U.S. HEALTHCARE COVID-19 PORTAL OMB No. **0990-1234** Expires: **08/31/2024**

Welcome, Thomas Havranek POWERED BY TeleTracking

Allegheny Valley Hospital
231 Roadway Drive
Cityville, PA 12345

HHS ID: **--** CCN:**390032** NPI:**1689679581** AHA:**7493926759** NHSN OrigID: **12345**
Facility Type: **Short Term Acute Care Hospital**

New Capacity & Utilization Entry For **June 17, 2022**

Entering Data For
Select One

It is critical to the COVID-19 response that all of the information listed below is provided to the Federal Government on the requested reporting schedule to facilitate planning, monitoring, and resource allocation during the COVID-19 Public Health Emergency (PHE). All fields are **mandatory** unless otherwise noted in the HHS Guidance.

Note: Provide data entries for all requested fields. Enter 0 or select N/A (if available) if the item is not applicable at your facility.

Note: Some data points in the web form are pre-populated with the most recent non-null submission. Please update each data point as necessary. Learn more about Composite Records.

Upload Data File: Choose File No file chosen

If you do not have the template, please download it from here.

Staffed Bed Capacity

3a. All hospital inpatient beds
Unknown

3b. Adult hospital inpatient beds
Unknown

3c. All inpatient pediatric beds
Unknown

4a. All hospital inpatient bed occupancy
Unknown

4b. Adult hospital inpatient bed occupancy
Unknown

4c. Pediatric inpatient bed occupancy
Unknown

5a. ICU beds
Unknown

5b. Adult ICU beds
Unknown

5c. Pediatric ICU beds
Unknown

6a. ICU bed occupancy
Unknown

6b. Adult ICU bed occupancy
Unknown

6c. Pediatric ICU bed occupancy
Unknown

Hospitalizations

9a. Total hospitalized adult suspected or laboratory-confirmed COVID-19 patients
Unknown

9b. Hospitalized adult laboratory-confirmed COVID-19 patients
Unknown

10a. Total hospitalized pediatric suspected or laboratory-confirmed COVID-19 patients
Unknown

10b. Hospitalized pediatric laboratory-confirmed COVID-19 patients
Unknown

11. Hospitalized and ventilated COVID-19 patients
Unknown

12a. Total ICU adult suspected or laboratory-confirmed COVID-19 patients
Unknown

12b. Hospitalized ICU adult laboratory-confirmed COVID-19 patients
Unknown

12c. Hospitalized ICU pediatric laboratory-confirmed COVID-19 patients
Unknown

13. Hospital onset
Unknown

Emergency Department

19. Previous day's Emergency Department (ED) Visits
Unknown

20. Previous day's total COVID-19-related ED Visits
Unknown

Previous Day's Admissions

Note: The age brackets under fields 17a and 17b are required to be considered compliant.

Previous Day's adult admissions with laboratory-confirmed COVID-19 and breakdown by age bracket:

17a. Total adult
Unknown

18-19
Unknown

20-29
Unknown

30-39
Unknown

40-49
Unknown

50-59
Unknown

60-69
Unknown

70-79
Unknown

80+
Unknown

Unknown
Unknown

Previous Day's adult admissions with suspected COVID-19 and breakdown by age bracket:

17b. Total adult
Unknown

18-19
Unknown

20-29
Unknown

30-39
Unknown

40-49
Unknown

50-59
Unknown

60-69
Unknown

70-79
Unknown

80+
Unknown

Unknown
Unknown

Previous Day's prediatric admissions with laboratory-confirmed COVID-19 and breakdown by age bracket:

18a. Total pediatric
Unknown

0-4
Unknown

5-11
Unknown

12-17
Unknown

Unknown
Unknown

Previous Day's pediatric admissions with suspected COVID-19:

18b. Total pediatric
Unknown

Therapeutics

Note: For fields 39a - 40d below, report one time a week on Wednesday.

Casirivimab (REGN10933) / Imdevimab (REGN10987) (Therapeutic A)

39a. Current inventory on hand (in courses)
Unknown

39b. Courses used in the last week
Unknown

Bamlanivimab and Etesevimab (Therapeutic C)

40a. Current Inventory on hand (in courses)
Unknown

40b. Courses used in the last week
Unknown

Sotrovimab (Therapeutic D)

40c. Current Inventory on hand (in courses)
Unknown

40d. Courses used in the last week
Unknown

Staff

Note: Field 24 will always default to "No" for a new submission.

24. Critical staffing shortage anticipated within a week (Y/N) (Optional)
Unknown

PPE

Note: For fields 27 - 30 below, report one time a week on Wednesday.

