COVID-19 and Cancer Consortium (CCC19) Registry PID 1

PID 108899

A Project Home	≅ Project Setup	Online Designer	▼ Data Dictionary	■ Codebook
■ Codebook ▼				

■ Data Dictionary Codebook

07/28/2020 12:47pm

▲ Collapse all instruments

#	Variable / Field Name	Field Label Field Note	Field Attributes (Field Type, Validation, Choices, Calculations, etc.)
Instrume	nt: Screening form (screening	ng_form) 🛂 Enabled as survey	^ Collapse
1	record_id	Study ID	text
2	inclusion_yn	Do you intend to make a report on a patient who has a presumptive or lab-proven diagnosis of COVID-19 and has a current or past medical history of an invasive malignancy?	yesno, Required 1 Yes 0 No
3	exclude Show the field ONLY if: [inclusion_yn] = '0'	We're sorry, but this survey is is intended to report on patients with COVID-19 and cancer. Non-melanoma skin cancer, in situ cancers, and premalignant conditions are excluded. Please click the button to exit the survey.	radio x Exit the survey Stop actions on x
4	previous_report Show the field ONLY if: [inclusion_yn] = '1'	Have you previously reported this patient to this or any other registry?	radio, Required 1 No 2 This registry 3 Another registry
5	this_registry Show the field ONLY if: [previous_report] = '2'	If you have additional follow-up information to add to an existing report, you should return to that report and update the content.	descriptive
6	registry_other Show the field ONLY if: [previous_report] = '3'	Please feel free to fill out the survey. In order to help us avoid duplication with other complementary efforts, please optionally list the names of the other registries that you have reported to.	text
7	ccc19 Show the field ONLY if: [inclusion_yn] = '1'	Are you reporting on behalf on an institution participating in the CCC19 consortium?	yesno, Required 1 Yes 0 No

8	ccc19_institution	Please identify the participating institution.	dropdo	own (autocomplete), Required
	Show the field ONLY if:		181	Albert Einstein Cancer Center
	[ccc19] = '1'		101	Aurora Health Care
			158	Baptist Cancer Center (Memphis, TN)
			196	Baptist Healthcare System (IN/KY)
			1- 109	Barrow Neurological Institute
			163	Baylor College of Medicine
			39-6	BC Cancer
			162	Beth Israel Deaconess Medical Center (BIDMC)
			192	Boston Medical Center
			139	Brown University
			167	Cancer Treatment Centers of America (CTCA)
			392	Centre Hospitalier de l'Université de Montréal (CHUM)
			140- 2	Centro Médico ABC
			102	City of Hope
			103	Cleveland Clinic
			133	Columbia University/New York Presbyterian
			188	Cook County Hospital
			104	Dana-Farber Cancer Institute (DFCI)
			105	Duke University
			143	Einstein Medical Center
			106	Emory University/Winship Cancer Institute
			107	Fred Hutchinson Cancer Research Center/University of Washington/Seattle Cancer Care Alliance
			1- 101	Geisinger Health System
			1- 104	Georgetown Lombardi Comprehensive Cancer Center at Georgetown University
			1- 110	George Washington University
			138	Gundersen Health System
			395	Hamilton Health Sciences

1- 103	Harold C. Simmons Comprehensive Cancer Center at the University of Texas Southwestern Medical Center
144	Hartford HealthCare Cancer Institute
189	Henry Ford Cancer Institute
394	Hôpital Pierre-Le Gardeur
140- 3	Hospital General de México
140- 4	Hospital Regional de Alta Especialidad de Ixtalapuca
151	Houston Methodist Cancer Center
168	Huntsman Cancer Institute
146	Inova Schar Cancer Institute
140- 1	Instituto Nacional de Cancerología
108	Intermountain Healthcare
109	Johns Hopkins University
177	Kaiser Permanente Northwest
152	Karmanos Cancer Institute
193	Lewis Cancer & Research Pavilion @ St. Joseph's/Candler
178	Loma Linda University Cancer Center
155	Loyola University Medical Center
142	LSU Health Sciences Center
190	Markey Cancer Center at the University of Kentucky
110	Massachusetts General Hospital (MGH)
111	Mayo Clinic
112	Mays Cancer Center at UT Health San Antonio
391	McGill University Health Centre
113	MD Anderson Cancer Center
131	Medical University of South Carolina/Hollings Cancer Center
1- 112	Meharry Medical College
182	Memorial Sloan-Kettering Cancer Center (MSKCC)
-	

197	Michigan Center of Medical Research
172	Missouri Baptist Cancer Center
137	Moffitt Cancer Center
176	Mount Auburn Hospital
160	Mount Carmel Health System
114	Mount Sinai/Tisch Cancer Institute
115	Northwell Health
1- 107	Northwest Medical Specialties
116	Northwestern University/Lurie Cancer Center
147	NYU Langone Health/Perlmutter Cancer Center
154	Oregon Health & Sciences University/Knight Cancer Institute (OHSU)
199	Parkview Cancer Institute/Parkview Research Center
149	Penn State Cancer Institute
198	Penn State Health St. Joseph Cancer Center
150	Roswell Park Comprehensive Cancer Center
179	Rush University Medical Center
117	Rutgers Cancer Institute of New Jersey
393	Segal Cancer Centre, Jewish General Hospital, McGill University
185	Sidney Kimmel Cancer Center at Thomas Jefferson University
140	SSM Health Cancer Care
183	Stamford Hospital
118	Stanford University
134	St. Elizabeth Healthcare
195	Sutter Health
119	Ohio State University Comprehensive Cancer Center
1- 102	Tallahassee Memorial Healthcare
180	ThedaCare Cancer Care
173	Thompson Cancer Survival Center

1- 113	Tripler Army Medical Center
159	Tufts Medical Center
187	UCLA Jonsson Comprehensive Cancer Center
136	University Hospitals, Cleveland
120	University of California, Davis
121	University of California, San Diego (UCSD)
135	University of California, San Francisco (UCSF)
141	University of Chicago
166	University of Cincinnati Cancer Center
148	University of Colorado Cancer Center
122	University of Connecticut
161	University of Florida Health Cancer Center
156	University of Hawaii Cancer Center
169	University of Illinois at Chicago (UIC)
165	University of Iowa Holden Comprehensive Cancer Center
123	University of Kansas
1- 105	University of Louisville James Graham Brown Cancer Center
124	University of Maryland
125	University of Miami/Sylvester Comprehensive Cancer Center
153	University of Michigan/Rogel Cancer Center
126	University of Minnesota
1- 106	University of Mississippi Medical Center
184	University of Nebraska Medical Center/Buffett Cancer Center
127	University of North Carolina/Lineberger Comprehensive Cancer Center
132	University of Rochester Medical Center
174	University of Wisconsin Carbone Cancer Center
1100	UPMC Western Maryland

			128	Vanderbilt University Medical Center/Vanderbilt- Ingram Cancer Center Vidant Medical Center, East Carolina University
			111 191	Virginia Mason Cancer Institute
			186	Virtua Health
			157	Wake Forest Baptist Comprehensive Cancer Center
			129	Washington University in St. Louis/Siteman Cancer Center
			164	Weill Cornell Medicine/Meyer Cancer Center
			170	WellSpan Health
			194	Wentworth-Douglass Hospital
			130	West Cancer Center
			171	Willis-Knighton Cancer Center
			145	Yale New Haven Health/Smilow Cancer Hospital
			1- 108	Yuma Regional Medical Center
			9999	TEST
9	hcw_screen Show the field ONLY if: [ccc19] = '0'	Are you a healthcare provider or entering data on a healthcare provider's behalf?	yesno, 1 Ye 0 No	
10	hcw_exclude Show the field ONLY if: [hcw_screen] = '0'	This survey is currently open only to healthcare professionals or those entering data on behalf of a healthcare professional. If you are a patient or care partner looking to enter data about yourself or someone you know, please know we are currently working on strategies to reach out to you. If you would like to learn more about patient involvement in CCC19, check our website - we will update our website as we develop more ways for patients to get involved. Thank you for your patience! Please click the button below to exit the survey.		it the survey ctions on x

	11	location	Are you based in any of the listed countries or regions?	radio	, Required
		Show the field ONLY if:		1	United States or the U.S. territories
		[ccc19] = '0'		EU	European Union (EU)
				11	Argentina
				39	Canada
				140	Mexico
				224	United Kingdom
				83	Germany
				107	Italy
				197	Spain
				0	No - I am not based in any of those countries or regions
				Field	Annotation: @HIDECHOICE = '83,107,197'
	12	intl_stop	We're sorry, but the IRB does not allow us to collect data from your	radio	, Required
		Show the field ONLY if:	country at this time. However, we are actively looking into adding international participation on a country-by-country basis. Please visit	x E	xit the survey
		[location] = '0'	our website for more information; you will be redirected there once you end the survey by clicking the button.	Stop	actions on x
	13	screening_form_complete	Section Header: Form Status	dropo	down
			Complete?	0 II	ncomplete
				1 L	Inverified
				2 C	Complete
Ins	trumen	nt: Patient Demographics (p	patient_demographics) 🗗 Enabled as survey		^ Collapse
	14	ts_1	Timestamp for the first form	-	datetime_dmy) Annotation: @HIDDEN @NOW_UTC
	15	local_id	This field will only hold metadata for those sites using local REDCap instances and exporting to this database. It hold the local database record_id		integer) Annotation: @HIDDEN
	16	patient_id	Please enter your local unique patient identifier here (no PHI!). If this	text (integer, Min: 1), Required
		Show the field ONLY if: [ccc19] = '1'	is a test case, please enter "9999".		

17	age	Section Header: Patient Demographics - mandatory This section asks about patient information at the time of the COVID-19 diagnosis or during the first known encounter for COVID-19 as available for data entry. Age at COVID-19 diagnosis (years)	radio, Required 1
18	peds_contact Show the field ONLY if: [age] = '1'	We have interest in collecting additional information about pediatric patients, but these more specific details would require PHI and are thus currently out of scope. You may learn more about this effort by visiting the CCC19 website (clicking this link will open a new window).	descriptive
19	age_exact Show the field ONLY if: [age] = '2' or [age] = '3' or [age] = '4' or [age] = '5' or [age] = '6' or [age] = '7' or [age] = '8'	Exact age at COVID-19 diagnosis (Note: you should only enter a number between 18-89, as ages outside of this range are considered PHI)	text (integer, Min: 18, Max: 89)
20	gender	Gender	dropdown, Required 0 Female 1 Male 2 Other 3 Prefer not to say Field Annotation: SNOMED: 263495000
21	country_of_patient_residen	Country of patient residence	dropdown (autocomplete), Required 1 United States of America (USA) x 2 Afghanistan 3 Albania 4 Algeria 5 American Samoa 6 Andorra

7	Angola
8	Anguilla
9	Antarctica
10	Antigua and Barbuda
11	Argentina
12	Armenia
13	Aruba
14	Australia
15	Austria
16	Azerbaijan
17	Bahamas
18	Bahrain
19	Bangladesh
20	Barbados
21	Belarus
22	Belgium
23	Belize
24	Benin
25	Bermuda
26	Bhutan
27	Bolivia
28	Bosnia and Herzegovina
29	Botswana
30	Bouvet Island
31	Brazil
32	British Indian Ocean Territory
33	Brunei Darussalam
34	Bulgaria
35	Burkina Faso
36	Burundi
37	Cambodia
38	Cameroon

39 Canada 40 Cape Verde 41 Cayman Islands 42 Central African Republic 43 Chad 44 Chile 45 China 46 Christmas Island 47 Cocos (Keeling Islands) 48 Colombia 49 Comoros 50 Congo 51 Cook Islands 52 Costa Rica 53 Cote D'Ivoire (Ivory Coast) 54 Croatia (Hrvatska 55 Cuba 56 Cyprus 57 Czech Republic	
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47 Cocos (Keeling Islands) 48 Colombia 49 Comoros 50 Congo 51 Cook Islands 52 Costa Rica 53 Cote D'Ivoire (Ivory Coast) 54 Croatia (Hrvatska 55 Cuba 56 Cyprus	
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56 Cyprus	
57 Czech Republic	
58 Denmark	
59 Djibouti	
60 Dominica	
61 Dominican Republic	
62 East Timor	
63 Ecuador	
64 Egypt	
65 El Salvador	
66 Equatorial Guinea	
67 Eritrea	
68 Estonia	
69 Ethiopia	
70 Falkland Islands (Malvinas)	

71	Faroe Islands
72	Fiji
73	Finland
74	France
77	French Guiana
78	French Polynesia
79	French Southern Territories
80	Gabon
81	Gambia
82	Georgia
83	Germany
84	Ghana
85	Gibraltar
86	Greece
87	Greenland
88	Grenada
89	Guadeloupe
90	Guam
91	Guatemala
92	Guinea
93	Guinea-Bissau
94	Guyana
95	Haiti
96	Heard and McDonald Islands
97	Honduras
98	Hong Kong
99	Hungary
100	Iceland
101	India
102	Indonesia
103	Iran
104	Iraq

105 Ireland 106 Israel 107 Italy 108 Jamaica 109 Japan 110 Jordan 111 Kazakhstan 112 Kenya 113 Kiribati 114 Korea (North) 115 Korea (South) 116 Kuwait 117 Kyrgyzstan 118 Laos 119 Latvia 120 Lebanon 121 Lesotho 122 Liberia 123 Libya 124 Liechtenstein 125 Lithuania 126 Luxembourg 127 Macau 128 Macedonia 129 Madagascar 130 Malawi 131 Maloives 132 Maldives 133 Mali 134 Martinique		
107 Italy 108 Jamaica 109 Japan 110 Jordan 111 Kazakhstan 112 Kenya 113 Kiribati 114 Korea (North) 115 Korea (South) 116 Kuwait 117 Kyrgyzstan 118 Laos 119 Latvia 120 Lebanon 121 Lesotho 122 Liberia 123 Libya 124 Liechtenstein 125 Lithuania 126 Luxembourg 127 Macau 128 Macedonia 129 Madagascar 130 Malawi 131 Malaysia 132 Maldives 133 Mali 134 Malta 135 Marshall Islands	105	Ireland
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110 Jordan 111 Kazakhstan 112 Kenya 113 Kiribati 114 Korea (North) 115 Korea (South) 116 Kuwait 117 Kyrgyzstan 118 Laos 119 Latvia 120 Lebanon 121 Lesotho 122 Liberia 123 Libya 124 Liechtenstein 125 Lithuania 126 Luxembourg 127 Macau 128 Macedonia 129 Madagascar 130 Malawi 131 Malaysia 132 Maldives 133 Mali 134 Marshall Islands	108	Jamaica
111 Kazakhstan 112 Kenya 113 Kiribati 114 Korea (North) 115 Korea (South) 116 Kuwait 117 Kyrgyzstan 118 Laos 119 Latvia 120 Lebanon 121 Lesotho 122 Liberia 123 Libya 124 Liechtenstein 125 Lithuania 126 Luxembourg 127 Macau 128 Macedonia 129 Madagascar 130 Malawi 131 Malaysia 132 Maldives 133 Mali 134 Malta 135 Marshall Islands	109	Japan
112 Kenya 113 Kiribati 114 Korea (North) 115 Korea (South) 116 Kuwait 117 Kyrgyzstan 118 Laos 119 Latvia 120 Lebanon 121 Lesotho 122 Liberia 123 Libya 124 Liechtenstein 125 Lithuania 126 Luxembourg 127 Macau 128 Macedonia 129 Madagascar 130 Malawi 131 Malaysia 132 Maldives 133 Mali 134 Malta 135 Marshall Islands	110	Jordan
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114 Korea (North) 115 Korea (South) 116 Kuwait 117 Kyrgyzstan 118 Laos 119 Latvia 120 Lebanon 121 Lesotho 122 Liberia 123 Libya 124 Liechtenstein 125 Lithuania 126 Luxembourg 127 Macau 128 Macedonia 129 Madagascar 130 Malawi 131 Malaysia 132 Maldives 133 Mali 134 Malta 135 Marshall Islands	112	Kenya
115 Korea (South) 116 Kuwait 117 Kyrgyzstan 118 Laos 119 Latvia 120 Lebanon 121 Lesotho 122 Liberia 123 Libya 124 Liechtenstein 125 Lithuania 126 Luxembourg 127 Macau 128 Macedonia 129 Madagascar 130 Malawi 131 Malaysia 132 Maldives 133 Mali 134 Malta 135 Marshall Islands	113	Kiribati
116 Kuwait 117 Kyrgyzstan 118 Laos 119 Latvia 120 Lebanon 121 Lesotho 122 Liberia 123 Libya 124 Liechtenstein 125 Lithuania 126 Luxembourg 127 Macau 128 Macedonia 129 Madagascar 130 Malawi 131 Malaysia 132 Maldives 133 Mali 134 Malta 135 Marshall Islands	114	Korea (North)
117 Kyrgyzstan 118 Laos 119 Latvia 120 Lebanon 121 Lesotho 122 Liberia 123 Libya 124 Liechtenstein 125 Lithuania 126 Luxembourg 127 Macau 128 Macedonia 129 Madagascar 130 Malawi 131 Malaysia 132 Maldives 133 Mali 134 Malta 135 Marshall Islands	115	Korea (South)
118 Laos 119 Latvia 120 Lebanon 121 Lesotho 122 Liberia 123 Libya 124 Liechtenstein 125 Lithuania 126 Luxembourg 127 Macau 128 Macedonia 129 Madagascar 130 Malawi 131 Malaysia 132 Maldives 133 Mali 134 Malta 135 Marshall Islands	116	Kuwait
119 Latvia 120 Lebanon 121 Lesotho 122 Liberia 123 Libya 124 Liechtenstein 125 Lithuania 126 Luxembourg 127 Macau 128 Macedonia 129 Madagascar 130 Malawi 131 Malaysia 132 Maldives 133 Mali 134 Malta 135 Marshall Islands	117	Kyrgyzstan
120 Lebanon 121 Lesotho 122 Liberia 123 Libya 124 Liechtenstein 125 Lithuania 126 Luxembourg 127 Macau 128 Macedonia 129 Madagascar 130 Malawi 131 Malaysia 132 Maldives 133 Mali 134 Malta 135 Marshall Islands	118	Laos
121 Lesotho 122 Liberia 123 Libya 124 Liechtenstein 125 Lithuania 126 Luxembourg 127 Macau 128 Macedonia 129 Madagascar 130 Malawi 131 Malaysia 132 Maldives 133 Mali 134 Malta 135 Marshall Islands	119	Latvia
122 Liberia 123 Libya 124 Liechtenstein 125 Lithuania 126 Luxembourg 127 Macau 128 Macedonia 129 Madagascar 130 Malawi 131 Malaysia 132 Maldives 133 Mali 134 Malta 135 Marshall Islands	120	Lebanon
123 Libya 124 Liechtenstein 125 Lithuania 126 Luxembourg 127 Macau 128 Macedonia 129 Madagascar 130 Malawi 131 Malaysia 132 Maldives 133 Mali 134 Malta 135 Marshall Islands	121	Lesotho
124 Liechtenstein 125 Lithuania 126 Luxembourg 127 Macau 128 Macedonia 129 Madagascar 130 Malawi 131 Malaysia 132 Maldives 133 Mali 134 Malta 135 Marshall Islands	122	Liberia
125 Lithuania 126 Luxembourg 127 Macau 128 Macedonia 129 Madagascar 130 Malawi 131 Malaysia 132 Maldives 133 Mali 134 Malta 135 Marshall Islands	123	Libya
126 Luxembourg 127 Macau 128 Macedonia 129 Madagascar 130 Malawi 131 Malaysia 132 Maldives 133 Mali 134 Malta 135 Marshall Islands	124	Liechtenstein
127 Macau 128 Macedonia 129 Madagascar 130 Malawi 131 Malaysia 132 Maldives 133 Mali 134 Malta 135 Marshall Islands	125	Lithuania
128 Macedonia 129 Madagascar 130 Malawi 131 Malaysia 132 Maldives 133 Mali 134 Malta 135 Marshall Islands	126	Luxembourg
129 Madagascar 130 Malawi 131 Malaysia 132 Maldives 133 Mali 134 Malta 135 Marshall Islands	127	Macau
 130 Malawi 131 Malaysia 132 Maldives 133 Mali 134 Malta 135 Marshall Islands 	128	Macedonia
131 Malaysia 132 Maldives 133 Mali 134 Malta 135 Marshall Islands	129	Madagascar
132 Maldives 133 Mali 134 Malta 135 Marshall Islands	130	Malawi
133 Mali 134 Malta 135 Marshall Islands	131	Malaysia
134 Malta 135 Marshall Islands	132	Maldives
135 Marshall Islands	133	Mali
	134	Malta
136 Martinique	135	Marshall Islands
130 Martingac	136	Martinique

