COVID-19 and Cancer Consortium (CCC19) Registry   `PID 108899`

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📖 Codebook ▼

📖 Data Dictionary Codebook

06/17/2020 9:45am

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#	Variable / Field Name	Field Label *Field Note*	Field Attributes (Field Type, Validation, Choices, Calculations, etc.)
Instrument: **Screening form** (screening_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 Show the field ONLY if: [ccc19] = '1'	Please identify the participating institution.	dropdown (autocomplete), Required

181	Albert Einstein Cancer Center
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
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)
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
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

151	Houston Methodist Cancer Center
168	Huntsman Cancer Institute
146	Inova Schar Cancer Institute
108	Intermountain Healthcare
393	Segal Cancer Centre, Jewish General Hospital, McGill University
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
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
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
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
	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, Required 1 Yes 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.	radio x Exit the survey Stop actions on x
11	location Show the field ONLY if: [ccc19] = '0'	Are you based in any of the listed countries or regions?	radio, Required 1 United States or the U.S. territories EU European Union (EU) 11 Argentina 39 Canada 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 Show the field ONLY if: [location] = '0'	We're sorry, but the IRB does not allow us to collect data from your country at this time. However, we are actively looking into adding international participation on a country-by-country basis. Please visit our website for more information; you will be redirected there once you end the survey by clicking the button.	radio, Required x Exit the survey Stop actions on x
13	screening_form_complete	Section Header: *Form Status* Complete?	dropdown 0 Incomplete 1 Unverified 2 Complete

Instrument: **Patient Demographics**   (patient_demographics)   🗗 Enabled as survey   ⌃ Collapse

14	ts_1	Timestamp for the first form	text (datetime_dmy) Field Annotation: @HIDDEN @NOW_UTC

15	patient_id Show the field ONLY if: [ccc19] = '1'	Please enter your local unique patient identifier here (no PHI!). If this is a test case, please enter "9999".	text (integer, Min: 1), Required
16	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	Younger than 18
2	18-29
3	30-39
4	40-49
5	50-59
6	60-69
7	70-79
8	80-89
9	Older than 90
10	Unknown	
17	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
18	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)
19	gender	Gender	dropdown, Required | 0	Female
1	Male
2	Other
3	Prefer not to say	 Field Annotation: SNOMED: 263495000
20	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
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	Malaysia
132	Maldives
133	Mali

134	Malta
135	Marshall Islands
136	Martinique
137	Mauritania
138	Mauritius
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
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)
				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

	21	state_of_patient_residence Show the field ONLY if: [country_of_patient_residen] = '1'	State or territory of patient residence	dropdown (autocomplete), Required	
				AL	Alabama (AL)
				AK	Alaska (AK)
				AZ	Arizona (AZ)
				AR	Arkansas (AR)
				CA	California (CA)
				CO	Colorado (CO)
				CT	Connecticut (CT)
				DE	Delaware (DE)
				FL	Florida (FL)
				GA	Georgia (GA)
				HI	Hawaii (HI)
				ID	Idaho (ID)
				IL	Illinois (IL)
				IN	Indiana (IN)
				IA	Iowa (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)
MO	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)
OH	Ohio (OH)
OK	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)
	PR	Puerto Rico (PR)
	VI	U.S. Virgin Islands (VI)

22	city	What is the name of the city where the patient is receiving medical care? Optional, but will help with avoiding duplicate reports.	text
23	facility Show the field ONLY if: [ccc19] = '0'	What is the name of the healthcare facility where the patient is presenting? Optional, but will help with avoiding duplicate reports.	text
24	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 Yes 0 No

| 25 | race

Show the field ONLY if:
[more_demographics] = '1' or [ccc19] = '1' | Patient-reported race (check all that apply if patient identifies with more than one race) | checkbox |

1002-5	race___1002_5	American Indian/Alaska Native
2028-9	race___2028_9	Asian
2076-8	race___2076_8	Native Hawaiian or Other Pacific Islander
2054-5	race___2054_5	Black or African American
2106-3	race___2106_3	White
2131-1	race___2131_1	Other
UNK	race___unk	Unknown / Not Reported

Field Annotation: Value Set: 2.16.840.1.114222.4.11.6065

| 26 | ethnicity

Show the field ONLY if:
[more_demographics] = '1' or [ccc19] = '1' | Patient-reported ethnicity | radio

| 2135-2 | Hispanic or Latino |
| 2186-5 | NOT Hispanic or Latino |
UNK	Unknown / Not Reported	 Custom alignment: RH Field Annotation: Value Set: 2.16.840.1.114222.4.11.837
27	urban_rural Show the field ONLY if: [more_demographics] = '1' or [ccc19] = '1'	What type of area does the patient primarily reside in?	radio | 1	Urban (city)
2	Suburban (town, suburbs)
3	Rural (country)
88	Other
99	Unknown	
28	hcw Show the field ONLY if: [more_demographics] = '1' or [ccc19] = '1'	Is the patient a healthcare worker?	radio | 0	No
1	Yes
99	Unknown	
29	hcw_info Show the field ONLY if: [hcw] = '1'	We are currently developing a separate survey to collect more 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).	descriptive
30	ecog_status Show the field ONLY if: [more_demographics] = '1' or [ccc19] = '1'	ECOG performance status prior to infection Please record the ECOG 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 COVID-19 diagnosis, you should choose "No ECOG PS recorded within 3 months prior to COVID-19 diagnosis".	radio | 0	0: Fully active, able to continue with all pre-disease activities without restriction
1	1: Restricted in physically strenuous activity but ambulatory and able to carry out work of a light or sedentary nature, e.g., light house work, office work
2	2: Ambulatory and capable of all self-care but unable to carry out any work activities. Up and about more than 50% of waking hours
3	3: Capable of only limited self-care. Confined to bed or chair more than 50% of waking hours
4	4: Completely disabled. Cannot carry on any self-care. Totally confined to bed or chair
88	No ECOG PS recorded within the 3 months prior to COVID-19 diagnosis
99	Unknown	

31	smoking_status Show the field ONLY if: [more_demographics] = '1' or [ccc19] = '1'	Smoking status	radio	

1	Current smoker
2	Former smoker, NOS
2a	Former smoker, quit less than 1 year ago
2b	Former smoker, quit between 1 and 5 years ago
2c	Former smoker, quit between 6 and 10 years ago
2d	Former smoker, quit more than 10 years ago
3	Never smoker
99	Unknown

32	smoking_product Show the field ONLY if: [smoking_status] = '1' or [smoking_status] = '2a'	Types of inhaled smoking products. Check all that apply.	checkbox

722496004	smoking_product___722496004	Cigarettes
722497008	smoking_product___722497008	Cigars
722498003	smoking_product___722498003	e-Cigarettes
722495000	smoking_product___722495000	Hookah pipe
OTH	smoking_product___oth	Other
UNK	smoking_product___unk	Unknown

Field Annotation: Variable:SNOMED 698101006; Value set:SNOMED

33	smoking_product_oth_specify Show the field ONLY if: [smoking_product(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
34	height Show the field ONLY if: [more_demographics] = '1' or [ccc19] = '1'	Patient height, please specify units. If you know BMI, please skip this field and enter it below.	text
35	weight Show the field ONLY if: [more_demographics] = '1' or [ccc19] = '1'	Patient weight, please specify units. If you know BMI, please skip this field and enter it below.	text
36	bmi Show the field ONLY if: [more_demographics] = '1' or [ccc19] = '1'	Patient body mass index (BMI) in kg/m2	text (number, Min: 0)

37	surg_med_hx_header Show the field ONLY if: [more_demographics] = '1' or [ccc19] = '1'	Surgical and Medical History	descriptive		
38	recent_surgery Show the field ONLY if: [more_demographics] = '1' or [ccc19] = '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	
39	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	
40	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		
41	concomitant_meds Show the field ONLY if: [more_demographics] = '1' or [ccc19] = '1'	Concomitant medications being taken at time of presentation with COVID-19. Check all that apply.	checkbox		
			H02	concomitant_meds___h02	Corticosteroids
			L04A	concomitant_meds___l04a	Immunosuppress
			RXCUI-2393	concomitant_meds___rxcui_2393	Chloroquine
			RXCUI-5521	concomitant_meds___rxcui_5521	Hydroxychloroqu (Plaquenil)
			RXCUI-612865	concomitant_meds___rxcui_612865	Tocilizumab
			C09A	concomitant_meds___c09a	ACE inhibitors
			C09C	concomitant_meds___c09c	Angiotensin rece (ARBs)
			ATC-C10AA	concomitant_meds___atc_c10aa	Statins
			J01	concomitant_meds___j01	Antibiotics
			RXCUI-18631	concomitant_meds___rxcui_18631	Azithromycin (Zith Pak)
			HO-44995	concomitant_meds___ho_44995	Anti-virals

ATC-J05AR10	concomitant_meds___atc_j05ar10	Lopinavir/Ritonav
RXCUI-260101	concomitant_meds___rxcui_260101	Oseltamivir (Tami
N02BE01	concomitant_meds___n02be01	Tylenol (paracetamol/ace
M01A	concomitant_meds___m01a	Ibuprofen, napro NSAIDs
N02BA	concomitant_meds___n02ba	Aspirin
B01AC	concomitant_meds___b01ac	Antiplatelet agen aspirin
A10BA02	concomitant_meds___a10ba02	Metformin
A11CC	concomitant_meds___a11cc	Vitamin D
B01A	concomitant_meds___b01a	Anticoagulation
OTH	concomitant_meds___oth	Other
UNK	concomitant_meds___unk	Unknown
NONE	concomitant_meds___none	None

Custom alignment: LH
Field Annotation: Terminology: ATC, RxNorm

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42 steroid_specific_2

Show the field ONLY if:
[concomitant_meds(H02)] = '1'

Steroid dosing, in prednisone dose equivalents

radio

1	20 mg/day or below [low dose]
1a	10 mg/day or below [low dose]
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'

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43 aspirin_dose

Show the field ONLY if:
[concomitant_meds(N02BA)] = '1'

Aspirin dosing

radio

262459003	Low dose (less than 200 mg/day)
261829003	Full dose
261665006	Unknown

Field Annotation: Terminology: SNOMED

44	bl_anticoag_type Show the field ONLY if: [concomitant_meds(B01A)] = '1'	Which anticoagulants were used? Check all that apply.	checkbox

checkbox

B01AA	bl_anticoag_type___b01aa	Vitamin K antagonists (e.g., warfarin)
B01AB	bl_anticoag_type___b01ab	Low-molecular weight heparin (LMWH)
B01AB01	bl_anticoag_type___b01ab01	Unfractionated heparin
B01AE	bl_anticoag_type___b01ae	Direct thrombin inhibitors (e.g., argatroban)
B01AF	bl_anticoag_type___b01af	Direct factor Xa inhibitors (e.g., apixaban)
B01AX05	bl_anticoag_type___b01ax05	Fondaparinux
UNK	bl_anticoag_type___unk	Unknown
OTH	bl_anticoag_type___oth	Other

Field Annotation: Terminology: ATC

45	bl_anticoag_reason Show the field ONLY if: [concomitant_meds(B01A)] = '1'	Why were anticoagulants being used?	radio

radio

360271000	Prophylaxis
262202000	Therapeutic dosing
261665006	Unknown

Field Annotation: Terminology: SNOMED

46	bl_anticoag_type_oth_specify Show the field ONLY if: [bl_anticoag_type(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
47	meds_other Show the field ONLY if: [concomitant_meds(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

