UniGE
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Hospital based surveillance of COVID-19 cases in Switzerland {BASEC 2020-00827} [2020]   PID 125

📖 Codebook ▾

📖 Data Dictionary Codebook

16.01.2023 17:38

⌃ Collapse all instruments

#	Variable / Field Name	Field Label *Field Note*	Field Attributes (Field Type, Validation, Choices, Calculations, etc.)
Instrument: **Inclusion** (inclusion)			⌃ Collapse
1	record_id	Record ID (patient identifier)	text
2	episode_extra	Section Header: *Hospital based surveillance of COVID-19 cases in Switzerland Patient-level information Each new record is a distinct COVID-19 Episode related to a patient. In case a specific patient undergoes more than one episode, please create a new record to report each additional episode.* Is this another COVID-19 episode from a same patient ?	radio, Required 0 — No (this is the patient's first episode) 1 — Yes (the first episode record has been already reported) -1 — Still to be confirmed Custom alignment: LV
3	episode_first_id Show the field ONLY if: [episode_extra] = '1'	ID of first episode of this patient ID is the number on the right of the full CenterID-ID identifier, e.g. 123-456 *[0-9999]*	text (integer, Min: 0, Max: 9999), Required Custom alignment: RH

#	Variable / Field Name	Field Label	Field Attributes
4	episode_first_center_2 Show the field ONLY if: [episode_extra] = '1'	Center (or consortium) where the first episode was created *your current center: [user-dag-label]*	dropdown, Required 114 CHUV (Lausanne) 112 EOC (Lugano) 136 HFR (Fribourg) 161 Hirslanden AG ZH (Zurich) 113 Hopital VS (Sion) 110 HUG (Geneva) 117 Inselspital (Bern) 120 KISPI (Basel) 116 KISPI (Zurich) 137 KSA (Aarau) 133 KSGR (Graubuenden) 166 KSNW (Niedwalden) 111 KSSG (St.Gallen) & consortium 138 KSW (Winterthur) 140 LUKS (Luzern) 134 OKS (St.Gallen) 141 Spitaeler SH (Schaffhausen) 150 STGAG KSM (Muensterlingen) 119 USB (Basel) 115 USZ (Zurich) Custom alignment: RH
5	inclusion_hospital24h	Section Header: *Checking inclusion criteria* Hospitalised for more than 24 hours	yesno, Required 1 Yes 0 No Custom alignment: RH
6	inclusion_covid	Laboratory-confirmed COVID-19 diagnosis	yesno, Required 1 Yes 0 No Custom alignment: RH
7	inclusion_confirmed Show the field ONLY if: [inclusion_hospital24h] = '1' and [inclusion_covid] = '1'	Section Header: *Patient's inclusion* Confirm inclusion ?	checkbox, Required 1 inclusion_confirmed___1 Yes (include patient) Custom alignment: RH
8	inclusion_date Show the field ONLY if: [inclusion_confirmed(1)] = '1'	Inclusion date	text (date_dmy, Min: 2020-01-01), Required Custom alignment: RH
9	inclusion_userid	ID of user checking the inclusion	text, Required Field Annotation: @USERNAME
10	form_time_inclusion	Current date *(last date form is saved)*	sql SELECT curdate()
11	inclusion_complete	Section Header: *Form Status* Complete?	dropdown 0 Incomplete 1 Unverified 2 Complete
	Instrument: **Demography** (demography)		⌃ Collapse
12	birth_year	Section Header: *Demography* Year of birth	text (integer, Min: 1900), Required

13	toddler Show the field ONLY if: [birth_year] >= 2014	Is the patient 6 years old or less ?	radio, Required 0 No 1 Yes
14	toddler_birthmonth Show the field ONLY if: [toddler] = '1'	Birth Month	text (integer, Min: 1, Max: 12), Required Field Annotation: [1-12]
15	gender	Gender	radio, Required 1 Male 2 Female 3 Other Custom alignment: RH
16	dummy_5	Height, Weight and BMI will be evaluated during each individual hospitalisation event *[cm]*	descriptive
17	demography_complete	Section Header: *Form Status* Complete?	dropdown 0 Incomplete 1 Unverified 2 Complete