137 Mauritania 138 Mauritius 139 Mayotte 140 Mexico 141 Micronesia 142 Moldova 143 Monaco 144 Mongolia 145 Mortserrat 146 Morocco 147 Mozambique 148 Myanmar 149 Namibia 150 Nauru 151 Nepal 152 Netherlands 153 Netherlands Antilles 154 New Caledonia 155 New Zealand 156 Nicaragua 157 Niger 158 Nigeria 159 Niue 160 Norfolk Island 161 Northern Mariana Islands 162 Norway 163 Oman 164 Pakistan 165 Palau 166 Papua New Guinea	-	
139 Mayotte 140 Mexico 141 Micronesia 142 Moldova 143 Monaco 144 Mongolia 145 Montserrat 146 Morocco 147 Mozambique 148 Myanmar 149 Namibia 150 Nauru 151 Nepal 152 Netherlands 153 Netherlands Antilles 154 New Caledonia 155 New Zealand 156 Nicaragua 157 Niger 158 Nigeria 159 Niue 160 Norfolk Island 161 Northern Mariana Islands 162 Norway 163 Oman 164 Pakistan 165 Palau 166 Panama 167 Papua New Guinea	137	Mauritania
140 Mexico 141 Micronesia 142 Moldova 143 Monaco 144 Mongolia 145 Montserrat 146 Morocco 147 Mozambique 148 Myanmar 149 Namibia 150 Nauru 151 Nepal 152 Netherlands 153 Netherlands Antilles 154 New Caledonia 155 New Zealand 156 Nicaragua 157 Niger 158 Nigeria 159 Niue 160 Norfolk Island 161 Northern Mariana Islands 162 Norway 163 Oman 164 Pakistan 165 Palau 166 Panama 167 Papua New Guinea	138	Mauritius
141 Micronesia 142 Moldova 143 Monaco 144 Mongolia 145 Montserrat 146 Morocco 147 Mozambique 148 Myanmar 149 Namibia 150 Nauru 151 Nepal 152 Netherlands 153 Netherlands Antilles 154 New Caledonia 155 New Zealand 156 Nicaragua 157 Niger 158 Nigeria 159 Niue 160 Norfolk Island 161 Northern Mariana Islands 162 Norway 163 Oman 164 Pakistan 165 Palau 166 Panama 167 Papua New Guinea	139	Mayotte
142 Moldova 143 Monaco 144 Mongolia 145 Montserrat 146 Morocco 147 Mozambique 148 Myanmar 149 Namibia 150 Nauru 151 Nepal 152 Netherlands 153 Netherlands Antilles 154 New Caledonia 155 New Zealand 156 Nicaragua 157 Niger 158 Nigeria 159 Niue 160 Norfolk Island 161 Northern Mariana Islands 162 Norway 163 Oman 164 Pakistan 165 Palau 166 Panama 167 Papua New Guinea	140	Mexico
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144 Mongolia 145 Montserrat 146 Morocco 147 Mozambique 148 Myanmar 149 Namibia 150 Nauru 151 Nepal 152 Netherlands 153 Netherlands Antilles 154 New Caledonia 155 New Zealand 156 Nicaragua 157 Niger 158 Nigeria 159 Niue 160 Norfolk Island 161 Northern Mariana Islands 162 Norway 163 Oman 164 Pakistan 165 Palau 166 Panama 167 Papua New Guinea	142	Moldova
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147 Mozambique 148 Myanmar 149 Namibia 150 Nauru 151 Nepal 152 Netherlands 153 Netherlands Antilles 154 New Caledonia 155 New Zealand 156 Nicaragua 157 Niger 158 Nigeria 159 Niue 160 Norfolk Island 161 Northern Mariana Islands 162 Norway 163 Oman 164 Pakistan 165 Palau 166 Panama 167 Papua New Guinea	145	Montserrat
148Myanmar149Namibia150Nauru151Nepal152Netherlands153Netherlands Antilles154New Caledonia155New Zealand156Nicaragua157Niger158Nigeria159Niue160Norfolk Island161Northern Mariana Islands162Norway163Oman164Pakistan165Palau166Panama167Papua New Guinea	146	Morocco
149 Namibia 150 Nauru 151 Nepal 152 Netherlands 153 Netherlands Antilles 154 New Caledonia 155 New Zealand 156 Nicaragua 157 Niger 158 Nigeria 159 Niue 160 Norfolk Island 161 Northern Mariana Islands 162 Norway 163 Oman 164 Pakistan 165 Palau 166 Panama 167 Papua New Guinea	147	Mozambique
150 Nauru 151 Nepal 152 Netherlands 153 Netherlands Antilles 154 New Caledonia 155 New Zealand 156 Nicaragua 157 Niger 158 Nigeria 159 Niue 160 Norfolk Island 161 Northern Mariana Islands 162 Norway 163 Oman 164 Pakistan 165 Palau 166 Panama 167 Papua New Guinea	148	Myanmar
151 Nepal 152 Netherlands 153 Netherlands Antilles 154 New Caledonia 155 New Zealand 156 Nicaragua 157 Niger 158 Nigeria 159 Niue 160 Norfolk Island 161 Northern Mariana Islands 162 Norway 163 Oman 164 Pakistan 165 Palau 166 Panama 167 Papua New Guinea	149	Namibia
152 Netherlands 153 Netherlands Antilles 154 New Caledonia 155 New Zealand 156 Nicaragua 157 Niger 158 Nigeria 159 Niue 160 Norfolk Island 161 Northern Mariana Islands 162 Norway 163 Oman 164 Pakistan 165 Palau 166 Panama 167 Papua New Guinea	150	Nauru
153 Netherlands Antilles 154 New Caledonia 155 New Zealand 156 Nicaragua 157 Niger 158 Nigeria 159 Niue 160 Norfolk Island 161 Northern Mariana Islands 162 Norway 163 Oman 164 Pakistan 165 Palau 166 Panama 167 Papua New Guinea	151	Nepal
154 New Caledonia 155 New Zealand 156 Nicaragua 157 Niger 158 Nigeria 159 Niue 160 Norfolk Island 161 Northern Mariana Islands 162 Norway 163 Oman 164 Pakistan 165 Palau 166 Panama 167 Papua New Guinea	152	Netherlands
155 New Zealand 156 Nicaragua 157 Niger 158 Nigeria 159 Niue 160 Norfolk Island 161 Northern Mariana Islands 162 Norway 163 Oman 164 Pakistan 165 Palau 166 Panama 167 Papua New Guinea	153	Netherlands Antilles
156 Nicaragua 157 Niger 158 Nigeria 159 Niue 160 Norfolk Island 161 Northern Mariana Islands 162 Norway 163 Oman 164 Pakistan 165 Palau 166 Panama 167 Papua New Guinea	154	New Caledonia
157 Niger 158 Nigeria 159 Niue 160 Norfolk Island 161 Northern Mariana Islands 162 Norway 163 Oman 164 Pakistan 165 Palau 166 Panama 167 Papua New Guinea	155	New Zealand
158 Nigeria 159 Niue 160 Norfolk Island 161 Northern Mariana Islands 162 Norway 163 Oman 164 Pakistan 165 Palau 166 Panama 167 Papua New Guinea	156	Nicaragua
159 Niue 160 Norfolk Island 161 Northern Mariana Islands 162 Norway 163 Oman 164 Pakistan 165 Palau 166 Panama 167 Papua New Guinea	157	Niger
 160 Norfolk Island 161 Northern Mariana Islands 162 Norway 163 Oman 164 Pakistan 165 Palau 166 Panama 167 Papua New Guinea 	158	Nigeria
 161 Northern Mariana Islands 162 Norway 163 Oman 164 Pakistan 165 Palau 166 Panama 167 Papua New Guinea 	159	Niue
 162 Norway 163 Oman 164 Pakistan 165 Palau 166 Panama 167 Papua New Guinea 	160	Norfolk Island
163 Oman 164 Pakistan 165 Palau 166 Panama 167 Papua New Guinea	161	Northern Mariana Islands
164 Pakistan165 Palau166 Panama167 Papua New Guinea	162	Norway
165 Palau166 Panama167 Papua New Guinea	163	Oman
166 Panama167 Papua New Guinea	164	Pakistan
167 Papua New Guinea	165	Palau
	166	Panama
160 Davaguay	167	Papua New Guinea
100 Paraguay	168	Paraguay

169	Peru
170	Philippines
171	Pitcairn
172	Poland
173	Portugal
174	Puerto Rico
175	Qatar
176	Reunion
177	Romania
178	Russian Federation
179	Rwanda
180	Saint Kitts and Nevis
181	Saint Lucia
182	Saint Vincent and The Grenadines
183	Samoa
184	San Marino
185	Sao Tome and Principe
186	Saudi Arabia
187	Senegal
188	Seychelles
189	Sierra Leone
190	Singapore
191	Slovak Republic
192	Slovenia
193	Solomon Islands
194	Somalia
195	South Africa
196	S. Georgia and S. Sandwich Isls.
197	Spain
198	Sri Lanka
199	St. Helena
200	St. Pierre and Miquelon

201	Sudan
202	Suriname
203	Svalbard and Jan Mayen Islands
204	Swaziland
205	Sweden
206	Switzerland
207	Syria
208	Taiwan
209	Tajikistan
210	Tanzania
211	Thailand
212	Togo
213	Tokelau
214	Tonga
215	Trinidad and Tobago
216	Tunisia
217	Turkey
218	Turkmenistan
219	Turks and Caicos Islands
220	Tuvalu
221	Uganda
222	Ukraine
223	United Arab Emirates
224	United Kingdom (Britain / UK)
225	US Minor Outlying Islands
226	Uruguay
227	Uzbekistan
228	Vanuatu
229	Vatican City State (Holy See)
230	Venezuela
231	Viet Nam
232	Virgin Islands (British)

		00 / 01 01 (0 0 0 0 0 / 11)			
			233	Virgin Islands (US)	
			234	Wallis and Futuna Islands	
			235	Western Sahara	
			236	Yemen	
			237	Yugoslavia	
			238	Zaire	
			239	Zambia	
			240	Zimbabwe	
			Field	Annotation: SNOMED: 223369002	
22	state_of_patient_residence	State or territory of patient residence	dropo	down (autocomplete), Required	
	Show the field ONLY if:		AL	Alabama (AL)	
	[country_of_patient_residen] = '1'		AK	Alaska (AK)	
			AZ	Arizona (AZ)	
			AR	Arkansas (AR)	
			CA	California (CA)	
			CO	Colorado (CO)	
			СТ	Connecticut (CT)	
			DE	Delaware (DE)	
			FL	Florida (FL)	
			GA	Georgia (GA)	
			НІ	Hawaii (HI)	
			ID	Idaho (ID)	
			IL	Illinois (IL)	
			IN	Indiana (IN)	
			IA	lowa (IA)	
			KS	Kansas (KS)	
			KY	Kentucky (KY)	
			LA	Louisiana (LA)	
			ME	Maine (ME)	
			MD	Maryland (MD)	
			MA	Massachusetts (MA)	
			MI	Michigan (MI)	

MN	Minnesota (MN)
MS	Mississippi (MS)
МО	Missouri (MO)
MT	Montana (MT)
NE	Nebraska (NE)
NV	Nevada (NV)
NH	New Hampshire (NH)
NJ	New Jersey (NJ)
NM	New Mexico (NM)
NY	New York (NY)
NC	North Carolina (NC)
ND	North Dakota (ND)
ОН	Ohio (OH)
ОК	Oklahoma (OK)
OR	Oregon (OR)
PA	Pennsylvania (PA)
RI	Rhode Island (RI)
SC	South Carolina (SC)
SD	South Dakota (SD)
TN	Tennessee (TN)
TX	Texas (TX)
UT	Utah (UT)
VT	Vermont (VT)
VA	Virginia (VA)
WA	Washington (WA)
WV	West Virginia (WV)
WI	Wisconsin (WI)
WY	Wyoming (WY)
DC	District of Columbia (DC)
AS	American Samoa (AS)
GU	Guam (GU)
MP	Northern Mariana Islands (MP)

28/2020			COVID-19 and Cancer Consortium (CCC19) Registry (F	CLDCap				
				PR	Puerto Rico (PR)			
				VI	U.S. Virgin Islands	(VI)		
	23	city	What is the name of the city where the patient is receiving medical care? Optional, but will help with avoiding duplicate reports.	text				
	24	facility	What is the name of the healthcare facility where the patient is presenting? Optional, but will help with avoiding duplicate reports. If the facility is a satellite to a larger center, please specify in this field.	text	text			
	25	more_demographics Show the field ONLY if: [ccc19] = '0'	Section Header: Patient demographics - optional This section asks about patient information at the time of the COVID-19 diagnosis or during the first known encounter for COVID-19 as available for data entry. Would you like to answer additional demographic questions? This is optional but will really help us understand the granular details better.	yesno 1 Ye 0 No	Yes			
	26	race	Patient-reported race (check all that apply if patient identifies with more than one race)	checkl		Γ		
		Show the field ONLY if: [more_demographics] = '1' or [ccc1	Thore than one race)	1002 5	race1002_5	American Inc	lian/Alaska Native	
		9] = '1'		2028 9	race2028_9	Asian		
				2076	race2076_8	Native Hawai Islander	ian or Other Pacific	
				2054 5	- race2054_5	Black or Afric	an American	
				2106 3	race2106_3	White		
				2131- 1	race2131_1	Other		
				UNK	raceunk	Unknown / N	ot Reported	
				Field A	nnotation: Value S	Set: 2.16.840.1	.114222.4.11.6065	
	27	ethnicity	Patient-reported ethnicity	radio				
		Show the field ONLY if:		2135	-2 Hispanic or Lat	tino		
		[more_demographics] = '1' or [ccc1		2186	2186-5 NOT Hispanic or Latino			
		9] = '1'		UNK	Unknown / No	t Reported		
					m alignment: RH annotation: Value S	Set: 2.16.840.1	.114222.4.11.837	

1 1							
	28	urban_rural	What type of area does the patient primarily reside in?	radio			
		Show the field ONLY if:		1 Urban (city)2 Suburban (town, suburbs)			
		[more_demographics] = '1' or [ccc1				, suburbs)	
		9] = '1'		3	Rural (country)		
				88	Other		
				99	Unknown		
				ــــــــــــــــــــــــــــــــــــــ			
	29	insurance	What is the patient's insurance status? Check all that apply; this	chec	kbox		
		Show the field ONLY if:	should be the insurance status at the time of COVID-19 diagnosis.	0	insurance0	Not insured	
		[more_demographics] = '1' or [ccc1		1	insurance1	Private insurance/managed care	
		9] = '1' or [country_of_patient_resid en] = '1'		2	insurance2	Medicaid	
				3	insurance3	Medicare	
				4	insurance4	Other government	
				99	insurance99	Unknown	
	30	hcw	Is the patient a healthcare worker?	radio	0		
		Show the field ONLY if:	·	0	No		
		[more_demographics] = '1' or [ccc1		1	Yes		
		9] = '1'		99	Unknown		
					OTIKITOVVII		
	31	hcw_info	We are currently developing a separate survey to collect more	desc	criptive		
		Show the field ONLY if: [hcw] = '1'	information on healthcare workers with cancer who have suspected or confirmed COVID-19. You may learn more about this effort by visiting the CCC19 website (clicking this link will open a new window).				

32	ecog_status	ECOG performance status prior to infection Please record the ECOG	radio				
	Show the field ONLY if: [more_demographics] = '1' or [ccc1	performance status closest to the time of infection. If the patient has not had an encounter with the medical system within 3 months of the		0: Fully active, able to continue with all pre-disease activities without restriction			
	9] = '1'	COVID-19 diagnosis, you should choose "No ECOG PS recorded within 3 months prior to COVID-19 diagnosis".	1	ambula	icted in physically strenuous activi tory and able to carry out work of ary nature, e.g., light house work, o	a light or	
			2	carry ou	2: Ambulatory and capable of all self-care but un carry out any work activities. Up and about more 50% of waking hours		
			3		ble of only limited self-care. Confir ore than 50% of waking hours	ned to bed or	
			4		oletely disabled. Cannot carry on a confined to bed or chair	iny self-care.	
			88	No ECOG PS recorded within the 3 months prior to COVID-19 diagnosis			
			99	Unknown			
33	smoking_status	Smoking status	radio	0			
	Show the field ONLY if:		1	Current	smoker		
	[more_demographics] = '1' or [ccc1 9] = '1'		2	Former smoker, NOS Former smoker, quit less than 1 year ago			
	9] - 1		2a				
			2b	Former	smoker, quit between 1 and 5 year	ars ago	
			2c	Former	smoker, quit between 6 and 10 ye	ears ago	
			2d	Former	smoker, quit more than 10 years	ago	
			3	Never s	moker		
			99	Unknov	vn		
34	smoking_product	Types of inhaled smoking products. Check all that apply.	chec	kbox			
	Show the field ONLY if:		722	2496004	smoking_product722496004	Cigarettes	
	[smoking_status] = '1' or [smoking_		722	2497008	smoking_product722497008	Cigars	
	status] = '2a'		722	2498003	smoking_product722498003	e-Cigarettes	
			722	495000	smoking_product722495000	Hookah pipe	
			OTH smoking_productoth UNK smoking_productunk Field Annotation: Variable:SNOMED 69810100 set:SNOMED		smoking_productoth	Other	
					smoking_productunk	Unknown	
					; Value		

			•
35	smoking_product_oth_specify Show the field ONLY if: [smoking_product(OTH)] = '1'	Please specify type of other smoking products Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes
36	height Show the field ONLY if: [more_demographics] = '1' or [ccc1 9] = '1'	Patient height, please specify units. If you know BMI, please skip this field and enter it below. If patient has not had any recent heights taken, ok to use values up to 12 months prior to COVID-19 diagnosis.	text
37	weight Show the field ONLY if: [more_demographics] = '1' or [ccc1 9] = '1'	Patient weight, please specify units. If you know BMI, please skip this field and enter it below. If patient has not had any recent weights taken, ok to use values up to 3 months prior to COVID-19 diagnosis.	text
38	bmi Show the field ONLY if: [more_demographics] = '1' or [ccc1 9] = '1'	Patient body mass index (BMI) in kg/m2	text (number, Min: 0)
39	surg_med_hx_header Show the field ONLY if: [more_demographics] = '1' or [ccc1 9] = '1'	Surgical and Medical History	descriptive
40	recent_surgery Show the field ONLY if: [more_demographics] = '1' or [ccc1 9] = '1'	Has the patient had a surgery of any kind in the past year? This should include but not be limited to cancer surgeries.	radio 0 No 1 Yes 99 Unknown
41	surgery_timing Show the field ONLY if: [recent_surgery] = '1'	What is the timing of the most recent surgery?	radio 1 Within the past month 2 Within the past 1 to 3 months 3 Within the past 3 to 12 months UNK Unknown
42	details_surgery Show the field ONLY if: [recent_surgery] = '1'	Additional details Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes
43	concomitant_meds Show the field ONLY if: [more_demographics] = '1' or [ccc1 9] = '1'	Concomitant medications being taken at time of presentation with COVID-19. Check all that apply.	checkbox H02 concomitant_medsh02 Systemic cortice L04A concomitant_medsl04a Immunosuppre RXCUI- 2393 Chloroquine

t_med	nt_meds	_rxcui_5521	Hydroxychlor (Plaquenil)
t_med	nt_meds	_rxcui_61286	5 Tocilizumab
t_med	int_meds	 _c09a	ACE inhibitor
t_med	nt_meds	_c09c	Angiotensin (ARBs)
t_med	nt_meds	_atc_c10aa	Statins
t_med	int_meds	j01	Antibiotics
t_med	nt_meds	_rxcui_18631	Azithromycin Pak)
t_med	nt_meds	ho_44995	Anti-virals
t_med	nt_meds	_atc_j05ar10	Lopinavir/Rit
t_med	nt_meds	_rxcui_26010	1 Oseltamivir (
t_med	nt_meds	_n02be01	Tylenol (paracetamo
t_med	nt_meds		Ibuprofen, na
t_med	int_meds	_n02ba	Aspirin
t_med	nt_meds	_b01ac	Antiplatelet a
t_med	int_meds	_a10ba02	Metformin
t_med	int_meds	_a11cc	Vitamin D
t_med	int_meds	_b01a	Anticoagulati
t_med	nt_meds	_oth	Other
t_med	int_meds	_unk	Unknown
	nt meds	_none	None

44	steroid_specific_2	Steroid dosing, in prednisone dose equivalents Note: 3 mg of	radio			
	Show the field ONLY if:	dexamethasone is equivalent to 20 mg of prednisone, so any dose of	1	20 mg	/day or below [low dose]	
	[concomitant_meds(H02)] = '1'	dexamethasone of more than 3 mg/day (21 mg/week) would be equivalant to more than 20 mg of prednisone/day.	1a	10 mg	/day or below [low dose]	
		0 · h · · · · · · ·	1b	More	than 10 mg/day up to 20 mg/da	<i>y</i>
			2	More	than 20 mg/day but less than 1r	ng/kg/day
			3	Equal	to or greater than 1 mg/kg/day	
			99	Unkno	own	
			Field	Annot	ation: @HIDECHOICE='1'	
45	immuno_type	Please specify which immunosuppressant(s). Check all that apply.	chec			
	Show the field ONLY if:			AD01	immuno_typel04ad01	Cyclosporine
	[concomitant_meds(L04A)] = '1'		L04	AD02	immuno_typel04ad02	Tacrolimus (Prograf)
			L04	AA10	immuno_typel04aa10	Sirolimus
			L04	AX01	immuno_typel04ax01	Azathioprine (Imuran)
			L04	AA13	immuno_typel04aa13	Leflunomide
			L04	AA06	immuno_typel04aa06	Mycophenolate mofetil (CellCept)
			L01	BB02	immuno_typel01bb02	Mercaptopurine (6-MP)
			L04	AC05	immuno_typel04ac05	Ustekinumab
			L04	AA33	immuno_typel04aa33	Vedolizumab
			L01	BA01	immuno_typel01ba01	Methotrexate
			A07	EC01	immuno_typea07ec01	Sulfasalazine
			L01	AA01	immuno_typel01aa01	Cyclophosphamide
			L04	AB02	immuno_typel04ab02	Infliximab
			L04	AB01	immuno_typel04ab01	Etanercept
			L04	AB04	immuno_typel04ab04	Adalimumab
			L04	AB05	immuno_typel04ab05	Certolizumab
			L04	AB06	immuno_typel04ab06	Golimumab
			L01	XE18	immuno_typel01xe18	Ruxolitinib (Jakafi)
			L04	AA29	immuno_typel04aa29	Tofacitinib (Xeljanz)
						•

to the 15 and cancer combinant (ccc15) regard the combinant						
			RXCUI- 1487006	immuno_typerxcui_1487006	Oclacitinib	
			L04AA37	immuno_typel04aa37	Baricitinib	
			Peficitinib	immuno_typepeficitinib	Peficitinib	
			L01XE57	immuno_typel01xe57	Fedratinib (Inrebic)	
			L04AA44	immuno_typel04aa44	Upadacitinib	
			ОТН	immuno_typeoth	Other	
			UNK	immuno_typeunk	Unknown	
			Field Annota	ation: Terminologies: ATC, RxNorr	n	
46	immuno_oth_more	Please specify what other immunosuppressants Do not record any	notes			
	Show the field ONLY if: [immuno_type(OTH)] = '1'	PHI in this field. As a reminder, this includes all elements of dates other than year.				
47	aspirin_dose	Aspirin dosing	radio			
	Show the field ONLY if:		262459003	Low dose (less than 200 mg/da	y)	
	[concomitant_meds(N02BA)] = '1'		261829003	Full dose		
			261665006	Unknown		
			Field Annota	ation: Terminology: SNOMED		

48	bl_anticoag_type	Which anticoagulants were used? Check all that apply.	checkbox			
	Show the field ONLY if: [concomitant_meds(B01A)] = '1'		B01AA	bl_anticoag_typeb01aa	Vitamin K antagonists (e.g., warfarin)	
			B01AB	bl_anticoag_typeb01ab	Low-molecular weight heparin (e.g., enoxaparin [Lovenox])	
			B01AB01	bl_anticoag_typeb01ab01	Unfractionated heparin	
			B01AE	bl_anticoag_typeb01ae	Direct thrombin inhibitors (e.g., argatroban, dabigatran [Pradaxa])	
			B01AF	bl_anticoag_typeb01af	Direct factor Xa inhibitors (e.g., apixaban [Eliquis], rivaroxaban [Xarelto])	
			B01AX05	bl_anticoag_typeb01ax05	Fondaparinux	
			UNK	bl_anticoag_typeunk	Unknown	
			ОТН	bl_anticoag_typeoth	Other	
			Field Annot	ation: Terminology: ATC		
49	bl_anticoag_reason	Why were anticoagulants being used?	radio	1		
	Show the field ONLY if:		360271000) Prophylaxis		
	[concomitant_meds(B01A)] = '1'		262202000	Therapeutic dosing		
			261665006	5 Unknown		
			Field Annot	Field Annotation: Terminology: SNOMED		
50	bl_anticoag_type_oth_specify Show the field ONLY if: [bl_anticoag_type(OTH)] = '1'	Please specify what other anticoagulants Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes			
51	meds_other Show the field ONLY if: [concomitant_meds(OTH)] = '1'	Please specify what other medications Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes			

52	gcsf	Did the patient receive G-CSF within two weeks of the COVID-19	radio	
	Show the field ONLY if:	diagnosis?	0	No
	[more_demographics] = '1' or [ccc1 9] = '1'		1	Yes, Prophylactic G-CSF use (within 1-3 days of completion of chemo)
			2	Yes, Therapeutic G-CSF use (later than 1-3 days after chemo or during a neutropenic hospitalization)
			ОТН	Other
			UNK	Unknown
53	gcsf_oth_specify Show the field ONLY if: [gcsf] = 'OTH'	Please specify what other G-CSF Do not record any PHI in this field. As a reminder, this includes all elements of date other than year.	notes	
54	additional_meds Show the field ONLY if: [more_demographics] = '1' or [ccc1 9] = '1'	Additional details about medications that the patient may have been taking (e.g., specific drug names; if taking NSAIDs or corticosteroids, how long, how much; etc.) If it is easy to copy a full medication list from your EMR, please do so here. Do not record any PHI in this field. As a reminder, this includes all elements of date other than year.	notes	
55	influenza_vax Show the field ONLY if: [more_demographics] = '1' or [ccc1 9] = '1'	Did the patient have an influenza vaccine this season?		lo es Inknown
56	bcg_vax Show the field ONLY if: [more_demographics] = '1' or [ccc1 9] = '1'	Has the patient ever had a BCG vaccine?		lo es Inknown
57	blood_type_rh Show the field ONLY if: [more_demographics] = '1' or [ccc1 9] = '1'	Patient RH blood type	16574 99	17007 Rh+ 16003 Rh- Unknown Innotation: SNOMED: 115758001

Γ	58	blood_type	Patient ABO blood type	radio		
		Show the field ONLY if: [more_demographics] = '1' or [ccc1 9] = '1'	Tutterit Abo blood type	A A B B AB O O		
				99 Unknow	wn	
				Field Annota	tion: SNOMED: 112143006	
	59	comorbid_header Show the field ONLY if: [more_demographics] = '1' or [ccc1 9] = '1'	Comorbidities In this section, please report on any pre-existing conditions other than cancer that were present prior to the COVID-19 illness.	descriptive		
	60	significant_comorbidities	Significant comorbidities (other than cancer). Check all that apply. If	checkbox		
		Show the field ONLY if: [more_demographics] = '1' or [ccc1	you do not know specific diagnoses, ok to choose the "NOS" categories (e.g., Pulmonary disease, NOS).Immune suppression is defined as outpatient use of prednisone (10mg/d or greater), use of	38013005	significant_comorbidities38013005	Immune sup
		9] = '1'	chemotherapy, use of nonsteroidal immunosuppressive agents for	62479008	significant_comorbidities62479008	HIV +/- AIDS
			solid organ transplant or for an autoimmune disease.	19829001	significant_comorbidities19829001	Pulmonary
				195967001	significant_comorbidities195967001	Asthma
				13645005	significant_comorbidities13645005	COPD/Emph
				78275009	significant_comorbidities78275009	Obstructive (OSA)
				84004001	significant_comorbidities84004001	Radiation pr
				427046006	significant_comorbidities427046006	ICI pneumoi
				56265001	significant_comorbidities56265001	Cardiac dise
				38341003	significant_comorbidities38341003	Hypertension pressure; H
				55822004	significant_comorbidities55822004	Hyperlipider cholesterol)
				53741008	significant_comorbidities53741008	Coronary ar (CAD)
				42343007	significant_comorbidities42343007	Congestive I (CHF) includ HFrEF
				698247007	significant_comorbidities698247007	Cardiac arrh
				49436004	significant_comorbidities49436004	Atrial fibrilla

- 1			
400047006	significant_comorbidities_	_400047006	Peripheral v (PVD/PAD)
275526006	significant_comorbidities_	_275526006	History of co
59282003	significant_comorbidities_	_59282003	Pulmonary
128053003	significant_comorbidities_	_128053003	Deep venou (DVT)
90708001	significant_comorbidities_	_90708001	Renal diseas
723190009	significant_comorbidities_	_723190009	Chronic ren (CRI/CKD)
46177005	significant_comorbidities_	_46177005	End-stage re (ESRD), not
236435004	significant_comorbidities_	_236435004	ESRD, on dia
235856003	significant_comorbidities_	_235856003	Liver diseas
19943007	significant_comorbidities_	_19943007	Cirrhosis
OTH-x	significant_comorbidities_	_oth_x	Other organ
52448006	significant_comorbidities_	_52448006	Dementia
7200002	significant_comorbidities_	_7200002	Alcoholism
73211009	significant_comorbidities_	_73211009	Diabetes m
237602007	significant_comorbidities_	_237602007	Metabolic s
414916001	significant_comorbidities_	_414916001	Obesity
238136002	significant_comorbidities_	_238136002	Morbid obe BMI > 35 wi related heal
444316004	significant_comorbidities_	_444316004	Seasonal all
24526004	significant_comorbidities_	_24526004	Inflammato (IBD)
85828009	significant_comorbidities_	_85828009	Rheumatolo disease
313039003	significant_comorbidities_	_313039003	History of so
OTH	significant_comorbidities_	_oth	Other
UNK	significant_comorbidities_	_unk	Unknown
NONE	significant_comorbidities_	_none	None

Field Annotation: Terminology: SNOMED

61	hiv_cd4	What is the patient's CD4+ T-cell count?	text	(number, Min: 0)
	Show the field ONLY if: [significant_comorbidities(6247900 8)] = '1'			
62	hiv_vl	What is the patient's viral load, in copies/mL?	text	(number, Min: 0)
	Show the field ONLY if: [significant_comorbidities(6247900 8)] = '1'			
63	ibd	Please consider reporting this patient to the Secure-IBD Registry as	desc	riptive
	Show the field ONLY if: [significant_comorbidities(2452600 4)] = '1'	well.		
64	please_specify	Please specify what other significant comorbidities Do not record any	note	es
	Show the field ONLY if: [significant_comorbidities(OTH)] = '1' or [significant_comorbidities(OT H-x)] = '1'	PHI in this field. As a reminder, this includes all elements of date other than year.		
65	o2_requirement	Does the patient have a baseline chronic O2 requirement?	radio	0
	Show the field ONLY if:		1	Yes, patient requires chronic supplemental O2
	[more_demographics] = '1' or [ccc1 9] = '1'		0	No, patient does not require supplemental O2
	-1		99	Unknown
66	comorbid_no	Number of comorbid conditions requiring active therapy.	radio	0
	Show the field ONLY if:		0	0
	[more_demographics] = '1' or [ccc1 9] = '1'		1	1
	•		2	2
			3	3
			4	4 or more
			99	Unknown
67	additional_comorbid	Additional comments about comorbidities. Do not record any PHI in	note	es
	Show the field ONLY if: [more_demographics] = '1' or [ccc1 9] = '1'	this field. As a reminder, this includes all elements of dates other than year.		
68	comments_form_1	Section Header: Free text entry (optional)	note	25
		Comments Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.		

