

Please refer to the tables below for complete information on the variables included on .CSV templates for Event-Level COVID-19 Vaccination Forms for Residents and HCW (Long term Care Component). These are accurate as of NHSN Release 10.1.2.2 (March 2022).

Importing via .csv file Event-Level COVID-19 Vaccination Form- Residents - LTC Component

Table 1: NHSN Event-Level COVID-19 Vaccination Form- Residents Import File Format

Field	Requirement	Values	Format	Description of Field
orgID	Required	-	must be a whole number	Must be a valid NHSN Facility ID (organization identifier)
resID	Required	-	Character (15)	Resident identifier - a unique identifier for the individual, assigned by your facility
resAdmitDate	Required	MM/DD/YYYY	Datetime	Resident Admit Date
resDischDate	Optional	MM/DD/YYYY	Datetime	Resident Discharge Date
resGName	Required	-	Character (30)	Resident First Name
resSurname	Required	-	Character (30)	Resident Last Name
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 partial or complete primary series vaccination, contraindication, declined, unknown vaccination status)	MM/DD/YYYY	Datetime	Dose 1 vaccination date
dose1Mfg	Conditionally required if Dose1Date provided	JANSSEN MODERNA PFIZBION UNSPECIFIED	Character (15)	Dose 1 vaccine manufacturer name
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



Field	Requirement	Values	Format	Description of Field
dose2Date	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 partial or complete primary series vaccination, contraindication, declined, unknown vaccination status)	MM/DD/YYYY	Datetime	Dose 2 vaccination date
dose2Mfg	Conditionally required if Dose2Date provided	MODERNA PFIZBION UNSPECIFIED	Character (15)	Dose 2 vaccine manufacturer name
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
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 partial or complete primary series vaccination, contraindication, declined, unknown vaccination status)	-	-	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 partial or complete primary series vaccination, contraindication, declined, unknown vaccination status)	MM/DD/YYYY	Datetime	Declination date

Field	Requirement	Values	Format	Description of Field
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 partial or complete primary series vaccination, contraindication, declined, unknown vaccination status)	MM/DD/YYYY	Datetime	Unknown status date
addtIDoseDate	Conditionally required	MM/DD/YYYY	Datetime	Additional/booster dose vaccination date
addtIDoseMfg	Conditionally required if addtIDoseDate provided	JANSSEN MODERNA PFIZBION UNSPECIFIED	Character (15)	Additional/booster dose vaccine manufacturer name
addtIDoseNDC	Optional	-	Character (30)	Additional/booster dose vaccine NDC number
addtIDoseLot	Optional	-	Character (30)	Additional/booster dose vaccine Lot number
addtIDoseExpDate	Optional	MM/DD/YYYY	Datetime	Additional/booster dose vaccine expiration date
vaccElsewhere	Optional	Y for Yes N for No	Character (1)	Vaccinated at another location? Y for Yes N for No
vaccEdDate	Optional	MM/DD/YYYY	Datetime	Vaccination Education Provided - date
comment	Optional	-	Character (2000)	Comments



Importing via .csv file - Event-Level COVID-19 Vaccination Form- HCP - LTC Component

Table 2: NHSN Event-Level COVID-19 Vaccination Form- HCP Import File Format

Field	Requirement	Values	Format	Description of Field
orgID	Required	-	must be a whole number	Must be a valid NHSN Facility ID (organization identifier)
staffID	Required	-	Character (15)	Resident identifier - a unique identifier for the individual, assigned by your facility
hcpEmpStart	Required	MM/DD/YYYY	Datetime	HCP Start of Employment Date
hcpEmpEnd	-	MM/DD/YYYY	Datetime	HCP End of Employment Date
hcpGName	Required	-	Character (30)	HCP First Name
hcpSurname	Required	-	Character (30)	HCP Last Name
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 much be classified into at least one of the main categories, such as partial or complete primary series vaccination, contraindication, declined, unknown vaccination status)	MM/DD/YYYY	Datetime	Dose 1 vaccination date
dose1Mfg	Conditionally required if Dose1Date provided	JANSSEN MODERNA PFIZBION UNSPECIFIED	Character (15)	Dose 1 vaccine manufacturer name



Field	Requirement	Values	Format	Description of Field
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
dose2Date	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 partial or complete primary series vaccination, contraindication, declined, unknown vaccination status)	MM/DD/YYYY	Datetime	Dose 2 vaccination date
dose2Mfg	Conditionally required if Dose2Date provided	MODERNA PFIZBION UNSPECIFIED	Character (15)	Dose 2 vaccine manufacturer name
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
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 partial or complete primary series vaccination, contraindication, declined, unknown vaccination status)	-	-	Contraindication or exclusion noted date

Field	Requirement	Values	Format	Description of Field
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 partial or complete primary series vaccination, contraindication, declined, unknown vaccination status)	MM/DD/YYYY	Datetime	Declination date
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 partial or complete primary series vaccination, contraindication, declined, unknown vaccination status)	MM/DD/YYYY	Datetime	Unknown status date
addtDoseDate	Conditionally required	MM/DD/YYYY	Datetime	Additional/booster dose vaccination date
addtDoseMfg	Conditionally required if addtDoseDate provided	JANSSEN MODERNA PFIZBION UNSPECIFIED	Character (15)	Additional/booster dose vaccine manufacturer name
addtDoseNDC	Optional	-	Character (30)	Additional/booster dose vaccine NDC number
addtDoseLot	Optional	-	Character (30)	Additional/booster dose vaccine Lot number
addtDoseExpDate	Optional	MM/DD/YYYY	Datetime	Additional/booster dose vaccine expiration date



Field	Requirement	Values	Format	Description of Field
vaccElsewhere	Optional	Y for Yes N for No	Character (1)	Vaccinated at another location?
vaccEdDate	Optional	MM/DD/YYYY	Datetime	Vaccination Education Provided - date
comment	Optional	-	Character (2000)	Comments