Instrument: **Case Declaration** (case_declaration)			⌃ Collapse
18	symptoms_date	Starting date of COVID-19 symptoms	text (date_dmy, Min: 2020-01-01)
19	case_classification	Section Header: *Exposure factors* Type of exposure	radio, Required 1 Community acquired 2 Nosocomial (> 5 days) -1 Unknown
20	community_location Show the field ONLY if: [case_classification] = '1' and [birth_year] > 2002	Where was the patient contaminated?	radio, Required 1 Household 2 School / Kindergarten /Daycare -1 Unknown
21	exposure_empl_health Show the field ONLY if: [birth_year] <= 2002	Employed in a healthcare facility at time of infection?	radio, Required 0 No 1 Yes -1 Unknown
22	exposure_empl_lab Show the field ONLY if: [birth_year] <= 2002	Employed in a microbiology laboratory at time of infection?	radio, Required 0 No 1 Yes -1 Unknown
23	sample_datetime	Section Header: *Sample* Date and time of lab sample collection	text (datetime_dmy, Min: 2020-01-01 00:00), Required
24	sample_datetime_estimated	...check if date/time of sample may NOT be exact *optional*	radio 0 exact date and time 1 exact date / estimated time 2 estimated date and time

25	sample_type	Type of sample	radio, Required
			1 Nasal swab
			2 Throat swab
			3 Nasopharyngeal swab
			4 Tracheal aspiration
			5 Broncho-alveolar lavage
			99 Other…
26	sample_type_other Show the field ONLY if: [sample_type] = '99'	…please, specify sample type	text, Required Custom alignment: RH
27	sample_service	In which service was the sample taken ?	radio, Required
			1 Medicine
			2 Geriatrics
			3 Intensive Care
			4 Surgery
			5 Paediatrics
			6 Emergency Room
			99 Other…
28	sample_service_other Show the field ONLY if: [sample_service] = '99'	…please, specify where the sample was taken	text, Required Custom alignment: RH
29	sample_confirm_meth	Laboratory confirmation method	radio, Required
			1 RT-PCR
			99 Other…
30	sample_confirm_meth_other Show the field ONLY if: [sample_confirm_meth] = '99'	…please, specify confirmation method	text, Required Custom alignment: RH
31	sample_another	Was there another sample taken for laboratory testing?	radio, Required
			0 No
			1 Yes
32	sample_datetime_2 Show the field ONLY if: [sample_another] = '1'	Section Header: *Second sample* Date and time of lab sample collection	text (datetime_dmy, Min: 2020-01-01 00:00), Required
33	sample_datetime_estimated_2 Show the field ONLY if: [sample_another] = '1'	…check if date/time of sample may NOT be exact *optional*	radio
			0 exact date and time
			1 exact date / estimated time
			2 estimated date and time
34	sample_type_2 Show the field ONLY if: [sample_another] = '1'	Type of sample	radio, Required
			1 Nasal swab
			2 Throat swab
			3 Nasopharyngeal swab
			4 Tracheal aspiration
			5 Broncho-alveolar lavage
			99 Other…
35	sample_type_other_2 Show the field ONLY if: [sample_type_2] = '99'	…please, specify sample type	text, Required Custom alignment: RH

36	sample_service_2 Show the field ONLY if: [sample_another] = '1'	In which service was the sample taken ?	radio, Required 	1	Medicine
2	Geriatrics
3	Intensive Care
4	Surgery
5	Paediatrics
6	Emergency Room
99	Other...	
37	sample_service_other_2 Show the field ONLY if: [sample_service_2] = '99'	...please, specify where the sample was taken	text, Required Custom alignment: RH
38	sample_confirm_meth_2 Show the field ONLY if: [sample_another] = '1'	Laboratory confirmation method	radio, Required | 1	RT-PCR
99	other...	
39	sample_confirm_meth_other_2 Show the field ONLY if: [sample_confirm_meth_2] = '99'	...please, specify confirmation method	text, Required Custom alignment: RH
40	sample_result_2 Show the field ONLY if: [sample_another] = '1'	Laboratory test result	radio, Required | 1	Positive
2	Negative	
41	sample_another_2 Show the field ONLY if: [sample_another] = '1'	Was there another sample taken for laboratory testing?	radio, Required | 0	No
1	Yes	
42	sample_datetime_3 Show the field ONLY if: [sample_another_2] = '1'	Section Header: *Third sample* Date and time of lab sample collection	text (datetime_dmy, Min: 2020-01-01 00:00), Required
43	sample_datetime_estimated_3 Show the field ONLY if: [sample_another_2] = '1'	...check if date/time of sample may NOT be exact *optional*	radio | 0	exact date and time
1	exact date / estimated time
2	estimated date and time	
44	sample_type_3 Show the field ONLY if: [sample_another_2] = '1'	Type of sample	radio, Required | 1	Nasal swab
2	Throat swab
3	Nasopharyngeal swab
4	Tracheal aspiration
5	Broncho-alveolar lavage
99	Other...	
45	sample_type_other_3 Show the field ONLY if: [sample_type_3] = '99'	...please, specify sample type	text, Required Custom alignment: RH
46	sample_service_3 Show the field ONLY if: [sample_another_2] = '1'	In which service was the sample taken ?	radio, Required | 1	Medicine
2	Geriatrics
3	Intensive Care
4	Surgery
5	Paediatrics
6	Emergency Room
99	Other...	

