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U.S. HEALTHCARE COVID-19 PORTAL					Welcome, Kevin Duva	- POW	ERED BY	Téleīrad	cking
Gaint Elsewhere Hospital 23 Main Street ittsburgh, PA, 15219	CCN: <b>999900</b> NPI: <b>9999999922</b> AHA: Facility Type: <b>VA Hospital</b>	<b>756453</b> N	IHSN OrgID: CI	HANGE FACILITY V	IEW ASSISTED ENTI	RY IMPORT	DA	TA UPLO	AD
lew Capacity & Utilization Entry Fo	or August 20, 2021					su	вміт	CAN	CEL
tering Data For I I I I I I I I I I I I I I I I I I I									
It is critical to the COVID-19 response t facilitate planning, monitoring, and res the HHS Guidance.									
Note: Provide data entries for all reque	ested fields. Enter 0 or select N/A	(if availal	ble) if the item is not appli	cable at your fa	cility.				
Note: The web form is pre-populated v about Composite Records. Upload Data File: Choose File No file If you do not have the template, please	chosen		·			,			
2a. All hospital beds	3a. All hospital inpatient beds 91		4a. All hospital inpatient be occupancy 91	× ×	5a. ICU beds				
2b. All adult hospital beds	3b. Adult hospital inpatient beds 91	•	4b. Adult hospital inpatient occupancy 91	bed 0	5b. Adult ICU beds			• ~	
6a. ICU bed occupancy									
6b. Adult ICU bed occupancy									

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int Elsewhere Hospital Main Street ourgh, PA, 15219	CCN: <b>999900</b> NPI: <b>9999999922</b> AHA: Facility Type: <b>VA Hospital</b>	<b>756453</b> NH	ISN OrgID:	CHANGE	FACILITY VIE	W ASSISTED ENTRY IMP	PORT D	DATA UPI	.OA
v Capacity & Utilization Entry For	August 20, 2021						SUBMIT	CA	NCE
Ventilators									
7. Total mechanical ventilators	8. Mechanical ventilators in use	<b>1</b>							
9a. Total hospitalized adult ()	10a. Total hospitalized pediatric suspected or confirmed positive		11. Hospitalized and	ventilated		12a. Total ICU adult susp		0	
9a. Total hospitalized adult ()		-	11. Hospitalized and COVID patients	ventilated		12a. Total ICU adult susp confirmed positive COVID 0			
Suspected or confirmed positive COVID patients 12 9b. Hospitalized adult confirmed-	suspected or confirmed positive COVID patients 0 10b. Hospitalized pediatric	^ ~	COVID patients	ventilated	~	0 12b. Hospitalized ICU adu	) patients ult	^ ~	
9a. Total hospitalized adult suspected or confirmed positive COVID patients	suspected or confirmed positive COVID patients 0	^ ~	COVID patients	ventilated	~	confirmed positive COVID 0	) patients ult	^ ~	

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U.S. HEALTHCARE COVID-19 PORTAL			Welcome, Kevin	Duvall 👻 por	WERED BY 🚯	ë <b>le</b> īracking
aint Elsewhere Hospital 3 Main Street tsburgh, PA, 15219	CCN: <b>999900</b> NPI: <b>999999922</b> AHA: <b>756453</b> N Facility Type: <b>VA Hospital</b>	HSN OrgID: CHANGE F.	ACILITY VIEW ASSISTED	ENTRY IMPOR	T DAT	A UPLOAD
ew Capacity & Utilization Entry For	August 20, 2021			2	UBMIT	CANCEL
14. ED/overflow	15. ED/overflow and ventilated 0	19. Previous day's total ED visits 112	20. Previous d related ED visit			•
Previous Day's COVID-19	9 Deaths					_
16. Previous Day's COVID-19 Deaths						
Previous Day's Admissio	ons					
Note: The age brackets under fields 17a and	17b are required to be considered compliant.					
