

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 11.0. (October 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
dob	Required	MM/DD/YYYY	Datetime	Resident Date of Birth
Resgender	Required for all records beginning 10/24/2022 •	F M O	Character (1)	Resident Gender F – Female M – Male O – Other/Unknown
resethnicity	Required for all records beginning 10/24/2022	HISP NOHISP DEC UNK	Character (6)	Resident Ethnicity HISP – Hispanic or Latino NOHISP – Not Hispanic or Latino DEC – Declined to respond UNK – Unknown
resrace	Required for all records beginning 10/24/2022 •	AMIN ASIAN AAB NH-PI WHITE DEC UNK	Character	Resident Race: AMIN – American Indian/Alaskan native ASIAN – Asian AAB – Black or African American NH-PI Native Hawaiian/Other Pacific Islander WHITE – White DEC – Declined to respond UNK- Unknown

resAdmitDate	Required	MM/DD/YYYY	Datetime	Resident Admit Date
resDischDate	Optional	MM/DD/YYYY	Datetime	Resident Discharge Date
		Must be >= resAdmitDate		
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) For Novavax dose date must be >=6/1/2022	MM/DD/YYYY	Datetime	Dose 1 vaccination date
dose1Mfg	Conditionally required if Dose1Date provided	JANSSEN MODERNA PFIZER NOVAVAX UNSPECIFIED	Character (15)	Dose 1 vaccine manufacturer name
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

	For Novavax dose date must be >=6/1/2022			
dose2Mfg	Conditionally required if Dose2Date provided	MODERNA NOVAVAX PFIZBION UNSPECIFIED	Character (15)	Dose 2 vaccine manufacturer name
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)	MM/DD/YYYY	Datetime	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

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 For BIMODERNA and BIPFIZBION, addtdosedate must be >= 8/31/2022 For MODERNA, PFIZBION, and JANSSEN, addtdosedate must be < 9/26/2022	MM/DD/YYYY	Datetime	Additional/booster dose vaccination date
addtDoseType	Conditionally required if addtDoseDate provided	BOOST ADDTL	Character (5)	Type of additional or booster dose vaccine received: BOOST – Booster Dose ADDTL – Additional Dose
addtDoseMfg	Conditionally required if addtDoseDate provided	BIMODERNA BIPFIZBION MODERNA PFIZBION JANSSEN UNSPECIFIED	Character (15)	Additional/booster dose vaccine manufacturer name BIMODERNA – updated bivalent Moderna vaccine BIPFIZBION – updated bivalent Pfizer vaccine

				<p>MODERNA – original monovalent Moderna vaccine</p> <p>PFIZBION – original monovalent Pfizer vaccine</p> <p>JANSSEN – original monovalent Janssen vaccine</p> <p>UNSPECIFIED – unknown manufacturer</p>
boostDose2Date	<p>Conditionally required</p> <p>For BIMODERNA and BIPFIZBION boostDose2Date >= 8/31/2022</p> <p>For MODERNA, PFIZBION, and JANSSEN, boostDose2Date must be < 9/26/2022</p>	<p>MM/DD/YYYY</p> <p>Must be > addtlDoseDate</p>	Datetime	<p>Second booster dose or first booster dose (if additional dose received) vaccination date</p>
boostDose2Mfg	<p>Conditionally required if boostDose2Date provided</p>	<p>BIMODERNA</p> <p>BIPFIZBION</p> <p>MODERNA</p> <p>PFIZBION</p> <p>JANSSEN</p> <p>UNSPECIFIED</p>	Character (15)	<p>Additional/booster dose vaccine manufacturer name</p> <p>BIMODERNA – updated bivalent Moderna vaccine</p> <p>BIPFIZBION – updated bivalent Pfizer vaccine</p> <p>MODERNA – original monovalent Moderna vaccine</p> <p>PFIZBION – original monovalent Pfizer vaccine</p> <p>JANSSEN – original monovalent Janssen vaccine</p> <p>UNSPECIFIED – unknown manufacturer</p>