47	sample_service_other_3 Show the field ONLY if: [sample_service_3] = '99'	...please, specify where the sample was taken	text, Required Custom alignment: RH
48	sample_confirm_meth_3 Show the field ONLY if: [sample_another_2] = '1'	Laboratory confirmation method	radio, Required 1 | RT-PCR 99 | Other...
49	sample_confirm_meth_other_3 Show the field ONLY if: [sample_confirm_meth_3] = '99'	...please, specify confirmation method	text, Required Custom alignment: RH
50	sample_result_3 Show the field ONLY if: [sample_another_2] = '1'	Laboratory test result	radio, Required 1 | Positive 2 | Negative
51	sample_another_3 Show the field ONLY if: [sample_another_2] = '1'	Was there another sample taken for laboratory testing?	radio, Required 0 | No 1 | Yes
52	sample_datetime_4 Show the field ONLY if: [sample_another_3] = '1'	Section Header: *Fourth sample* Date and time of lab sample collection	text (datetime_dmy, Min: 2020-01-01 00:00), Required
53	sample_datetime_estimated_4 Show the field ONLY if: [sample_another_3] = '1'	...check if date/time of sample may NOT be exact *optional*	radio 0 | exact date and time 1 | exact date / estimated time 2 | estimated date and time
54	sample_type_4 Show the field ONLY if: [sample_another_3] = '1'	Type of sample	radio, Required 1 | Nasal swab 2 | Throat swab 3 | Nasopharyngeal swab 4 | Tracheal aspiration 5 | Broncho-alveolar lavage 99 | Other...
55	sample_type_other_4 Show the field ONLY if: [sample_type_4] = '99'	...please, specify sample type	text, Required Custom alignment: RH
56	sample_service_4 Show the field ONLY if: [sample_another_3] = '1'	In which service was the sample taken ?	radio, Required 1 | Medicine 2 | Geriatrics 3 | Intensive Care 4 | Surgery 5 | Paediatrics 6 | Emergency Room 99 | Other...
57	sample_service_other_4 Show the field ONLY if: [sample_service_4] = '99'	...please, specify where the sample was taken	text, Required Custom alignment: RH
58	sample_confirm_meth_4 Show the field ONLY if: [sample_another_3] = '1'	Laboratory confirmation method	radio, Required 1 | RT-PCR 99 | Other...

59	sample_confirm_meth_other_4 Show the field ONLY if: [sample_confirm_meth_4] = '99'	...please, specify confirmation method	text, Required Custom alignment: RH
60	sample_result_4 Show the field ONLY if: [sample_another_3] = '1'	Laboratory test result	radio, Required 1 Positive 2 Negative
61	case_declaration_complete	Section Header: *Form Status* Complete?	dropdown 0 Incomplete 1 Unverified 2 Complete

Instrument: **Admission** (admission)   ^ Collapse

62	event_same_confirmed Show the field ONLY if: [previous-instance] > '0'	Please confirm that the patient is rehospitalised following complications of this same COVID-19episode!	checkbox, Required 1 event_same_confirmed___1 | same COVID-19 episode
63	hospital_entry_date	Entry date in the hospital	text (date_dmy, Min: 2020-01-01), Required
64	hospitalised_in	Section Header: *Patient's admission* Where was the patient hospitalised ?	radio, Required 1 Medicine 2 Geriatrics 3 Intensive Care 4 Surgery 5 Paediatrics 6 Emergency Room 99 Other...
65	hospitalised_in_other Show the field ONLY if: [hospitalised_in] = '99'	...please, specify where he/she has been diagnosed	text, Required Custom alignment: RH
66	hospitalised_in_covidspe	Was the patient hospitalised in an unit dedicated to COVID-19)	radio, Required 0 No 1 Yes -1 Unknown
67	consort_subsid_hsopital	[Only applicable for hospital consortia] If admission didn't occur in the main hospital of your consortium, please provide the ID of the subsidiary hospital in your consortium *(optional)*	dropdown 2 2 3 3 4 4 5 5 6 6 7 7 8 8 9 9
68	hospitalised_in_other_code	...code of Unit/Building *optional*	text Custom alignment: RH
69	hospitalised_origin	Origin (pre-hospitalisation)	radio, Required 1 Domicile 2 Long term care 3 Other hospital 99 Other...