Previous Day's adult admissions with confirmed COVID-19 and breakdown by age bracket:	Previous Day's adult admissions with suspected COVID-19 and breakdown by age bracket:	Previous day's pediatric COVID-19 admissions:				
		18a. Previous day's pediatric admissions with confirmed COVID-	0			
17a. Total adult	17b. Total adult	19:				
0 ~	0	0	× ×			
18-19	18-19	18b. Previous day's pediatric admissions with suspected COVID- 19:	0			
10-13	10-13	1.24				

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int Elsewhere Main Street burgh, PA, 15219	Hospital	CCN: <b>999900</b> NPI: <b>999999</b> Facility Type: <b>VA Hospit</b> a	9922 AHA: 756453 NHSN O al	OrgID:	CHANGE FACILITY VIEW	ASSISTED ENTRY IM	PORT	DATA U	PLO
w Capacity & Utiliza	ation Entry For	August 20, 2021					SUBM	п	CANG
0	~	0	♪ 0		× ×				
20-29		20-29							
0	^	0	~						
·	~	Ŭ	~						
30-39		30-39							
0	~ ~	0	~						
40-49		40-49							
0	~	0	~						
50-59	^	50-59	^						
0	~	0	~						
60-69		60-69							
0	^	0	^						
·	~	Ŭ	~						
70-79		70-79							
0	~	0	~						
80+		80+							
0	~	0	~						
Unknown	~	Unknown	^						
0	~	0	~						
Therapeutics									

U.S. HEALTHCARE COVID-19 PORTAL					Welcome, Kevin Duvall 👻	POWEREE	BY THE	leīrad
nt Elsewhere Hospital Main Street urgh, PA, 15219	CCN <b>:999900</b> NPI <b>:999999922</b> AHA: Facility Type: <b>VA Hospital</b>	756453 N	IHSN OrgID: CHANGE F	ACILITY	VIEW ASSISTED ENTRY IN	IPORT	DATA	UPLO
/ Capacity & Utilization Entry For	August 20, 2021					SUBMI	т	CAN
Remdesivir	Casirivimab (REGN10933) Imdevimab (REGN10987) (Therapeutic A)	/	Bamlanivimab (Therapeut B)	tic	Bamlanivimab ar Etesevimab (Ther		c C)	
21. Previous day's Remdesivir used 🚯 Optional)	39a. Current inventory on hand (in courses)	0	39c. Current inventory on hand (in courses) (Optional)	0	40a. Current Inventory ( courses)	on hand (	in	0
7	0	~	0	~	0		~	
22. Current inventory (Optional) 49 Staff	39b. Courses used in the last week		39d. Courses used in the last week (Optional) 0 ▲ Please note: Bamlanivimab longer authorized for use withor accompanying Etesevimab. The value in the field 39d should Any doses of Bamlanivimab use with accompanying Etesevimat should be reported in field 40b	out e be 0. ed	40b. Courses used in th	e last wee	ek	_
Note: Fields 23, 24, and 25 below are option 23. Critical staffing shortage today	al. Fields 23 and 24 will always default 24. Critical staffing shortage anticipated within a week (Y/N) (Optional)	to "No" :	for a new submission. 25. Staffing shortage details (Optional)	0				
No 👻	No	•	no					

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			Welcome, Kevin Duvall - POWERED BY	Téleīrackir
CCN: <b>999900</b> NPI: <b>9999999922</b> AHA: <b>756453</b> Facility Type: <b>VA Hospital</b>	NHSN OrgID: CHANGE F	ACILITY	IEW ASSISTED ENTRY IMPORT DA	TA UPLOAD
August 20, 2021			SUBMIT	CANCEL
port one time a week on Wednesday. Field 2	8 is optional.			_
27. On hand supply (DURATION IN DAYS):	28. On hand supply (INDIVIDUAL UNITS/"EACHES") (Optional):	0	29. Are you able to obtain these items?	0
27a. Ventilator supplies	28a. N95 respirators (Optional)			
0 days 👻	5000000	~	No	•
27b. N95 respirators		Rs	29b. Ventilator medications	
>30 days 🔹	9999999	~	No	•
27c. Surgical and procedure masks			29c. N95 Respirators	
>30 days 🔹	5000000	~	Yes	•
27d. Eye protection including face shields and goggles	28d. Eye protection including face shields and goggles (Optional)		29d. Other respirators such as PAPRs or elastomerics	
>30 days 🔹	5000000	~	Yes	•
27e. Single-use gowns	28e. Single-use gowns (Optional)		29e. Surgical and procedure masks	
>30 days 🔹	9999999	<b>^</b>	Yes	•
27f. Exam gloves (sterile and non-	28f. Launderable gowns (Optional)		29f. Eye protection including face shields and goggles	
>30 days	9999999	^ ~		•
