

John Hellerstedt, M.D.

Commissioner

# COVID-19 Hospital Bed Reporting Data Dictionary

\* Available Staffed Bed refers to beds that are licensed, physically available and staffed to attend to patients who occupy those beds. It includes only beds that are vacant.

A health system may report on behalf of the facilities, but the information needs to be reported at the individual facility level.

# All Hospital Beds Types (Available & Occupied)

#### **Available Staffed Adult ICU**

Beds supporting critically ill patients, including patients with or without ventilator support

## Available Staffed MedSurg (general hospital beds)

Beds for patients who do not require intensive care

#### Available Staffed Burn

Beds approved by the American Burn Association or self-designated. These beds should not be included in other ICU bed counts

#### **Available Staffed Pediatric**

Beds for patients 17 or younger who do not require intensive care

#### **Available Staffed Pediatric ICU**

Beds supporting critically ill/injured patients 17 years or younger, including patients with or without ventilator support

## **Available Staffed Psych**

Beds on a secured psychiatric unit

#### **Available Staffed Negative Pressure Isolation**

Beds available to provide respiratory isolation through negative pressure airflow. Do not include this number in the general bed counts.

## Available Staffed Surge Beds Located in Inpatient and/or Overflow Areas

Additional staffed beds that can be utilized if necessary within the walls of the hospital.

#### **Available Staffed ED Beds**

Beds available to patients in the emergency department

## **Available Staffed Outpatient Beds**

Beds for patients receiving outpatient services or awaiting transition

#### **Available Staffed Observation Beds**

Beds available to observe patients for few hours

# All Hospital Inpatient Bed Occupancy

**Total Number of Patients in Hospital**: Total hospital patient census at time of reporting, including suspected and lab confirmed COVID-19 patients admitted to general, isolation or ICU beds, and all overflow & surge/expansion beds with patients

#### a. Total Number of Adult Patients

Total number of staffed inpatient adult beds that are occupied

#### b. Total Number of Pediatric Patients

Total number of staffed inpatient pediatric beds that are occupied

#### ICU Beds Available

#### a. Total Number of Adult ICU Beds Available

Total number of staffed ICU adult beds that are available

#### b. Total Number of Pediatric ICU Beds Available

Total number of staffed ICU pediatric beds that are available

#### ICU Beds Occupied

## a. Total Number of Adult ICU Beds Occupied

Total number of staffed ICU adult beds that are occupied

#### b. Total Number of Pediatric ICU Beds Occupied

Total number of staffed ICU pediatric beds that are occupied

# Total Mechanical Ventilator (In Use and Not in Use)

#### Total Ventilators Available - Adult/Pediatric

Total number of <u>adult ventilators available</u>, to include adult <u>ventilators that</u> <u>can ventilate a pediatric patient</u>. Any device used to support, assist or control respiration through the application of positive pressure to the airway when delivered via an artificial airway

## Total Ventilators Available - Pediatric Only

Total number of <u>pediatric specific ventilators available</u>, <u>not to include</u> <u>pediatric ventilators that can also be used as adult ventilators</u>. Any device used to support, assist or control pediatric respiration through the

application of positive pressure to the airway when delivered via an artificial airway

#### Total BiPAPs Available - Adult

Total number of adult bi-level positive airway pressure (BiPAP or BPAP) machines available typically used for treatment of sleep apnea and may be used to support patients with respiratory insufficiency provided appropriate monitoring (as available) and patient condition

#### **Total BiPAPs Available – Pediatric**

Total number of pediatric bi-level positive airway pressure (BiPAP or BPAP) machines available

#### Anesthesia Machines Available (Available staffed Operating Room)

Total number of anesthesia machines in use by patients, including suspected and lab confirmed COVID-19 patients in the operating room

#### Total Anesthesia Machines with Ventilators in Use

Total number of anesthesia machines w/ventilators in use by patients, including suspected and lab confirmed COVID-19 patients admitted to general, isolation or ICU beds

#### Total Ventilators in Use - Adult/Pediatric

Total number of <u>adult ventilators in use</u>, to include adult ventilators that are <u>capable of ventilating a pediatric patient</u>

## Total Ventilators in Use - Pediatric Only

Total number of <u>pediatric specific ventilators in use</u>, <u>not to include pediatric</u> ventilators that can also be used as adult ventilators

#### Total BiPAPs in Use - Adult

Total number of adult bi-level positive airway pressure (BiPAP or BPAP) machines in use

## Total BiPAPs in Use - Pediatric

Total number of pediatric bi-level positive airway pressure (BiPAP or BPAP) machines in use

## Total Portable/Transport Ventilators Available

Total number of portable <u>ventilators available</u>, to include adult <u>ventilators</u> that are capable of <u>ventilating a pediatric patient</u>. Any device used to support, assist or control respiration through the application of positive pressure to the airway when delivered via an artificial airway during transportation

## Total Portable/Transport Ventilators in Use

Total number of portable <u>ventilators in use</u>, to include adult <u>ventilators that</u> <u>are capable of ventilating a pediatric patient</u>. Any device used to support, assist or control respiration through the application of positive pressure to the airway when delivered via an artificial airway during transportation

