

Please refer to the table below for complete information on the variables included on .CSV templates for Person-Level COVID-19 Vaccination Forms for HCP (Healthcare Personnel Safety Component). These are accurate as of NHSN Release in June 2024.

Importing via .csv file- Person-Level COVID-19 Vaccination Form- HPS Component				
Table 1: NHSN Person-Level COVID-19 Vaccination Form – HPS Import File Format				
Field (alias if applicable)	Requirement	Values	Format†	Description of Field
Orgid	Required	–	must be a whole number	Must be a valid NHSN Facility ID (organization identifier)
hcpid	Required	–	Character (15)	HCP identifier - a unique identifier for the individual, assigned by your facility
name	Required	–	Character (30)	HCP First Name
surname	Required	–	Character (30)	HCP Last Name
gender	Required	F M O	Character (1)	HCP Gender F – Female M – Male O – Other/Unknown
Sexatbirth	Optional	F M U	Character (1)	HCP Sex at Birth F - Female M - Male U - Unknown
Genderidentity	Optional	F FTM M MTF NONCON OTHER ABU	Character (6)	HCP Gender Identity F - Female FTM – Female to Male transgender M - Male MTF – Male to Female transgender NONCON – Identifies as nonconforming OTHER - Other ABU – Asked but unknown
dob	Required	MM/DD/YYYY	Datetime	HCP Date of Birth
ethnicity	Required	HISP NOHISP DEC UNK	Character (6)	HCP Ethnicity HISP – Hispanic or Latino NOHISP – Not Hispanic or Latino DEC – Declined to respond. UNK – Unknown
race	Required	AMIN ASIAN AAB NH-PI WHITE DEC UNK	Character (5)	HCP Race: AMIN – American Indian/Alaskan native ASIAN – Asian AAB – Black or African American NH-PI – Native Hawaiian/Other Pacific Islander WHITE – White DEC – Declined to respond. UNK- Unknown
hcpEmpStart	Required	MM/DD/YYYY	Datetime	HCP Start of Employment Date
hcpEmpEnd	Conditionally	MM/DD/YYYY	Datetime	HCP End of Employment Date



	required Required	VACCHOSP VACCIPF VACCIRF	–	Vaccination location type VACCHOSP – For data reported for most facility types including acute care hospitals, ambulatory surgery centers, free-standing inpatient psychiatric facilities, free-standing inpatient rehabilitation facilities, long-term acute care hospitals, 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 VACCIPF – For data reported by a parent facility (often an acute care facility) for an inpatient psychiatric unit with a unique CCN that is mapped as a location of the parent facility. 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 a parent facility (often an acute care facility) for an inpatient rehabilitation unit with a unique CCN that is mapped as a location of the parent facility. This selection is only available for acute care facilities reporting data for IRF units with a separate CCN from the acute care facility.
hcpCategory	Required	EMP LIP VOL OCP	Character (10)	HCP Category: EMP - Employees (staff on facility payroll) LIP - Licensed independent practitioners: Physicians, advanced practice nurses, & physician assistants VOL - Adult students/trainees & volunteers OCP - Other Contract Personnel
dose1Date	Conditionally required (each record must contain At least ONE status- This means each record must be classified into at least one of the main categories, such as having at least one vaccine entered,	MM/DD/YYYY	Datetime	Dose 1 vaccination date

	<p>contraindication, declined, unknown vaccination status)</p> <p>For Novavax dose date must be $\geq 6/1/2022$</p> <p>For Bivalent Moderna or Bivalent Pfizer dose date must be $\geq 4/19/2023$</p> <p>For Monovalent Moderna or Monovalent Pfizer dose date must be $< 4/19/2023$</p>			
dose1Mfg	<p>Conditionally required if Dose1Date provided</p> <p>If dose1Mfg = Janssen, then subsequent doses recorded beginning with dose 3 fields.</p>	<p>BIMODERNA BIPFIZBION JANSSEN MODERNA PFIZBION NOVAVAX UNSPECIFIED</p>	Character (15)	Dose 1 vaccine manufacturer name
dose2Date	<p>Conditionally required (each record must contain At least ONE status- This means each record must be classified into at least one of the main categories, such as having at least one vaccine entered, contraindication, declined, unknown vaccination status)</p>	MM/DD/YYYY	Datetime	Dose 2 vaccination date

