

■ Data Dictionary Codebook

10/29/2021 11:35am

^ Collapse all instruments

#	Variable / Field Name	Field Label Field Note	Field Attributes (Field Type, Validation, Choices, Calculations, etc.)
Instru	ument: Screening form (scree	ening_form) 🛂 Enabled as survey	^ Collapse
1	record_id	Study ID	text
2	ts_0	Timestamp for the screening form	text (datetime_dmy), Required Field Annotation: @HIDDEN @NOW_UTC
3	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? Invasive malignancy is defined as any solid tumor other than in situ cancers (stage 0), and any hematologic malignancies other than precursor hematologic neoplasms (e.g., MGUS or monoclonal B lymphocytosis of undetermined significance).	yesno, Required 1 Yes 0 No
4	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, Required x Exit the survey Stop actions on x
5	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
6	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
7	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
8	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
9	ccc19_exclude Show the field ONLY if: [ccc19] = '0'	We're sorry, but this survey is currently open only to respondents who are at a CCC19 participating institution. The attached FAQ provides some details about getting involved as a participating institution. If you would like your site to get involved, please contact us through the CCC19 website.	descriptive, Required
10	ccc19_exclude_2 Show the field ONLY if: [ccc19] = '0'	Please click the button below to exit the survey.	radio, Required x Exit the survey Stop actions on x
11	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 1- 118 Banner MD Anderson Cancer Center 158 Baptist Cancer Center (Memphis, TN) 196 Baptist Healthcare System (IN/KY) 1- 1- 109 Barrow Neurological Institute 109 163 Baylor College of Medicine 39-6 BC Cancer 162 Beth Israel Deaconess Medical Center (BIDMC) 192 Boston Medical Center 139 Brown University 167 Cancer Treatment Centers of America (CTCA) 392 Centre Hospitalier de l'Université de Montréal (CHUM)

9) Re	gistry REDCap
140- 2	Centro Médico ABC
102	City of Hope
103	Cleveland Clinic
133	Columbia University/New York Presbyterian
188	Cook County Hospital
104	Dana-Farber Cancer Institute (DFCI)
105	Duke University
143	Einstein Medical Center
106	Emory University/Winship Cancer Institute
107	Fred Hutchinson Cancer Research Center/University of Washington/Seattle Cancer Care Alliance
1- 101	Geisinger Health System
1- 104	Georgetown Lombardi Comprehensive Cancer Center at Georgetown University
1- 110	George Washington University
138	Gundersen Health System
395	Hamilton Health Sciences
1- 103	Harold C. Simmons Comprehensive Cancer Center at the University of Texas Southwestern Medical Center
144	Hartford HealthCare Cancer Institute
1- 114	HCA Houston Healthcare
189	Henry Ford Cancer Institute
394	Hôpital Pierre-Le Gardeur
140- 3	Hospital General de México
140- 4	Hospital Regional de Alta Especialidad de Ixtalapuca
151	Houston Methodist Cancer Center
168	Huntsman Cancer Institute
146	Inova Schar Cancer Institute
140- 1	Instituto Nacional de Cancerología
108	Intermountain Healthcare
109	Johns Hopkins University
177	Kaiser Permanente Northwest
152	Karmanos Cancer Institute
193	Lewis Cancer & Research Pavilion @ St. Joseph's/Candler
178	Loma Linda University Cancer Center
155	Loyola University Medical Center
142	LSU Health Sciences Center
190	Markey Cancer Center at the University of Kentucky
110	Massachusetts General Hospital (MGH)
111	Mayo Clinic
112	Mays Cancer Center at UT Health San Antonio
391	McGill University Health Centre
113	MD Anderson Cancer Center
1- 116	MD Anderson Cancer Center at Cooper
1- 123	Medical College of Wisconsin
131	Medical University of South Carolina/Hollings Cancer Center

9) Re	gistry REDCap
1- 112	Meharry Medical College
182	Memorial Sloan-Kettering Cancer Center (MSKCC)
197	Michigan Center of Medical Research
172	Missouri Baptist Cancer Center
137	Moffitt Cancer Center
176	Mount Auburn Hospital
160	Mount Carmel Health System
114	Mount Sinai/Tisch Cancer Institute
115	Northwell Health
1- 107	Northwest Medical Specialties
116	Northwestern University/Lurie Cancer Center
147	NYU Langone Health/Perlmutter Cancer Center
1- 115	O'Neal Comprehensive Cancer Center at UAB
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
1- 120	Providence Cancer Institute
1- 121	Renown Regional Medical Center
1- 119	Roger Williams Medical Center
150	Roswell Park Comprehensive Cancer Center
179	Rush University Medical Center
117	Rutgers Cancer Institute of New Jersey
393	Segal Cancer Centre, Jewish General Hospital, McGill University
185	Sidney Kimmel Cancer Center at Thomas Jefferson University
140	SSM Health Cancer Care
183	Stamford Hospital
118	Stanford University
134	St. Elizabeth Healthcare
1- 122	SUNY Downstate Health Sciences University
195	Sutter Health
119	Ohio State University Comprehensive Cancer Center
1- 102	Tallahassee Memorial Healthcare
180	ThedaCare Cancer Care
173	Thompson Cancer Survival Center
1- 113	Tripler Army Medical Center
159	Tufts Medical Center
187	UCLA Jonsson Comprehensive Cancer Center
136	University Hospitals, Cleveland
120	University of California, Davis
121	University of California, San Diego (UCSD)
135	University of California, San Francisco (UCSF)
141	University of Chicago
166	University of Cincinnati Cancer Center
148	University of Colorado Cancer Center

			2021	12021
	[ccc19] = 1		2020	2020
	Show the field ONLY if:			2019
13	dx_year	What year was the patient diagnosed with COVID-19 in?	radio. I	Required
	[ccc19] = 1 you shoul patient is	from COVID-19 (with or without complications) or died from COVID-19, you should select "during the COVID-19 illness". If you know that the patient is deceased, you should select "after the course of illness (retrospectively)".	\vdash	ter the course of illness (retrospectively)
	Show the field ONLY if:	retrospectively? Unless you know that the patient has either recovered		uring the illness
2	timing_of_report	Is this survey being filled out during the COVID-19 illness, or	<u> </u>	Required
			-	TEST
			145	Willis-Knighton Cancer Center Yale New Haven Health/Smilow Cancer Hospital
			130	West Cancer Center Willis-Knighton Cancer Center
			194	Went Cancer Center
			170	WellSpan Health
			164	Weill Cornell Medicine/Meyer Cancer Center
				Center
			129	Washington University in St. Louis/Siteman Cance
			157	Wake Forest Baptist Comprehensive Cancer Cent
			186	Virtua Health
			191	Virginia Mason Cancer Institute
			1- 111	Vidant Medical Center, East Carolina University
			128	Vanderbilt University Medical Center/Vanderbilt- Ingram Cancer Center
			1100	*
			174	University of Wisconsin Carbone Cancer Center
			132	University of Rochester Medical Center
			127	University of North Carolina/Lineberger Comprehensive Cancer Center
			184	University of Nebraska Medical Center/Buffett Cancer Center
			1- 106	University of Mississippi Medical Center
			126	University of Minnesota
			153	University of Michigan/Rogel Cancer Center
			125	University of Miami/Sylvester Comprehensive Cancer Center
			124	University of Maryland
			1- 105	University of Louisville James Graham Brown Cancer Center
			123	University of Kansas
				University of Iowa Holden Comprehensive Cance Center
			169	University of Illinois at Chicago (UIC)
			156	University of Hawaii Cancer Center
			161	University of Florida Health Cancer Center

	ovid_19_dx_interval how the field ONLY if: ccc19] = 1	How long ago was the patient's COVID-19 diagnosis (to the best of your knowledge)?	1 \ \ \ 2 \ \ \ 3 \ \ \ \ \ \ \ 5 \ \ \ 6 \ \ \ \ 7 \ \ \ 8 \ \ \ 9 \ \ \ \ 10 \ \ \ 99 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Required Within the past week Within the past 1 to 2 weeks Within the past 2 to 4 weeks Within the past 4 to 8 weeks Within the past 8 to 12 weeks Within the past 8 to 12 weeks Within the past 3 to 6 months More than 6 months ago Within the past 6 to 9 months Within the past 9 to 12 months Wore than 12 months ago Unknown Annotation: @HIDECHOICE = '7'		
Sh	cw_screen how the field ONLY if: ccc19] = '0'	Are you a healthcare provider or entering data on a healthcare provider's behalf?	1 Ye	yesno 1 Yes 0 No Field Annotation: @HIDDEN		
Sh	cw_exclude how the field ONLY if: ncw_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.	Field /	dio		
17 lo	ocation	Are you based in any of the listed countries or regions?	radio			
	how the field ONLY if:		1	United States or the U.S. territories		
[c	ccc19] = '0'		EU	European Union (EU)		
			11	Argentina		
			39	Canada		
			140	Mexico		
			224	United Kingdom		
			83	Germany		
			107	Italy		
			197	Spain		
			0	No - I am not based in any of those countries or regions		
			Field /	Annotation: @HIDECHOICE = '83,107,197' @HIDDEN		
Sh	ntl_stop how the field ONLY if: ocation] = '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	radio x Ex	kit the survey		
		our website for more information; you will be redirected there once you end the survey by clicking the button.		Annotation: @HIDDEN actions on x		
19 sc	creening_form_complete	Section Header: Form Status Complete?	dropdown 0 Incomplete 1 Unverified 2 Complete			
Instrum	nent: Patient Demographic	s (patient_demographics) 🔊 Enabled as survey		^ Collapse		
20 ts	5_1	Timestamp for the patient demographics form		datetime_dmy), Required Annotation: @HIDDEN @NOW_UTC		
21 lo	ocal_id	This field will only hold metadata for those sites using local REDCap instances and exporting to this database. It holds the local database record_id field.	text (i	text (integer) Field Annotation: @HIDDEN		
22 pa	atient_id	Please enter your local unique patient identifier here (no PHI!). If this is	text (i	nteger, Min: 1), Required		
	how the field ONLY if: ccc19] = '1'	a test case, please enter "9999".				

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23	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	radio, Required
		for COVID-19 as available for data entry.	1 Younger than 18
		Age at COVID-19 diagnosis (years)	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 DEPRECATED (was unknown)
			99 Unknown
			Field Annotation: @HIDECHOICE = '10'
24	peds_contact	We have interest in collecting additional information about pediatric	descriptive
	Show the field ONLY if: [age] = '1'	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).	
25	age_exact	Exact age at COVID-19 diagnosis (Note: you should only enter a	text (integer, Min: 18, Max: 89)
	Show the field ONLY if:	number between 18-89, as ages outside of this range are considered	
	[age] = '2' or [age] = '3' or [age] =	PHI)	
	'4' or [age] = '5' or [age] = '6' or [a ge] = '7' or [age] = '8'		
26	gender	Gender	dropdown, Required
	Bernae.	- School	0 Female
			1 Male
			2 Other
			3 Prefer not to say
			Field Annotation: SNOMED: 263495000
27	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

9) 14	egistry REDCap
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
	-

9) RE	egistry REDCap
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

9) RE	egistry REDCap
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
175 176	Qatar Reunion
176	Romania
178	Russian Federation
179	Rwanda
180	Saint Kitts and Nevis
181	Saint Ritts and Nevis Saint Lucia
182	Saint Lucia 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
	2.2 3 200110

,	11.00 7 dVI	COVID TO UNA GUNGEL CONSCITUIN (COC	,	-37
			190	Singapore
				Slovak Republic
			192	Slovenia
			193	Solomon Islands
			194	Somalia
				South Africa
			l —	S. Georgia and S. Sandwich Isls.
				Spain
				Sri Lanka
			l —	St. Helena
			l 	St. Pierre and Miquelon
			l ——	Sudan
			-	Suriname
			-	Svalbard and Jan Mayen Islands
			l ——	Swaziland
			-	Sweden
			-	
				Switzerland
				Syria
			l 	Taiwan
				Tajikistan
				Tanzania
			-	Thailand
				Togo
			l 	Tokelau
			l ——	Tonga
			l ——	Trinidad and Tobago
			-	Tunisia
			1	Turkey
			-	Turkmenistan
			1	Turks and Caicos Islands
			220	Tuvalu
			1	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
			F:	Annatation Chichaed, 20000000
20	atata af mati i	Chata and anti-series of a street and a stre	1	Annotation: SNOMED: 223369002
28	state_of_patient_residence	State or territory of patient residence		down (autocomplete), Required

 $https://redcap.vanderbilt.edu/redcap_v11.4.2/Design/data_dictionary_codebook.php?pid=108899$

Show the field ONLY if:

Alabama (AL)

COVID-19 and Cancer Consortium (CCC19) Registry | REDCap [country_of_patient_residen] = '1' Alaska (AK) ΑZ Arizona (AZ) AR Arkansas (AR) CA California (CA) CO Colorado (CO) CT Connecticut (CT) DE Delaware (DE) FL Florida (FL) GΑ Georgia (GA) Н Hawaii (HI) ID Idaho (ID) IL Illinois (IL) IN Indiana (IN) ΙA lowa (IA) KS Kansas (KS) ΚY Kentucky (KY) LA Louisiana (LA) ME Maine (ME) MD Maryland (MD) MA Massachusetts (MA) MI Michigan (MI) Minnesota (MN) MN Mississippi (MS) MS МО Missouri (MO) MT Montana (MT) NE Nebraska (NE) NV Nevada (NV) NH New Hampshire (NH) NJ New Jersey (NJ) NM New Mexico (NM) NY New York (NY) NC North Carolina (NC) ND North Dakota (ND) ОН Ohio (OH) ОК Oklahoma (OK) OR Oregon (OR) PA Pennsylvania (PA) RI Rhode Island (RI) SC South Carolina (SC) SD South Dakota (SD) TN Tennessee (TN) TX Texas (TX) UT Utah (UT) VT Vermont (VT) VA Virginia (VA) WA Washington (WA) WV West Virginia (WV) WI Wisconsin (WI) WY Wyoming (WY) DC District of Columbia (DC) AS American Samoa (AS) GU Guam (GU) MP Northern Mariana Islands (MP) PR Puerto Rico (PR)

	11.55 AW					
			VI U.S. Virgin Islands (VI)			
29	city	What is the name of the city where the patient is receiving medical care? Optional, but will help with avoiding duplicate reports.	text			
30	facility	What is the name of the healthcare facility where the patient is presenting? Optional, but will help with avoiding duplicate reports. If the facility is a satellite to a larger center, please specify in this field.	text			
31	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	yesno 1 Yes 0 No			
		optional but will really help us understand the granular details better.				
32	race	Patient-reported race (check all that apply if patient identifies with more than one race)	checkbox 1002- race1002_5 American Indian/Alaska Native			
			5			
			2028- race2028_9 Asian 9			
			2076- race2076_8 Native Hawaiian or Other Pacific Islander			
			2054- race2054_5 Black or African American 5			
			2106- race2106_3 White 3			
			2131- race2131_1 Other			
			UNK raceunk Unknown / Not Reported			
			Field Annotation: Value Set: 2.16.840.1.114222.4.11.6065			
33	ethnicity	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			
34	urban_rural	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			
35	insurance	What is the patient's insurance status? Check all that apply; this should be the insurance status at the time of COVID-19 diagnosis.	checkbox			
	Show the field ONLY if: [more_demographics] = '1' or [ccc	22 2.2 2.3 discussed decision and of Corto 17 diagnosis.	0 insurance_0 Not insured			
	19] = '1' or [country_of_patient_re		1 insurance1 Private insurance/managed care			
	siden] = '1'		2 insurance2 Medicaid			
			3 insurance3 Medicare 4 insurance 4 Other government			
			4 insurance4 Other government 99 insurance99 Unknown			
36	hcw	Is the patient a healthcare worker?	radio 0 No			
			99 Unknown			
27	hay info	We are surrouth developing a consistent surrouth and the surrouth				
37	hcw_info	We are currently developing a separate survey to collect more information on healthcare workers with cancer who have suspected or	descriptive Field Annotation: @HIDDEN			
	Show the field ONLY if: [hcw] = '1'	confirmed COVID-19. You may learn more about this effort by visiting the CCC19 website (clicking this link will open a new window).				
		the coche website (clicking this link will open a new window).				

	İ		II UN	UNK Unknown			
			88 AFTER COVID-19 diagnosis				
			diagnosis 3 Within the past 3 to 12 months prior to COV diagnosis			o COVID-19	
	Show the field ONLY if: [recent_surgery] = '1'	COVID-19 diagnosis?	Within the past month prior to COVID-19 diagnos Within the past 1 to 3 months prior to COVID-19				
47	surgery_timing	What is the timing of the most recent surgery, relative to the date of	99 Unknown radio				
		include but not be inflitted to tainer surgeries.	1				
46	recent_surgery	Has the patient had a surgery of any kind in the past year? This should include but not be limited to cancer surgeries.	radio		\neg		
45	surg_med_hx_header	Surgical and Medical History	desc	riptive			
44	bmi	Patient body mass index (BMI) in kg/m2 Note: please do not enter BSA here.	text	(numbe	r, Min: 5)		
43	weight	Patient weight, please specify units. If you know BMI, please skip this field and enter it below. If patient has not had any recent weights taken, ok to use values up to 3 months prior to COVID-19 diagnosis.	text				
42	height	Patient height, please specify units. If you know BMI, please skip this field and enter it below. If patient has not had any recent heights taken, ok to use values up to 12 months prior to COVID-19 diagnosis.	text				
41	smoking_product_oth_specify Show the field ONLY if: [smoking_product(OTH)] = '1'	Please specify type of other smoking products Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	note	es —			
			Field	d Annotation: Variable:SNOMED 698101006; Value SNOMED			
			OTH		smoking_productoth smoking_productunk	Other Unknown	
				495000	smoking_product722495000	Hookah pipe	
	g_statusj = 2a			498003	5	e-Cigarettes	
	[smoking_status] = '1' or [smokin g_status] = '2a'		722	497008	smoking_product722497008	Cigars	
+∪	Show the field ONLY if:	Types of initiated shioking products. Check all that apply.		496004	smoking_product722496004	Cigarettes	
40	smoking_product	Types of inhaled smoking products. Check all that apply.	╚	kbox	/vii		
			3	Never s			
			2d		smoker, quit more than 10 years	ago	
			2c		smoker, quit between 6 and 10 y		
					smoker, quit less than 1 year ago		
			2 2a		smoker, NOS smoker, quit less than 1 year ago		
			1		t smoker		
39	smoking_status	Smoking status	radio)			
			99	Unknov	19 diagnosis vn		
			88	Totally confined to bed or chair No ECOG PS recorded within the 3 months prior to			
			4	' '			
			1: Restricted in physically strenuous ac ambulatory and able to carry out work sedentary nature, e.g., light house wor 2: Ambulatory and capable of all self-c to carry out any work activities. Up and than 50% of waking hours 3: Capable of only limited self-care. Co				
		COVID-19 diagnosis, you should choose "No ECOG PS recorded within 3 months prior to COVID-19 diagnosis".			story and able to carry out work o	f a light or	
		performance status closest to the time of infection. If the patient has not had an encounter with the medical system within 3 months of the	0	0: Fully active, able to continue with all pre-disease activities without restriction			
performance status closest to the time of infection. If the patient has				··· · y · · · · · · · · · · · · · · · · · · ·			

		OOVID TO GIRD OURSON GOING HIGHT (OCC	-, 5	<u> </u>	
48	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		
49	concomitant_meds	Concomitant medications being taken at time of presentation with	checkbox		
75	concomitant_meas	COVID-19. These would typically be the medications that the patient	H02	concomitant meds h02	Systemic co
		was taking as an outpatient at or around the time of COVID-19 diagnosis, unless they were already hospitalized and on additional	L04A	concomitant_medsl04a	Immunosup
		medications for other reasons. Check all that apply.	RXCUI-	concomitant_medsrxcui_2393	Chloroquine
			2393		
			RXCUI- 5521	concomitant_medsrxcui_5521	Hydroxychlo (Plaquenil)
			RXCUI- 612865	concomitant_medsrxcui_612865	Tocilizumab
			C09A	concomitant_medsc09a	ACE inhibito
			C09C	concomitant_medsc09c	Angiotensin (ARBs)
			ATC- C10AA	concomitant_medsatc_c10aa	Statins
			J01	concomitant_medsj01	Antibiotics
			RXCUI- 18631	concomitant_medsrxcui_18631	Azithromyci Pak)
			HO- 44995	concomitant_medsho_44995	Anti-virals
			ATC- J05AR10	concomitant_medsatc_j05ar10	Lopinavir/Ri
			RXCUI- 260101	concomitant_medsrxcui_260101	Oseltamivir
			N02BE01	concomitant_medsn02be01	Tylenol (paracetamo
			M01A	concomitant_medsm01a	Ibuprofen, r
			N02BA	concomitant_medsn02ba	Aspirin
			B01AC	concomitant_medsb01ac	Antiplatelet aspirin
			A10BA02	concomitant_medsa10ba02	Metformin
			A11CC	concomitant_medsa11cc	Vitamin D
			B01A	concomitant_medsb01a	Anticoagula
			C07A	concomitant_medsc07a	Beta blocker
			ОТН	concomitant_medsoth	Other
			UNK	concomitant_medsunk	Unknown
			NONE	concomitant_medsnone	None
			Field Anno @NONEOF 2393'	ignment: LH tation: Terminology: ATC, RxNorm THEABOVE='NONE' @HIDECHOICE='C	07A,RXCUI-
50	steroid_timing	Are the systemic corticosteroids taken continuously, or are they taken intermittently, as part of a chemotherapy regimen? Intermittent	radio	inuoush	
	Show the field ONLY if: [concomitant_meds(H02)] = '1'	steroids can be used for various reasons, such as prevention of	-	inuously	
	[20.100111td11t_111td3(1102)] = 1	nausea/vomiting, or as part of the chemotherapy regimen itself (e.g., R-CHOP).		mittently	
			88 Both 99 Unkn		
				IOWIT	
51	steroid_specific_2	Steroid dosing, in prednisone dose equivalents Note: 3 mg of dexamethasone is equivalent to 20 mg of prednisone, so any dose of	radio	g/day or below [low dose]	
	Show the field ONLY if: [concomitant_meds(H02)] = '1'	dexamethasone of more than 3 mg/day (21 mg/week) would be		g/day or below [low dose]	
	2 3 4 7	equivalant to more than 20 mg of prednisone/day.		e than 10 mg/day up to 20 mg/day	
			-	e than 20 mg/day but less than 1mg/kg	z/dav
				Il to or greater than 1 mg/kg/day	, au
			99 Unkn		
			122 1 0	•	
			Field Anno	tation: @HIDECHOICE='1'	

		· · · · · · · · · · · · · · · · · · ·	, ,	· · · · · · · · · · · · · · · · · · ·	
52	immuno_type	Please specify which immunosuppressant(s). Check all that apply.	checkbox		. 7
	Show the field ONLY if:		L04AD01		Cyclosporine
	[concomitant_meds(L04A)] = '1'		L04AD02	-3	Tacrolimus (Prograf)
			L04AA10	immuno_typel04aa10	Sirolimus
			L04AA18	immuno_typel04aa18	Everolimus
			L04AX01	- 21	Azathioprine (lmuran)
			L04AA06		Mycophenolate mofetil (CellCept)
			L01BB02		Mercaptopurine (6- MP)
			L04AA33	immuno_typel04aa33	Vedolizumab
			L01BA01	immuno_typel01ba01	Methotrexate
			L01AA01	immuno_typel01aa01	Cyclophosphamide
			L04AB04	immuno_typel04ab04	Adalimumab
			L01XE18	immuno_typel01xe18	Ruxolitinib (Jakafi)
			L01XE57	immuno_typel01xe57	Fedratinib (Inrebic)
			OTH	immuno_typeoth	Other
			UNK	immuno_typeunk	Unknown
				tation: Terminologies: ATC DICE='L04AA18,L04AA33,L04.	AB04,L01XE57'
53	immuno_oth_more	Please specify what other immunosuppressants Do not record any PHI	notes		
	Show the field ONLY if: [immuno_type(OTH)] = '1'	in this field. As a reminder, this includes all elements of dates other than year.			
54	aspirin_dose	Aspirin dosing	radio		
	Show the field ONLY if:		26245900	3 Low dose (less than 200 i	mg/day)
	[concomitant_meds(N02BA)] = '1'		26182900	3 Full dose	
			26166500	6 Unknown	
			Field Anno	tation: Terminology: SNOME	D
55	bl_anticoag_type	Which anticoagulants were used? Check all that apply.	checkbox		
	Show the field ONLY if: [concomitant_meds(B01A)] = '1'		B01AA	bl_anticoag_typeb01aa	Vitamin K antagonists (e.g., warfarin)
			B01AB	bl_anticoag_typeb01ab	Low-molecular weight heparin (e.g., enoxaparin [Lovenox])
			B01AB01	bl_anticoag_typeb01ab0	Unfractionated heparin
			B01AE	bl_anticoag_typeb01ae	Direct thrombin inhibitors (e.g., argatroban, dabigatran [Pradaxa])
			B01AF	bl_anticoag_typeb01af	Direct factor Xa inhibitors (e.g., apixaban [Eliquis], rivaroxaban [Xarelto])
			B01AX05	bl_anticoag_typeb01ax0	5 Fondaparinux
			UNK	bl_anticoag_typeunk	Unknown
			ОТН	bl_anticoag_typeoth	Other
				tation: Terminology: ATC DICE='B01AX05'	

