



List of COVID19 Hospital Data Points that we will be collecting to meet the HHS federal request for daily hospital reported. The numbered metrics are the categories/questions asked by HHS. The subset metrics bulleted by letters are the metrics DSHS will collect to fulfill and/or calculate the requested HHS category/question. **Additional new HHS metrics as of July 2020 are bolded and highlighted yellow.**

****HHS questions added to daily hospital reporting requirements since January 2021 have been added verbatim to Texas reporting platforms, therefore not included in this document.**

1. Demographics
 - a. CCN**
 - b. OrgID – NHSN**
2. All hospital beds (available + occupied)
 - a. Available Staffed Adult ICU
 - b. Available Staffed MedSurg (general hospital beds)
 - c. Available Staffed Pediatric
 - d. Available Staffed Pediatric ICU
 - e. Available Staffed Psych
 - f. Available Staffed Negative Pressure Isolation
 - g. Available Staffed Surge Beds Located in Inpatient and/or Overflow Areas
 - h. Available Staffed ED Beds**
 - i. Available Staffed Outpatient Beds**
 - j. Available Staffed Observation Beds**
 - k. PLUS All hospital inpatient bed occupancy
3. All Hospital inpatient beds (available + occupied sans ED, Outpatient)
 - a. Available Staffed Adult ICU
 - b. Available Staffed MedSurg (general hospital beds)
 - c. Available Staffed Pediatric
 - d. Available Staffed Pediatric ICU
 - e. Available Staffed Psych
 - f. Available Staffed Negative Pressure Isolation
 - g. Available Staffed Surge Beds Located in Inpatient and/or Overflow Areas
 - h. Available Staffed Observation Beds
 - i. PLUS All hospital inpatient bed occupancy
4. All hospital inpatient bed occupancy – (Adult Census + Pediatric Census)
 - a. Total number of staffed inpatient adult beds that are occupied
 - b. Total number of staffed inpatient pediatric beds that are occupied**
5. ICU Beds (Available) (Staffed Adult ICU Beds Available + Staffed Pediatric ICU Beds Available)
 - a. Total number of staffed ICU adult beds that are available
 - b. Total number of staffed ICU pediatric beds that are available
6. ICU Beds Occupied (Adult ICU Beds Occupied + Pediatric ICU Beds Occupied)
 - a. Total number of staffed ICU adult beds that are occupied

- b. Total number of staffed ICU pediatric beds that are occupied**
- 7. Total Mechanical Ventilators (Adult + Pedi + Neonatal + Anesthesia + Transport AVAILABLE + Adult + Pedi + Neonatal + Anesthesia IN USE)
 - a. Total Ventilators Available – Adult/Pediatric
 - b. Total Ventilators Available – Pediatric Only
 - c. Total BiPAPs Available – Adult
 - d. Total BiPAPs Available – Pediatric
 - e. Anesthesia machines with Ventilators available
 - f. Total Anesthesia Machines with Ventilators in Use
 - g. Total Ventilators in Use – Adult/Pediatric
 - h. Total Ventilators in Use – Pediatric Only
 - i. Total BiPAPs in Use – Adult
 - j. Total BiPAPs in Use – Pediatric
 - k. Total Portable/transport ventilators available**
- 8. Mechanical Ventilators in use (Adult + Pedi + Neonatal + Anesthesia + Transport IN USE)
 - a. Total Anesthesia Machines with Ventilators in Use
 - b. Total Ventilators in Use – Adult/Pediatric
 - c. Total Ventilators in Use – Pediatric Only
 - d. Total BiPAPs in Use – Adult
 - e. Total BiPAPs in Use – Pediatric
 - f. Total Portable/transport ventilators in use**
- 9. Total hospitalized adult suspected or confirmed positive COVID patients (COVID Lab Confirmed Adult Gen Bed + COVID Lab Confirmed Adult ICU Bed + COVID SUSP Adult Gen Bed + COVID SUSP Adult ICU)
 - a. **Lab Confirmed COV Pedi Pts in Inpatient**
 - b. Lab Confirmed COV Adult Pts - ICU
 - c. Lab Confirmed COV Adult Pts – Medical Surgical/General**
 - d. **Suspected COV Adult Pts - ICU**
 - e. Suspected COV Adult Pts – Medical Surgical/General**
 - f. **Suspected COV Pedi Pts in Inpatient Beds**
- 10. Total ICU adult suspected or confirmed positive COVID patients (COVID Lab Confirmed Adult ICU+ COVID SUSP Adult ICU)
 - a. Lab Confirmed COV Adult Pts - ICU
 - b. Suspected COV Adult Pts - ICU
- 11. Total hospitalized pediatric suspected or confirmed positive COVID patients (COVID Lab Confirmed Pedi Gen Bed + COVID Lab Confirmed Pedi ICU Bed + COVID SUSP Pedi Gen Bed + COVID SUSP Pedi ICU)
 - a. Suspected COV Pedi Pts in Inpatient Beds**
 - b. Lab Confirmed COV Pedi Pts in Inpatient**
- 12. Hospitalized and ventilated COVID patients (COVID on Vents)
 - a. COVID-19 Hospitalized and Ventilated (Subset of Total Patient Census, Ventilators in Use)

