLIPVacc	Conditionally Required	-	Must be a whole number	Cumulative number of licensed independent practitioner HCP who have received only 1 dose of Pfizer-BioNTech COVID-19 vaccine
	Required if reporting Pfizer- BioNTech			
	COVID-19 vaccine			
hpsvc19vaccVOs[0].numVolVacc	Conditionally Required	-	Must be a whole number	Cumulative number of adult student/trainee and volunteer HCP who have received only 1 dose of Pfizer- BioNTech COVID-19 vaccine
	Required if reporting Pfizer- BioNTech			
	COVID-19 vaccine			

Field	Requirement	Values	Format [†]	Description of Field
hpsvc19vaccVOs[0].numOCPVacc	Conditionally	-	Must be a	Cumulative number of other contract personnel who
	Required		whole number	have received only 1 dose of Pfizer-BioNTech COVID-19
				vaccine
	Required if			
	reporting Pfizer-			
	BioNTech			
	COVID-19			
	vaccine			
hpsvc19vaccVOs[1].covid19vaccinename	Conditionally	PFIZBION	-	COVID-19 Vaccine Name (PFIZBION – Pfizer-BioNTech
	Required			COVID-19 vaccine)
	D			
	Required if			
	reporting Pfizer- BioNTech			
	COVID-19			
	vaccine			
hpsvc19vaccVOs[1].covid19vaccine	Conditionally	PFIZBION		COVID-19 Vaccine - PFIZBION (dose 1 and dose 2 of
	Required		-	Pfizer-BioNTech COVID-19 vaccine)
	neguneu			
	Required if			
	reporting Pfizer-			
	BioNTech			
	COVID-19			
	vaccine			
hpsvc19vaccVOs[1].numEmpVacc	Conditionally	-	Must be a	Cumulative number of employee HCP who have
	Required		whole number	received dose 1 and dose 2 of Pfizer-BioNTech COVID-
				19 vaccine
	Required if			
	reporting Pfizer-			
	BioNTech			
	COVID-19			
	vaccine			

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Field	Requirement	Values	Format [†]	Description of Field
hpsvc19vaccVOs[1].numLIPVacc	Conditionally	-	Must be a	Cumulative number of licensed independent
	Required		whole number	practitioner HCP who have received dose 1 and dose 2 of Pfizer-BioNTech COVID-19 vaccine
	Required if			
	reporting Pfizer-			
	BioNTech			
	COVID-19			
	vaccine			
hpsvc19vaccVOs[1].numVolVacc	Conditionally	-	Must be a	Cumulative number of adult student/trainee and
	Required		whole number	volunteer HCP who have received dose 1 and dose 2 of Pfizer-BioNTech COVID-19 vaccine
	Required if			
	reporting Pfizer-			
	BioNTech			
	COVID-19			
	vaccine			
hpsvc19vaccVOs[1].numOCPVacc	Conditionally	-	Must be a	Cumulative number of other contract personnel who
	Required		whole number	have received dose 1 and dose 2 Pfizer-BioNTech
				COVID-19 vaccine
	Required if			
	reporting Pfizer-			
	BioNTech			
	COVID-19			
	vaccine	MODERNA		
hpsvc19vaccVOs[2].covid19vaccinename	Conditionally	MODERNA	-	COVID-19 Vaccine Name (MODERNA COVID-19 vaccine)
	Required			
	Required if			
	reporting			
	Moderna			
	COVID-19			
	vaccine			