	69	patient_demographics_complete	Section Header: Form Status Complete?	dropdown 0 Incomplete 1 Unverified 2 Complete
Ins	trumen	nt: COVID-19 details (covid19_d	etails) 🛂 Enabled as survey	^ Collapse
	70	ts_2	Timestamp for the second form	text (datetime_dmy) Field Annotation: @HIDDEN @NOW_UTC
	71	timing_of_report	Is this form being filled out during the COVID-19 illness, or retrospectively? Unless you know that the patient has either recovered from COVID-19 (with or without comlications) or died from COVID-19, you should select "during the COVID-19 illness".	radio, Required 1 During the illness 2 After the course of illness (retrospectively)
	72	dx_year	Section Header: COVID-19 Details - Mandatory What year was the patient diagnosed with COVID-19 in?	radio, Required 2019 2019 2020 2020
	73	covid_19_dx_interval	How long ago was the patient's COVID-19 diagnosis (to the best of your knowledge)?	radio, Required 1 Within past 1 week 2 Within past 1 to 2 weeks 3 Within past 2 to 4 weeks 4 Within past 4 to 8 weeks 5 Within past 8 to 12 weeks 6 Within past 3 to 6 months 7 More than 6 months ago 99 Unknown
	74	c19_workup_why	Section Header: <i>Diagnostic Information</i> Why did the patient come to be evaluated for SARS-CoV-2 or COVID-19?	radio 1 Symptoms 2 Screening prior to a procedure 3 Screening prior to a systemic anti-cancer treatment 4 Screening due to a high-risk situation (e.g., known exposure) OTH Other UNK Unknown Field Annotation: @HIDDEN

75	c19_workup_why_2	Why did the patient come to be evaluated for SARS-CoV-2 or COVID-	checkl	oox, Required	
	Show the field ONLY if:	19_workup_why] != '1' AND [c19_ brkup_why] != '2' AND [c19_work b_why] != '3' AND [c19_workup_w v] != '4' AND [c19_workup_why] != TH' AND [c19_workup_why] != 'U	1	c19_workup_why_21	Symptoms
	[c19_workup_why] != '1' AND [c19_ workup_why] != '2' AND [c19_work		2	c19_workup_why_22	Screening prior to a procedure
	hy] != '4' AND [c19_workup_why] != 'OTH' AND [c19_workup_why] != 'U NK'		3	c19_workup_why_23	Screening prior to a systemic anti-cancer treatment
			4	c19_workup_why_24	Screening due to a high- risk situation (e.g., known exposure)
			5	c19_workup_why_25	Screening required for public health reasons (e.g., prior to nursing home placement)
			ОТН	c19_workup_why_2oth	Other
			UNK	c19_workup_why_2unk	Unknown
76	workup_oth_specify Show the field ONLY if: [c19_workup_why] = 'OTH'	Please specify what other reason for COVID-19 evaluation Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes		

77	symptoms	Which symptoms and/or signs were present upon initial	checkbox, Re	quired	
		presentation? Check all that apply.	367391008	symptoms367391008	Fatigue/Malaise
			386661006	symptoms386661006	Fever
			49727002	symptoms49727002	Cough
			248595008	symptoms248595008	Productive cough (with sputum)
			267036007	symptoms267036007	Dyspnea (SOB)
			68962001	symptoms68962001	Myalgias
			57676002	symptoms57676002	Arthralgias
			162397003	symptoms162397003	Sore throat
			25064002	symptoms25064002	Headache
		419284004	symptoms419284004	Altered mental status (AMS)	
			44169009	symptoms44169009	Loss of sense of smell (anosmia)
			36955009 64531003 422587007	symptoms36955009	Loss of taste (ageusia)
				symptoms64531003	Rhinorrhea
				symptoms422587007	Nausea
			272044004	symptoms272044004	Vomiting
			62315008	symptoms62315008	Diarrhea
			43364001	symptoms43364001	Abdominal discomfort (other than frank abdominal pain)
			21522001	symptoms21522001	Abdominal pain
			166643006	symptoms166643006	LFT abnormalities
			301095005	symptoms301095005	Cardiac involvement
			9826008	symptoms9826008	Conjunctivitis
			ОТН	symptomsoth	Other
			84387000	symptoms84387000	None (patient was asymptomatic)
			Field Annotat	ion: Terminology: SNOME)
78	symptoms_oth_specify Show the field ONLY if: [symptoms(OTH)] = '1'	Please specify other symptoms. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes		

79	symptoms_none_why	Was the patient tested as part of a pre-treatment or pre-procedure	radi	0
	Show the field ONLY if: [symptoms(84387000)] = '1'	screening program?	0	No Yes
	[5]ptss(c .555,555)]		99	Unknown
80	covid_19_diagnosis	COVID-19 diagnosis Note: if the patient ever had a positive laboratory	radi	o, Required
		result, please choose "laboratory-confirmed".	1	Suspected based on symptoms
			11	Suspected based on contact with confirmed case
			2	Suspected based on CXR findings
			3	Suspected based on CT scan findings
			4	Laboratory-confirmed
			99	Unknown
81	covid_19_dx_imaging	Please describe the imaging abnormalities. Do not record any PHI in	note	es
	Show the field ONLY if: [covid_19_diagnosis] = '2' or [covid_ 19_diagnosis] = '3'	this field. As a reminder, this includes all elements of dates other than year.		
82	neg_test	Did the patient have a negative laboratory test despite having	radi	o, Required
	Show the field ONLY if:	symptoms or signs supportive of the COVID-19 diagnosis?	1	Yes
	[covid_19_diagnosis] = '1' or [covid_ 19_diagnosis] = '11' or [covid_19_di		2	No
	agnosis] = '2' or [covid_19_diagnosi s] = '3' or [covid_19_diagnosis] = '9 9'		99	Unknown
83	covid_19_test_more	Please provide additional details, including the type of COVID-19 test.	note	25
	Show the field ONLY if: [neg_test] = '1' or [covid_19_diagno sis] = '4'	Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.		
84	additional_sx	Additional comments about COVID-19 symptoms and diagnosis. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	note	es .

85	severity_of_covid_19_v2	Section Header: Initial Severity and Course of Illness	radi	o, Required
		Initial severity of COVID-19 Note 1: this is probably the most important	1	Mild (no hospitalization required)
		single piece of information that we are gathering, please try not to answer "unknown" if at all possible. Note 2: if hospitalization or ICU	2	Moderate (hospitalization indicated)
		admission were indicated but the patient was not actually admitted,	3	Severe (ICU admission indicated)
		you should still select that box. For example, for a patient who arrives at the ED with critical hypoxia that would ordinarily indicate a need for	99	Unknown
		mechanical ventilation, but is transitioned to home hospice immediately, you should still select the severe checkbox. Note 3: if the patient is diagnosed while in the hospital and is asymptomatic (e.g., as screening prior to nursing home placement), answer this question as if they were presenting as an outpatient.		
86	cytokine_yn	Did the patient experience a cytokine storm or cytokine release	radi	
	Show the field ONLY if:	syndrome that was specifically documented in the patient's chart?	0	No
	[severity_of_covid_19_v2] = '2' or [s everity_of_covid_19_v2] = '3'		1	Yes
	,		99	Unknown
87	hosp_status	Was the patient ever hospitalized during their course of illness? If the patient was hospitalized more than once, please report on the index		o, Required
		hospitalization and make a note in the comments about the other	0	No
		hospitalization(s).	1	Yes - admitted to floor
			2	Yes - admitted to floor and then transferred to the ICU
			3	Yes - admitted directly to the ICU
			99	Unknown
88	hosp_los	If known, how long was the length of stay, in days? If the patient is still	text	(integer, Min: 1)
	Show the field ONLY if: [hosp_status] = '1'	hospitalized, enter 9999 here.		
89	hosp_los_2	If known, how long was the length of stay prior to transfer to the ICU,	text	(integer, Min: 1)
	Show the field ONLY if: [hosp_status] = '2'	in days?		
90	icu_los	If known, how long was the ICU length of stay, in days? If the patient is	text	(integer, Min: 1)
	Show the field ONLY if: [hosp_status] = '2' or [hosp_status] = '3'	still in the ICU, enter 9999 here.		

91	current_status	What is the patient's current location?	rac	dio, Requi	red	
	Show the field ONLY if:		1	Outpati	ent - new COVID-19 diagnosis	
	[timing_of_report] = '1'		2	Outpati	ent - follow up	
			3	ER - nev	v COVID-19 diagnosis	
			4	ER - Foll	ow up	
			5	Hospita	lized (non-ICU) - new admit	
			6	Hospita	lized (non-ICU) - continued	
			7	ICU - ne	w admit	
			8	ICU - co	ntinued	
			9	None - p	patient is deceased	
92	deceased_reason Show the field ONLY if: [current_status] = '9'	Please provide additional details about the proximal cause of death. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	no	tes, Requ	ired	
93	c19_complications_systemic	Section Header: Complications	ch	eckbox, R	equired	
		Systemic complications occurring during the COVID-19 illness. Check	50	0960005	c19_complications_systemic50960005	Bleeding
		all that apply. If there were no systemic complications, please check "None".	6	7406007	c19_complications_systemic67406007	Dissemir intravasc coagulati (DIC)
			5	7653000	c19_complications_systemic57653000	Multiorga failure
			9	1302008	c19_complications_systemic91302008	Sepsis
			2	38147009	c19_complications_systemic238147009	Other
			N	ONE	c19_complications_systemicnone	None
			U	NK	c19_complications_systemicunk	Unknowr
			Fie	eld Annota	ation: Terminology: SNOMED	

	94	c19_bleeding Show the field ONLY if: [c19_complications_systemic(5096 0005)] = '1'	Please specify the type of bleeding. Check all that apply.	checkbox				
				11264	18003	c19_bleeding112648003	Major bleeding (requiring multiple RBCs transfusions or ICU admit)	
				73099	9002	c19_bleeding73099002	Non-major but clinically relevant bleed	
				12756	53002	c19_bleeding127563002	Minor bleed (without transfusion need)	
				230690 Major		c19_bleeding230690007_major	CNS hemorrhage, extensive	
				230690 Minor		c19_bleeding230690007_minor	CNS hemorrhage, limited	
				ОТН		c19_bleedingoth	Other	
				UNK		c19_bleedingunk	Unknown	
				Field Annotation: Terminology: SNOMED-modified				
		c19_bleeding_oth_specify	Please specify further details about bleeding. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes				
		Show the field ONLY if: [c19_bleeding(OTH)] = '1'						
		dic_certainty Show the field ONLY if: [c19_complications_systemic(6740 6007)] = '1'	How definite was the DIC diagnosis?	radio	radio			
				l	DefiniteSuspected			
					nknown			

97	dic_treatment	Which of the following were used to treat the DIC?	radio		
	Show the field ONLY if:		346447007	Plasma (FFP)	
	[c19_complications_systemic(6740		256401009	Cryoprecipitate	
	6007)] = '1'		NONE	None	
			UNK	Unknown	
			OTH	Other	
			Field Annota	tion: Terminology:	SNOMED
98	dic_more	Please provide further details about DIC, including clinical	notes		
	Show the field ONLY if: [c19_complications_systemic(6740 6007)] = '1'	manifestations. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.			
99	c19_comp_systemic_specify	Please specify other systemic complications. Do not record any PHI in	notes		
	Show the field ONLY if: [c19_complications_systemic(2381 47009)] = '1'	this field. As a reminder, this includes all elements of dates other than year.			
100	o2_requirement_c19	Did the patient require supplemental O2 during the course of illness?	radio, Requir	ed	
			0 No		
			1 Yes		
			99 Unknov	vn	
101	o2_policy	Was there an institutional policy in place to refuse intubation for	radio		
	Show the field ONLY if:	patients with metastatic cancer, at the time when this patient required supplemental O2?	0 No		
	[o2_requirement_c19] = '1'	Sapplemental of	1 Yes		
			99 Unknov	vn	

102	c19_complications_pulm	Pulmonary complications occurring during the COVID-19 illness.	checkl	box, Re	quired		
		Check all that apply. If there were no pulmonary complications, please check "None".	4096	22000	c19_complications_pulm_	_409622000	Respiratory failure
			2052	37003	c19_complications_pulm_	_205237003	Pneumonit
			6778	2005	c19_complications_pulm_	_67782005	ARDS
			5928	2003	c19_complications_pulm_	_59282003	Pulmonary embolism (PE)
			6004	8008	c19_complications_pulm_	_60046008	Pleural effusion
			3126	82007	c19_complications_pulm_	_312682007	Empyema
			5004	3002	c19_complications_pulm_	_50043002	Other
			NON	E	c19_complications_pulm_	_none	None
			UNK		c19_complications_pulm_	_unk	Unknown
			Field A	Annotat	ion: Terminology: SNOMED)	
103	resp_failure_tx	Which of the following supplemental O2 interventions did the patient	radio				
	Show the field ONLY if: [c19_complications_pulm(4096220 00)] = '1' or [o2_requirement_c19] =	require? Select the most invasive intervention required during the course of illness.	-		nnula with standard O2		
			2 F	High-flo	w nasal cannula		
	'1'		-		preather		
			 	CPAP			
				BiPAP			
			-	ntubati			
			99 L	Jnknow	vn		
104	berlin_yn	Were the Berlin criteria formally assessed?		Require	ed		
	Show the field ONLY if: [c19_complications_pulm(6778200		 	No .			
	5)] = '1'		 	/es			
					n/Unsure		
105	berlin_2	Berlin criteria. The Berlin criteria are based on a decreased PaO2/FiO2 ratio:-mild ARDS: 201 - 300 mmHg (≤ 39.9 kPa)-moderate ARDS: 101 -		Require Mild	ed		
	Show the field ONLY if: [berlin_yn] = '1'	200 mmHg (≤ 26.6 kPa)-severe ARDS: ≤ 100 mmHg (≤ 13.3 kPa)Note	-				
	[cermi_yn]	that the Berlin definition requires a minimum positive end expiratory pressure (PEEP) of 5 cmH2O for consideration of the PaO2/FiO2 ratio.	-	Modera	te		
		This degree of PEEP may be delivered noninvasively with CPAP to	-	Severe Jnknow	<u></u>		
		diagnose mild ARDS. Click this link to access a calculator for PaO2/FiO2 ratio (opens a new window)	23	JIKIIUW	<u>''11</u>		

106	c19_comp_pulm_specify	Please specify other pulmonary complications. Do not record any PHI	notes			
	Show the field ONLY if: [c19_complications_pulm(5004300 2)] = '1'	in this field. As a reminder, this includes all elements of dates other than year.				
107	c19_complications_card	Cardiovascular complications occurring during the COVID-19 illness.	checkbox, Required			
		Check all that apply. If there were no cardiovascular complications,	45007003	c19_complications_card45007003	Hypotension	
		please check "None".	22298006	c19_complications_card22298006	Myocardial infarction	
			414545008	c19_complications_card414545008	Other card ac	
			49436004	c19_complications_card49436004	Atrial fibrillat	
			71908006	c19_complications_card71908006	Ventricular fibrillation	
			698247007	c19_complications_card698247007	Other card ac	
			85898001	c19_complications_card85898001	Cardiomyopa	
			42343007	c19_complications_card42343007	Congestive heart failure (CHF)	
			59282003	c19_complications_card59282003	Pulmonary embolism (Pl	
			128053003	c19_complications_card128053003	Deep venous thrombosis (DVT)	
			275517008	c19_complications_card275517008	Superficial venous thrombosis (SVT)	
			230690007	c19_complications_card230690007	Cerebrovasci accident (CVA stroke)	
			414086009	c19_complications_card414086009	Thrombosis, NOS	
			49601007	c19_complications_card49601007	Other	
			NONE	c19_complications_cardnone	None	
			UNK	c19_complications_cardunk	Unknown	
		Field Annota	tion: Terminology: SNOMED			

 COVID 19 and Cancer Consortium (CCC19) Registry (REDCap					
108	sepsis_pressors Show the field ONLY if:	Did the patient require pressors?	radio 0 No		
	[c19_complications_card(4500700 3)] = '1'		1 Yes 99 Unkr	nown	
109	c19_comp_card_specify Show the field ONLY if: [c19_complications_card(4960100 7)] = '1' or [c19_complications_card (414545008)] = '1' or [c19_complications_card(698247007)] = '1'	Please specify other cardiac complications. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes		
110	c19_complications_gi	Gastrointestinal complications occurring during the COVID-19 illness.	checkbox,	Required	
		Check all that apply. If there were no GI complications, please check "None".	42704400	c19_complications_gi427044009	Acute hepatic injury
			38902600	00 c19_complications_gi389026000	Ascites
			81060008	c19_complications_gi81060008	Bowel obstruction
			56905009	c19_complications_gi56905009	Bowel perforation
			71057200	00 c19_complications_gi710572000	Ileus
			48661000	c19_complications_gi48661000	Peritonitis
			53619000	c19_complications_gi53619000	Other
			NONE	c19_complications_ginone	None
			UNK	c19_complications_giunk	Unknown
			Field Anno	otation: Terminology: SNOMED	
111	c19_comp_gi_specify Show the field ONLY if: [c19_complications_gi(53619000)] = '1'	Please specify other GI complications. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes		

112	c19_complications_other	Other complications occurring during the COVID-19 illness. Check all	check	box, Re	auired		
112	ens_comprications_coner	that apply. If there were no other complications, please check "None".	1466		c19_complications_othe	r14669001	Acute kidney injury
			9117	'5000	c19_complications_othe	r91175000	Seizures
			3720	70002	c19_complications_othe	er372070002	Gangrene
			4140	86009	c19_complications_othe	er414086009	Thrombos NOS
			3629	65005	c19_complications_othe	er362965005	Other
			NON	IE	c19_complications_othe	rnone	None
			UNK		c19_complications_othe	runk	Unknown
				Annotat 86009'	ion: Terminology: SNOM	ED @HIDECHOK	CE =
113	c19_complications_oth_specify	Please specify other complications. Do not record any PHI in this field.	notes				
	Show the field ONLY if: [c19_complications_other(3629650 05)] = '1'	As a reminder, this includes all elements of dates other than year.					
114	current_status_v2	Section Header: Clinical Status	radio,	Require	ed		
	Show the field ONLY if:	Current COVID-19 status Fully recovered means that the patient has returned to their baseline functional status and repeat SARS-CoV-2	1 F	Fully red	covered		
	[current_status] = '1' or [current_st atus] = '2' or [current_status] = '3' o	testing, if obtained, is negative. If they are on medications to treat	1b F	Recover	red with complications		
	r [current_status] = '4' or [current_s	sequelae or have functional compromise (e.g., impaired pulmonary function) but are not considered to have active infection, they should	l 	Ongoin	g infection		
	tatus] = '5' or [current_status] = '6' or [current_status] = '7' or [current_ status] = '8'	be considered to have recovered with complications.	3 [Died			
115	current_status_retro	Final COVID-19 status Fully recovered means that the patient has	radio,	Require	ed		
	Show the field ONLY if:	returned to their baseline functional status and repeat SARS-CoV-2 testing, if obtained, is negative. If they are on medications to treat	1 F	Fully red	covered		
	[timing_of_report] = '2'	sequelae or have functional compromise (e.g., impaired pulmonary	1b F	Recover	red with complications		
		function) but are not considered to have active infection, they should be considered to have recovered with complications.	3 [Died			
		be considered to have recovered with complications.	99 l	Unknow	<i>y</i> n		
116	deceased_reason_retro	Please provide additional details about the proximal cause of death.	notes,	, Requir	ed		
	Show the field ONLY if: [current_status_retro] = '3'	Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.					
117	days_to_death	Approximately how many days elapsed between COVID-19 diagnosis	text (ii	nteger,	Min: 0), Required		
	Show the field ONLY if: [current_status_retro] = '3'	and death? If this information is unknown to you, please enter 9999 here.					

118	current_status_clinical	Current clinical status	radio,	Required
	Show the field ONLY if:		1	Outpatient - Mild symptoms
	[current_status_v2] = '2'		2	Outpatient - Moderate symptoms
			3	Outpatient - Severe symptoms
			4	Inpatient - Near Recovery
			5	Inpatient - Moderately ill
			6	Inpatient - Severely ill
			7	Critical (ICU) - Severely ill, not requiring ventilator support
			8	Critical (ICU) - Severely ill, intubated
			ОТН	Other
			99	Unknown
119	current_status_clinical_specify Show the field ONLY if: [current_status_clinical] = 'OTH'	Please specify other current clinical status Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes,	Required
120	worst_status_clinical	Worst clinical status. Report the worst clinical presentation during the	radio,	Required
	Show the field ONLY if:	COVID-19 illness or the current clinical status if this is the only known status. If the patient died, this should be the highest level of care that	1	Outpatient - Mild symptoms
	[timing_of_report] = '2'	they received prior to the time of death.	2	Outpatient - Moderate symptoms
			3	Outpatient - Severe symptoms
			5	Inpatient - Moderately ill
			6	Inpatient - Severely ill
			7	Critical (ICU) - Severely ill, did not require ventilator support
			8	Critical (ICU) - Severely ill, intubated
			OTH	Other
			99	Unknown
121	worst_status_clinical_specify	Please specify worst clinical status Do not record any PHI in this field.	notes,	Required
	Show the field ONLY if: [worst_status_clinical] = 'OTH'	As a reminder, this includes all elements of dates other than year.		