	Facility Type: VA Hospital         r August 20, 2021         tport one time a week on Wednesday. Field 2         27. On hand supply (DURATION IN DAYS):         27a. Ventilator supplies         0 days         27b. N95 respirators         >30 days         >30 days         27d. Eye protection including face shields and goggles         >30 days         >27e. Single-use gowns         >30 days         >27f. Exam gloves (sterile and non-sterile)	CCN:999900 NPI:999999922 AHA: 756453 NHSN OrgID:       CHANGE F         Facility Type: VA Hospital       F         August 20, 2021       F         toport one time a week on Wednesday. Field 28 is optional.       28. On hand supply (INDIVIDUAL UNITS/"EACHES") (Optional):         27a. Ventilator supplies       28a. N95 respirators (Optional)         0 days       28b. Other respirators (Optional)         27b. N95 respirators       28b. Other respirators such as PAP or elastomerics (Optional)         >30 days       27c. Surgical and procedure masks         >30 days       28c. Surgical and procedure masks         >30 days       5000000         27d. Eye protection including face shields and goggles       28d. Eye protection including face shields and goggles (Optional)         >30 days       28c. Single-use gowns         >30 days       28c. Single-use gowns (Optional)         >30 days       28c. Single-use gowns (Optional)	CCN-999900 NPI-9999999922 AHA: 756453 NH5N OrgID: Facility Type: VA Hospital       CHANGE FACILITY V         August 20, 2021       August 20, 2021         apport one time a week on Wednesday. Field 28 is optional.       28. On hand supply (INDIVIDUAL UNITS/"EACHES") (Optional):       Image: Comparison of the symple (INDIVIDUAL UNITS/"EACHES")         27a. Ventilator supplies       28a. N95 respirators (Optional)       Image: Comparison of the symple (Optional):       Image: Comparison of the symple (Optional)         27a. Ventilator supplies       28a. N95 respirators (Optional)       Image: Comparison of the symple (Optional)       Image: Comparison of the symple (Optional)         27a. Ventilator supplies       28a. N95 respirators (Optional)       Image: Comparison of the symple (Optional)       Image: Comparison of the sy	+       ●         otect.hhs.gov/newentry       ●       ★         Velcome, Kevin Duval ▼ rowesta and Polications         276. Ventilator supplies       28a. NdS respirators (Optional)       29a. Ventilator supplies (any supplies excluding medications)         276. Ventilator supplies       28a. NdS respirators (Optional)       29a. Ventilator medications         276. Systepirators       28d. Systepirators including face shields and goggies (Optional)       29a. Uentilator medications         276. Single-use gowns       28d. Systeprotection including face shields and goggie

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U.S. HEALTHCARE COVID-19 PORTAL			Welcome, Kevin Duvall	<ul> <li>POWER</li> </ul>	RED BY 🐨	éleīra
Int Elsewhere Hospital Main Street purgh, PA, 15219	CCN: <b>999900</b> NPI: <b>9999999922</b> AHA: <b>756453</b> Facility Type: <b>VA Hospital</b>	NHSN OrgID: CHANGE FACILI	TY VIEW ASSISTED ENTRY	IMPORT	DATA	UPLO
v Capacity & Utilization Entry Fo	or August 20, 2021			SUB	міт	CAN
		28g. Exam gloves (single) (Optional)	29g. Single-use gown	s		_
		5000000				•
			29h. Exam gloves			
			Yes			•
			29i. Are you able to n	naintain a	supply	
			of launderable gown		sappiy	
			No			•
30. Are you able maintain at least a three day supply of these items?	31. Does your facility re-use ① or extend the use of PPE? (Optional)					
at least a three day supply of these items? 30a. Ventilator supplies (any supplies	or extend the use of PPE? (Optional) 31a. Reusable/launderable isolation	such as supply, staffing, capacity, or other issues about which you would like to receive direct contact, please	0			
at least a three day supply of these items?	or extend the use of PPE? (Optional)	such as supply, staffing, capacity, or other issues about which you would	<b>9</b>			
at least a three day supply of these items? 30a. Ventilator supplies (any supplies excluding medications) N/A •	or extend the use of PPE? (Optional) 31a. Reusable/launderable isolation gowns N/A •	such as supply, staffing, capacity, or other issues about which you would like to receive direct contact, please explain here. (Optional)	•			