boostDose3Date	<p>Conditionally required</p> <p>For BIMODERNA and BIPFIZBION boostDose3Date >= 8/31/2022</p> <p>For MODERNA, PFIZBION, and JANSSEN, boostDose3Date must be < 9/26/2022</p>	MM/DD/YYYY	Datetime	Third booster dose or second booster dose (if additional dose received) vaccination date
boostDose3Mfg	Conditionally required if boostDose3Date provided	BIMODERNA BIPFIZBION MODERNA PFIZBION JANSSEN UNSPECIFIED	Character (15)	<p>Additional/booster dose vaccine manufacturer name</p> <p>BIMODERNA – updated bivalent Moderna vaccine BIPFIZBION – updated bivalent Pfizer vaccine MODERNA – original monovalent Moderna vaccine PFIZBION – original monovalent Pfizer vaccine JANSSEN – original monovalent Janssen vaccine UNSPECIFIED – unknown manufacturer</p>
boostDose4Date	<p>Conditionally required</p> <p>For BIMODERNA and BIPFIZBION boostDose4Date >= 8/31/2022</p> <p>For MODERNA, PFIZBION, and JANSSEN, boostDose4Date must be < 9/26/2022</p>	MM/DD/YYYY	Datetime	Fourth booster dose or third booster dose (if additional dose received) vaccination date

boostDose4Mfg	Conditionally required if boostDose4Date provided	BIMODERNA BIPFIZBION MODERNA PFIZBION JANSSEN UNSPECIFIED	Character (15)	Additional/booster dose vaccine manufacturer name BIMODERNA – updated bivalent Moderna vaccine BIPFIZBION – updated bivalent Pfizer vaccine MODERNA – original monovalent Moderna vaccine PFIZBION – original monovalent Pfizer vaccine JANSSEN – original monovalent Janssen vaccine UNSPECIFIED – unknown manufacturer
boostDose5Date	Conditionally required For BIMODERNA and BIPFIZBION boostDose5Date >= 8/31/2022 For MODERNA, PFIZBION, and JANSSEN, boostDose5Date must be < 9/26/2022	MM/DD/YYYY Must be > addtlDose4Date	Datetime	Fourth booster dose or third booster dose (if additional dose received) vaccination date
boostDose5Mfg	Conditionally required if boostDose5Date provided	BIMODERNA BIPFIZBION MODERNA PFIZBION JANSSEN UNSPECIFIED	Character (15)	Additional/booster dose vaccine manufacturer name BIMODERNA – updated bivalent Moderna vaccine BIPFIZBION – updated bivalent Pfizer vaccine

				MODERNA – original monovalent Moderna vaccine PFIZBION – original monovalent Pfizer vaccine JANSSEN – original monovalent Janssen vaccine UNSPECIFIED – unknown manufacturer
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
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
addtlDoseNDC	Optional	-	Character (30)	Additional/booster dose vaccine NDC number
addtlDoseLot	Optional	-	Character (30)	Additional/booster dose vaccine Lot number
addtlDoseExpDate	Optional	MM/DD/YYYY	Datetime	Additional/booster dose vaccine expiration date
boostdose2ndc	Optional	-	Character (30)	Second booster dose or first booster dose (if additional dose received) vaccine NDC number
boostdose2lot	Optional	-	Character (30)	Second booster dose or first booster dose (if additional dose received) vaccine Lot number
boostdose2expdate	Optional	MM/DD/YYYY	Datetime	Second booster dose or first booster dose (if additional dose received) expiration date
boostdose3ndc	Optional	-	Character (30)	Third booster dose or second booster dose (if additional dose received) vaccine NDC number