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56	bl_anticoag_reason	Why were anticoagulants being used?	radio
	Show the field ONLY if:		360271000 Prophylaxis
	[concomitant_meds(B01A)] = '1'		262202000 Therapeutic dosing
			261665006 Unknown
			Field Agretation: Tayminalagu CNOMED
57	bl_anticoag_type_oth_specify	Please specify what other anticoagulants Do not record any PHI in this	Field Annotation: Terminology: SNOMED notes
37		field. As a reminder, this includes all elements of dates other than year.	notes
	Show the field ONLY if: [bl_anticoag_type(OTH)] = '1'		
58	meds_other	Please specify what other medications Do not record any PHI in this	notes
	Show the field ONLY if: [concomitant_meds(OTH)] = '1'	field. As a reminder, this includes all elements of dates other than year.	
59	gcsf	Did the patient receive G-CSF within two weeks of the COVID-19	radio
		diagnosis?	0 No
			1 Yes, Prophylactic G-CSF use (within 1-3 days of completion of chemo)
			Yes, Therapeutic G-CSF use (later than 1-3 days after chemo or during a neutropenic hospitalization)
			OTH Other
			UNK Unknown
60	gcsf_oth_specify	Please specify what other G-CSF Do not record any PHI in this field. As a	notes
00	Show the field ONLY if: [gcsf] = 'OTH'	reminder, this includes all elements of date other than year.	notes
61	additional_meds	Additional details about medications that the patient may have been	notes
		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.	
62	sars_vax	Did the patient receive a SARS-CoV-2 vaccine?	radio
			0 No
			1 Yes
			99 Unknown
63	sars_vax_which	Which of the following SARS-CoV-2 vaccines did the patient receive? If	radio, Required
	Show the field ONLY if:	the vaccination given does not fit into any of the categories (e.g., they started with Johnson & Johnson and then switched to Pfizer) please	1a AstraZeneca vaccine (one dose only)
	[sars_vax] = '1'	select Other and describe the dosing in the free text.	1b AstraZeneca vaccine (both doses)
			4 Johnson & Johnson vaccine (one dose)
			4b Johnson & Johnson vaccine (more than one dose)
			2a Moderna mRNA vaccine (one dose only)
			2b Moderna mRNA vaccine (both initial doses)
			2c Moderna mRNA vaccine (both doses + booster)
			3a Pfizer mRNA vaccine (one dose only)
			3b Pfizer mRNA vaccine (both initial doses)
			3c Pfizer mRNA vaccine (both doses + booster)
			88 Other
			99 Unknown
64	sars_vax_other	Please specify what other SARS-CoV-2 vaccine Do not record any PHI in	notes
	Show the field ONLY if: [sars_vax_which] = '88'	this field. As a reminder, this includes all elements of date other than year.	
65	sars_vax_when	How long after the FIRST dose of vaccine was COVID-19 diagnosed?	radio, Required
	Show the field ONLY if:		1 Less than 4 weeks
	[sars_vax] = '1'		2 4 to 8 weeks
			3 8 to 12 weeks
			4 More than 12 weeks
			88 N/A - patient was vaccinated AFTER the COVID-19 diagnosis
			99 Unknown
			55 OTINIOWIT

LO/ L 1,		COVID TO UNIO CONSORTIUM (COC	,		
66	influenza_vax	Did the patient have an influenza vaccine in the season which they contracted SARS-CoV-2?	radio 0 No 1 Yes 99 Unknow	WD	
67	bcg_vax	Has the patient ever had a BCG vaccine?	radio 0 No 1 Yes	<u>==</u>	
			99 Unknov	wn tion: @HIDDEN	
68	blood_type	Patient ABO blood type	radio A A B B AB AB O O 99 Unknow		
69	blood_type_rh	Patient RH blood type	radio 165747007 165746003 99	Rh+	
			Field Annota	tion: SNOMED: 115758001	
70	comorbid_header	Comorbidities In this section, please report on any pre-existing conditions other than cancer that were present prior to the COVID-19 illness.	descriptive	100.00.00.00.00.00.00.00.00.00.00.00.00.	
71	significant_comorbidities	Significant comorbidities (other than cancer). Check all that apply. If	checkbox		
		you do not know specific diagnoses, ok to choose the "NOS" categories (e.g., Pulmonary disease, NOS).Immune suppression is defined as outpatient use of prednisone (10mg/d or greater), use of	38013005	significant_comorbidities38013005	lmmun definiti
		chemotherapy, use of nonsteroidal immunosuppressive agents for	62479008	significant_comorbidities62479008	HIV +/-
		solid organ transplant or for an autoimmune disease.	19829001	significant_comorbidities19829001	Pulmor
			195967001	significant_comorbidities195967001	Asthma
			13645005	significant_comorbidities13645005	COPD/
			78275009	significant_comorbidities78275009	Obstru (OSA)
			84004001	significant_comorbidities84004001	Radiati
			427046006	significant_comorbidities427046006	ICI pne
			56265001	significant_comorbidities56265001	Cardio
			38341003	significant_comorbidities38341003	Hypert pressu
			55822004	significant_comorbidities55822004	Hyperl cholest
			53741008	significant_comorbidities53741008	(CAD)
			42343007	significant_comorbidities42343007	Conges (CHF) ii HFrEF
			698247007	significant_comorbidities698247007	Cardia
			49436004	significant_comorbidities49436004	Atrial f
			400047006	significant_comorbidities400047006	Periphe (PVD/P
			275526006	significant_comorbidities275526006	History acciden
			59282003	significant_comorbidities59282003	Pulmor
			128053003	significant_comorbidities128053003	Deep ve (DVT)
			90708001	significant_comorbidities90708001	Renal d
			723190009	significant_comorbidities723190009	Chronic

			46177005	significant_comorbidities46177005	End-stag (ESRD) n
			23643500	4 significant_comorbidities236435004	ESRD, on
			23585600	3 significant_comorbidities235856003	Liver disc
			19943007	significant_comorbidities19943007	Cirrhosis
			OTH-x	significant_comorbiditiesoth_x	Other or
			52448006	significant_comorbidities52448006	Dementi
			7200002	significant_comorbidities7200002	Alcoholis
			73211009	significant_comorbidities73211009	Diabetes
			19038800	1 significant_comorbidities190388001	Diabetes complica
			23760200	7 significant_comorbidities237602007	Metaboli
			41491600	1 significant_comorbidities414916001	Obesity
			23813600	2 significant_comorbidities238136002	Morbid c
					BMI > 35 related h
			44431600	4 significant_comorbidities444316004	Seasonal
			24526004		Inflamma
			24320004	significant_comorbidities24520004	(IBD)
			85828009	significant_comorbidities85828009	Rheumat disease
			23433600	2 significant_comorbidities234336002	History o
					transplar stem cell
			31303900	3 significant_comorbidities313039003	History o
			ОТН	significant_comorbiditiesoth	Other
			UNK	significant_comorbiditiesunk	Unknowr
			NONE	significant_comorbiditiesnone	None
				tation: Terminology: SNOMED	
				THEABOVE='NONE'	
72	transplant_timing	Was the most recent transplant performed within 2 years of COVID-19	radio		
	Show the field ONLY if:	diagnosis?	1 Yes		
	[significant_comorbidities(234336 002)] = '1' or [significant_comorbi		0 No		
	dities(313039003)] = '1'		99 Unkn	own	
73	hiv_cd4	What is the patient's CD4+ T-cell count?	text (numb	er, Min: 0)	
	Show the field ONLY if:				
	[significant_comorbidities(624790 08)] = '1'				
74	hiv_vl	What is the patient's viral load, in copies/mL?	text (numb	per, Min: 0)	
	Show the field ONLY if:				
	[significant_comorbidities(624790 08)] = '1'				
75	ibd	Please consider reporting this patient to the Secure-IBD Registry as	descriptive	!	
	Show the field ONLY if: [significant_comorbidities(245260 04)] = '1'	well.			
76	please_specify	Please specify what other significant comorbidities Do not record any	notes		
	Show the field ONLY if: [significant_comorbidities(OTH)] = '1' or [significant_comorbidities	PHI in this field. As a reminder, this includes all elements of date other than year.			
	(OTH-x)] = '1'				
77	o2_requirement	Does the patient have a baseline chronic O2 requirement?	radio		
			1 Yes, p	patient requires chronic supplemental O2	
			0 No, p	atient does not require supplemental O2	
			99 Unkn	own	
	I	<u> </u>	· —		

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78	comorbid_no	Number of comorbid conditions requiring active therapy.	radio)		
			0	0		
			1	1		
			2	2		
			3	3		
			4	4 or more		
			-			
			99	Unknown		
79	additional_comorbid	Additional comments about comorbidities. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	note	S		
80	comments_form_1	Section Header: Free text entry (optional)	note	S		
		Comments Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.				
81	patient_demographics_complete	Section Header: Form Status	drop	down		
		Complete?	0	Incomplete		
			1	Unverified		
			2	Complete		
Instr	ument: COVID-19 details (covi	d19_details) 🔄 Enabled as survey				^ Collapse
82	ts_2	Timestamp for the COVID-19 details form		(datetime_dmy), R	•	N LITC
				Annotation: @HIE	DDEN @NO\	N_UIC
83	c19_workup_why	Section Header: COVID-19 Details - Mandatory Diagnostic Information	radio			
		Why did the patient come to be evaluated for SARS-CoV-2 or COVID-19?	1	Symptoms		
			2	Screening prior	to a proced	lure
			3	Screening prior	to a system	nic anti-cancer treatment
			4	Screening due exposure)	to a high-ris	k situation (e.g., known
			OTI	H Other		
			UN	K Unknown		
			Field	l Annotation: @HII	DDEN DEPRE	ECATED
84	c19_workup_why_2	Why did the patient come to be evaluated for SARS-CoV-2 or COVID-19?		kbox, Required		
		Check all that apply.	1	c19_workup_w	hy_21	Symptoms
			2	c19_workup_w	hy_22	Screening prior to a procedure
			3	c19_workup_w	hy_23	Screening prior to a systemic anti-cancer treatment
			4	c19_workup_w	hy_24	Screening due to a high- risk situation (e.g., known exposure)
			5	c19_workup_w	hy_25	Screening required for public health reasons (e.g., prior to nursing home placement)
			OTH	d c19_workup_w	hy_2oth	Other
			UN	K c19_workup_w	hy_2unk	Unknown
85	workup_oth_specify	Please specify what other reason for COVID-19 evaluation Do not record any PHI in this field. As a reminder, this includes all elements of	note	S		
	Show the field ONLY if: [c19_workup_why] = 'OTH'	dates other than year.				

86	symptoms	Which symptoms and/or signs were present upon initial	checkbox, Re	equired	
80	Symptoms	presentation? Check all that apply.	367391008		Fatigue/Malaise
			386661006		Fever
			49727002	symptoms49727002	Cough
			248595008	symptoms248595008	Productive cough (with sputum)
			267036007	symptoms267036007	Dyspnea (SOB/DOE)
			68962001	symptoms68962001	Myalgias (muscle pains, body aches)
			57676002	symptoms57676002	Arthralgias (joint pains)
			162397003	symptoms162397003	Sore throat
			25064002	symptoms25064002	Headache
			419284004	symptoms419284004	Altered mental status (AMS)
			44169009	symptoms44169009	Loss of sense of smell (anosmia)
			36955009	symptoms36955009	Loss of taste (ageusia)
			64531003	symptoms64531003	Rhinorrhea (runny nose)
			422587007	symptoms422587007	Nausea
			272044004	symptoms272044004	Vomiting
			62315008	symptoms62315008	Diarrhea
			43364001	symptoms43364001	Abdominal discomfort (other than frank abdominal pain)
			21522001	symptoms21522001	Abdominal pain
			166643006	symptoms166643006	LFT abnormalities
			301095005	symptoms301095005	Cardiac involvement
			9826008	symptoms9826008	Conjunctivitis
			OTH	symptomsoth	Other
			84387000	symptoms84387000	None (patient was asymptomatic)
			UNK	symptomsunk	Unknown
				tion: Terminology: SNOMEI HEABOVE='84387000'	D
87	symptoms_oth_specify	Please specify other symptoms. Do not record any PHI in this field. As a	notes		
	Show the field ONLY if: [symptoms(OTH)] = '1'	reminder, this includes all elements of dates other than year.			
88	symptoms_none_why	Was the patient tested as part of a pre-treatment or pre-procedure	radio		
	Show the field ONLY if:	screening program?	0 No		
	[symptoms(84387000)] = '1'		1 Yes		
			99 Unknow	wn	
89	covid_19_diagnosis	COVID-19 diagnosis Note: if the patient ever had a positive laboratory	radio, Requi	red	
		result, please choose "laboratory-confirmed". This should be checked even if the positive test is from another facility and you do not have a	1 Suspec	ted based on symptoms	
		hard copy of the results. Laboratory results can include PCR,	11 Suspec	ted based on contact with o	confirmed case
		antibodies, or any other test that would be consistent with a current or prior SARS-CoV-2 infection.	2 Suspec	ted based on CXR findings	
		prior 5/45 COV 2 intection.	3 Suspec	ted based on CT scan findir	ngs
			4 Labora	tory-confirmed	
			99 Unknow	wn	
		•			

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90	covid_19_lab_type	What was the type of laboratory confirmation? Check all that apply	check	box, R	Required	
	Show the field ONLY if:		9474	16-5	covid_19_lab_type94746_5	PCR
	[covid_19_diagnosis] = '4'		9455	58-4	covid_19_lab_type94558_4	Antigen test (ELISA)
			9476	52-2	covid_19_lab_type94762_2	Serology (antibodies to SARS-CoV-2)
			LA14	1698-	covid_19_lab_typela14698_7	Other
			LA44	189-6	covid_19_lab_typela4489_6	Unknown
			Field.	Annot	ation: Vocabulary: LOINC	
91	covid_19_dx_imaging	Please describe the imaging abnormalities. Do not record any PHI in	notes	5		
	Show the field ONLY if: [covid_19_diagnosis] = '2' or [covi d_19_diagnosis] = '3'	this field. As a reminder, this includes all elements of dates other than year.				
92	neg_test	Did the patient have a negative laboratory test despite having	radio	, Requ	ired	
	Show the field ONLY if:	symptoms or signs supportive of the COVID-19 diagnosis?	l 	Yes		
	[covid_19_diagnosis] = '1' or [covid_19_diagnosis] = '11' or [covid_1		-	No		
	9_diagnosis] = '2' or [covid_19_dia gnosis] = '3' or [covid_19_diagnosi s] = '99'		99	Unkno	wn	
93	covid_19_test_more	Please provide additional details, including the type of COVID-19 test.	notes	;		
	Show the field ONLY if: [neg_test] = '1' or [covid_19_diagn osis] = '4'	Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.				
94	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	i		
95	severity_of_covid_19_v2	Section Header: Initial Severity and Course of Illness	radio	, Requ	ired	
		Initial severity of COVID-19 Note 1: this is probably the most important single piece of information that we are gathering, please try not to	1	Mild (r	no hospitalization required)	
		answer "unknown" if at all possible. Note 2: if hospitalization or ICU	2	Mode	rate (hospitalization indicated)	
		admission were indicated but the patient was not actually admitted, you should still select that box. For example, for a patient who arrives	3	Severe	e (ICU admission indicated)	
		at the ED with critical hypoxia that would ordinarily indicate a need for	99	Unkno	own	
		mechanical ventilation, but is transitioned to home hospice immediately, you should still select the severe checkbox. Note 3: if the				
		patient is diagnosed while in the hospital and is asymptomatic (e.g., as				
		screening prior to nursing home placement), answer this question as if				
96	cytokine_yn	they were presenting as an outpatient. Did the patient experience a cytokine storm or cytokine release	radio			
75	Show the field ONLY if:	syndrome that was specifically documented in the patient's chart?		No		
	[severity_of_covid_19_v2] = '2' or		-	Yes		
	[severity_of_covid_19_v2] = '3'		99	Unkno	own	
					ation: @HIDDEN	
97	hosp_status	Was the patient ever hospitalized during their course of illness? If the patient was hospitalized more than once, please report on the index		, Requ	ired	
		hospitalization and make a note in the comments about the other	-	No Voc - 3	dmitted to floor	
		hospitalization(s).	-		dmitted to floor	arred to the ICI
			-			arred to the ICU
			-		dmitted directly to the ICU	
			-	Unkno	Inknown details	
-						
98	dx_hosp_interval Show the field ONLY if: [hosp_status] = '1' or [hosp_statu s] = '2' or [hosp_status] = '3' or [h	How many days elapsed between the COVID-19 diagnosis and the first hospital admission? If the patient was hospitalized on the same day as their diagnosis, enter 0 here. If they were hospitalized before the COVID-19 diagnosis (e.g., iatrogenic COVID-19), enter a negative number corresponding to how many days they were in the hospital	text (i	intege	7)	
	osp_status] = '88'	before diagnosis. If you do not know the answer, enter 9999 here.				

			·
100	code_status_admit Show the field ONLY if: [hosp_status] = 1 or [hosp_status] = 2 or [hosp_status] = 3 or [hosp_status] = 88 code_status_change	What was the patient's code status at the time of admission Did the patient's code status change during the hospitalization?	radio 1 Full code 2 DNR only 3 DNI only 4 DNR/DNI 99 Unknown
100	Show the field ONLY if: [hosp_status] = 1 or [hosp_status] = 2 or [hosp_status] = 3 or [hosp_ status] = 88	one the patient's code status change during the hospitalization:	0 No 1 Yes 99 Unknown
101	code_status_change_what Show the field ONLY if: [code_status_change] = 1	What did the code status change to?	radio 1 Full code 2 DNR only 3 DNI only 4 DNR/DNI 88 Other 99 Unknown
102	code_status_change_why Show the field ONLY if: [code_status_change] = 1	Briefly describe why the code status was changed. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes
103	palliative_yn Show the field ONLY if: [hosp_status] = 1 or [hosp_status] = 2 or [hosp_status] = 3 or [hosp_status] = 88	Was a palliative care consultant or team involved in the care of the patient during this admission?	radio 0 No 1 Yes 99 Unknown
104	hosp_los Show the field ONLY if: [hosp_status] = '1'	If known, how long was the length of stay, in days? If the patient is still hospitalized, enter 9999 here.	text (integer, Min: 1)
105	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)
106	icu_los Show the field ONLY if: [hosp_status] = '2' or [hosp_statu s] = '3'	If known, how long was the ICU length of stay, in days? If the patient is still in the ICU, enter 9999 here.	text (integer, Min: 1)
107	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
108	days_to_death_2 Show the field ONLY if: [current_status] = '9'	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
109	cause_of_death Show the field ONLY if: [current_status] = '9'	To the best of your knowledge, what was the proximal cause of death?	radio, Required 1 COVID-19 2 Cancer 3 Both 88 Other 99 Unknown
110	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

		<u>, </u>		<u> </u>		
111	c19_complications_systemic	Section Header: Complications	checkbox, Re	•		\vdash
		Systemic complications occurring during the COVID-19 illness. Check all that apply. If there were no systemic complications, please check	50960005	c19_complications_systemic5096		Bleed
		"None".	67406007	c19_complications_systemic6740	6007	Dissei intrav coagu (DIC)
			57653000	c19_complications_systemic5765	3000	Multic failure
			91302008	c19_complications_systemic9130	2008	Sepsis
			238147009	c19_complications_systemic2381	47009	Other
			NONE	c19_complications_systemicnone	è	None
			UNK	c19_complications_systemicunk		Unkno
				ion: Terminology: SNOMED IEABOVE='NONE'		
112	c19_bleeding	Please specify the type of bleeding. Check all that apply.	checkbox			
	Show the field ONLY if: [c19_complications_systemic(509 60005)] = '1'		112648003	c19_bleeding112648003	Major bleedi (requii multip RBCs transfi or ICU admit)	ng ring ble usions
			73099002	c19_bleeding73099002	Non-m	najor nically
			127563002	c19_bleeding127563002	Minor (witho transfi need)	ut
			230690007- Major	c19_bleeding230690007_major	CNS hemorextens	rrhage, sive
			230690007- Minor	c19_bleeding230690007_minor	CNS hemor limited	rrhage,
			ОТН	c19_bleedingoth	Other	
			UNK	c19_bleedingunk	Unkno	own
			Field Annotat	ion: Terminology: SNOMED-modified	d	
113	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			
114	dic_certainty	How definite was the DIC diagnosis?	radio			
	Show the field ONLY if:		1 Definite			
	[c19_complications_systemic(674 06007)] = '1'		2 Suspect	ed		
	06007)] = 1		99 Unknow	'n		
115	dic_treatment	Which of the following were used to treat the DIC?	radio			\exists
	Show the field ONLY if:		346447007	Plasma (FFP)		
	[c19_complications_systemic(674 06007)] = '1'		256401009	Cryoprecipitate		
	00007)] = 1		NONE	None		
			UNK	Unknown		
			OTH	Other		
			Field Appoint	ion: Terminology: SNOMED @HIDDE	N	
116	dic_more	Please provide further details about DIC, including clinical	notes	.s reminiology. Sivolvied willibbe	. •	\dashv
110	Show the field ONLY if: [c19_complications_systemic(674 06007)] = '1'	manifestations and treatment. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.				
117	c19_comp_systemic_specify Show the field ONLY if: [c19_complications_systemic(238	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			
	147009)] = '1'					

118	o2_requirement_c19	Did the patient require supplemental O2 during the course of illness?	0	, Require No	ed			
			-	Yes Unknow	vn			
119	o2_policy	Was there an institutional policy in place to refuse intubation for	radio					
	Show the field ONLY if:	patients with metastatic cancer, at the time when this patient required		No				
	[o2_requirement_c19] = '1'	supplemental O2?	1	Yes				
			99	Unknow	vn .			
120	c19_complications_pulm	Pulmonary complications occurring during the COVID-19 illness. Check	check	kbox, Re	quired			
		all that apply. If there were no pulmonary complications, please check "None". Note: the distinction between pneumonia and pneumonitis can often be very subtle and subjective. Radiology notes may say	4096	522000	c19_complication	ns_pulm409622000	Respira failure	tc
		pneumonitis and clinical notes may say pneumonia. Please use your	2052	237003	c19_complication	ns_pulm205237003	Pneum	or
		best judgment.	2336	504007	c19_complication	ns_pulm233604007	Pneum	or
			6778	32005	c19_complication	ns_pulm67782005	Acute respira distress syndro (ARDS)	5
			5928	32003	c19_complication	ns_pulm59282003	Pulmor emboli (PE)	
			6004	46008	c19_complication	ns_pulm60046008	Pleural effusio	
			3126	582007	c19_complication	ns_pulm312682007	Empye	ma
			5004	43002	c19_complication	ns_pulm50043002	Other	L
			NON	ΙE	c19_complication	ns_pulmnone	None	L
			UNK	(c19_complication	ns_pulmunk	Unknow	vr
			Field .	Annotat	ion: Terminology:	SNOMED		
121	resp_failure_tx	Which of the following supplemental O2 interventions did the patient	radio					
	Show the field ONLY if:	require? Select the most invasive intervention required during the course of illness.	1	Nasal ca	annula or face ma	sk with standard O2		
	[c19_complications_pulm(409622	require? Select the most invasive intervention required during the course of illness.	 		annula or face mas w nasal cannula o			
		·	2	High-flo Non-reb				
	[c19_complications_pulm(409622 000)] = '1' or [o2_requirement_c1	·	2 3 4	High-flo Non-reb CPAP	w nasal cannula o			
	[c19_complications_pulm(409622 000)] = '1' or [o2_requirement_c1	·	2 3 4 5	High-flo Non-reb CPAP BiPAP	w nasal cannula o oreather			
	[c19_complications_pulm(409622 000)] = '1' or [o2_requirement_c1	·	2 3 4 5 6	High-flo Non-reb CPAP BiPAP Intubati	w nasal cannula o oreather on			
	[c19_complications_pulm(409622 000)] = '1' or [o2_requirement_c1 9] = '1'	course of illness.	2 3 4 5 6 99	High-flo Non-reb CPAP BiPAP Intubati Unknow	w nasal cannula o oreather on			
122	[c19_complications_pulm(409622 000)] = '1' or [o2_requirement_c1 9] = '1' withdrawal_yn	·	2 3 4 5 6 99	High-flo Non-reb CPAP BiPAP Intubati Unknow	w nasal cannula o oreather on			
122	[c19_complications_pulm(409622 000)] = '1' or [o2_requirement_c1 9] = '1'	course of illness.	2 3 4 5 6 99 radio	High-flo Non-reb CPAP BiPAP Intubati Unknow	w nasal cannula o oreather on			
122	[c19_complications_pulm(409622 000)] = '1' or [o2_requirement_c1 9] = '1' withdrawal_yn Show the field ONLY if:	course of illness.	2 3 4 5 6 99 radio 0	High-flo Non-reb CPAP BiPAP Intubati Unknow	on			
	[c19_complications_pulm(409622 000)] = '1' or [o2_requirement_c1 9] = '1' withdrawal_yn Show the field ONLY if: [resp_failure_tx] = '6'	Course of illness. Was there an active decision to withdraw care?	2 3 4 5 6 99 radio 0 1	High-flo Non-reb CPAP BiPAP Intubati Unknow No Yes Unknow	on			
122	[c19_complications_pulm(409622 000)] = '1' or [o2_requirement_c1 9] = '1' withdrawal_yn Show the field ONLY if: [resp_failure_tx] = '6'	course of illness.	2 3 4 5 6 99 radio 0	High-flo Non-reb CPAP BiPAP Intubati Unknow No Yes Unknow	on			
	[c19_complications_pulm(409622 000)] = '1' or [o2_requirement_c1 9] = '1' withdrawal_yn Show the field ONLY if: [resp_failure_tx] = '6'	Course of illness. Was there an active decision to withdraw care? Who was involved in the decision to withdraw care? Please check all	2 3 4 5 6 99 radio 0 1 99 check	High-flo Non-reb CPAP BiPAP Intubati Unknow No Yes Unknow kbox withdi	on vn	or blow-by	other	
	[c19_complications_pulm(409622 000)] = '1' or [o2_requirement_c1 9] = '1' withdrawal_yn Show the field ONLY if: [resp_failure_tx] = '6' withdrawal_who Show the field ONLY if:	Course of illness. Was there an active decision to withdraw care? Who was involved in the decision to withdraw care? Please check all	2 3 4 5 6 99 radio 0 1 99	High-flo Non-reb CPAP BiPAP Intubati Unknow No Yes Unknow dbox withdi withdi	w nasal cannula o preather on yn rawal_who1	Patient	other	
	[c19_complications_pulm(409622 000)] = '1' or [o2_requirement_c1 9] = '1' withdrawal_yn Show the field ONLY if: [resp_failure_tx] = '6' withdrawal_who Show the field ONLY if:	Course of illness. Was there an active decision to withdraw care? Who was involved in the decision to withdraw care? Please check all	2 3 4 5 6 99 radio 0 1 99 check 1 2	High-flo Non-reb CPAP BiPAP Intubati Unknow No Yes Unknow kbox withdi withdi withdi	on vn rawal_who1 rawal_who2	Patient Spouse or significant	other	
	[c19_complications_pulm(409622 000)] = '1' or [o2_requirement_c1 9] = '1' withdrawal_yn Show the field ONLY if: [resp_failure_tx] = '6' withdrawal_who Show the field ONLY if:	Course of illness. Was there an active decision to withdraw care? Who was involved in the decision to withdraw care? Please check all	2 3 4 5 6 99 radio 0 1 99 check 1 2 3	High-flo Non-reb CPAP BiPAP Intubati Unknow No Yes Unknow withdo withdo withdo withdo	on oreather on vn rawal_who1 rawal_who2 rawal_who3	Patient Spouse or significant Child	other	
	[c19_complications_pulm(409622 000)] = '1' or [o2_requirement_c1 9] = '1' withdrawal_yn Show the field ONLY if: [resp_failure_tx] = '6' withdrawal_who Show the field ONLY if:	Course of illness. Was there an active decision to withdraw care? Who was involved in the decision to withdraw care? Please check all	2 3 4 5 6 99 radio 0 1 99 check 1 2 3 4	High-flo Non-reb CPAP BiPAP Intubati Unknow No Yes Unknow dbox withdi withdi withdi withdi withdi	on rawal_who1 rawal_who2 rawal_who3 rawal_who4	Patient Spouse or significant Child Parent	other	
	[c19_complications_pulm(409622 000)] = '1' or [o2_requirement_c1 9] = '1' withdrawal_yn Show the field ONLY if: [resp_failure_tx] = '6' withdrawal_who Show the field ONLY if:	Course of illness. Was there an active decision to withdraw care? Who was involved in the decision to withdraw care? Please check all	2 3 4 5 6 99 radio 0 1 99 check 1 2 3 4 5 5	High-flo Non-reb CPAP BiPAP Intubati Unknow No Yes Unknow withdo withdo withdo withdo withdo withdo withdo withdo	on orawal_who1 rawal_who2 rawal_who3 rawal_who4 rawal_who5	Patient Spouse or significant Child Parent Other family		
	[c19_complications_pulm(409622 000)] = '1' or [o2_requirement_c1 9] = '1' withdrawal_yn Show the field ONLY if: [resp_failure_tx] = '6' withdrawal_who Show the field ONLY if:	Course of illness. Was there an active decision to withdraw care? Who was involved in the decision to withdraw care? Please check all	2 3 4 5 6 99 check 1 2 3 4 5 6 6	High-flo Non-reb CPAP BiPAP Intubati Unknow No Yes Unknow cbox withdi withdi withdi withdi withdi withdi withdi	on oreather on orawal_who1 rawal_who2 rawal_who3 rawal_who4 rawal_who5 rawal_who6	Patient Spouse or significant Child Parent Other family Friend Primary managing	gist	
	[c19_complications_pulm(409622 000)] = '1' or [o2_requirement_c1 9] = '1' withdrawal_yn Show the field ONLY if: [resp_failure_tx] = '6' withdrawal_who Show the field ONLY if:	Course of illness. Was there an active decision to withdraw care? Who was involved in the decision to withdraw care? Please check all	2 3 4 5 6 99 check 1 2 3 4 5 6 7	High-flo Non-reb CPAP BiPAP Intubati Unknow No Yes Unknow withdi	rawal_who1 rawal_who2 rawal_who4 rawal_who5 rawal_who6 rawal_who7	Patient Spouse or significant Child Parent Other family Friend Primary managing hematologist/oncolog Hospitalist/Intensivist	gist	
	[c19_complications_pulm(409622 000)] = '1' or [o2_requirement_c1 9] = '1' withdrawal_yn Show the field ONLY if: [resp_failure_tx] = '6' withdrawal_who Show the field ONLY if:	Course of illness. Was there an active decision to withdraw care? Who was involved in the decision to withdraw care? Please check all	2 3 4 5 6 99 check 1 2 3 4 5 6 7 8 8 9	High-flo Non-reb CPAP BiPAP Intubati Unknow No Yes Unknow withdo	on vn rawal_who1 rawal_who2 rawal_who4 rawal_who5 rawal_who6 rawal_who7 rawal_who8	Patient Spouse or significant Child Parent Other family Friend Primary managing hematologist/oncolog Hospitalist/Intensivist Palliative care clinicia	gist	