## COVID-19 Essential Elements of Information

## **Total Hospitalized Adults Suspected or confirmed COVID patients**

- a. Lab Confirmed COVID-19 Patients in MedSurg (General)/Isolation Beds at Time of Report (Subset of Total Patient Census)
  - Number of lab confirmed COVID-19 patients admitted to MedSurg (general) or isolation beds at time of report
- b. Lab Confirmed COVID-19 Patients in ICU Beds at Time of Report (Subset of Total Patient Census as well as Number of ICU Beds Occupied)
  Number of lab confirmed COVID-19 patients admitted to adult, pediatric ICU or NICU beds at time of report
- c. Hospitalized Suspected ICU Bed\*

Total number of patients currently hospitalized in an adult ICU inpatient bed who have laboratory confirmed COVID-19

d. Hospitalized Suspected Gen Bed\*

Total number of patients currently hospitalized in an adult general inpatient bed who have suspected COVID-19

## **Total Hospitalized Pediatric Suspected or Confirmed COVID patients**

a. Hospitalized Suspected Peds\*

Total number of patients currently hospitalized in a pediatric inpatient bed, including NICU, who have suspected COVID-19

## b. Hospitalized Confirmed Peds

Total number of patients currently hospitalized in a pediatric inpatient bed, including NICU who have lab confirmed COVID-19

# COVID-19 Hospitalized and Ventilated (Subset of Total Patient Census, Ventilators in Use)

Total number of patients currently hospitalized in an inpatient bed who have suspected, or lab confirmed COVID-19 and are on a mechanical ventilator at the time of report.

## **Total ICU adult Suspected and Confirmed Positive COVID Patients**

- a. Lab Confirmed COVID-19 Patients in ICU Beds at Time of Report (Subset of Total Patient Census as well as Number of ICU Beds Occupied) Total number of patients of lab confirmed COVID-19 patients admitted to adult beds at time of report
- b. **Suspected COVID-19 Patients in ICU Beds at Time of Report\***Total number of patients currently hospitalized in an adult ICU inpatient bed who have suspected COVID-19

#### **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

## Previous day's total ED visits

Total Number of ED Visits in the last 24 hours

## Previous day's total COVID-19 related ED Visits

Number of Suspected and confirmed COVID-19 ED Visits (Subset of Total ED Visits)

#### ED/Overflow

Total number of patients with suspected or laboratory confirmed COVID-19 who are currently in the Emergency Department (ED) or any overflow location awaiting an inpatient bed

## ED/Overflow and vented

Total number of 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

#### **Previous Day's Fatalities**

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

## Previous Day's Adult COVID-19 Admissions

a. Previous day's adult <u>lab confirmed admissions</u> 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+

b. Previous day's adult lab <u>suspected admissions\*</u> 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

## Previous Day's Pediatric COVID-19 Admissions

a. Previous Day's Peds Suspected Admissions\*

Number of patients who were admitted to a pediatric 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

Number of patients who were admitted to a pediatric inpatient bed on the previous calendar day who had laboratory confirmed COVID-19 at the time of admission

#### Previous Day's Remdesivir Used

Previous day's Remdesivir used – number of Remdesivir vials used on the previous calendar day in an inpatient, ED, and/or overflow location

#### Remdesivir Inventory

Current inventory of Remdesivir –number of Remdesivir vials in inventory at 11:59 pm on the previous calendar day in the hospital pharmacy

## Critical Staffing shortage today (Y/N)

Staff absenteeism at time of report due to quarantine, COVID-19 illness, family/other illness, school closure

## **Staffing Shortages Weekly**

Critical Staffing Shortage anticipated within a week

## **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

# Personal Protective Equipment Supply Essential Elements of Information

#### 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

## 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 individuals 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
- q. Gloves

## **Obtaining items**

Supply types that your facility can order and obtain.

## 3-Day Supply

Supplies your facility can maintain at least 3 days

## Reusable gowns for COVID patients

Isolation gowns that are reusable/launderable for the care of any patients on transmission-based precautions

## **Critical shortages**

Any specific or critical medical supplies or medication shortages for which you are currently experiencing or anticipate experiencing in the next three days.

Additional Guidance:

## \* Suspected COVID-19 Cases Definition

a. A person who is being managed as though he/she has COVID-19 because of signs and symptoms suggestive of COVID-19 as described by CDC's guidance but does not have a laboratory positive COVID19 test result. This may include patients who have not been tested or those with pending test results. The count may also include patients with negative test results but whom continue to show signs/symptoms suggestive of COVID-19. Do not include those who are waiting for a screening test result as suspected cases unless they meet the signs and symptoms criteria described above.

#### **Pediatric Essential Elements**

a. For all references of "adult" and "pediatric" below, "adult" references adult-designated equipment and locations and "pediatric" references pediatric-designated equipment and locations.

## **PPE and Supply Essential Elements**

- a. For supply categories that may have varying quantities, days on hand, or ability to obtain and maintain, base your response on the item that has the lowest stock on hand. If an item has multiple parts, such as a PAPR, a shortage of one part indicates a shortage of that item.
- b. When answering supply questions when the hospital is part of a health system, do NOT include supplies at other system locations, including warehouses. A health system may report on behalf of the facilities, but the information needs to be reported at the individual facility level.