at least a three day supply of these items? 30a. Ventilator supplies (any supplies excluding medications) N/A	or extend the use of PPE? (Optional) 31a. Reusable/launderable isolation gowns N/A • 31b. PAPRs or elastomerics	such as supply, staffing, capacity, or other issues about which you would like to receive direct contact, please explain here. (Optional)	•			
at least a three day supply of these items? 30a. Ventilator supplies (any supplies excluding medications) N/A •	or extend the use of PPE? (Optional) 31a. Reusable/launderable isolation gowns N/A •	such as supply, staffing, capacity, or other issues about which you would like to receive direct contact, please explain here. (Optional)	0			
at least a three day supply of these items? 30a. Ventilator supplies (any supplies excluding medications) N/A	or extend the use of PPE? (Optional) 31a. Reusable/launderable isolation gowns N/A • 31b. PAPRs or elastomerics	such as supply, staffing, capacity, or other issues about which you would like to receive direct contact, please explain here. (Optional)	•			
at least a three day supply of these items? 30a. Ventilator supplies (any supplies excluding medications) N/A • 30b Ventilator medications N/A •	or extend the use of PPE? (Optional) 31a. Reusable/launderable isolation gowns N/A • 31b. PAPRs or elastomerics Yes •	such as supply, staffing, capacity, or other issues about which you would like to receive direct contact, please explain here. (Optional)	•			
at least a three day supply of these items? 30a. Ventilator supplies (any supplies excluding medications) N/A • 30b Ventilator medications N/A • 30c. N95 respirators Yes • 30d. Other respirators such as PAPRs	or extend the use of PPE? (Optional) 31a. Reusable/launderable isolation gowns N/A • 31b. PAPRs or elastomerics Yes • 31c. N95 respirators	such as supply, staffing, capacity, or other issues about which you would like to receive direct contact, please explain here. (Optional)	•			
at least a three day supply of these items? 30a. Ventilator supplies (any supplies excluding medications) N/A • 30b Ventilator medications N/A • 30c. N95 respirators Yes •	or extend the use of PPE? (Optional) 31a. Reusable/launderable isolation gowns N/A • 31b. PAPRs or elastomerics Yes • 31c. N95 respirators	such as supply, staffing, capacity, or other issues about which you would like to receive direct contact, please explain here. (Optional)	9			
at least a three day supply of these items? 30a. Ventilator supplies (any supplies excluding medications) N/A • 30b Ventilator medications N/A • 30c. N95 respirators Yes • 30d. Other respirators such as PAPRs or elastomerics No •	or extend the use of PPE? (Optional) 31a. Reusable/launderable isolation gowns N/A • 31b. PAPRs or elastomerics Yes • 31c. N95 respirators	such as supply, staffing, capacity, or other issues about which you would like to receive direct contact, please explain here. (Optional)				
at least a three day supply of these items? 30a. Ventilator supplies (any supplies excluding medications) N/A • 30b Ventilator medications N/A • 30c. N95 respirators Yes • 30d. Other respirators such as PAPRs or elastomerics	or extend the use of PPE? (Optional) 31a. Reusable/launderable isolation gowns N/A • 31b. PAPRs or elastomerics Yes • 31c. N95 respirators	such as supply, staffing, capacity, or other issues about which you would like to receive direct contact, please explain here. (Optional)	•			

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int Elsewhere Hospital Main Street burgh, PA, 15219	CCN: <b>999900</b> NPI: <b>9999999922</b> AH Facility Type: <b>VA Hospital</b>	A: 756453	NHSN OrgID:	CHANGE FA	CILITY VI	EW ASSISTED ENT	RY IMP	ORT	DATA	UPLO
w Capacity & Utilization Entry Fo	r August 20, 2021						[	SUBMI	•	CAN
30f. Eye protection including face shields and goggles										
Yes 🔹										
30g. Single-use gowns										
Yes										
30h. Exam gloves										