124	berlin_yn	Were the Berlin criteria formally assessed?	radio)		
	Show the field ONLY if:		0	No		
	[c19_complications_pulm(677820		1	Yes		
	05)] = '1'		99	Unknov	wn/Unsure	
			لللا			
125	berlin_2	Berlin criteria.The Berlin criteria are based on a decreased PaO2/FiO2 ratio:-mild ARDS: 201 - 300 mmHg (≤ 39.9 kPa)-moderate ARDS: 101 -	radio		_	
	Show the field ONLY if:	200 mmHg (\leq 26.6 kPa)-severe ARDS: \leq 100 mmHg (\leq 13.3 kPa)Note	1	Mild		
	[berlin_yn] = '1'	that the Berlin definition requires a minimum positive end expiratory	2	Modera	ate	
		pressure (PEEP) of 5 cmH2O for consideration of the PaO2/FiO2 ratio. This degree of PEEP may be delivered noninvasively with CPAP to	3	Severe		
		diagnose mild ARDS. Click this link to access a calculator for PaO2/FiO2	99	Unknov	wn	
		ratio (opens a new window)				
126	c19_comp_pulm_specify	Please specify other pulmonary complications. Do not record any PHI	note	S		
	Show the field ONLY if:	in this field. As a reminder, this includes all elements of dates other than year.				
	[c19_complications_pulm(500430 02)] = '1'					
127	c19_complications_card	Cardiovascular complications occurring during the COVID-19 illness.	chec	kbox, Re	equired	
127	c15_complications_card	Check all that apply. If there were no cardiovascular complications,		07003	c19_complications_card4500700	3 Hypoter
		please check "None".		98006	c19 complications card 2229800	
			222	30000	c19_complications_card2229000	infarctio
			414	545008	c19_complications_card4145450	08 Other ca
						ischemi
			494	36004	c19_complications_card4943600	4 Atrial fib
			719	08006	c19_complications_card7190800	6 Ventricu
						fibrillatio
			698	247007	c19_complications_card6982470	
						arrhythr
			858	98001	c19_complications_card8589800	1 Cardion
			423	43007	c19_complications_card4234300	
						heart fa (CHF)
			592	82003	c19_complications_card5928200	
						embolis
			128	053003	c19_complications_card1280530	03 Deep ve
						thrombo
			075	F47000	40 11 11 1 2755476	(DVT)
			2/5	517008	c19_complications_card2755170	08 Superfid venous
						thrombo
						(SVT)
			230	690007	c19_complications_card2306900	07 Cerebro accident
						stroke)
			414	086009	c19_complications_card4140860	09 Thromb
						NOS
			496	01007	c19_complications_card4960100	7 Other
			NOI	NE	c19_complications_cardnone	None
			UNI	<	c19_complications_cardunk	Unknow
					•	
			Field	Annota	ition: Terminology: SNOMED	
128	sepsis_pressors	Did the patient require pressors?	radio		\neg	
	Show the field ONLY if:		0	No		
	[c19_complications_card(4500700 3)] = '1'		1	Yes		
	- J.J. ·		99	Unknov	wn	
129	c19_comp_card_specify	Please specify other cardiac complications. Do not record any PHI in	note	s		
	Show the field ONLY if:	this field. As a reminder, this includes all elements of dates other than				
	[c19_complications_card(4960100	year.				
	7)] = '1' or [c19_complications_car					
	d(414545008)] = '1' or [c19_compl ications_card(698247007)] = '1'					
	= ' ''	I .				

			, ,			
130	c19_complications_gi	Gastrointestinal complications occurring during the COVID-19 illness. Check all that apply. If there were no GI complications, please check	checkbox,	Required 09 c19_complications_gi_	427044000	Acute
		"None".	+2/U44U	os rera_complications_gi_	_+21044009	hepatic injury
			3890260	00 c19_complications_gi_	_389026000	Ascites
			81060008	8 c19_complications_gi_	_81060008	Bowel obstructio
			56905009	9 c19_complications_gi_	_56905009	Bowel perforatio
			7105720	00 c19_complications_gi_	_710572000	lleus
			4866100	0 c19_complications_gi_	_48661000	Peritonitis
			5361900	0 c19_complications_gi_	_53619000	Other
			NONE	c19_complications_gi_	_none	None
			UNK	c19_complications_gi_	_unk	Unknown
				otation: Terminology: SNOM OICE='48661000'	ИED	
131	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			
132	c19_complications_other	Other complications occurring during the COVID-19 illness. Check all	checkbox,	Required		
		that apply. If there were no other complications, please check "None".	1466900	1 c19_complications_oth	er1466900	kidney
			9117500	0 c19_complications_oth	er 9117500	injury 0 Seizur
				02 c19_complications_oth		
			-	09 c19_complications_oth		
			3629650	05 c19_complications_oth	er 3629650	1
			NONE	c19_complications_oth		None
			UNK	c19_complications_oth	erunk	Unkno
				otation: Terminology: SNOM 02,414086009'	MED @HIDECH	IOICE =
133	c19_complications_oth_specify	Please specify other complications. Do not record any PHI in this field.	notes	·		
	Show the field ONLY if: [c19_complications_other(362965 005)] = '1'	As a reminder, this includes all elements of dates other than year.				
134	current_status_v2	Section Header: Clinical Status	radio, Req	uired		
	Show the field ONLY if:	Current COVID-19 status Fully recovered means that the patient has returned to their baseline functional status and repeat SARS-CoV-2	1 Fully	recovered		
	[timing_of_report] = '1' and ([curr ent_status] = '1' or [current_statu	testing, if obtained, is negative. If they are on medications to treat	1b Reco	overed with complications		
	s] = '2' or [current_status] = '3' or	sequelae or have functional compromise (e.g., impaired pulmonary function) but are not considered to have active infection, they should	2 Ong	oing infection		
	[current_status] = '4' or [current_s tatus] = '5' or [current_status] =	be considered to have recovered with complications.	3 Died			
	'6' or [current_status] = '7' or [cur rent_status] = '8')		99 Unkı	nown		
135	current_status_retro	Final COVID-19 status Fully recovered means that the patient has	radio, Req			
	Show the field ONLY if:	returned to their baseline functional status and repeat SARS-CoV-2 testing, if obtained, is negative. If they are on medications to treat		recovered		
	[timing_of_report] = '2'	sequelae or have functional compromise (e.g., impaired pulmonary	—	overed with complications		
		function) but are not considered to have active infection, they should be considered to have recovered with complications.	3 Died			
			99 Unkı	nown		
136	days_to_death Show the field ONLY if: [current_status_retro] = '3' or [current_status_v2] = '3'	Approximately how many days elapsed between COVID-19 diagnosis and death? If this information is unknown to you, please enter 9999 here.	text (integ	er, Min: 0), Required		

		COVID TO AIR CARDO CONSTRAIN (CCC		
137	cause_of_death_2 Show the field ONLY if: [current_status_v2] = '3' or [curre nt_status_retro] = '3'	To the best of your knowledge, what was the proximal cause of death?	1 (2 (3 E 88 (Required COVID-19 Cancer Both Other Unknown
138	deceased_reason_retro Show the field ONLY if: [current_status_v2] = '3' or [curre nt_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
139	current_status_clinical Show the field ONLY if: [current_status_v2] = '2'	Current clinical status	7 8 OTH	Required Outpatient - No symptoms Outpatient - Mild symptoms Outpatient - Moderate symptoms Outpatient - Severe symptoms Inpatient - Near Recovery Inpatient - Moderately ill Inpatient - Severely ill Critical (ICU) - Severely ill, not requiring ventilator support Critical (ICU) - Severely ill, intubated Other Unknown
140	current_status_clinical_specify Show the field ONLY if: [current_status_clinical] = 'OTH'	Please specify other current clinical status Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes,	Required
141	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, 0 1 2 3 5 6 7 8 OTH	Required Outpatient - No symptoms Outpatient - Mild symptoms Outpatient - Moderate symptoms Outpatient - Severe symptoms Inpatient - Moderately ill Inpatient - Severely ill Critical (ICU) - Severely ill, did not require ventilator support Critical (ICU) - Severely ill, intubated Other Unknown
142	worst_status_clinical_specify Show the field ONLY if: [worst_status_clinical] = 'OTH'	Please specify worst clinical status Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes,	Required

_								
	143	complications_severity	Current severity of COVID-19 complications. Check all that apply.		oox, Required		1	
		Show the field ONLY if:		0	complications_severity0	No co	mplications	
		[current_status_v2] = '1b' or [current_st ent_status_v2] = '2' or [current_st atus_retro] = '1b'		1	complications_severity1	(mimi	complications mal symptoms complications)	
				2	complications_severity2	(mode symp	lications	
				3	complications_severity3	(symp substa the pa functi disabl	lications	
				OTH	complications_severityoth	Other		
				99	complications_severity99	Unkno	own	
	144	complications_severity_oth_speci fy Show the field ONLY if: [complications_severity(OTH)] = '1'	Please specify other current severity of COVID-19 complications Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.		otes, Required			
	145	worst_complications_severity	Worst severity of COVID-19 complications. Check all that apply.	checkl	oox, Required		· · · · · · · · · · · · · · · · · · ·	
		Show the field ONLY if: [timing_of_report] = '2' and [curre nt_status_retro]!= '3'		0	worst_complications_severity_	0	None (patient was asymptomatic)	
				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	
	146	worst_complications_severity_spe cify Show the field ONLY if: [worst_complications_severity(OT H)] = '1'	Please specify other worst severity of COVID-19 complications Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes,	Required			
	147	consider_returning Show the field ONLY if: [current_status_v2] = '2'	Please consider returning to add a new form once final status has been determined. In order to do this, click on the button named "Survey Queue" in the top right-hand corner of the screen. This will open a window where you can choose "Get link to my survey queue". Use this link to return to the survey at any time to add additional updated information.	descri	ptive			
	148	covid_19_more Show the field ONLY if: [ccc19] = '0'	Section Header: COVID-19 Details - Optional Would you like to answer additional COVID-19 detail questions? This is optional but will really help us understand the granular details better.	yesno 1 Ye 0 No	_			

149	mortality	If it has been at least 30 days from the presumptive or laboratory-	radio	o, Required
	Show the field ONLY if:	proven COVID-19 diagnosis, was the patient alive 30 days after diagnosis?	1	Yes
	[covid_19_dx_interval] != '1' and [c ovid_19_dx_interval] != '2' and [co		0	No
	vid_19_dx_interval] != '3'		88	N/A - it has been fewer than 30 days since COVID-19 diagnosis
			99	Unknown
150	mortality_90	If it has been at least 90 days (~3 months) from the presumptive or	radio	o, Required
130	Show the field ONLY if:	laboratory-proven COVID-19 diagnosis, was the patient alive 90 days	1	Yes
	[covid_19_dx_interval] != '1' and [c	after diagnosis?	0	No
	ovid_19_dx_interval] != '2' and [co vid_19_dx_interval] != '3' and [covi		\vdash	N/A - it has been fewer than 90 days since COVID-19
	d_19_dx_interval] != '4' and [covid			diagnosis
	_19_dx_interval] != '5' and [mortal ity] != '0'		99	Unknown
151	mortality_180	If it has been at least 180 days (~6 months) from the presumptive or	radio	o, Required
	Show the field ONLY if:	laboratory-proven COVID-19 diagnosis, was the patient alive 180 days	1	Yes
	[covid_19_dx_interval] != '1' and [c	after diagnosis?	0	No
	ovid_19_dx_interval] != '2' and [co vid_19_dx_interval] != '3' and [covi		88	N/A - it has been fewer than 180 days since COVID-19
	d_19_dx_interval] != '4' and [covid _19_dx_interval] != '5' and [covid_		00	diagnosis Unknown
	19_dx_interval] != '6' and [mortali		99	UNIONII
150	ty] != '0' and [mortality_90] != '0'	Section Hander: Paralina laboratory values at the time of an almost the date of the	uc .11	
152	labs	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	radio	At the time of initial COVID-19 diagnosis
		of presentation, please enter the earliest known result, if known. At what time point were labs drawn? This information is important to	2a	At the time of a change in clinical status
		build predictive models of disease severity based on lab values. Your answer should be based on common labs (CBC, CMP, BNP, etc.) - not		(hospitalization)
		necessarily send-out labs that were drawn later in the course of COVID- 19 illness.	2b	At the time of a change in clinical status (other than hospitalization)
			3	Labs were not drawn or are not available for review
			OTH	H Other
			UN	K Unknown
153	labs_oth_specify	Please specify what other time point labs were drawn Do not record	note	s
	Show the field ONLY if: [labs] = 'OTH'	any PHI in this field. As a reminder, this includes all elements of dates other than year.		
154	wbc_range	Section Header: CBC values at presentation	radio	o (Matrix)
	Show the field ONLY if:	Total WBC count	LO	Low
	[labs] != '3'		WN	L Normal
			НІ	High
			NT	Not tested
			99	Unknown
155	alc_range	Absolute lymphocyte count (ALC) - less than 1500/uL should be	radio	o (Matrix)
	Show the field ONLY if:	considered low	LO	Low
	[labs] != '3'		WN	L Normal
			НІ	High
			NT	Not tested
			99	Unknown
			Field	Appetation loss than 1500/ul should be considered
			low	Annotation: less than 1500/uL should be considered
156	anc_range	Absolute neutrophil count (ANC)		o (Matrix)
	Show the field ONLY if:		LO	Low
	[labs] != '3'		WN	L Normal
			Н	High
			NT	Not tested
			99	Unknown
			Field	Annotation: less than 1000/uL should be considered
			low	

157	aec_range	Absolute eosinophil count (AEC)	radio (Matrix)
	Show the field ONLY if:		LO Low
	[labs] != '3'		WNL Normal
			HI High
			NT Not tested
			99 Unknown
158	hgb_range	Hemoglobin	radio (Matrix)
	Show the field ONLY if:		LO Low
	[labs] != '3'		WNL Normal
			HI High
			NT Not tested
			99 Unknown
159	plt_range	Platelets	radio (Matrix)
	Show the field ONLY if:		LO Low
	[labs] != '3'		WNL Normal
			HI High
			NT Not tested
			99 Unknown
160	wbc_numeric	Total WBC count in 10^9/L	text (number, Min: 0, Max: 1000)
	Show the field ONLY if:		
	[wbc_range] = 'LO' or [wbc_range] = 'HI'		
161	alc	Absolute lymphocyte count per uL	text (number, Min: 0)
	Show the field ONLY if:		
	[alc_range] = 'LO' or [alc_range] = 'HI'		
162	anc	Absolute neutrophil count per uL	text (number, Min: 0)
	Show the field ONLY if:		
	[anc_range] = 'LO' or [anc_range] = 'HI'		
163	aec	Absolute eosinophil count per uL	text (number, Min: 0)
	Show the field ONLY if:		
	[aec_range] = 'LO' or [aec_range] = 'HI'		
164	hgb	Hemoglobin level in g/dL	text (number, Min: 0)
	Show the field ONLY if:		
	[hgb_range] = 'LO' or [hgb_range] = 'HI'		
165	plt	Platelet count, 10^3/uL	text (number, Min: 0)
	Show the field ONLY if:		
	[plt_range] = 'LO' or [plt_range] = 'HI'		
166	creat	Section Header: Other lab values at presentation	radio (Matrix)
	Show the field ONLY if:	Creatinine	0 Normal
	[labs] != '3'		1 Abnormal
			NT Not tested
			99 Unknown
			Field Annotation: SNOMED: 1032061000000108
167	tbili	Total bilirubin	radio (Matrix)
107	Show the field ONLY if:	Total Sim doll 1	0 Normal
	[labs] != '3'		1 Abnormal
			NT Not tested
			99 Unknown

168	ast Show the field ONLY if:	AST	radio (Matrix) 0 Normal
	[labs] != '3'		1 Abnormal
			NT Not tested
			99 Unknown
169	alt	ALT	radio (Matrix)
	Show the field ONLY if:		0 Normal
	[labs] != '3'		1 Abnormal
			NT Not tested
			99 Unknown
170	ldh	LDH	radio (Matrix)
	Show the field ONLY if:		0 Normal
	[labs] != '3'		1 Abnormal
			NT Not tested
			99 Unknown
			Field Annotation: SNOMED: 250644007
171	tni	Troponin I (TnI)	radio (Matrix)
	Show the field ONLY if:		0 Normal
	[labs] != '3'		1 Abnormal
			NT Not tested
			99 Unknown
172	hs_trop	High-sensitivity troponin	radio (Matrix)
	Show the field ONLY if:		0 Normal
	[labs] != '3'		1 Abnormal
			NT Not tested
			99 Unknown
173	bnp	BNP	radio (Matrix)
	Show the field ONLY if: [labs] != '3'		0 Normal 1 Abnormal
	[1005]. 5		NT Not tested
			99 Unknown
474		COD	
174		CRP	radio (Matrix) Normal
	Show the field ONLY if: [labs] != '3'		1 Abnormal
			NT Not tested
			99 Unknown
175	il6	IL-6	radio (Matrix)
	Show the field ONLY if:		0 Normal
	[labs] != '3'		1 Abnormal
			NT Not tested
			99 Unknown
176	pt	PT	radio (Matrix)
	Show the field ONLY if:		0 Normal
	[labs] != '3'		1 Abnormal
			NT Not tested
			99 Unknown
177	aptt	аРТТ	radio (Matrix)
	Show the field ONLY if:		0 Normal
	[labs] != '3'		1 Abnormal
			NT Not tested
			99 Unknown

178	fibrinogen	Fibrinogen	radio (Matrix)
	Show the field ONLY if:		0 Normal
	[labs] != '3'		1 Abnormal
			NT Not tested
			99 Unknown
			Field Annotation: SNOMED: 71636003
179	ddimer	D-Dimer	radio (Matrix)
	Show the field ONLY if: [labs] != '3'		0 Normal
	[labs] :- 5		1 Abnormal
			NT Not tested
			99 Unknown
			Field Annotation: SNOMED: 1019221000000107
180	other_lab	Other (free text will open for more details below)	radio (Matrix)
	Show the field ONLY if:		0 Normal
	[labs] != '3'		1 Abnormal
			NT Not tested
			99 Unknown
181	creat_numeric	Please provide measured creatinine level in mg/dL	text (number, Min: 0)
	Show the field ONLY if: [creat] = '1'		
182	tbili_numeric	Please provide measured total bilirubin value in mg/dL	text
	Show the field ONLY if:		
	[tbili] = '1'		
183	ast_numeric	Please provide measured AST/SGOT value in units/L	text (number, Min: 32)
	Show the field ONLY if: [ast] = '1'		
184	alt_numeric	Please provide measured ALT/SGPT value in units/L	text (number, Min: 32)
	Show the field ONLY if: [alt] = '1'		
185	pt_numeric	Please report measured PT value in seconds. If above the maximum	text (number)
	Show the field ONLY if: [pt] = '1'	range, enter "999".	
186	aptt_numeric	Please report measured aPTT value in seconds. If above the maximum	text (number, Min: 0)
	Show the field ONLY if: [aptt] = '1'	range, enter "999".	
187	fibrinogen_numeric	Please report measured fibrinogen value in mg/dL (conventional units).	text
	Show the field ONLY if: [fibrinogen] = '1'		
188	ddimer_numeric	Please report measured D-Dimer value along with units, which often	text
	Show the field ONLY if:	differ between labs.	
100	[ddimer] = '1' Idh_numeric	Please report measured LDH value along with units, which often differ	text
189	Show the field ONLY if:	between labs.	LEAL
	[ldh] = '1'		
190	tni_numeric	Please report measured TnI value in ng/mL. Only record values greater than or equal to 0.05 ng/mL.	text (number, Min: 0)
	Show the field ONLY if: [tni] = '1'	than or equal to 0.05 fights.	
191	hs_trop_numeric	Please report measured high sensitivity troponin value in pg/mL.	text (number, Min: 0.05)
	Show the field ONLY if: [hs_trop] = '1'		
192	bnp_numeric	Please report measured BNP value in pg/mL.	text (number, Min: 0)
	Show the field ONLY if:		
	[bnp] = '1'		
193	crp_numeric	Please provide measured CRP value along with units, which often differ between labs.	text
	Show the field ONLY if: [crp] = '1'		
	l	ı	II.

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194	il6_numeric	Please report measured IL-6 value in pg/mL	text (numbe	r, Min: 1.8)			
	Show the field ONLY if: [il6] = '1'						
195	other_lab_more	Please provide more details including numeric values, if you are able.	notes	notes			
	Show the field ONLY if: [other_lab] = '1'	Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.					
196	coinfection_yn	Section Header: Co-infections	radio				
		Was another co-infection suspected within two weeks prior or up to two weeks after the COVID-19 diagnosis?	0 No				
		the medicated die company angliosis.	1 Yes				
			99 Unkno	wn			
197	coinfection	1117	checkbox		T		
	Show the field ONLY if:	Terminology: SNOMED	49872002	coinfection49872002	Viral, NOS		
	[coinfection_yn] = '1'		407479009	coinfection407479009	Influenza A		
			407480007	coinfection407480007	Influenza B		
			84101006	coinfection84101006	Ordinary coronavirus		
			1838001	coinfection1838001	Rhinovirus		
			6415009	coinfection6415009	RSV		
		40982:	409822003	coinfection409822003	Bacterial infection, NOS		
			8745002	coinfection8745002	Gram-positive bacteria		
			233607000	coinfection233607000	Pneumococcal pneumonia		
			81325006	coinfection81325006	Gram-negative bacteria		
			414561005	coinfection414561005	Fungal, NOS		
			2429008	coinfection2429008	Aspergillus culture-confirmed		
			709601002	coinfection709601002	Aspergillus suspected (galactomannan positive)		
			442376007	coinfection442376007	Tests are pending		
			ОТН	coinfectionoth	Other		
			UNK	coinfectionunk	Unknown		
			NONE	coinfectionnone	None		
				ntion: Terminology: SNOMED CE='407480007,84101006,6			
198	coinfection_other	Please specify what co-infections were diagnosed, including the	notes				
	Show the field ONLY if: [coinfection_yn] = '1'	organism(s) if you know it. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.					