boostdose3lot	Optional	-	Character (30)	Third booster dose or second booster dose (if additional dose received) vaccine Lot number
boostdose3expdate	Optional	MM/DD/YYYY	Datetime	Third booster dose or second booster dose (if additional dose received) vaccine expiration date
Boostdose4ndc	Optional	-	Character (30)	Fourth booster dose or third booster dose (if additional dose received) vaccine NDC number
Boostdose4lot	Optional	-	Character (30)	Fourth booster dose or third booster dose (if additional dose received) vaccine Lot number
Boostdose4expdate	Optional	MM/DD/YYYY	Datetime	Fourth booster dose or third booster dose (if additional dose received) vaccine expiration date
Boostdose5ndc	Optional	-	Character (30)	Fifth booster dose or fourth booster dose (if additional dose received) vaccine NDC number
Boostdose5lot	Optional	-	Character (30)	Fifth booster dose or fourth booster dose (if additional dose received) vaccine Lot number
Boostdose5expdate	Optional	MM/DD/YYYY	Datetime	Fifth booster dose or fourth booster dose (if additional dose received) vaccine expiration date
vaccElsewhere	Optional	Y N	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)	HCP identifier - a unique identifier for the individual, assigned by your facility
dob	Required	MM/DD/YYYY	Datetime	HCP Date of Birth
Hcpgender	Required for all records beginning 10/24/2022 •	F M O	Character (1)	HCP Gender F – Female M – Male O – Other/Unknown
Hcpethnicity	Required for all records beginning 10/24/2022 •	HISP NOHISP DEC UNK	Character (6)	HCP Ethnicity HISP – Hispanic or Latino NOHISP – Not Hispanic or Latino DEC – Declined to respond UNK – Unknown
hcprace	Required for all records beginning 10/24/2022 •	AMIN ASIAN AAB NH-PI WHITE DEC UNK	Character (5)	HCP Race: AMIN – American Indian/Alaskan native ASIAN – Asian AAB – Black or African American NH-PI – Native Hawaiian/Other Pacific Islander WHITE – White DEC – Declined to respond UNK- Unknown
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 must be classified into at least one of the main categories, such as partial or complete primary series vaccination, contraindication, declined, unknown vaccination status) For Novavax dose date must be >=6/1/2022	MM/DD/YYYY	Datetime	Dose 1 vaccination date
dose1Mfg	Conditionally required if Dose1Date provided	JANSSEN MODERNA PFIZBION NOVAVAX UNSPECIFIED	Character (15)	Dose 1 vaccine manufacturer name
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	MM/DD/YYYY	Datetime	Dose 2 vaccination date

	vaccination, contraindication, declined, unknown vaccination status) For Novavax dose date must be >=6/1/2022			
dose2Mfg	Conditionally required if Dose2Date provided	MODERNA PFIZBION NOVAVAX UNSPECIFIED	Character (15)	Dose 2 vaccine manufacturer name
medDate	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	Contraindication or exclusion noted date
decDate	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	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
addtIDoseDate	Conditionally required For BIMODERNA and BIPFIZBION addtIDoseDate >= 8/31/2022 For MODERNA, PFIZBION, and JANSSEN, addtIDoseDate must be < 9/26/2022	MM/DD/YYYY	Datetime	Additional/booster dose vaccination date
addtIdosetype	Conditionally required if addtIDoseDate provided	BOOST ADDTL	Character (5)	Type of additional or booster dose vaccine received: BOOST – Booster Dose ADDTL – Additional Dose
addtIDoseMfg	Conditionally required if addtIDoseDate provided	BIMODERNA BIPFIZBION MODERNA PFIZBION	Character (15)	Additional/booster dose vaccine manufacturer name BIMODERNA – updated bivalent Moderna vaccine

		JANSSEN UNSPECIFIED		BIPFIZBION – updated bivalent Pfizer vaccine MODERNA – original monovalent Moderna vaccine PFIZBION – original monovalent Pfizer vaccine JANSSEN – original monovalent Janssen vaccine UNSPECIFIED – unknown manufacturer
boostDose2Date	Conditionally required For BIMODERNA and BIPFIZBION boostDose2Date >= 8/31/2022 For MODERNA, PFIZBION, and JANSSEN, boostDose2Date must be < 9/26/2022	MM/DD/YYYY Must be > addtIDoseDate	Datetime	Second booster dose or first booster dose (if additional dose received)
boostDose2Mfg	Conditionally required if boostDose2Date provided	BIMODERNA BIPFIZBION MODERNA PFIZBION JANSSEN UNSPECIFIED	Character (15)	Second booster dose or first booster dose (if additional dose received) vaccine manufacturer name BIMODERNA – updated bivalent Moderna vaccine BIPFIZBION – updated bivalent Pfizer vaccine MODERNA – original monovalent Moderna vaccine PFIZBION – original monovalent Pfizer vaccine JANSSEN – original monovalent Janssen vaccine UNSPECIFIED – unknown manufacturer
boostDose3Date	Conditionally required	MM/DD/YYYY	Datetime	Third booster dose or second booster dose (if additional dose received) vaccination date