13. Hospital Onset

- a. Hospital onset – total current inpatients with onset of suspected or laboratory confirmed COVID-19 fourteen or more days after admission for a condition other than COVID-19

14. ED/Overflow

- a. ED/Overflow – Patients with suspected or laboratory confirmed COVID-19 who are currently in the Emergency Department (ED) or any overflow location awaiting an inpatient bed

15. ED/Overflow and vented

- a. ED/Overflow and vented – Patients with suspected or laboratory confirmed COVID-19 who are currently in the Emergency Department (ED) or any overflow location awaiting an inpatient bed and on a ventilator

16. Previous Day's Fatalities

- a. Previous day's deaths – Number of patients with suspected or laboratory confirmed COVID-19 who died on the previous calendar day in the hospital, ED, or any overflow location

17. Previous Day's Adult COVID-19 Admissions (Adult COVID Lab Confirmed Admissions last 24 hours all ages and Adult COVID Suspected Admissions Last 24 hours all ages)

- a. Previous day's adult lab confirmed admissions and age breakdown by age – Enter the number of patients who were admitted to an adult inpatient bed on the previous calendar day who had confirmed COVID-19 at the time of admission.

- i. 20 -29

- ii. 30-39

- iii. 40-49

- iv. 50-59

- v. 60-69

- vi. 70-79

- vii. 80+

- viii. Unknown

- b. Previous day's adult lab suspected admissions and age breakdown by age – Enter the number of patients who were admitted to an adult inpatient bed on the previous calendar day who had confirmed COVID-19 at the time of admission. (Adult Suspected COVID Admissions last 24 hours by age)