199	coinfection_site	What body locations were affected by the co-infection(s)? Check all that	checkbox					
	Show the field ONLY if:	apply.	49596003	coinfection_site49596003	Abdomen/GI			
	[coinfection_yn] = '1'		122489005	coinfection_site122489005	Bladder/GU (e.g., urinary tract infection [UTI])			
			431193003	coinfection_site431193003	Bloodstream (e.g., bacteremia, fungemia, viremia)			
			111253001	coinfection_site111253001	Bone (e.g., osteomyelitis)			
			113257007	coinfection_site113257007	Cardiovascula			
			128601007	coinfection_site128601007	Pulmonary (i.e., pneumonia, sinusitis, etc.)			
			108365000	coinfection_site108365000	Skin and soft tissue			
			ОТН	coinfection_siteoth	Other (will trigger a free text to specify			
			UNK	coinfection_siteunk	Unknown			
			Field Annotation: SNOMED-CT					
200	coinfection_site_more Show the field ONLY if: [coinfection_site(OTH)] = '1'	Please specify what other sites were affected by co-infection. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes					

		- COVID TO GITGO CONSOLIGIT (CCC	, , , , ,		
201	covid_19_treatment	Section Header: COVID-19 Treatment	checkbox	T	
		COVID-19 treatment, including pre-existing drugs that were continued during the COVID-19 diagnosis. Check all that apply.	B01A	covid_19_treatmentb01a	Anti
		during the COVID-19 diagnosis. Check an that apply.	B01AC	covid_19_treatmentb01ac	Antiq than
			HO-44995	covid_19_treatmentho_44995	Anti
			N02BA	covid_19_treatmentn02ba	Aspi
			ATC-J05AE08	covid_19_treatmentatc_j05ae08	Ataz
			RXCUI-18631	covid_19_treatmentrxcui_18631	Azith
					(Zith
			DB-15718	covid_19_treatmentdb_15718	Bam
			Bam-Et	covid_19_treatmentbam_et	Bam
			REGEN-COV2	covid_19_treatmentregen_cov2	Casi
			RXCUI- 2550731	covid_19_treatmentrxcui_2550731	Sotre
			RXCUI-2393	covid_19_treatmentrxcui_2393	Chlo
			RXCUI-5521	covid_19_treatmentrxcui_5521	Hydr (Plac
			HO-45861	covid_19_treatmentho_45861	JAK i
			ATC-J05AR10	covid_19_treatmentatc_j05ar10	Lopi
			RXCUI-260101	covid_19_treatmentrxcui_260101	Osel
			B05AX03	covid_19_treatmentb05ax03	Plasi indiv plasi
			OMOP4873974	covid_19_treatmentomop4873974	Rem
			ATC-C10AA	covid_19_treatmentatc_c10aa	Stati
			HO-45523	covid_19_treatmentho_45523	Syste (will
			ATC-L04AB	covid_19_treatmentatc_l04ab	TNF pron deta
			RXCUI-612865	covid_19_treatmentrxcui_612865	Tocil
			RXCUI-42355	covid_19_treatmentrxcui_42355	Fluve
			ATC-L04AC	covid_19_treatmentatc_l04ac	Othe
			ATC-LU4AC	covid_19_treatmentatc_io-ac	inhib addi
			233573008	covid_19_treatment233573008	Extra
			714749008	covid_19_treatment714749008	Cont repla (CRR
			ОТН	covid_19_treatmentoth	Othe
			UNK	covid_19_treatmentunk	Unkr
			NONE	covid_19_treatmentnone	Non
			oth_plasma	covid_19_treatmentoth_plasma	DEP
			Field Annotation ATC/HemOnc/ON	Terminologies: MOP/RxNorm/SNOMED oth_plasma,ATC-J05AE08,ATC-L04AB,ATC	
202	dx_cp_interval Show the field ONLY if: [covid_19_treatment(B05AX03)] = '1'	How many days elapsed between the COVID-19 diagnosis and the first convalescent plasma infusion? If the patient was infused on the same day as their diagnosis, enter 0 here. If you do not know the answer, enter 9999 here.	text (integer)		
		Aspirin dosing	radio		
203	c19_aspirin_dose			1	
203	c19_aspirin_dose Show the field ONLY if:		262459003 Lo	w dose (less than 200 mg/day)	
203	•		262459003 Lo ^o 261829003 Fu		
203	Show the field ONLY if:		11	l dose	

204	The state of the s							
204	steroid_type	Steroid type. Check all that apply.	checkbox		-02-1-02	D		
	Show the field ONLY if: [covid_19_treatment(HO-45523)]		H02AB02	steroid_typeh		Dexamethasone (Decadron)		
	= '1'		H02AB09	AB09 steroid_typeh02ab09 Hydrocort (Cortef)		Hydrocortis (Cortef)	one	
			H02AB04	steroid_typeh		Methylpred (Solumedro		
			H02AB06	steroid_typeh	n02ab06 I	Prednisolor	ne	
			H02AB07	steroid_typeh	n02ab07 l	Prednisone		
			Field Anno	tation: Terminolog	gy: ATC			
205	steroid_specific	Steroid dosing, in prednisone dose equivalents Note: 3 mg of	radio					
	Show the field ONLY if:	dexamethasone is equivalent to 20 mg of prednisone, so any dose of dexamethasone of more than 3 mg/day (21 mg/week) would be	1 20 m	g/day or below [lo	ow dose]			
	[covid_19_treatment(HO-45523)] = '1'	equivalant to more than 20 mg of prednisone/day.	1a 10 m					
			1b More	More than 10 mg/day up to 20 mg/day				
			2 More	More than 20 mg/day but less than 1mg/kg/day				
			3 Equa	Equal to or greater than 1 mg/kg/day				
			99 Unknown					
			Field Anno	tation: @HIDECHC	OICE='1'			
206	steroid_more	Please provide more details: prednisone dose equivalents (e.g., 1	notes					
	Show the field ONLY if: [covid_19_treatment(HO-45523)] = '1'	mg/kg) and duration of steroid therapy. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.						
207	covid_19_tx_interleukin	Interleukin inhibitor treatment other than tocilizumab. Check all that	checkbox					
	Show the field ONLY if:	apply.	L04AC14	covid_19_tx_inter	rleukinl	04ac14 Sa	ırilumab	
	[covid_19_treatment(ATC-L04AC)] = '1'		ОТН	covid_19_tx_inter	rleukinc	oth O	ther	
			Field Anno	tation: Field:ATC L	.04AC; Valu	ues:ATC @H	IDDEN	
208	jak	JAK inhibitor treatment. Check all that apply.	checkbox				-	
	Show the field ONLY if:		L01XE18	jakl01xe18 R	Ruxolitinib	(Jakafi)		
	[covid_19_treatment(HO-45861)] = '1'		L04AA44	jakl04aa44 U	Jpadacitini	ib		
	-		L04AA37	jakl04aa37 B	Baracitinib	(Olumiant)		
			ОТН	jakoth C	Other	·		
				otation: Terminolog OICE='L04AA44'	gies: ATC, F	RxNorm		

209	c19_anticoag_reason	Has the patient received any dose or type of anticoagulants at any time	checkbox	(
203		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		c19_anticoag_reason1	Prophylactic use (without the presence of a VTE either as an inpatient or outpatient)
			2	c19_anticoag_reason2	DEPRECATED
			2a	c19_anticoag_reason2a	Therapeutic use (for known VTE diagnosis)
			2b	c19_anticoag_reason2b	Therapeutic use (for known ATE diagnosis)
			2c	c19_anticoag_reason2c	Therapeutic use in the absence of any thrombosis (e.g., for prevention of stroke in atrial fibrillation)
			3	c19_anticoag_reason3	For DIC during hospitalization
			NONE	c19_anticoag_reasonnone	None (patient did not receive any anticoagulants)
			UNK	c19_anticoag_reasonunk	Unknown
			OTH	c19_anticoag_reasonoth	Other
			Field Ann	notation: @HIDECHOICE='2'	
210	covid_19_tx_tnf	Tumor necrosis factor alpha (TNF-α) inhibitor treatment. Check all that	checkbox		
	Show the field ONLY if:	apply.	L04AB0		Etanercept
	[covid_19_treatment(ATC-L04AB)] = '1'		OTH	covid_19_tx_tnfoth	Other
			Field Ann	otation: Field:ATC L04AB; Valu	es:ATC @HIDDEN
211	c19_anticoag_reason_oth_specify Show the field ONLY if: [c19_anticoag_reason(OTH)] = '1'	Please specify the type and indication of other anticoagulants Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes		
212	c19_anticoag_type	Which anticoagulants were used? Check all that apply.	checkbox	(
	Show the field ONLY if: [c19_anticoag_reason(1)] = '1' or [c19_anticoag_reason(2a)] = '1' or		B01AA	c19_anticoag_typeb01aa	Vitamin K antagonists (e.g., warfarin)
	[c19_anticoag_reason(2b)] = '1' or [c19_anticoag_reason(2c)] = '1' or [c19_anticoag_reason(3)] = '1' or [c19_anticoag_reason(OTH)] = '1'		B01AB	c19_anticoag_typeb01ab	Low-molecular weight heparin (e.g., enoxaparin [Lovenox])
			B01AB0	1 c19_anticoag_typeb01ab	001 Unfractionated heparin
			B01AE	c19_anticoag_typeb01ae	e Direct thrombin inhibitors (e.g., argatroban, dabigatran [Pradaxa])
			B01AF	c19_anticoag_typeb01af	Direct factor Xa inhibitors (e.g., apixaban [Eliquis], rivaroxaban [Xarelto])
			B01AX0	5 c19_anticoag_typeb01ax	05 Fondaparinux
			UNK	c19_anticoag_typeunk	Unknown
			OTH	c19_anticoag_typeoth	Other
			Field Ann	notation: Terminology: ATC	
213	c19_anticoag_type_oth_specify Show the field ONLY if: [c19_anticoag_type(OTH)] = '1'	Please specify what other anticoagulants Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes		

214	covid_19_treatment_trial	Was any COVID-19 treatment given as part of a clinical trial?	radio			
			0 No			
			1 Yes			
			99 Unk	known		
215	covid_19_trial_tx	COVID-19 clinical trial treatment. Check all that apply. If you do not	checkbox	x. Require	ed	
	Show the field ONLY if:	know which drug(s) were given on clinical trial, please check the field ONLY if: "Unknown" If you are not able to disclose drug names due to	DB-1571		covid_19_trial_txdb_15718	Bamla
	[covid_19_treatment_trial] = '1'		Bam-Et		covid_19_trial_txbam_et	Bamla
			REGEN-C	COV2	covid_19_trial_txregen_cov2	Casiriv
			RXCUI- 2550731	1	covid_19_trial_txrxcui_2550731	Sotrov
			RXCUI-5	5521	covid_19_trial_txrxcui_5521	Hydro: (Plaqu
			HO-4499	95	covid_19_trial_txho_44995	Anti-vi
			ATC-J05A	AR10	covid_19_trial_txatc_j05ar10	Lopina
			OMOP48	873974	covid_19_trial_txomop4873974	Remde
			RXCUI-1	8631	covid_19_trial_txrxcui_18631	Azithro
			HO-4552	23	covid_19_trial_txho_45523	Systen
			L04AC08	8	covid_19_trial_txl04ac08	Canak
			L04AC16	6	covid_19_trial_txl04ac16	Guselk
			L04AC14	4	covid_19_trial_txl04ac14	Sarilur
			L04AC07	7	covid_19_trial_txl04ac07	Tociliza
			RXCUI-4	12355	covid_19_trial_txrxcui_42355	Fluvox
			L04AB02	2	covid_19_trial_txl04ab02	Inflixin
			B05AX03	3	covid_19_trial_txb05ax03	Plasma
			ОТН		covid 10 trial ty oth	plasm. Other
			UNK		covid_19_trial_txoth covid_19_trial_txunk	Unkno
			ATC/Hem plasma,H	Onc/OM 10-44995	Terminologies: IOP/RxNorm @HIDECHOICE = 'OTH 6,ATC-J05AR10,L04AC08,L04AC16,L0	
216	dx_cp_interval_2 Show the field ONLY if: [covid_19_trial_tx(B05AX03)] = '1' and [covid_19_treatment(B05AX0 3)] = '0'	How many days elapsed between the COVID-19 diagnosis and the first convalescent plasma infusion? If the patient was infused on the same day as their diagnosis, enter 0 here. If you do not know the answer, enter 9999 here.	text (integ	eger)		
217	covid_19_trial_more Show the field ONLY if: [covid_19_trial_tx(OTH)] = '1'	Please specify what other clinical trial treatment. (Note: some institutions have restrictions on sharing of this information, please check with your institutional official if you have any questions.) Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes			
218	additional_tx	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			
219	prbc	Did the patient receive any PRBC transfusions?	radio 0 No 1 Yes 99 Unk	known		
220	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			
221	covid19_details_complete	Section Header: Form Status Complete?	dropdowi 0 Incor 1 Unve 2 Comp	mplete		
Instr	ument: Cancer details (cancer	_details) 🛂 Enabled as survey			^0	ollapse
222	ts_3	Timestamp for the cancer details form	1		ny), Required @HIDDEN @NOW_UTC	

223 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
C5111	Brain Cancer - benign (e.g., meningioma)
C132067	Brain Cancer - low-grade glioma
C3059	Brain Cancer - high-grade glioma (e.g., GBM)
C4627	Brain (CNS) Cancer, NOS
C4872	Breast Cancer
C9039	Cervical Cancer
C4910	Colon Cancer
C2955	Colon/Rectum Cancer
C3513	Esophagus Cancer
C4817	Ewing Sarcoma
C3867	Fallopian Tube Cancer
C3844	Gallbladder Cancer
C3708	Germ Cell Tumor
C3868	GIST
C4013	Head and Neck Cancer
C4819	Invasive Cutaneous SCC (do not record localized
	SCC)
C2921	Invasive Cutaneous BCC (do not record
	localized BCC)
C3234	Mesothelioma
C4039	III Defined/Cancer of Unknown Primary
C3099	Liver Cancer (HCC)
C4878	Lung Cancer, NOS
C3224	Melanoma
C9231	Merkel Cell
C3871	Nasopharyngeal Carcinoma
C3270	Neuroblastoma
C3809	Neuroendocrine tumor (NET) or Carcinoid
C2926	Non Small Cell Lung Cancer (NSCLC)
C9145	Osteosarcoma
C7431	Ovarian Cancer
C3850	Pancreatic Cancer
C4906	Parathyroid Cancer
C9061	Penis Cancer
C3538	Peritoneum Cancer
C3555	Placenta Cancer (incl. Choriocarcinoma)
C4863	Prostate Cancer
C9382	Rectum and Rectosigmoid Cancer
C9385	Renal Kidney Cancer (RCC)
C7355	Renal Pelvis Cancer
C7541	Retinoblastoma
C3359	Rhabdomyosarcoma
C6389	Scrotum Cancer
C4917	Small Cell Lung Cancer
C7724	
C7724	Small Intestine Cancer
C9306	Soft Tissue Sarcoma, NOS

			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)
			C3457	B-cell non-Hodgkin lymphoma
			C8851	Diffuse large B-cell lymphoma (DLBCL)
			C4337	Mantle cell lymphoma (MCL)
			C2912	Burkitt lymphoma
			C8504	Indolent lymphoma
			C3209	Follicular lymphoma
			C3163	Chronic lymphocytic leukemia (CLL)
			C4341	Marginal zone lymphoma
			C4665	Plasma cell dyscrasia
			C3242	Multiple myeloma
			C3819	AL amyloidosis
			C27908	T-cell and NK-cell neoplasm
			C9308	Lymphoproliferative disorder
			C3106	Histiocyte disorder
			ОТН	Other
			OTH_H	Other Heme
			OTH_S	Other Solid Tumor
				otation: LOINC:63929-4; Terminology: NCIT OICE = 'OTH'
224	cancer_type_oth	Please specify cancer type	text	
	Show the field ONLY if: [cancer_type] = 'OTH' or [cancer_t ype] = 'C132146' or [cancer_type] = 'OTH_H' or [cancer_type] = 'OTH _S' or [cancer_type] = 'C27134'			
225	acute_leukemia_more	This code is not preferred because it is non-specific. If the patient has a	descriptive	2
	Show the field ONLY if:	myeloid-lineage acute leukemia (AML, APL, AMML, etc) please go back		
	[cancer_type] = 'C9300'	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.		
226	lung_nos_more	This code should only be used if you do not know the histology of the	descriptive	9
	Show the field ONLY if: [cancer_type] = 'C4878'	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.		

0, ,	11.35 AIVI	COVID-19 and Cancer Consortium (CCC	io) itogic	y 1125 oup
227	teravolt Show the field ONLY if: [cancer_type] = 'C4878' or [cancer_type] = 'C2926' or [cancer_type] = 'C4917' or [cancer_type] = 'C341 1'	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	descriptiv	е
228	multiple_ca	Does the patient have multiple malignancies? This includes multiple active malignancies as well as historic cancers.	radio, Red 0 No 1 Yes 99 Unk	
229	multiple_ca_quant Show the field ONLY if: [multiple_ca] = '1'	How many malignancies? If you do not know the exact number, enter the number that you are aware of (e.g., if you know there are at least three separate malignancies, enter three).	radio, Red 2 Two 3 Three 4 Four 5 Five o	
230	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.	dropdowi	Adrenocortical Carcinoma Anal Cancer Appendix Cancer (Cholangiocarcinoma) Bladder Cancer Bone cancer, NOS Brain Cancer - benign (e.g., meningioma)
			C3270 C3809 C2926 C9145 C7431 C3850 C4906	Neuroblastoma Neuroendocrine tumor (NET) or Carcinoid Non Small Cell Lung Cancer (NSCLC) Osteosarcoma Ovarian Cancer Pancreatic Cancer 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 hyphoblastic 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)
C3457	B-cell non-Hodgkin lymphoma
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
	otation: LOINC:63929-4; Terminology: NCIT DICE = 'OTH'

)/29/21,	11:35 AM	COVID-19 and Cancer Consortium (CCC	19) Regist	ry REDCap
231	cancer_type_oth_2 Show the field ONLY if: [cancer_type_2] = 'OTH' or [cancer_type_2] = 'OTH_H' or [cancer_type_2] = 'OTH_S' or [cancer_type_2] = 'OTH_S' or [cancer_type_2] = 'C27134'	Please specify cancer type	text	
222			-l	(auto-considera) Paravira d
232	cancer_type_3	Cancer type of third malignancy. If the patient has more than three malignancies, please select the third-most recently diagnosed cancer	l -	(autocomplete), Required Malignant Solid Neoplasm, NOS
	Show the field ONLY if: [multiple_ca_quant] = '3' or [multi	type. If unknown or unclear, please specify in the free text box below.	C132140	Adrenocortical Carcinoma
	ple_ca_quant] = '4' or [multiple_c	uant] = '4' or [multiple_c	C9323	Anal Cancer
	a_quant] = '5'		C9330	Appendix Cancer
			C4436	Bile Duct Cancer (Cholangiocarcinoma)
			C4912	Bladder Cancer
			C9312	Bone cancer, NOS
			C5111	Brain Cancer - benign (e.g., meningioma)
			C132067	Brain Cancer - low-grade glioma
			C3059	Brain Cancer - high-grade glioma (e.g., GBM)
			C4627	Brain (CNS) Cancer, NOS
			C4872	Breast Cancer
			C9039	Cervical Cancer
			C4910	Colon Cancer
			C2955	Colon/Rectum Cancer
			C3513	Esophagus Cancer
			C4817	Ewing Sarcoma
			C3867	Fallopian Tube Cancer
			C3844	Gallbladder Cancer
			C3708	Germ Cell Tumor
			C3868	GIST
			C4013	Head and Neck Cancer
			C4819	Invasive Cutaneous SCC (do not record localized SCC)
			C2921	Invasive Cutaneous BCC (do not record localized BCC)
			C3234	Mesothelioma
			C4039	III Defined/Cancer of Unknown Primary
			C3099	Liver Cancer (HCC)
			C4878	Lung Cancer, NOS
			C3224	Melanoma
			C9231	Merkel Cell
			C3871	Nasopharyngeal Carcinoma
			C3270	Neuroblastoma
			C3809	Neuroendocrine tumor (NET) or Carcinoid
			C2926	Non Small Cell Lung Cancer (NSCLC)
			C9145	Osteosarcoma
			C7431	Ovarian Cancer
			C3850	Pancreatic Cancer
			C4906	Parathyroid Cancer
			C9061	Penis Cancer
			C3538	Peritoneum Cancer
			C3555	Placenta Cancer (incl. Choriocarcinoma)
			C4863	Prostate Cancer
			C9382	Rectum and Rectosigmoid Cancer
			C9385	Renal Ridney Cancer (RCC)
			C7355	Renal Pelvis Cancer
			C7541	Retinoblastoma
		I	l	

0/29/2	21, 11:35 AM	COVID-19 and Cancer Consortium (CCC	19) Regist	ry REDCap
			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)
			C3457	B-cell non-Hodgkin lymphoma
			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_H	Other Heme
			OTH_S	Other Solid Tumor
			Field Anno	tation: LOINC:63929-4; Terminology: NCIT
23	3 cancer_type_oth_3	Please specify cancer type	text	action, conversions, reministragy, recti
	Show the field ONLY if: [cancer_type_3] = 'C132146' or [c ancer_type_3] = 'OTH_H' or [canc			
	er_type_3] = 'OTH_S' or [cancer_ty pe_3] = 'C27134'			
23	cancer_type_4	Cancer type of fourth malignancy. If the patient has more than four		(autocomplete), Required
	Show the field ONLY if:	malignancies, please select the fourth-most recently diagnosed cancer type. If unknown or unclear, please specify in the free text box below.		Malignant Solid Neoplasm, NOS
	[multiple_ca_quant] = '4' or [multi ple_ca_quant] = '5'		C9325	Adrenocortical Carcinoma
	, ,		C9291	Anal Cancer
			C9330	Appendix Cancer
			C4436	Bile Duct Cancer (Cholangiocarcinoma)
			C4912	Bladder Cancer
			C9312	Bone cancer, NOS
ttn 0 · //	radaan yandarbilt adu/radaan ya	1 / 2/Design/data_dictionary_codehook_nhn2nid=108800		14/7

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C5111	Brain Cancer - benign (e.g., meningioma)
C132067	Brain Cancer - low-grade glioma
C3059	Brain Cancer - high-grade glioma (e.g., GBM)
C4627	Brain (CNS) Cancer, NOS
C4872	Breast Cancer
C9039	Cervical Cancer
C4910	Colon Cancer
C2955	Colon/Rectum Cancer
C3513	Esophagus Cancer
C4817	Ewing Sarcoma
C3867	Fallopian Tube Cancer
C3844	Gallbladder Cancer
C3708	Germ Cell Tumor
C3868	GIST
C4013	Head and Neck Cancer
C4819	Invasive Cutaneous SCC (do not record localized SCC)
C2921	Invasive Cutaneous BCC (do not record localized BCC)
C3234	Mesothelioma
C4039	III Defined/Cancer of Unknown Primary
C3099	Liver Cancer (HCC)
C4878	Lung Cancer, NOS
C3224	Melanoma
C9231	Merkel Cell
C3871	Nasopharyngeal Carcinoma
C3270	Neuroblastoma
C3809	Neuroendocrine tumor (NET) or Carcinoid
C2926	Non Small Cell Lung Cancer (NSCLC)
C9145	Osteosarcoma
C7431	Ovarian Cancer
C3850	Pancreatic Cancer
C4906	Parathyroid Cancer
C9061	Penis Cancer
C3538	Peritoneum Cancer
C3555	Placenta Cancer (incl. Choriocarcinoma)
C4863	Prostate Cancer
C9382	Rectum and Rectosigmoid Cancer
C9385	Renal Kidney Cancer (RCC)
C7355	Renal Pelvis Cancer
C7541	Retinoblastoma
C3359	Rhabdomyosarcoma
C6389	Scrotum Cancer
C4917	Small Cell Lung Cancer
C7724	Small Intestine Cancer
C9306	Soft Tissue Sarcoma, NOS
C4911	Stomach (Gastric) Cancer
C9063	Testis Cancer
C3411	Thymus Cancer
C4815	Thyroid Cancer
C7558	Uterus (Endometrial) Cancer
C3917	Vagina Cancer
C8538	Vascular Sarcoma, NOS
C4866	Vulva Cancer
C3267	Wilms Tumor
C3207	Timis Tullion