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Field	Requirement	Values	Format [†]	Description of Field
hpsvc19vaccVOs[2].covid19vaccine	Conditionally Required	MODERNA1	-	COVID-19 Vaccine (MODERNA1 – only dose one of MODERNA COVID-19 vaccine)
	Required if			
	reporting			
	Moderna			
	COVID-19			
	vaccine			
hpsvc19vaccVOs[2].numEmpVacc	Conditionally	-	Must be a	Cumulative number of employee HCP who have
	Required		whole number	received only 1 dose of Moderna COVID-19 vaccine
	Required if			
	reporting			
	Moderna			
	COVID-19			
	vaccine			
hpsvc19vaccVOs[2].numLIPVacc	Conditionally	-	Must be a	Cumulative number of licensed independent
	Required		whole number	practitioner HCP who have received only 1 dose of Moderna COVID-19 vaccine
	Required if			
	reporting			
	Moderna			
	COVID-19			
	vaccine			
hpsvc19vaccVOs[2].numVolVacc	Conditionally	-	Must be a	Cumulative number of adult student/trainee and
	Required		whole number	volunteer HCP who have received only 1 dose of Moderna COVID-19 vaccine
	Required if			
	reporting			
	Moderna			
	COVID-19			
	vaccine			

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Field	Requirement	Values	Format [†]	Description of Field
hpsvc19vaccVOs[2].numOCPVacc	Conditionally	-	Must be a	Cumulative number of other contract personnel who
	Required		whole number	have received only 1 dose of Moderna COVID-19
				vaccine
	Required if			
	reporting			
	Moderna			
	COVID-19			
	vaccine			
hpsvc19vaccVOs[3].covid19vaccinename	Conditionally	MODERNA	_	COVID-19 Vaccine Name (MODERNA COVID-19 vaccine)
	Required			
	Domuined if			
	Required if			
	reporting Moderna			
	COVID-19			
	vaccine			
hpsvc19vaccVOs[3].covid19vaccine	Conditionally	MODERNA		COVID-19 Vaccine (MODERNA – dose 1 and dose 2 of
	Required		-	MODERNA COVID-19 vaccine)
	- 1			,
	Required if			
	reporting			
	Moderna			
	COVID-19			
	vaccine			
hpsvc19vaccVOs[3].numEmpVacc	Conditionally	-	Must be a	Cumulative number of employee HCP who have
	Required		whole number	received dose 1 and dose 2 of Moderna COVID-19
				vaccine
	Required if			
	reporting			
	Moderna			
	COVID-19			
	vaccine			

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Field	Requirement	Values	Format [†]	Description of Field
hpsvc19vaccVOs[3].numLIPVacc	Conditionally	-	Must be a	Cumulative number of licensed independent
	Required		whole number	practitioner HCP who have received dose 1 and dose 2 of Moderna COVID-19 vaccine
	Required if			
	reporting			
	Moderna			
	COVID-19			
	vaccine			
hpsvc19vaccVOs[3].numVolVacc	Conditionally	-	Must be a	Cumulative number of adult student/trainee and
	Required		whole number	volunteer HCP who have received dose 1 and dose 2 of Moderna COVID-19 vaccine
	Required if			
	reporting			
	Moderna			
	COVID-19			
	vaccine			
hpsvc19vaccVOs[3].numOCPVacc	Conditionally	-	Must be a	Cumulative number of other contract personnel HCP
	Required		whole number	who have received dose 1 and dose 2 Moderna COVID- 19 vaccine
	Required if			
	reporting			
	Moderna			
	COVID-19			
	vaccine			
hpsvc19vaccVOs[4].covid19vaccinename	Conditionally	JANSSEN	_	COVID-19 Vaccine Name (JANSSEN – Janssen COVID-19
	Required			vaccine)
Note: JANSSEN can be reported starting				
3/3/2021 and going forward	Required if			
	reporting			
	Janssen COVID-			
	19 vaccine			

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y JANSSEN ID-	_	COVID-19 Vaccine (JANSSEN – one dose of Janssen COVID-19 vaccine)
'ID-		COVID-19 vaccine)
1D-		
'ID-		
'ID-		
'ID-		
y -		Cumulative number of employee HCP who have
	whole number	received one dose of Janssen COVID-19 vaccine
'ID-		
y -		Cumulative number of licensed independent
	whole number	practitioner HCP who have received one dose of
		Janssen COVID-19 vaccine
ID-		
y -		Cumulative number of adult student/trainee and
	whole number	volunteer HCP who have received one dose of Janssen
		COVID-19 vaccine
10-		
	ly - /ID-	Iv - Must be a whole number /ID- - Must be a whole number Iv - Must be a whole number /ID- - Must be a whole number /ID- - Must be a whole number