48	gcsf Show the field ONLY if: [more_demographics] = '1' or [ccc19] = '1'	Did the patient receive G-CSF within two weeks of the COVID-19 diagnosis?	radio	
			0	No
			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)
			OTH	Other
			UNK	Unknown
49	gcsf_oth_specify Show the field ONLY if: [gcsf] = 'OTH'	Please specify Do not record any PHI in this field. As a reminder, this includes all elements of date other than year.	notes	
50	additional_meds Show the field ONLY if: [more_demographics] = '1' or [ccc19] = '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	
51	influenza_vax Show the field ONLY if: [more_demographics] = '1' or [ccc19] = '1'	Did the patient have an influenza vaccine this season?	radio	
			0	No
			1	Yes
			99	Unknown
52	bcg_vax Show the field ONLY if: [more_demographics] = '1' or [ccc19] = '1'	Has the patient ever had a BCG vaccine?	radio	
			0	No
			1	Yes
			99	Unknown
53	blood_type_rh Show the field ONLY if: [more_demographics] = '1' or [ccc19] = '1'	Patient RH blood type	radio	
			165747007	Rh+
			165746003	Rh-
			99	Unknown
			Field Annotation: SNOMED: 115758001	

54	blood_type Show the field ONLY if: [more_demographics] = '1' or [ccc19] = '1'	Patient ABO blood type	radio 	A	A
B	B
AB	AB
O	O
99	Unknown	 Field Annotation: SNOMED: 112143006
55	comorbid_header Show the field ONLY if: [more_demographics] = '1' or [ccc19] = '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
56	significant_comorbidities Show the field ONLY if: [more_demographics] = '1' or [ccc19] = '1'	Significant comorbidities (other than cancer). Check all that apply. If 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 chemotherapy, use of nonsteroidal immunosuppressive agents for solid organ transplant or for an autoimmune disease.	checkbox | 38013005	significant_comorbidities___38013005	Immune suppression (see definition)
62479008	significant_comorbidities___62479008	HIV +/- AIDS
19829001	significant_comorbidities___19829001	Pulmonary d...
195967001	significant_comorbidities___195967001	Asthma
13645005	significant_comorbidities___13645005	COPD/Emph...
78275009	significant_comorbidities___78275009	Obstructive ...
84004001	significant_comorbidities___84004001	Radiation pr...
427046006	significant_comorbidities___427046006	ICI pneumon...
56265001	significant_comorbidities___56265001	Cardiac dise...
38341003	significant_comorbidities___38341003	Hypertension...
53741008	significant_comorbidities___53741008	Coronary ar... (CAD)
42343007	significant_comorbidities___42343007	Congestive ... (CHF) includ... HFrEF
698247007	significant_comorbidities___698247007	Cardiac arrh...
49436004	significant_comorbidities___49436004	Atrial fibrilla...
400047006	significant_comorbidities___400047006	Peripheral v... (PVD)
275526006	significant_comorbidities___275526006	History of ce... accident (CV...

59282003	significant_comorbidities___59282003	Pulmonary e
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 disease
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 me
237602007	significant_comorbidities___237602007	Metabolic sy
414916001	significant_comorbidities___414916001	Obesity
238136002	significant_comorbidities___238136002	Morbid obes BMI > 35 wit 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 transplant
OTH	significant_comorbidities___oth	Other
UNK	significant_comorbidities___unk	Unknown
NONE	significant_comorbidities___none	None

Field Annotation: Terminology: SNOMED

	57	hiv_cd4 Show the field ONLY if: [significant_comorbidities(6247900 8)] = '1'	What is the patient's CD4+ T-cell count?	text (number, Min: 0)

	58	hiv_vl Show the field ONLY if: [significant_comorbidities(62479008)] = '1'	What is the patient's viral load, in copies/mL?	text (number, Min: 0)
	59	ibd Show the field ONLY if: [significant_comorbidities(24526004)] = '1'	Please consider reporting this patient to the Secure-IBD Registry as well.	descriptive
	60	please_specify Show the field ONLY if: [significant_comorbidities(OTH)] = '1' or [significant_comorbidities(OTH-x)] = '1'	Please specify. Do not record any PHI in this field. As a reminder, this includes all elements of date other than year.	notes
	61	o2_requirement Show the field ONLY if: [more_demographics] = '1' or [ccc19] = '1'	Does the patient have a baseline chronic O2 requirement?	radio 1 — Yes, patient requires chronic supplemental O2 0 — No, patient does not require supplemental O2 99 — Unknown
	62	comorbid_no Show the field ONLY if: [more_demographics] = '1' or [ccc19] = '1'	Number of comorbid conditions requiring active therapy.	radio 0 — 0 1 — 1 2 — 2 3 — 3 4 — 4 or more 99 — Unknown
	63	additional_comorbid Show the field ONLY if: [more_demographics] = '1' or [ccc19] = '1'	Additional comments about comorbidities. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes
	64	comments_form_1	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
	65	patient_demographics_complete	Section Header: *Form Status* Complete?	dropdown 0 — Incomplete 1 — Unverified 2 — Complete

Instrument: COVID-19 details (covid19_details)   👥 Enabled as survey   ∧ Collapse

66	ts_2	Timestamp for the second form	text (datetime_dmy) Field Annotation: @HIDDEN @NOW_UTC
67	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)
68	dx_year	Section Header: *COVID-19 Details - Mandatory* What year was the patient diagnosed with COVID-19 in?	radio, Required 2019 · 2019 2020 · 2020
69	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
70	c19_workup_why	Section Header: *Diagnostic Information* Why did the patient come to be evaluated for SARS-CoV-2 or COVID-19?	radio, Required 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

71	c19_workup_why_2	Why did the patient come to be evaluated for SARS-CoV-2 or COVID-19?	checkbox, Required		
			1	c19_workup_why_2___1	Symptoms
			2	c19_workup_why_2___2	Screening prior to a procedure
			3	c19_workup_why_2___3	Screening prior to a systemic anti-cancer treatment
			4	c19_workup_why_2___4	Screening due to a high-risk situation (e.g., known exposure)
			OTH	c19_workup_why_2___oth	Other
			UNK	c19_workup_why_2___unk	Unknown
72	workup_oth_specify Show the field ONLY if: [c19_workup_why] = 'OTH'	Please specify Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes		

73	symptoms	Which symptoms and/or signs were present upon initial presentation? Check all that apply.	checkbox, Required		
			367391008	symptoms___367391008	Fatigue/Malaise
			386661006	symptoms___386661006	Fever
			49727002	symptoms___49727002	Cough
			248595008	symptoms___248595008	Productive cough (with sputum)
			267036007	symptoms___267036007	Dyspnea (SOB)
			68962001	symptoms___68962001	Myalgias
			57676002	symptoms___57676002	Arthralgias
			162397003	symptoms___162397003	Sore throat
			25064002	symptoms___25064002	Headache
			419284004	symptoms___419284004	Altered mental status (AMS)
			44169009	symptoms___44169009	Loss of sense of smell (anosmia)
			36955009	symptoms___36955009	Loss of taste (ageusia)
			64531003	symptoms___64531003	Rhinorrhea
			422587007	symptoms___422587007	Nausea
			272044004	symptoms___272044004	Vomiting
			62315008	symptoms___62315008	Diarrhea
			43364001	symptoms___43364001	Abdominal discomfort (other than frank abdominal pain)
			21522001	symptoms___21522001	Abdominal pain
			166643006	symptoms___166643006	LFT abnormalities
			301095005	symptoms___301095005	Cardiac involvement
			9826008	symptoms___9826008	Conjunctivitis
			OTH	symptoms___oth	Other
			84387000	symptoms___84387000	None (patient was asymptomatic)
			Field Annotation: Terminology: SNOMED		
74	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		

| 75 | symptoms_none_why

Show the field ONLY if:
[symptoms(84387000)] = '1' | Was the patient tested as part of a pre-treatment or pre-procedure screening program? | radio

| 0 | No |
| 1 | Yes |
99	Unknown	
76	covid_19_diagnosis	COVID-19 diagnosis	radio, Required | 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	 Field Annotation: @HIDECHOICE='1,11'
77	covid_19_dx_imaging Show the field ONLY if: [covid_19_diagnosis] = '2' or [covid_19_diagnosis] = '3'	Please describe the imaging abnormalities. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes
78	neg_test Show the field ONLY if: [covid_19_diagnosis] = '1' or [covid_19_diagnosis] = '11' or [covid_19_diagnosis] = '2' or [covid_19_diagnosis] = '3' or [covid_19_diagnosis] = '99'	Did the patient have a negative laboratory test despite having symptoms or signs supportive of the COVID-19 diagnosis?	radio, Required | 1	Yes
2	No
99	Unknown	
79	covid_19_test_more Show the field ONLY if: [neg_test] = '1' or [covid_19_diagnosis] = '4'	Please provide additional details, including the type of COVID-19 test. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes
80	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.	notes
81	severity_of_covid_19_v2	Section Header: *Initial Severity and Course of Illness* Initial severity of COVID-19	radio, Required | 1	Mild (no hospitalization required)
2	Moderate (hospitalization indicated)
3	Severe (ICU admission indicated)
99	Unknown	

82	hosp_status	Was the patient ever hospitalized during their course of illness?	radio, Required

			0	No
			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

83	hosp_los Show the field ONLY if: [hosp_status] = '1'	If known, how long was the length of stay, in days?	text (integer, Min: 1)
84	hosp_los_2 Show the field ONLY if: [hosp_status] = '2'	If known, how long was the length of stay prior to transfer to the ICU, in days?	text (integer, Min: 1)
85	icu_los Show the field ONLY if: [hosp_status] = '2' or [hosp_status] = '3'	If known, how long was the ICU length of stay, in days?	text (integer, Min: 1)

86	current_status Show the field ONLY if: [timing_of_report] = '1'	What is the patient's current location?	radio, Required

			1	Outpatient - new COVID-19 diagnosis
			2	Outpatient - follow up
			3	ER - new COVID-19 diagnosis
			4	ER - Follow up
			5	Hospitalized (non-ICU) - new admit
			6	Hospitalized (non-ICU) - continued
			7	ICU - new admit
			8	ICU - continued
			9	None - patient is deceased

87	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.	notes, Required

88	c19_complications_systemic	Section Header: *Complications* Systemic complications occurring during the COVID-19 illness. Check all that apply. If there were no systemic complications, please check "None".	checkbox, Required		
			50960005	c19_complications_systemic___50960005	Bleeding
			67406007	c19_complications_systemic___67406007	Dissemir intravasc coagulati (DIC)
			57653000	c19_complications_systemic___57653000	Multiorga failure
			91302008	c19_complications_systemic___91302008	Sepsis
			238147009	c19_complications_systemic___238147009	Other
			NONE	c19_complications_systemic___none	None
			UNK	c19_complications_systemic___unk	Unknowr
			Field Annotation: Terminology: SNOMED		

