

Facilities and Groups – Importing COVID-19 Test Results using a .csv file for Long Term Care Facilities for NHSN release 9.5.1 and going forward.

NHSN COVID-19 Test Results [Long Term Care Facility](#) Import File Format for .csv. **Note:** *This file format was documented for Groups and Facilities using Direct to upload POC data into NHSN. NHSN is working to develop functionality, in a future release, to use a very similar file format for .csv uploads (Groups and Facilities) using manual entry.*

Fields	Requirement	Values	Format and Notes	Description of Field
resultsVersion	Conditional	This field is used to provide the version of the result being reported Either <i>version number</i> or <i>date result released</i> should be populated. <i>Not both</i> Enter '1' if this is an initial test result for the patient Note: Increment version number for each subsequent correction to the existing test result (e.g. 2, 3...)	Integer (2)	Result Version Number
dateResultsReleased	Conditional	This field is used to provide the date/time the result being reported was released Either <i>date result released</i> or <i>version number</i> should be populated. <i>Not both</i>	DateTime 12 hour: MM/DD/YYYY HH:MM AM/PM Military: MM/DD/YYYY HH:MM Supports both 12 hour and Military time formats and may include seconds	Date/Time Result Released
orgID	Required		Character(5) ##### Must be a valid NHSN Facility ID Number	Facility ID Number
cliaID	Required		Character(10)	CLIA ID



Fields	Requirement	Values	Format and Notes	Description of Field
staffID	Conditional	Required/populate only if reporting test results for a Staff Note: Do not enter value for resID and visitorID if this field is valued	Character(15)	Staff ID Number
resID	Conditional	Required/populate only if reporting test results for a Resident Note: Do not enter value for staffID and visitorID if this field is valued	Character(15)	Resident ID Number
visitorID	Conditional	Required/populate only if reporting test results for a Visitor Note: Do not enter value for staffID and resID if this field is valued	Character(15)	Visitor ID Number
gname	Required		Character(30)	First Name
mname	Optional		Character(15)	Middle Name
surname	Required		Character(30)	Last Name
dob	Required		Date (MM/DD/YYYY)	Date of Birth
gender	Required	F for Female M for Male O for Other	Character(1)	Gender
race	Required	<i>Multiple race entries are allowed – separate with a forward slash “/” (e.g. AAB/WHITE)</i> AMIN for American Indian or Alaska Native ASIAN for Asian AAB for Black or African American NH-PI for Native Hawaiian or Other Pacific Islander WHITE for White	Character(5)	Race
ethnicity	Required	HISP for Hispanic or Latino NOHISP for Not Hispanic or Not Latino	Character (6)	Ethnicity
addr1	Required	Only populate if reporting test results for a Staff or Visitor	Character(30)	Street Address 1



Fields	Requirement	Values	Format and Notes	Description of Field
addr2	Optional	Only populate if reporting test results for a Staff or Visitor	Character(30)	Street Address 2
city	Required	Only populate if reporting test results for a Staff or Visitor	Character(30)	City
state	Required	<p>Only populate if reporting test results for a Staff or Visitor</p> <p><i>Reporting is allowed for Staffs and Visitors with addresses in the United States and only the following states/provinces in Canada and Mexico:</i></p> <p><u>CAN:</u> AB for Alberta BC for British Columbia MB for Manitoba ON for Ontario QC for Quebec SK for Saskatchewan YT for Yukon</p> <p><u>MEX:</u> BC for Baja California SO for Sonora CH for Chihuahua NL for Nuevo Leon TM for Tamaulipas</p>	Character(2)	State
zip	Required	Only populate if reporting test results for a Staff or Visitor	<p>Character(10)</p> <p>Format for US/MX is 5 numeric</p> <p>Format for CA is 3 alpha numeric characters followed by a space and followed by 3 additional alpha numeric characters (e.g. H8Y 1V3)</p>	Zip