70	hospitalised_origin_other Show the field ONLY if: [hospitalised_origin] = '99'	...please, specify origin	text, Required Custom alignment: RH
71	hospitalised_consult	Was the patient in contact with a healthcare personnel prior to hospitalisation (by phone or consultation) ?	radio, Required 	1	Yes
0	No
-1	Unknown	
72	height	Section Header: *Height and Weight during hospitalisation* Height previously reported height (if applicable): [height][previous-instance] *[cm]*	text (integer, Min: 20, Max: 230) Field Annotation: @DEFAULT='[height][previous-instance]'
73	weight	Weight *[kg]*	text (number, Min: 1.0, Max: 150.0)
74	bmi	BMI *[kg/m2]*	calc Calculation: [weight]*10000 / ([height]*[height])
75	obesity	Obesity	radio, Required 	0	No
1	Yes
-1	Unknown	 Custom alignment: RH
76	dummy_10 Show the field ONLY if: ([obesity] = '1' and [bmi] <= 30) or ([obesity] = '0' and [bmi] > 30)	This is only a warning message: the BMI calculation and obesity status do not match. Please check the given values. Note that the WHO classification based on BMI is lacking subtleties, so this warning is only present to raise awareness on a possible error. It does not imply that there is indeed an error.	descriptive
77	severity Show the field ONLY if: [demo_and_case_decl_arm_1][birth_year] <= 2002	Section Header: *Symptoms* Severity (CURB-65 score)	checkbox, Required | 1	severity___1	Confusion (abbreviated Mental Test Score < 9)
2	severity___2	Urea (BUN > 19 mg/dL or 7 mmol/L)
3	severity___3	Respiratory rate > 30 per minute
4	severity___4	Blood pressure: diastolic < 60 or systeolic < 90 mmHg
5	severity___5	Age >= 65 years
88	severity___88	None of the above	
78	severity_children Show the field ONLY if: [demo_and_case_decl_arm_1][birth_year] > 2002	Severity (for children)	checkbox, Required | 1	severity_children___1	Respiratory distress
2	severity_children___2	Oxygen saturation < 92%
3	severity_children___3	Evidence of severe clinical dehydration or clinical shock
4	severity_children___4	Altered conscious level
88	severity_children___88	None of the above	
79	curb_65_score	Total score (each choice counts for 1) *0-1 points: low risk >1 points: high risk*	calc Calculation: sum([severity(1)],[severity(2)],[severity(3)], [severity(4)],[severity(5)],[severity_children(1)], [severity_children(2)],[severity_children(3)], [severity_children(4)])

80	symptoms_children	Additional symptoms	checkbox, Required
	Show the field ONLY if: [demo_and_case_decl_arm_1][birth_year] > 2002		1 symptoms_children___1 Cough 2 symptoms_children___2 Rhinitis 3 symptoms_children___3 Diarrhoea 4 symptoms_children___4 Fever 88 symptoms_children___88 None of the above
81	symptoms_temp Show the field ONLY if: [symptoms_children(4)] = '1'	What was the highest temperature recorded? *in degrees celsius*	text (number, Min: 30, Max: 50), Required
82	admission_complete	Section Header: *Form Status* Complete?	dropdown 0 Incomplete 1 Unverified 2 Complete

Instrument: **Clinical Complementary Information** (clinical_complementary_information)	⌃ Collapse