122	complications_severity	Current severity of COVID-19 complications. Check all that apply.	checkb	checkbox, Required	
	Show the field ONLY if: [current_status_v2] = '1b' or [current_status_v2] = '2' or [current_statu		1	complications_severity1	Mild complications (mimimal symptoms from complications)
	s_retro] = '1b'	2	complications_severity2	Moderate complications (moderate symptoms from complications)	
			3	complications_severity3	Serious complications (symptoms substantially impact the patient's functional status or disabling physical functioning)
			ОТН	complications_severityoth	Other
			99	complications_severity99	Unknown
123	complications_severity_oth_specify Show the field ONLY if: [complications_severity(OTH)] = '1'	Please specify other current severity of COVID-19 complications Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes,	Required	

124	worst_complications_severity	Worst severity of COVID-19 complications. Check all that apply.	check	box, Required	
	Show the field ONLY if: [timing_of_report] = '2' and [curren t_status_retro] != '3'		0	worst_complications_severity0	None (patient was asymptomatic)
			1	worst_complications_severity1	Mild complications (mimimal symptoms from complications)
			2	worst_complications_severity2	Moderate complications (moderate symptoms from complications)
			3	worst_complications_severity3	Serious complications (symptoms substantially impact the patient's functional status or disabling physical functioning)
			OTH	worst_complications_severityoth	Other
			99	worst_complications_severity99	Unknown
125	worst_complications_severity_speci fy Show the field ONLY if: [worst_complications_severity(OT H)] = '1'	Please specify other worst severity of COVID-19 complications Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes,	Required	
126	consider_returning Show the field ONLY if: [current_status_v2] = '2'	Please consider returning to add a new form once final status has been determined. In order to do this, click on the button named "Survey Queue" in the top right-hand corner of the screen. This will open a window where you can choose "Get link to my survey queue". Use this link to return to the survey at any time to add additional updated information.	descri	ptive	
127	covid_19_more Show the field ONLY if: [ccc19] = '0'	Section Header: COVID-19 Details - Optional Would you like to answer additional COVID-19 detail questions? This is optional but will really help us understand the granular details better.	yesno 1 Ye 0 Ne	es	

128	mortality	If it has been at least 30 days from the presumptive or laboratory-	radio	
0	Show the field ONLY if:	proven COVID-19 diagnosis, was the patient alive 30 days after		Yes
	([covid_19_more] = '1' or [ccc19] =	diagnosis?Note: this question is required for members of the CCC19 consortium; optional but strongly encouraged for all others.	0	No
	'1') and [covid_19_dx_interval] != '1' and [covid_19_dx_interval] != '2' an d [covid_19_dx_interval] != '3'	consortium, optional but strongly encouraged for all others.		N/A - it has been fewer than 30 days since COVID-19 diagnosis
			99	Unknown
129	labs	Section Header: Baseline laboratory values at the time of or closest to the date of the	radio	
	Show the field ONLY if:	COVID-19 diagnosis If the laboratory value (e.g., IL-6 level) was not available at the time of presentation, please enter the earliest known result, if known.	1	At the time of initial COVID-19 diagnosis
	[covid_19_more] = '1' or [ccc19] = '1'	At what time point were labs drawn? This information is important to build predictive models of disease severity based on lab values. Your	2a	At the time of a change in clinical status (hospitalization)
		answer should be based on common labs (CBC, CMP, BNP, etc.) - not necessarily send-out labs that were drawn later in the course of COVID-19 illness.	2b	At the time of a change in clinical status (other than hospitalization)
		COVID 15 miless.	3	Labs were not drawn or are not available for review
			ОТН	Other
			UNK	Unknown
130	labs_oth_specify	Please specify what other time point labs were drawn Do not record	notes	s, Required
	Show the field ONLY if: [labs] = 'OTH'	any PHI in this field. As a reminder, this includes all elements of dates other than year.		
131	wbc_range	Section Header: CBC values at presentation	radio	(Matrix)
	Show the field ONLY if:	Total WBC count	LO	Low
	([covid_19_more] = '1' or [ccc19] = '1') and [labs] != '3'		WNI	Normal
	i) and [labs] :- 3		НІ	High
			NT	Not tested
			99	Unknown
132	alc_range	Absolute lymphocyte count (ALC) - less than 1500/uL should be	radio	(Matrix)
	Show the field ONLY if:	considered low	LO	Low
	([covid_19_more] = '1' or [ccc19] =		WNI	Normal
	'1') and [labs] != '3'		НІ	High
			NT	Not tested
			99	Unknown
			Field	Annotation: less than 1500/uL should be considered low

133	anc_range	Absolute neutrophil count (ANC)	radio (Matrix)
	Show the field ONLY if:		LO Low
	([covid_19_more] = '1' or [ccc19] =		WNL Normal
	'1') and [labs] != '3'		HI High
			NT Not tested
			99 Unknown
			Field Annotation: less than 1000/uL should be considered low
134		Absolute eosinophil count (AEC)	radio (Matrix) LO Low
	Show the field ONLY if: ([covid_19_more] = '1' or [ccc19] =		
	'1') and [labs] != '3'		WNL Normal
			HI High
			NT Not tested
			99 Unknown
135		Hemoglobin	radio (Matrix)
	Show the field ONLY if: ([covid_19_more] = '1' or [ccc19] =		LO Low
	'1') and [labs] != '3'		WNL Normal
			HI High
			NT Not tested
			99 Unknown
136	plt_range	Platelets	radio (Matrix)
	Show the field ONLY if:		LO Low
	([covid_19_more] = '1' or [ccc19] = '1') and [labs]!= '3'		WNL Normal
	,		HI High
			NT Not tested
			99 Unknown
137	wbc_numeric	Total WBC count in 10^9/L	text (number, Min: 0, Max: 1000)
	Show the field ONLY if: [wbc_range] = 'LO' or [wbc_range] = 'HI'		
138	alc	Absolute lymphocyte count per uL	text (number, Min: 0)
	Show the field ONLY if: [alc_range] = 'LO' or [alc_range] = 'HI'		

139	anc	Absolute neutrophil count per uL	text (number, Min: 0)
	Show the field ONLY if: [anc_range] = 'LO' or [anc_range] = 'HI'		
140	aec Show the field ONLY if: [aec_range] = 'LO' or [aec_range] = 'HI'	Absolute eosinophil count per uL	text (number, Min: 0)
141	hgb Show the field ONLY if: [hgb_range] = 'LO' or [hgb_range] = 'HI'	Hemoglobin level in g/dL	text (number, Min: 0)
142	plt Show the field ONLY if: [plt_range] = 'LO' or [plt_range] = 'H I'	Platelet count, 10^3/uL	text (number, Min: 0)
143	creat Show the field ONLY if: ([covid_19_more] = '1' or [ccc19] = '1') and [labs] != '3'	Section Header: Other lab values at presentation Creatinine	radio (Matrix) 0 Normal 1 Abnormal NT Not tested 99 Unknown Field Annotation: SNOMED: 1032061000000108
144	tbili Show the field ONLY if: ([covid_19_more] = '1' or [ccc19] = '1') and [labs] != '3'	Total bilirubin	radio (Matrix) 0 Normal 1 Abnormal NT Not tested 99 Unknown
145	ast Show the field ONLY if: ([covid_19_more] = '1' or [ccc19] = '1') and [labs] != '3'	AST	radio (Matrix) 0 Normal 1 Abnormal NT Not tested 99 Unknown

		-	
14	l6 alt	ALT	radio (Matrix)
	Show the field ONLY if:		0 Normal
	([covid_19_more] = '1' or [ccc19] =		1 Abnormal
	'1') and [labs] != '3'		NT Not tested
			99 Unknown
14	17 pt	PT	radio (Matrix)
	Show the field ONLY if:		0 Normal
	([covid_19_more] = '1' or [ccc19] =		1 Abnormal
	'1') and [labs] != '3'		NT Not tested
			99 Unknown
14		aPTT	radio (Matrix) 0 Normal
	Show the field ONLY if: ([covid_19_more] = '1' or [ccc19] =		
	'1') and [labs] != '3'		1 Abnormal
			NT Not tested
			99 Unknown
14	fibrinogen	Fibrinogen	radio (Matrix)
	Show the field ONLY if:		0 Normal
	([covid_19_more] = '1' or [ccc19] = '1') and [labs]!= '3'		1 Abnormal
	i janu liausj :- 3		NT Not tested
			99 Unknown
			FILLA AND CHOMED 74626222
			Field Annotation: SNOMED: 71636003
1:		D-Dimer	radio (Matrix) 0 Normal
	Show the field ONLY if: ([covid_19_more] = '1' or [ccc19] =		
	'1') and [labs] != '3'		1 Abnormal
			NT Not tested
			99 Unknown
			Field Annotation: SNOMED: 1019221000000107

1	51 ldh	LDH	radio (Matrix)
	Show the field ONLY if:		0 Normal
	([covid_19_more] = '1' or [ccc19] =		1 Abnormal
	'1') and [labs] != '3'		NT Not tested
			99 Unknown
			Field Annotation: SNOMED: 250644007
1	52 tni	Troponin I (TnI)	radio (Matrix)
	Show the field ONLY if:		0 Normal
	([covid_19_more] = '1' or [ccc19] = '1') and [labs] != '3'		1 Abnormal
	. , aa [.a.əə].		NT Not tested
			99 Unknown
1	53 hs_trop	High-sensitivity troponin	radio (Matrix)
	Show the field ONLY if:		0 Normal
	([covid_19_more] = '1' or [ccc19] =		1 Abnormal
	'1') and [labs] != '3'		NT Not tested
			99 Unknown
1	54 bnp	BNP	radio (Matrix)
	Show the field ONLY if:		0 Normal
	([covid_19_more] = '1' or [ccc19] =		1 Abnormal
	'1') and [labs] != '3'		NT Not tested
			99 Unknown
1	55 crp	CRP	radio (Matrix)
	·	CIVI	0 Normal
	Show the field ONLY if: ([covid_19_more] = '1' or [ccc19] =		1 Abnormal
	'1') and [labs] != '3'		NT Not tested
			99 Unknown
	56 il6	IL-6	radio (Matrix)
	Show the field ONLY if:		0 Normal
	([covid_19_more] = '1' or [ccc19] = '1') and [labs]!= '3'		1 Abnormal
			NT Not tested
			99 Unknown

157	other_lab	Other (free text will open for more details below)	radio (Matrix)
	Show the field ONLY if:	Care (i. 22 test min open for more details below)	0 Normal
	([covid_19_more] = '1' or [ccc19] =		1 Abnormal
	'1') and [labs] != '3'		NT Not tested
			99 Unknown
			<u> </u>
158	creat_numeric	Please provide measured creatinine level in mg/dL	text (number, Min: 0)
	Show the field ONLY if: [creat] = '1'		
159	tbili_numeric	Please provide measured total bilirubin value in mg/dL	text
	Show the field ONLY if: [tbili] = '1'		
160	ast_numeric	Please provide measured AST/SGOT value in units/L	text (number, Min: 32)
	Show the field ONLY if: [ast] = '1'		
161	alt_numeric	Please provide measured ALT/SGPT value in units/L	text (number, Min: 32)
	Show the field ONLY if: [alt] = '1'		
162	pt_numeric	Please report measured PT value in seconds. If above the maximum	text (number)
	Show the field ONLY if: [pt] = '1'	range, enter "999".	
163	aptt_numeric	Please report measured aPTT value in seconds. If above the maximum	text (number, Min: 0)
	Show the field ONLY if: [aptt] = '1'	range, enter "999".	
164	fibrinogen_numeric	Please report measured fibrinogen value in mg/dL (conventional	text
	Show the field ONLY if: [fibrinogen] = '1'	units).	
165	ddimer_numeric	Please report measured D-Dimer value along with units, which often	text
	Show the field ONLY if: [ddimer] = '1'	differ between labs.	
166	ldh_numeric	Please report measured LDH value along with units, which often differ	text
	Show the field ONLY if: [ldh] = '1'	between labs.	
167	tni_numeric	Please report measured Tnl value in ng/mL. Only record values	text (number, Min: 0)
	Show the field ONLY if: [tni] = '1'	greater than or equal to 0.05 ng/mL.	

,, 2020		covid 15 and cancer consortium (coccis) registry (1	EB cup		
168	hs_trop_numeric Show the field ONLY if: [hs_trop] = '1'	Please report measured high sensitivity troponin value in pg/mL.	text (number, Min: 0.05)		
169	bnp_numeric Show the field ONLY if: [bnp] = '1'	Please report measured BNP value in pg/mL.	text (number, Min: 0)		
170	crp_numeric Show the field ONLY if: [crp] = '1'	Please provide measured CRP value along with units, which often differ between labs.	text		
171	il6_numeric Show the field ONLY if: [il6] = '1'	Please report measured IL-6 value in pg/mL	text (number, Min: 1.8)		
172	other_lab_more Show the field ONLY if: [other_lab] = '1'	Please provide more details including numeric values, if you are able. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes		
173	coinfection_yn Show the field ONLY if: [covid_19_more] = '1' or [ccc19] = '1'	Section Header: <i>Co-infections</i> Was another co-infection suspected within two weeks prior or up to two weeks after the COVID-19 diagnosis?	radio 0 No 1 Yes 99 Unknown		

174	coinfection	Were there other co-infections diagnosed? Check all that apply.	checkbox			
	Show the field ONLY if:	Terminology: SNOMED	49872002	coinfection49872002	Viral, NOS	
	[coinfection_yn] = '1'		407479009	coinfection407479009	Influenza A	
			407480007	coinfection407480007	Influenza B	
			84101006	coinfection84101006	Ordinary coronavirus, N	OS
			1838001	coinfection1838001	Rhinovirus	
			6415009	coinfection6415009	RSV	
			409822003	coinfection409822003	Bacterial infection	tion,
			8745002	coinfection8745002	Gram-positive bacteria, NOS	
			233607000	coinfection233607000	Pneumococcal pneumonia	
			81325006	coinfection81325006	Gram-negative bacteria, NOS	2
			414561005	coinfection414561005	Fungal, NOS	
			2429008	coinfection2429008	Aspergillus cul confirmed	ture-
			709601002	coinfection709601002	Aspergillus suspected (galactomanna positive)	an
			442376007	coinfection442376007	Tests are pend	ling
		ОТН	coinfectionoth	Other		
			UNK	coinfectionunk	Unknown	
			NONE	coinfectionnone	None	
			Field Annota	tion: Terminology: SNOME)	
175	coinfection_other Show the field ONLY if: [coinfection(OTH)] = '1'	Please specify what other co-infections were diagnosed Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes			
176	covid_19_treatment	Section Header: COVID-19 Treatment	checkbox			
	Show the field ONLY if:	COVID-19 treatment, including pre-existing drugs that were continued	RXCUI-2393	covid_19_treatment	_rxcui_2393	Chloroq
	[covid_19_more] = '1' or [ccc19] =	during the COVID-19 diagnosis. Check all that apply.	RXCUI-5521	covid_19_treatment	_rxcui_5521	Hydroxy (Plaquer

HO-44995 ATC-J05AE08 ATC-J05AR10 RXCUI-260101	covid_19_treatmentho_44995 covid_19_treatmentatc_j05ae0 covid_19_treatmentatc_j05ar1	Anti-virals
ATC-J05AR10	-)8 Atazanavi
	covid 10 treatment atc i05ar1	
RXCUI-260101	COVID_19_treatmentatc_jobarr	0 Lopinavir.
	covid_19_treatmentrxcui_260^	Oseltamiv (Tamiflu)
OMOP4873974	covid_19_treatmentomop4873	3974 Remdesiv
RXCUI-18631	covid_19_treatmentrxcui_1863	Azithromy (Zithroma
HO-45523	covid_19_treatmentho_45523	Systemic corticoste prompt for additional
ATC-C10AA	covid_19_treatmentatc_c10aa	Statins
L04AA37	covid_19_treatmentl04aa37	Baricitinik
RXCUI-612865	covid_19_treatmentrxcui_6128	365 Tocilizum
ATC-L04AC	covid_19_treatmentatc_l04ac	Other inte inhibitors prompt for additiona
HO-45861	covid_19_treatmentho_45861	JAK inhibi prompt fo additiona
ATC-L04AB	covid_19_treatmentatc_l04ab	TNF alpha (will prom additiona
B05AX03	covid_19_treatmentb05ax03	Plasma fr recoverec individual (convales plasma)
B01A	covid_19_treatmentb01a	Anticoagu
N02BA	covid_19_treatmentn02ba	Aspirin
B01AC	covid_19_treatmentb01ac	Antiplatel other tha
233573008	covid_19_treatment23357300	8 Extracorp membrar oxygenati

1201202	_		COVID-19 and Cancer Consortium (CCC19) Registry Fr	CLD Cup	•			
				7147	749008	covid_19_treatmen	t714749008	Continuo replacen therapy
				ОТН		covid_19_treatmen	toth	Other
				UNK	,	covid_19_treatmen	tunk	Unknow
				NON	1E	covid_19_treatmen	tnone	None
				oth_	plasma	covid_19_treatmen	toth_plasma	DEPREC
				ATC/H	HemOnc	ion: Terminologies: /OMOP/RxNorm/SNOM E='oth_plasma'	ED	
	177	c19_aspirin_dose	Aspirin dosing	radio	1			
		Show the field ONLY if:		2624	159003	Low dose (less than 200	0 mg/day)	
		[covid_19_treatment(N02BA)] = '1'		2618	329003	Full dose		
				2616	65006	Unknown		
				Field Annotation:		ion: Terminology: SNON	ИED	
	178	steroid_type	Steroid type. Check all that apply.	check	box		Т	
		Show the field ONLY if: [covid_19_treatment(HO-45523)] =		H02/	AB02 st	teroid_typeh02ab02	Dexamethasone (Decadron)	2
		<u>'1'</u>		H02	AB09 st	teroid_typeh02ab09	Hydrocortisone	(Cortef)
				H02	AB04 st	teroid_typeh02ab04	Methylpredniso (Solumedrol)	lone
				H02	AB06 st	ceroid_typeh02ab06	Prednisolone	
				H02	AB07 st	ceroid_typeh02ab07	Prednisone	
				Field Annotation: Terminology: ATC				
	179	steroid_specific	Steroid dosing, in prednisone dose equivalents Note: 3 mg of dexamethasone is equivalent to 20 mg of prednisone, so any dose of	radio				,
		Show the field ONLY if:	dexamethasone of more than 3 mg/day (21 mg/week) would be	1		ay or below [low dose]		
		[covid_19_treatment(HO-45523)] = '1'	equivalant to more than 20 mg of prednisone/day.	I 		ay or below [low dose]		
				l 		an 10 mg/day up to 20 r		
				 		an 20 mg/day but less t		
				3	Equal to	or greater than 1 mg/k	g/day	
				99	Unknow	'n]
				Field /	Annotati	ion: @HIDECHOICE='1'		

180	steroid_more	Please provide more details: prednisone dose equivalents (e.g., 1	notes
	Show the field ONLY if: [covid_19_treatment(HO-45523)] = '1'	mg/kg) and duration of steroid therapy. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	
181	covid_19_tx_interleukin	Interleukin inhibitor treatment other than tocilizumab. Check all that	checkbox
	Show the field ONLY if:	apply.	L04AC03 covid_19_tx_interleukinl04ac03 anakinra
	[covid_19_treatment(ATC-L04AC)] = '1'		L04AC02 covid_19_tx_interleukinl04ac02 basiliximab
	T		L04AC09 covid_19_tx_interleukinl04ac09 briakinumab
			L04AC12 covid_19_tx_interleukinl04ac12 brodalumab
			L04AC08 covid_19_tx_interleukinl04ac08 canakinumal
			L04AC01 covid_19_tx_interleukinl04ac01 daclizumab
			L04AC16 covid_19_tx_interleukinl04ac16 guselkumab
			L04AC13 covid_19_tx_interleukinl04ac13 ixekizumab
			L04AC04 covid_19_tx_interleukinl04ac04 rilonacept
			L04AC18 covid_19_tx_interleukinl04ac18 risankizumal
			L04AC14 covid_19_tx_interleukinl04ac14 sarilumab
			L04AC10 covid_19_tx_interleukinl04ac10 secukinumal
			L04AC11 covid_19_tx_interleukinl04ac11 siltuximab
			L04AC15 covid_19_tx_interleukinl04ac15 sirukumab
			L04AC07 covid_19_tx_interleukinl04ac07 DEPRECATED
			L04AC17 covid_19_tx_interleukinl04ac17 tildrakizumal
			L04AC05 covid_19_tx_interleukinl04ac05 ustekinumab
			Field Annotation: Field:ATC L04AC; Values:ATC @HIDECHOICE='L04AC07'

182	jak	JAK inhibitor treatment. Check all that apply.	checkbox		
	Show the field ONLY if:		L01XE18	jakl01xe18	Ruxolitinib (Jakafi)
	[covid_19_treatment(HO-45861)] =		L04AA29	jakl04aa29	Tofacitinib (Xeljanz)
			RXCUI-1487006	jakrxcui_1487006	Oclacitinib
			L04AA37	jakl04aa37	Baricitinib
			Peficitinib	jakpeficitinib	Peficitinib
			L01XE57	jakl01xe57	Fedratinib (Inrebic)
			L04AA44	jakl04aa44	Upadacitinib
			Field Annotation	n: Terminologies: ATC, R	xNorm
183	covid_19_tx_tnf	Tumor necrosis factor alpha (TNF- $lpha$) inhibitor treatment. Check all that	checkbox		
	Show the field ONLY if:	apply.	L04AB04 covi	d_19_tx_tnfl04ab04	Adalimumab
	[covid_19_treatment(ATC-L04AB)] =	d_19_treatment(ATC-L04AB)] =	L04AB03 covi	d_19_tx_tnfl04ab03	Afelimomab
			L04AB05 covi	d_19_tx_tnfl04ab05	Certolizumab pegol
			L04AB01 covi	d_19_tx_tnfl04ab01	Etanercept
			L04AB06 covi	d_19_tx_tnfl04ab06	Golimumab
			L04AB02 covi	d_19_tx_tnfl04ab02	Infliximab
			L04AB07 covi	d_19_tx_tnfl04ab07	Opinercept
			Field Annotation	n: Field:ATC L04AB; Value	es:ATC

184	c19_anticoag_reason	Has the patient received any dose or type of anticoagulants at any	checkbo)X	
	Show the field ONLY if: [covid_19_more] = '1' or [ccc19] = '1'	time during the COVID-19 diagnosis? Check all that apply. (Examples: unfractionated heparin, LMWH, fondaparinux, direct thrombin inhibitor, Vitamin K antagonist, or DOAC) ATE: arterial thromboembolism; VTE: venous thromboembolism	1	c19_anticoag_reason1	Prophylactic use (without the presence of a VTE either as an inpatient or outpatient)
			2	c19_anticoag_reason2	DEPRECATED
			2a	c19_anticoag_reason2a	Therapeutic use (for known VTE diagnosis)
			2b	c19_anticoag_reason2b	Therapeutic use (for known ATE diagnosis)
			2c	c19_anticoag_reason2c	Therapeutic use in the absence of any thrombosis (e.g., for prevention of stroke in atrial fibrillation)
			3	c19_anticoag_reason3	For DIC during hospitalization
			NONE	c19_anticoag_reasonnone	None (patient did not receive any anticoagulants)
			UNK	c19_anticoag_reasonunk	Unknown
			ОТН	c19_anticoag_reasonoth	Other
			Field An	notation: @HIDECHOICE='2'	
185	c19_anticoag_reason_oth_specify Show the field ONLY if: [c19_anticoag_reason(OTH)] = '1'	Please specify the type and indication of other anticoagulants Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes		

186	c19_anticoag_type	Which anticoagulants were used? Check all that apply.	checkbox		
	Show the field ONLY if: [c19_anticoag_reason(1)] = '1' or [c 19_anticoag_reason(2a)] = '1' or [c1		B01AA	c19_anticoag_typeb01aa	Vitamin K antagonists (e.g., warfarin)
	9_anticoag_reason(2b)] = '1' or [c19 _anticoag_reason(2c)] = '1' or [c19_ anticoag_reason(3)] = '1' or [c19_an ticoag_reason(OTH)] = '1'		B01AB	c19_anticoag_typeb01ab	Low-molecular weight heparin (e.g., enoxaparin [Lovenox])
		B01AB01	c19_anticoag_typeb01ab01	Unfractionated heparin	
			B01AE	c19_anticoag_typeb01ae	Direct thrombin inhibitors (e.g., argatroban, dabigatran [Pradaxa])
			B01AF	c19_anticoag_typeb01af	Direct factor Xa inhibitors (e.g., apixaban [Eliquis], rivaroxaban [Xarelto])
			B01AX05	c19_anticoag_typeb01ax05	Fondaparinux
			UNK	c19_anticoag_typeunk	Unknown
			ОТН	c19_anticoag_typeoth	Other
			Field Anno	tation: Terminology: ATC	
187	c19_anticoag_type_oth_specify Show the field ONLY if: [c19_anticoag_type(OTH)] = '1'	Please specify what other anticoagulants Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes		