Fields	Requirement	Values	Format and Notes	Description of Field
zipExt	Optional	Only populate if reporting test results for a Staff or Visitor	Character(4) Zip extension should be blank if Country is Canada or Mexico	Zip Extension
country	Required	Only populate if reporting test results for a Staff or Visitor CA for Canada MX for Mexico US for United States	Character(2)	Country
county	Required	Only populate if reporting test results for a Staff or Visitor living in the USA. Must use the NHSN county codes (e.g. GA089 for DeKalb county in GA)	Character(30) County should be blank if Country is Canada or Mexico	County
homePhone	Required	Only populate if reporting test results for a Staff or Visitor	Character(25) Include hyphen (-) in phone number Format for US/CA: XXX-XXX-XXXX (10) Format for MX: XXX.XXX-XXX (9)	Home Phone
homePhoneExt	Optional	Only populate if reporting test results for a Staff or Visitor	Character(4)	Home Phone Extension
testOrderDate	Required		Date Format: (MM/DD/YYYY)	Date Test Ordered
pocDevice	Required	Enter only <u>one</u> device from list below: ACCULA for “Accula SARS-Cov-2 Test_Mesa Biotech Inc._EUA” ASSUREIGG for “Assure SARS-CoV-2 IgG” ASSUREIGM for “Assure SARS-CoV-2 IgM”	Character(9)	POC Device



Fields	Requirement	Values	Format and Notes	Description of Field
		<p>BINAXNOW for “BinaxNOW COVID-19 Ag Card_Abbott Diagnostics Scarborough, Inc._EUA”</p> <p>BIOFIRE for “BioFire SARS-CoV-2”</p> <p>CARESTART for “CareStart COVID-19 Antigen test_Access Bio, Inc._EUA”</p> <p>COBAS for “cobas SARS-CoV-2”</p> <p>CUE for “Cue COVID-19 Test_Cue Health Inc._EUA”</p> <p>IDNOW for “ID NOW COVID-19_Abbott Diagnostics Scarborough, Inc._EUA”</p> <p>LUMIRA for “LumiraDx SARS-CoV-2 Ag Test_LumiraDx UK Ltd._EUA”</p> <p>SOFIA for “Sofia SARS Antigen FIA_Quidel Corporation_EUA”</p> <p>VERITOR for “BD Veritor System for Rapid Detection of SARS-CoV-2_Becton, Dickinson and Company (BD)_EUA”</p>		
testOrdered	Required	<p><u>Accula:</u> COV19N for “SARS-CoV-2 (COVID-19) N gene [Presence] in Nose by NAA with probe detection”</p> <p><u>Assure IgG:</u> ASSUREIGG for “SARS-CoV-2 (COVID-19) IgG Ab [Presence] in Serum, Plasma or Blood by Rapid immunoassay”</p> <p><u>Assure IgM:</u> ASSUREIGM for “SARS-CoV-2 (COVID-19) IgM Ab [Presence] in Serum, Plasma or Blood by Rapid immunoassay”</p>	Character(15)	Test Ordered



Fields	Requirement	Values	Format and Notes	Description of Field
		<p><u>BD Veritor:</u> COVID19 for “SARS-CoV-2 (COVID-19) Ag [Presence] in Respiratory specimen by Rapid immunoassay”</p> <p><u>BinaxNOW:</u> COVID19 for “SARS-CoV-2 (COVID-19) Ag [Presence] in Respiratory specimen by Rapid immunoassay”</p> <p><u>BioFire:</u> BIOFIRESARS for “SARS-CoV-2 (COVID-19) RNA [Presence] in Nasopharynx by NAA with non-probe detection”</p> <p><u>CareStart:</u> COVID19 for “SARS-CoV-2 (COVID-19) Ag [Presence] in Respiratory specimen by Rapid immunoassay”</p> <p><u>Cobas:</u> COBASSARS for “SARS-CoV-2 (COVID-19) RNA [Presence] in Respiratory specimen by NAA with probe detection”</p> <p><u>Cue:</u> COV19RNA for “SARS-CoV-2 (COVID19) RNA [Presence] in Nose by NAA with probe detection”</p> <p><u>ID NOW:</u> COV19RDR for “SARS coronavirus 2 RdRp gene [Presence] in Respiratory specimen by NAA with probe detection”</p> <p><u>LumiraDx:</u> COV1COV2 for “SARS-CoV+SARS-CoV-2 (COVID-19) Ag [Presence] in Respiratory specimen by Rapid” immunoassay</p>		