83	comorbidity_good_health	Section Header: *Co-morbidities* Usual good health (no co-morbidities)	radio, Required 0 No 1 Yes Custom alignment: LH
84	com_respiratory Show the field ONLY if: [comorbidity_good_health] = '0'	Chronic respiratory disease	radio, Required 0 No 1 Yes -1 Unknown Custom alignment: RH
85	com_respiratory_specify Show the field ONLY if: [com_respiratory] = '1' and [demo_and_case_decl_arm_1][birth_year] > 2002	... please specify	text, Required Custom alignment: RH
86	com_asthma Show the field ONLY if: [comorbidity_good_health] = '0'	Asthma	radio, Required 0 No 1 Yes -1 Unknown Custom alignment: RH
87	com_diabetes Show the field ONLY if: [comorbidity_good_health] = '0'	Diabetes	radio, Required 0 No 1 Yes -1 Unknown Custom alignment: RH
88	com_hypertension Show the field ONLY if: [comorbidity_good_health] = '0'	Hypertension	radio, Required 0 No 1 Yes -1 Unknown Custom alignment: RH

89	com_cardiovascular Show the field ONLY if: [comorbidity_good_health] = '0'	Chronic cardiovascular disease	radio, Required 0 No 1 Yes -1 Unknown Custom alignment: RH
90	com_renal Show the field ONLY if: [comorbidity_good_health] = '0'	Chronic renal disease	radio, Required 0 No 1 Yes -1 Unknown Custom alignment: RH
91	com_liver Show the field ONLY if: [comorbidity_good_health] = '0'	Chronic liver disease	radio, Required 0 No 1 Yes -1 Unknown Custom alignment: RH
92	com_neuro_impair Show the field ONLY if: [comorbidity_good_health] = '0'	Chronic neurological impairment	radio, Required 0 No 1 Yes -1 Unknown Custom alignment: RH
93	com_hemato_immuno Show the field ONLY if: [comorbidity_good_health] = '0'	Hematological pathology with immuno-suppression	radio, Required 0 No 1 Yes -1 Unknown Custom alignment: RH
94	com_oncology Show the field ONLY if: [comorbidity_good_health] = '0'	Oncological pathologies	radio, Required 0 No 1 Yes -1 Unknown Custom alignment: RH
95	com_rheumato_immuno Show the field ONLY if: [comorbidity_good_health] = '0'	Rheumatological pathology with immuno-suppression	radio, Required 0 No 1 Yes -1 Unknown Custom alignment: RH
96	com_dementia Show the field ONLY if: [comorbidity_good_health] = '0'	Dementia	radio, Required 0 No 1 Yes -1 Unknown Custom alignment: RH
97	com_transplant Show the field ONLY if: [comorbidity_good_health] = '0'	Transplant (solid organs)	radio, Required 0 No 1 Yes -1 Unknown Custom alignment: RH

98	com_hivpos Show the field ONLY if: [comorbidity_good_health] = '0'	HIV-positive	radio, Required 0 No 1 Yes -1 Unknown Custom alignment: RH
99	com_immuno_treat Show the field ONLY if: [comorbidity_good_health] = '0'	Immuno-suppressive treatment	radio, Required 0 No 1 Yes -1 Unknown Custom alignment: RH
100	com_tuberculosis Show the field ONLY if: [comorbidity_good_health] = '0'	Tuberculosis	radio, Required 0 No 1 Yes -1 Unknown Custom alignment: RH
101	com_others Show the field ONLY if: [comorbidity_good_health] = '0'	Others	radio, Required 0 No 1 Yes -1 Unknown Custom alignment: RH
102	com_others_other Show the field ONLY if: [com_others] = '1'	.... please specify	text, Required Custom alignment: RH
103	risk_pregnancy Show the field ONLY if: [demo_and_case_decl_arm_1] [gender] = '2' AND [demo_an d_case_decl_arm_1][birth_yea r] < '2007'	Section Header: *Other risk factors* Pregnancy	radio, Required 0 No 1 Yes -1 Unknown Custom alignment: RH
104	risk_postpartum_4w Show the field ONLY if: [demo_and_case_decl_arm_1] [gender] = '2' AND [demo_an d_case_decl_arm_1][birth_yea r] < '2007'	Postpartum < 4 weeks *Women who gave birth in the 4 weeks before the COVID-19 episode*	radio, Required 0 No 1 Yes -1 Unknown Custom alignment: RH
105	risk_premature_24w Show the field ONLY if: [demo_and_case_decl_arm_1] [toddler] = '1'	Premature < 24 months *Premature children aged < 24 months*	radio, Required 0 No 1 Yes -1 Unknown Custom alignment: RH
106	risk_premature_week Show the field ONLY if: [risk_premature_24w] = '1'	...please specify the gestational week the child was born in *Number between 0 and 38*	text (integer, Min: 0, Max: 38), Required Custom alignment: RH
107	risk_premature_weight Show the field ONLY if: [risk_premature_24w] = '1'	...please specify weight at birth *in kg*	text (number), Required Custom alignment: RH