89	c19_bleeding Show the field ONLY if: [c19_complications_systemic(50960005)] = '1'	Please specify the type of bleeding. Check all that apply.	checkbox		
			112648003	c19_bleeding___112648003	Major bleeding (requiring multiple RBCs transfusions or ICU admit)
			73099002	c19_bleeding___73099002	Non-major but clinically relevant bleed
			127563002	c19_bleeding___127563002	Minor bleed (without transfusion need)
			230690007-Major	c19_bleeding___230690007_major	CNS hemorrhage, extensive
			230690007-Minor	c19_bleeding___230690007_minor	CNS hemorrhage, limited
			OTH	c19_bleeding___oth	Other
			UNK	c19_bleeding___unk	Unknown
			Field Annotation: Terminology: SNOMED-modified		
90	c19_bleeding_oth_specify Show the field ONLY if: [c19_bleeding(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		
91	dic_certainty Show the field ONLY if: [c19_complications_systemic(67406007)] = '1'	How definite was the DIC diagnosis?	radio 1 Definite 2 Suspected 99 Unknown		

92	dic_treatment Show the field ONLY if: [c19_complications_systemic(67406007)] = '1'	Which of the following were used to treat the DIC?	radio 346447007 / Plasma (FFP) 256401009 / Cryoprecipitate NONE / None UNK / Unknown OTH / Other Field Annotation: Terminology: SNOMED
93	dic_more Show the field ONLY if: [c19_complications_systemic(67406007)] = '1'	Please provide further details about DIC, including clinical manifestations. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes
94	c19_comp_systemic_specify Show the field ONLY if: [c19_complications_systemic(238147009)] = '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
95	o2_requirement_c19	Did the patient require supplemental O2 during the course of illness?	radio, Required 0 / No 1 / Yes 99 / Unknown
96	o2_policy Show the field ONLY if: [o2_requirement_c19] = '1'	Was there an institutional policy in place to refuse intubation for patients with metastatic cancer, at the time when this patient required supplemental O2?	radio 0 / No 1 / Yes 99 / Unknown

97	c19_complications_pulm	Pulmonary complications occurring during the COVID-19 illness. Check all that apply. If there were no pulmonary complications, please check "None".	checkbox, Required

checkbox, Required

409622000	c19_complications_pulm___409622000	Respiratory failure
205237003	c19_complications_pulm___205237003	Pneumonitis
67782005	c19_complications_pulm___67782005	ARDS
59282003	c19_complications_pulm___59282003	Pulmonary embolism (PE)
60046008	c19_complications_pulm___60046008	Pleural effusion
312682007	c19_complications_pulm___312682007	Empyema
50043002	c19_complications_pulm___50043002	Other
NONE	c19_complications_pulm___none	None
UNK	c19_complications_pulm___unk	Unknown

Field Annotation: Terminology: SNOMED

98	resp_failure_tx Show the field ONLY if: [c19_complications_pulm(409622000)] = '1' or [o2_requirement_c19] = '1'	Which of the following supplemental O2 interventions did the patient require? Select the most invasive intervention required during the course of illness.	radio

radio

1	Nasal cannula with standard O2
2	High-flow nasal cannula
3	Non-rebreather
4	CPAP
5	BiPAP
6	Intubation
99	Unknown

99	berlin_yn Show the field ONLY if: [c19_complications_pulm(67782005)] = '1'	Were the Berlin criteria formally assessed?	radio, Required

radio, Required

0	No
1	Yes
99	Unknown/Unsure

100	berlin_2 Show the field ONLY if: [berlin_yn] = '1'	Berlin criteria.The Berlin criteria are based on a decreased PaO2/FiO2 ratio:-mild ARDS: 201 - 300 mmHg (≤ 39.9 kPa)-moderate ARDS: 101 - 200 mmHg (≤ 26.6 kPa)-severe ARDS: ≤ 100 mmHg (≤ 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. Click this link to access a calculator for PaO2/FiO2 ratio (opens a new window)	radio, Required

radio, Required

1	Mild
2	Moderate
3	Severe
99	Unknown

101	c19_comp_pulm_specify Show the field ONLY if: [c19_complications_pulm(5004300 2)] = '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		
102	c19_complications_card	Cardiovascular complications occurring during the COVID-19 illness. Check all that apply. If there were no cardiovascular complications, please check "None".	checkbox, Required		
			45007003	c19_complications_card___45007003	Hypotension
			22298006	c19_complications_card___22298006	Myocardial infarction
			414545008	c19_complications_card___414545008	Other cardiac ischemia
			49436004	c19_complications_card___49436004	Atrial fibrillation
			71908006	c19_complications_card___71908006	Ventricular fibrillation
			698247007	c19_complications_card___698247007	Other cardiac arrhythmia
			85898001	c19_complications_card___85898001	Cardiomyopathy
			42343007	c19_complications_card___42343007	Congestive heart failure (CHF)
			59282003	c19_complications_card___59282003	Pulmonary embolism (PE)
			128053003	c19_complications_card___128053003	Deep venous thrombosis (DVT)
			275517008	c19_complications_card___275517008	Superficial venous thrombosis (SVT)
			230690007	c19_complications_card___230690007	Cerebrovascular accident (CVA stroke)
			414086009	c19_complications_card___414086009	Thrombosis, NOS
			49601007	c19_complications_card___49601007	Other
			NONE	c19_complications_card___none	None
			UNK	c19_complications_card___unk	Unknown

Field Annotation: Terminology: SNOMED

103	sepsis_pressors Show the field ONLY if: [c19_complications_card(45007003)] = '1'	Did the patient require pressors?	radio 	0	No
1	Yes
99	Unknown	

| 104 | c19_comp_card_specify

Show the field ONLY if:
[c19_complications_card(49601007)] = '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 |

105	c19_complications_gi	Gastrointestinal complications occurring during the COVID-19 illness. Check all that apply. If there were no GI complications, please check "None".	checkbox, Required 	427044009	c19_complications_gi___427044009	Acute hepatic injury
389026000	c19_complications_gi___389026000	Ascites
81060008	c19_complications_gi___81060008	Bowel obstruction
56905009	c19_complications_gi___56905009	Bowel perforation
710572000	c19_complications_gi___710572000	Ileus
48661000	c19_complications_gi___48661000	Peritonitis
53619000	c19_complications_gi___53619000	Other
NONE	c19_complications_gi___none	None
UNK	c19_complications_gi___unk	Unknown	 Field Annotation: Terminology: SNOMED

| 106 | 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 |

107	c19_complications_other	Other complications occurring during the COVID-19 illness. Check all that apply. If there were no other complications, please check "None".	checkbox, Required		
			14669001	c19_complications_other___14669001	Acute kidney injury
			91175000	c19_complications_other___91175000	Seizures
			372070002	c19_complications_other___372070002	Gangrene
			414086009	c19_complications_other___414086009	Thrombosis NOS
			362965005	c19_complications_other___362965005	Other
			NONE	c19_complications_other___none	None
			UNK	c19_complications_other___unk	Unknown
			Field Annotation: Terminology: SNOMED @HIDECHOICE = '414086009'		
108	c19_complications_oth_specify Show the field ONLY if: [c19_complications_other(36296500 5)] = '1'	Please specify other complications. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes		
109	current_status_v2 Show the field ONLY if: [current_status] = '1' or [current_st atus] = '2' or [current_status] = '3' o r [current_status] = '4' or [current_s tatus] = '5' or [current_status] = '6' or [current_status] = '7' or [current_ status] = '8'	Section Header: *Clinical Status* Current COVID-19 status Fully recovered means that the patient has returned to their baseline functional status and repeat SARS-CoV-2 testing, if obtained, is negative. If they are on medications to treat sequelae or have functional compromise (e.g., impaired pulmonary function) but are not considered to have active infection, they should be considered to have recovered with complications.	radio, Required 1 Fully recovered 1b Recovered with complications 2 Ongoing infection 3 Died		
110	current_status_retro Show the field ONLY if: [timing_of_report] = '2'	Final COVID-19 status Fully recovered means that the patient has returned to their baseline functional status and repeat SARS-CoV-2 testing, if obtained, is negative. If they are on medications to treat sequelae or have functional compromise (e.g., impaired pulmonary function) but are not considered to have active infection, they should be considered to have recovered with complications.	radio, Required 1 Fully recovered 1b Recovered with complications 3 Died 99 Unknown		
111	deceased_reason_retro Show the field ONLY if: [current_status_retro] = '3'	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.	notes, Required		
112	days_to_death Show the field ONLY if: [current_status_retro] = '3'	Approximately how many days elapsed between COVID-19 diagnosis and death? If this information is unknown to you, please enter 9999 here.	text (integer, Min: 0), Required		

113	current_status_clinical Show the field ONLY if: [current_status_v2] = '2'	Current clinical status	radio, Required	
			1	Outpatient - Mild symptoms
			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
			OTH	Other
			99	Unknown
114	current_status_clinical_specify Show the field ONLY if: [current_status_clinical] = '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	
115	worst_status_clinical Show the field ONLY if: [timing_of_report] = '2'	Worst clinical status. Report the worst clinical presentation during the 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 they received prior to the time of death.	radio, Required	
			1	Outpatient - Mild symptoms
			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
116	worst_status_clinical_specify Show the field ONLY if: [worst_status_clinical] = '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	

117	complications_severity Show the field ONLY if: [current_status_v2] = '1b' or [current_status_v2] = '2' or [current_status_retro] = '1b'	Current severity of COVID-19 complications. Check all that apply.	checkbox, Required		
			1	complications_severity___1	Mild complications (mimimal symptoms from complications)
			2	complications_severity___2	Moderate complications (moderate symptoms from complications)
			3	complications_severity___3	Serious complications (symptoms substantially impact the patient's functional status or disabling physical functioning)
			OTH	complications_severity___oth	Other
			99	complications_severity___99	Unknown
118	complications_severity_oth_specify Show the field ONLY if: [complications_severity(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, Required		
119	worst_complications_severity Show the field ONLY if: [timing_of_report] = '2' and [current_status_retro] != '3'	Worst severity of COVID-19 complications. Check all that apply.	checkbox, Required		
			1	worst_complications_severity___1	Mild complications (mimimal symptoms from complications)
			2	worst_complications_severity___2	Moderate complications (moderate symptoms from complications)
			3	worst_complications_severity___3	Serious complications (symptoms substantially impact the patient's functional status or disabling physical functioning)
			OTH	worst_complications_severity___oth	Other
			99	worst_complications_severity___99	Unknown

120	worst_complications_severity_specify Show the field ONLY if: [worst_complications_severity(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, Required
121	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.	descriptive
122	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	Yes
0	No	
123	mortality Show the field ONLY if: ([covid_19_more] = '1' or [ccc19] = '1') and [covid_19_dx_interval] != '1' and [covid_19_dx_interval] != '2' and [covid_19_dx_interval] != '3'	If it has been at least 30 days from the presumptive or laboratory-proven COVID-19 diagnosis, was the patient alive 30 days after diagnosis?Note: this question is required for members of the CCC19 consortium; optional but strongly encouraged for all others.	radio | 1	Yes
0	No
88	N/A - it has been fewer than 30 days since COVID-19 diagnosis
99	Unknown	
124	labs Show the field ONLY if: [covid_19_more] = '1' or [ccc19] = '1'	Section Header: *Baseline laboratory values at the time of or closest to the date of the 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.* At what time point were labs drawn? This information is important to build predictive models of disease severity based on lab values. Your 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.	radio | 1	At the time of initial COVID-19 diagnosis
2a	At the time of a change in clinical status (hospitalization)
2b	At the time of a change in clinical status (other than hospitalization)
3	Labs were not drawn or are not available for review
OTH	Other
UNK	Unknown	
125	labs_oth_specify Show the field ONLY if: [labs] = '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

