

## Healthcare Personnel Influenza Vaccination Cumulative Summary for Long-Term Care Facilities (CDC 57.149, Rev 2)

2 Pages  
\*required for saving

*Facility ID#:						
*Vaccination type: Influenza	*Influenza subtype <sup>a</sup> : <input type="checkbox"/> Seasonal	*Influenza Season <sup>b</sup> :				
Week of Data Collection (Monday – Sunday): __/__/____-__/__/____					Date Last Modified: __/__/____	
	<b>Healthcare Personnel (HCP) Categories</b>					
	<b>Ancillary services employees<sup>*c</sup></b>	<b>Nurse employees<sup>*d</sup></b>	<b>Aide, assistant and technician employees<sup>*e</sup></b>	<b>Therapist employees<sup>*f</sup></b>	<b>Physician and licensed independent practitioner employees<sup>*g</sup></b>	<b>Other HCP<sup>h</sup></b>
1. Number of HCP that were eligible to have worked at this healthcare facility for at least 1 day during the week of data collection						
2. Cumulative number of HCP in question #1 that received an influenza vaccination at this healthcare facility since influenza vaccine became available this season						
3. Cumulative number of HCP in question #1 that provided a written report or documentation of influenza vaccination outside this healthcare facility since influenza vaccine became available this season						

### Vaccine Availability

4. Has your facility received its supply of influenza vaccine for the current influenza season? [Yes, or Only a portion of the supply was received, or No]

5. Is your facility currently experiencing a shortage of influenza vaccine for the current influenza season? [Yes or No]

#### Custom Fields

Label		Label	
_____	_ / _ / _	_____	_ / _ / _
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

#### Comments

<sup>a</sup> For the purposes of NHSN, influenza subtype refers to whether seasonal or non-seasonal vaccine is used. Seasonal is the default and only current choice.

<sup>b</sup> For the purposes of NHSN, an influenza season is defined as July 1 to June 30.

<sup>c</sup> Ancillary services employees: Environmental, laundry, maintenance, and dietary services.

<sup>d</sup> Nurse employees: Registered nurses and licensed practical/vocational nurses.

<sup>e</sup> Aide, assistant, and technician employees: Certified nursing assistants, nurse aides, medication aides, and medication assistants.

<sup>f</sup> Therapist employees: Therapists (such as respiratory, occupational, physical, speech, and music therapists) and therapy assistants.

<sup>g</sup> Physician and licensed independent practitioner employees: Physicians, residents, fellows, advanced practice nurses, and physician assistants.

<sup>h</sup> Other HCP: Persons not included in the employee categories listed here, regardless of clinical responsibility or patient contact, including contract staff, students, and other non-employees.

Assurance of Confidentiality: The voluntarily provided information obtained in this surveillance system that would permit identification of any individual or institution is collected with a guarantee that it will be held in strict confidence, will be used only for the purposes stated, and will not otherwise be disclosed or released without the consent of the individual, or the institution in accordance with Sections 304, 306 and 308(d) of the Public Health Service Act (42 USC 242b, 242k, and 242m(d)).  
 CDC 57.149 v2, Rev 2.