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	188	covid_19_treatment_trial	Was any of the COVID-19 treatment given as part of a clinical trial?	radio			
		Show the field ONLY if:		0 No			
		[covid_19_treatment(HO-44995)] =		1 Yes			
		'1' or [covid_19_treatment(RXCUI-1 8631)] = '1' or [covid_19_treatment		99 Unknown			
		(RXCUI-2393)] = '1' or [covid_19_tre					
		atment(HO-45523)] = '1' or [covid_1					
		9_treatment(RXCUI-5521)] = '1' or [covid_19_treatment(ATC-J05AR10)]					
		= '1' or [covid_19_treatment(RXCUI-					
		260101)] = '1' or [covid_19_treatme					
		nt(OMOP4873974)] = '1' or [covid_1 9_treatment(ATC-C10AA)] = '1' or [c					
		ovid_19_treatment(RXCUI-612865)]					
		= '1' or [covid_19_treatment(ATC-L0					
		4AC)] = '1' or [covid_19_treatment(A TC-L04AB)] = '1' or [covid_19_treat					
		ment(B05AX03)] = '1' or [covid_19_treat					
		reatment(OTH)] = '1'					
	189	covid_19_trial_tx	COVID-19 clinical trial treatment. Check all that apply. If you do not	checkbox, Requir	ed		_
		Show the field ONLY if:	know which drug(s) were given on clinical trial, please check "Unknown". If you are not able to disclose drug names due to	RXCUI-2393	covid_19_trial_txrxcui_2393	Chloroquin	e
		[covid_19_treatment_trial] = '1'	institutional restrictions, please check "Other".	RXCUI-5521	covid_19_trial_txrxcui_5521	Hydroxych	ΟI
						(Plaquenil)	_
				HO-44995	covid_19_trial_txho_44995	Anti-virals	_
				ATC-J05AE08	covid_19_trial_txatc_j05ae08	Atazanavir	_
				ATC-J05AR10	covid_19_trial_txatc_j05ar10	Lopinavir/R	it
				RXCUI-260101	covid_19_trial_txrxcui_260101	Oseltamivir (Tamiflu)	
				OMOP4873974	covid_19_trial_txomop4873974	Remdesivir	_
				RXCUI-18631	covid_19_trial_txrxcui_18631	Azithromyc (Zithromax/	
				HO-45523	covid_19_trial_txho_45523	Systemic	Ĺ
				110-45525	COVIG_19_t1181_tX110_43323	corticoster	١ic
				ATC-C10AA	covid_19_trial_txatc_c10aa	Statins	
				L04AC03	covid_19_trial_txl04ac03	Anakinra	
				L04AA37	covid_19_trial_txl04aa37	Baricitinib	_
				L04AC02	covid_19_trial_txl04ac02	Basiliximab	_
				L04AC09	covid_19_trial_txl04ac09	briakinuma	b
				L04AC12	covid_19_trial_txl04ac12	brodalumal	b

1		<u> </u>
L04AC08	covid_19_trial_txl04ac08	canakinumal
L04AC01	covid_19_trial_txl04ac01	daclizumab
L04AC16	covid_19_trial_txl04ac16	guselkumab
L04AC13	covid_19_trial_txl04ac13	ixekizumab
L04AC04	covid_19_trial_txl04ac04	rilonacept
L04AC18	covid_19_trial_txl04ac18	risankizumak
L04AC14	covid_19_trial_txl04ac14	sarilumab
L04AC10	covid_19_trial_txl04ac10	secukinumak
L04AC11	covid_19_trial_txl04ac11	siltuximab
L04AC15	covid_19_trial_txl04ac15	sirukumab
L04AC17	covid_19_trial_txl04ac17	tildrakizumal
L04AC07	covid_19_trial_txl04ac07	tocilizumab
L04AC05	covid_19_trial_txl04ac05	ustekinumat
L04AB04	covid_19_trial_txl04ab04	adalimumab
L04AB03	covid_19_trial_txl04ab03	afelimomab
L04AB05	covid_19_trial_txl04ab05	certolizumat
L04AB01	covid_19_trial_txl04ab01	etanercept
L04AB06	covid_19_trial_txl04ab06	golimumab
L04AB02	covid_19_trial_txl04ab02	infliximab
L04AB07	covid_19_trial_txl04ab07	opinercept
B05AX03	covid_19_trial_txb05ax03	Plasma from recovered individuals (convalescen plasma)
OTH-plasma	covid_19_trial_txoth_plasma	Plasma from recovered individuals (convalescen plasma)
OTH	covid_19_trial_txoth	Other
UNK	covid_19_trial_txunk	Unknown

Field Annotation: Terminologies: ATC/HemOnc/OMOP/RxNorm @HIDECHOICE = 'OTH-plasma'

	190	covid_19_trial_more Show the field ONLY if: [covid_19_trial_tx(OTH)] = '1'	Please specify what other clinical trial treatment. (Note: some institutions have restrictions on sharing of this information, please check with your institutional official if you have any questions.) Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes
	191	additional_tx Show the field ONLY if: [covid_19_more] = '1' or [ccc19] = '1'	Additional COVID-19 treatment comments, e.g. specific doses. Please provide further information here. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes
	192	prbc Show the field ONLY if: [covid_19_more] = '1' or [ccc19] = '1'	Did the patient receive any PRBC transfusions?	radio 0 No 1 Yes 99 Unknown
	193	comments_form_2	Section Header: Free text entry (optional) Comments Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes
	194	covid19_details_complete	Section Header: Form Status Complete?	dropdown 0 Incomplete 1 Unverified 2 Complete
Ins	trumen	t: Cancer details (cancer_detail	s) 🛂 Enabled as survey	^ Collapse
	195	ts_3	Timestamp for the third form	text (datetime_dmy) Field Annotation: @HIDDEN @NOW_UTC
	196	cancer_type	Section Header: Cancer-specific data - Mandatory Cancer type. If the patient has multiple primaries, please report on the cancer that was most recently treated.	dropdown (autocomplete), Required C132146 Malignant Solid Neoplasm, NOS C9325 Adrenocortical Carcinoma C9291 Anal Cancer C9330 Appendix Cancer C4436 Bile Duct Cancer (Cholangiocarcinoma) C4912 Bladder Cancer C9312 Bone cancer, NOS C4627 Brain (CNS) Cancer C4872 Breast Cancer C9039 Cervical Cancer

C4910	Colon Cancer
C2955	Colon/Rectum Cancer
C3513	Esophagus Cancer
C4817	Ewing Sarcoma
C3867	Fallopian Tube Cancer
C3844	Gallbladder Cancer
C3708	Germ Cell Tumor
C3868	GIST
C4013	Head and Neck Cancer
C4819	Invasive Cutaneous SCC (do not record localized SCC)
C2921	Invasive Cutaneous BCC (do not record localized BCC)
C3234	Mesothelioma
C4039	III Defined/Cancer of Unknown Primary
C3099	Liver Cancer (HCC)
C4878	Lung Cancer, NOS
C3224	Melanoma
C9231	Merkel Cell
C3871	Nasopharyngeal Carcinoma
C3270	Neuroblastoma
C3809	Neuroendocrine tumor (NET) or Carcinoid
C2926	Non Small Cell Lung Cancer (NSCLC)
C9145	Osteosarcoma
C7431	Ovarian Cancer
C3850	Pancreatic Cancer
C4906	Parathyroid Cancer
C9061	Penis Cancer
C3538	Peritoneum Cancer
C3555	Placenta Cancer (incl. Choriocarcinoma)
C4863	Prostate Cancer
C9382	Rectum and Rectosigmoid Cancer
C9385	Renal Kidney Cancer (RCC)

C7355 Renal Pelvis Cancer C7541 Retinoblastoma C3359 Rhabdomyosarcoma C6389 Scrotum Cancer C4917 Small Cell Lung Cancer C7724 Small Intestine Cancer C9306 Soft Tissue Sarcoma, NOS C4911 Stomach (Gastric) Cancer C9063 Testis Cancer C3411 Thymus Cancer C4815 Thyroid Cancer C7558 Uterus (Endometrial) Cancer C3917 Vagina Cancer C8538 Vascular Sarcoma, NOS C4866 Vulva Cancer C3267 Wilms Tumor C27134 Malignant Hematologic Neoplasm, NOS C9300 Acute Leukemia C3171 Acute myeloid leukemia (AML) C3167 Acute lymphoblastic leukemia (ALL) C4345 Myeloproliferative neoplasm (MPN) C3174 Chronic myeloid leukemia (CML) C3247 Myelodysplastic syndrome (MDS) C9244 Aggressive lymphoma C9357 Hodgkin lymphoma C3211 Non-Hodgkin lymphoma (NHL) C4337 Mantle cell lymphoma (MCL) C2912 Burkitt lymphoma C3209 Follicular lymphoma C3209 Follicular lymphoma C3209 Follicular lymphoma C3210 Chronic lymphopytic leukemia (CLL)		
C3359 Rhabdomyosarcoma C6389 Scrotum Cancer C4917 Small Cell Lung Cancer C7724 Small Intestine Cancer C9306 Soft Tissue Sarcoma, NOS C4911 Stomach (Gastric) Cancer C9063 Testis Cancer C3411 Thymus Cancer C4815 Thyroid Cancer C7558 Uterus (Endometrial) Cancer C8538 Vascular Sarcoma, NOS C4866 Vulva Cancer C3267 Wilms Tumor C27134 Malignant Hematologic Neoplasm, NOS C9300 Acute Leukemia C3171 Acute myeloid leukemia (AML) C3167 Acute lymphoblastic leukemia (ALL) C4345 Myeloproliferative neoplasm (MPN) C3174 Chronic myeloid leukemia (CML) C3247 Myelodysplastic syndrome (MDS) C9244 Aggressive lymphoma C9357 Hodgkin lymphoma C3211 Non-Hodgkin lymphoma (NHL) C8851 Diffuse large B-cell lymphoma (DLBCL) C4337 Mantle cell lymphoma C8504 Indolent lymphoma C3209 Follicular lymphoma	C7355	Renal Pelvis Cancer
C6389 Scrotum Cancer C4917 Small Cell Lung Cancer C7724 Small Intestine Cancer C9306 Soft Tissue Sarcoma, NOS C4911 Stomach (Gastric) Cancer C9063 Testis Cancer C3411 Thymus Cancer C4815 Thyroid Cancer C7558 Uterus (Endometrial) Cancer C8538 Vascular Sarcoma, NOS C4866 Vulva Cancer C3267 Wilms Tumor C27134 Malignant Hematologic Neoplasm, NOS C9300 Acute Leukemia C3171 Acute myeloid leukemia (AML) C3167 Acute lymphoblastic leukemia (ALL) C4345 Myeloproliferative neoplasm (MPN) C3174 Chronic myeloid leukemia (CML) C3247 Myelodysplastic syndrome (MDS) C9244 Aggressive lymphoma C9357 Hodgkin lymphoma C3211 Non-Hodgkin lymphoma (NHL) C8851 Diffuse large B-cell lymphoma (DLBCL) C4337 Mantle cell lymphoma C8504 Indolent lymphoma C3209 Follicular lymphoma	C7541	Retinoblastoma
C4917 Small Cell Lung Cancer C7724 Small Intestine Cancer C9306 Soft Tissue Sarcoma, NOS C4911 Stomach (Gastric) Cancer C9063 Testis Cancer C3411 Thymus Cancer C4815 Thyroid Cancer C7558 Uterus (Endometrial) Cancer C8538 Vascular Sarcoma, NOS C4866 Vulva Cancer C3267 Wilms Tumor C27134 Malignant Hematologic Neoplasm, NOS C9300 Acute Leukemia C3171 Acute myeloid leukemia (AML) C3167 Acute lymphoblastic leukemia (ALL) C4345 Myeloproliferative neoplasm (MPN) C3174 Chronic myeloid leukemia (CML) C3247 Myelodysplastic syndrome (MDS) C9244 Aggressive lymphoma C9357 Hodgkin lymphoma C3211 Non-Hodgkin lymphoma (NHL) C8851 Diffuse large B-cell lymphoma (DLBCL) C4337 Mantle cell lymphoma C8504 Indolent lymphoma C3209 Follicular lymphoma	C3359	Rhabdomyosarcoma
C7724 Small Intestine Cancer C9306 Soft Tissue Sarcoma, NOS C4911 Stomach (Gastric) Cancer C9063 Testis Cancer C3411 Thymus Cancer C4815 Thyroid Cancer C7558 Uterus (Endometrial) Cancer C8538 Vascular Sarcoma, NOS C4866 Vulva Cancer C3267 Wilms Tumor C27134 Malignant Hematologic Neoplasm, NOS C9300 Acute Leukemia C3171 Acute myeloid leukemia (AML) C3167 Acute lymphoblastic leukemia (ALL) C4345 Myeloproliferative neoplasm (MPN) C3174 Chronic myeloid leukemia (CML) C3247 Myelodysplastic syndrome (MDS) C9244 Aggressive lymphoma C9357 Hodgkin lymphoma C9357 Hodgkin lymphoma C9351 Diffuse large B-cell lymphoma (DLBCL) C4337 Mantle cell lymphoma C8504 Indolent lymphoma C8504 Follicular lymphoma	C6389	Scrotum Cancer
C9306 Soft Tissue Sarcoma, NOS C4911 Stomach (Gastric) Cancer C9063 Testis Cancer C3411 Thymus Cancer C4815 Thyroid Cancer C7558 Uterus (Endometrial) Cancer C3917 Vagina Cancer C8538 Vascular Sarcoma, NOS C4866 Vulva Cancer C3267 Wilms Tumor C27134 Malignant Hematologic Neoplasm, NOS C9300 Acute Leukemia C3171 Acute myeloid leukemia (AML) C3167 Acute lymphoblastic leukemia (ALL) C4345 Myeloproliferative neoplasm (MPN) C3174 Chronic myeloid leukemia (CML) C3247 Myelodysplastic syndrome (MDS) C9244 Aggressive lymphoma C9357 Hodgkin lymphoma C9351 Non-Hodgkin lymphoma (NHL) C8851 Diffuse large B-cell lymphoma (DLBCL) C4337 Mantle cell lymphoma C8504 Indolent lymphoma C8504 Follicular lymphoma	C4917	Small Cell Lung Cancer
C4911 Stomach (Gastric) Cancer C9063 Testis Cancer C3411 Thymus Cancer C4815 Thyroid Cancer C7558 Uterus (Endometrial) Cancer C3917 Vagina Cancer C8538 Vascular Sarcoma, NOS C4866 Vulva Cancer C3267 Wilms Tumor C27134 Malignant Hematologic Neoplasm, NOS C9300 Acute Leukemia C3171 Acute myeloid leukemia (AML) C3167 Acute lymphoblastic leukemia (ALL) C4345 Myeloproliferative neoplasm (MPN) C3174 Chronic myeloid leukemia (CML) C3247 Myelodysplastic syndrome (MDS) C9357 Hodgkin lymphoma C9357 Hodgkin lymphoma C3211 Non-Hodgkin lymphoma (NHL) C4337 Mantle cell lymphoma (MCL) C2912 Burkitt lymphoma C3209 Follicular lymphoma	C7724	Small Intestine Cancer
C9063 Testis Cancer C3411 Thymus Cancer C4815 Thyroid Cancer C7558 Uterus (Endometrial) Cancer C3917 Vagina Cancer C8538 Vascular Sarcoma, NOS C4866 Vulva Cancer C3267 Wilms Tumor C27134 Malignant Hematologic Neoplasm, NOS C9300 Acute Leukemia C3171 Acute myeloid leukemia (AML) C3167 Acute lymphoblastic leukemia (ALL) C4345 Myeloproliferative neoplasm (MPN) C3174 Chronic myeloid leukemia (CML) C3247 Myelodysplastic syndrome (MDS) C9244 Aggressive lymphoma C3211 Non-Hodgkin lymphoma C3211 Non-Hodgkin lymphoma (NHL) C8851 Diffuse large B-cell lymphoma (DLBCL) C4337 Mantle cell lymphoma C8504 Indolent lymphoma C3209 Follicular lymphoma	C9306	Soft Tissue Sarcoma, NOS
C3411 Thymus Cancer C4815 Thyroid Cancer C7558 Uterus (Endometrial) Cancer C3917 Vagina Cancer C8538 Vascular Sarcoma, NOS C4866 Vulva Cancer C3267 Wilms Tumor C27134 Malignant Hematologic Neoplasm, NOS C9300 Acute Leukemia C3171 Acute myeloid leukemia (AML) C3167 Acute lymphoblastic leukemia (ALL) C4345 Myeloproliferative neoplasm (MPN) C3174 Chronic myeloid leukemia (CML) C3247 Myelodysplastic syndrome (MDS) C9244 Aggressive lymphoma C9357 Hodgkin lymphoma C3211 Non-Hodgkin lymphoma (NHL) C8851 Diffuse large B-cell lymphoma (DLBCL) C4337 Mantle cell lymphoma C8504 Indolent lymphoma C3209 Follicular lymphoma	C4911	Stomach (Gastric) Cancer
C4815 Thyroid Cancer C7558 Uterus (Endometrial) Cancer C3917 Vagina Cancer C8538 Vascular Sarcoma, NOS C4866 Vulva Cancer C3267 Wilms Tumor C27134 Malignant Hematologic Neoplasm, NOS C9300 Acute Leukemia C3171 Acute myeloid leukemia (AML) C3167 Acute lymphoblastic leukemia (ALL) C4345 Myeloproliferative neoplasm (MPN) C3174 Chronic myeloid leukemia (CML) C3247 Myelodysplastic syndrome (MDS) C9244 Aggressive lymphoma C9357 Hodgkin lymphoma C9351 Non-Hodgkin lymphoma (NHL) C8851 Diffuse large B-cell lymphoma (DLBCL) C4337 Mantle cell lymphoma C8504 Indolent lymphoma C3209 Follicular lymphoma	C9063	Testis Cancer
C7558 Uterus (Endometrial) Cancer C3917 Vagina Cancer C8538 Vascular Sarcoma, NOS C4866 Vulva Cancer C3267 Wilms Tumor C27134 Malignant Hematologic Neoplasm, NOS C9300 Acute Leukemia C3171 Acute myeloid leukemia (AML) C3167 Acute lymphoblastic leukemia (ALL) C4345 Myeloproliferative neoplasm (MPN) C3174 Chronic myeloid leukemia (CML) C3247 Myelodysplastic syndrome (MDS) C9244 Aggressive lymphoma C9357 Hodgkin lymphoma C9351 Diffuse large B-cell lymphoma (DLBCL) C4337 Mantle cell lymphoma C3212 Burkitt lymphoma C3209 Follicular lymphoma	C3411	Thymus Cancer
C3917 Vagina Cancer C8538 Vascular Sarcoma, NOS C4866 Vulva Cancer C3267 Wilms Tumor C27134 Malignant Hematologic Neoplasm, NOS C9300 Acute Leukemia C3171 Acute myeloid leukemia (AML) C3167 Acute lymphoblastic leukemia (ALL) C4345 Myeloproliferative neoplasm (MPN) C3174 Chronic myeloid leukemia (CML) C3247 Myelodysplastic syndrome (MDS) C9244 Aggressive lymphoma C9357 Hodgkin lymphoma C3211 Non-Hodgkin lymphoma (NHL) C8851 Diffuse large B-cell lymphoma (DLBCL) C4337 Mantle cell lymphoma C8504 Indolent lymphoma C3209 Follicular lymphoma	C4815	Thyroid Cancer
C8538 Vascular Sarcoma, NOS C4866 Vulva Cancer C3267 Wilms Tumor C27134 Malignant Hematologic Neoplasm, NOS C9300 Acute Leukemia C3171 Acute myeloid leukemia (AML) C3167 Acute lymphoblastic leukemia (ALL) C4345 Myeloproliferative neoplasm (MPN) C3174 Chronic myeloid leukemia (CML) C3247 Myelodysplastic syndrome (MDS) C9244 Aggressive lymphoma C9357 Hodgkin lymphoma C3211 Non-Hodgkin lymphoma (NHL) C8851 Diffuse large B-cell lymphoma (DLBCL) C4337 Mantle cell lymphoma C8504 Indolent lymphoma C3209 Follicular lymphoma	C7558	Uterus (Endometrial) Cancer
C4866 Vulva Cancer C3267 Wilms Tumor C27134 Malignant Hematologic Neoplasm, NOS C9300 Acute Leukemia C3171 Acute myeloid leukemia (AML) C3167 Acute lymphoblastic leukemia (ALL) C4345 Myeloproliferative neoplasm (MPN) C3174 Chronic myeloid leukemia (CML) C3247 Myelodysplastic syndrome (MDS) C9244 Aggressive lymphoma C9357 Hodgkin lymphoma C3211 Non-Hodgkin lymphoma (NHL) C8851 Diffuse large B-cell lymphoma (DLBCL) C4337 Mantle cell lymphoma C8504 Indolent lymphoma C3209 Follicular lymphoma	C3917	Vagina Cancer
C3267 Wilms Tumor C27134 Malignant Hematologic Neoplasm, NOS C9300 Acute Leukemia C3171 Acute myeloid leukemia (AML) C3167 Acute lymphoblastic leukemia (ALL) C4345 Myeloproliferative neoplasm (MPN) C3174 Chronic myeloid leukemia (CML) C3247 Myelodysplastic syndrome (MDS) C9244 Aggressive lymphoma C9357 Hodgkin lymphoma C3211 Non-Hodgkin lymphoma (NHL) C8851 Diffuse large B-cell lymphoma (DLBCL) C4337 Mantle cell lymphoma (MCL) C2912 Burkitt lymphoma C3209 Follicular lymphoma	C8538	Vascular Sarcoma, NOS
C27134 Malignant Hematologic Neoplasm, NOS C9300 Acute Leukemia C3171 Acute myeloid leukemia (AML) C3167 Acute lymphoblastic leukemia (ALL) C4345 Myeloproliferative neoplasm (MPN) C3174 Chronic myeloid leukemia (CML) C3247 Myelodysplastic syndrome (MDS) C9244 Aggressive lymphoma C9357 Hodgkin lymphoma C3211 Non-Hodgkin lymphoma (NHL) C8851 Diffuse large B-cell lymphoma (DLBCL) C4337 Mantle cell lymphoma (MCL) C2912 Burkitt lymphoma C8504 Indolent lymphoma C3209 Follicular lymphoma	C4866	Vulva Cancer
C9300 Acute Leukemia C3171 Acute myeloid leukemia (AML) C3167 Acute lymphoblastic leukemia (ALL) C4345 Myeloproliferative neoplasm (MPN) C3174 Chronic myeloid leukemia (CML) C3247 Myelodysplastic syndrome (MDS) C9244 Aggressive lymphoma C9357 Hodgkin lymphoma C3211 Non-Hodgkin lymphoma (NHL) C8851 Diffuse large B-cell lymphoma (DLBCL) C4337 Mantle cell lymphoma (MCL) C2912 Burkitt lymphoma C3209 Follicular lymphoma	C3267	Wilms Tumor
C3171 Acute myeloid leukemia (AML) C3167 Acute lymphoblastic leukemia (ALL) C4345 Myeloproliferative neoplasm (MPN) C3174 Chronic myeloid leukemia (CML) C3247 Myelodysplastic syndrome (MDS) C9244 Aggressive lymphoma C9357 Hodgkin lymphoma C3211 Non-Hodgkin lymphoma (NHL) C8851 Diffuse large B-cell lymphoma (DLBCL) C4337 Mantle cell lymphoma (MCL) C2912 Burkitt lymphoma C8504 Indolent lymphoma C3209 Follicular lymphoma	C27134	Malignant Hematologic Neoplasm, NOS
C3167 Acute lymphoblastic leukemia (ALL) C4345 Myeloproliferative neoplasm (MPN) C3174 Chronic myeloid leukemia (CML) C3247 Myelodysplastic syndrome (MDS) C9244 Aggressive lymphoma C9357 Hodgkin lymphoma C3211 Non-Hodgkin lymphoma (NHL) C8851 Diffuse large B-cell lymphoma (DLBCL) C4337 Mantle cell lymphoma (MCL) C2912 Burkitt lymphoma C8504 Indolent lymphoma C3209 Follicular lymphoma	C9300	Acute Leukemia
C4345 Myeloproliferative neoplasm (MPN) C3174 Chronic myeloid leukemia (CML) C3247 Myelodysplastic syndrome (MDS) C9244 Aggressive lymphoma C9357 Hodgkin lymphoma C3211 Non-Hodgkin lymphoma (NHL) C8851 Diffuse large B-cell lymphoma (DLBCL) C4337 Mantle cell lymphoma (MCL) C2912 Burkitt lymphoma C8504 Indolent lymphoma C3209 Follicular lymphoma	C3171	Acute myeloid leukemia (AML)
C3174 Chronic myeloid leukemia (CML) C3247 Myelodysplastic syndrome (MDS) C9244 Aggressive lymphoma C9357 Hodgkin lymphoma (NHL) C8851 Diffuse large B-cell lymphoma (DLBCL) C4337 Mantle cell lymphoma (MCL) C2912 Burkitt lymphoma C8504 Indolent lymphoma C3209 Follicular lymphoma	C3167	Acute lymphoblastic leukemia (ALL)
C3247 Myelodysplastic syndrome (MDS) C9244 Aggressive lymphoma C9357 Hodgkin lymphoma C3211 Non-Hodgkin lymphoma (NHL) C8851 Diffuse large B-cell lymphoma (DLBCL) C4337 Mantle cell lymphoma (MCL) C2912 Burkitt lymphoma C8504 Indolent lymphoma C3209 Follicular lymphoma	C4345	Myeloproliferative neoplasm (MPN)
C9244 Aggressive lymphoma C9357 Hodgkin lymphoma C3211 Non-Hodgkin lymphoma (NHL) C8851 Diffuse large B-cell lymphoma (DLBCL) C4337 Mantle cell lymphoma (MCL) C2912 Burkitt lymphoma C8504 Indolent lymphoma C3209 Follicular lymphoma	C3174	Chronic myeloid leukemia (CML)
C9357 Hodgkin lymphoma C3211 Non-Hodgkin lymphoma (NHL) C8851 Diffuse large B-cell lymphoma (DLBCL) C4337 Mantle cell lymphoma (MCL) C2912 Burkitt lymphoma C8504 Indolent lymphoma C3209 Follicular lymphoma	C3247	Myelodysplastic syndrome (MDS)
C3211 Non-Hodgkin lymphoma (NHL) C8851 Diffuse large B-cell lymphoma (DLBCL) C4337 Mantle cell lymphoma (MCL) C2912 Burkitt lymphoma C8504 Indolent lymphoma C3209 Follicular lymphoma	C9244	Aggressive lymphoma
C8851 Diffuse large B-cell lymphoma (DLBCL) C4337 Mantle cell lymphoma (MCL) C2912 Burkitt lymphoma C8504 Indolent lymphoma C3209 Follicular lymphoma	C9357	Hodgkin lymphoma
C4337 Mantle cell lymphoma (MCL) C2912 Burkitt lymphoma C8504 Indolent lymphoma C3209 Follicular lymphoma	C3211	Non-Hodgkin lymphoma (NHL)
C2912 Burkitt lymphoma C8504 Indolent lymphoma C3209 Follicular lymphoma	C8851	Diffuse large B-cell lymphoma (DLBCL)
C8504 Indolent lymphoma C3209 Follicular lymphoma	C4337	Mantle cell lymphoma (MCL)
C3209 Follicular lymphoma	C2912	Burkitt lymphoma
	C8504	Indolent lymphoma
C3163 Chronic lymphocytic leukemia (CLL)	C3209	Follicular lymphoma
	C3163	Chronic lymphocytic leukemia (CLL)