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Field	Requirement	Values	Format [†]	Description of Field
hpsvc19vaccVOs[4].numOCPVacc	Conditionally	-	Must be a	Cumulative number of other contract personnel who
	Required		whole number	have received one dose of Janssen COVID-19 vaccine
	Required if			
	reporting			
	Janssen COVID-			
	19 vaccine			
hpsvc19vaccVOs[5].covid19vaccinename	Conditionally	UNSPECIFIED	-	COVID-19 Vaccine Name (UNSPECIFIED –COVID-19
	Required			vaccine series: unspecified manufacturer)
Note: UNSPECIFIED can be reported				
starting 3/3/2021 and going forward	Required if			
	reporting			
	COVID-19			
	vaccine of			
	unspecified			
	manufacturer			
hpsvc19vaccVOs[5].covid19vaccine	Conditionally	UNSPECIFIED	-	COVID-19 Vaccine (UNSPECIFIED – complete COVID-19
	Required			vaccine series: unspecified manufacturer)
Note: UNSPECIFIED can be reported	Do surfreed if			
starting 3/3/2021 and going forward	Required if			
	reporting COVID-19			
	vaccine of			
	unspecified			
	manufacturer			
hpsvc19vaccVOs[5].numEmpVacc	Conditionally	-	Must be a	Cumulative number of employee HCP who have
	Required	-	whole number	received an initial complete COVID-19 vaccine series:
	Nequireu		whole humber	unspecified manufacturer
	Required if			
	reporting			
	COVID-19			
	vaccine of			
	unspecified			
	manufacturer			
	manufacturel		1	

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Field	Requirement	Values	Format [†]	Description of Field
hpsvc19vaccVOs[5].numLIPVacc	Conditionally	-	Must be a	Cumulative number of licensed independent
	Required		whole number	practitioner HCP who have received an initial complete
				COVID-19 vaccine series: unspecified manufacturer.
	Required if			
	reporting			
	COVID-19			
	vaccine of			
	unspecified			
	manufacturer			
hpsvc19vaccVOs[5].numVolVacc	Conditionally	-	Must be a	Cumulative number of adult student/trainee and
	Required		whole number	volunteer HCP who have received an initial complete
				COVID-19 vaccine series: unspecified manufacturer
	Required if			
	reporting			
	COVID-19			
	vaccine of			
	unspecified			
	manufacturer			
hpsvc19vaccVOs[5].numOCPVacc	Conditionally	-	Must be a	Cumulative number of other contract personnel HCP
	Required		whole number	who have received an initial complete COVID-19
				vaccine series: unspecified manufacturer
	Required if			
	reporting			
	COVID-19			
	vaccine of			
	unspecified			
	manufacturer			
numEmpEligAddtlDose	Required	Must be <=numEMPHCP	Must be a	Cumulative number of employee HCP who have
			whole number	completed a COVID-19 vaccine series and are eligible to
		AND must be <= sum of		receive an additional dose or booster of COVID-19
		(hpsvc19vaccVOs[1].numempvacc +		vaccine
		hpsvc19vaccVOs[3].numempvacc +		
		hpsvc19vaccVOs[4].numempvacc +		Must be less than or equal to the total number of
		hpsvc19vaccVOs[5].numempvacc)		employee HCP that received an initial complete COVID-

