Please refer to the table below for complete information on the variables included on .CSV templates for Person-Level COVID-19 Vaccination Forms for HCP (Healthcare Personnel Safety Component). These are accurate as of NHSN Release in June 2024.

	Importing via .csv file	- Person-Level COVII	D-19 Vaccination Form	- HPS Component		
Table 1: NHSN Person-Level COVID-19 Vaccination Form – HPS Import File Format						
Field (alias if applicable)	Requirement	Values	Format ⁺	Description of Field		
Orgid	Required	-	must be a whole number	Must be a valid NHSN Facility ID (organization identifier)		
hcpid	Required	-	Character (15)	HCP identifier - a unique identifier for the individual, assigned by your facility		
name	Required	-	Character (30)	HCP First Name		
surname	Required	_	Character (30)	HCP Last Name		
gender	Required	F M O	Character (1)	HCP Gender F – Female M – Male O – Other/Unknown		
Sexatbirth	Optional	F M U	Character (1)	HCP Sex at Birth F - Female M - Male U - Unknown		
Genderidentity	Optional	F FTM M MTF NONCON OTHER ABU	Character (6)	 HCP Gender Identity F - Female FTM – Female to Male transgender M - Male MTF – Male to Female transgender NONCON – Identifies as nonconforming OTHER - Other ABU – Asked but unknown 		
dob	Required	MM/DD/YYYY	Datetime	HCP Date of Birth		
ethnicity	Required	HISP NOHISP DEC UNK	Character (6)	HCP Ethnicity HISP – Hispanic or Latino NOHISP – Not Hispanic or Latino DEC – Declined to respond. UNK – Unknown		
race	Required	AMIN ASIAN	Character (5)	HCP Race: AMIN – American Indian/Alaskan native		



		AAB NH-PI WHITE DEC UNK		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	Conditionally required	MM/DD/YYYY	Datetime	HCP End of Employment Date
vaccLoc	Required	VACCHOSP VACCIPF VACCIRF		 Vaccination location type VACCHOSP – For data reported for most facility types including acute care hospitals, ambulatory surgery centers, free-standing inpatient psychiatric facilities, free-standing inpatient rehabilitation facilities, long-term acute care hospitals, and dialysis facilities. This includes all inpatient and outpatient units/departments of the acute care facility sharing the same CCN as the acute care facility VACCIPF – For data reported by a parent facility (often an acute care facility) for an inpatient psychiatric unit with a unique CCN that is mapped as a location of the parent facility. This selection is only available for acute care facilities reporting data for IPF units with a different CCN from the acute care facility. VACCIRF - For data reported by a parent facility (often an acute care facility) for an inpatient rehabilitation unit with a unique CCN that is mapped as a location of the parent facility. This selection is only available for acute care facility) for an inpatient rehabilitation unit with a unique CCN that is mapped as a location of the parent facility. This selection is only available for acute care facility. This selection is only available for acute care facility. This selection is only available for acute care facilities reporting data for IRF units with a separate CCN from the acute care facility.
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
	Conditionally required	MM/DD/YYYY	Datetime	Dose 1 vaccination date
dose1Date	(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			
	having at least one			
	vaccine entered,			
	contraindication,			
	declined, unknown			
	vaccination status)			
	For Novavax dose date			
	must be >=6/1/2022			
	For Bivalent Moderna			
	or Bivalent Pfizer dose			
	date must be >=			
	4/19/2023			
	For Monovalent			
	Moderna or			
	Monovalent Pfizer			
	dose date must be <			
	4/19/2023			
dose1Mfg	Conditionally required	COVID2023_2024	Character (15)	Dose 1 vaccine manufacturer name
	if Dose1Date provided	BIMODERNA		COVID2023_2024 - 2023-2024 updated vaccine
		BIPFIZBION		BIMODERNA –bivalent Moderna vaccine
	If dose1Mfg = Janssen,	JANSSEN		BIPFIZBION –bivalent Pfizer vaccine
	then subsequent doses	MODERNA		MODERNA – original monovalent Moderna vaccine
	recorded beginning	PFIZBION		<i>PFIZBION</i> – original monovalent Pfizer vaccine
	with dose 3 fields.	NOVAVAX		JANSSEN – original monovalent Janssen vaccine
		UNSPECIFIED		UNSPECIFIED – unknown manufacturer



dose2Date	Conditionally required	MM/DD/YYYY	Datatima	Dose 2 vaccination date
uosezbate	Conditionally required		Datetime	Dose 2 vaccination date
	(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			
	having at least one			
	vaccine entered,			
	contraindication,			
	declined, unknown			
	vaccination status)			
	For Novavax dose date			
	must be >=6/1/2022			
	For Bivalent Moderna			
	or Bivalent Pfizer dose			
	date must be >=			
	4/19/2023			
	For Monovalent			
	Moderna or			
	Monovalent Pfizer			
	dose date must be <			
	4/19/2023			
dose2Mfg	Conditionally required	COVID2023_2024	Character (15)	Dose 2 vaccine manufacturer name
-	if Dose2Date provided	BIMODERNA	. ,	
		BIPFIZBION		COVID2023_2024 –2023-2024 updated vaccine
		MODERNA		BIMODERNA –bivalent Moderna vaccine
		PFIZBION		BIPFIZBION –bivalent Pfizer vaccine
		NOVAVAX		MODERNA – original monovalent Moderna vaccine
		UNSPECIFIED		PFIZBION – original monovalent Pfizer vaccine
				UNSPECIFIED – unknown manufacturer
medDate	Conditionally required	MM/DD/YYYY	Datetime	Contraindication or exclusion noted date
	(each record must			
	contain At least ONE			
	status- This means			
	each record much be			