			_	
			C4341	Marginal zone lymphoma
			C4665	Plasma cell dyscrasia
			C3242	Multiple myeloma
			C3819	AL amyloidosis
			C27908	T-cell and NK-cell neoplasm
			C9308	Lymphoproliferative disorder
			C3106	Histiocyte disorder
			ОТН	Other
			OTH_H	Other Heme
			OTH_S	Other Solid Tumor
				otation: LOINC:63929-4; Terminology: NCIT DICE = 'C9312,OTH'
197	cancer_type_oth	Please specify cancer type	text	
	Show the field ONLY if: [cancer_type] = 'OTH' or [cancer_type] = 'C132146' or [cancer_type] = 'OTH_H' or [cancer_type] = 'OTH_S' or [cancer_type] = 'C27134'			
198	acute_leukemia_more Show the field ONLY if: [cancer_type] = 'C9300'	This code is not preferred because it is non-specific. If the patient has a myeloid-lineage acute leukemia (AML, APL, AMML, etc) please go back and select acute myeloid leukemia. If the patient has a plasma cell leukemia, please go back and select plasma cell dyscrasia. Otherwise, please enter the specific details below in the additional cancer details.	descriptive	
199	lung_nos_more Show the field ONLY if: [cancer_type] = 'C4878'	This code should only be used if you do not know the histology of the lung cancer (e.g., the patient was treated without a confirmatory biopsy) or if the histology overlaps. If you know that the cancer is NSCLC (e.g., adenocarcinoma, squamous cell carcinoma, large cell carcinoma) please go back and select that choice. If you know that the cancer is a low-grade neuroendocrine tumor (i.e., carcinoid), please go back and select carcinoid/NET. If you know that the cancer is a high-grade neuroendocrine tumor (i.e., small cell lung cancer), please go back and select SCLC. Otherwise, please enter the specific histology below in the additional cancer details.	descriptive	
200	teravolt Show the field ONLY if: [cancer_type] = 'C4878' or [cancer_t ype] = 'C2926' or [cancer_type] = 'C 4917' or [cancer_type] = 'C3411'	Please consider donating data to the TERAVOLT (Thoracic cancERs international coVid 19 cOLlaboraTion) registry, as well. In order to do this, unless you are already part of a member institution, you will need to reach out to Prof. Jennifer Whisenant j.whisenant@vumc.org	descriptive	

_	2020 COVID 19 and Cancer Consortium (CCC17) Registry (Rabetap				
	201	multiple_ca	Does the patient have multiple malignancies? This includes multiple active malignancies as well as historic cancers.	radio, Req 0 No 1 Yes 99 Unkr	
	202	cancer_type_2 Show the field ONLY if: [multiple_ca] = '1'	Cancer type of second malignancy. If the patient has more than two malignancies, please select the second-most recently diagnosed cancer type. If unknown or unclear, please specify in the free text box below.	dropdown C132146 C9325 C9291 C9330 C4436 C4912 C4627 C4872 C9039 C4910 C2955 C3513 C4817 C3867 C3844 C3708 C3868 C4013 C4819 C2921 C3234 C4039 C3099 C4878 C3224	(autocomplete) Malignant Solid Neoplasm, NOS Adrenocorical Carcinoma Anal Cancer Appendix Cancer Bile Duct Cancer (Cholangiocarcinoma) Bladder Cancer Brain (CNS) Cancer Breast Cancer Cervical Cancer Colon Cancer Colon/Rectum Cancer Esophagus Cancer Ewing Sarcoma Fallopian Tube Cancer Germ Cell Tumor GIST Head and Neck Cancer Invasive Cutaneous SCC (do not record localized SCC) Invasive Cutaneous BCC (do not record localized BCC) Mesothelioma Ill Defined/Cancer of Unknown Primary Liver Cancer (HCC) Lung Cancer, NOS Melanoma
				C9231	Merkel Cell

C3871	Nasopharyngeal Carcinoma
C3270	Neuroblastoma
C3809	Neuroendocrine tumor (NET) or Carcinoid
C2926	Non Small Cell Lung Cancer (NSCLC)
C9145	Osteosarcoma
C7431	Ovarian Cancer
C3850	Pancreatic Cancer
C4906	Parathyroid Cancer
C9061	Penis Cancer
C3538	Peritoneum Cancer
C3555	Placenta Cancer (incl. Choriocarcinoma)
C4863	Prostate Cancer
C9382	Rectum and Rectosigmoid Cancer
C9385	Renal Kidney Cancer (RCC)
C7355	Renal Pelvis Cancer
C7541	Retinoblastoma
C3359	Rhabdomyosarcoma
C6389	Scrotum Cancer
C4917	Small Cell Lung Cancer
C7724	Small Intestine Cancer
C9306	Soft Tissue Sarcoma, NOS
C4911	Stomach (Gastric) Cancer
C9063	Testis Cancer
C3411	Thymus Cancer
C4815	Thyroid Cancer
C7558	Uterus (Endometrial) Cancer
C3917	Vagina Cancer
C8538	Vascular Sarcoma, NOS
C4866	Vulva Cancer
C3267	Wilms Tumor
C27134	Malignant Hematologic Neoplasm, NOS
C9300	Acute Leukemia
1	I

			C3171	Acute myeloid leukemia (AML)
			C3167	Acute lymphoblastic leukemia (ALL)
			C4345	Myeloproliferative neoplasm (MPN)
			C3174	Chronic myeloid leukemia (CML)
			C3247	Myelodysplastic syndrome (MDS)
			C9244	Aggressive lymphoma
			C9357	Hodgkin lymphoma
			C3211	Non-Hodgkin lymphoma (NHL)
			C8851	Diffuse large B-cell lymphoma (DLBCL)
			C4337	Mantle cell lymphoma (MCL)
			C2912	Burkitt lymphoma
			C8504	Indolent lymphoma
			C3209	Follicular lymphoma
			C3163	Chronic lymphocytic leukemia (CLL)
			C4341	Marginal zone lymphoma
			C4665	Plasma cell dyscrasia
			C3242	Multiple myeloma
			C3819	AL amyloidosis
			C27908	T-cell and NK-cell neoplasm
			C9308	Lymphoproliferative disorder
			C3106	Histiocyte disorder
			ОТН	Other
			OTH_H	Other Heme
			OTH_S	Other Solid Tumor
				tation: LOINC:63929-4; Terminology: NCIT DICE = 'OTH'
203	cancer_type_oth_2	Please specify cancer type	text	
	Show the field ONLY if: [cancer_type_2] = 'OTH' or [cancer_type_2] = 'C132146' or [cancer_type_2] = 'OTH_H' or [cancer_type_2] = 'OTH_S' or [cancer_type_2] = 'C271 34'			

204	multiple_ca_more Show the field ONLY if: [multiple_ca] = '1'	Multiple malignancies - further details. Please provide further details, including whether the primary cancers were synchronous or metachronous, the types of the multiple primaries, etc. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes		
205	breast_biomarkers	Breast cancer specific: What is the breast cancer phenotype? Check all	checkb	OOX	
	Show the field ONLY if: [cancer_type] = 'C4872' or [cancer_t	that apply.	ER	breast_biomarkerser	Estrogen-receptor positive
	ype_2] = 'C4872'		HER2	breast_biomarkersher2	HER2 overexpressing (HER2 positive)
			TNBC	breast_biomarkerstnbc	Triple-negative breast cancer (ER, PR, and HER2 negative)
			99	breast_biomarkers99	Unknown
206	bcg_intraves_ever Show the field ONLY if: [cancer_type] = 'C4912' or [cancer_t ype_2] = 'C4912'	Bladder cancer specific: Has the patient ever received intravesicular BCG?	1 Y	lo es Inknown	
207	gleason	Prostate cancer specific: Gleason Score – Document the highest	radio		
	Show the field ONLY if:	Gleason score (from either biopsy or radical prostatectomy - preferred if available). For example, Gleason 4 + 3 would be marked as Gleason	02 0	ileason score 2	
	[cancer_type] = 'C4863' or [cancer_t ype_2] = 'C4863'	7.	03 0	ileason score 3	
	ype_2] = C4803		04	ileason score 4	
			05 G	ileason score 5	
			06	ileason score 6	
			07 C	ileason score 7	
			08 0	ileason score 8	
				ileason score 9	
				ileason score 10	
				lo needle core biopsy/TURP/p	
			-	lot applicable: Information no	
			1 1	lot documented in medical re ssessed or unknown if assess	
			Field A	nnotation: NAACCR 3840/384	1

208	gleason_source Show the field ONLY if: ([cancer_type] = 'C4863' or [cancer_type_2] = 'C4863') and ([gleason] = '02' or [gleason] = '03' or [gleason] = '04' or [gleason] = '05' or [gleason] = '06' or [gleason] = '07' or [gleason] = '08' or [gleason] = '09' or [gleason] = '100')	Prostate cancer specific: What type of specimen was the Gleason score based on?	radio 3840 Prostate biopsy or TURP 3841 Radical prostatectomy MET Metastatic site of disease UNK Unknown
209	cancer_status	Cancer status. If the patient has multiple primaries, please report on the cancer that was most recently treated.	radio, Required 1 Remission/NED 2 Active disease, responding to treatment 3 Active disease, stable 4 Active disease, progressing 5 Active disease, status unknown or not yet assessed 99 Unknown
210	hospice Show the field ONLY if: [cancer_status] = 4 or [cancer_status] = 5	Was the patient on hospice prior to the COVID-19 diagnosis?	radio 0 No 1 Yes 99 Unknown
211	on_treatment	Is the patient on anti-cancer treatment? That is, was the patient receiving any treatments intended to directly or indirectly destroy cancer cells in the 3 months prior to COVID-19 diagnosis? This includes systemic therapy, surgery, radiotherapy, and transplant/cellular therapy (including prior to actual transplant/infusion).	radio, Required 1 Yes 0 No 99 Unknown
212	recent_treatment Show the field ONLY if: [on_treatment] = '1'	When was the most recent anti-cancer treatment, relative to the time of COVID-19 diagnosis? Anti-cancer treatment means anything intended to directly or indirectly destroy cancer cells, including systemic therapy, surgery, radiotherapy, and transplant/cellular therapy.	radio, Required 1 Less than 2 weeks prior to COVID-19 diagnosis 2 Within 2 to 4 weeks prior to COVID-19 diagnosis 3 Within the month to 3 months prior to COVID-19 diagnosis 88 More than 3 months prior to COVID-19 diagnosis 99 Unknown

213	hx_treatment	When was the most recent anti-cancer treatment completed, relative	radio	radio		
	Show the field ONLY if:	to the time of COVID-19 diagnosis?	1	Completed within 3 months prior	to COVID-19 diagnosis	
	[on_treatment] = '0' or [recent_trea tment] = '88'		2	2 Completed more than 3 months but less than 1 year prior to COVID-19 diagnosis		
			3	Completed more than 1 year prio	r to COVID-19 diagnosis	
			88	Never (patient never received can COVID-19 diagnosis)	cer treatment prior to	
			99	Unknown		
214	treatment_modality	Anti-cancer treatment modality. Check all that apply. For example, if a	chec	kbox, Required		
	Show the field ONLY if: [on_treatment] = '1' or [hx_treatme	patient received concurrent chemoradiation, check cytotoxic chemotherapy and radiotherapy. Note: monoclonal antibodies that do not have a direct immunostimulatory effect (e.g., rituximab,	685	treatment_modality685	Cytotoxic chemotherapy	
	nt] = '1' or [hx_treatment] = '2'	bevacizumab, etc.) should be selected as "Targeted therapy".	694	treatment_modality694	Immunotherapy	
			582	29 treatment_modality58229	Targeted therapy	
			691	treatment_modality691	Endocrine therapy	
			695	treatment_modality695	Radiotherapy	
			140	51 treatment_modality14051	Surgery	
			451	86 treatment_modality45186	Transplant/Cellular therapy	
			452	15 treatment_modality45215	Intravesicular therapy (e.g., BCG)	
			ОТН	treatment_modalityoth	Other	
			Field	Annotation: Terminology: HemOn	С	
215	intravesicular_bcg	Did the intravesicular therapy include BCG?	radio)		
	Show the field ONLY if: [treatment_modality(45215)] = '1'		0	No		
	[a cadhene_modality(+3213)]		00	Yes Unknown		
246			<u> </u>			
	tx_modality_oth_specify	Please specify other modalities. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	note	S		
	Show the field ONLY if: [treatment_modality(OTH)] = '1'	tield ONLY it:				

217	what_immunotherapy	What immunotherapy?	radio, Req	uired		
	Show the field ONLY if:		45838	Anti-CTLA4 antibody		
	[treatment_modality(694)] = '1'		45446	Anti-PD-1 antibody (e.g., nivo pembrolizumab)	lumab,	
			45170	Anti-PD-L1 antibody (e.g., ate	zolizumab, avelumab)	
			45838- 45446	Combination of anti-CTLA4 a ipilimumab & nivolumab)	nd anti-PD-1 (e.g.	
			ОТН	Other		
			UNK	Unknown		
			Field Anno	tation: Terminology: HemOnc		
218	immuno_other_specify	Please specify what other immunotherapy Do not record any PHI in	notes			
	Show the field ONLY if: [what_immunotherapy] = 'OTH'	this field. As a reminder, this includes all elements of dates other than year.				
219	what_targeted_tx	Some targeted therapies have postulated antiviral effects. Was the	checkbox	ox		
	Show the field ONLY if: [treatment_modality(58229)] = '1'	patient taking any of these medications? Check all that apply.	L01XE51	what_targeted_txl01xe51	Acalabrutinib (Calquence)	
			L01XE06	what_targeted_txl01xe06	Dasatinib (Sprycel)	
			L01XE57	what_targeted_txl01xe57	Fedratinib (Inrebic)	
			L01XE27	what_targeted_txl01xe27	Ibrutinib (Imbruvica)	
			L01XE01	what_targeted_txl01xe01	Imatinib (Gleevec)	
			L01XE08	what_targeted_txl01xe08	Nilotinib (Tasigna)	
			L01XE18	what_targeted_txl01xe18	Ruxolitinib (Jakafi)	
			L04AA29	what_targeted_txl04aa29	Tofacitinib (Xeljanz)	
			ОТН	what_targeted_txoth	Other	
			UNK	what_targeted_txunk	Unknown	
			NONE	what_targeted_txnone	None	
220	targeted_other_specify Show the field ONLY if:	Please specify what other targeted therapy. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than	notes			
	[what_targeted_tx(OTH)] = '1'	year.				

		T and cancer constitutin (cccis) registry in		
22	1 pneumonitis	Is there a strong concern for concurrent immune-related adverse	radio	
	Show the field ONLY if:	event (irAE) pneumonitis?	1 No	
	[treatment_modality(694)] = '1'		2 Possible	
			3 Likely	
			4 Definite irAE pneumonitis	
22	2 other_irae	Is there a strong concern for another concurrent irAE?	yesno	
	Show the field ONLY if:		1 Yes	
	[treatment_modality(694)] = '1'		0 No	
22	3 irae_text	Please describe Do not record any PHI in this field. As a reminder, this	notes	
	Show the field ONLY if:	includes all elements of dates other than year.		
	[other_irae] = '1'			
22	4 radiotherapy	Does or did the radiation treatment field include the lungs to any	radio	
	Show the field ONLY if:	degree?	1 Yes	
	[treatment_modality(695)] = '1'		0 No	
			99 Unknown	
22	5 transplant_prior_tx	Transplant and cellular therapy - additional information. So that we	notes	
	Show the field ONLY if:	can better understand the patient's degree of immunosuppression, please provide additional details related to their prior treatment		
	[treatment_modality(45186)] = '1'	course and to their disease status when entering into transplant or		
		cellular therapy. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.		
22	6 transplant_cellular_therapy	Transplant & cellular therapy - what type of therapy?	radio	
	Show the field ONLY if:		1 Autologous stem cell transplant	
	[treatment_modality(45186)] = '1'		2 MUD allogeneic SCT	
			3 MRD allogeneic SCT	
			4 Haplo allogeneic SCT	
			5 Cord blood allogeneic SCT	
			6 CAR-T cells	
			OTH Other	
			7 Unknown	
22	7 sct_other_specify	Please specify what other type of transplant or cellular therapy Do not	notes	
	Show the field ONLY if:	record any PHI in this field. As a reminder, this includes all elements of dates other than year.		
	[transplant_cellular_therapy] = 'OT	dates other trialityear.		
	H'			

220	tunganlant sallula (C.)	Turney lead 0 cells lead the correspondence of the correspondence	d: -
228	transplant_cellular_timing	Transplant & cellular therapy - how far out from treatment?	radio
	Show the field ONLY if: [treatment_modality(45186)] = '1'		0 During prep (prior to transplant)
	[treatment_modality(45180)] = 1		1 0-20 days
			2 21-100 days
			3 101-365 days
			4 More than 1 year
			5 Unknown
229	treatment_additional	Anti-cancer treatment - additional information. Please give more	notes
	Show the field ONLY if: [on_treatment] = '1' or [hx_treatment] = '1'	details here about the specific treatment(s) that the patient has been receiving, including drug and/or regimen names. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	
230	treatment_intent	Anti-cancer treatment intent	radio, Required
	Show the field ONLY if:		1 Curative
	[on_treatment] = '1' or [hx_treatme		2 Palliative
	nt] = '1'		99 Unclear or unknown
231	treatment_context	Current anti-cancer treatment context. Note that the language for	radio
	Show the field ONLY if:	treatment context differs for solid and hematologic malignancies. The first set of choices are more commonly used for solid tumors, and the	46235 Curative therapy, NOS
	<pre>[on_treatment] = '1' or [hx_treatme nt] = '1'</pre>	last three (induction, consolidation, maintenance) for hematologic	5250 Neoadjuvant
	ng – i	malignancy.	2618 Adjuvant
			2648 Non-curative therapy, NOS
			3175 1st line non-curative therapy
			14900 2nd line non-curative therapy
			1874 Subsequent line non-curative therapy
			813 Induction
			1526 Consolidation
			1901 Maintenance
			OTH Other
			UNK Unknown
			Field Annotation: Terminology: HemOnc
232	other_context	Please specify other treatment context Do not record any PHI in this	notes
	Show the field ONLY if: [treatment_context] = 'OTH'	field. As a reminder, this includes all elements of dates other than year.	