	<p>For BIMODERNA and BIPFIZBION boostDose3Date >= 8/31/2022</p> <p>For MODERNA, PFIZBION, and JANSSEN, boostDose3Date must be < 9/26/2022</p>	Must be > addtIDose2Date		
boostDose3Mfg	Conditionally required if boostDose3Date provided	BIMODERNA BIPFIZBION MODERNA PFIZBION JANSSEN UNSPECIFIED	Character (15)	<p>Third booster dose or second booster dose (if additional dose received) vaccine manufacturer name</p> <p>BIMODERNA – updated bivalent Moderna vaccine BIPFIZBION – updated bivalent Pfizer vaccine MODERNA – original monovalent Moderna vaccine PFIZBION – original monovalent Pfizer vaccine JANSSEN – original monovalent Janssen vaccine UNSPECIFIED – unknown manufacturer</p>
Boostdose4date	<p>Conditionally required</p> <p>For BIMODERNA and BIPFIZBION boostDose4Date >= 8/31/2022</p> <p>For MODERNA, PFIZBION, and JANSSEN, boostDose4date must be < 9/26/2022</p>	MM/DD/YYYY	Datetime	Fourth booster dose or third booster dose (if additional dose received) vaccination date

Boostdose4mfg	Conditionally required if boostDose4Date provided	BIMODERNA BIPFIZBION MODERNA PFIZBION JANSSEN UNSPECIFIED	Character (15)	Fourth booster dose or third booster dose (if additional dose received) vaccine manufacturer name BIMODERNA – updated bivalent Moderna vaccine BIPFIZBION – updated bivalent Pfizer vaccine MODERNA – original monovalent Moderna vaccine PFIZBION – original monovalent Pfizer vaccine JANSSEN – original monovalent Janssen vaccine UNSPECIFIED – unknown manufacturer
Boostdose5date	Conditionally required For BIMODERNA and BIPFIZBION boostDose5Date >= 8/31/2022 For MODERNA, PFIZBION, and JANSSEN, Boostdose5date must be < 9/26/2022	MM/DD/YYYY	Datetime	Fifth booster dose or fourth booster dose (if additional dose received) vaccination date
Boostdose5mfg	Conditionally required if boostDose5Date provided	BIMODERNA BIPFIZBION MODERNA PFIZBION JANSSEN UNSPECIFIED	Character (15)	Fifth booster dose or fourth booster dose (if additional dose received) vaccine manufacturer name BIMODERNA – updated bivalent Moderna vaccine BIPFIZBION – updated bivalent Pfizer vaccine

				<p>MODERNA – original monovalent Moderna vaccine</p> <p>PFIZBION – original monovalent Pfizer vaccine</p> <p>JANSSEN – original monovalent Janssen vaccine</p> <p>UNSPECIFIED – unknown manufacturer</p>
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
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
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
boostdose2ndc	Optional	-	Character (30)	Second booster dose or first booster dose (if additional dose received) vaccine NDC number
boostdose2lot	Optional	-	Character (30)	Second booster dose or first booster dose (if additional dose received) vaccine Lot number
boostdose2expdate	Optional	MM/DD/YYYY	Datetime	Second booster dose or first booster dose (if additional dose received) expiration date
boostdose3ndc	Optional	-	Character (30)	Third booster dose or second booster dose (if additional dose received) vaccine NDC number

boostdose3lot	Optional	-	Character (30)	Third booster dose or second booster dose (if additional dose received) vaccine Lot number
boostdose3expdate	Optional	MM/DD/YYYY	Datetime	Third booster dose or second booster dose (if additional dose received) vaccine expiration date
Boostdose4ndc	Optional	-	Character (30)	Fourth booster dose or third booster dose (if additional dose received) vaccine NDC number
Boostdose4lot	Optional	-	Character (30)	Fourth booster dose or third booster dose (if additional dose received) vaccine Lot number
Boostdose4expdate	Optional	MM/DD/YYYY	Datetime	Fourth booster dose or third booster dose (if additional dose received) vaccine expiration date
Boostdose5ndc	Optional	-	Character (30)	Fifth booster dose or fourth booster dose (if additional dose received) vaccine NDC number
Boostdose5lot	Optional	-	Character (30)	Fifth booster dose or fourth booster dose (if additional dose received) vaccine Lot number
Boostdose5expdate	Optional	MM/DD/YYYY	Datetime	Fifth booster dose or fourth booster dose (if additional dose received) vaccine expiration date
vaccElsewhere	Optional	Y N	Character (1)	Vaccinated at another location? Y – Yes N – No
vaccEdDate	Optional	MM/DD/YYYY	Datetime	Vaccination Education Provided - date
comment	Optional	-	Character (2000)	Comments