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vaccine entered ,	
contraindication,	
declined, unknown	
vaccination status)	
Dose3date (addtldosedate) Conditionally required MM/DD/YYYY Datetime	e Third dose vaccination date



	For BIMODERNA and BIPFIZBION, dose3date must be >= 8/31/2022 For Monovalent Moderna or Monovalent Pfizer dose date must be < 4/19/2023			
Dose3Mfg (addtldosemfg)	Conditionally required if dose3Date provided	COVID2023_2024 BIMODERNA BIPFIZBION MODERNA PFIZBION JANSSEN UNSPECIFIED	Character (15)	Third dose vaccine manufacturer name COVID2023_2024 –2023-2024 updated vaccine 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
Dose4Date (boostdose2date)	Conditionally required For BIMODERNA and BIPFIZBION Dose3Date >= 8/31/2022 For Monovalent Moderna or Monovalent Pfizer dose date must be < 4/19/2023	MM/DD/YYYY Must be > dose3date	Datetime	Fourth dose vaccination date
Dose4Mfg (boostdose2mfg)	Conditionally required if Dose4Date provided	COVID2023_2024 BIMODERNA BIPFIZBION MODERNA PFIZBION JANSSEN UNSPECIFIED	Character (15)	Fourth dose vaccine manufacturer name COVID2023_2024 –2023-2024 updated vaccine 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



Dose5Date (boostdose3date)	Conditionally required For BIMODERNA and BIPFIZBION Dose5Date >= 8/31/2022	MM/DD/YYYY Must be > dose4date	Datetime	Fifth dose vaccination date
	For Monovalent Moderna or Monovalent Pfizer dose date must be < 4/19/2023			
Dose5mfg (boostdose3mfg)	Conditionally required if Dose5Date provided	COVID2023_2024 BIMODERNA BIPFIZBION MODERNA PFIZBION JANSSEN UNSPECIFIED	Character (15)	Fifth dose vaccine manufacturer name COVID2023_2024 –2023-2024 updated vaccine 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
Dose6Date (boostdose4date)	Conditionally required For BIMODERNA and BIPFIZBION Dose6Date >= 8/31/2022 For Monovalent Moderna or Monovalent Pfizer dose date must be <	MM/DD/YYYY Must be > dose5date	Datetime	Sixth dose vaccination date
Dose6mfg (boostdose4mfg)	4/19/2023 Conditionally required if Dose6Date provided	COVID2023_2024 BIMODERNA BIPFIZBION MODERNA PFIZBION	Character (15)	Sixth dose vaccine manufacturer name COVID2023_2024 –2023-2024 updated vaccine BIMODERNA – updated bivalent Moderna vaccine BIPFIZBION – updated bivalent Pfizer vaccine



		JANSSEN UNSPECIFIED		MODERNA – original monovalent Moderna vaccine PFIZBION – original monovalent Pfizer vaccine JANSSEN – original monovalent Janssen vaccine UNSPECIFIED – unknown manufacturer
Dose7Date (boostdose5date)	Conditionally required For BIMODERNA and BIPFIZBION Dose7Date >= 8/31/2022	MM/DD/YYYY Must be > dose6date	Datetime	Seventh dose vaccination date
	For Monovalent Moderna or Monovalent Pfizer dose date must be < 4/19/2023			
Dose7mfg (boostdose5mfg)	Conditionally required if Dose6Date provided	COVID2023_2024 BIMODERNA BIPFIZBION MODERNA PFIZBION JANSSEN UNSPECIFIED	Character (15)	Seventh dose vaccine manufacturer name COVID2023_2024 –2023-2024 updated vaccine 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
dose3NDC (addtldosendc)	Optional	-	Character (30)	Third dose vaccine NDC number
dose3Lot (addtldoselot)	Optional	-	Character (30)	Third dose vaccine Lot number
dose3ExpDate (addtldoseexpdate)	Optional	MM/DD/YYYY	Datetime	Third dose vaccine expiration date
dose4ndc (boostdose2ndc)	Optional	-	Character (30)	Fourth dose vaccine NDC number



dose4lot (boostdose2lot)	Optional	-	Character (30)	Fourth dose vaccine Lot number
dose4expdate (boostdose2expdate)	Optional	MM/DD/YYYY	Datetime	Fourth dose expiration date
dose5ndc (boostdose3ndc)	Optional	-	Character (30)	Fifth dose vaccine NDC number
dose5lot (boostdose3lot)	Optional	-	Character (30)	Fifth dose vaccine Lot number
dose5expdate (boostdose3expdate)	Optional	MM/DD/YYYY	Datetime	Fifth dose vaccine expiration date
Dose6ndc (boostdose4ndc)	Optional	-	Character (30)	Sixth dose vaccine NDC number
Dose6lot (boostdose4lot)	Optional	-	Character (30)	Sixth dose vaccine Lot number
Dose6expdate (boostdose4expdate)	Optional	MM/DD/YYYY	Datetime	Sixth dose vaccine expiration date
Dose7ndc (boostdose5ndc)	Optional	-	Character (30)	Seventh dose vaccine NDC number
Dose7lot (boostdose5lot)	Optional	-	Character (30)	Seventh dose vaccine Lot number
Dose7expdate (boostdose5expdate)	Optional	MM/DD/YYYY	Datetime	Seventh dose 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