233	orchiectomy	Prostate cancer specific: Has the patient had a bilateral orchiectomy?	radio			
ددے	Show the field ONLY if:	rivolate cancer specific. Has the patient flat a bilateral orchiectomy?	0	No		
	[cancer_type] = 'C4863' or [cancer_t		1	Yes		
	ype_2] = 'C4863'		99	Unknow	vn	
234	adt	Prostate cancer specific: Was the patient on androgen deprivation therapy within 6 months of a positive SARS-CoV-2 test or presumed	radio			
	Show the field ONLY if: ([cancer_type] = 'C4863' or [cancer_	Show the field ONLY if: positive COVID-19 disease? HINT: Androgen deprivation therapy is	0	No		
	type_2] = 'C4863') and [hx_treatme	typically administered in the form of an injection given every 1, 3, 4, or 6 months. Agents largely include: degarelix, leuprolide, goserelin,	<u>'</u>	Yes		
	nt] != '3' and [hx_treatment] != '88'	triptorelin, buserelin.	99	Unknow	<u>'n</u>	
235	prostate_tx	Prostate cancer specific: Please check all the prostate cancer therapies	chec	:kbox		
	Show the field ONLY if:	that the patient received within 3 months of a positive SARS-CoV-2 test or presumed positive COVID-19 disease. More than one option	830	008 р	rostate_tx83008	Bicalutamide (Casodex)
	([cancer_type] = 'C4863' or [cancer_	can be selected.	450)8 p	rostate_tx4508	Flutamide
	type_2] = 'C4863') and [hx_treatme nt] != '3' and [hx_treatment] != '88'		318	805 p	rostate_tx31805	Nilutamide
			110	00072 p	rostate_tx1100072	Abiraterone
			130	7298 p	ostate_tx1307298	Enzalutamide (Xtandi)
			199	9574 p	ostate_tx1999574	Apalutamide (Erleada)
			218	80325 p	rostate_tx2180325	Darolutamide (Nubeqa)
			729)62 p	rostate_tx72962	Docetaxel (Taxotere)
			996	i051 p	ostate_tx996051	Cabazitaxel (Jevtana)
			400)48 p	rostate_tx40048	Carboplatin
			700)5 p	rostate_tx7005	Mitoxantrone
			997	'261 p	ostate_tx997261	Sipuleucel-T
			195	8200 p	ostate_tx1958200	Radium-223
			159	7582 p	ostate_tx1597582	Olaparib
			186	52579 p	ostate_tx1862579	Rucaparib
			154	7545 p	ostate_tx1547545	Pembrolizumab
			TRI	AL p	rostate_txtrial	Clinical trial
			ОТІ	Н р	rostate_txoth	Other agent
			NO	NE p	rostate_txnone	None of the above
			UN	К р	rostate_txunk	Unknown
236	prostate_trial_more Show the field ONLY if: [prostate_tx(TRIAL)] = '1'	Please specify clinical trial details. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	note	es		

To the cancer constituting (ccc1), Registry (REDCup					
237	prostate_tx_oth Show the field ONLY if: [prostate_tx(OTH)] = '1'	Please specify other agent(s). Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes		
238	cancer_more Show the field ONLY if: [ccc19] = '0'	Section Header: Cancer-specific data - Optional Would you like to answer additional cancer-specific questions? This is optional but will really help us understand the granular details better.	yesno 1 Yes 0 No		
239	stage Show the field ONLY if: [cancer_more] = '1' or [ccc19] = '1'	Stage at cancer diagnosis. If the patient has multiple primaries, please report on the cancer that was most recently treated. If the patient was initially diagnosed with in situ cancer but then developed invasive disease, please report the stage at the time of invasive disease diagnosis.	radio 1004-0 0 (in situ) 1		
240	stage_oth_specify Show the field ONLY if: [stage] = 'OTH'	Please specify other stage at cancer diagnosis Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes		
241	mets_yn Show the field ONLY if: ([cancer_more] = '1' or [ccc19] = '1') and [cancer_status] != '1'	Did the patient have metastatic cancer at the time of COVID-19 diagnosis?	radio 0 No 1 Yes 88 Not applicable (e.g., patient has a liquid hematologic malignancy) 99 Unknown		

242	mets_sites	What were the sites of metastatic disease? Please check all that apply.	checkl	box	
	Show the field ONLY if: [mets_yn] = '1'			- mets_sites1112_1	Bone
			1113- 1	- mets_sites1113_1	Brain
			1114 1	- mets_sites1114_1	Distant lymph nodes
			1115 1	- mets_sites1115_1	Liver
			1116 1	- mets_sites1116_1	Lung
			1117- 1	- mets_sites1117_1	Other sites
			1117	- mets_sites1117_2	Generalized metastases such as carcinomatosis, malignant pleural effusion, malignant ascites
			9	mets_sites9	Unknown
			Field A	Annotation: Terminology	r: NAACCR
243	mets_oth_specify Show the field ONLY if: [mets_sites(1117-1)] = '1'	Please specify additional sites of metastatic cancer Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes		
244	cancer_timing	When was the patient's cancer diagnosed? If the patient has multiple	radio		
	Show the field ONLY if:	primaries, please report on the cancer that was most recently treated.	1 V	Within the past year	
	[cancer_more] = '1' or [ccc19] = '1'		2 V	Within the past 5 years	
			3 1	More than 5 years ago	
			99 L	Jnknown	
245	clinical_trial Show the field ONLY if: [cancer_more] = '1' or [ccc19] = '1'	Is the patient on a clinical trial?	1 Y	No /es Jnknown	
246	clinical_trial_more Show the field ONLY if: [clinical_trial] = '1'	Please provide additional details if you can. Note: some institutions have restrictions on sharing of this information, please check with your institutional official if you have any questions. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes		

247	additional_ca_dx	Additional details about cancer diagnosis (stage, prior therapies, etc.)	notes			
247		Do not record any PHI in this field. As a reminder, this includes all	notes			
	Show the field ONLY if: [cancer_more] = '1' or [ccc19] = '1'	elements of dates other than year.				
248	prior_tx	Has the patient ever received treatments known to be associated with	checkbo	ckbox		
	Show the field ONLY if:	cardiac or pulmonary toxicity? Check all that apply.	73	prior_tx73	Bleomycin	
	[cancer_more] = '1' or [ccc19] = '1'		90	prior_tx90	Carmustine	
			122	prior_tx122	Cyclophosphamide	
			202	prior_tx202	Everolimus	
			243	prior_tx243	Gemcitabine	
			44985	prior_tx44985	Anthracyclines	
			45000	prior_tx45000	Antibody-drug conjugates	
			45613	prior_tx45613	Anti-CD38 antibodies (e.g. daratumumab)	
			58101	prior_tx58101	Checkpoint inhibitors	
			694	prior_tx694	Immunotherapy	
			44947	prior_tx44947	Monoclonal antibodies	
			45388	prior_tx45388	Platinum agents	
			45352	prior_tx45352	Taxanes	
			44955	prior_tx44955	Tyrosine kinase inhibitors (TKIs)	
			695	prior_tx695	Radiation involving a lung field	
			OTH	prior_txoth	Other	
			UNK	prior_txunk	Unknown	
			NONE	prior_txnone	None	
			Field An	notation: Terminol	ogy: HemOnc	
249	drugs_expanded	Please list specific drugs	text			
	Show the field ONLY if: [prior_tx(45613)] = '1' or [prior_tx(44985)] = '1' or [prior_tx(45388)] = '1' or [prior_tx(45352)] = '1' or [prior_tx(44955)] = '1'					

250	irae_gr3	Has the patient experienced a current or past (ever) iRAE CTCAE grade	e checkbox					
	Show the field ONLY if: [prior_tx(58101)] = '1' or [prior_tx(6 94)] = '1' or [treatment_modality(69 4)] = '1'		418290006	irae_gr3418290006	Pruritis			
			271807003	irae_gr3271807003	Rash			
			56727007	irae_gr356727007	Vitiligo			
			26889001	irae_gr326889001	Myositis			
			91637004	irae_gr391637004	Myasthenia gravis			
			57676002	irae_gr357676002	Arthralgia			
			3723001	irae_gr33723001	Arthritis			
			205237003	irae_gr3205237003	Pneumonitis			
			40930008	irae_gr340930008	Hypothyroidism			
			34486009	irae_gr334486009	Hyperthyroidism			
			267060006	irae_gr3267060006	Diarrhea			
			64226004	irae_gr364226004	Colitis			
			64613007	irae_gr364613007	Enteritis			
			128241005	irae_gr3128241005	Hepatitis			
			OTH	irae_gr3oth	Other			
			NONE	irae_gr3none	None			
			UNK	irae_gr3unk	Unknown			
251	irae_oth_specify	Please specify what other iRAE CTCAE grade 3 or above. Do not record	notes					
	Show the field ONLY if: [irae_gr3(OTH)] = '1'	any PHI in this field. As a reminder, this includes all elements of dates other than year.						
252	irae_past	Was there ever evidence of an immune-related adverse event (irAE)	radio	1				
	Show the field ONLY if:	affecting the lungs or heart? (pneumonitis, myocarditis)	1 No					
	[prior_tx(58101)] = '1' or [prior_tx(6 94)] = '1'		2 Possible					
	- /2		3 Likely	3 Likely				
			4 Definite					
253	irae_past_more	Please specify Do not record any PHI in this field. As a reminder, this	notes					
	Show the field ONLY if: [irae_past] = '2' or [irae_past] = '3' o r [irae_past] = '4'	includes all elements of dates other than year.						
254	prior_tx_other	Please specify other past treatments with potential cardiac or	text	text				
	Show the field ONLY if: [prior_tx(OTH)] = '1'	pulmonary toxicity.						

				_
	255	prior_tx_text Show the field ONLY if: [cancer_more] = '1' or [ccc19] = '1'	If the patient had potentially lung-toxic therapy in the past, please provide further details. For example, how long ago the treatment was, whether there was overt lung toxicity at the time of treatment, etc. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes
	256	comments_form_3	Section Header: Free text entry (optional) Comments Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes
	257	cancer_details_complete	Section Header: Form Status Complete?	dropdown 0 Incomplete 1 Unverified 2 Complete
Ins	strument: Respondent details (respondent_details) 🗊 Enabled as survey			^ Collapse
	258	ts_4	Timestamp for the fourth form	text (datetime_dmy) Field Annotation: @HIDDEN @NOW_UTC
	259	role	Section Header: <i>A bit about you</i> Are you the primary managing hematologist/oncologist?	yesno, Required 1 Yes 0 No
	260	practice_setting Show the field ONLY if: [role] = '1'	What is your practice setting? Check all that apply.	checkbox 1 practice_setting1 Community Practice 2 practice_setting2 Community Hospital 3 practice_setting3 University Hospital 4 practice_setting4 NCI designated Comprehensive Cancer Center
				5 practice_setting5 Other Cancer Centers 6 practice_setting6 Other Tertiary Center

	261	role_2	What is your role in relationship to the patient?	radio	o, Required
		Show the field ONLY if: [role] = '0'		1	Advanced practice practitioner who regularly sees patient
				2	Nurse who regularly sees patient
				3	Hematology/oncology fellow who regularly sees patient
				4	Triage personnel
				5	Hospitalist
				6	Intensivist
				99	Designee of a CCC19 participating institution
				7	Other
	262	other_role	Please specify	text,	Required
		Show the field ONLY if: [role] = '7'			
	263	email_1	Thank you very much for filling out this short survey. Due to IRB restrictions, we are not able to collect further personal details from you at this time. You may learn more about CCC19 by visiting the CCC19 website (clicking this link will open a new window).	desc	riptive
	264	comments_form_4	Please leave any general comments here, including what if anything we can do to make the survey better.	note	rs .
	265	respondent_details_complete	Section Header: Form Status Complete?	0	odown Incomplete Unverified Complete
Ins	trumen	it: Follow-up (followup)	Enabled as survey	ļ 	^ Collapse
	266	ts_5	Timestamp for the fifth form		(datetime_dmy) I Annotation: @HIDDEN @NOW_UTC
	267	fu_weeks	How far out from initial COVID-19 diagnosis are you making this	radio	o, Required
			report?	30	Approximately 30 days after COVID-19 diagnosis
				90	Approximately 90 days after COVID-19 diagnosis
				ОТІ	All other time intervals
	268	timing_of_report_weeks Show the field ONLY if: [fu_weeks] = 'OTH'	Please specify, in weeks, how much time has elapsed since initial COVID-19 diagnosis.	text	(number, Min: 0), Required

269	fu_reason	What is prompting this follow-up report?	radio, Required			
	Show the field ONLY if:		1	Hospitalization		
	[fu_weeks] = 'OTH'		2	Major change in clinical status other than hospitalization		
			3	Death		
			ОТН	Other		
270	fu_reason_oth	Please specify Do not record any PHI in this field. As a reminder, this	notes	S		
	Show the field ONLY if: [fu_reason] = 'OTH'	includes all elements of dates other than year.				
271	covid_19_status_fu	Section Header: COVID-19 follow-up details required	radio	, Required		
		Current COVID-19 status Fully recovered means that the patient has returned to their baseline functional status and repeat SARS-CoV-2	1	Fully recovered		
		testing, if obtained, is negative. If they are on medications to treat	1b	Recovered with complications		
		sequelae or have functional compromise (e.g., impaired pulmonary	2	Ongoing infection		
		function) but are not considered to have active infection, they should be considered to have recovered with complications.	3	Died		
			99	Unknown		
272	deceased_reason_fu_2	Please provide additional details about the proximal cause of death.	notes	otes, Required		
	Show the field ONLY if: [covid_19_status_fu] = '3'	Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.				
273	who_ordinal_scale	WHO Ordinal Scale for Clinical Improvement Please note that this	radio	radio, Required		
	Show the field ONLY if: ([fu_weeks] = '30' or [fu_weeks] = '9	scale is somewhat redundant to other questions here, but will help us to validate the scale as a reliable tool for determining disease severity at fixed time-based endpoints.	1	Ambulatory (Not hospitalized) with no limitation of activities		
	0') and [covid_19_status_fu] != '3'	!= '3'	2	Ambulatory (Not hospitalized) with limitation of activities		
			3	Hospitalized, no oxygen therapy		
			4	Hospitalized, requiring oxygen by mask or nasal prongs		
			5	Hospitalized, requiring non-invasive ventilation or high-flow oxygen		
			6	Hospitalized, requiring intubation and mechanical ventilation		
			7	Hospitalized, requiring ventilation + additional organ support - pressors, RRT, and/or ECMO		
			ОТН	Other - patient does not fit into any of these categories		
			UNK	Unknown		

274	who_ordinal_oth Show the field ONLY if: [who_ordinal_scale] = 'OTH'	Please briefly explain why the patient does not fit into any of the categories.	notes	iotes	
275	current_status_clinical_fu Show the field ONLY if: [covid_19_status_fu] = '2'	Current clinical status	radio, 1 2 3 4 5 6 7 8 OTH	Required Outpatient - Mild symptoms Outpatient - Moderate symptoms Outpatient - Severe symptoms Inpatient - Near Recovery Inpatient - Moderately ill Inpatient - Severely ill Critical (ICU) - Severely ill, not requiring ventilator support Critical (ICU) - Severely ill, intubated Other	
			99	Unknown	
276	current_status_clinical_specify_fu Show the field ONLY if: [current_status_clinical_fu] = 'OTH'	Please specify Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes	, Required	
277	worst_complications_severity_fu	Worst severity of COVID-19 complications. This answer should	radio,	Required	
	Show the field ONLY if:	capture the worst severity from the time of diagnosis to the time of this follow-up report.	0	None (patient was asymptomatic)	
	[covid_19_status_fu] = '1' or [covid_ 19_status_fu] = '1b' or [covid_19_st atus_fu] = '2'	this follow-up report.	1	Mild complications (mimimal symptoms from complications)	
	atus_iuj = 2		2	Moderate complications (moderate symptoms from complications)	
			3	Serious complications (symptoms substantially impact the patient's functional status or disabling physical functioning)	
			ОТН	Other	
			99	Unknown	

278	complications_severity_fu	Severity of COVID-19 complications at the time of this follow-up	checkbox, Required			
	Show the field ONLY if: [covid_19_status_fu] = '1b' or [covid_19_status_fu] = '2'	report. Check all that apply.	1	complications_severity_fu1	Mild complications (mimimal symptoms from complications)	
		2	complications_severity_fu2	Moderate complications (moderate symptoms from complications)		
			3	complications_severity_fu3	Serious complications (symptoms substantially impact the patient's functional status or disabling physical functioning)	
			OTH	complications_severity_fuoth	Other	
			99	complications_severity_fu99	Unknown	
279	complications_severity_oth_specify _fu Show the field ONLY if: [complications_severity_fu(OTH)] = '1'	Please specify Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes,	radio, Required O No 1 Yes 99 Unknown		
280	cancer_tx_fu Show the field ONLY if: [covid_19_status_fu] != '3'	Section Header: COVID-19 Effect on Cancer Treatment Was the patient's cancer treatment plan modified as a result of COVID-19?	0 N			
281	cancer_tx_fu_more Show the field ONLY if: [cancer_tx_fu] = '1'	Please provide additional details. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes			

282	cancer_status_fu	Cancer status at the time of this follow-up report. If the patient has	radio, Required	
202		multiple primaries, please report on the cancer that was most recently	1	Remission/NED
	Show the field ONLY if: [covid_19_status_fu] != '3'	treated.	-	
	[covia_19_status_iu]. 5		2	Active disease, responding to treatment
			3	Active disease, stable
			4	Active disease, progressing
			5	Active disease, status unknown or not yet assessed
			99	Unknown
283	hospice_fu	Section Header: COVID-19 follow-up details optional The following sections contain	radi	0
	Show the field ONLY if:	questions that will help us more fully understand the disease course of COVID-19. Most but not all of these questions are optional.	0	No
	[hospice] != '1'	Since you last reported on this patient, were they transitioned to	1	Yes
		hospice?	99	Unknown
284	hospice_fu_more	Please specify why the patient was transitioned to hospice.	note	es
	Show the field ONLY if: [hospice_fu] = '1'			
285	hosp_status_fu	Since you last reported on this patient, were they admitted to the	radi	o, Required
	Show the field ONLY if: [current_status] = '1' or [current_status] = '2' or [current_status] = '3' o	hospital?	0	No
			1	Yes - admitted to floor for the duration of the illness
	r [current_status] = '4' or [current_s		2	Yes - admitted to floor and then transferred to the ICU
	tatus_clinical] = '1' or [current_statu		3	Yes - admitted directly to the ICU
	s_clinical] = '2' or [current_status_clinical] = '3' or [worst_status_clinica		99	Unknown
	l] = '1' or [worst_status_clinical] = '2' or [worst_status_clinical] = '3'			
286	admission_reason_fu	Was the admission related to COVID-19 or complications of COVID-19?	radi	o, Required
	Show the field ONLY if:		1	Definitely related
	[hosp_status_fu] = '1' or [hosp_stat		2	Possibly related
	us_fu] = '2' or [hosp_status_fu] = '3'		3	Unrelated
			99	Unknown
287	hosp_los_fu	If known, how long was the length of stay, in days?	text	(integer, Min: 1)
	Show the field ONLY if: [hosp_status_fu] = '1'			
288	hosp_los_fu_2	If known, how long was the length of stay prior to transfer to the ICU,	text	(integer, Min: 1)
	Show the field ONLY if: [hosp_status_fu] = '2'	in days?		

289	icu_los_fu	If known, how long was the ICU length of stay, in days?	text (i	nteger,	Min: 1)	
	Show the field ONLY if: [hosp_status_fu] = '2' or [hosp_stat us_fu] = '3'					
290	current_status_fu	What is the patient's current location?	radio			
			2 (Outpati	ent - follow up	
			4	ER - Foll	ow up	
			5 I	Hospita	lized (non-ICU) - new admit	
			6 I	Hospita	lized (non-ICU) - continued	
			7 I	ICU - ne	w admit	
			8 1	ICU - co	ntinued	
			9 1	None - p	patient is deceased	
			99 l	Unknow	vn	
291	days_to_death_fu	Approximately how many days elapsed between COVID-19 diagnosis	text (i	text (integer, Min: 0), Required		
	Show the field ONLY if: [current_status_fu] = '9' or [fu_reas on] = '3'	and death? If this information is unknown to you, please enter 9999 here.	,			
292	deceased_reason_fu	Please provide additional details about the proximal cause of death.	notes	, Requir	red	
	Show the field ONLY if: [current_status_fu] = '9'	Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.				
293	c19_complications_systemic_fu	Section Header: COVID-19 Additional Complications Please report any new	check	box, Re	quired	
		complications that have arisen since completing the most recent form. Systemic complications during the follow-up period. Check all that	5096	0005	c19_complications_systemic_fu50960005	Bleed
		apply. If there were no additional systemic complications, please check "No additional complications".	6740	6007	c19_complications_systemic_fu67406007	Disser intrav coagu (DIC)
			5765	3000	c19_complications_systemic_fu57653000	Multic failure
			9130	2008	c19_complications_systemic_fu91302008	Sepsis
			2381	47009	c19_complications_systemic_fu238147009	9 Other
			NON	IE	c19_complications_systemic_funone	No ad
			UNK		c19_complications_systemic_fuunk	Unkn
			Field A	Annotat	ion: Terminology: SNOMED	

294	c19_bleeding_fu	Please specify the type of bleeding. Check all that apply.	checkbox			
	Show the field ONLY if: [c19_complications_systemic_fu(50 960005)] = '1'		112648003	c19_bleeding_fu112648003	Major bleeding (requiring multiple RBCs transfusion or ICU admit)	
			73099002	c19_bleeding_fu73099002	Non-major but clinically relevant bleed	
			127563002	c19_bleeding_fu127563002	Minor bleed (without transfusion need)	
			230690007- Major	c19_bleeding_fu230690007_major	CNS hemorrhage extensive	
			230690007- Minor	c19_bleeding_fu230690007_minor	CNS hemorrhag limited	
			OTH	c19_bleeding_fuoth	Other	
			UNK	c19_bleeding_fuunk	Unknown	
			Field Annotation: Terminology: SNOMED-modified			
295	c19_bleeding_oth_specify_fu Show the field ONLY if: [c19_bleeding_fu(OTH)] = '1'	Please specify further details about bleeding. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes			
296	dic_more_fu	Please provide further details about DIC, including clinical	notes			
	Show the field ONLY if: [c19_complications_systemic_fu(67 406007)] = '1'	manifestations. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.				
297	c19_comp_systemic_specify_fu Show the field ONLY if: [c19_complications_systemic_fu(23 8147009)] = '1'	Please specify other systemic complications. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes			

Check "No additional complications". Failure	-							
299 c19_complications_pulm_fu Pulmonary complications during the follow-up period. Check all that apply. If there were no additional pulmonary complications, please check "No additional complications". Pulmonary complications, plum_fu_409622000 c19_complications_pulm_fu_60046008 c19_complications_pulm_fu_60046008 c19_complications_pulm_fu_60046008 c19_complications_pulm_fu_60046008 c19_complications_pulm_fu_0_50043002 c19_complications_pulm_fu_0_50043002 c19_complications_pulm_fu_60046008 c19_complications_pulm_fu_60046008 c19_complications_pulm_fu_0_50043002 c19_complications_pulm_fu_	298	o2_requirement_fu	Did the patient require supplemental O2 during the follow-up period?	0	No Yes			
apply. If there were no additional pulmonary complications, please check "No additional complications". 499622000 c19_complications_pulm_fu409622000 Respirations_pulm_fu409622000 Respirations_pulm_fu409622000 Respirations_pulm_fu6006000 Respirations_pulm_fu60060				99	Unknow	/n		
check "No additional complications". Failure 205237003 19_complications_pulm_fu67782005 ARDS 59282003 c19_complications_pulm_fu67782003 ARDS 59282003 c19_complications_pulm_fu60046008 Pleural effusion 60046008 c19_complications_pulm_fu50043002 C19_complications_	299	c19_complications_pulm_fu		chec	kbox, Re	quired		
300 resp.failure_tx_fu Show the field ONLY if: [c19_complications_pulm_fu](40962 2000)] = "1" or [o2_requirement_fu] = "1" Show the field ONLY if: [c19_complications_pulm_fu] = "1" Show the field ONLY if: [c19_complications_pulm_fu] = "1" Show the field ONLY if: [c19_complications_pulm_fu] Were the Berlin criteria formally assessed? Show the field ONLY if: [c19_complications_pulm_fu] Were the Berlin criteria formally assessed? Tadio O No No O No				409	622000	c19_complications_pulm	_fu409622000	Respirat failure
Sp282003 C19_complications_pulm_fu60046008 Pleural reduces				205	237003	c19_complications_pulm	_fu205237003	Pneumo
Show the field ONLY if: [c19_complications_pulm_fu(40962 2000]] = 11' or [o2_requirement_fu]				677	'82005	c19_complications_pulm	_fu67782005	ARDS
Show the field ONLY if: [19_complications_pulm_fu] = '1' Show the field ONLY if: Show the				592	82003	c19_complications_pulm	_fu59282003	Pulmon embolis
South State				600)46008	c19_complications_pulm	_fu60046008	Pleural effusion
NONE c19_complications_pulm_funone No add complik				312	682007	c19_complications_pulm	_fu312682007	Empyen
Complications_pulm_fuunk				500	43002	c19_complications_pulm	_fu50043002	Other
Show the field ONLY if: [c19_complications_pulm_fu(40962 2000)] = '1' or [o2_requirement_fu] Show the field ONLY if: [c19_complications_pulm_fu(40962 2000)] = '1' or [o2_requirement_fu] Show the field ONLY if: [c19_complications_pulm_fu(40962 2000)] = '1' or [o2_requirement_fu] Show the field ONLY if: [c19_complications_pulm_fu(67782 005)] = '1' Show the field ONLY if: [c19_complications_pulm_fu(67782 005)] = '1' Show the field ONLY if: [c19_complications_pulm_fu(67782 005)] = '1' Show the field ONLY if: [c19_complications_pulm_fu(67782 005)] = '1' Show the field ONLY if: [c19_complications_pulm_fu(67782 005)] = '1' Show the field ONLY if: [c19_complications_pulm_fu(67782 005)] = '1' Show the field ONLY if: [c19_complications_pulm_fu(67782 005)] = '1' Show the field ONLY if: [c19_complications_pulm_fu(67782 005)] = '1' Show the field ONLY if: [c19_complications_pulm_fu(67782 005)] = '1' Show the field ONLY if: [c19_complications_pulm_fu(67782 005)] = '1' Show the field ONLY if: [c19_complications_pulm_fu(67782 005)] = '1' Show the field ONLY if: [c19_complications_pulm_fu(67782 005)] = '1' Show the field ONLY if: [c19_complications_pulm_fu(67782 005)] = '1' Show the field ONLY if: [c19_complications_pulm_fu(67782 005)] = '1' Show the field ONLY if: [c19_complications_pulm_fu(67782 005)] = '1' Show the field ONLY if: [c19_complications_pulm_fu(67782 005)] = '1' Show the field ONLY if: [c19_complications_pulm_fu(67782 005)] = '1' Show the field ONLY if: [c19_complications_pulm_fu(67782 005)] = '1' Show the field ONLY if: [c19_complications_pulm_fu(67782 005)] = '1' Show the field ONLY if: [c19_complications_pulm_fu(67782 005)] = '1' Show the field ONLY if: [c19_complications_pulm_fu(67782 005)] = '1' Show the field ONLY if: [c19_complications_pulm_fu(67782 005)] = '1' Show the field ONLY if: [c19_complications_pulm_fu(67782 005)] = '1' Show the field ONLY if				NO	NE	c19_complications_pulm	_funone	No addi complic
300 resp_failure_tx_fu Show the field ONLY if: [c19_complications_pulm_fu(40962 2000)] = '1' or [o2_requirement_fu] = '1' Which of the following supplemental O2 interventions did the patient require? Select the most invasive intervention required during the follow-up period. Which of the following supplemental O2 interventions did the patient require? Select the most invasive intervention required during the follow-up period. 1				UNI	K	c19_complications_pulm	_fuunk	Unknow
Show the field ONLY if: [c19_complications_pulm_fu(40962 2000)] = '1' or [o2_requirement_fu] = '1' 301 berlin_yn_fu Show the field ONLY if: [c19_complications_pulm_fu(67782 005)] = '1' Show the field ONLY if: [c19_complications_pulm_fu(67782 005)] = '1' require? Select the most invasive intervention required during the follow-up period. 1				Field	l Annotat	ion: Terminology: SNOME	D	
Show the field ONLY if: [c19_complications_pulm_fu(40962 2000)] = '1' or [o2_requirement_fu] = '1' Show the field ONLY if: C19_complications_pulm_fu(40962 2000)] = '1' or [o2_requirement_fu]	300	resp_failure_tx_fu		radio)			
Complications_pulm_ru(40962 2000)] = '1' or [o2_requirement_fu]		Show the field ONLY if:		1	Nasal ca	nnula with standard O2		
a			Tollow-up period.	2	High-flo	w nasal cannula		
Show the field ONLY if: [c19_complications_pulm_fu(67782 005)] = '1' S BiPAP 6 Intubation 99 Unknown 99 Unknown 99 Unknown 99 Unknown 199 Un				3	Non-reb	preather		
301 berlin_yn_fu Show the field ONLY if: [c19_complications_pulm_fu(67782 005)] = '1' Were the Berlin criteria formally assessed? Fradio O No 1 Yes				4	CPAP			
301 berlin_yn_fu Show the field ONLY if: [c19_complications_pulm_fu(67782 005)] = '1' Were the Berlin criteria formally assessed? radio 0 No 1 Yes				5	BiPAP			
301 berlin_yn_fu Show the field ONLY if: [c19_complications_pulm_fu(67782 005)] = '1' Were the Berlin criteria formally assessed? radio 0 No 1 Yes				6	Intubati	on		
Show the field ONLY if: [c19_complications_pulm_fu(67782 005)] = '1'				99	Unknow	'n		
[c19_complications_pulm_fu(67782	301	berlin_yn_fu	Were the Berlin criteria formally assessed?	radio)			
005)] = '1'				0	No			
				1	Yes			
		003)] - 1		99	Unknow	n/Unsure		