126	wbc_range Show the field ONLY if: ([covid_19_more] = '1' or [ccc19] = '1') and [labs] != '3'	Section Header: *CBC values at presentation* Total WBC count	radio (Matrix) 	LO	Low
WNL	Normal
HI	High
NT	Not tested
99	Unknown	
127	alc_range Show the field ONLY if: ([covid_19_more] = '1' or [ccc19] = '1') and [labs] != '3'	Absolute lymphocyte count (ALC) - less than 1500/uL should be considered low	radio (Matrix) | LO	Low
WNL	Normal
HI	High
NT	Not tested
99	Unknown	 Field Annotation: less than 1500/uL should be considered low
128	anc_range Show the field ONLY if: ([covid_19_more] = '1' or [ccc19] = '1') and [labs] != '3'	Absolute neutrophil count (ANC)	radio (Matrix) | LO	Low
WNL	Normal
HI	High
NT	Not tested
99	Unknown	 Field Annotation: less than 1000/uL should be considered low
129	aec_range Show the field ONLY if: ([covid_19_more] = '1' or [ccc19] = '1') and [labs] != '3'	Absolute eosinophil count (AEC)	radio (Matrix) | LO	Low
WNL	Normal
HI	High
NT	Not tested
99	Unknown	

130	hgb_range Show the field ONLY if: ([covid_19_more] = '1' or [ccc19] = '1') and [labs] != '3'	Hemoglobin	radio (Matrix)

radio (Matrix)

LO	Low
WNL	Normal
HI	High
NT	Not tested
99	Unknown

131	plt_range Show the field ONLY if: ([covid_19_more] = '1' or [ccc19] = '1') and [labs] != '3'	Platelets	radio (Matrix)

LO	Low
WNL	Normal
HI	High
NT	Not tested
99	Unknown

132	wbc_numeric Show the field ONLY if: [wbc_range] = 'LO' or [wbc_range] = 'HI'	Total WBC count in 10^9/L	text (number, Min: 0, Max: 1000)
133	alc Show the field ONLY if: [alc_range] = 'LO' or [alc_range] = 'HI'	Absolute lymphocyte count per uL	text (number, Min: 0)
134	anc Show the field ONLY if: [anc_range] = 'LO' or [anc_range] = 'HI'	Absolute neutrophil count per uL	text (number, Min: 0)
135	aec Show the field ONLY if: [aec_range] = 'LO' or [aec_range] = 'HI'	Absolute eosinophil count per uL	text (number, Min: 0)
136	hgb Show the field ONLY if: [hgb_range] = 'LO' or [hgb_range] = 'HI'	Hemoglobin level in g/dL	text (number, Min: 0)
137	plt Show the field ONLY if: [plt_range] = 'LO' or [plt_range] = 'HI'	Platelet count, 10^3/uL	text (number, Min: 0)

138	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
139	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	
140	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	
141	alt Show the field ONLY if: ([covid_19_more] = '1' or [ccc19] = '1') and [labs] != '3'	ALT	radio (Matrix) 	0	Normal
1	Abnormal
NT	Not tested
99	Unknown	
142	pt Show the field ONLY if: ([covid_19_more] = '1' or [ccc19] = '1') and [labs] != '3'	PT	radio (Matrix) 	0	Normal
1	Abnormal
NT	Not tested
99	Unknown	
143	aptt Show the field ONLY if: ([covid_19_more] = '1' or [ccc19] = '1') and [labs] != '3'	aPTT	radio (Matrix) 	0	Normal
1	Abnormal
NT	Not tested
99	Unknown	

144	fibrinogen Show the field ONLY if: ([covid_19_more] = '1' or [ccc19] = '1') and [labs] != '3'	Fibrinogen	radio (Matrix) 	0	Normal
1	Abnormal
NT	Not tested
99	Unknown	 Field Annotation: SNOMED: 71636003
145	ddimer Show the field ONLY if: ([covid_19_more] = '1' or [ccc19] = '1') and [labs] != '3'	D-Dimer	radio (Matrix) 	0	Normal
1	Abnormal
NT	Not tested
99	Unknown	 Field Annotation: SNOMED: 1019221000000107
146	ldh Show the field ONLY if: ([covid_19_more] = '1' or [ccc19] = '1') and [labs] != '3'	LDH	radio (Matrix) 	0	Normal
1	Abnormal
NT	Not tested
99	Unknown	 Field Annotation: SNOMED: 250644007
147	tni Show the field ONLY if: ([covid_19_more] = '1' or [ccc19] = '1') and [labs] != '3'	Troponin I (TnI)	radio (Matrix) 	0	Normal
1	Abnormal
NT	Not tested
99	Unknown	
148	hs_trop Show the field ONLY if: ([covid_19_more] = '1' or [ccc19] = '1') and [labs] != '3'	High-sensitivity troponin	radio (Matrix) 	0	Normal
1	Abnormal
NT	Not tested
99	Unknown	

149	bnp Show the field ONLY if: ([covid_19_more] = '1' or [ccc19] = '1') and [labs] != '3'	BNP	radio (Matrix) 	0	Normal
1	Abnormal
NT	Not tested
99	Unknown	
150	crp Show the field ONLY if: ([covid_19_more] = '1' or [ccc19] = '1') and [labs] != '3'	CRP	radio (Matrix) 	0	Normal
1	Abnormal
NT	Not tested
99	Unknown	
151	il6 Show the field ONLY if: ([covid_19_more] = '1' or [ccc19] = '1') and [labs] != '3'	IL-6	radio (Matrix) 	0	Normal
1	Abnormal
NT	Not tested
99	Unknown	
152	other_lab Show the field ONLY if: ([covid_19_more] = '1' or [ccc19] = '1') and [labs] != '3'	Other (free text will open for more details below)	radio (Matrix) 	0	Normal
1	Abnormal
NT	Not tested
99	Unknown	
153	creat_numeric Show the field ONLY if: [creat] = '1'	Please provide measured creatinine level in mg/dL	text (number, Min: 0)
154	tbili_numeric Show the field ONLY if: [tbili] = '1'	Please provide measured total bilirubin value in mg/dL	text
155	ast_numeric Show the field ONLY if: [ast] = '1'	Please provide measured AST/SGOT value in units/L	text (number, Min: 32)
156	alt_numeric Show the field ONLY if: [alt] = '1'	Please provide measured ALT/SGPT value in units/L	text (number, Min: 32)

157	pt_numeric Show the field ONLY if: [pt] = '1'	Please report measured PT value in seconds. If above the maximum range, enter "999".	text (number)
158	aptt_numeric Show the field ONLY if: [aptt] = '1'	Please report measured aPTT value in seconds. If above the maximum range, enter "999".	text (number, Min: 0)
159	fibrinogen_numeric Show the field ONLY if: [fibrinogen] = '1'	Please report measured fibrinogen value in mg/dL (conventional units).	text
160	ddimer_numeric Show the field ONLY if: [ddimer] = '1'	Please report measured D-Dimer value along with units, which often differ between labs.	text
161	ldh_numeric Show the field ONLY if: [ldh] = '1'	Please report measured LDH value along with units, which often differ between labs.	text
162	tni_numeric Show the field ONLY if: [tni] = '1'	Please report measured TnI value in ng/mL. Only record values greater than or equal to 0.05 ng/mL.	text (number, Min: 0)
163	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)
164	bnp_numeric Show the field ONLY if: [bnp] = '1'	Please report measured BNP value in pg/mL.	text (number, Min: 0)
165	crp_numeric Show the field ONLY if: [crp] = '1'	Please provide measured CRP value along with units, which often differ between labs.	text
166	il6_numeric Show the field ONLY if: [il6] = '1'	Please report measured IL-6 value in pg/mL	text (number, Min: 1.8)
167	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

168	coinfection_yn Show the field ONLY if: [covid_19_more] = '1' or [ccc19] = '1'	Section Header: *Co-infections* 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	

| 169 | coinfection

Show the field ONLY if:
[coinfection_yn] = '1' | Were there other co-infections diagnosed? Check all that apply.
Terminology: SNOMED | checkbox |

49872002	coinfection___49872002	Viral, NOS
407479009	coinfection___407479009	Influenza A
407480007	coinfection___407480007	Influenza B
84101006	coinfection___84101006	Ordinary coronavirus, NOS
1838001	coinfection___1838001	Rhinovirus
6415009	coinfection___6415009	RSV
409822003	coinfection___409822003	Bacterial infection, NOS
8745002	coinfection___8745002	Gram-positive bacteria, NOS
233607000	coinfection___233607000	Pneumococcal pneumonia
81325006	coinfection___81325006	Gram-negative bacteria, NOS
414561005	coinfection___414561005	Fungal, NOS
2429008	coinfection___2429008	Aspergillus culture-confirmed
709601002	coinfection___709601002	Aspergillus suspected (galactomannan positive)
442376007	coinfection___442376007	Tests are pending
OTH	coinfection___oth	Other
UNK	coinfection___unk	Unknown
NONE	coinfection___none	None

Field Annotation: Terminology: SNOMED

| 170 | coinfection_other

Show the field ONLY if:
[coinfection(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 |

171	covid_19_treatment	Section Header: *COVID-19 Treatment*	checkbox		
	Show the field ONLY if: [covid_19_more] = '1' or [ccc19] = '1'	COVID-19 treatment, including pre-existing drugs that were continued during the COVID-19 diagnosis. Check all that apply.	RXCUI-2393	covid_19_treatment___rxcui_2393	Chloroqu
			RXCUI-5521	covid_19_treatment___rxcui_5521	Hydroxyc (Plaqueni
			HO-44995	covid_19_treatment___ho_44995	Anti-virals
			ATC-J05AR10	covid_19_treatment___atc_j05ar10	Lopinavir/
			RXCUI-260101	covid_19_treatment___rxcui_260101	Oseltamiv (Tamiflu)
			OMOP4873974	covid_19_treatment___omop4873974	Remdesiv
			RXCUI-18631	covid_19_treatment___rxcui_18631	Azithromy (Zithroma
			HO-45523	covid_19_treatment___ho_45523	Corticoste prompt fo additiona
			ATC-C10AA	covid_19_treatment___atc_c10aa	Statins
			L04AA37	covid_19_treatment___l04aa37	Baricitinib
			RXCUI-612865	covid_19_treatment___rxcui_612865	Tocilizum
			ATC-L04AC	covid_19_treatment___atc_l04ac	Other inte inhibitors prompt fo additiona
			ATC-L04AB	covid_19_treatment___atc_l04ab	TNF alpha (will prom additiona
			B05AX03	covid_19_treatment___b05ax03	Plasma fr recovered individual (convales plasma)
			B01A	covid_19_treatment___b01a	Anticoagu
			N02BA	covid_19_treatment___n02ba	Aspirin
			B01AC	covid_19_treatment___b01ac	Antiplatel other tha
			233573008	covid_19_treatment___233573008	Extracorp membran oxygenati
			714749008	covid_19_treatment___714749008	Continuou replacem therapy ((

				OTH	covid_19_treatment___oth	Other
				UNK	covid_19_treatment___unk	Unknown
				NONE	covid_19_treatment___none	None