	<p>For Novavax dose date must be $\geq 6/1/2022$</p> <p>For Bivalent Moderna or Bivalent Pfizer dose date must be $\geq 4/19/2023$</p> <p>For Monovalent Moderna or Monovalent Pfizer dose date must be $< 4/19/2023$</p>			
dose2Mfg	Conditionally required if Dose2Date provided	BIMODERNA BIPFIZBION MODERNA PFIZBION NOVAVAX UNSPECIFIED	Character (15)	Dose 2 vaccine manufacturer name
medDate	Conditionally required (each record must contain At least ONE status- This means each record must be classified into at least one of the main categories, such as having at least one vaccine entered, contraindication, declined, unknown vaccination status)	MM/DD/YYYY	Datetime	Contraindication or exclusion noted date
decDate	Conditionally required (each record must contain At least ONE status- This means each record must be classified into at least one of the main categories, such as having at least one vaccine	MM/DD/YYYY	Datetime	Declination date

	entered , contraindication, declined, unknown vaccination status)			
decReason	Conditionally required if decDate provided	RELIGIOUS OTHER UNKNOWN	Character (10)	Declination reason: RELIGIOUS - Received official religious exemption OTHER - Other UNKNOWN - Unknown
unkvaccstatusdate	Conditionally required (each record must contain At least ONE status- This means each record must be classified into at least one of the main categories, such as having at least one vaccine entered , contraindication, declined, unknown vaccination status)	MM/DD/YYYY	Datetime	Unknown status date
Dose3date (adddlDosedate)	Conditionally required For BIMODERNA and BIPFIZBION, dose3date must be >= 8/31/2022 For Monovalent Moderna or Monovalent Pfizer dose date must be < 4/19/2023	MM/DD/YYYY	Datetime	Third dose vaccination date
Dose3Mfg (adddlDosemfg)	Conditionally required if dose3Date provided	BIMODERNA BIPFIZBION MODERNA PFIZBION JANSSEN UNSPECIFIED	Character (15)	Third dose vaccine manufacturer name BIMODERNA – updated bivalent Moderna vaccine BIPFIZBION – updated bivalent Pfizer vaccine MODERNA – original monovalent Moderna vaccine PFIZBION – original monovalent Pfizer vaccine

				JANSSEN – original monovalent Janssen vaccine UNSPECIFIED – unknown manufacturer
Dose4Date (boostdose2date)	Conditionally required For BIMODERNA and BIPFIZBION Dose3Date >= 8/31/2022 For Monovalent Moderna or Monovalent Pfizer dose date must be < 4/19/2023	MM/DD/YYYY Must be > dose3date	Datetime	Fourth dose vaccination date
Dose4Mfg (boostdose2mfg)	Conditionally required if Dose4Date provided	BIMODERNA BIPFIZBION MODERNA PFIZBION JANSSEN UNSPECIFIED	Character (15)	Fourth dose vaccine manufacturer name BIMODERNA – updated bivalent Moderna vaccine BIPFIZBION – updated bivalent Pfizer vaccine MODERNA – original monovalent Moderna vaccine PFIZBION – original monovalent Pfizer vaccine JANSSEN – original monovalent Janssen vaccine UNSPECIFIED – unknown manufacturer
Dose5Date (boostdose3date)	Conditionally required For BIMODERNA and BIPFIZBION Dose5Date >= 8/31/2022 For Monovalent Moderna or Monovalent Pfizer dose date must be < 4/19/2023	MM/DD/YYYY Must be > dose4date	Datetime	Fifth dose vaccination date
Dose5mfg (boostdose3mfg)	Conditionally required if Dose5Date provided	BIMODERNA BIPFIZBION MODERNA PFIZBION JANSSEN	Character (15)	Fifth dose vaccine manufacturer name BIMODERNA – updated bivalent Moderna vaccine BIPFIZBION – updated bivalent Pfizer

