



## Instructions for Completion of the COVID-19 Long-term Care Facility (LTCF): Supplies and Personal Protective Equipment Form (CDC 57.146)

Data Field	Instructions for Data Collection
NHSN Facility ID #	The NHSN-assigned facility ID will be auto-entered by the computer.
CMS Certification Number (CCN)	Auto-generated by the computer if the facility has previously entered the CCN number during NHSN registration. See NHSN CCN Guidance document for instructions on how to add a new CCN or edit an entered CCN.
Facility Name	Auto-generated by the computer if the facility has previously entered facility name during registration.
Date for which “supplies and personal protective equipment (PPE)” responses are reported	<i>Required.</i> Select the date on the calendar for which the responses are being reported in the NHSN COVID 19-Module.

### Important:

While daily reporting will provide the timeliest data to assist with COVID-19 emergency response efforts, retrospective reporting of prior day(s), unless otherwise specified, is encouraged if daily reporting is not feasible. At a minimum, facilities should report data at least once per week.

Data Field	Instructions for Data Collection
<p><b>Do you currently have ANY supply?</b></p> <p>Select “YES” or “NO” for each supply item.</p> <p><i>(Select <b>one</b> answer for each supply item)</i></p>	<p>On the date responses are reported into this Module, does your facility have ANY of <u>each</u> supply item listed below?</p> <p>Select “YES” for <u>each</u> supply item in which your facility currently has.</p> <p style="text-align: center;"><b>OR</b></p> <p>Select “NO” for <u>each</u> supply item in which your facility currently does NOT have. <i>(Select one answer for each supply item)</i></p> <ul style="list-style-type: none"> <li>• N95 masks</li> <li>• Surgical masks</li> <li>• Eye protection, including face shields or goggles</li> <li>• Gowns</li> <li>• Gloves</li> <li>• Alcohol-based hand sanitizer</li> </ul>



Data Field	Instructions for Data Collection
<p><b>Do you have enough for ONE week?</b></p> <p>Select “YES” or “NO” for each supply item.</p> <p><i>(Select <b>one</b> answer for each supply item)</i></p>	<p><u>On the date responses are reported into this Module</u>, does your facility have enough of <u>each</u> supply item listed for ONE week (For example, the next 7 days).</p> <p>Select “YES” for <u>each</u> supply item listed in which your facility has enough for the next week (for example, the next 7 days).</p> <p style="text-align: center;"><b>OR</b></p> <p>Select “NO” for <u>each</u> supply item listed in which your facility does NOT have enough for ONE week (for example, the next 7 days).</p> <p><i>(Select only one answer for each supply item)</i></p> <ul style="list-style-type: none"><li>• N95 masks</li><li>• Surgical masks</li><li>• Eye protection, including face shields or goggles</li><li>• Gowns</li><li>• Gloves</li><li>• Alcohol-based hand sanitizer</li></ul>