27. On hand supply (DURATION IN DAYS):

27b. N95 respirators
Unknown

27c. Surgical and procedure masks
Unknown

27d. Eye protection including face shields and goggles
Unknown

27e. Single-use gowns
Unknown

27f. Exam gloves (sterile and non-sterile)
Unknown

30. Are you able maintain at least a three day supply of these items?

30c. N95 respirators
Unknown

30e. Surgical and procedure masks
Unknown

30f. Eye protection including face shields and goggles
Unknown

30g. Single-use gowns
Unknown

30h. Exam gloves
Unknown

Influenza

33. Total hospitalized patients with laboratory-confirmed influenza virus infection
Unknown

34. Previous day's influenza admissions with laboratory-confirmed influenza virus infection
Unknown

35. Total hospitalized ICU patients with laboratory-confirmed influenza virus infection
Unknown

Inactive Federal Data Collection

The below fields have been made inactive for the federal data collection. Hospitals no longer need to report these data elements to the federal government.

Note: State, local, tribal, and territorial (SLTT) partners may have reporting requirements related to or independent of the federal reporting requirements. Facilities are encouraged to work with relevant (SLTT) partners to ensure complete reporting for all partners.

Staffed Bed Capacity

2a. All hospital beds
Unknown

2b. All adult hospital beds
Unknown

Ventilators

7. Total mechanical ventilators
Unknown

8. Mechanical ventilators in use
Unknown

ED/Overflow

8. Mechanical ventilators in use
Unknown

14. ED/overflow
Unknown

Previous Day's COVID-19 Deaths

16. Previous Day's COVID-19 Deaths
Unknown

Therapeutics

Remdesivir

21. Previous day's Remdesivir used (Optional)
Unknown

22. Current inventory (Optional)
Unknown

Bamlanivimab (Therapeutic B)

39c. Current inventory on hand (in courses) (Optional)
Unknown

39d. Courses used in the last week (Optional)
Unknown

⚠ Please note: Bamlanivimab is no longer authorized for use without accompanying Etesevimab. **The value in the field 39d should be 0.** Any doses of Bamlanivimab used with accompanying Etesevimab should be reported in field 40b.

Staff

23. Critical staffing shortage today (Y/N) (Optional)
Unknown

25. Staffing shortage details (Optional)
Optional

PPE

26. PPE Supplies

Are your PPE supply items managed (purchased, allocated, and/or stored) at the facility level or, if you are part of a health system, at the health system level (or other multiple facility group)?
Unknown

27. On hand supply (DURATION IN DAYS):

27a. Ventilator supplies
Unknown

28. On hand supply (INDIVIDUAL UNITS/"EACHES") (Optional):

28a. N95 respirators (Optional)
Unknown

28b. Other respirators such as PAPRs or elastomerics (Optional)
Unknown

28c. Surgical and procedure masks (Optional)
Unknown

28d. Eye protection including face shields and goggles (Optional)
Unknown

28e. Single-use gowns (Optional)
Unknown

28f. Launderable gowns (Optional)
Unknown

28g. Exam gloves (single) (Optional)
Unknown

29. Are you able to obtain these items?

29a. Ventilator supplies (any supplies excluding medications)
Unknown

29b. Ventilator medications
Unknown

29c. N95 Respirators
Unknown

29d. Other respirators such as PAPRs or elastomerics
Unknown

29e. Surgical and procedure masks
Unknown

29f. Eye protection including face shields and goggles
Unknown

29g. Single-use gowns
Unknown

29h. Exam gloves
Unknown

29i. Are you able to maintain a supply of launderable gowns?
Unknown

30. Are you able maintain at least a three day supply of these items?

30a. Ventilator supplies (any supplies excluding medications)
Unknown

30b Ventilator medications
Unknown

30d. Other respirators such as PAPRs or elastomerics
Unknown

30i. Laboratory - nasal pharyngeal swabs
Unknown

30j. Laboratory - nasal swabs
Unknown

30k. Laboratory - viral transport media
Unknown

31. Does your facility re-use or extend the use of PPE? (Optional)

31a. Reusable/launderable isolation gowns
Unknown

31b. PAPRs or elastomerics
Unknown

31c. N95 respirators
Unknown

32. If there are any critical issues, such as supply, staffing, capacity, or other issues about which you would like to receive direct contact, please explain here. (Optional)
Optional

Influenza

36. Total hospitalized patients co-infected with BOTH laboratory-confirmed COVID-19 AND laboratory-confirmed influenza virus infection (Optional)
Unknown

37. Previous day's influenza deaths (laboratory-confirmed influenza virus infection) (Optional)
Unknown

38. Previous day's deaths for patients co-infected with both COVID-19 AND laboratory-confirmed influenza virus (Optional)
Unknown

Vaccinations

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) (Optional)
Unknown

42. Current healthcare personnel who have not yet received any COVID-19 vaccination doses (Optional)
Unknown

43. Current healthcare personnel who have received the first dose of COVID-19 vaccination doses (Optional)
Unknown

44. Current healthcare personnel who have received a completed series of a COVID-19 vaccination or a single-dose vaccination (Optional)
Unknown

45. Total number of current healthcare personnel (Optional)
Unknown

Vaccinations 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 vaccination doses (Optional)
Unknown

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 (Optional)
Unknown

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