
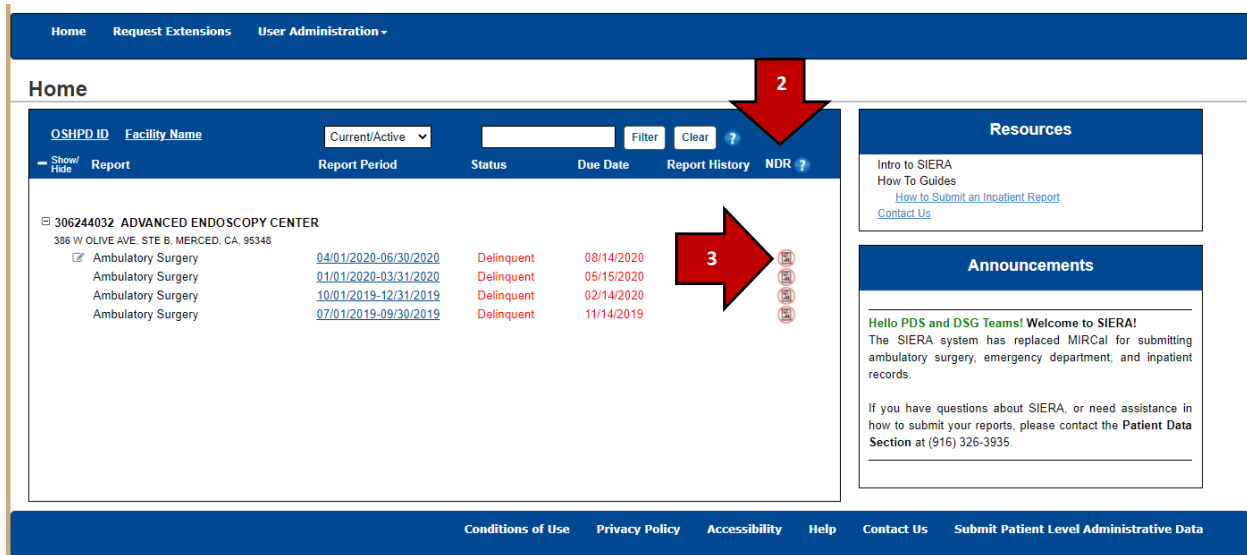


Patient Level Data Quick Guide Series

File a No Data to Report (NDR)

1. Log in to SIERA.
2. On the Home page, find the column marked “NDR.”
3. Select the icon  that corresponds to the facility, report type, and report period you wish to certify has no data to report.



Home Request Extensions User Administration

Home

OSHPD ID Facility Name Current/Active Filter Clear ?

Show/Hide	Report	Report Period	Status	Due Date	Report History	NDR ?
306244032 ADVANCED ENDOSCOPY CENTER 386 W OLIVE AVE, STE B, MERCED, CA, 95348						
<input checked="" type="checkbox"/>	Ambulatory Surgery	04/01/2020-06/30/2020	Delinquent	08/14/2020		
	Ambulatory Surgery	01/01/2020-03/31/2020	Delinquent	05/15/2020		
	Ambulatory Surgery	10/01/2019-12/31/2019	Delinquent	02/14/2020		
	Ambulatory Surgery	07/01/2019-09/30/2019	Delinquent	11/14/2019		

Resources

Intro to SIERA
How To Guides
[How to Submit an Inpatient Report](#)
[Contact Us](#)

Announcements

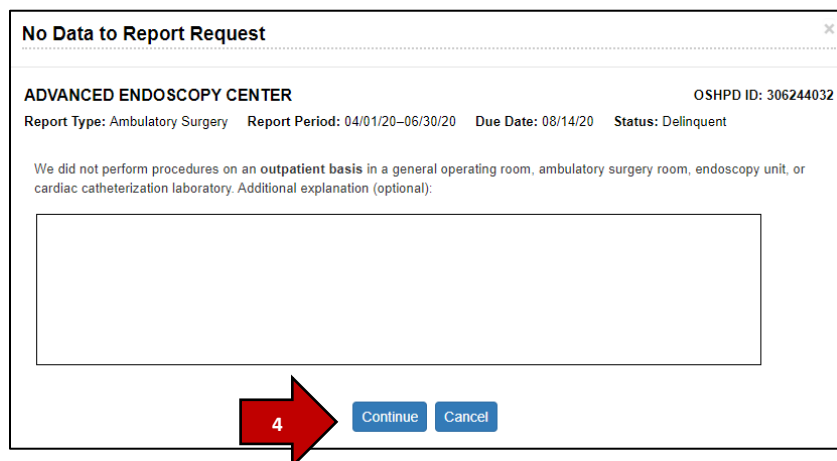
Hello PDS and DSG Teams! Welcome to SIERA!
The SIERA system has replaced MIRCaI for submitting ambulatory surgery, emergency department, and inpatient records.

If you have questions about SIERA, or need assistance in how to submit your reports, please contact the Patient Data Section at (916) 326-3935.

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4. In the resulting pop-up, enter all applicable information. Click Continue.

Continue



No Data to Report Request

ADVANCED ENDOSCOPY CENTER OSHPD ID: 306244032

Report Type: Ambulatory Surgery Report Period: 04/01/20-06/30/20 Due Date: 08/14/20 Status: Delinquent

We did not perform procedures on an outpatient basis in a general operating room, ambulatory surgery room, endoscopy unit, or cardiac catheterization laboratory. Additional explanation (optional):

Continue Cancel

5. Read the certification message. Check the checkbox and then click Certify. Certify

Certify Report

Advanced Endoscopy Center OSHPD ID: 306244032 [Report Id: 134786]
Report Type: Ambulatory Surgery Report Period: 04/01/20–06/30/20 Due Date: 08/14/20 Status: Delinquent
To certify this report, select the checkbox next to your name and click the Certify button.

I, _____ on behalf of Advanced Endoscopy Center, certify under penalty of perjury: that I am an official of this facility and am duly authorized to submit this request; and that, to the extent of my knowledge and information, this facility did not have any data for this reporting period as defined by the appropriate sections of the Health and Safety Code, as set forth in the California Code of Regulations. The facility report contains 0 records.



6. The screen will display a confirmation message in green. Your NDR request has been submitted to HCAI and is pending approval. You will receive an email when it has been approved.

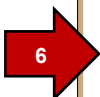
Certify Report
ADVANCED ENDOSCOPY CENTER OSHPD ID: 306244032
Report Type: Ambulatory Surgery Report Period: 04/01/20–06/30/20 Due Date: 08/14/20 Status: Delinquent
To certify this report, select the checkbox next to your name and click the Certify button.

Report is submitted pending approval of the No Data Report Request.

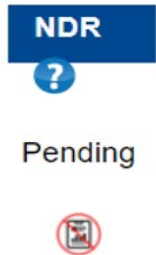
I, _____ on behalf of ADVANCED ENDOSCOPY CENTER, certify under penalty of perjury: that I am an official of this facility and am duly authorized to submit this request; and that, to the extent of my knowledge and information, this facility did not have any data for this reporting period as defined by the appropriate sections of the Health and Safety Code, as set forth in the California Code of Regulations. The facility report contains 0 records.

Certify

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7. On the Home page, the icon in the NDR column will be replaced with the word "Pending."



8. To confirm your NDR was approved, check the Home page the next business day. Once the NDR is approved, you will see "Approved-NDR" noted in the Status column.