Field Annotation: Terminologies: ATC/HemOnc/OMOP/RxNorm/SNOMED

| 172 | c19_aspirin_dose

Show the field ONLY if:
[covid_19_treatment(N02BA)] = '1' | Aspirin dosing | radio

| 262459003 | Low dose (less than 200 mg/day) |
| 261829003 | Full dose |
261665006	Unknown	 Field Annotation: Terminology: SNOMED
173	steroid_specific Show the field ONLY if: [covid_19_treatment(HO-45523)] = '1'	Steroid dosing, in prednisone dose equivalents	radio | 1	20 mg/day or below [low dose]
1a	10 mg/day or below [low dose]
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'
174	steroid_more Show the field ONLY if: [covid_19_treatment(HO-45523)] = '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

175	covid_19_tx_interleukin	Interleukin inhibitor treatment. Check all that apply.	checkbox		
	Show the field ONLY if: [covid_19_treatment(ATC-L04AC)] = '1'		L04AC03	covid_19_tx_interleukin___l04ac03	anakinra
			L04AC02	covid_19_tx_interleukin___l04ac02	basiliximab
			L04AC09	covid_19_tx_interleukin___l04ac09	briakinumab
			L04AC12	covid_19_tx_interleukin___l04ac12	brodalumab
			L04AC08	covid_19_tx_interleukin___l04ac08	canakinumab
			L04AC01	covid_19_tx_interleukin___l04ac01	daclizumab
			L04AC16	covid_19_tx_interleukin___l04ac16	guselkumab
			L04AC13	covid_19_tx_interleukin___l04ac13	ixekizumab
			L04AC04	covid_19_tx_interleukin___l04ac04	rilonacept
			L04AC18	covid_19_tx_interleukin___l04ac18	risankizumab
			L04AC14	covid_19_tx_interleukin___l04ac14	sarilumab
			L04AC10	covid_19_tx_interleukin___l04ac10	secukinumab
			L04AC11	covid_19_tx_interleukin___l04ac11	siltuximab
			L04AC15	covid_19_tx_interleukin___l04ac15	sirukumab
			L04AC17	covid_19_tx_interleukin___l04ac17	tildrakizumab
			L04AC07	covid_19_tx_interleukin___l04ac07	tocilizumab
			L04AC05	covid_19_tx_interleukin___l04ac05	ustekinumab
			Field Annotation: Field:ATC L04AC; Values:ATC		
176	covid_19_tx_tnf	Tumor necrosis factor alpha (TNF-α) inhibitor treatment. Check all that apply.	checkbox		
	Show the field ONLY if: [covid_19_treatment(ATC-L04AC)] = '1'		L04AB04	covid_19_tx_tnf___l04ab04	adalimumab
			L04AB03	covid_19_tx_tnf___l04ab03	afelimomab
			L04AB05	covid_19_tx_tnf___l04ab05	certolizumab pegol
			L04AB01	covid_19_tx_tnf___l04ab01	etanercept
			L04AB06	covid_19_tx_tnf___l04ab06	golimumab
			L04AB02	covid_19_tx_tnf___l04ab02	infliximab
			L04AB07	covid_19_tx_tnf___l04ab07	opinercept
			Field Annotation: Field:ATC L04AB; Values:ATC		

177	c19_anticoag_reason Show the field ONLY if: [covid_19_more] = '1' or [ccc19] = '1'	Has the patient received any dose or type of anticoagulants at any 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	checkbox		
			1	c19_anticoag_reason___1	Prophylactic use (without the presence of a VTE either as an inpatient or outpatient)
			2	c19_anticoag_reason___2	Therapeutic use (for known VTE or ATE history)
			2a	c19_anticoag_reason___2a	Therapeutic use (for known VTE diagnosis)
			2b	c19_anticoag_reason___2b	Therapeutic use (for known ATE diagnosis)
			3	c19_anticoag_reason___3	For DIC during hospitalization
			NONE	c19_anticoag_reason___none	None (patient did not receive any anticoagulants)
			UNK	c19_anticoag_reason___unk	Unknown
			OTH	c19_anticoag_reason___oth	Other
			Field Annotation: @HIDECHOICE='2'		
178	c19_anticoag_reason_oth_specify Show the field ONLY if: [c19_anticoag_reason(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		

179	c19_anticoag_type Show the field ONLY if: [c19_anticoag_reason(1)] = '1' or [c19_anticoag_reason(2a)] = '1' or [c19_anticoag_reason(2b)] = '1' or [c19_anticoag_reason(3)] = '1' or [c19_anticoag_reason(OTH)] = '1'	Which anticoagulants were used? Check all that apply.	checkbox

B01AA	c19_anticoag_type___b01aa	Vitamin K antagonists (e.g., warfarin)
B01AB	c19_anticoag_type___b01ab	Low-molecular weight heparin (LMWH)
B01AB01	c19_anticoag_type___b01ab01	Unfractionated heparin
B01AE	c19_anticoag_type___b01ae	Direct thrombin inhibitors (e.g., argatroban)
B01AF	c19_anticoag_type___b01af	Direct factor Xa inhibitors (e.g., apixaban)
B01AX05	c19_anticoag_type___b01ax05	Fondaparinux
UNK	c19_anticoag_type___unk	Unknown
OTH	c19_anticoag_type___oth	Other

Field Annotation: Terminology: ATC

180	c19_anticoag_type_oth_specify Show the field ONLY if: [c19_anticoag_type(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

181	covid_19_treatment_trial Show the field ONLY if: [covid_19_treatment(HO-44995)] = '1' or [covid_19_treatment(RXCUI-18631)] = '1' or [covid_19_treatment(RXCUI-2393)] = '1' or [covid_19_treatment(HO-45523)] = '1' or [covid_19_treatment(RXCUI-5521)] = '1' or [covid_19_treatment(ATC-J05AR10)] = '1' or [covid_19_treatment(RXCUI-260101)] = '1' or [covid_19_treatment(OMOP4873974)] = '1' or [covid_19_treatment(ATC-C10AA)] = '1' or [covid_19_treatment(RXCUI-612865)] = '1' or [covid_19_treatment(ATC-L04AC)] = '1' or [covid_19_treatment(ATC-L04AB)] = '1' or [covid_19_treatment(B05AX03)] = '1' or [covid_19_treatment(OTH)] = '1'	Was any of the COVID-19 treatment given as part of a clinical trial?	radio

0	No
1	Yes
99	Unknown

182	covid_19_trial_tx Show the field ONLY if: [covid_19_treatment_trial] = '1'	COVID-19 clinical trial treatment. Check all that apply. If you do not 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".	checkbox, Required		
			RXCUI-2393	covid_19_trial_tx___rxcui_2393	Chloroquine
			RXCUI-5521	covid_19_trial_tx___rxcui_5521	Hydroxychlor (Plaquenil)
			HO-44995	covid_19_trial_tx___ho_44995	Anti-virals
			ATC-J05AR10	covid_19_trial_tx___atc_j05ar10	Lopinavir/Rit
			RXCUI-260101	covid_19_trial_tx___rxcui_260101	Oseltamivir (Tamiflu)
			OMOP4873974	covid_19_trial_tx___omop4873974	Remdesivir
			RXCUI-18631	covid_19_trial_tx___rxcui_18631	Azithromycin (Zithromax/Z
			HO-45523	covid_19_trial_tx___ho_45523	Corticosteroi
			ATC-C10AA	covid_19_trial_tx___atc_c10aa	Statins
			L04AC03	covid_19_trial_tx___l04ac03	Anakinra
			L04AA37	covid_19_trial_tx___l04aa37	Baricitinib
			L04AC02	covid_19_trial_tx___l04ac02	Basiliximab
			L04AC09	covid_19_trial_tx___l04ac09	briakinumab
			L04AC12	covid_19_trial_tx___l04ac12	brodalumab
			L04AC08	covid_19_trial_tx___l04ac08	canakinumab
			L04AC01	covid_19_trial_tx___l04ac01	daclizumab
			L04AC16	covid_19_trial_tx___l04ac16	guselkumab
			L04AC13	covid_19_trial_tx___l04ac13	ixekizumab
			L04AC04	covid_19_trial_tx___l04ac04	rilonacept
			L04AC18	covid_19_trial_tx___l04ac18	risankizumab
			L04AC14	covid_19_trial_tx___l04ac14	sarilumab
			L04AC10	covid_19_trial_tx___l04ac10	secukinumab
			L04AC11	covid_19_trial_tx___l04ac11	siltuximab
			L04AC15	covid_19_trial_tx___l04ac15	sirukumab
			L04AC17	covid_19_trial_tx___l04ac17	tildrakizumab
			L04AC07	covid_19_trial_tx___l04ac07	tocilizumab
			L04AC05	covid_19_trial_tx___l04ac05	ustekinumab
			L04AB04	covid_19_trial_tx___l04ab04	adalimumab
			L04AB03	covid_19_trial_tx___l04ab03	afelimomab

L04AB05	covid_19_trial_tx___l04ab05	certolizumab
L04AB01	covid_19_trial_tx___l04ab01	etanercept
L04AB06	covid_19_trial_tx___l04ab06	golimumab
L04AB02	covid_19_trial_tx___l04ab02	infliximab
L04AB07	covid_19_trial_tx___l04ab07	opinercept
B05AX03	covid_19_trial_tx___b05ax03	Plasma from recovered individuals (convalescent plasma)
OTH-plasma	covid_19_trial_tx___oth_plasma	Plasma from recovered individuals (convalescent plasma)
OTH	covid_19_trial_tx___oth	Other
UNK	covid_19_trial_tx___unk	Unknown

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

| 183 | covid_19_trial_more

Show the field ONLY if:
[covid_19_trial_tx(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 |

	184	additional_tx Show the field ONLY if: [covid_19_treatment(HO-44995)] = '1' or [covid_19_treatment(RXCUI-18631)] = '1' or [covid_19_treatment(RXCUI-2393)] = '1' or [covid_19_treatment(HO-45523)] = '1' or [covid_19_treatment(RXCUI-5521)] = '1' or [covid_19_treatment(ATC-J05AR10)] = '1' or [covid_19_treatment(RXCUI-260101)] = '1' or [covid_19_treatment(OMOP4873974)] = '1' or [covid_19_treatment(ATC-C10AA)] = '1' or [covid_19_treatment(RXCUI-612865)] = '1' or [covid_19_treatment(ATC-L04AC)] = '1' or [covid_19_treatment(ATC-L04AB)] = '1' or [covid_19_treatment(B05AX03)] = '1' or [covid_19_treatment(OTH)] = '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
	185	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	
	186	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
	187	covid19_details_complete	Section Header: *Form Status* Complete?	dropdown | 0	Incomplete
1	Unverified
2	Complete	

Instrument: **Cancer details** (cancer_details) 📇 Enabled as survey	⌃ Collapse

	188	ts_3	Timestamp for the third form	text (datetime_dmy) Field Annotation: @HIDDEN @NOW_UTC
	189	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	Ill 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)

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	
OTH	Other	
OTH_H	Other Heme	
OTH_S	Other Solid Tumor	

Field Annotation: LOINC:63929-4; Terminology: NCIT @HIDECHOICE = 'C9312,OTH'

	190	cancer_type_oth 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'	Please specify	text
	191	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

