



Instructions for Completion of the COVID-19 Patient Impact and Hospital Capacity Module Form (CDC 57.130)

Data Field	Instruction for Data Collection
Facility ID #	The NHSN-assigned facility ID will be auto-entered by the computer.
Summary Census ID #	Auto-generated by the computer.
Date for which patient impact and hospital capacity counts are reported	<i>Required.</i> Select the date for which the recorded data was collected for the following questions.

Section-1: Patient Impact

Data Field	Instruction for Data Collection
HOSPITALIZED: Patients currently hospitalized in an inpatient bed who have suspected or confirmed COVID-19	<p>Enter the number of patients hospitalized in an inpatient bed at the time the data is collected who have suspected or confirmed COVID-19. This includes the patients with laboratory-confirmed or clinically diagnosed COVID-19.</p> <p>Confirmed: A patient with a laboratory-confirmed COVID-19 diagnosis</p> <p>Suspected: A patient without a laboratory confirmed COVID-19 diagnosis who, in accordance with CDC’s Interim Public Health Guidance for Evaluating Persons Under Investigation (PUIs), has signs and symptoms compatible with COVID-19 (most patients with confirmed COVID-19 have developed fever and/or symptoms of acute respiratory illness, such as cough, shortness of breath or myalgia/fatigue).</p>
HOSPITALIZED and VENTILATED: Patients currently hospitalized in an inpatient bed who have suspected or confirmed COVID-19 and are on a mechanical ventilator	<p>Enter the number of patients hospitalized in an inpatient bed who have suspected or confirmed COVID-19 and are currently on a mechanical ventilator* at the time the data is collected . This includes the patients with laboratory-confirmed or clinically diagnosed COVID-19.</p>



	<p>*Ventilator: Any device used to support, assist or control respiration (inclusive of the weaning period) through the application of positive pressure to the airway when delivered via an artificial airway, specifically an oral/nasal endotracheal or tracheostomy tube.</p> <p>Note: Ventilation and lung expansion devices that deliver positive pressure to the airway (for example: CPAP, BiPAP, bi-level, IPPB and PEEP) via non-invasive means (for example: nasal prongs, nasal mask, full face mask, total mask, etc.) are not considered ventilators unless positive pressure is delivered via an artificial airway (oral/nasal endotracheal or tracheostomy tube).</p>
<p>HOSPITAL ONSET: Patients currently hospitalized in an inpatient bed with onset of suspected or confirmed COVID-19 fourteen or more days after hospital admission due to a condition other than COVID-19</p>	<p>Enter the number of patients hospitalized in an inpatient bed at the time the data is collected with onset of suspected or confirmed COVID-19 fourteen or more days after hospitalization (admission date = hospital day 1). This includes laboratory-confirmed or clinically diagnosed COVID-19 cases.</p>
<p>ED/OVERFLOW: Patients with suspected or confirmed COVID-19 who are currently in the Emergency Department (ED) or any overflow location awaiting an inpatient bed</p>	<p>Enter the number of patients with suspected or confirmed COVID-19 who are in the Emergency Department(ED) or any overflow/expansion location awaiting placement in an inpatient bed at the time the data is collected . This includes patients with laboratory-confirmed or clinically diagnosed COVID-19. Overflow locations include any physical locations created to accommodate patients include but not limited to 24-hour observation units, hallways, parking lots, or tents.</p>
<p>ED/OVERFLOW and VENTILATED: Patients with suspected or confirmed COVID-19 who currently are in the ED or any overflow location awaiting an inpatient bed and on a mechanical ventilator</p>	<p>Enter the number of patients with suspected or confirmed COVID-19 who are in the ED or any overflow/expansion location on a mechanical ventilator* at the time the data is collected . This includes patients with laboratory-confirmed or clinically diagnosed COVID-19.</p>



	<p>*Ventilator: Any device used to support, assist or control respiration (inclusive of the weaning period) through the application of positive pressure to the airway when delivered via an artificial airway, specifically an oral/nasal endotracheal or tracheostomy tube.</p> <p>Note: Ventilation and lung expansion devices that deliver positive pressure to the airway (for example: CPAP, BiPAP, bi-level, IPPB and PEEP) via non-invasive means (for example: nasal prongs, nasal mask, full face mask, total mask, etc.) are not considered ventilators unless positive pressure is delivered via an artificial airway (oral/nasal endotracheal or tracheostomy tube).</p>
<p>DEATHS: Patients with suspected or confirmed COVID-19 who died in the hospital, ED or any overflow location on the date for which you are reporting</p>	<p>Enter the number of patients with suspected or confirmed COVID-19 who died in the hospital, ED, or any overflow location. This includes patients with laboratory-confirmed or clinically diagnosed COVID-19. Please enter the count of deaths newly occurred, at the time the data is collected instead of the cumulated number of deaths.</p>

Section-2: Hospital Bed/ICU/Ventilator Capacity

Data Field	Instruction for Data Collection
<p>ALL HOSPITAL BEDS: Total number of all Inpatient and outpatient beds in your hospital, including all staffed, licensed, and overflow surge or expansion beds used for inpatients or for outpatients (includes ICU beds)</p>	<p>Enter the total number of all hospital beds, including inpatient and outpatient beds. All staffed, licensed, and overflow and surge/expansion beds used for inpatients or outpatients. This includes ICU beds.</p>
<p>HOSPITAL INPATIENT BEDS: Total number of staffed inpatient beds in your hospital, including all staffed, licensed, and overflow and surge or expansion beds used for inpatients (includes ICU beds)</p>	<p><i>Required.</i> Enter the total number of all inpatient beds, including all staffed, licensed, and overflow and surge/expansion beds created for inpatient care. This includes intensive care unit (ICU) beds.</p>
<p>HOSPITAL INPATIENT BED OCCUPANCY: Total number of staffed inpatient beds that are currently occupied</p>	<p>Enter the total number of staffed inpatient beds occupied by patients at the time the data is collected, including all staffed, licensed, and</p>



	overflow and surge/expansion beds created for inpatient care. This includes ICU beds.
ICU BEDS: Total number of staffed inpatient intensive care unit (ICU) beds	Enter the total number of staffed Intensive Care Unit (ICU) beds.
ICU BED OCCUPANCY: Total number of staffed inpatient ICU beds that are occupied	Enter the total number of staffed ICU beds occupied by patients at the time the data is collected.
MECHANICAL VENTILATORS: Total number of ventilators available	Enter the total number of mechanical ventilators, including anesthesia machines and portable/transport ventilators available in the facility. Include BiPAP machines if the hospital uses BiPAP to deliver positive pressure ventilation via artificial airways.
MECHANICAL VENTILATORS IN USE: Total number of ventilators in use	Enter the total number of mechanical ventilators in use at the time the data is collected, including anesthesia machines and portable/transport ventilators. Include BiPAP machines if the hospital uses BiPAP to deliver positive pressure ventilation via artificial airways.