Field	Requirement	Values	Format [†]	Description of Field
		AND must be >= sum of (hpsvc19vaccVOs[6].numempvacc +		19 vaccine series AND must be greater than or equal to the total number of employee HCP who received an additional dose or booster of COVID-19 vaccine.
		hpsvc19vaccVOs[7].numempvacc + hpsvc19vaccVOs[8].numempvacc + hpsvc19vaccVOs[9].numempvacc)		
numLIPEligAddtlDose	Required	Must be <=numLIPHCP AND must be <= sum of (hpsvc19vaccVOs[1].numLIPvacc + hpsvc19vaccVOs[3].numLIPvacc + hpsvc19vaccVOs[4].numLIPvacc + hpsvc19vaccVOs[5].numLIPvacc) AND must be >= sum of	Must be a whole number	Cumulative number of licensed independent practitioner HCP who have completed a COVID-19 vaccine series and are eligible to receive an additional dose or booster of COVID-19 vaccine Must be less than or equal to the total of licensed independent practitioner HCP that received an initial complete COVID-19 vaccine series AND must be greater than or equal to the total number of employee HCP who received an additional dose or booster of COVID-
		<pre>(hpsvc19vaccVOs[6].numLIPvacc + hpsvc19vaccVOs[7].numLIPvacc + hpsvc19vaccVOs[8].numLIPvacc + hpsvc19vaccVOs[9].numLIPvacc)</pre>		19 vaccine.
numVolAddtlDose	Required	Must be <=numVolHCP AND must be <= sum of (hpsvc19vaccVOs[1].numVolvacc + hpsvc19vaccVOs[3].numVolvacc + hpsvc19vaccVOs[4].numVolvacc + hpsvc19vaccVOs[5].numVolvacc) AND must be >= sum of (hpsvc19vaccVOs[6].numVolvacc + hpsvc19vaccVOs[7].numVolvacc + hpsvc19vaccVOs[8].numVolvacc + hpsvc19vaccVOs[9].numVolvacc)	Must be a whole number	Cumulative number of adult student/trainee and volunteer HCP who have completed a COVID-19 vaccine series and are eligible to receive an additional dose or booster of COVID-19 vaccine Must be less than or equal to the total number of adult student/trainee and volunteer HCP that received an initial complete COVID-19 vaccine series AND must be greater than or equal to the total number adult student/trainee and volunteer HCP who received an additional dose or booster of COVID-19 vaccine.

Field	Requirement	Values	Format [†]	Description of Field
numOCPAddtlDose	Required	Must be <=numOCPHCP	Must be a	Cumulative number of other contract personnel HCP
			whole number	who have completed a COVID-19 vaccine series and are
		AND must be <= sum of		eligible to receive an additional dose or booster of
		(hpsvc19vaccVOs[1].numOCPvacc +		COVID-19 vaccine
		hpsvc19vaccVOs[3].numOCPvacc +		
		hpsvc19vaccVOs[4].numOCPvacc +		Must be less than or equal to the total number of other
		hpsvc19vaccVOs[5].numOCPvacc)		contract personnel HCP that received an initial
				complete COVID-19 vaccine series AND must be greater
		AND must be >= sum of		than or equal to the total number of other contract
		(hpsvc19vaccVOs[6].numOCPvacc +		personnel HCP who received an additional dose or
		hpsvc19vaccVOs[7].numOCPvacc +		booster of COVID-19 vaccine.
		hpsvc19vaccVOs[8].numOCPvacc +		
	Constitution of the	hpsvc19vaccVOs[9].numOCPvacc)		
hpsvc19vaccVOs[6].covid19vaccinename	Conditionally	PFIZBION	-	COVID-19 Vaccine Name (PFIZBION – Pfizer-BioNTech
	Required			COVID-19 vaccine)
	Required if			
	reporting			
	additional dose			
	or booster of			
	Pfizer-BioNTech			
	COVID-19			
	vaccine			
hpsvc19vaccVOs[6].covid19vaccine	Conditionally	PFIZBION3	_	COVID-19 Vaccine - PFIZBION (additional dose or
	Required			booster of Pfizer-BioNTech COVID-19 vaccine)
	Required if			
	reporting			
	additional dose			
	or booster of			
	Pfizer-BioNTech			
	COVID-19			
	vaccine			

