

## Instructions for Completion of the COVID-19 Patient Impact and Hospital Capacity Pathway (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	Required. Select the date for which the
counts are reported	recorded data was collected for the following
	questions.

## **Section-1: Patient Impact**

Data Field	Instruction for Data Collection
<b>HOSPITALIZED:</b> Patients currently hospitalized in an	Enter the number of patients hospitalized in
inpatient bed who have suspected or confirmed	an inpatient bed at the time the data is
COVID-19	collected who have suspected or confirmed
	COVID-19. This includes the patients with
	laboratory-confirmed or clinically diagnosed
	COVID-19.
	Confirmed: A patient with a laboratory-
	confirmed COVID-19 diagnosis
	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).
<b>HOSPITALIZED and VENTILATED</b> : Patients currently	Enter the number of patients
hospitalized in an inpatient bed who have	hospitalized in an inpatient bed who have
suspected or confirmed COVID-19 and are on a	suspected or confirmed COVID-19 and are
mechanical ventilator	currently on a mechanical ventilator* at the
	time the data is collected. This includes the
	patients with laboratory-confirmed or clinically
	diagnosed COVID-19.



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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	*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.  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).  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
13	day 1). This includes laboratory-confirmed or
	clinically diagnosed COVID-19 cases.
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	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 including but not limited to 24-hour observation units, hallways, parking lots, or tents.
ED/OVERFLOW and VENTILATED: Patients with	Enter the number of patients with suspected
suspected or confirmed COVID-19 who currently are in the ED or any overflow location awaiting an inpatient bed and on a mechanical ventilator	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.



\*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. 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). **DEATHS:** Patients with suspected or confirmed Enter the number of patients with suspected or confirmed COVID-19 who died in the COVID-19 who died in the hospital, ED or any overflow location on the date for which you are hospital, ED, or any overflow location. This reporting 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.

Section-2: Hospital Bed/ICU/Ventilator Capacity

Data Field	Instruction for Data Collection
ALL HOSPITAL BEDS: Total number of all staffed inpatient and outpatient beds in your hospital, including all overflow and surge/ expansion beds used for inpatients or for outpatients (includes all Intensive Care Unit (ICU) beds)	Enter the total number of all staffed hospital beds, including all inpatient and outpatient beds, overflow and surge/expansion beds used for inpatients or outpatients. This includes all ICU beds.
HOSPITAL INPATIENT BEDS: Total number of all staffed inpatient beds in your hospital, including overflow and surge/expansion beds used for inpatients (includes all ICU beds)	Required. Enter the total number of all staffed inpatient beds including overflow and surge/expansion beds used for inpatient care. This includes all ICU beds.
HOSPITAL INPATIENT BED OCCUPANCY:  Total number of staffed inpatient beds that are occupied	Enter the total number of staffed inpatient beds occupied by patients at the time the data is collected, including all overflow and



	surge/expansion beds used for inpatient care. This includes all ICU beds.
ICU BEDS: Total number of staffed inpatient ICU beds	Enter the total number of all staffed ICU beds including overflow, surge/expansion beds used for critically ill inpatients.
ICU BED OCCUPANCY: Total number of staffed inpatient ICU beds that are occupied	Enter the total number of all staffed ICU beds occupied by patients at the time the data is collected.
MECHANICAL VENTILATORS: Total number of ventilators available	Enter the total number (in use and not in use) of mechanical ventilators, including anesthesia machines and portable/transport ventilators available in the facility. This includes those. 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.