		UNSPECIFIED		vaccine MODERNA – original monovalent Moderna vaccine PFIZBION – original monovalent Pfizer vaccine JANSSEN – original monovalent Janssen vaccine UNSPECIFIED – unknown manufacturer
Dose6Date (boostdose4date)	Conditionally required For BIMODERNA and BIPFIZBION Dose6Date >= 8/31/2022 For Monovalent Moderna or Monovalent Pfizer dose date must be < 4/19/2023	MM/DD/YYYY Must be > dose5date	Datetime	Sixth dose vaccination date
Dose6mfg (boostdose4mfg)	Conditionally required if Dose6Date provided	BIMODERNA BIPFIZBION MODERNA PFIZBION JANSSEN UNSPECIFIED	Character (15)	Sixth dose vaccine manufacturer name BIMODERNA – updated bivalent Moderna vaccine BIPFIZBION – updated bivalent Pfizer vaccine MODERNA – original monovalent Moderna vaccine PFIZBION – original monovalent Pfizer vaccine JANSSEN – original monovalent Janssen vaccine UNSPECIFIED – unknown manufacturer
Dose7Date (boostdose5date)	Conditionally required For BIMODERNA and BIPFIZBION Dose7Date >= 8/31/2022 For Monovalent Moderna or Monovalent Pfizer dose date must be <	MM/DD/YYYY Must be > dose6date	Datetime	Seventh dose vaccination date

	4/19/2023			
Dose7mfg (boostdose5mfg)	Conditionally required if Dose6Date provided	BIMODERNA BIPFIZBION MODERNA PFIZBION JANSSEN UNSPECIFIED	Character (15)	Seventh dose vaccine manufacturer name BIMODERNA – updated bivalent Moderna vaccine BIPFIZBION – updated bivalent Pfizer vaccine MODERNA – original monovalent Moderna vaccine PFIZBION – original monovalent Pfizer vaccine JANSSEN – original monovalent Janssen vaccine UNSPECIFIED – unknown manufacturer
dose1NDC	Optional	-	Character (30)	Dose 1 vaccine NDC number
dose1Lot	Optional	-	Character (30)	Dose 1 vaccine Lot number
dose1ExpDate	Optional	MM/DD/YYYY	Datetime	Dose 1 vaccine expiration date
dose2NDC	Optional	-	Character (30)	Dose 2 vaccine NDC number
dose2Lot	Optional	-	Character (30)	Dose 2 vaccine Lot number
dose2ExpDate	Optional	MM/DD/YYYY	Datetime	Dose 2 vaccine expiration date
dose3NDC (addtdosendc)	Optional	-	Character (30)	Third dose vaccine NDC number
dose3Lot (addtdoselot)	Optional	-	Character (30)	Third dose vaccine Lot number
dose3ExpDate (addtdosexpdate)	Optional	MM/DD/YYYY	Datetime	Third dose vaccine expiration date
dose4ndc (boostdose2ndc)	Optional	-	Character (30)	Fourth dose vaccine NDC number
dose4lot (boostdose2lot)	Optional	-	Character (30)	Fourth dose vaccine Lot number
dose4expdate (boostdose2expdate)	Optional	MM/DD/YYYY	Datetime	Fourth dose expiration date
dose5ndc (boostdose3ndc)	Optional	-	Character (30)	Fifth dose vaccine NDC number
dose5lot (boostdose3lot)	Optional	-	Character (30)	Fifth dose vaccine Lot number
dose5expdate (boostdose3expdate)	Optional	MM/DD/YYYY	Datetime	Fifth dose vaccine expiration date
Dose6ndc (boostdose4ndc)	Optional	-	Character (30)	Sixth dose vaccine NDC number
Dose6lot (boostdose4lot)	Optional	-	Character (30)	Sixth dose vaccine Lot number
Dose6expdate (boostdose4expdate)	Optional	MM/DD/YYYY	Datetime	Sixth dose vaccine expiration date
Dose7ndc (boostdose5ndc)	Optional	-	Character (30)	Seventh dose vaccine NDC number
Dose7lot (boostdose5lot)	Optional	-	Character (30)	Seventh dose vaccine Lot number
Dose7expdate (boostdose5expdate)	Optional	MM/DD/YYYY	Datetime	Seventh dose vaccine expiration date
vaccElsewhere	Optional	Y N	Character (1)	Vaccinated at another location? Y – Yes N – No
vaccEdDate	Optional	MM/DD/YYYY	Datetime	Vaccination Education Provided - date
comment	Optional	-	Character (2000)	Comments