Yes 🔹										
30i. Laboratory - nasal pharyngeal swabs										
N/A 🔹										
30j. Laboratory - nasal swabs										
N/A •										
30k. Laboratory - viral transport media										
N/A •										
Influenza										
Note: Fields 33 - 38 below are optional but (										
detection of influenza virus through molecu culture. For hospital reporting, laboratory-c B/Yamagata]]. Parainfluenza and Haemoph laboratory confirmation.	onfirmed influenza is defined as Infl	uenza A an	d B [this includes their su	btypes and lin	eages (e.	g., A(H1N1), A(H3N2	?), B/Vic	toria,		
-										
						36. Total hospitaliz infected with BOTH				0
33. Total hospitalized patients with	34. Previous day's influenza	6	35. Total hospitalized I	CU patients	6	confirmed COVID-1				

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int Elsewhere Hospital Main Street burgh, PA, 15219	CCN: <b>999900</b> NPI: <b>999999922</b> AHA: <b>756</b> Facility Type: <b>VA Hospital</b>	6 <b>453</b> NH	ISN OrgID: CHANGE FA		IEW ASSISTED ENT	TRY IMPO	ORT I	DATA UP	LOA
v Capacity & Utilization Entry For	August 20, 2021						SUBMIT	c	ANC
33. Total hospitalized patients with laboratory-confirmed influenza virus infection (Optional)	34. Previous day's influenza admissions (laboratory-confirmed influenza virus infection) (Optional)		35. Total hospitalized ICU patients with laboratory-confirmed influenza virus infection (Optional)		36. Total hospitaliz infected with BOTł confirmed COVID- laboratory-confirm infection (Optiona	H labora 19 AND ned influ	tory-		
0	0	~	0	~	0			~	
(laboratory-confirmed influenza virus	COVID-19 AND laboratory-confirmed								
0	0								
0 Vaccinations Vaccinations Vaccinations for Personnel 41. Previous week's COVID-19 vaccination does administered to healthcare personnel by your facility (Begardless of series or single-dose	0	he inten	tion to become mandatory in the co 43. Current healthcare personnel who have received the first dose of COVID-19 vaccination doses	ming wea	eks. 44. Current health who have received series of a COVID- single-dose vaccin.	d a comp 19 vaccii	leted	f) r a	
0 Vaccinations Vaccinations Vaccinations for Personnel 41. Previous week's COVID-19 vaccination does administered to healthcare personnel by your facility Regardless of series or single-dose	0 v v v v v v v v v v v v v v v v v v v	he inten	43. Current healthcare personnel who have received the first dose of	_	44. Current health who have received series of a COVID-	d a comp 19 vaccii	leted	-	
0   Vaccinations  Vaccinations  Note: Fields 41-47 are to be entered weekly  Vaccinations for Personnel  41. Previous week's COVID-19  vaccination doses administered to healthcare personnel by your facility (Regardless of series or single-dose vaccine)  Unknown  45. Total number of current healthcare personnel	(on Wednesdays) and are optional with th     42. Current healthcare personnel     who have not yet received any     COVID-19 vaccination doses	he inten	43. Current healthcare personnel who have received the first dose of COVID-19 vaccination doses	6	44. Current health who have received series of a COVID- single-dose vaccin	d a comp 19 vaccii	leted	ra 🔨	
Vaccinations Note: Fields 41-47 are to be entered weekly Vaccinations for Personnel 41. Previous week's COVID-19 vaccination doses administered to healthcare personnel by your facility (Regardless of series or single-dose vaccine) Unknown	(on Wednesdays) and are optional with th     42. Current healthcare personnel     who have not yet received any     COVID-19 vaccination doses	he inten	43. Current healthcare personnel who have received the first dose of COVID-19 vaccination doses	6	44. Current health who have received series of a COVID- single-dose vaccin	d a comp 19 vaccii	leted	ra 🔨	

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<b>int Elsewhere Hospital</b> Main Street sburgh, PA, 15219	CCN: <b>999900</b> NPI: <b>9999999922</b> AHA: <b>75</b> Facility Type: <b>VA Hospital</b>	6453 NHSN Org	ID: CHA	NGE FACILITY VIE	EW ASSISTED ENTRY II	MPORT	DATA	UPLOAD