	ř.			
			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)
			C3457	
				B-cell non-Hodgkin lymphoma
			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_H	Other Heme
			OTH_S	Other Solid Tumor
			0111_0	Tourier Sound runner
			Field Anno	tation: LOINC:63929-4; Terminology: NCIT
				, , , , , , , , , , , , , , , , , , , ,
235	cancer_type_oth_4 Show the field ONLY if: [cancer_type_4] = 'C132146' or [cancer_type_4] = 'OTH_H' or [cancer_type_4] = 'OTH_S' or	Please specify cancer type	text	
	Show the field ONLY if: [cancer_type_4] = 'C132146' or [c ancer_type_4] = 'OTH_H' or [canc er_type_4] = 'OTH_S' or [cancer_ty pe_4] = 'C27134'		text	
	Show the field ONLY if: [cancer_type_4] = 'C132146' or [c ancer_type_4] = 'OTH_H' or [canc er_type_4] = 'OTH_S' or [cancer_ty pe_4] = 'C27134' cancer_type_5	Cancer type of fifth malignancy. If the patient has more than five	text	(autocomplete), Required
	Show the field ONLY if: [cancer_type_4] = 'C132146' or [c ancer_type_4] = 'OTH_H' or [canc er_type_4] = 'OTH_S' or [cancer_ty pe_4] = 'C27134' cancer_type_5 Show the field ONLY if:		dropdown C132146	(autocomplete), Required Malignant Solid Neoplasm, NOS
	Show the field ONLY if: [cancer_type_4] = 'C132146' or [c ancer_type_4] = 'OTH_H' or [canc er_type_4] = 'OTH_S' or [cancer_ty pe_4] = 'C27134' cancer_type_5	Cancer type of fifth malignancy. If the patient has more than five malignancies, please select the fifth-most recently diagnosed cancer	dropdown C132146 C9325	(autocomplete), Required Malignant Solid Neoplasm, NOS Adrenocortical Carcinoma
	Show the field ONLY if: [cancer_type_4] = 'C132146' or [c ancer_type_4] = 'OTH_H' or [canc er_type_4] = 'OTH_S' or [cancer_ty pe_4] = 'C27134' cancer_type_5 Show the field ONLY if:	Cancer type of fifth malignancy. If the patient has more than five malignancies, please select the fifth-most recently diagnosed cancer	dropdown C132146 C9325 C9291	(autocomplete), Required Malignant Solid Neoplasm, NOS Adrenocortical Carcinoma Anal Cancer
	Show the field ONLY if: [cancer_type_4] = 'C132146' or [c ancer_type_4] = 'OTH_H' or [canc er_type_4] = 'OTH_S' or [cancer_ty pe_4] = 'C27134' cancer_type_5 Show the field ONLY if:	Cancer type of fifth malignancy. If the patient has more than five malignancies, please select the fifth-most recently diagnosed cancer	dropdown C132146 C9325 C9291 C9330	(autocomplete), Required Malignant Solid Neoplasm, NOS Adrenocortical Carcinoma Anal Cancer Appendix Cancer
	Show the field ONLY if: [cancer_type_4] = 'C132146' or [c ancer_type_4] = 'OTH_H' or [canc er_type_4] = 'OTH_S' or [cancer_ty pe_4] = 'C27134' cancer_type_5 Show the field ONLY if:	Cancer type of fifth malignancy. If the patient has more than five malignancies, please select the fifth-most recently diagnosed cancer	dropdown C132146 C9325 C9291 C9330 C4436	(autocomplete), Required Malignant Solid Neoplasm, NOS Adrenocortical Carcinoma Anal Cancer Appendix Cancer Bile Duct Cancer (Cholangiocarcinoma)
	Show the field ONLY if: [cancer_type_4] = 'C132146' or [c ancer_type_4] = 'OTH_H' or [canc er_type_4] = 'OTH_S' or [cancer_ty pe_4] = 'C27134' cancer_type_5 Show the field ONLY if:	Cancer type of fifth malignancy. If the patient has more than five malignancies, please select the fifth-most recently diagnosed cancer	dropdown C132146 C9325 C9291 C9330 C4436 C4912	(autocomplete), Required Malignant Solid Neoplasm, NOS Adrenocortical Carcinoma Anal Cancer Appendix Cancer Bile Duct Cancer (Cholangiocarcinoma) Bladder Cancer
	Show the field ONLY if: [cancer_type_4] = 'C132146' or [c ancer_type_4] = 'OTH_H' or [canc er_type_4] = 'OTH_S' or [cancer_ty pe_4] = 'C27134' cancer_type_5 Show the field ONLY if:	Cancer type of fifth malignancy. If the patient has more than five malignancies, please select the fifth-most recently diagnosed cancer	dropdown C132146 C9325 C9291 C9330 C4436 C4912 C9312	(autocomplete), Required Malignant Solid Neoplasm, NOS Adrenocortical Carcinoma Anal Cancer Appendix Cancer Bile Duct Cancer (Cholangiocarcinoma) Bladder Cancer Bone cancer, NOS
	Show the field ONLY if: [cancer_type_4] = 'C132146' or [c ancer_type_4] = 'OTH_H' or [canc er_type_4] = 'OTH_S' or [cancer_ty pe_4] = 'C27134' cancer_type_5 Show the field ONLY if:	Cancer type of fifth malignancy. If the patient has more than five malignancies, please select the fifth-most recently diagnosed cancer	dropdown C132146 C9325 C9291 C9330 C4436 C4912 C9312 C5111	(autocomplete), Required Malignant Solid Neoplasm, NOS Adrenocortical Carcinoma Anal Cancer Appendix Cancer Bile Duct Cancer (Cholangiocarcinoma) Bladder Cancer Bone cancer, NOS Brain Cancer - benign (e.g., meningioma)
	Show the field ONLY if: [cancer_type_4] = 'C132146' or [c ancer_type_4] = 'OTH_H' or [canc er_type_4] = 'OTH_S' or [cancer_ty pe_4] = 'C27134' cancer_type_5 Show the field ONLY if:	Cancer type of fifth malignancy. If the patient has more than five malignancies, please select the fifth-most recently diagnosed cancer	dropdown C132146 C9325 C9291 C9330 C4436 C4912 C9312 C5111 C132067	(autocomplete), Required Malignant Solid Neoplasm, NOS Adrenocortical Carcinoma Anal Cancer Appendix Cancer Bile Duct Cancer (Cholangiocarcinoma) Bladder Cancer Bone cancer, NOS Brain Cancer - benign (e.g., meningioma) Brain Cancer - low-grade glioma
	Show the field ONLY if: [cancer_type_4] = 'C132146' or [c ancer_type_4] = 'OTH_H' or [canc er_type_4] = 'OTH_S' or [cancer_ty pe_4] = 'C27134' cancer_type_5 Show the field ONLY if:	Cancer type of fifth malignancy. If the patient has more than five malignancies, please select the fifth-most recently diagnosed cancer	dropdown C132146 C9325 C9291 C9330 C4436 C4912 C9312 C5111	(autocomplete), Required Malignant Solid Neoplasm, NOS Adrenocortical Carcinoma Anal Cancer Appendix Cancer Bile Duct Cancer (Cholangiocarcinoma) Bladder Cancer Bone cancer, NOS Brain Cancer - benign (e.g., meningioma)
	Show the field ONLY if: [cancer_type_4] = 'C132146' or [c ancer_type_4] = 'OTH_H' or [canc er_type_4] = 'OTH_S' or [cancer_ty pe_4] = 'C27134' cancer_type_5 Show the field ONLY if:	Cancer type of fifth malignancy. If the patient has more than five malignancies, please select the fifth-most recently diagnosed cancer	dropdown C132146 C9325 C9291 C9330 C4436 C4912 C9312 C5111 C132067	(autocomplete), Required Malignant Solid Neoplasm, NOS Adrenocortical Carcinoma Anal Cancer Appendix Cancer Bile Duct Cancer (Cholangiocarcinoma) Bladder Cancer Bone cancer, NOS Brain Cancer - benign (e.g., meningioma) Brain Cancer - low-grade glioma
	Show the field ONLY if: [cancer_type_4] = 'C132146' or [c ancer_type_4] = 'OTH_H' or [canc er_type_4] = 'OTH_S' or [cancer_ty pe_4] = 'C27134' cancer_type_5 Show the field ONLY if:	Cancer type of fifth malignancy. If the patient has more than five malignancies, please select the fifth-most recently diagnosed cancer	dropdown C132146 C9325 C9291 C9330 C4436 C4912 C9312 C5111 C132067 C3059	(autocomplete), Required Malignant Solid Neoplasm, NOS Adrenocortical Carcinoma Anal Cancer Appendix Cancer Bile Duct Cancer (Cholangiocarcinoma) Bladder Cancer Bone cancer, NOS Brain Cancer - benign (e.g., meningioma) Brain Cancer - low-grade glioma Brain Cancer - high-grade glioma (e.g., GBM)
	Show the field ONLY if: [cancer_type_4] = 'C132146' or [c ancer_type_4] = 'OTH_H' or [canc er_type_4] = 'OTH_S' or [cancer_ty pe_4] = 'C27134' cancer_type_5 Show the field ONLY if:	Cancer type of fifth malignancy. If the patient has more than five malignancies, please select the fifth-most recently diagnosed cancer	dropdown C132146 C9325 C9291 C9330 C4436 C4912 C9312 C5111 C132067 C3059 C4627	(autocomplete), Required Malignant Solid Neoplasm, NOS Adrenocortical Carcinoma Anal Cancer Appendix Cancer Bile Duct Cancer (Cholangiocarcinoma) Bladder Cancer Bone cancer, NOS Brain Cancer - benign (e.g., meningioma) Brain Cancer - low-grade glioma Brain Cancer - high-grade glioma (e.g., GBM) Brain (CNS) Cancer, NOS
	Show the field ONLY if: [cancer_type_4] = 'C132146' or [c ancer_type_4] = 'OTH_H' or [canc er_type_4] = 'OTH_S' or [cancer_ty pe_4] = 'C27134' cancer_type_5 Show the field ONLY if:	Cancer type of fifth malignancy. If the patient has more than five malignancies, please select the fifth-most recently diagnosed cancer	dropdown C132146 C9325 C9291 C9330 C4436 C4912 C9312 C5111 C132067 C3059 C4627 C4872	(autocomplete), Required Malignant Solid Neoplasm, NOS Adrenocortical Carcinoma Anal Cancer Appendix Cancer Bile Duct Cancer (Cholangiocarcinoma) Bladder Cancer Bone cancer, NOS Brain Cancer - benign (e.g., meningioma) Brain Cancer - low-grade glioma Brain Cancer - high-grade glioma (e.g., GBM) Brain (CNS) Cancer, NOS Breast Cancer
	Show the field ONLY if: [cancer_type_4] = 'C132146' or [c ancer_type_4] = 'OTH_H' or [canc er_type_4] = 'OTH_S' or [cancer_ty pe_4] = 'C27134' cancer_type_5 Show the field ONLY if:	Cancer type of fifth malignancy. If the patient has more than five malignancies, please select the fifth-most recently diagnosed cancer	dropdown C132146 C9325 C9291 C9330 C4436 C4912 C9312 C5111 C132067 C3059 C4627 C4872 C9039	(autocomplete), Required Malignant Solid Neoplasm, NOS Adrenocortical Carcinoma Anal Cancer Appendix Cancer Bile Duct Cancer (Cholangiocarcinoma) Bladder Cancer Bone cancer, NOS Brain Cancer - benign (e.g., meningioma) Brain Cancer - low-grade glioma Brain Cancer - high-grade glioma (e.g., GBM) Brain (CNS) Cancer, NOS Breast Cancer Cervical Cancer
	Show the field ONLY if: [cancer_type_4] = 'C132146' or [c ancer_type_4] = 'OTH_H' or [canc er_type_4] = 'OTH_S' or [cancer_ty pe_4] = 'C27134' cancer_type_5 Show the field ONLY if:	Cancer type of fifth malignancy. If the patient has more than five malignancies, please select the fifth-most recently diagnosed cancer	dropdown C132146 C9325 C9291 C9330 C4436 C4912 C9312 C5111 C132067 C3059 C4627 C4872 C9039 C4910	(autocomplete), Required Malignant Solid Neoplasm, NOS Adrenocortical Carcinoma Anal Cancer Appendix Cancer Bile Duct Cancer (Cholangiocarcinoma) Bladder Cancer Bone cancer, NOS Brain Cancer - benign (e.g., meningioma) Brain Cancer - low-grade glioma Brain Cancer - high-grade glioma (e.g., GBM) Brain (CNS) Cancer, NOS Breast Cancer Cervical Cancer
	Show the field ONLY if: [cancer_type_4] = 'C132146' or [c ancer_type_4] = 'OTH_H' or [canc er_type_4] = 'OTH_S' or [cancer_ty pe_4] = 'C27134' cancer_type_5 Show the field ONLY if:	Cancer type of fifth malignancy. If the patient has more than five malignancies, please select the fifth-most recently diagnosed cancer	dropdown C132146 C9325 C9291 C9330 C4436 C4912 C9312 C5111 C132067 C3059 C4627 C4872 C9039 C4910 C2955	(autocomplete), Required Malignant Solid Neoplasm, NOS Adrenocortical Carcinoma Anal Cancer Appendix Cancer Bile Duct Cancer (Cholangiocarcinoma) Bladder Cancer Bone cancer, NOS Brain Cancer - benign (e.g., meningioma) Brain Cancer - low-grade glioma Brain Cancer - high-grade glioma (e.g., GBM) Brain (CNS) Cancer, NOS Breast Cancer Cervical Cancer Colon Cancer
	Show the field ONLY if: [cancer_type_4] = 'C132146' or [c ancer_type_4] = 'OTH_H' or [canc er_type_4] = 'OTH_S' or [cancer_ty pe_4] = 'C27134' cancer_type_5 Show the field ONLY if:	Cancer type of fifth malignancy. If the patient has more than five malignancies, please select the fifth-most recently diagnosed cancer	dropdown C132146 C9325 C9291 C9330 C4436 C4912 C5111 C132067 C3059 C4627 C4872 C9039 C4910 C2955 C3513	(autocomplete), Required Malignant Solid Neoplasm, NOS Adrenocortical Carcinoma Anal Cancer Appendix Cancer Bile Duct Cancer (Cholangiocarcinoma) Bladder Cancer Bone cancer, NOS Brain Cancer - benign (e.g., meningioma) Brain Cancer - low-grade glioma Brain Cancer - high-grade glioma (e.g., GBM) Brain (CNS) Cancer, NOS Breast Cancer Cervical Cancer Colon Cancer Colon/Rectum Cancer
	Show the field ONLY if: [cancer_type_4] = 'C132146' or [c ancer_type_4] = 'OTH_H' or [canc er_type_4] = 'OTH_S' or [cancer_ty pe_4] = 'C27134' cancer_type_5 Show the field ONLY if:	Cancer type of fifth malignancy. If the patient has more than five malignancies, please select the fifth-most recently diagnosed cancer	dropdown C132146 C9325 C9291 C9330 C4436 C4912 C9312 C5111 C132067 C3059 C4627 C4872 C9039 C4910 C2955 C3513 C4817	(autocomplete), Required Malignant Solid Neoplasm, NOS Adrenocortical Carcinoma Anal Cancer Appendix Cancer Bile Duct Cancer (Cholangiocarcinoma) Bladder Cancer Bone cancer, NOS Brain Cancer - benign (e.g., meningioma) Brain Cancer - low-grade glioma Brain Cancer - high-grade glioma (e.g., GBM) Brain (CNS) Cancer, NOS Breast Cancer Cervical Cancer Colon Cancer Colon/Rectum Cancer Esophagus Cancer Ewing Sarcoma
	Show the field ONLY if: [cancer_type_4] = 'C132146' or [c ancer_type_4] = 'OTH_H' or [canc er_type_4] = 'OTH_S' or [cancer_ty pe_4] = 'C27134' cancer_type_5 Show the field ONLY if:	Cancer type of fifth malignancy. If the patient has more than five malignancies, please select the fifth-most recently diagnosed cancer	dropdown C132146 C9325 C9291 C9330 C4436 C4912 C5111 C132067 C3059 C4627 C4872 C9039 C4910 C2955 C3513 C4817 C3867 C3844	(autocomplete), Required Malignant Solid Neoplasm, NOS Adrenocortical Carcinoma Anal Cancer Appendix Cancer Bile Duct Cancer (Cholangiocarcinoma) Bladder Cancer Bone cancer, NOS Brain Cancer - benign (e.g., meningioma) Brain Cancer - low-grade glioma Brain Cancer - high-grade glioma (e.g., GBM) Brain (CNS) Cancer, NOS Breast Cancer Cervical Cancer Colon Cancer Colon/Rectum Cancer Esophagus Cancer Ewing Sarcoma Fallopian Tube Cancer
	Show the field ONLY if: [cancer_type_4] = 'C132146' or [c ancer_type_4] = 'OTH_H' or [canc er_type_4] = 'OTH_S' or [cancer_ty pe_4] = 'C27134' cancer_type_5 Show the field ONLY if:	Cancer type of fifth malignancy. If the patient has more than five malignancies, please select the fifth-most recently diagnosed cancer	dropdown C132146 C9325 C9291 C9330 C4436 C4912 C9312 C5111 C132067 C3059 C4627 C4872 C9039 C4910 C2955 C3513 C4817 C3867	(autocomplete), Required Malignant Solid Neoplasm, NOS Adrenocortical Carcinoma Anal Cancer Appendix Cancer Bile Duct Cancer (Cholangiocarcinoma) Bladder Cancer Bone cancer, NOS Brain Cancer - benign (e.g., meningioma) Brain Cancer - low-grade glioma Brain Cancer - high-grade glioma (e.g., GBM) Brain (CNS) Cancer, NOS Breast Cancer Cervical Cancer Colon Cancer Colon/Rectum Cancer Esophagus Cancer Ewing Sarcoma Fallopian Tube Cancer

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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)
C3457	B-cell non-Hodgkin lymphoma
C8851	Diffuse large B-cell lymphoma (DLBCL)
C4337	Mantle cell lymphoma (MCL)
C2912	Burkitt lymphoma

/29/21,	11:35 AM	COVID-19 and Cancer Consortium (CCC)	19) Re	gistry REDCap		
			C8504	1 Indolent lymphoma		
			C3209	9 Follicular lymphoma		
			C3163	3 Chronic lymphocytic leu	kemia (CLL)	
					nal zone lymphoma	
			C4665	5 Plasma cell dyscrasia		
			C3242	-		
			C3819			
			C2790	-	asm	
			C9308	•		
			C3106	,		
			OTH_			
			OTH			
			0	outer some ramer		
			Field A	nnotation: LOINC:63929-4; To	erminology: NCIT	
237	cancer_type_oth_5	Please specify cancer type	text			
	Show the field ONLY if: [cancer_type_5] = 'C132146' or [c ancer_type_5] = 'OTH_H' or [canc er_type_5] = 'OTH_S' or [cancer_ty pe_5] = 'C27134'					
238	multiple_ca_more	Multiple malignancies - further details. Please provide further details,	notes			
	Show the field ONLY if: [multiple_ca] = '1'	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.				
239	breast_biomarkers	Breast cancer specific: What is the breast cancer phenotype? Check all	checkb	00X		
	Show the field ONLY if: [cancer_type] = 'C4872' or [cancer_ _type_2] = 'C4872' or [cancer_type_3] = 'C4872' or [cancer_type_4]	that apply. Instructions: Oncology notes: (Medical, Surgical, or Radiation oncology notes): Information obtained from the most recent oncology note would suffice. Ideally, data entry is from the medical oncologist note, but if not available surgical or radiation oncology notes	ER	breast_biomarkerser	Estrogen and/or progesterone-receptor positive (ER or PR positive)	
	= 'C4872' or [cancer_type_5] = 'C4 872'	may also have the details of the information. Confirmation with pathology report is not required (unless the clinic notes fails to comment on both hormone receptors as well as HER2 status).	HER2	breast_biomarkersher2	HER2 overexpressing (HER2 positive)	
		Pathology Reports: If the most recent note is unclear, proceed as follows for assessing pathology reports: For patients with stage IV or metastatic breast cancer, use the receptor information from the most	TNBC	breast_biomarkerstnbc	Triple-negative breast cancer (ER, PR, and HER2 negative)	
		recent biopsy of the metastatic site, if unavailable, can use information from primary surgery or initial diagnostic biopsy. For stages I-III breast	99	breast_biomarkers99	Unknown	
		cancer, use information from surgery if available, otherwise use information from initial diagnostic biopsy. Hormone receptor (HR) status: Hormone receptor (HR) can refer to Estrogen receptor (ER) and/or progesterone receptor (PR). Any estrogen-receptor (ER) or progesterone-receptor (PR) expression above 1% on immunohistochemistry (IHC) is considered positive. HER2 Status: Positive: HER2 is considered positive if described as "overexpressed" or "3+ positive" by IHC or "amplified" by FISH. Of note 0 or 1+ by IHC is considered negative. If IHC is described as 2+, please refer to FISH results or final interpretation for the HER2 results. Positive FISH results (described as positive or amplified) always supersede IHC results, if there are discrepant results between the two.				
240	bcg_intraves_ever	Bladder cancer specific: Has the patient ever received intravesicular	radio			
	Show the field ONLY if: [cancer_type] = 'C4912' or [cancer_ _type_2] = 'C4912' or [cancer_type_3] = 'C4912' or [cancer_type_4] = 'C4912' or [cancer_type_5] = 'C4 912'	BCG?	1 Y	es Inknown nnotation: @HIDDEN		

241	gleason	Prostate cancer specific: Gleason Score – Document the highest	radio		•		
	Show the field ONLY if:	Gleason score (from either biopsy or radical prostatectomy - preferred	02		n score 2		
	[cancer_type] = 'C4863' or [cancer	if available). For example, Gleason 4 + 3 would be marked as Gleason 7.	03	Gleason	n score 3		
	_type_2] = 'C4863' or [cancer_typ e_3] = 'C4863' or [cancer_type_4]		04	Gleason	n score 4		
	= 'C4863' or [cancer_type_5] = 'C4		05	Gleason	n score 5		
	863'		06	Gleason	n score 6		
			07	Gleason	n score 7		
			08		score 8		
			09	Gleason	n score 9		
			10		score 10		
			X7		dle core biopsy/TURP/p	prostatectomy	
			/	perform		or ostateettoy	
			X8		olicable: Information no		
			Х9		umented in medical re essed or unknown if as		e
			Field	d Annotat	tion: Terminology: NAA	CCR 3840/3841	
242	gleason_source	Prostate cancer specific: What type of specimen was the Gleason score	radi	0			
	Show the field ONLY if:	based on?	384	10 Prost	ate biopsy or TURP		
	([cancer_type] = 'C4863' or [cance		384	11 Radio	al prostatectomy		
	r_type_2] = 'C4863' or [cancer_typ e_3] = 'C4863' or [cancer_type_4]		ME	T Meta	static site of disease		
	= 'C4863' or [cancer_type_5] = 'C4		UN	K Unkn	own		
	863') and ([gleason] = '02' or [glea son] = '03' or [gleason] = '04' or [g			ı			
	leason] = '05' or [gleason] = '06' o						
	r [gleason] = '07' or [gleason] = '0						
	8' or [gleason] = '09' or [gleason] = '10')						
243	sarcoma_type	Sarcoma specific: What histologic subtype of sarcoma did the patient	radi	0			
	Show the field ONLY if:	have, if known?	C64	196 Un	ndifferentiated pleomo	rphic sarcoma (UPS)/	
	([cancer_type] = 'C9306' or [cance			Му	xofibrosarcoma		
	r_type_2] = 'C9306' or [cancer_typ e_3] = 'C9306' or [cancer_type_4]		C63	340 Uto	erine leiomyosarcoma		
	= 'C9306' or [cancer_type_5] = 'C9		C31	158 No	on-uterine Leiomyosarc		
	306') or ([cancer_type] = 'C8538' o r [cancer_type_2] = 'C8538' or [ca		C37	704 De	differentiated liposarce		
	ncer_type_3] = 'C8538' or [cancer		C42	250 We	ell differentiated liposa	rcoma	
	_type_4] = 'C8538' or [cancer_typ e_5] = 'C8538')		C27	7781 My	/xoid/round cell liposar	rcoma	
	(2) = (0000)		C34	100 Syr	novial sarcoma		
			C37		alignant peripheral ner PNST)	ve sheath tumor	
			C30	088 An	giosarcoma		
			C27	7005 Sp	indle cell/soft tissue sa	rcoma NOS	
			C90)87 Ka	posi sarcoma		
			OTI	H Ot	her		
			UN	K Un	ıknown		
244	sarcoma_type_more	Please specify other sarcoma subtype. Do not record any PHI in this	text				
	Show the field ONLY if:	field. As a reminder, this includes all elements of dates other than year.					
	[sarcoma_type] = 'OTH'						
245	cancer_status	Cancer status. If the patient has multiple primaries, please report on the cancer that was most recently treated. This should be cancer status	radi	o, Require Remissi			7
		at or around the time that COVID-19 was diagnosed, not at the time	2			troatmont	-
		that the survey is filled out.	-		lisease, responding to t	treatment	-
			3		lisease, stable		-
			4		lisease, progressing		-
			5 99	Active d	lisease, status unknowi	n or not yet assessed	1
245	h t	Marsha astronom harden de de COMP de la					<u></u>
246	hospice	Was the patient on hospice prior to the COVID-19 diagnosis?	radi		\neg		
	Show the field ONLY if: [cancer_status] = 4 or [cancer_sta		0	No	\dashv		
	tus] = 5		1	Yes			
			99	Unknow	vn		