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Field	Requirement	Values	Format [†]	Description of Field
hpsvc19vaccVOs[6].numEmpVacc	Conditionally	-	Must be a	Cumulative number of employee HCP, from
	Required		whole number	numEmpEligAddtIDose, who have received an
				additional dose or booster of Pfizer-BioNTech COVID-19
	Required if			vaccine
	reporting			
	additional dose			
	or booster of			
	Pfizer-BioNTech			
	COVID-19			
	vaccine			
hpsvc19vaccVOs[6].numLIPVacc	Conditionally	-	Must be a	Cumulative number of employee HCP, from
	Required		whole number	numLIPEligAddtlDose, who have received an additional
				dose or booster of Pfizer-BioNTech COVID-19 vaccine
	Required if			
	reporting			
	additional dose			
	or booster of			
	Pfizer-BioNTech			
	COVID-19			
	vaccine			
hpsvc19vaccVOs[6].numVolVacc	Conditionally	-	Must be a	Cumulative number of employee HCP, from
	Required		whole number	numVolAddtlDose, who have received an additional dose or booster of Pfizer-BioNTech COVID-19 vaccine
	Required if			dose of booster of Plizer-BioNTech COVID-19 vaccine
	reporting			
	additional dose			
	or booster of			
	Pfizer-BioNTech			
	COVID-19			
	vaccine			
	Vaccine			

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Field	Requirement	Values	Format [†]	Description of Field
hpsvc19vaccVOs[6].numOCPVacc	Conditionally	-	Must be a	Cumulative number of employee HCP, from
	Required		whole number	numOCPAddtlDose, who have received an additional
				dose or booster of Pfizer-BioNTech COVID-19 vaccine
	Required if			
	reporting additional dose			
	or booster of			
	Pfizer-BioNTech			
	COVID-19			
	vaccine			
hpsvc19vaccVOs[7].covid19vaccinename	Conditionally	MODERNA	_	COVID-19 Vaccine Name (MODERNA COVID-19 vaccine)
	Required			
	Required if			
	reporting additional dose			
	or booster of			
	Moderna			
	COVID-19			
	vaccine			
hpsvc19vaccVOs[7].covid19vaccine	Conditionally	MODERNA3	_	COVID-19 Vaccine (MODERNA – additional dose or
	Required			booster of MODERNA COVID-19 vaccine)
	Required if			
	reporting			
	additional dose or booster of			
	Moderna			
	COVID-19			
	vaccine			

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Field	Requirement	Values	Format [†]	Description of Field
hpsvc19vaccVOs[7].numEmpVacc	Conditionally	-	Must be a	Cumulative number of employee HCP, from
	Required		whole number	numEmpEligAddtlDose, who have received an
				additional dose or booster of Moderna COVID-19
	Required if			vaccine
	reporting			
	additional dose			
	or booster of			
	Moderna			
	COVID-19			
	vaccine			
hpsvc19vaccVOs[7].numLIPVacc	Conditionally	-	Must be a	Cumulative number of employee HCP, from
	Required		whole number	numLIPEligAddtlDose, who have received an additional
				dose or booster of Moderna COVID-19 vaccine
	Required if			
	reporting			
	additional dose			
	or booster of			
	Moderna			
	COVID-19			
	vaccine		N Asset Is a la	
hpsvc19vaccVOs[7].numVolVacc	Conditionally	-	Must be a	Cumulative number of employee HCP, from
	Required		whole number	numVolAddtlDose, who have received an additional dose or booster of Moderna COVID-19 vaccine
	Dogwirod if			dose of booster of Moderna COVID-19 vaccine
	Required if reporting			
	additional dose			
	or booster of			
	Moderna			
	COVID-19			
	vaccine			
	Vaccine			