w Capacity & Utilization Entry For	August 20, 2021					SUBMI	π	CANCEL
37. Previous day's influenza deaths () (laboratory-confirmed influenza virus infection) (Optional)	38. Previous day's deaths for patients co-infected with both COVID-19 AND laboratory-confirmed influenza virus (Optional)	0						
0	0	× •						
Note: Fields 41-47 are to be entered weekly ( Vaccinations for Personnel 41. Previous week's COVID-19 vaccination doses administered to healthcare personnel by your facility (Regardless of series or single-dose	42. Current healthcare personnel who have not yet received any	<ul> <li>43. Cur who hat</li> </ul>	rrent healthcare perso	nnel 🚯	44. Current healthcare who have received a co series of a COVID-19 va	mpleted ccination		0
Vaccinations for Personnel 41. Previous week's COVID-19 vaccination doses administered to healthcare personnel by your facility (Regardless of series or single-dose vaccine)	42. Current healthcare personnel who have not yet received any COVID-19 vaccination doses	<ul> <li>43. Cur who ha COVID-</li> <li>Linkn</li> </ul>	rrent healthcare perso ave received the first di 19 vaccination doses	nnel () ose of	44. Current healthcare who have received a co	mpleted ccination	or a	
Vaccinations for Personnel 41. Previous week's COVID-19 vaccination doses administered to healthcare personnel by your facility (Regardless of series or single-dose vaccine)	42. Current healthcare personnel who have not yet received any COVID-19 vaccination doses	<ul> <li>43. Cur who ha COVID-</li> </ul>	rrent healthcare perso ave received the first di 19 vaccination doses	nnel 🚯 ose of	44. Current healthcare who have received a co series of a COVID-19 va single-dose vaccination	mpleted ccination	or a	
Vaccinations for Personnel 41. Previous week's COVID-19 vaccination doses administered to healthcare personnel by your facility (Regardless of series or single-dose vaccine) Unknown 45. Total number of current healthcare personnel Unknown 46. Previous week's number of patients and other non-healthcare personnel who received the first dose in a multi-series of COVID-19 vaccination doses	42. Current healthcare personnel who have not yet received any COVID-19 vaccination doses	<ul> <li>43. Cur who ha cOVID.</li> <li>Unkn</li> </ul>	rrent healthcare perso ave received the first di 19 vaccination doses	nnel () ose of	44. Current healthcare who have received a co series of a COVID-19 va single-dose vaccination	mpleted ccination	or a	
Vaccinations for Personnel 41. Previous week's COVID-19 vaccination doses administered to healthcare personnel by your facility (Regardless of series or single-dose vaccine) Unknown 45. Total number of current healthcare personnel Unknown Constructions for Patients 46. Previous week's number of patients and other non-healthcare personnel who received the first dose in a multi-series of COVID-19 COVID-19	<ul> <li>42. Current healthcare personnel who have not yet received any COVID-19 vaccination doses</li> <li>Unknown</li> <li>47. Previous week's number of patients who received the final dose in a series of COVID-19 vaccination doses or the single-dose vaccine by</li> </ul>	<ul> <li>43. Cur who ha COVID.</li> <li>Unkn</li> </ul>	rrent healthcare perso ave received the first di 19 vaccination doses	nnel () ose of	44. Current healthcare who have received a co series of a COVID-19 va single-dose vaccination	mpleted ccination	or a	
Vaccinations for Personnel	<ul> <li>42. Current healthcare personnel who have not yet received any COVID-19 vaccination doses</li> <li>Unknown</li> <li>47. Previous week's number of patients who received the final dose in a series of COVID-19 vaccination doses or the single-dose vaccine by your facility</li> </ul>	<ul> <li>43. Cur who ha covid.</li> <li>Unkn</li> </ul>	rrent healthcare perso ave received the first di 19 vaccination doses	nnel () ose of	44. Current healthcare who have received a co series of a COVID-19 va single-dose vaccination	mpleted ccination	or a	