247	on_treatment	Is the patient on anti-cancer treatment? That is, was the patient	radio	o, Required				
		receiving any treatments intended to directly or indirectly destroy cancer cells in the 3 months prior to COVID-19 diagnosis? This includes	1	Yes				
		systemic therapy, surgery, radiotherapy, and transplant/cellular therapy	0	No				
		(including prior to actual transplant/infusion).	99	Unknown				
248	recent_treatment	When was the most recent anti-cancer treatment, relative to the time	radio	o, Required				
	Show the field ONLY if:	of COVID-19 diagnosis? Anti-cancer treatment means anything intended to directly or indirectly destroy cancer cells, including	1	Less than 2 v	veeks prior to COVID	19 diagnosis		
	[on_treatment] = '1'	systemic therapy, surgery, radiotherapy, and transplant/cellular	2	Within 2 to 4	weeks prior to COVII	D-19 diagnosis		
		therapy.	3	Within the m diagnosis	onth to 3 months pri	or to COVID-19		
			88	More than 3	months prior to COV	ID-19 diagnosis		
			98	Treatment w COVID-19 dia	as initiated for the fir	st time AFTER the		
			99	Unknown				
249	hx_treatment	When was the most recent anti-cancer treatment completed, relative to	radio	0				
	Show the field ONLY if: [on_treatment] = '0' or [recent_tre	the time of COVID-19 diagnosis? Anti-cancer treatment means anything intended to directly or indirectly destroy cancer cells, including	1		vithin 3 months prior	to COVID-19		
	atment] = '88'	systemic therapy, surgery, radiotherapy, and transplant/cellular therapy.	2		nore than 3 months b	out less than 1 year		
			3	Completed n	Completed more than 1 year prior to COVID-19			
			88	Never (patient never received cancer treatment prior to COVID-19 diagnosis)				
			98		as initiated for the fir	st time AFTER the		
			99	Unknown				
250	treatment_modality	Anti-cancer treatment modality. Check all that apply. You should check	chec	kbox, Require	rd			
230	Show the field ONLY if:	any modality that was given as part of the most recent course of	685		nt_modality685	Cytotoxic		
	[on_treatment] = '1' or [hx_treatm ent] = '1' or [hx_treatment] = '2'	therapy, not treatments given in the more distant past. For example, if a patient received concurrent chemoradiation, check cytotoxic	694	treatmen	nt_modality694	chemotherapy Immunotherapy		
		chemotherapy and radiotherapy. If a patient received neoadjuvant chemotherapy followed by surgery, you should check cytotoxic	582		nt_modality58229	Targeted therapy		
		chemotherapy and surgery. When in doubt, please provide additional			it_inodality36229			
					t modality 601	Endocrine		
		details in the free text boxes below. Definitions Cytotoxic chemotherapy: drugs that have direct toxic effects on the cellular	691		t_modality691	Endocrine (Hormone) therapy		
		chemotherapy: drugs that have direct toxic effects on the cellular reproduction apparatus (e.g., anthracyclines, taxanes, vinca alkaloids,	695	treatmer	nt_modality691 nt_modality695			
		chemotherapy: drugs that have direct toxic effects on the cellular		treatmer	·	(Hormone) therapy		
		chemotherapy: drugs that have direct toxic effects on the cellular reproduction apparatus (e.g., anthracyclines, taxanes, vinca alkaloids, etc.). Immunotherapy: drugs or cellular therapy that primarily act through upregulation of the immune system (e.g., immune checkpoint inhibitors, allogeneic hematopoeitic stem cell transplant, BiTEs, CAR-T-cells). Endocrine (Hormone) therapy: drugs that inhibit, mimic, or	695	treatmer treatmer treatmer	nt_modality695	(Hormone) therapy Radiotherapy		
		chemotherapy: drugs that have direct toxic effects on the cellular reproduction apparatus (e.g., anthracyclines, taxanes, vinca alkaloids, etc.). Immunotherapy: drugs or cellular therapy that primarily act through upregulation of the immune system (e.g., immune checkpoint inhibitors, allogeneic hematopoeitic stem cell transplant, BiTEs, CAR-T-cells). Endocrine (Hormone) therapy: drugs that inhibit, mimic, or replace endocrine processes (e.g., tamoxifen, aromatase inhibitors, octreotide). Targeted therapy: drugs that interfere with specific cellular proteins through blockade (e.g., monoclonal antibodies) or disruption	695 140 451	treatmer treatmer treatmer treatmer treatmer	nt_modality695 nt_modality14051	(Hormone) therapy Radiotherapy Surgery Transplant/Cellular therapy		
		chemotherapy: drugs that have direct toxic effects on the cellular reproduction apparatus (e.g., anthracyclines, taxanes, vinca alkaloids, etc.). Immunotherapy: drugs or cellular therapy that primarily act through upregulation of the immune system (e.g., immune checkpoint inhibitors, allogeneic hematopoeitic stem cell transplant, BiTEs, CAR-T-cells). Endocrine (Hormone) therapy: drugs that inhibit, mimic, or replace endocrine processes (e.g., tamoxifen, aromatase inhibitors, octreotide). Targeted therapy: drugs that interfere with specific cellular proteins through blockade (e.g., monoclonal antibodies) or disruption (e.g., tyrosine kinase inhibitors). Note that monoclonal antibodies that	695 140 451	treatmer treatmer treatmer treatmer treatmer treatmer treatmer	nt_modality695 nt_modality14051 nt_modality45186	(Hormone) therapy Radiotherapy Surgery Transplant/Cellular therapy Intravesicular		
		chemotherapy: drugs that have direct toxic effects on the cellular reproduction apparatus (e.g., anthracyclines, taxanes, vinca alkaloids, etc.). Immunotherapy: drugs or cellular therapy that primarily act through upregulation of the immune system (e.g., immune checkpoint inhibitors, allogeneic hematopoeitic stem cell transplant, BiTEs, CAR-T-cells). Endocrine (Hormone) therapy: drugs that inhibit, mimic, or replace endocrine processes (e.g., tamoxifen, aromatase inhibitors, octreotide). Targeted therapy: drugs that interfere with specific cellular proteins through blockade (e.g., monoclonal antibodies) or disruption	695 140 451 452 OTH	treatmer treatmer treatmer treatmer treatmer treatmer treatmer treatmer	nt_modality695 nt_modality14051 nt_modality45186 nt_modality45215	(Hormone) therapy Radiotherapy Surgery Transplant/Cellular therapy Intravesicular therapy (e.g., BCG) Other		
251	intravesicular_bcg	chemotherapy: drugs that have direct toxic effects on the cellular reproduction apparatus (e.g., anthracyclines, taxanes, vinca alkaloids, etc.). Immunotherapy: drugs or cellular therapy that primarily act through upregulation of the immune system (e.g., immune checkpoint inhibitors, allogeneic hematopoeitic stem cell transplant, BiTEs, CAR-Tcells). Endocrine (Hormone) therapy: drugs that inhibit, mimic, or replace endocrine processes (e.g., tamoxifen, aromatase inhibitors, octreotide). Targeted therapy: drugs that interfere with specific cellular proteins through blockade (e.g., monoclonal antibodies) or disruption (e.g., tyrosine kinase inhibitors). Note that monoclonal antibodies that do not have a direct immunostimulatory effect (e.g., rituximab, bevacizumab, etc.) should be selected as "Targeted therapy", as should immunomodulators (e.g., lenalidomide) and drugs that target specific	695 140 451 452 OTH	treatmer treatmer treatmer treatmer treatmer treatmer treatmer treatmer treatmer	at_modality695 tt_modality14051 at_modality45186 at_modality45215 at_modalityoth	(Hormone) therapy Radiotherapy Surgery Transplant/Cellular therapy Intravesicular therapy (e.g., BCG) Other		
251	Show the field ONLY if:	chemotherapy: drugs that have direct toxic effects on the cellular reproduction apparatus (e.g., anthracyclines, taxanes, vinca alkaloids, etc.). Immunotherapy: drugs or cellular therapy that primarily act through upregulation of the immune system (e.g., immune checkpoint inhibitors, allogeneic hematopoeitic stem cell transplant, BiTEs, CAR-Tcells). Endocrine (Hormone) therapy: drugs that inhibit, mimic, or replace endocrine processes (e.g., tamoxifen, aromatase inhibitors, octreotide). Targeted therapy: drugs that interfere with specific cellular proteins through blockade (e.g., monoclonal antibodies) or disruption (e.g., tyrosine kinase inhibitors). Note that monoclonal antibodies that do not have a direct immunostimulatory effect (e.g., rituximab, bevacizumab, etc.) should be selected as "Targeted therapy", as should immunomodulators (e.g., lenalidomide) and drugs that target specific cellular proteins (e.g., venetoclax, ibrutinib).	695 140 451 452 OTH	treatmer treatmer treatmer treatmer treatmer treatmer treatmer treatmer treatmer	at_modality695 tt_modality14051 at_modality45186 at_modality45215 at_modalityoth	(Hormone) therapy Radiotherapy Surgery Transplant/Cellular therapy Intravesicular therapy (e.g., BCG) Other		
251	_	chemotherapy: drugs that have direct toxic effects on the cellular reproduction apparatus (e.g., anthracyclines, taxanes, vinca alkaloids, etc.). Immunotherapy: drugs or cellular therapy that primarily act through upregulation of the immune system (e.g., immune checkpoint inhibitors, allogeneic hematopoeitic stem cell transplant, BiTEs, CAR-Tcells). Endocrine (Hormone) therapy: drugs that inhibit, mimic, or replace endocrine processes (e.g., tamoxifen, aromatase inhibitors, octreotide). Targeted therapy: drugs that interfere with specific cellular proteins through blockade (e.g., monoclonal antibodies) or disruption (e.g., tyrosine kinase inhibitors). Note that monoclonal antibodies that do not have a direct immunostimulatory effect (e.g., rituximab, bevacizumab, etc.) should be selected as "Targeted therapy", as should immunomodulators (e.g., lenalidomide) and drugs that target specific cellular proteins (e.g., venetoclax, ibrutinib).	6959 140 451 452 OTI	treatmer	at_modality695 tt_modality14051 at_modality45186 at_modality45215 at_modalityoth	(Hormone) therapy Radiotherapy Surgery Transplant/Cellular therapy Intravesicular therapy (e.g., BCG) Other		
251	Show the field ONLY if:	chemotherapy: drugs that have direct toxic effects on the cellular reproduction apparatus (e.g., anthracyclines, taxanes, vinca alkaloids, etc.). Immunotherapy: drugs or cellular therapy that primarily act through upregulation of the immune system (e.g., immune checkpoint inhibitors, allogeneic hematopoeitic stem cell transplant, BiTEs, CAR-Tcells). Endocrine (Hormone) therapy: drugs that inhibit, mimic, or replace endocrine processes (e.g., tamoxifen, aromatase inhibitors, octreotide). Targeted therapy: drugs that interfere with specific cellular proteins through blockade (e.g., monoclonal antibodies) or disruption (e.g., tyrosine kinase inhibitors). Note that monoclonal antibodies that do not have a direct immunostimulatory effect (e.g., rituximab, bevacizumab, etc.) should be selected as "Targeted therapy", as should immunomodulators (e.g., lenalidomide) and drugs that target specific cellular proteins (e.g., venetoclax, ibrutinib).	695 140 451 452 OTH	treatmer	at_modality695 tt_modality14051 at_modality45186 at_modality45215 at_modalityoth	(Hormone) therapy Radiotherapy Surgery Transplant/Cellular therapy Intravesicular therapy (e.g., BCG) Other		
251	Show the field ONLY if:	chemotherapy: drugs that have direct toxic effects on the cellular reproduction apparatus (e.g., anthracyclines, taxanes, vinca alkaloids, etc.). Immunotherapy: drugs or cellular therapy that primarily act through upregulation of the immune system (e.g., immune checkpoint inhibitors, allogeneic hematopoeitic stem cell transplant, BiTEs, CAR-Tcells). Endocrine (Hormone) therapy: drugs that inhibit, mimic, or replace endocrine processes (e.g., tamoxifen, aromatase inhibitors, octreotide). Targeted therapy: drugs that interfere with specific cellular proteins through blockade (e.g., monoclonal antibodies) or disruption (e.g., tyrosine kinase inhibitors). Note that monoclonal antibodies that do not have a direct immunostimulatory effect (e.g., rituximab, bevacizumab, etc.) should be selected as "Targeted therapy", as should immunomodulators (e.g., lenalidomide) and drugs that target specific cellular proteins (e.g., venetoclax, ibrutinib).	695 140 451 452 OTH Field	treatmer	at_modality695 tt_modality14051 at_modality45186 at_modality45215 at_modalityoth	(Hormone) therapy Radiotherapy Surgery Transplant/Cellular therapy Intravesicular therapy (e.g., BCG) Other		

		Lucia de la constanta de la co	, ,	
253	what_immunotherapy	What immunotherapy?	radio, Re	†
	Show the field ONLY if:		45838	Anti-CTLA4 antibody
	[treatment_modality(694)] = '1'		45446	Anti-PD-1 antibody (e.g., nivolumab, pembrolizumab)
			45170	Anti-PD-L1 antibody (e.g., atezolizumab, avelumab)
			45838- 45446	Combination of anti-CTLA4 and anti-PD-1 (e.g. ipilimumab & nivolumab)
			ОТН	Other
			UNK	Unknown
			L	
				notation: Terminology: HemOnc HOICE='45838'
254	immuno_other_specify	Please specify what other immunotherapy Do not record any PHI in	notes	
	Show the field ONLY if: [what_immunotherapy] = 'OTH'	this field. As a reminder, this includes all elements of dates other than year.		
255	what_targeted_tx	Some targeted therapies have postulated antiviral effects. Was the	checkbox	<
	Show the field ONLY if: [treatment_modality(58229)] = '1'	patient taking any of these medications? Check all that apply.	L01XE51	what_targeted_txl01xe51 Acalabrutinib (Calquence)
			L01XE06	5 what_targeted_txl01xe06 Dasatinib (Sprycel)
			L01XE57	7 what_targeted_txl01xe57 Fedratinib (Inrebic)
			L01XE27	7 what_targeted_txl01xe27 Ibrutinib (Imbruvica)
			L01XE01	what_targeted_txl01xe01 Imatinib (Gleevec)
			L01XE08	what_targeted_txl01xe08 Nilotinib (Tasigna)
			L01XE18	what_targeted_txl01xe18 Ruxolitinib (Jakafi)
			OTH	what_targeted_txoth Other
			UNK	what_targeted_txunk
			NONE	what_targeted_txnone None
256	Annual of the second	Disease again what athous transitional diseases Disease Commission		
256	targeted_other_specify Show the field ONLY if: [what_targeted_tx(OTH)] = '1'	Please specify what other targeted therapy. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes	
257	pneumonitis	Is there a strong concern for concurrent immune-related adverse event	radio	
	Show the field ONLY if:	(irAE) pneumonitis?	1 No	
	[treatment_modality(694)] = '1'		2 Poss	ible
			3 Likel	
				,
			4 Defir	nite irAE pneumonitis
258	other_irae	Is there a strong concern for another concurrent irAE?	yesno	
	Show the field ONLY if:		1 Yes	
	[treatment_modality(694)] = '1'		0 No	
259	irae_text	Please describe Do not record any PHI in this field. As a reminder, this	notes	
	Show the field ONLY if:	includes all elements of dates other than year.		
	[other_irae] = '1'			
260	radiotherapy	Does or did the radiation treatment field include the lungs to any	radio	
	Show the field ONLY if:	degree?	1 Yes	
	[treatment_modality(695)] = '1'		0 No	
			99 Unk	known
				<u></u>
261	transplant_prior_tx	Transplant and cellular therapy - additional information. So that we can better understand the patient's degree of immunosuppression, please	notes	
	Show the field ONLY if:	provide additional details related to their prior treatment course and to		
	[treatment_modality(45186)] = '1' or [significant_comorbidities(234	their disease status when entering into transplant or cellular therapy.		
	336002)] = '1'	Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.		
		comence of duces outer than year.		

120121,	11.33 AIVI	COVID-19 and Cancer Consortium (CCC)	13) 110	gistry NEDOap
262	transplant_cellular_therapy	Transplant & cellular therapy - what type of therapy?	radio	
	Show the field ONLY if:		1	Autologous stem cell transplant
	[treatment_modality(45186)] = '1'		10	Allogeneic SCT (donor/type unknown)
	or [significant_comorbidities(234 336002)] = '1'		2	MUD allogeneic SCT
	330002)] - 1		3	MRD allogeneic SCT
			4	Haplo allogeneic SCT
			5	Cord blood allogeneic SCT
			6	CAR-T cells
			ОТН	Other
			7	
				DEPRECATED (was Unknown)
			99	Unknown
			Field A	nnotation: @HIDECHOICE = '7'
263	sct_other_specify	Please specify what other type of transplant or cellular therapy Do not	notes	
	Show the field ONLY if:	record any PHI in this field. As a reminder, this includes all elements of		
	[transplant_cellular_therapy] = 'O	dates other than year.		
261	TH'	Transplant 0 callular the growth true for set for	un -1:	
264	transplant_cellular_timing	Transplant & cellular therapy - how far out from treatment?	radio 0 D	During prep (prior to transplant)
	Show the field ONLY if: [treatment_modality(45186)] = '1'			-20 days
	or [significant_comorbidities(234		\vdash	,
	336002)] = '1'		\vdash	1-100 days
				01-365 days
			\vdash	Nore than 1 year
			-	DEPRECATED (was Unknown)
			99 U	Inknown
			Field A	nnotation: @HIDECHOICE = '5'
265	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	
266	treatment_intent	Anti-cancer treatment intent Note: if the cancer is not considered	radio,	Required
	Show the field ONLY if:	curable, you should choose palliative intent.	1 C	urative
	[on_treatment] = '1' or [hx_treatm		2 P	alliative
	ent] = '1' or [hx_treatment] = '2'		99 U	Inclear or unknown
267	treatment_context	Current (or most recent) anti-cancer treatment context. Note that the	radio	
	Show the field ONLY if:	language for treatment context differs for solid and hematologic	46235	Curative therapy, NOS
	[on_treatment] = '1' or [hx_treatm	malignancies. The first set of choices are more commonly used for solid tumors, and the last three (induction, consolidation, maintenance)	5250	Neoadjuvant
	ent] = '1' or [hx_treatment] = '2'	for hematologic malignancy. Induction is synonymous with "remission	2618	Adjuvant
		induction" and should be checked for patients receiving upfront therapy with the intent of achieving remission, e.g., 7+3 for AML, R-	2648	Non-curative therapy, NOS
		CHOP for DLBCL, and ABVD for Hodgkin lymphoma. If the patient	3175	1st line non-curative therapy
		underwent curative surgical resection or radiation as their only therapy, please mark "Curative therapy, NOS". Likewise, if they underwent	14900	2nd line non-curative therapy
		palliative surgical resection or radiation as their only therapy, please	1874	Subsequent line non-curative therapy
		mark "Non-curative therapy, NOS".	813	Induction
			1526	Consolidation
			1901	Maintenance
			ОТН	Other
			UNK	Unknown
			Field A	nnotation: Terminology: HemOnc
268	other_context	Please specify other treatment context Do not record any PHI in this	notes	
268	other_context Show the field ONLY if: [treatment_context] = 'OTH'	Please specify other treatment context Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes	

269	orchiectomy Show the field ONLY if: [cancer_type] = 'C4863' or [cancer_type_2] = 'C4863' or [cancer_type_3] = 'C4863' or [cancer_type_4] = 'C4863' or [cancer_type_5] = 'C4863' adt	Prostate cancer specific: Has the patient had a bilateral orchiectomy? Prostate cancer specific: Was the patient on androgen deprivation	radio No 1 Yes 99 Unkr	nown		
	Show the field ONLY if: ([cancer_type] = 'C4863' or [cancer_type_2] = 'C4863' or [cancer_type_3] = 'C4863' or [cancer_type_4] = 'C4863' or [cancer_type_5] = 'C4863') and [hx_treatment] != '3' and [hx_treatment] != '88'	therapy (ADT) within 6 months of a positive SARS-CoV-2 test or presumed positive COVID-19 disease? HINT: Androgen deprivation therapy is typically administered in the form of an injection given every 1, 3, 4, or 6 months. Agents largely include: degarelix (Firmagon), leuprolide (Lupron), goserelin (Zoladex), triptorelin (Trelstar), buserelin (Suprefact).	0 No 1 Yes	0 No 1 Yes		
271	prostate_tx Show the field ONLY if: ([cancer_type] = 'C4863' or [cancer_type] and the field only if:	Prostate cancer specific: Please check all the prostate cancer therapies that the patient received within 3 months of a positive SARS-CoV-2 test or presumed positive COVID-19 disease. More than one option can be selected.	83008	prostate_tx83008	Bicalutamide (Casodex)	
	r_type_2] = 'C4863' or [cancer_typ e_3] = 'C4863' or [cancer_type_4]		4508	prostate_tx4508	Flutamide	
	= 'C4863' or [cancer_type_5] = 'C4		31805	prostate_tx31805	Nilutamide	
	863') and [hx_treatment] != '3' an d [hx_treatment] != '88'		1100072	prostate_tx1100072	Abiraterone (Zytiga)	
	a [m_areaaneng]		1307298	prostate_tx1307298	Enzalutamide (Xtandi)	
			1999574	prostate_tx1999574	Apalutamide (Erleada)	
			2180325	prostate_tx2180325	Darolutamide (Nubeqa)	
			72962	prostate_tx72962	Docetaxel (Taxotere)	
			996051	prostate_tx996051	Cabazitaxel (Jevtana)	
			40048	prostate_tx40048	Carboplatin	
			1958200	prostate_tx1958200	Radium-223	
			1597582	prostate_tx1597582	Olaparib	
			1547545	prostate_tx1547545	Pembrolizumab	
			TRIAL	prostate_txtrial	Clinical trial	
			ОТН	prostate_txoth	Other agent	
			NONE	prostate_txnone	None of the above	
			UNK	prostate_txunk	Unknown	
				otation: OICE='4508,31805,40048, FTHEABOVE='NONE'	1958200'	
272	prostate_trial_more Show the field ONLY if: [prostate_tx(TRIAL)] = '1'	Please specify clinical trial details. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes			
273	prostate_tx_oth Show the field ONLY if: [prostate_tx(OTH)] = '1'	Please specify other agent(s). Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes			
274	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			
275	stage	Stage at cancer diagnosis. If the patient has multiple primaries, please report on the cancer that was most recently treated. If the patient has a solid tumor but you cannot determine an exact stage, try to determine whether the disease was localized or disseminated at diagnosis. Clues to localized disease at diagnosis include definitive therapies such as lumpectomy for breast cancer, colectomy for colon cancer, and prostatectomy for prostate cancer. If the patient was initially diagnosed with in situ cancer but then developed invasive disease, please report the stage at the time of invasive disease diagnosis. For hematologic malignancies that are not anatomically staged (e.g., leukemias, myeloma), select localized or disseminated based on the distribution of the disease. For example, multiple myeloma would be disseminated, whereas a solitary plasmacytoma would be localized. Most leukemias are considered disseminated at diagnosis, with very few exceptions.	3 4 764-1 764-7 OTH 99 1	0 (in situ) II III IV Localized Disseminated Other Unknown	.CCR	

276	stage_note Show the field ONLY if: [stage] = '1004-0'	Please note that in situ malignancies are not considered eligible for CCC19 case inclusion, with the exception of bladder cancer. Please double-check the staging information for this patient. For example, Rai Stage 0 CLL should not be reported as stage 0 (in situ) but should be reported as disseminated.	descriptive			
277	stage_oth_specify Show the field ONLY if: [stage] = 'OTH'	Please specify other stage at cancer diagnosis Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes			
278	mets_yn Show the field ONLY if: [cancer_status] != '1'	Did the patient have metastatic cancer at the time of COVID-19 diagnosis?	1 88	No Yes Not applicable (e.g., patio	ent has a liquid hematologic	
			-	malignancy) Unknown		
279	mote sites	What were the sites of metastatic disease? Please shock all that apply	chacl	thay		
2/9	mets_sites Show the field ONLY if: [mets_yn] = '1'	What were the sites of metastatic disease? Please check all that apply.	1112 1		Bone	
	[mets_yn] = 1		1113	3- mets_sites1113_1	Brain	
			1114 1	4- mets_sites1114_1	Distant lymph nodes	
			1115	5- mets_sites1115_1	Liver	
			1116	6- mets_sites1116_1	Lung	
			1117	7- mets_sites1117_1	Other sites	
			1117	7- mets_sites1117_2	Generalized metastases such as carcinomatosis, malignant pleural effusion, malignant ascites	
			9	mets_sites9	DEPRECATED (was Unknown)	
			99	mets_sites99	Unknown	
			Field	Annotation: Terminology	: NAACCR @HIDECHOICE = '9'	
280	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	5		
281	cancer_timing	When was the patient's cancer diagnosed? If the patient has multiple primaries, please report on the cancer that was most recently treated.	88 1 2 3	At the same time as COV AFTER the COVID-19 diag Within the past year Within the past 5 years More than 5 years ago		
282	cancer_timing_note_1 Show the field ONLY if: [cancer_timing] = '0'	Please note that patients diagnosed concurrently with COVID-19 and cancer will be excluded from most analyses, given major intrinsic differences between such patients and those with an established diagnosis of cancer. However, we will likely undertake a dedicated analysis of this population and encourage you to fill the remainder of the survey.		iptive		
283	cancer_timing_note_2 Show the field ONLY if: [cancer_timing] = '88'	Please note that patients diagnosed with cancer after COVID-19 will not be included in any future planned analyses. There is too much uncertainty about whether the cancer was present at the time that COVID-19 was diagnosed. We appreciate your understanding.	descr	riptive		
284	clinical_trial	Is the patient on a clinical trial?	radio 0 No 1 Yes 99 Unknown			

