

Section S.**Federal VA****SVA0100. VA CLC Number**

Enter VA CLC

Enter the VA Community Living Center Number (VA CLC).

SVA0101. VA VISN Number

Enter Code

Enter the VA VISN number.

SVA0102. MPI Number

Enter MPI

Enter the Master Patient Index (MPI) Number.

SVA0200. CLC Treating Specialty

Enter Code

CLC Treating Specialties

- 42. **LS Dementia**
- 43. **LS Skilled Nursing**
- 44. **LS Maintenance**
- 45. **LS Psyche Care**
- 46. **LS SCI**
- 47. **SS Respite**
- 64. **SS Rehab**
- 66. **SS Restorative**
- 67. **SS Maintenance**
- 68. **SS Psych**
- 69. **SS Dementia**
- 81. **GEM**
- 95. **SS Skilled Nursing**
- 96. **Hospice**

SVA0201. Length of Stay

Enter Code

Code the Length of Stay (1 or 2)

- 1. **Long Stay**
- 2. **Short Stay**

SVA0300. Enrollment Priority

Enter Code

Enrollment Priority (1-9)

- 1. **Group 1**
- 2. **Group 2**
- 3. **Group 3**
- 4. **Group 4**
- 5. **Group 5**
- 6. **Group 6**
- 7. **Group 7**
- 8. **Group 8**
- 9. **Non Veteran**

SVA0400. Community Living Center (CLC) Unit Name

Enter CLC Unit Name

CLC Unit Name	<input type="text"/>
---------------	----------------------

SVA0500. Spinal Cord Injury

Enter Code

Identification of SCI units

- 0. **Non SCI Unit**
- 1. **SCI Unit**

SVA0600. Kinesiotherapy Days

Enter KT days <input style="width: 100%;" type="text"/>	Enter the number of days resident receives KT.
--	---

SVA0601. Kinesiotherapy Minutes

Enter KT minutes <input style="width: 100%;" type="text"/>	Enter the number of minutes resident receives KT.
---	--

SVA0700. Additional/Miscellaneous Data

Enter additional report data	
Misc. Data	<input style="width: 85%;" type="text"/>

SVA0701. Additional/Miscellaneous Data

Enter additional report data	
Misc. Data	<input style="width: 85%;" type="text"/>

SVA0702. Additional/Miscellaneous Data

Enter additional report data	
Misc. Data	<input style="width: 85%;" type="text"/>

SVA0800. Signature of RN Coordinator

1. RN sign <input style="width: 80%;" type="text"/> 2. <input style="width: 15%;" type="text"/> – <input style="width: 15%;" type="text"/> – <input style="width: 20%;" type="text"/> <div style="display: flex; justify-content: space-around; font-size: small;"> Month Day Year </div>	Signature and date of RN verifying completion of Section S.
--	--

SVA0801. Additional Signature

1. Sign <input style="width: 80%;" type="text"/> 2. <input style="width: 15%;" type="text"/> – <input style="width: 15%;" type="text"/> – <input style="width: 20%;" type="text"/> <div style="display: flex; justify-content: space-around; font-size: small;"> Month Day Year </div>	Signature and date of discipline contributing to Section S completion.
---	---

SVA0802. Additional Signature

1. Sign <input style="width: 80%;" type="text"/> 2. <input style="width: 15%;" type="text"/> – <input style="width: 15%;" type="text"/> – <input style="width: 20%;" type="text"/> <div style="display: flex; justify-content: space-around; font-size: small;"> Month Day Year </div>	Signature and date of discipline contributing to Section S completion.
---	---

SVA0803. Additional Signature

1. Sign <input style="width: 80%;" type="text"/> 2. <input style="width: 15%;" type="text"/> – <input style="width: 15%;" type="text"/> – <input style="width: 20%;" type="text"/> <div style="display: flex; justify-content: space-around; font-size: small;"> Month Day Year </div>	Signature and date of discipline contributing to Section S completion.
---	---