- i. 20 -29

- ii. 30-39

- iii. 40-49

- iv. 50-59

- v. 60-69

- vi. 70-79

- vii. 80+

- viii. Unknown

- 18. Previous Day's Pediatric COVID-19 Admissions (Lab Con Pedi Admissions last 24 hours all ages + Susp Pedi Admissions last 24 hours all ages)**
- a. **Previous Day's Peds Suspected Admissions: Previous day's pediatric suspected admissions and age breakdown by age – Enter the number of patients who were admitted to an adult inpatient bed on the previous calendar day who had suspected COVID-19 at the time of admission**
 - b. **Previous Day's Peds Lab Con Admissions: Previous day's pediatric laboratory confirmed admissions and age breakdown by age – Enter the number of patients who were admitted to an adult inpatient bed on the previous calendar day who had laboratory confirmed COVID-19 at the time of admission**
19. Previous day's total ED visits (Total ED Visits last 24 hours)
- a. Total Number of ER Visits in the last 24 hours
20. Previous day's total COVID-19 related ED Visits (Total COVID Related ER Visits last 24 hours)
- a. Number of Suspected* COVID-19 ER Visits (Subset of Total ER Visits)
- 21. Previous Day's Remdesivir Used: Previous day's Remdesivir used – Enter the number of Remdesivir vials used on the previous calendar day in an inpatient, ED, and/or overflow location**
- 22. Remdesivir Inventory: Current inventory of Remdesivir – Enter the number of Remdesivir vials in inventory at 11:59 pm on the previous calendar day in the hospital pharmacy**
- 23. Critical Staffing shortage today (Y/N)**
- 24. Critical Staffing Shortage anticipated within a week – Enter Y if you anticipate a critical staffing shortage within a week. Enter N if you do not anticipate a staffing shortage within a week**
- 25. Staffing Shortage Details: Staffing shortage details – If Y to having a current or projected shortage within a week, specify type of staffing shortage**
- a. Environmental services
 - b. Nurses
 - c. Respiratory therapists
 - d. Pharmacists and Pharmacy techs
 - e. Physicians
 - f. Other licensed independent practitioners
 - g. Temporary physicians, nurses, respiratory therapists and pharmacists
 - h. Other critical healthcare personnel
- 26. PPE Supply: Are your PPE supply items managed (purchased, allocated, and/or stored) at the facility level or, if you are part of a hospital system, at the health system level (or other multiple facility group)? – Check the responses below which reflects the management of PPE for your facility (including purchasing, allocation and/or storage).**
- a. Health system level or multiple-hospital group (e.g. PPE purchased at the health system level, par levels managed centrally, in stock supply available at another system location such as a central warehouse)
 - b. Facility level (e.g. PPE purchased by your individual facility, par levels managed at the facility-level, in stock supply is all on-site)

27. On-hand supplies in days: On hand supplies duration in days: Provide calculated days of supply in stock for ventilator supplies and each PPE category. Calculation may be provided by your hospital's ERP system or by utilizing the CDC's PPE burn rate calculator assumptions

- a. Ventilator supplies
- b. N95 respirators
- c. Other respirators such as PAPRs or elastometrics
- d. Surgical and procedure masks
- e. Eye protection including face shields and goggles
- f. Single-use gowns
- g. Gloves

28. On-hand supplies in units: Please report this information if feasible. For each listed supply item below, recorded the number of individual units (or "eaches") available in the facility on the data of data collection. For hospitals which are part of a health system, do NOT include supplies at other system locations, including warehouses. Information can be obtained from materials management, infection prevention leader, operation leadership, or COVID-19 incident command leadership in your facility

On hand supplies duration in individual units/"eaches":

- a. Ventilator supplies
- b. N95 respirators
- c. Other respirators such as PAPRs or elastometrics
- d. Surgical and procedure masks
- e. Eye protection including face shields and goggles
- f. Single-use gowns
- g. Gloves

29. Obtaining items: Select YES for each of the supply types that your facility is able to order and obtain. If you have placed an order but are not able to have that order filled, please answer NO. Information can be obtained from materials management, infection prevention leader, operational leadership, or the COVID-19 incident command leadership in your facility. 3 day supply: Are you able to obtain these items? (Y/N)

- a. Ventilator supplies (any supplies excluding medications)
- b. Ventilator medications
- c. N95 masks
- d. Other respirators such as PAPRs or elastometrics
- e. Surgical and procedure masks
- f. Eye protection, including face shields and goggles
- g. Single use gowns
- h. Gloves
- i. Are you able to maintain a sufficient supply of launderable gowns?

30. If YES to previous question, are you able to maintain at least a 3-day supply of these items? (YES/NO/NA) Enter YES for each supply type for which your facility is able to maintain at least 3-day supply. Enter NO for those for which your facility is not able to maintain at least 3-day supply. Enter N/A if the items are not applicable for your facility.

- a. Ventilator supplies (any supplies excluding medications)
 - b. Ventilator medications
 - c. N95 masks
 - d. Other respirators such as PAPRs or elastomeric
 - e. Surgical and procedure masks
 - f. Eye protection, including face shields and goggles
 - g. Single use gowns
 - h. Gloves
 - i. Are you able to maintain a sufficient supply of launderable gowns?
31. Reusable gowns for COVID patients: Does your facility use reusable/laundryable isolation gowns for the care of any patients on transmission-based precautions? (Y/N)
32. Critical shortages: Indicate any specific or critical medical supplies or medication shortages for which you are currently experiencing or anticipate experiencing in the next three days.
- a. Free text response