Please provide additional details 30 you can't Note: some institutions in provide additional place and some place and some places and some p				1				
Do not record any Pit II of this field. As a reminder, this includes all elements of distor both than years. Heat the paper were received treatments known to be associated with the paper were received treatments known to be associated with the paper were received treatments known to be associated with the paper were received treatments known to be associated with the paper were received treatments known to be associated with the paper were received treatments known to be associated with the paper were received treatments known to be associated with the paper were received treatments known to be associated with the paper were received treatments known to be associated with the paper were received treatments known to be associated with the paper were received treatments known to be associated with the paper were received treatments known to the associated with the paper were received treatments known to the associated with the paper were received treatments from the paper were received to paper were received to paper were received to paper were received to paper were received treatments from the paper were received treatments from the paper were received treatments of direct other treatments. Paper were received treatments from the paper were received treatments from the paper were received treatments from the paper were received treatments.	285	Show the field ONLY if:	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	notes	notes			
Parameter Para	286	additional_ca_dx	Do not record any PHI in this field. As a reminder, this includes all	notes	notes			
Pace	287	prior_tx	Has the patient ever received treatments known to be associated with	checkbo	x			
Page			cardiac or pulmonary toxicity? Check all that apply.	73	prior_tx73	Bleomycin		
Para				90	prior_tx90	Carmustine	2	
Part				122	prior_tx122	Cyclophosp	hamide	
				202	prior_tx202	Everolimus		
				243	prior_tx243	Gemcitabin	ie	
According to the content of the co				44985	prior_tx44985	Anthracyclin	nes	
Please list specific drugs to not record any PHI in this field. As a reminder, this includes all elements of dates other than year.				45000	prior_tx45000	Antibody-dr	rug conjugates	
Place				45613	prior_tx45613			
Add			58101	prior_tx58101	Checkpoint	inhibitors		
A A A A A A A A A A				694	prior_tx694	Immunothe	erapy	
Assembly			44947	prior_tx44947	Monoclona	l antibodies		
Hand				45388	prior_tx45388	Platinum ag	gents	
Fig.				45352	prior_tx45352	Taxanes		
CTH prior_tx_doth Other UNK prior_tx_mone Other UNK Unknown UNKnown Other UNK Unknown Other UNK Unknown Other UNK Prior_tx_mone Other UNK Unknown Other Unknown Ot				44955	prior_tx44955	Tyrosine kir	nase inhibitors (TKIs	
UNK prior_tx_unk Unknown NoNE Un				695	prior_tx695	Radiation in	nvolving a lung field	
NONE prior_tx_none None Field Annotation: Terminology: HemOnc				OTH	prior_txoth	Other		
Teld Annotation: Terminology: HemOnc				UNK	UNK prior_txunk Unknown			
Transport of the field ONLY If: Tran				NONE	NONE prior_txnone None			
Show the field ONLY if: [prior_tx(45613)] = 1'1 or [prior_tx(45913)] = 1'1 or [prior_tx(4995)] = 1'1 or [prior_tx(4995)] = 1'1 or [prior_tx(58101)] = 1'1 or [prior_tx(68101)] = 1'1 or [prior_tx(6810)] = 1'1 or [prior_tx(68101)] = 1'1 or [prior_tx(68101)] = 1'1 o				Field Anı	notation: Terminol	ogy: HemOn	С	
Show the field ONLY if: [prior_tx(S8101)] = '1' or [prior_tx (694)] = '1' or [treatment_modality y(694)] = '1' or [tre	288	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 [p	· _ ·	text				
Show the field ONLY if: Show the field only if	289	irae_gr3		checkbo	x			
(694)] = '1' or [treatmen_modality (94)] = '1' or [treatmen_modality (94			3 or above? Check all that apply.	418290	006 irae_gr341	18290006 P	ruritis	
y(694)] = '1'				271807	~ —		ash	
205237003 irae_gr3205237003 Pneumonitis				-	~ —			
4093008 irae_gr3_4093008 Hypothyroidism 267060006 irae_gr3_267060006 Diarrhea 64226004 irae_gr3_64226004 Colitis 64613007 irae_gr3_64613007 Enteritis 128241005 irae_gr3_128241005 Hepatitis OTH irae_gr3_oth Other NONE irae_gr3_none None UNK irae_gr3_unk Unknown 290 irae_oth_specify Show the field ONLY if: Please specify what other iRAE CTCAE grade 3 or above. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year					~ —			
267060006 irae_gr3267060006 Diarrhea 64226004 irae_gr364226004 Colitis 64613007 irae_gr364613007 Enteritis 128241005 irae_gr3128241005 Hepatitis OTH irae_gr3oth Other NONE irae_gr3oth Unknown UNK irae_gr3unk Unknown Field Annotation: @HIDECHOICE='57676002,64613007' 290 irae_oth_specify Show the field ONLY if:					~ —			
Field Annotation: @HIDECHOICE='57676002,64613007'				-	~ —			
64613007 irae_gr364613007 Enteritis 128241005 irae_gr3128241005 Hepatitis OTH irae_gr3oth Other NONE irae_gr3none None UNK irae_gr3unk Unknown Please specify what other iRAE CTCAE grade 3 or above. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year					~ —			
290 irae_oth_specify Show the field ONLY if: Please specify what other iRAE CTCAE grade 3 or above. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.								
290 irae_oth_specify Show the field ONLY if: Please specify what other iRAE CTCAE grade 3 or above. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year. OTH irae_gr3oth Other NONE irae_gr3unk Unknown Field Annotation: @HIDECHOICE='57676002,64613007' notes								
290 irae_oth_specify Show the field ONLY if: Please specify what other iRAE CTCAE grade 3 or above. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year. PNONE irae_gr3none None UNK irae_gr3unk Unknown Field Annotation: @HIDECHOICE='57676002,64613007' Please specify what other iRAE CTCAE grade 3 or above. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.				-				
290 irae_oth_specify Show the field ONLY if: Please specify what other iRAE CTCAE grade 3 or above. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year					_			
Field Annotation: @HIDECHOICE='57676002,64613007' 290 irae_oth_specify Show the field ONLY if: Please specify what other iRAE CTCAE grade 3 or above. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.								
290 irae_oth_specify Show the field ONLY if: Please specify what other iRAE CTCAE grade 3 or above. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.				UNK	irae_gr3u	nk U	Inknown	
Show the field ONLY if: any PHI in this field. As a reminder, this includes all elements of dates other than year				Field Anı	notation: @HIDECH	HOICE='57676	6002,64613007'	
Lotner than year	290	• •		notes				
			other than year.					

291	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 99 Unknown
292	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
293	prior_tx_other Show the field ONLY if: [prior_tx(OTH)] = '1'	Please specify other past treatments with potential cardiac or pulmonary toxicity.	text
294	rt_screen	Section Header: Radiation therapy questions Has the patient ever had radiation therapy as part of their cancer care?	radio 0 No 1 Yes 99 Unknown
295	rt_timing Show the field ONLY if: [rt_screen] = '1'	When was the patient treated with radiation relative to their COVID-19 diagnosis? If the patient has undergone more than one course of radiation, answer according to the course given in closest proximity to the COVID-19 diagnosis.	radio 1 Completed radiation more than 3 months prior to COVID-19 diagnosis 2 Completed radiation less than 3 months prior to COVID-19 diagnosis 3 Started radiation prior to COVID-19 diagnosis, but did not complete until after COVID-19 diagnosis 4 Started radiation less than 3 months after COVID-19 diagnosis 5 Started radiation more than 3 months after COVID-19 diagnosis 9 Unknown OTH Other
296	rt_timing_oth Show the field ONLY if: [rt_timing] = 'OTH'	Please specify timing of radiation Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes
297	rt_timing_yr Show the field ONLY if: [rt_timing] = '1' or [rt_timing] = '2'	What year did the patient complete their most recent radiation?	text (integer, Min: 1940, Max: 2099)
298	rt_delay Show the field ONLY if: [rt_timing] = '3' or [rt_timing] = '4' or [rt_timing] = '5'	Was the patient's most recent radiation treatment delayed due to their COVID-19 diagnosis?	radio 0 No 1 Yes 99 Unknown
299	rt_modification Show the field ONLY if: [rt_timing] = '3' or [rt_timing] = '4' or [rt_timing] = '5'	Was the patient's most recent radiation course altered (modality, timing, fraction number, fraction size, non-standard hypofractionation, delay/induction, etc.) or not completed?	radio 0 No 1 Yes 99 Unknown OTH Other
300	rt_modification_oth Show the field ONLY if: [rt_modification] = 'OTH'	Please specify what modifications Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes, Required
301	rt_intent Show the field ONLY if: [rt_screen] = '1'	What was the intent of the most recent radiation? If the patient has undergone more than one course of radiation, answer according to the course given in closest proximity to the COVID-19 diagnosis.	radio 1 Adjuvant 2 Definitive 3 Palliative 99 Unknown OTH Other
302	rt_intent_oth Show the field ONLY if:	Please specify what other intent Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes

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303	rt_modality	What was the most recent radiation modality? Check all that apply.	checkbox	(
	Show the field ONLY if:		1506-02	rt_modality1506_02	Photons
	[rt_screen] = '1'		1506-04	rt_modality1506_04	Electrons
			1506-03	rt_modality1506_03	Protons
			1506-07	rt_modality1506_07	Brachytherapy
					Unknown
			-		
			OTH	rt_modalityoth	Other
			Field Ann modified	otation: Terminology: NAA	CCR item #1506
304	rt_modality_oth	Please specify what other radiation modality Do not record any PHI in	notes, Re	quired	
	Show the field ONLY if: [rt_modality(OTH)] = '1'	this field. As a reminder, this includes all elements of dates other than year.			
305	rt_systemic_tx	Did the patient receive concurrent systemic therapy with their most	checkbox	(
	Show the field ONLY if:	recent radiation? Check all that apply.	0	rt_systemic_tx0	No
	[rt_screen] = '1'		1-685	rt_systemic_tx1_685	Yes - cytotoxic chemotherapy
			1-694	rt_systemic_tx1_694	Yes - immunotherapy (e.g., immune checkpoint inhibitor)
			1- 44955	rt_systemic_tx1_44955	Yes - small molecule inhibitor (e.g., TKI)
			1- 12278	rt_systemic_tx1_12278	Yes - antibody therapy other than immunotherapy (e.g., trastuzumab, cetuximab, etc)
			99	rt_systemic_tx99	Unknown
			ОТН	rt_systemic_txoth	Other
			Field Ann	otation: @NONEOFTHEAB	OVE=0
306	rt_systemic_tx_oth Show the field ONLY if: [rt_systemic_tx(OTH)] = '1'	Please specify what other systemic concurrent therapy was utilized. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes, Re	quired	
307	rt_technique	What was the most recent radiation technique? Check all that apply.	checkbox	(
	Show the field ONLY if: [rt_screen] = '1'		03	t_technique1502_03	2-D therapy (An external beam planning technique using 2-D imaging, such as plain film x-rays or fluoroscopic images, to define the location and size of the treatment beams.)
			1502- r	t_technique1502_04	Conformal or 3-D conformal therapy (An external beam planning technique using multiple, fixed beams shaped to conform to a defined target volume.)

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			1502- 05	rt_technique1502_05	Intensity modulated therapy (IMRT/IMPT - An external beam planning technique where the shape or energy of beams is optimized using software algorithms. Any external beam modality can be modulated but these generally refer to photon or proton beams. Intensity modulated therapy can be described as intensity modulated radiation therapy (IMRT), intensity modulated x-ray or proton therapy (IMRT), wolumetric arc therapy (VMAT) and other ways.) Stereotactic radiotherapy or radiosurgery (These approaches are sometimes described as SBRT (stereotactic body radiation), SABR (stereotactic radiosurgery), or SRT
					(stereotactic radiotherapy).)
			1502- 88-1	rt_technique1502_88_1	Brachytherapy
			1502- 88-2	rt_technique1502_88_2	Intra-operative radiation therapy
			1502- 99	rt_technique1502_99	Unknown
			1502- 98	rt_technique1502_98	Other
			Field Ar modific	nnotation: Terminology: NAA ations	CCR item #1502 with
308	rt_technique_oth Show the field ONLY if: [rt_technique(1502-98)] = '1'	Please specify what other radiation technique(s) was/were used. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes, F	Required	
309	rt_dose Show the field ONLY if: [rt_screen] = '1'	Total radiation dose in cGy. If radiation is recorded in Gy, please multiply by 100 to get cGy (e.g., 50 Gy = 5000 cGy). The conversion from "rads" to cGy is direct (1 rad = 1 cGy). If proton beam radiation is recorded in CGe units (Cobalt Gray Equivalent), multiply by 100 to get cGy (e.g., 1 CGe = 100 cGy).	text (number, Min: 50, Max: 10000) Field Annotation: Terminology: NAACCR item #1507		
310	rt_fractions Show the field ONLY if: [rt_screen] = '1'	Total number of fractions.		eger, Min: 1, Max: 50) nnotation: Terminology: NAA	CCR item #1503
311	rt_days Show the field ONLY if: [rt_screen] = '1'	Elapsed treatment days. This should be inclusive of non-treatment days. For example, if the patient is treated Monday thru Friday for four subsequent weeks, the elapsed treatment days would be 20 weekdays + 6 weekend days = 26 days.		eger, Min: 1, Max: 100) nnotation: Terminology: NAA	CCR item #1507

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312	rt_location	What was the location/site of radiation? Check all that apply.	checkbo		Drain
	Show the field ONLY if: [rt_screen] = '1'		1504- 12	rt_location1504_12	Brain
			1504- 29	rt_location1504_29	Head & Neck
			1504- 39	rt_location1504_39	Thorax
			1504- 40	rt_location1504_40	Breast
			1504- 42	rt_location1504_42	Chest Wall (following mastectomy)
			1504- 59	rt_location1504_59	Abdomen
			1504- 86	rt_location1504_86	Pelvis
			1504- 81	rt_location1504_81	Spine including the vertebral bodies
			1504- 88	rt_location1504_88	Limb
			1504- 93	rt_location1504_93	Whole body
			1504- 99	rt_location1504_99	Unknown
			1504- 98	rt_location1504_98	Other
			Field An	notation: Terminology: N	NAACCR item #1504
313	rt_location_oth	Please specify what other locations/sites were treated with radiation.	notes, R		
	Show the field ONLY if: [rt_location(1504-98)] = '1'	Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.			
314	rt_comments	Please optionally provide any additional comments about radiation	notes		
	Show the field ONLY if: [rt_screen] = '1'	therapy here. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.			
315	rt_addl	The following questions can only be answered if you have access to the	descript	ive	
	Show the field ONLY if: [rt_screen] = '1'	radiation treatment planning system.			
316	rt_volume	What was the volume of the Planning Target Volume in cc's?	text (nui	mber, Min: 0)	
	Show the field ONLY if: [rt_screen] = '1'				
317	rt_lung	Was the lung involved in the treatment field?	radio	Ī	
	Show the field ONLY if:		0 No)	
	[rt_screen] = '1'		1 Yes	S	
			99 Un	known	
318	rt_lung_v20	Volume of lung receiving 20 Gy (Lung V20 in %)	text (nui	mber, Min: 0, Max: 100)	
	Show the field ONLY if: [rt_lung] = '1'				
319	rt_lung_v5	Volume of lung receiving 5 Gy (Lung V5 in %)	text (nui	mber, Min: 0, Max: 100)	
	Show the field ONLY if: [rt_lung] = '1'				
320	rt_lung_mean_dose	Mean total lung dose (in cGy)	text (nui	mber, Min: 25, Max: 500	0)
	Show the field ONLY if: [rt_lung] = '1'				
321	rt_heart	Was the heart involved in the treatment field?	radio		
	Show the field ONLY if: [rt_screen] = '1'		0 No 1 Yes		
			99 Un	known	
322	rt_heart_v30	Volume of heart receiving 30 Gy (Heart V30 in %)	text (nui	mber, Min: 0, Max: 100)	
	Show the field ONLY if:				

323	rt_heart_mean_dose	Mean heart dose (in cGy)	text (number, Min:	25, Ma	ax: 5000)
	Show the field ONLY if: [rt_heart] = '1'					
324	prior_tx_text	Section Header: Free text entry (optional) 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	5		
325	comments_form_3	Comments Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes	5		
326	cancer_details_complete	Section Header: Form Status Complete?	0 Ir	down ncomplete Unverified Complete		
Instru	ument: Respondent details (r	respondent_details) 🛂 Enabled as survey				^ Collapse
327	ts_4	Timestamp for the respondent details form		datetime_dmy Annotation: @		uired EN @NOW_UTC
328	role	Section Header: A bit about you Are you the primary managing hematologist/oncologist?		o, Required ⁄es No		
329	practice_setting	What is your practice setting? Check all that apply.	check	kbox		
	Show the field ONLY if:		1 p	practice_setting	g1	Community Practice
	[role] = '1'		1 	oractice_settin	_	Community Hospital
			1 	practice_settin	_	University Hospital
			4 p	oractice_setting	g4	NCI designated Comprehensive Cancer Center
			1 	practice_setting	_	Other Cancer Centers
			6 p	oractice_settin	g6	Other Tertiary Center
330	role_2 Show the field ONLY if: [role] = '0'	What is your role in relationship to the patient?	1	, Required Advanced pra patient	actice p	practitioner who regularly sees
			2	Nurse who re	gularly	sees patient
				Hematology/o	oncolo	gy fellow who regularly sees
			4	Triage person	nel	
			5	Hospitalist		
			6	Intensivist		
			99	Designee of a	CCC1	9 participating institution
			7	Other		
331	other_role Show the field ONLY if: [role] = '7'	Please specify	text, l	Required		
332	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).	descr	riptive		
333	comments_form_4	Please leave any general comments here, including what if anything we can do to make the survey better.	notes	5		
334	respondent_details_complete	Section Header: Form Status Complete?	0 Ir	down ncomplete Unverified Complete		
Instru	ument: Follow-up (followup)	₽ Enabled as survey				^ Collapse
335	ts_5	Timestamp for the follow-up form		Required Annotation: @	9HIDD	EN @NOW_UTC

336	fu_weeks	How far out from initial COVID-19 diagnosis are you making this report?	radio	Approximately 30 days (1 month) after COVID-19 diagnosis
			90	Approximately 90 days (3 months) after COVID-19 diagnosis
			180	Approximately 180 days (6 months) after COVID-19 diagnosis
			365	Approximately 365 days (1 year) after COVID-19 diagnosis
			OTH	All other time intervals
337	d30_vital_status	Was the patient ALIVE at 30 days from COVID-19 diagnosis?	radio	o, Required
	Show the field ONLY if: [fu_weeks] = '30'		0	Yes the patient was alive for at least 30 days from COVID-19 diagnosis
			1	Patient was deceased within 30 days of COVID-19 diagnosis
			99	Unknown
338	d90_vital_status	Was the patient ALIVE at 90 days from COVID-19 diagnosis?	radio	o, Required
	Show the field ONLY if: [fu_weeks] = '90'		0	Yes the patient was alive for at least 90 days from COVID-19 diagnosis
			1	Patient was deceased within 90 days of COVID-19 diagnosis
			99	Unknown
339	d180_vital_status	Was the patient ALIVE at 180 days from COVID-19 diagnosis?	radio	o, Required
	Show the field ONLY if: [fu_weeks] = '180'		0	Yes the patient was alive for at least 180 days from COVID-19 diagnosis
			1	Patient was deceased within 180 days of COVID-19 diagnosis
			99	Unknown
340	d365_vital_status	Was the patient ALIVE at ONE YEAR from COVID-19 diagnosis?	radio	o, Required
	Show the field ONLY if: [fu_weeks] = '365'		0	Yes the patient was alive for at least one year from COVID-19 diagnosis
			1	Patient was deceased within one year of COVID-19 diagnosis
			99	Unknown
341	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, Max: 120), Required
342	fu_reason	What is prompting this follow-up report?	radio	o, Required
	Show the field ONLY if:		1	Hospitalization
	[fu_weeks] = 'OTH'		2	Major change in clinical status other than hospitalization
			2b	SARS-CoV-2 re-infection
			3	Death
			ОТН	H Other
343	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.	note	s
344	covid_19_status_fu	Section Header: COVID-19 follow-up details required	radio	o, Required
	_	Current COVID-19 status Fully recovered means that the patient has	1	Fully recovered
		returned to their baseline functional status and repeat SARS-CoV-2 testing, if obtained, is negative. If they are on medications to treat	1b	Recovered with complications
		sequelae or have functional compromise (e.g., impaired pulmonary	2	Ongoing infection
		function) but are not considered to have active infection, they should be considered to have recovered with complications.	3	Died
		see considered to have recovered with complications.	99	Unknown
345	days_to_death_fu_2 Show the field ONLY if: [covid_19_status_fu] = '3' or [d30_vital_status] = '1' or [d90_vital_status] = '1' or [d180_vital_status] = '1' or [d365_vital_status] = '1' or [f u_reason] = '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

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346	cause_of_death_fu Show the field ONLY if: [covid_19_status_fu] = '3' or [d30_vital_status] = '1' or [d90_vital_status] = '1' or [d180_vital_status] = '1' or [d365_vital_status] = '1' or [fu_reason] = '3' deceased_reason_fu_2 Show the field ONLY if:	To the best of your knowledge, what was the proximal cause of death? 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.	1 C 2 C 3 E 88 C 99 L	Required COVID-19 Cancer Both Other Unknown Required
	[covid_19_status_fu] = '3' or [d30_ vital_status] = '1' or [d90_vital_sta tus] = '1' or [d180_vital_status] = '1' or [d365_vital_status] = '1' or [f u_reason] = '3'	elements of dates other than year.		
348	who_ordinal_scale Show the field ONLY if: ([fu_weeks] = '30' or [fu_weeks] =	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, 1	Required Ambulatory (Not hospitalized) with no limitation of activities
	'90' or [fu_weeks] = '180' or [fu_w eeks] = '365') and [covid_19_statu s_fu] != '3' and [d30_vital_status] !	ince time social emporitor	2	Ambulatory (Not hospitalized) with limitation of activities
	= '1' and [d90_vital_status] != '1' a		3	Hospitalized, no oxygen therapy
	nd [d180_vital_status] != '1' and [d365_vital_status] != '1' and [fu_r eason] != '3'		4	Hospitalized, requiring oxygen by mask or nasal prongs
	cusonj 3		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
			UNK	Unknown
349	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. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes	
350	current_status_clinical_fu	Current clinical status	radio,	Required
	Show the field ONLY if:		0	Outpatient - No symptoms
	[covid_19_status_fu] = '2'		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
351	current_status_clinical_specify_fu Show the field ONLY if: [current_status_clinical_fu] = 'OT H'	Please specify Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes,	Required

352	worst_complications_severity_fu	Worst severity of COVID-19 complications. This answer should capture	radio	, Required	
	Show the field ONLY if:	the worst severity from the time of diagnosis to the time of this follow- up report.	0	None (patient was asymptomatic)
	[covid_19_status_fu] = '1' or [covid_19_status_fu] = '1b' or [covid_1	ир герог с	1	Mild complications (mimimal syncomplications)	nptoms from
	9_status_fu] = '2'		2	Moderate complications (moderate complications)	ate symptoms from
			3	Serious complications (symptom impact the patient's functional st physical functioning)	
			ОТН	Other	
			99	Unknown	
353	complications_severity_fu	Severity of COVID-19 complications at the time of this follow-up report.	check	box, Required	
	Show the field ONLY if:	Check all that apply.	0	complications_severity_fu0	No complications
	[covid_19_status_fu] = '1b' or [cov id_19_status_fu] = '2'		1	complications_severity_fu1	Mild complications (mimimal symptoms from complications)
			2	complications_severity_fu2	Moderate complications (moderate symptoms from complications)
			3	complications_severity_fu3	Serious complications (symptoms substantially impact the patient's functional status or disabling physical functioning)
			ОТН	complications_severity_fuoth	Other
			99	complications_severity_fu99	Unknown
354	complications_severity_oth_speci fy_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	i, Required	
355	cancer_tx_fu Show the field ONLY if: [covid_19_status_fu]!= '3' and [d3 0_vital_status]!= '1' and [d90_vital status]!= '1' and [d180_vital_stat us]!= '1' and [d365_vital_status]! = '1' and [fu_reason]!= '3'	Section Header: COVID-19 Effect on Cancer Treatment Was the patient's cancer treatment plan modified as a result of COVID- 19?	0	, Required No Yes Unknown	
356	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		
357	cancer_status_fu	Cancer status at the time of this follow-up report. If the patient has		, Required	
	Show the field ONLY if:	multiple primaries, please report on the cancer that was most recently treated.	-	Remission/NED	
	[covid_19_status_fu] != '3' and [d3 0_vital_status] != '1' and [d90_vital		l t	Active disease, responding to treat	ment
	_status] != '1' and [d180_vital_stat us] != '1' and [d365_vital_status] !		l t	Active disease, stable	
	= '1' and [fu_reason] != '3'		-	Active disease, progressing	not vot accessed
				Active disease, status unknown or i Unknown	iot yet assessed
		Carting Handam COVID 40 fellow			
358	hospice_fu	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	radio 0	No	
	Show the field ONLY if: [hospice] != '1'	but not all of these questions are optional. Since you last reported on this patient, were they transitioned to	l +	Yes	
		hospice?	l +	Unknown	
359	hospice_fu_more	Please specify why the patient was transitioned to hospice. Do not record any PHI in this field. As a reminder, this includes all elements of	notes		
	Show the field ONLY if: [hospice_fu] = '1'	dates other than year.	L		

360	hosp_status_fu	Since you last reported on this patient, were they admitted or re-	radio,	Required
		admitted to the hospital?	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
			88	Not applicable - they were admitted to the hospital at the time of the last report and remain hospitalized
			99	Unknown
			ОТН	Other
361	hosp_status_fu_more Show the field ONLY if: [hosp_status_fu] = 'OTH'	Please provide further details. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes	
362	admission_reason_fu	Was the admission related to COVID-19 or complications of COVID-19?	radio,	Required
	Show the field ONLY if:		1	Definitely related
	[hosp_status_fu] = '1' or [hosp_st		2	Possibly related
	atus_fu] = '2' or [hosp_status_fu] = '3'		3	Unrelated
			99	Unknown
363	hosp_los_fu Show the field ONLY if:	If known, how long was the length of stay, in days?	text (i	nteger, Min: 1)
364	[hosp_status_fu] = '1' hosp_los_fu_2 Show the field ONLY if:	If known, how long was the length of stay prior to transfer to the ICU, in days?	text (i	nteger, Min: 1)
	[hosp_status_fu] = '2'			
365	icu_los_fu Show the field ONLY if: [hosp_status_fu] = '2' or [hosp_st atus_fu] = '3'	If known, how long was the ICU length of stay, in days?	text (i	nteger, Min: 1)
366	current_status_fu	What is the patient's current location?	radio	
300	Show the field ONLY if:	That is the patients carrent scattering		Outpatient - follow up
	[covid_19_status_fu] != '3' and [d3		4	ER - Follow up
	0_vital_status] != '1' and [d90_vital _status] != '1' and [d180_vital_stat		5	Hospitalized (non-ICU) - new admit
	us] != '1' and [d365_vital_status] !		6	Hospitalized (non-ICU) - continued
	= '1' and [fu_reason] != '3'		7	ICU - new admit
			8	ICU - continued
			9	None - patient is deceased
			99	Unknown
			E:-I-I	Anna tations OUIDEGLIQUES 101
367	days_to_death_fu	Approximately how many days elapsed between COVID-19 diagnosis		Annotation: @HIDECHOICE='9' nteger, Min: 0), Required
307	Show the field ONLY if: [current_status_fu] = '9' or [fu_rea son] = '3'	and death? If this information is unknown to you, please enter 9999 here.		Annotation: @HIDDEN
368	cause_of_death_fu_2	To the best of your knowledge, what was the proximal cause of death?	radio,	Required
	Show the field ONLY if: [covid_19_status_fu] = '9' or [fu_re ason] = '3'		2 3 88 99	COVID-19 Cancer Both Other Unknown
360	deceased reason fu	Please provide additional details about the province cause of death. Do		Annotation: @HIDDEN
369	deceased_reason_fu Show the field ONLY if: [covid_19_status_fu] = '9' or [fu_re ason] = '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.		, Required Annotation: @HIDDEN
	i	I.	L	