192	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
193	teravolt Show the field ONLY if: [cancer_type] = 'C4878' or [cancer_type] = 'C2926' or [cancer_type] = 'C4917' 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
194	multiple_ca	Does the patient have multiple malignancies? This includes multiple active malignancies as well as historic cancers.	radio, Required | 0	No
1	Yes
99	Unknown	
195	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 (autocomplete) | C132146	Malignant Solid Neoplasm, NOS
C9325	Adrenocorical Carcinoma
C9291	Anal Cancer
C9330	Appendix Cancer
C4436	Bile Duct Cancer (Cholangiocarcinoma)
C4912	Bladder Cancer
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)
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C3234	Mesothelioma
C4039	Ill 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)
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

				OTH	Other

OTH_H	Other Heme
OTH_S	Other Solid Tumor

Field Annotation: LOINC:63929-4; Terminology: NCIT @HIDECHOICE = 'OTH'

196	cancer_type_oth_2 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] = 'C27134'	Please specify	text
197	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
198	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
199	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
200	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

	201	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

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

	202	hx_treatment Show the field ONLY if: [on_treatment] = '0' or [recent_treatment] = '88'	When was the most recent anti-cancer treatment completed, relative to the time of COVID-19 diagnosis?	radio

radio

1	Completed within 3 months prior to COVID-19 diagnosis
2	Completed more than 3 months but less than 1 year prior to COVID-19 diagnosis
3	Completed more than 1 year prior to COVID-19 diagnosis
88	Never (patient never received cancer treatment prior to COVID-19 diagnosis)
99	Unknown

	203	treatment_modality Show the field ONLY if: [on_treatment] = '1' or [hx_treatment] = '1' or [hx_treatment] = '2'	Anti-cancer treatment modality. Check all that apply. For example, if a patient received concurrent chemoradiation, check cytotoxic chemotherapy and radiotherapy.	checkbox, Required

checkbox, Required

685	treatment_modality___685	Cytotoxic chemotherapy
694	treatment_modality___694	Immunotherapy
58229	treatment_modality___58229	Targeted therapy
691	treatment_modality___691	Endocrine therapy
695	treatment_modality___695	Radiotherapy
14051	treatment_modality___14051	Surgery
45186	treatment_modality___45186	Transplant/Cellular therapy
45215	treatment_modality___45215	Intravesicular therapy (e.g., BCG)
OTH	treatment_modality___oth	Other

Field Annotation: Terminology: HemOnc

	204	intravesicular_bcg Show the field ONLY if: [treatment_modality(45215)] = '1'	Did the intravesicular therapy include BCG?	radio

radio

0	No
1	Yes
99	Unknown

205	tx_modality_oth_specify Show the field ONLY if: [treatment_modality(OTH)] = '1'	Please specify other modalities. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes

206	what_immunotherapy Show the field ONLY if: [treatment_modality(694)] = '1'	What immunotherapy?	radio, Required

45838	Anti-CTLA4 antibody
45446	Anti-PD-1 antibody
45170	Anti-PD-L1 antibody
45838-45446	Combination of anti-CTLA4 and anti-PD-1 (e.g. ipilimumab & nivolumab)
OTH	Other
UNK	Unknown

Field Annotation: Terminology: HemOnc

207	immuno_other_specify Show the field ONLY if: [what_immunotherapy] = 'OTH'	Please specify Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes

208	what_targeted_tx Show the field ONLY if: [treatment_modality(58229)] = '1'	Some targeted therapies have postulated antiviral effects. Was the patient taking any of these medications? Check all that apply.	checkbox

L01XE06	what_targeted_tx___l01xe06	Dasatinib (Sprycel)
L01XE01	what_targeted_tx___l01xe01	Imatinib (Gleevec)
L01XE08	what_targeted_tx___l01xe08	Nilotinib (Tasigna)
OTH	what_targeted_tx___oth	Other
UNK	what_targeted_tx___unk	Unknown
NONE	what_targeted_tx___none	None

209	targeted_other_specify Show the field ONLY if: [what_targeted_tx(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

210	pneumonitis Show the field ONLY if: [treatment_modality(694)] = '1'	Is there a strong concern for concurrent immune-related adverse event (irAE) pneumonitis?	radio

1	No
2	Possible
3	Likely
4	Definite irAE pneumonitis

211	other_irae Show the field ONLY if: [treatment_modality(694)] = '1'	Is there a strong concern for another concurrent irAE?	yesno

1	Yes
0	No

	212	irae_text Show the field ONLY if: [other_irae] = '1'	Please describe Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes
	213	radiotherapy Show the field ONLY if: [treatment_modality(695)] = '1'	Does or did the radiation treatment field include the lungs to any degree?	radio | 1	Yes
0	No
99	Unknown	
	214	transplant_prior_tx Show the field ONLY if: [treatment_modality(45186)] = '1'	Transplant and cellular therapy - additional information. So that we can better understand the patient's degree of immunosuppression, please provide additional details related to their prior treatment 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.	notes
	215	transplant_cellular_therapy Show the field ONLY if: [treatment_modality(45186)] = '1'	Transplant & cellular therapy - what type of therapy?	radio | 1	Autologous stem cell transplant
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	
	216	sct_other_specify Show the field ONLY if: [transplant_cellular_therapy] = 'OTH'	Please specify Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes
	217	transplant_cellular_timing Show the field ONLY if: [treatment_modality(45186)] = '1'	Transplant & cellular therapy - how far out from treatment?	radio | 0	During prep (prior to transplant)
1	0-20 days
2	21-100 days
3	101-365 days
4	More than 1 year
5	Unknown	

218	treatment_additional Show the field ONLY if: [on_treatment] = '1' or [hx_treatment] = '1'	Anti-cancer treatment - additional information. Please give more 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.	notes
219	treatment_intent Show the field ONLY if: [on_treatment] = '1' or [hx_treatment] = '1'	Anti-cancer treatment intent	radio, Required | 1	Curative
2	Palliative
99	Unclear or unknown	
220	treatment_context Show the field ONLY if: [on_treatment] = '1' or [hx_treatment] = '1'	Current anti-cancer treatment context. Note that the language for treatment context differs for solid and hematologic malignancies. The first set of choices are more commonly used for solid tumors, and the last three (induction, consolidation, maintenance) for hematologic malignancy.	radio | 46235	Curative therapy, NOS
5250	Neoadjuvant
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
221	other_context Show the field ONLY if: [treatment_context] = 'OTH'	Please specify Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes
222	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	

223	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.	radio

radio (field 223)

1004-0	0 (in situ)
1	I
2	II
3	III
4	IV
764-1	Localized
764-7	Disseminated
OTH	Other
99	Unknown

Field Annotation: Terminology: NAACCR

224	stage_oth_specify Show the field ONLY if: [stage] = 'OTH'	Please specify Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes

225	mets_yn Show the field ONLY if: [cancer_more] = '1' or [ccc19] = '1'	Did the patient have metastatic cancer at the time of COVID-19 diagnosis?	radio

radio (field 225)

0	No
1	Yes
99	Unknown

| 226 | mets_sites

Show the field ONLY if:
[mets_yn] = '1' | What were the sites of metastatic disease? Please check all that apply. | checkbox |

			1112-1	mets_sites___1112_1	Bone
			1113-1	mets_sites___1113_1	Brain
			1114-1	mets_sites___1114_1	Distant lymph nodes
			1115-1	mets_sites___1115_1	Liver
			1116-1	mets_sites___1116_1	Lung
			1117-1	mets_sites___1117_1	Other sites
			1117-2	mets_sites___1117_2	Generalized metastases such as carcinomatosis
			9	mets_sites___9	Unknown

Field Annotation: Terminology: NAACCR

| 227 | 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 |

| 228 | cancer_timing

Show the field ONLY if:
[cancer_more] = '1' or [ccc19] = '1' | When was the patient's cancer diagnosed? If the patient has multiple primaries, please report on the cancer that was most recently treated. | radio |

			1	Within the past year
			2	Within the past 5 years
			3	More than 5 years ago
			99	Unknown

| 229 | clinical_trial

Show the field ONLY if:
[cancer_more] = '1' or [ccc19] = '1' | Is the patient on a clinical trial? | radio |

			0	No
			1	Yes
			99	Unknown

| 230 | 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 |

| 231 | additional_ca_dx

Show the field ONLY if:
[cancer_more] = '1' or [ccc19] = '1' | Additional details about cancer diagnosis (stage, prior therapies, etc.) Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year. | notes |

| 232 | prior_tx

Show the field ONLY if:
[cancer_more] = '1' or [ccc19] = '1' | Has the patient ever received treatments known to be associated with cardiac or pulmonary toxicity? Check all that apply. | checkbox |

			73	prior_tx___73	Bleomycin
			90	prior_tx___90	Carmustine
			122	prior_tx___122	Cyclophosphamide
			202	prior_tx___202	Everolimus
			243	prior_tx___243	Gemcitabine
			44985	prior_tx___44985	Anthracyclines
			45000	prior_tx___45000	Antibody-drug conjugates
			45613	prior_tx___45613	Anti-CD38 antibodies (e.g. daratumumab)
			58101	prior_tx___58101	Checkpoint inhibitors
			694	prior_tx___694	Immunotherapy
			44947	prior_tx___44947	Monoclonal antibodies
			45388	prior_tx___45388	Platinum agents
			45352	prior_tx___45352	Taxanes
			44955	prior_tx___44955	Tyrosine kinase inhibitors (TKIs)
			695	prior_tx___695	Radiation involving a lung field
			OTH	prior_tx___oth	Other
			UNK	prior_tx___unk	Unknown
			NONE	prior_tx___none	None

Field Annotation: Terminology: HemOnc

| 233 | drugs_expanded

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' | Please list specific drugs | text |

234	irae_past Show the field ONLY if: [prior_tx(58101)] = '1' or [prior_tx(694)] = '1'	Was there ever evidence of an immune-related adverse event (irAE) affecting the lungs or heart? (pneumonitis, myocarditis)	radio 1 No 2 Possible 3 Likely 4 Definite
235	irae_past_more Show the field ONLY if: [irae_past] = '2' or [irae_past] = '3' or [irae_past] = '4'	Please specify Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes
236	prior_tx_other Show the field ONLY if: [prior_tx(OTH)] = '1'	Please specify other past treatments with potential cardiac or pulmonary toxicity.	text
237	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
238	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
239	cancer_details_complete	Section Header: *Form Status* Complete?	dropdown 0 Incomplete 1 Unverified 2 Complete

Instrument: **Respondent details** (respondent_details)   📲 Enabled as survey   ⌃ Collapse

240	ts_4	Timestamp for the fourth form	text (datetime_dmy) Field Annotation: @HIDDEN @NOW_UTC
241	role	Section Header: *A bit about you* Are you the primary managing hematologist/oncologist?	yesno, Required 1 Yes 0 No

242	practice_setting Show the field ONLY if: [role] = '1'	What is your practice setting? Check all that apply.	checkbox

			1	practice_setting___1	Community Practice
			2	practice_setting___2	Community Hospital
			3	practice_setting___3	University Hospital
			4	practice_setting___4	NCI designated Comprehensive Cancer Center
			5	practice_setting___5	Other Cancer Centers
			6	practice_setting___6	Other Tertiary Center

243	role_2 Show the field ONLY if: [role] = '0'	What is your role in relationship to the patient?	radio, Required