302	berlin_fu Show the field ONLY if: [berlin_yn_fu] = '1'	Berlin criteria. The Berlin criteria are based on a decreased PaO2/FiO2 ratio:-mild ARDS: 201 - 300 mmHg (\leq 39.9 kPa)-moderate ARDS: 101 - 200 mmHg (\leq 26.6 kPa)-severe ARDS: \leq 100 mmHg (\leq 13.3 kPa)Note that the Berlin definition requires a minimum positive end expiratory pressure (PEEP) of 5 cmH2O for consideration of the PaO2/FiO2 ratio. This degree of PEEP may be delivered noninvasively with CPAP to diagnose mild ARDS.	radio, Required 1 Mild 2 Moderate 3 Severe 99 Unknown
303	c19_comp_pulm_specify_fu Show the field ONLY if: [c19_complications_pulm_fu(50043 002)] = '1'	Please specify other pulmonary complications. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes

304	c19_complications_card_fu	Cardiovascular complications during the follow-up period. Check all	checkbox, Re	quired	
		that apply. If there were no additional cardiovascular complications, please check "No additional complications".	45007003	c19_complications_card_fu45007003	Hypotens
			22298006	c19_complications_card_fu22298006	Myocardia infarction
			414545008	c19_complications_card_fu414545008	Other care
			49436004	c19_complications_card_fu49436004	Atrial fibri
			71908006	c19_complications_card_fu71908006	Ventricula fibrillation
		698247007	c19_complications_card_fu698247007	Other care	
			85898001	c19_complications_card_fu85898001	Cardiomy
			42343007	c19_complications_card_fu42343007	Congestiv heart failu (CHF)
			59282003	c19_complications_card_fu59282003	Pulmonar embolism
			128053003	c19_complications_card_fu128053003	Deep vend thrombos (DVT)
			275517008	c19_complications_card_fu275517008	Superfidia venous thrombos (SVT)
			230690007	c19_complications_card_fu230690007	Cerebrova accident (stroke)
			414086009	c19_complications_card_fu414086009	Thrombos NOS
			49601007	c19_complications_card_fu49601007	Other
			NONE	c19_complications_card_funone	No addition
			UNK	c19_complications_card_fuunk	Unknown
			UNK	,	cor

05 h						
יון כט	notn_pressors_fu	Did the patient require pressors?	radio		_	
Sł	show the field ONLY if:		0 No)		
			1 Yes	5		
00	03)] = '1'		99 Unl	known		
Sh [c 00 rd m	show the field ONLY if: c19_complications_card_fu(49601 i07)] = '1' or [c19_complications_ca d_fu(414545008)] = '1' or [c19_co nplications_card_fu(698247007)] =	Please specify other cardiac complications. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes			
07 c1	19_complications_gi_fu	Gastrointestinal complications during the follow-up period. Check all	checkbo	Х		
	that apply. If there were no additional GI complications, please check "No additional complications".	427044	1009 c	19_complications_gi_fu427044009	Acute hepat injury	
			389026	5000 c	19_complications_gi_fu389026000	Ascites
			810600	008 c	:19_complications_gi_fu81060008	Bowel obstruction
			569050)09 c	:19_complications_gi_fu56905009	Bowel perforation
			710572	2000 c	19_complications_gi_fu710572000	lleus
			486610	000 c	19_complications_gi_fu48661000	Peritonitis
			536190	000 c	19_complications_gi_fu53619000	Other
			NONE	c	.19_complications_gi_funone	No addition
			UNK	С	19_complications_gi_fuunk	Unknown
			Field Anr	notatio	on: Terminology: SNOMED	
08 c1	19_comp_gi_specify_fu	Please specify other GI complications. Do not record any PHI in this	notes			
[c	c19_complications_gi_fu(5361900	field. As a reminder, this includes all elements of dates other than year.				
	06 c c c c c c c c c c c c c c c c c c c	Show the field ONLY if: [c19_complications_card_fu(45007 003)] = '1' 06 c19_comp_card_specify_fu Show the field ONLY if: [c19_complications_card_fu(49601 007)] = '1' or [c19_complications_card_fu(414545008)] = '1' or [c19_complications_card_fu(698247007)] = '1' 07 c19_complications_gi_fu	Show the field ONLY if: [c19_comp_card_specify_fu Show the field ONLY if: [c19_complications_card_fu(45007 003)] = '1' Please specify other cardiac complications. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year. Please specify other cardiac complications. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year. Gastrointestinal complications during the follow-up period. Check all that apply. If there were no additional GI complications, please check "No additional complications". Show the field ONLY if: [c19_complications_gi_fu(5361900] Please specify other GI complications. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	Show the field ONLY if: [c19_complications_card_fu(45007 003)] = '1' C19_compcard_specify_fu Show the field ONLY if: [c19_complications_card_fu(49601 007)] = '1' or [c19_complications_card_fu(49601 007)] = '1' or [c19_complications_card_fu(49601 007)] = '1' or [c19_complications_card_fu(698247007)] = '1' C19_complications_gi_fu Gastrointestinal complications during the follow-up period. Check all that apply. If there were no additional GI complications, please check "No additional complications". Gastrointestinal complications". Gastrointestinal complications during the follow-up period. Check all that apply. If there were no additional GI complications, please check "No additional complications". C19_complications_gi_fu	Show the field ONLY if: [c19_complications_card_fu(45007 003]] = '1' Ves	Show the field ONLY If: [c19_complications_card_fu(45007 003)] = '11' Display the field ONLY If: [c19_complications_card_fu(45007 007)] = '1' or [c19_complications_card_fu(4901 007)] = '1' or [c19_complications_card_fu(698247007)] = '1' Other functions_card_fu(698247007)] = '1' Display the functions_gi_fu Gastrointestinal complications during the follow-up period. Check all that apply. If there were no additional Gromplications, please check "No additional complications". Gastrointestinal complications, please check "No additional complications". Gastrointestinal complications during the follow-up period. Check all that apply. If there were no additional Gromplications, please check "No additional complications". Additional complications during the follow-up period. Check all that apply. If there were no additional Gromplications, please check "No additional complications". Additional complications during the follow-up period. Check all that apply. If there were no additional Gromplications, please check "No additional complications". Additional complications during the follow-up period. Check all that apply. If there were no additional Gromplications, please check "No additional Gromplications, gl_fu_427044009 and that apply. If there were no additional Gromplications, please check "No additional Gromplications during the follow-up period. Check all that apply. If there were no additional Gromplications, please check "No additional Gromplications during the follow-up period. Check all that apply. If there were no additional Gromplications, please check "No additional Gromplications during the follow-up period. Check all that apply if the follow-up

309	c19_complications_other_fu	Other complications during the follow-up period. Check all that apply.	checkbox, Red	quired	
		If there were no additional other complications, please check "No additional complications".	14669001		Acute ki injury
			91175000	c19_complications_other_fu91175000	Seizures
			372070002	c19_complications_other_fu372070002	Gangren
			414086009		Thrombo NOS
			362965005	c19_complications_other_fu362965005	Other
			NONE		No addit complica
			UNK	c19_complications_other_fuunk	Unknowi
			Field Annotati '414086009'	on: Terminology: SNOMED @HIDECHOICE =	
310	c19_complications_oth_specify_fu	Please specify other complications. Do not record any PHI in this field.	notes		
	Show the field ONLY if: [c19_complications_other_fu(36296 5005)] = '1'	As a reminder, this includes all elements of dates other than year.			
311	c19_addl_treatment	Section Header: COVID-19 Additional Treatment	radio	_	
		Did the patient receive any additional treatments for COVID-19 or its sequelae?	0 No		
			1 Yes 99 Unknow	n	
312	additional_tx_fu Show the field ONLY if: [c19_addl_treatment] = '1'	Additional treatment comments, e.g. specific doses. Please provide further information here. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes		
313	covid_19_treatment_fu	Additional COVID-19 treatment. Check all that apply.	checkbox		
	Show the field ONLY if:		RXCUI-2393	covid_19_treatment_furxcui_2393	Chloro
	[c19_addl_treatment] = '1'		RXCUI-5521	covid_19_treatment_furxcui_5521	Hydro (Plaqu
			HO-44995	covid_19_treatment_fuho_44995	Anti-vi
			ATC-J05AE08	covid_19_treatment_fuatc_j05ae08	Atazar
			ATC-J05AR10	covid_19_treatment_fuatc_j05ar10	Lopina
			RXCUI-26010	1 covid_19_treatment_furxcui_260101	Oselta (Tamif

RXCUI-18631	covid_19_treatment_furxcui_18631	Azithro (Zithro
HO-45523	covid_19_treatment_fuho_45523	Systen corticc promp additic
ATC-C10AA	covid_19_treatment_fuatc_c10aa	Statins
RXCUI-612865	covid_19_treatment_furxcui_612865	Tociliz
L04AA37	covid_19_treatment_ful04aa37	Baricit
ATC-L04AC	covid_19_treatment_fuatc_l04ac	Other inhibit promp additic
HO-45861	covid_19_treatment_fuho_45861	JAK inh promp additic
ATC-L04AB	covid_19_treatment_fuatc_l04ab	TNF al (will pr additic
B05AX03	covid_19_treatment_fub05ax03	Plasma recove individ (conva plasma
B01A	covid_19_treatment_fub01a	Antico
N02BA	covid_19_treatment_fun02ba	Aspirir
B01AC	covid_19_treatment_fub01ac	Antipla other t
233573008	covid_19_treatment_fu233573008	Extraco memb oxyger
714749008	covid_19_treatment_fu714749008	Contin replace therap
OTH	covid_19_treatment_fuoth	Other
UNK	covid_19_treatment_fuunk	Unkno
NONE	covid_19_treatment_funone	None
oth_plasma	covid_19_treatment_fuoth_plasma	DEPRE

			Field Annotation: Terminologies: ATC/HemOnc/OMOP/RxNorm/SNOMED @HIDECHOICE='oth_plasma'		
314	steroid_type_fu	Steroid type. Check all that apply.	checkbox		
	Show the field ONLY if: [covid_19_treatment_fu(HO-4552		H02AB02 steroid_type_fuh02ab02 Dexamethasone (Decadron)		
	3)] = '1'		H02AB09 steroid_type_fuh02ab09 Hydrocortisone (Cortef)		
			H02AB04 steroid_type_fuh02ab04 Methylprednisolone (Solumedrol)		
			H02AB06 steroid_type_fuh02ab06 Prednisolone		
			H02AB07 steroid_type_fuh02ab07 Prednisone		
			Field Annotation: Terminology: ATC		
315	steroid_specific_fu	Steroid dosing, in prednisone dose equivalents Note: 3 mg of	radio		
	Show the field ONLY if:	dexamethasone is equivalent to 20 mg of prednisone, so any dose of dexamethasone of more than 3 mg/day (21 mg/week) would be	1 20 mg/day or below [low dose]		
	[covid_19_treatment_fu(HO-4552 3)] = '1'	equivalant to more than 20 mg of prednisone/day.	1a 10 mg/day or below [low dose]		
	5/1		1b More than 10 mg/day up to 20 mg/day		
			2 More than 20 mg/day but less than 1mg/kg/day		
			3 Equal to or greater than 1 mg/kg/day		
			99 Unknown		
			Field Annotation: @HIDECHOICE='1'		
316	steroid_more_fu Show the field ONLY if: [covid_19_treatment_fu(HO-4552 3)] = '1'	Please provide more details: prednisone dose equivalents (e.g., 1 mg/kg) and duration of steroid therapy. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes		
317	c19_aspirin_dose_fu	Aspirin dosing	radio		
	Show the field ONLY if:		262459003 Low dose (less than 200 mg/day)		
	[covid_19_treatment_fu(N02BA)] =		261829003 Full dose		
	1		261665006 Unknown		
			Field Annotation: Terminology: SNOMED		

3	318	c19_anticoag_type_fu	Which anticoagulants were used? Check all that apply.	checkbox		
		Show the field ONLY if: [covid_19_treatment_fu(B01A)] = '1'		B01AA	c19_anticoag_type_fub01aa	Vitamin K antagonists (e.g., warfarin)
				B01AB	c19_anticoag_type_fub01ab	Low-molecular weight heparin (e.g., enoxaparin [Lovenox])
				B01AB01	c19_anticoag_type_fub01ab01	Unfractionated heparin
			B01AE	B01AE	c19_anticoag_type_fub01ae	Direct thrombin inhibitors (e.g., argatroban, dabigatran [Pradaxa])
			B01AF	c19_anticoag_type_fub01af	Direct factor Xa inhibitors (e.g., apixaban [Eliquis], rivaroxaban [Xarelto])	
				B01AX05	c19_anticoag_type_fub01ax05	Fondaparinux
				UNK	c19_anticoag_type_fuunk	Unknown
				ОТН	c19_anticoag_type_fuoth	Other
3	319	c19_anticoag_type_oth_specify_fu Show the field ONLY if: [c19_anticoag_type_fu(OTH)] = '1'	Please specify Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes		

320	c19_anticoag_reason_fu	What was the purpose of the anticoagulant treatment? Check all that	checkk	OOX	
	Show the field ONLY if: [covid_19_treatment_fu(B01A)] = '1'	apply.	1	c19_anticoag_reason_fu1	Prophylactic use (without the presence of a VTE either as an inpatient or outpatient)
			2	c19_anticoag_reason_fu2	Therapeutic use (for known VTE or ATE history)
			2a	c19_anticoag_reason_fu2a	Therapeutic use (for known VTE diagnosis)
			2b	c19_anticoag_reason_fu2b	Therapeutic use (for known ATE diagnosis)
			2c	c19_anticoag_reason_fu2c	Therapeutic use in the absence of any thrombosis (e.g., for prevention of stroke in atrial fibrillation)
			3	c19_anticoag_reason_fu3	For DIC during hospitalization
			UNK	c19_anticoag_reason_fuunk	Unknown
			ОТН	c19_anticoag_reason_fuoth	Other
			Field A	nnotation: @HIDECHOICE='2'	
321	c19_anticoag_reason_oth_specify_f u Show the field ONLY if: [c19_anticoag_reason_fu(OTH)] = '1'	Please specify Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes		

	322	covid_19_tx_interleukin_fu	Interleukin inhibitor treatment other than tocilizumab. Check all that	checkbox				
		Show the field ONLY if:	apply.	L04AC03	covid_19_tx_interleukin_fu_	_l04ac03	anakinra	
		[covid_19_treatment_fu(ATC-L04A		L04AC02	covid_19_tx_interleukin_fu_	_l04ac02	basiliximab	
		C)] = '1'		L04AC09	covid_19_tx_interleukin_fu_	_l04ac09	briakinumab	
				L04AC12	covid_19_tx_interleukin_fu_	_l04ac12	brodalumab	
				L04AC08	covid_19_tx_interleukin_fu_	_l04ac08	canakinumab	
				L04AC01	covid_19_tx_interleukin_fu_	_l04ac01	daclizumab	
			L04AC16	covid_19_tx_interleukin_fu_	_l04ac16	guselkumab		
			L04AC13	covid_19_tx_interleukin_fu_	_l04ac13	ixekizumab		
			L04AC04	covid_19_tx_interleukin_fu_	_l04ac04	rilonacept		
				L04AC18	covid_19_tx_interleukin_fu_	_l04ac18	risankizumab	
				L04AC14	covid_19_tx_interleukin_fu_	_l04ac14	sarilumab	
				L04AC10	covid_19_tx_interleukin_fu_	_l04ac10	secukinumab	
				L04AC11	covid_19_tx_interleukin_fu_	_l04ac11	siltuximab	
				L04AC15	covid_19_tx_interleukin_fu_	_l04ac15	sirukumab	
				L04AC17	covid_19_tx_interleukin_fu_	_l04ac17	tildrakizumab	
				L04AC07	covid_19_tx_interleukin_fu_	_l04ac07	DEPRECATED	
				L04AC05	covid_19_tx_interleukin_fu_	_l04ac05	ustekinumab	
				Field Annotation: Field:ATC L04AC; Values:ATC @HIDECHOICE='L04AC07'				
	323	jak_fu	JAK inhibitor treatment. Check all that apply.	checkbox				
		Show the field ONLY if:		L01XE18	jak_ful01xe18	Ruxol	itinib (Jakafi)	
		[covid_19_treatment_fu(HO-4586 1)] = '1'		L04AA29	jak_ful04aa29	Tofaci	tinib (Xeljanz)	
		17)] - 1		RXCUI- 1487006	jak_furxcui_148700	Oclac	tinib	
				L04AA37	jak_ful04aa37	Barici	tinib	
				Peficitinib	jak_fupeficitinib	Peficit	tinib	
				L01XE57	jak_ful01xe57	Fedra	tinib (Inrebic)	
				L04AA44	jak_ful04aa44	Upada	acitinib	
				Field Anno	otation: Terminologies: ATC, R	Norm		

324	covid_19_tx_tnf_fu	Tumor necrosis factor alpha (TNF-α) inhibitor treatment. Check all that	checkbox		
	Show the field ONLY if: [covid_19_treatment_fu(ATC-L04A B)] = '1'	apply.	L04AB04 covid	l_19_tx_tnf_ful04ab04 Adalimumak)
			L04AB03 covid	l_19_tx_tnf_ful04ab03 Afelimomab	
			L04AB05 covid	l_19_tx_tnf_ful04ab05 Certolizuma	b pegol
			L04AB01 covid	l_19_tx_tnf_ful04ab01 Etanercept	
			L04AB06 covid	l_19_tx_tnf_ful04ab06 Golimumab	
			L04AB02 covid	l_19_tx_tnf_ful04ab02 Infliximab	
			L04AB07 covid	l_19_tx_tnf_ful04ab07	
			Field Annotation: Field:ATC L04AB; Values:ATC		
325	covid_19_treatment_trial_fu	Was any of the additional COVID-19 treatment given as part of a	radio		
	Show the field ONLY if:	clinical trial?	0 No		
	[c19_addl_treatment] = '1'		1 Yes		
			99 Unknown		
326	covid_19_trial_tx_fu	COVID-19 clinical trial treatment. Check all that apply. If you do not	checkbox, Requir	red I	1
	Show the field ONLY if: [covid_19_treatment_trial_fu] = '1'	know which drug(s) were given on clinical trial, please check "Unknown". If you are not able to disclose drug names due to institutional restrictions, please check "Other".	RXCUI-2393	covid_19_trial_tx_furxcui_2393	Chloroq
			RXCUI-5521	covid_19_trial_tx_furxcui_5521	Hydroxy (Plaque
			HO-44995	covid_19_trial_tx_fuho_44995	Anti-vira
			ATC-J05AE08	covid_19_trial_tx_fuatc_j05ae08	Atazana
			ATC-J05AR10	covid_19_trial_tx_fuatc_j05ar10	Lopinav
			RXCUI-260101	covid_19_trial_tx_furxcui_260101	Oseltan (Tamiflu
			OMOP4873974	covid_19_trial_tx_fuomop4873974	Remdes
			RXCUI-18631	covid_19_trial_tx_furxcui_18631	Azithron (Zithron
			HO-45523	covid_19_trial_tx_fuho_45523	Systemi corticos
			ATC-C10AA	covid_19_trial_tx_fuatc_c10aa	Statins
			L04AC03	covid_19_trial_tx_ful04ac03	anakinr
			L04AA37	covid_19_trial_tx_ful04aa37	Baricitin
			L04AC02	covid_19_trial_tx_ful04ac02	basilixin
			L04AC09	covid_19_trial_tx_ful04ac09	briakinu
			L04AC12	covid_19_trial_tx_ful04ac12	brodalu

1		
L04AC08	covid_19_trial_tx_ful04ac08	canakinur
L04AC01	covid_19_trial_tx_ful04ac01	daclizuma
L04AC16	covid_19_trial_tx_ful04ac16	guselkum
L04AC13	covid_19_trial_tx_ful04ac13	ixekizuma
L04AC04	covid_19_trial_tx_ful04ac04	rilonacept
L04AC18	covid_19_trial_tx_ful04ac18	risankizur
L04AC14	covid_19_trial_tx_ful04ac14	sarilumab
L04AC10	covid_19_trial_tx_ful04ac10	secukinur
L04AC11	covid_19_trial_tx_ful04ac11	siltuximat
L04AC15	covid_19_trial_tx_ful04ac15	sirukumal
L04AC17	covid_19_trial_tx_ful04ac17	tildrakizur
L04AC07	covid_19_trial_tx_ful04ac07	tocilizuma
L04AC05	covid_19_trial_tx_ful04ac05	ustekinun
L04AB04	covid_19_trial_tx_ful04ab04	adalimum
L04AB03	covid_19_trial_tx_ful04ab03	afelimom
L04AB05	covid_19_trial_tx_ful04ab05	certolizun
L04AB01	covid_19_trial_tx_ful04ab01	etanercep
L04AB06	covid_19_trial_tx_ful04ab06	golimurna
L04AB02	covid_19_trial_tx_ful04ab02	infliximab
L04AB07	covid_19_trial_tx_ful04ab07	opinercep
OTH-plasma	covid_19_trial_tx_fuoth_plasma	Plasma from recovered individual (convaleso plasma)
B05AX03	covid_19_trial_tx_fub05ax03	Plasma from recovered individual (convaleso plasma)
OTH	covid_19_trial_tx_fuoth	Other
UNK	covid_19_trial_tx_fuunk	Unknown

Field Annotation: Terminologies: ATC/HemOnc/OMOP/RxNorm @HIDECHOICE = 'OTH-plasma'

	327	covid_19_trial_more_fu Show the field ONLY if: [covid_19_trial_tx_fu(OTH)] = '1'	Please specify. (Note: some institutions have restrictions on sharing of this information, please check with your institutional official if you have any questions.) Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes				
	328	fu_info	Thank you for completing this form. If you have additional updates in the future, please use the link from the Survey Queue to return to the survey and add a new instance of the form.	descriptive				
	329	comments_form_5	Comments Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes				
	330	followup_complete	Section Header: Form Status Complete?	dropdown 0 Incomplete 1 Unverified 2 Complete				
Ins	nstrument: Manual Exclude (manual_exclude)							
	331	manual_exclude	Field to manually exclude records identified as needing exclusion (e.g., false positive PCR)	truefalse 1 True 0 False Field Annotation: @DEFAULT='0'				
	332	manual_exclude_more	Why was patient manually excluded?	notes				
	333	manual_exclude_complete	Section Header: Form Status Complete?	dropdown 0 Incomplete 1 Unverified 2 Complete				