		· · · · · · · · · · · · · · · · · · ·			
370	c19_complications_systemic_fu	Section Header: Additional Medical Events Please report any new complications or	checkbox, Re	quired	
		medical events that have arisen since completing the most recent form, whether or not they are clearly attributable to COVID-19 or another cause.	50960005	c19_complications_systemic_fu5096	50005 E
		Systemic events during the follow-up period. Check all that apply. If there were no additional systemic events, please check "No additional events".	67406007	c19_complications_systemic_fu6740	06007 [i
			57653000	c19_complications_systemic_fu5765	
			91302008	c19_complications_systemic_fu9130	02008
			238147009	c19_complications_systemic_fu238′	
			NONE	c19_complications_systemic_funone	e 1
			UNK	c19_complications_systemic_fuunk	
			Field Annotat	tion: Terminology: SNOMED	
371	c19_bleeding_fu	Please specify the type of bleeding. Check all that apply.	checkbox		
	Show the field ONLY if: [c19_complications_systemic_fu(5 0960005)] = '1'		112648003	c19_bleeding_fu112648003	Major bleedin (requiring multiple RBCs transfus or ICU admit)
			73099002	c19_bleeding_fu73099002	Non-ma but clini relevant bleed
			127563002	c19_bleeding_fu127563002	Minor b (withou transfus need)
			230690007- Major	c19_bleeding_fu230690007_major	CNS hemorr extension
			230690007- Minor	c19_bleeding_fu230690007_minor	CNS hemorr limited
			ОТН	c19_bleeding_fuoth	Other
			UNK	c19_bleeding_fuunk	Unknov
			Field Annotat	tion: Terminology: SNOMED-modified	
372	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		
373	dic_more_fu Show the field ONLY if: [c19_complications_systemic_fu(6 7406007)] = '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		
374	c19_comp_systemic_specify_fu Show the field ONLY if: [c19_complications_systemic_fu(2 38147009)] = '1'	Please specify other systemic events. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes		
375	o2_requirement_fu	Did the patient require supplemental O2 during the follow-up period?	radio, Requir 0 No 1 Yes 99 Unknow		

376	c19_complications_pulm_fu	Pulmonary events during the follow-up period. Check all that apply. If	checkbox, Re	equired	
		there were no additional pulmonary events, please check "No additional events".	409622000	c19_complications_pulm_fu409622000	Resp failu
			205237003	c19_complications_pulm_fu205237003	Pne
			233604007	c19_complications_pulm_fu233604007	Pne
			67782005	c19_complications_pulm_fu67782005	Acut resp distr sync (ARI
			59282003	c19_complications_pulm_fu59282003	Puln emb
			60046008	c19_complications_pulm_fu60046008	Pleu effu
			312682007	c19_complications_pulm_fu312682007	Emp
			50043002	c19_complications_pulm_fu50043002	Oth
			NONE	c19_complications_pulm_funone	No addi puln ever
			UNK	c19_complications_pulm_fuunk	Unk
			Field Annota	tion: Terminology: SNOMED	
377	resp_failure_tx_fu	Which of the following supplemental O2 interventions did the patient	radio		
	Show the field ONLY if:	require? Select the most invasive intervention required during the follow-up period.		annula or face mask with standard O2	
	[c19_complications_pulm_fu(409 622000)] = '1' or [o2_requirement			ow nasal cannula or blow-by	
	_fu] = '1'			breather	
			4 CPAP		
			5 BiPAP		
			6 Intubat		
			99 Unknov	vn	
378	berlin_yn_fu	Were the Berlin criteria formally assessed?	radio		
	Show the field ONLY if: [c19_complications_pulm_fu(677		0 No		
	82005)] = '1'		1 Yes 99 Unknow	vn/Unsure	
379	berlin_fu	Berlin criteria.The Berlin criteria are based on a decreased PaO2/FiO2	radio		
	Show the field ONLY if:	ratio:-mild ARDS: 201 - 300 mmHg (\leq 39.9 kPa)-moderate ARDS: 101 - 200 mmHg (\leq 26.6 kPa)-severe ARDS: \leq 100 mmHg (\leq 13.3 kPa)Note	1 Mild		
	[berlin_yn_fu] = '1'	that the Berlin definition requires a minimum positive end expiratory	2 Modera	ate	
		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.	3 Severe 99 Unknow	wn	
380	c19_comp_pulm_specify_fu Show the field ONLY if: [c19_complications_pulm_fu(500 43002)] = '1'	Please specify other pulmonary events. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes		

381	•							
381	c19_complications_card_fu		checkbox, Required					
		If there were no additional cardiovascular events, please check "No additional events".	45007003	c19_complications_card_fu45007003	Hypot			
			22298006	c19_complications_card_fu22298006	Myoca infarct			
			414545008	c19_complications_card_fu414545008	Other ischem			
			49436004	c19_complications_card_fu49436004	Atrial f			
			71908006	c19_complications_card_fu71908006	Ventrio fibrilla			
			698247007	c19_complications_card_fu698247007	Other arrhytl			
			85898001	c19_complications_card_fu85898001	Cardio			
			42343007	c19_complications_card_fu42343007	Conge heart f (CHF)			
			59282003	c19_complications_card_fu59282003	Pulmo embol			
			128053003	c19_complications_card_fu128053003	Deep v throm (DVT)			
			275517008	c19_complications_card_fu275517008	Superf venous throrn (SVT)			
			230690007	c19_complications_card_fu230690007	Cerebraccide stroke			
			414086009	c19_complications_card_fu414086009	Throm NOS			
			49601007	c19_complications_card_fu49601007	Other			
			NONE	c19_complications_card_funone	No add cardio			
			UNK	c19_complications_card_fuunk	Unkro			
			Field Annota	ation: Terminology: SNOMED				
382	hotn_pressors_fu	Did the patient require pressors?	radio					
	Show the field ONLY if:		0 No					
	[c19_complications_card_fu(4500 7003)] = '1'		1 Yes					
	11		99 Unkno	wn				
383	c19_comp_card_specify_fu	Please specify other cardiac events. Do not record any PHI in this field.	notes					
	Show the field ONLY if: [c19_complications_card_fu(4960 1007)] = '1' or [c19_complications _card_fu(414545008)] = '1' or [c19 _complications_card_fu(69824700 7)] = '1'	As a reminder, this includes all elements of dates other than year.						

384	c19_complications_gi_fu	Gastrointestinal events during the follow-up period. Check all that	checkbox		
		apply. If there were no additional GI events, please check "No additional events".	427044009	c19_complications_gi_fu427044009	Acute injury
			389026000	c19_complications_gi_fu389026000	Ascite
			81060008	c19_complications_gi_fu81060008	Bowel obstru
			56905009	c19_complications_gi_fu56905009	Bowel perfor
			710572000	c19_complications_gi_fu710572000	Ileus
			48661000	c19_complications_gi_fu48661000	Perito
			53619000	c19_complications_gi_fu53619000	Other
			NONE	c19_complications_gi_funone	No ad gastro events
			UNK	c19_complications_gi_fuunk	Unkno
				tion: Terminology: SNOMED CE='710572000,48661000'	
385	c19_comp_gi_specify_fu Show the field ONLY if: [c19_complications_gi_fu(536190 00)] = '1'	Please specify other GI events. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes		
386	c19_complications_other_fu	Other events during the follow-up period. Check all that apply. If there	checkbox, Re	equired	
	- ,	were no additional other events, please check "No additional events".	14669001	c19_complications_other_fu1466900	01 Ac kid inj
			91175000	c19_complications_other_fu9117500	
			372070002	c19_complications_other_fu3720700	
			414086009	c19_complications_other_fu4140860	009 Th
			362965005	c19_complications_other_fu3629650	05 Ot
			NONE	c19_complications_other_funone	No ad ev
			UNK	c19_complications_other_fuunk	Ur
			Field Annota '372070002,4	tion: Terminology: SNOMED @HIDECHOI 414086009'	CE =
387	c19_complications_oth_specify_fu Show the field ONLY if: [c19_complications_other_fu(362 965005)] = '1'	Please specify other events. Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes		
388	c19_addl_treatment	Section Header: COVID-19 Additional Treatment	radio		
		Did the patient receive any additional treatments for COVID-19 or its sequelae?	0 No		
		Sequeiae:	1 Yes 99 Unknow	wn	
389	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		

390	covid_19_treatment_fu	Additional COVID-19 treatment. Check all that apply.	checkbox		
	Show the field ONLY if:		DB-15718	covid_19_treatment_fudb_15718	Bá
	[c19_addl_treatment] = '1'		Bam-Et	covid_19_treatment_fubam_et	Ва
			REGEN-COV2	covid_19_treatment_furegen_cov2	C
			RXCUI- 2550731	covid_19_treatment_furxcui_2550731	Sp
			OMOP4873974	covid_19_treatment_fuomop4873974	Re
			HO-45523	covid_19_treatment_fuho_45523	Sy (w
			B05AX03	covid_19_treatment_fub05ax03	Sy: (wi de Pla ind pla
			RXCUI-2393	covid_19_treatment_furxcui_2393	Ch
			RXCUI-5521	covid_19_treatment_furxcui_5521	Hy (Pl
			HO-44995	covid_19_treatment_fuho_44995	An
			ATC-J05AE08	covid_19_treatment_fuatc_j05ae08	At
			ATC-J05AR10	covid_19_treatment_fuatc_j05ar10	Lo
			RXCUI-260101	covid_19_treatment_furxcui_260101	Qs
			RXCUI-18631	covid_19_treatment_furxcui_18631	Az (Zi
			ATC-C10AA	covid_19_treatment_fuatc_c10aa	Sta
			RXCUI-612865	covid_19_treatment_furxcui_612865	То
			RXCUI-42355	covid_19_treatment_furxcui_42355	Flu
			L04AA37	covid_19_treatment_ful04aa37	Ва
			ATC-L04AC	covid_19_treatment_fuatc_l04ac	Ot inl
			HO-45861	covid_19_treatment_fuho_45861	ad JAI for
			ATC-L04AB	covid_19_treatment_fuatc_l04ab	TN pro
			B01A	covid_19_treatment_fub01a	An
			N02BA	covid_19_treatment_fun02ba	
			B01AC	covid_19_treatment_fub01ac	As An th
			233573008	covid_19_treatment_fu233573008	Ex ox
			714749008	covid_19_treatment_fu714749008	ox Cc re (C
			OTH	covid_19_treatment_fuoth	Ct
			UNK	covid_19_treatment_fuunk	Ur
			NONE	covid_19_treatment_funone	No
			oth_plasma	covid_19_treatment_fuoth_plasma	DE
			@HIDECHOICE='d	MOP/RxNorm/SNOMED hth_plasma,RXCUI-2393,ATC-J05AE08,ATC- 60101,ATC-L04AC,ATC-L04AB,HO-	
391	dx_cp_interval_fu Show the field ONLY if: ([covid_19_trial_x(B05AX03)] = '0' or [covid_19_trial_tx(B05AX03)] = ") and [covid_19_treatment(B05A X03)] = '0' and [covid_19_treatme nt_fu(B05AX03)] = '1'	How many days elapsed between the COVID-19 diagnosis and the first convalescent plasma infusion? If the patient was infused on the same day as their diagnosis, enter 0 here. If you do not know the answer, enter 9999 here.	text (integer)		

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392	steroid_type_fu	Steroid type. Check all that apply.	chec	kbox			-
	Show the field ONLY if: [covid_19_treatment_fu(HO-4552		H02	2AB02	steroid_type_fuh02ab02	Dexam (Decad	nethasone Iron)
	3)] = '1'		H02	2AB09		Hydrod (Cortef	cortisone
			H02	2AB04	steroid_type_fuh02ab04	Methyl (Solum	lprednisolone nedrol)
			H02	2AB06	steroid_type_fuh02ab06	Predni	solone
			H02	2AB07	steroid_type_fuh02ab07	Predni	sone
			Field	Annot	ation: Terminology: ATC		
393	steroid_specific_fu	Steroid dosing, in prednisone dose equivalents Note: 3 mg of dexamethasone is equivalent to 20 mg of prednisone, so any dose of	radio				
	Show the field ONLY if: [covid_19_treatment_fu(HO-4552	dexamethasone of more than 3 mg/day (21 mg/week) would be	1		/day or below [low dose]		
	3)] = '1'	equivalant to more than 20 mg of prednisone/day.	1a		/day or below [low dose]		
			1b		than 10 mg/day up to 20 mg/o		
			2		than 20 mg/day but less than		g/day
			3	Equal	to or greater than 1 mg/kg/da	ау	
			99	Unkno	own		
			Field	l Annota	ation: @HIDECHOICE='1'		
394	steroid_more_fu	Please provide more details: prednisone dose equivalents (e.g., 1	note	s			
	Show the field ONLY if: [covid_19_treatment_fu(HO-4552 3)] = '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.					
395	c19_aspirin_dose_fu	Aspirin dosing	radio)			
	Show the field ONLY if:		262	459003	Low dose (less than 200 mg	g/day)	
	[covid_19_treatment_fu(N02BA)]		261	829003	Full dose		
	= '1'		261	665006	Unknown		
			Field	l Annota	ation: Terminology: SNOMED		
396	c19_anticoag_type_fu	Which anticoagulants were used? Check all that apply.	chec	kbox			
	Show the field ONLY if: [covid_19_treatment_fu(B01A)] = '1'		B01	AA	c19_anticoag_type_fub01a	а	/itamin K intagonists e.g., warfarin)
			B01	AB	c19_anticoag_type_fub01a	(e	.ow-molecula veight heparir e.g., enoxaparin Lovenox])
			B01	AB01	c19_anticoag_type_fub01a		Jnfractionated neparin
			B01	AE	c19_anticoag_type_fub01a	t ii a	Direct hrombin nhibitors (e.g. Irgatroban, Iabigatran Pradaxa])
			B01	AF	c19_anticoag_type_fub01a	x (([r	Direct factor (a inhibitors e.g., apixaban Eliquis], ivaroxaban Xarelto])
			B01	AX05	c19_anticoag_type_fub01a	x05 F	ondaparinux
			UN	К	c19_anticoag_type_fuunk	ι	Jnknown
			OTI	1	c19_anticoag_type_fuoth	C	Other
397	c19_anticoag_type_oth_specify_fu	Please specify Do not record any PHI in this field. As a reminder, this	note	S		1	
	Show the field ONLY if:	includes all elements of dates other than year.					
	[c19_anticoag_type_fu(OTH)] = '1'						

398	c19_anticoag_reason_fu	What was the purpose of the anticoagulant treatment? Check all that	checkb	OX		
390	Show the field ONLY if: [covid_19_treatment_fu(B01A)] = '1'	apply.	1	c19_anticoag_reason_fu1	Prophylad (without to presence either as inpatient outpatier	the of a VTE an or
			2	c19_anticoag_reason_fu2	Therapeu (for know ATE histo	n VTE or
			2a	c19_anticoag_reason_fu2a	Therapeu (for know diagnosis	n VTE
			2b	c19_anticoag_reason_fu2b	Therapeu (for know diagnosis	n ATE
			2c	c19_anticoag_reason_fu2c	Therapeu the abser thrombos for preve stroke in fibrillation	nce of any sis (e.g., ntion of atrial
			3	c19_anticoag_reason_fu3	For DIC d hospitaliz	- 11
			UNK	c19_anticoag_reason_fuunk	Unknown	ı
			OTH	c19_anticoag_reason_fuoth	Other	
			Eiold A	nnotation: @HIDECHOICE='2'		
399	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			
400	covid_19_tx_interleukin_fu	Interleukin inhibitor treatment other than tocilizumab. Check all that	checkb	ox		
	Show the field ONLY if:	apply.	L04AC	covid_19_tx_interleukin_fu_	_l04ac03	anakinra
	[covid_19_treatment_fu(ATC-L04A C)] = '1'		L04AC	covid_19_tx_interleukin_fu_	l04ac02	basiliximab
			L04AC	covid_19_tx_interleukin_fu_	l04ac09	briakinumak
			L04AC	covid_19_tx_interleukin_fu_	l04ac12	brodalumab
			L04AC	covid_19_tx_interleukin_fu_	l04ac08	canakinuma
			L04AC	covid_19_tx_interleukin_fu_	l04ac01	daclizumab
			L04AC	covid_19_tx_interleukin_fu_	l04ac16	guselkumab
			L04AC	covid_19_tx_interleukin_fu_	l04ac13	ixekizumab
			L04AC	covid_19_tx_interleukin_fu_	l04ac04	rilonacept
			L04AC	covid_19_tx_interleukin_fu_	l04ac18	risankizuma
			L04AC	covid_19_tx_interleukin_fu_	l04ac14	sarilumab
			L04AC	covid_19_tx_interleukin_fu_	l04ac10	secukinuma
			L04AC	covid_19_tx_interleukin_fu_	l04ac11	siltuximab
			L04AC	covid_19_tx_interleukin_fu_	l04ac15	sirukumab
			L04AC	covid_19_tx_interleukin_fu_	l04ac17	tildrakizuma
			L04AC	covid_19_tx_interleukin_fu_	l04ac07	DEPRECATE
			L04AC	covid_19_tx_interleukin_fu_	l04ac05	ustekinuma
			Field A	nnotation: Field:ATC L04AC; Valu	es:ATC @H	IIDDEN

401	jak_fu	JAK inhibitor treatment. Check all that apply.	checkbox			
401	Show the field ONLY if: [covid_19_treatment_fu(HO-4586	ow the field ONLY if:		jak_ful01xe18	Ruxolitinib (Jakafi)	
	1)] = '1'		L04AA29	jak_ful04aa29	Tofacitinib (Xeljanz)	
			RXCUI- 1487006	jak_furxcui_1487006	Oclacitinib	
			L04AA37	jak_ful04aa37	Baricitinib	
			Peficitinib	jak_fupeficitinib	Peficitinib	
			L01XE57	jak_ful01xe57	Fedratinib (Inrebic)	
			L04AA44	jak_ful04aa44	Upadacitinib	
			Field Annotation: Terminologies: ATC, RxNorm @HI			
402	covid_19_tx_tnf_fu	= = = : ' '	checkbox			
	Show the field ONLY if:	apply.	L04AB04 co	ovid_19_tx_tnf_ful04ab04	Adalimumab	
	[covid_19_treatment_fu(ATC-L04A B)] = '1'		L04AB03 co	ovid_19_tx_tnf_ful04ab03	Afelimomab	
			L04AB05 co	ovid_19_tx_tnf_ful04ab05	Certolizumab pegol	
			L04AB01 co	ovid_19_tx_tnf_ful04ab01	Etanercept	
			L04AB06 co	ovid_19_tx_tnf_ful04ab06	Golimumab	
			L04AB02 co	ovid_19_tx_tnf_ful04ab02	Infliximab	
			L04AB07 covid_19_tx_tnf_ful04ab07 Opinercept			
			Field Annotat	ion: Field:ATC L04AB; Values:	ATC @HIDDEN	
403	covid_19_treatment_trial_fu	Was any of the additional COVID-19 treatment given as part of a clinical	radio			
	Show the field ONLY if: [c19_addl_treatment] = '1'	trial?	0 No 1 Yes			
			99 Unknow	vn		

	Show the field ONLY if: [covid_19_treatment_trial_fu] = '1'	know which drug(s) were given on clinical trial, please check "Unknown". If you are not able to disclose drug names due to institutional restrictions, please check "Other".	DB-15718 Bam-Et	covid_19_trial_tx_fudb_15718	Bamla
]	[covid_19_treatment_trial_fu] = '1'		Bam-Et		
				covid_19_trial_tx_fubam_et	Bamla
			REGEN-COV2	covid_19_trial_tx_furegen_cov2	Casiri
			RXCUI- 2550731	covid_19_trial_tx_furxcui_2550731	Sotro
			RXCUI-2393	covid_19_trial_tx_furxcui_2393	Chlore
			RXCUI-5521	covid_19_trial_tx_furxcui_5521	Hydro (Placu
			HO-44995	covid_19_trial_tx_fuho_44995	Anti-v
			ATC-J05AE08	covid_19_trial_tx_fuatc_j05ae08	Ataza
			ATC-J05AR10	covid_19_trial_tx_fuatc_j05ar10	Lopin
			RXCUI-260101	covid_19_trial_tx_furxcui_260101	Oselta
			OMOP4873974	covid_19_trial_tx_fuomop4873974	Remd
			RXCUI-18631	covid_19_trial_tx_furxcui_18631	Azithr (Zithr
			HO-45523	covid_19_trial_tx_fuho_45523	Syster
			ATC-C10AA	covid_19_trial_tx_fuatc_c10aa	Statin
			L04AC03	covid_19_trial_tx_ful04ac03	anakii
			L04AA37	covid_19_trial_tx_ful04aa37	Baridi
			L04AC02	covid_19_trial_tx_ful04ac02	basilix
			L04AC09	covid_19_trial_tx_ful04ac09	briaki
			L04AC12	covid_19_trial_tx_ful04ac12	broda
			L04AC08	covid_19_trial_tx_ful04ac08	canak
			L04AC01	covid_19_trial_tx_ful04ac01	dacliz
			L04AC16	covid_19_trial_tx_ful04ac16	gusell
			L04AC13	covid_19_trial_tx_ful04ac13	ixekiz
			L04AC04	covid_19_trial_tx_ful04ac04	rilona
			L04AC18	covid_19_trial_tx_ful04ac18	risank
			L04AC14	covid_19_trial_tx_ful04ac14	sarilu
			L04AC10	covid_19_trial_tx_ful04ac10	secuk
			L04AC11	covid_19_trial_tx_ful04ac11	siltuxi
			L04AC15	covid_19_trial_tx_ful04ac15	siruku
			L04AC17	covid_19_trial_tx_ful04ac17	tildral
			L04AC07	covid_19_trial_tx_ful04ac07	tociliz
			RXCUI-42355	covid_19_trial_tx_furxcui_42355	Fluvo
			L04AC05	covid_19_trial_tx_ful04ac05	usteki
			L04AB04	covid_19_trial_tx_ful04ab04	adalin
			L04AB03	covid_19_trial_tx_ful04ab03	afelim
			L04AB05	covid_19_trial_tx_ful04ab05	certol
			L04AB01	covid_19_trial_tx_ful04ab01	etane
			L04AB06	covid_19_trial_tx_ful04ab06	golim
			L04AB02	covid_19_trial_tx_ful04ab02	inflixii
			L04AB07	covid_19_trial_tx_ful04ab07	opine
			OTH-plasma	covid_19_trial_tx_fuoth_plasma	Plasm individ plasm
			B05AX03	covid_19_trial_tx_fub05ax03	Plasm
			OTH	applied 40 total to 50 miles	plasm
			OTH	covid_19_trial_tx_fuoth	Other
			UNK Field Apparations	covid_19_trial_tx_fuunk	Unkno
			Field Annotation: ATC/HemOnc/ON	Terminologies: MOP/RxNorm @HIDDEN	

405	dx_cp_interval_fu_2 Show the field ONLY if: ([covid_19_trial_tx(B05AX03)] = '0' or [covid_19_trial_tx(B05AX03)] = ") and [covid_19_treatment(B05A X03)] = '0' and [covid_19_treatme nt_fu(B05AX03)] = '0' and [covid_1 9_trial_tx_fu(B05AX03)] = '1'	How many days elapsed between the COVID-19 diagnosis and the first convalescent plasma infusion? If the patient was infused on the same day as their diagnosis, enter 0 here. If you do not know the answer, enter 9999 here.	text (integer) Field Annotation: @HIDDEN					
406	covid_19_trial_more_fu Show the field ONLY if: [covid_19_treatment_trial_fu] = '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					
407	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					
408	comments_form_5	Comments Do not record any PHI in this field. As a reminder, this includes all elements of dates other than year.	notes					
409	followup_complete	Section Header: Form Status Complete?	1 U	lown acomplete nverified omplete				
Instrument: Manual Exclude (manual_exclude)								
410	manual_exclude	Field to manually exclude records identified as needing exclusion (e.g., false positive PCR)	l 	alse rue alse				
			Field Annotation: @DEFAULT='0'					
411	exclude_why	Why was the patient excluded?		Required				
	Show the field ONLY if: [manual_exclude] = '1'		l	Duplicate record in situ solid malignancy				
	[l 	Non-melanoma skin cancer, non-invasive				
			l — -	Precursor hematologic condition				
			l 	Benign hematologic condition				
			l 	False positive SARS-CoV-2 test				
			l 	Low quality score, non-CCC19 site				
			l 	Cancer diagnosed after COVID-19				
			l 	Other				
			99 l	Jnknown				
412	manual_exclude_more	Why was patient manually excluded?	notes					
413	exclude_confirm_date	Date that confirmatory query was sent	text (date_dmy)					
414	exclude_confirm_result	Site response to confirmatory query	radio 1 Agree 2 Disagree 3 Pending					
415	manual_exclude_complete	Section Header: Form Status Complete?	dropdown 0 Incomplete 1 Unverified 2 Complete					