Fields	Requirement	Values	Format and Notes	Description of Field
		<p><u>Sofia:</u> COV1COV2 for “SARS coronavirus+SARS coronavirus 2 Ag [Presence] in Respiratory specimen by Rapid immunoassay”</p>		
specType	Required	<p><u>Accula:</u> NASALSW for “Nasal Swab”</p> <p><u>Assure IgG:</u> CAPWB for Fingertstick whole blood PLASMA for Plasma SERUM for Serum VENWB for Venous whole blood</p> <p><u>Assure IgM:</u> CAPWB for Fingertstick whole blood PLASMA for Plasma SERUM for Serum VENWB for Venous whole blood</p> <p><u>BD Veritor:</u> NASALSW for “Nasal Swab”</p> <p><u>BinaxNOW:</u> NASALSW for “Nasal Swab”</p> <p><u>BioFire:</u> NASOPHARSW for “Nasopharyngeal Swab”</p> <p><u>CareStart:</u> NASOPHARSW for “Nasopharyngeal Swab”</p> <p><u>Cobas:</u> NASALSW for “Nasal Swab” NASOPHARSW for “Nasopharyngeal Swab”</p> <p><u>Cue:</u> NASALSW for “Nasal Swab”</p> <p><u>ID NOW:</u> NASALSW for “Nasal Swab”</p>	Character(10)	Specimen Type



Fields	Requirement	Values	Format and Notes	Description of Field
		<p>NASOPHARSW for “Nasopharyngeal Swab” NASOOROSW for “Nasal and Throat Swab combination” THROATSW for “Throat Swab”</p> <p><u>LumiraDx:</u> NASALSW for “Nasal Swab”</p> <p><u>Sofia:</u> NASALSW for “Nasal Swab” NASOPHARSW for “Nasopharyngeal Swab”</p>		
result	Required	<p><u>Accula:</u> POS for Positive Test for SARS-CoV-2 NEG for Negative Test for SARS-CoV-2</p> <p><u>Assure IgG</u> POS for IgG Positive NEG for IgG Negative</p> <p><u>Assure IgM</u> POS for IgM Positive NEG for IgM Negative</p> <p><u>BD Veritor:</u> POS for CoV2: + NEG for CoV2: -</p> <p><u>BinaxNOW:</u> POS for Positive NEG for Negative</p> <p><u>Biofire:</u> POS for SARS-CoV-2 Detected NEG for SARS-CoV-2 Not detected</p> <p><u>CareStart:</u> POS for COVID-19 Positive NEG for COVID-19 Negative</p> <p><u>Cobas:</u> POS for SARS-CoV-2 Detected NEG for SARS-CoV-2 Not detected</p>	Character(3)	Test Result



Fields	Requirement	Values	Format and Notes	Description of Field
		<p><u>Cue:</u> POS for SARS-Cov-2 Positive NEG for SARS-Cov-2 Negative</p> <p><u>ID NOW:</u> POS for COVID-19 Positive POS for COVID-19 Negative</p> <p><u>LumiraDx:</u> POS for Positive SARS Co-V-2 Ag NEG for Negative SARS Co-V-2 Ag</p> <p><u>Sofia:</u> POS for SARS Positive NEG for SARS Negative</p>		
specID	Required	Enter specimen number from POC device; if available. Otherwise, provide a unique generated specimen ID Note: <i>The same specimen ID MUST be used when sending an update for an existing record</i>	Character(18)	Specimen ID
symptomatic	Required	Y for Yes N for No U for Unknown	Character(1)	Was person symptomatic?
pregnant	Required	Y for Yes N for No U for Unknown	Character(1)	Was person pregnant?
physician_gname	Required		Character(30)	Physician first name
physician_surname	Required		Character(30)	Physician last name
physician_addr1	Optional		Character(30)	Street Address 1
physician_addr2	Optional		Character(30)	Street Address 2
physician_city	Optional		Character(30)	City
physician_state	Optional		Character(2)	State
physician_zip	Required		Character(10)	Zip
physician_zipExt	Optional		Character(4)	Zip Extension



Fields	Requirement	Values	Format and Notes	Description of Field
physician_physician_workPhone	Optional		Character(25) Include hyphen (-) in phone number Format: XXX-XXX-XXXX (10)	Work Phone
physician_workPhoneExt	Optional		Character(4)	Work Phone Extension