			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

244	other_role Show the field ONLY if: [role] = '7'	Please specify	text, Required
245	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).	descriptive
246	comments_form_4	Please leave any general comments here, including what if anything we can do to make the survey better.	notes
247	respondent_details_complete	Section Header: *Form Status* Complete?	dropdown

			0	Incomplete
			1	Unverified
			2	Complete

Instrument: **Follow-up** (followup) 🔲 Enabled as survey			∧ Collapse
248	ts_5	Timestamp for the fifth form	text (datetime_dmy) Field Annotation: @HIDDEN @NOW_UTC

249	fu_weeks	How far out from initial COVID-19 diagnosis are you making this report?	radio, Required
			<table><tr><td>30</td><td>Approximately 30 days after COVID-19 diagnosis</td></tr><tr><td>90</td><td>Approximately 90 days after COVID-19 diagnosis</td></tr><tr><td>OTH</td><td>All other time intervals</td></tr></table>
250	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
251	fu_reason Show the field ONLY if: [fu_weeks] = 'OTH'	What is prompting this follow-up report?	radio, Required
			<table><tr><td>1</td><td>Hospitalization</td></tr><tr><td>2</td><td>Major change in clinical status other than hospitalization</td></tr><tr><td>3</td><td>Death</td></tr><tr><td>OTH</td><td>Other</td></tr></table>
252	fu_reason_oth Show the field ONLY if: [fu_reason] = 'OTH'	Please specify Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes
253	covid_19_status_fu	Section Header: *COVID-19 follow-up details -- required* Current COVID-19 status Fully recovered means that the patient has returned to their baseline functional status and repeat SARS-CoV-2 testing, if obtained, is negative. If they are on medications to treat sequelae or have functional compromise (e.g., impaired pulmonary function) but are not considered to have active infection, they should be considered to have recovered with complications.	radio, Required
			<table><tr><td>1</td><td>Fully recovered</td></tr><tr><td>1b</td><td>Recovered with complications</td></tr><tr><td>2</td><td>Ongoing infection</td></tr><tr><td>3</td><td>Died</td></tr><tr><td>99</td><td>Unknown</td></tr></table>
254	deceased_reason_fu_2 Show the field ONLY if: [covid_19_status_fu] = '3'	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.	notes, Required

255	who_ordinal_scale Show the field ONLY if: [fu_weeks] = '30' or [fu_weeks] = '90'	WHO Ordinal Scale for Clinical Improvement Please note that this 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.	radio, Required	
			1	Ambulatory (Not hospitalized) with no limitation of activities
			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
			OTH	Other - patient does not fit into any of these categories
256	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	
257	current_status_clinical_fu Show the field ONLY if: [covid_19_status_fu] = '2'	Current clinical status	radio, Required	
			1	Outpatient - Mild symptoms
			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
			OTH	Other
			99	Unknown
258	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	

259	complications_severity_fu Show the field ONLY if: [covid_19_status_fu] = '1b' or [covid_19_status_fu] = '2'	Severity of COVID-19 complications. Check all that apply.	checkbox, Required		
			1	complications_severity_fu___1	Mild complications (mimimal symptoms from complications)
			2	complications_severity_fu___2	Moderate complications (moderate symptoms from complications)
			3	complications_severity_fu___3	Serious complications (symptoms substantially impact the patient's functional status or disabling physical functioning)
			OTH	complications_severity_fu___oth	Other
			99	complications_severity_fu___99	Unknown
260	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, Required		
261	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?	radio, Required 0 No 1 Yes 99 Unknown		
262	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		

263	cancer_status_fu Show the field ONLY if: [covid_19_status_fu] != '3'	Cancer status at the time of this follow-up report. 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	
264	hospice_fu Show the field ONLY if: [hospice] != '1'	Section Header: *COVID-19 follow-up details -- optional The following sections contain questions that will help us more fully understand the disease course of COVID-19. Most but not all of these questions are optional.* Since you last reported on this patient, were they transitioned to hospice?	radio | 0	No
1	Yes
99	Unknown	
265	hospice_fu_more Show the field ONLY if: [hospice_fu] = '1'	Please specify why the patient was transitioned to hospice.	notes
266	hosp_status_fu Show the field ONLY if: [current_status] = '1' or [current_status] = '2' or [current_status] = '3' or [current_status] = '4' or [current_status_clinical] = '1' or [current_status_clinical] = '2' or [current_status_clinical] = '3' or [worst_status_clinical] = '1' or [worst_status_clinical] = '2' or [worst_status_clinical] = '3'	Since you last reported on this patient, were they admitted to the hospital?	radio, Required | 0	No
1	Yes - admitted to floor for the duration of the illness
2	Yes - admitted to floor and then transferred to the ICU
3	Yes - admitted directly to the ICU
99	Unknown	
267	hosp_los_fu Show the field ONLY if: [hosp_status_fu] = '1'	If known, how long was the length of stay, in days?	text (integer, Min: 1)
268	hosp_los_fu_2 Show the field ONLY if: [hosp_status_fu] = '2'	If known, how long was the length of stay prior to transfer to the ICU, in days?	text (integer, Min: 1)
269	icu_los_fu Show the field ONLY if: [hosp_status_fu] = '2' or [hosp_status_fu] = '3'	If known, how long was the ICU length of stay, in days?	text (integer, Min: 1)

270	current_status_fu	What is the patient's current location?	radio

2	Outpatient - follow up
4	ER - Follow up
5	Hospitalized (non-ICU) - new admit
6	Hospitalized (non-ICU) - continued
7	ICU - new admit
8	ICU - continued
9	None - patient is deceased
99	Unknown

271	days_to_death_fu Show the field ONLY if: [current_status_fu] = '9'	Approximately how many days elapsed between COVID-19 diagnosis and death?	text (integer, Min: 0)

272	deceased_reason_fu Show the field ONLY if: [current_status_fu] = '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.	notes, Required

273	c19_complications_systemic_fu	**Section Header:** *COVID-19 Additional Complications Please report any new complications that have arisen since completing the most recent form.* Systemic complications during the follow-up period. Check all that apply. If there were no additional systemic complications, please check "No additional complications".	checkbox, Required

50960005	c19_complications_systemic_fu___50960005	Bleed
67406007	c19_complications_systemic_fu___67406007	Disser intrav coagu (DIC)
57653000	c19_complications_systemic_fu___57653000	Multic failure
91302008	c19_complications_systemic_fu___91302008	Sepsis
238147009	c19_complications_systemic_fu___238147009	Other
NONE	c19_complications_systemic_fu___none	No ad comp
UNK	c19_complications_systemic_fu___unk	Unkno

Field Annotation: Terminology: SNOMED

274	c19_bleeding_fu Show the field ONLY if: [c19_complications_systemic_fu(50 960005)] = '1'	Please specify the type of bleeding. Check all that apply.	checkbox		
			112648003	c19_bleeding_fu___112648003	Major bleeding (requiring multiple RBCs transfusions or ICU admit)
			73099002	c19_bleeding_fu___73099002	Non-major but clinically relevant bleed
			127563002	c19_bleeding_fu___127563002	Minor bleed (without transfusion need)
			230690007-Major	c19_bleeding_fu___230690007_major	CNS hemorrhage, extensive
			230690007-Minor	c19_bleeding_fu___230690007_minor	CNS hemorrhage, limited
			OTH	c19_bleeding_fu___oth	Other
			UNK	c19_bleeding_fu___unk	Unknown
			Field Annotation: Terminology: SNOMED-modified		
275	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		
276	dic_more_fu Show the field ONLY if: [c19_complications_systemic_fu(67 406007)] = '1'	Please provide further details about DIC, including clinical manifestations. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes		
277	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		

278	o2_requirement_fu	Did the patient require supplemental O2 during the follow-up period?	radio, Required

radio, Required

0	No
1	Yes
99	Unknown

279	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".	checkbox, Required

checkbox, Required

409622000	c19_complications_pulm_fu___409622000	Respirato failure
205237003	c19_complications_pulm_fu___205237003	Pneumor
67782005	c19_complications_pulm_fu___67782005	ARDS
59282003	c19_complications_pulm_fu___59282003	Pulmonar embolism
60046008	c19_complications_pulm_fu___60046008	Pleural effusion
312682007	c19_complications_pulm_fu___312682007	Empyema
50043002	c19_complications_pulm_fu___50043002	Other
NONE	c19_complications_pulm_fu___none	No additi complicat
UNK	c19_complications_pulm_fu___unk	Unknown

Field Annotation: Terminology: SNOMED

| 280 | resp_failure_tx_fu

Show the field ONLY if:
[c19_complications_pulm_fu(409622000)] = '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. | radio |
|---|---|---|---|

radio

1	Nasal cannula with standard O2
2	High-flow nasal cannula
3	Non-rebreather
4	CPAP
5	BiPAP
6	Intubation
99	Unknown

| 281 | berlin_yn_fu

Show the field ONLY if:
[c19_complications_pulm_fu(67782005)] = '1' | Were the Berlin criteria formally assessed? | radio |
|---|---|---|---|

radio

0	No
1	Yes
99	Unknown/Unsure

282	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 (≤ 39.9 kPa)-moderate ARDS: 101 - 200 mmHg (≤ 26.6 kPa)-severe ARDS: ≤ 100 mmHg (≤ 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	
283	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

284	c19_complications_card_fu	Cardiovascular complications during the follow-up period. Check all that apply. If there were no additional cardiovascular complications, please check "No additional complications".	checkbox, Required			
			45007003	c19_complications_card_fu___45007003	Hypotensi
			22298006	c19_complications_card_fu___22298006	Myocardial infarction
			414545008	c19_complications_card_fu___414545008	Other card ischemia
			49436004	c19_complications_card_fu___49436004	Atrial fibril
			71908006	c19_complications_card_fu___71908006	Ventricula fibrillation
			698247007	c19_complications_card_fu___698247007	Other card arrhythmi
			85898001	c19_complications_card_fu___85898001	Cardiomyc
			42343007	c19_complications_card_fu___42343007	Congestive heart failu (CHF)
			59282003	c19_complications_card_fu___59282003	Pulmonary embolism
			128053003	c19_complications_card_fu___128053003	Deep veno thrombosi (DVT)
			275517008	c19_complications_card_fu___275517008	Superficia venous thrombosi (SVT)
			230690007	c19_complications_card_fu___230690007	Cerebrova accident ((stroke)
			414086009	c19_complications_card_fu___414086009	Thrombos NOS
			49601007	c19_complications_card_fu___49601007	Other
			NONE	c19_complications_card_fu___none	No additic complicati
			UNK	c19_complications_card_fu___unk	Unknown
			Field Annotation: Terminology: SNOMED		

| 285 | hotn_pressors_fu

Show the field ONLY if:
[c19_complications_card_fu(45007003)] = '1' | Did the patient require pressors? | radio

| 0 | No |
| 1 | Yes |
99	Unknown	
286	c19_comp_card_specify_fu Show the field ONLY if: [c19_complications_card_fu(49601007)] = '1' or [c19_complications_card_fu(414545008)] = '1' or [c19_complications_card_fu(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
287	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".	checkbox | 427044009	c19_complications_gi_fu___427044009	Acute hepatic injury
389026000	c19_complications_gi_fu___389026000	Ascites
81060008	c19_complications_gi_fu___81060008	Bowel obstruction
56905009	c19_complications_gi_fu___56905009	Bowel perforation
710572000	c19_complications_gi_fu___710572000	Ileus
48661000	c19_complications_gi_fu___48661000	Peritonitis
53619000	c19_complications_gi_fu___53619000	Other
NONE	c19_complications_gi_fu___none	No additional complications
UNK	c19_complications_gi_fu___unk	Unknown	 Field Annotation: Terminology: SNOMED
288	c19_comp_gi_specify_fu Show the field ONLY if: [c19_complications_gi_fu(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