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Field	Requirement	Values	Format [†]	Description of Field
hpsvc19vaccVOs[7].numOCPVacc	Conditionally	-	Must be a	Cumulative number of employee HCP, from
	Required		whole number	numOCPAddtlDose, who have received an additional
				dose or booster of Moderna COVID-19 vaccine
	Required if			
	reporting			
	additional dose			
	or booster of			
	Moderna			
	COVID-19			
	vaccine			
hpsvc19vaccVOs[8].covid19vaccinename	Conditionally	JANSSEN	-	COVID-19 Vaccine Name (JANSSEN COVID-19 vaccine)
	Required			
	Required if			
	reporting			
	additional dose			
	or booster of			
	Janssen COVID-			
	19 vaccine			
hpsvc19vaccVOs[8].covid19vaccine	Conditionally	JANSSEN2	_	COVID-19 Vaccine (JANSSEN – additional dose or
	Required		_	booster of JANSSEN COVID-19 vaccine)
	Required if			
	reporting			
	additional dose			
	or booster of			
	Janssen COVID-			
	19 vaccine			
hpsvc19vaccVOs[8].numEmpVacc	Conditionally	-	Must be a	Cumulative number of employee HCP, from
	Required		whole number	numEmpEligAddtIDose, who have received an
	De sucies diff			additional dose or booster of Janssen COVID-19 vaccine
	Required if			
	reporting			
	additional dose			

Field	Requirement	Values	Format [†]	Description of Field
	or booster of			
	Janssen COVID-			
	19 vaccine			
hpsvc19vaccVOs[8].numLIPVacc	Conditionally	-	Must be a	Cumulative number of employee HCP, from
	Required		whole number	numLIPEligAddtlDose, who have received an additional dose or booster of Janssen COVID-19 vaccine
	Required if			
	reporting			
	additional dose			
	or booster of			
	Janssen COVID-			
	19 vaccine			
hpsvc19vaccVOs[8].numVolVacc	Conditionally	-	Must be a	Cumulative number of employee HCP, from
	Required		whole number	numVolAddtlDose, who have received an additional
				dose or booster of Janssen COVID-19 vaccine
	Required if			
	reporting			
	additional dose			
	or booster of			
	Janssen COVID-			
	19 vaccine			
hpsvc19vaccVOs[8].numOCPVacc	Conditionally	-	Must be a	Cumulative number of employee HCP, from
	Required		whole number	numOCPAddtlDose, who have received an additional
				dose or booster of Janssen COVID-19 vaccine
	Required if			
	reporting			
	additional dose			
	or booster of			
	Janssen COVID-			
	19 vaccine			

Field	Requirement	Values	Format ⁺	Description of Field
hpsvc19vaccVOs[9].covid19vaccinename	Conditionally Required Required if reporting additional dose or booster of vaccine of unspecified manufacturer	UNSPECIFIED	_	COVID-19 Vaccine Name (UNSPECIFIED - unspecified manufacturer)
hpsvc19vaccVOs[9].covid19vaccine	Conditionally Required if reporting additional dose or booster of vaccine of unspecified manufacturer	UNSPECIFIED2	-	COVID-19 Vaccine (UNSPECIFIED – additional dose or booster of COVID-19 vaccine series: unspecified manufacturer)
hpsvc19vaccVOs[9].numEmpVacc	Conditionally Required if reporting additional dose or booster of vaccine of unspecified manufacturer	-	Must be a whole number	Cumulative number of employee HCP, from numEmpEligAddtlDose, who have received an additional dose or booster of COVID-19 vaccine: unspecified manufacturer
hpsvc19vaccVOs[9].numLIPVacc	Conditionally Required	-	Must be a whole number	Cumulative number of employee HCP, from numLIPEligAddtlDose, who have received an additional

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Field	Requirement	Values	Format ⁺	Description of Field
	Required if reporting additional dose or booster of vaccine of unspecified			dose or booster of COVID-19 vaccine: unspecified manufacturer
hpsvc19vaccVOs[9].numVolVacc	manufacturer Conditionally Required Required if reporting additional dose or booster of vaccine of unspecified manufacturer	-	Must be a whole number	Cumulative number of employee HCP, from numVolAddtlDose, who have received an additional dose or booster of COVID-19 vaccine: unspecified manufacturer
hpsvc19vaccVOs[9].numOCPVacc	Conditionally Required Required if reporting additional dose or booster of vaccine of unspecified manufacturer	-	Must be a whole number	Cumulative number of employee HCP, from numOCPAddtlDose, who have received an additional dose or booster of COVID-19 vaccine: unspecified manufacturer