289	c19_complications_other_fu	Other complications during the follow-up period. Check all that apply. If there were no additional other complications, please check "No additional complications".	checkbox, Required

14669001	c19_complications_other_fu___14669001	Acute kid injury
91175000	c19_complications_other_fu___91175000	Seizures
372070002	c19_complications_other_fu___372070002	Gangren
414086009	c19_complications_other_fu___414086009	Thrombo NOS
362965005	c19_complications_other_fu___362965005	Other
NONE	c19_complications_other_fu___none	No additi complica
UNK	c19_complications_other_fu___unk	Unknowr

Field Annotation: Terminology: SNOMED @HIDECHOICE = '414086009'

290	c19_complications_oth_specify_fu Show the field ONLY if: [c19_complications_other_fu(36296 5005)] = '1'	Please specify other complications. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes

291	c19_addl_treatment	Section Header: *COVID-19 Additional Treatment* Did the patient receive any additional treatments for COVID-19 or its sequelae?	radio

0	No
1	Yes
99	Unknown

292	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

293	covid_19_treatment_fu Show the field ONLY if: [c19_addl_treatment] = '1'	Additional COVID-19 treatment. Check all that apply.	checkbox

RXCUI-2393	covid_19_treatment_fu___rxcui_2393	Chloro
RXCUI-5521	covid_19_treatment_fu___rxcui_5521	Hydrox (Plaqu
HO-44995	covid_19_treatment_fu___ho_44995	Anti-vi
ATC-J05AR10	covid_19_treatment_fu___atc_j05ar10	Lopina
RXCUI-260101	covid_19_treatment_fu___rxcui_260101	Oselta (Tamifl
OMOP4873974	covid_19_treatment_fu___omop4873974	Remde
RXCUI-18631	covid_19_treatment_fu___rxcui_18631	Azithro (Zithro

HO-45523	covid_19_treatment_fu___ho_45523	Cortic... promp... additio...
ATC-C10AA	covid_19_treatment_fu___atc_c10aa	Statins
RXCUI-612865	covid_19_treatment_fu___rxcui_612865	Tociluzu...
L04AA37	covid_19_treatment_fu___l04aa37	Baricit...
ATC-L04AC	covid_19_treatment_fu___atc_l04ac	Other inhibit promp... additio...
ATC-L04AB	covid_19_treatment_fu___atc_l04ab	TNF al... (will pr... additio...
B05AX03	covid_19_treatment_fu___b05ax03	Plasma... recove... individ... (conva... plasma...
B01A	covid_19_treatment_fu___b01a	Antico...
N02BA	covid_19_treatment_fu___n02ba	Aspirin
B01AC	covid_19_treatment_fu___b01ac	Antipla... other t...
233573008	covid_19_treatment_fu___233573008	Extrac... memb... oxygen...
714749008	covid_19_treatment_fu___714749008	Contin... replace... therap...
OTH	covid_19_treatment_fu___oth	Other
UNK	covid_19_treatment_fu___unk	Unkno...
NONE	covid_19_treatment_fu___none	None

Field Annotation: Terminologies:
ATC/HemOnc/OMOP/RxNorm/SNOMED

294	steroid_specific_fu Show the field ONLY if: [covid_19_treatment_fu(HO-4552 3)] = '1'	Steroid dosing, in prednisone dose equivalents	radio 	1	20 mg/day or below [low dose]
1a	10 mg/day or below [low dose]
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'
295	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
296	c19_aspirin_dose_fu Show the field ONLY if: [covid_19_treatment_fu(N02BA)] = '1'	Aspirin dosing	radio 	262459003	Low dose (less than 200 mg/day)
261829003	Full dose
261665006	Unknown	 Field Annotation: Terminology: SNOMED

297	c19_anticoag_type_fu Show the field ONLY if: [covid_19_treatment_fu(B01A)] = '1'	Which anticoagulants were used? Check all that apply.	checkbox			
				B01AA	c19_anticoag_type_fu___b01aa	Vitamin K antagonists (e.g., warfarin)
				B01AB	c19_anticoag_type_fu___b01ab	Low-molecular weight heparin (LMWH)
				B01AB01	c19_anticoag_type_fu___b01ab01	Unfractionated heparin
				B01AE	c19_anticoag_type_fu___b01ae	Direct thrombin inhibitors (e.g., argatroban)
				B01AF	c19_anticoag_type_fu___b01af	Direct factor Xa inhibitors (e.g., apixaban)
				B01AX05	c19_anticoag_type_fu___b01ax05	Fondaparinux
				UNK	c19_anticoag_type_fu___unk	Unknown
				OTH	c19_anticoag_type_fu___oth	Other
298	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			
299	c19_anticoag_reason_fu Show the field ONLY if: [covid_19_treatment_fu(B01A)] = '1'	What was the purpose of the anticoagulant treatment? Check all that apply.	checkbox			
				1	c19_anticoag_reason_fu___1	Prophylactic use (without the presence of a VTE either as an inpatient or outpatient)
				2	c19_anticoag_reason_fu___2	Therapeutic use (for known VTE or ATE history)
				3	c19_anticoag_reason_fu___3	For DIC during hospitalization
				UNK	c19_anticoag_reason_fu___unk	Unknown
				OTH	c19_anticoag_reason_fu___oth	Other

	300	c19_anticoag_reason_oth_specify_fu 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

| | 301 | covid_19_tx_interleukin_fu

Show the field ONLY if:
[covid_19_treatment_fu(ATC-L04AC)] = '1' | Interleukin inhibitor treatment. Check all that apply. | checkbox |

L04AC03	covid_19_tx_interleukin_fu___l04ac03	anakinra
L04AC02	covid_19_tx_interleukin_fu___l04ac02	basiliximab
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	tocilizumab
L04AC05	covid_19_tx_interleukin_fu___l04ac05	ustekinumab

Field Annotation: Field:ATC L04AC; Values:ATC

| 302 | covid_19_tx_tnf_fu

Show the field ONLY if:
[covid_19_treatment_fu(ATC-L04A C)] = '1' | Tumor necrosis factor alpha (TNF-α) inhibitor treatment. Check all that apply. | checkbox |

L04AB04	covid_19_tx_tnf_fu___l04ab04	adalimumab
L04AB03	covid_19_tx_tnf_fu___l04ab03	afelimomab
L04AB05	covid_19_tx_tnf_fu___l04ab05	certolizumab pegol
L04AB01	covid_19_tx_tnf_fu___l04ab01	etanercept
L04AB06	covid_19_tx_tnf_fu___l04ab06	golimumab
L04AB02	covid_19_tx_tnf_fu___l04ab02	infliximab
L04AB07	covid_19_tx_tnf_fu___l04ab07	opinercept

Field Annotation: Field:ATC L04AB; Values:ATC

| 303 | covid_19_treatment_trial_fu

Show the field ONLY if:
[c19_addl_treatment] = '1' | Was any of the additional COVID-19 treatment given as part of a clinical trial? | radio |

0	No
1	Yes
99	Unknown

| 304 | covid_19_trial_tx_fu

Show the field ONLY if:
[covid_19_treatment_trial_fu] = '1' | COVID-19 clinical trial treatment. Check all that apply. If you do not 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". | checkbox, Required |

RXCUI-2393	covid_19_trial_tx_fu___rxcui_2393	Chloroqui
RXCUI-5521	covid_19_trial_tx_fu___rxcui_5521	Hydroxych (Plaquenil
HO-44995	covid_19_trial_tx_fu___ho_44995	Anti-virals
ATC-J05AR10	covid_19_trial_tx_fu___atc_j05ar10	Lopinavir/
RXCUI-260101	covid_19_trial_tx_fu___rxcui_260101	Oseltamiv (Tamiflu)
OMOP4873974	covid_19_trial_tx_fu___omop4873974	Remdesiv
RXCUI-18631	covid_19_trial_tx_fu___rxcui_18631	Azithromy (Zithroma
HO-45523	covid_19_trial_tx_fu___ho_45523	Corticoste
ATC-C10AA	covid_19_trial_tx_fu___atc_c10aa	Statins
L04AC03	covid_19_trial_tx_fu___l04ac03	anakinra
L04AA37	covid_19_trial_tx_fu___l04aa37	Baricitinib
L04AC02	covid_19_trial_tx_fu___l04ac02	basilixima
L04AC09	covid_19_trial_tx_fu___l04ac09	briakinum
L04AC12	covid_19_trial_tx_fu___l04ac12	brodalum
L04AC08	covid_19_trial_tx_fu___l04ac08	canakinur
L04AC01	covid_19_trial_tx_fu___l04ac01	daclizuma

			L04AC16	covid_19_trial_tx_fu___l04ac16	guselkum
			L04AC13	covid_19_trial_tx_fu___l04ac13	ixekizuma
			L04AC04	covid_19_trial_tx_fu___l04ac04	rilonacept
			L04AC18	covid_19_trial_tx_fu___l04ac18	risankizur
			L04AC14	covid_19_trial_tx_fu___l04ac14	sarilumab
			L04AC10	covid_19_trial_tx_fu___l04ac10	secukinur
			L04AC11	covid_19_trial_tx_fu___l04ac11	siltuximab
			L04AC15	covid_19_trial_tx_fu___l04ac15	sirukumal
			L04AC17	covid_19_trial_tx_fu___l04ac17	tildrakizur
			L04AC07	covid_19_trial_tx_fu___l04ac07	tocilizuma
			L04AC05	covid_19_trial_tx_fu___l04ac05	ustekinur
			L04AB04	covid_19_trial_tx_fu___l04ab04	adalimum
			L04AB03	covid_19_trial_tx_fu___l04ab03	afelimoma
			L04AB05	covid_19_trial_tx_fu___l04ab05	certolizum
			L04AB01	covid_19_trial_tx_fu___l04ab01	etanercep
			L04AB06	covid_19_trial_tx_fu___l04ab06	golimuma
			L04AB02	covid_19_trial_tx_fu___l04ab02	infliximab
			L04AB07	covid_19_trial_tx_fu___l04ab07	opinercep
			OTH-plasma	covid_19_trial_tx_fu___oth_plasma	Plasma fro recovered individual (convalesc plasma)
			B05AX03	covid_19_trial_tx_fu___b05ax03	Plasma fro recovered individual (convalesc plasma)
			OTH	covid_19_trial_tx_fu___oth	Other
			UNK	covid_19_trial_tx_fu___unk	Unknown

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

305	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
306	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
307	followup_complete	Section Header: *Form Status* Complete?	dropdown 0 Incomplete 1 Unverified 2 Complete

Instrument: Manual Exclude (manual_exclude)   ⌃ Collapse

308	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'
309	manual_exclude_complete	Section Header: *Form Status* Complete?	dropdown 0 Incomplete 1 Unverified 2 Complete