| 108 | risk_smoking

Show the field ONLY if:
[demo_and_case_decl_arm_1]
[toddler] <> '1' | Smoking | radio, Required

| 0 | No |
| 1 | Yes |
-1	Unknown	 Custom alignment: RH
109	risk_ace	Is the patient under an ACE inhibitor?	radio, Required 	0	No
1	Yes
-1	Unknown	 Custom alignment: RH
110	compl_cardiomed_ttt	Was the patient prescribed or treated with cardiovascular medications (during or prior to hospitalisation)?	radio, Required 	0	No
1	Yes
-1	Unknown	 Custom alignment: RH
111	risk_charlston Show the field ONLY if: [demo_and_case_decl_arm_1] [birth_year] <= 2002	Charlson Comorbidity Index (CCI) [mdcalc Calculator] Charlson M, Szatrowski TP, Peterson J, Gold J. Validation of a combined comorbidity index. J Clin Epidemiol. 1994;47(11):1245-51. PMID: 7722560	text (integer, Max: 40) Custom alignment: RH
112	antiv_prohylactic_ttt	Section Header: *Antiviral treatment (against COVID-19)* Prophylactic treatment (against COVID-19)	radio, Required 	0	No
1	Yes
-1	Unknown	 Custom alignment: RH
113	antiv_infection_ttt	Treatment of confirmed infection (against COVID-19)	radio, Required 	0	No
1	Yes
-1	Unknown	 Custom alignment: RH
114	antiv_infection_ttt_nm Show the field ONLY if: [antiv_prohylactic_ttt] = '1' or [antiv_infection_ttt] = '1'	Name of the treatment	checkbox, Required | 1	antiv_infection_ttt_nm___1	Chloroquin
2	antiv_infection_ttt_nm___2	Interferon
3	antiv_infection_ttt_nm___3	Lopinavir/Ritonavir
4	antiv_infection_ttt_nm___4	Remdesivir
5	antiv_infection_ttt_nm___5	Tenofovir
6	antiv_infection_ttt_nm___6	Ribavirin
99	antiv_infection_ttt_nm___99	Other...	 Custom alignment: RH
115	antiv_infect_ttt_nm_other Show the field ONLY if: [antiv_infection_ttt_nm(99)] = '1'	...please, specify (name of treatment)	text, Required Custom alignment: RH
116	antiv_ttt_start_date Show the field ONLY if: [antiv_prohylactic_ttt] = '1' or [antiv_infection_ttt] = '1'	Starting date of the treatment *(if available)*	text (date_dmy, Min: 2020-01-01) Custom alignment: RH

117	antiv_ttt_end_date Show the field ONLY if: [antiv_prohylactic_ttt] = '1' or [antiv_infection_ttt] = '1'	Ending date of the treatment *(if available)*	text (date_dmy, Min: 2020-01-01) Custom alignment: RH
118	intermediate_stay	Section Header: *Stay in Intermediate care* Did the patient stay in intermediate care ?	radio, Required `0` No `1` Yes `-1` Unknown Custom alignment: LH
119	intermediate_entry_date_1 Show the field ONLY if: [intermediate_stay] = '1'	Section Header: *Intermediate care (first stay)* Intermediate care entry date *(if available)*	text (date_dmy, Min: 2020-01-01) Custom alignment: RH
120	intermediate_exit_date_1 Show the field ONLY if: [intermediate_stay] = '1'	Intermediate care exit date *(if available)*	text (date_dmy, Min: 2020-01-01) Custom alignment: RH
121	intermediate_ventil_noninvasive_1 Show the field ONLY if: [intermediate_stay] = '1'	Non-invasive ventilation	radio, Required `0` No `1` Yes `-1` Unknown Custom alignment: RH
122	intermediate_stay_2 Show the field ONLY if: [intermediate_stay] = '1'	Any additional stay in intermediate care to report ?	radio, Required `0` No `1` Yes Custom alignment: RH
123	intermediate_entry_date_2 Show the field ONLY if: [intermediate_stay_2] = '1'	Section Header: *Intermediate care (second stay)* Intermediate care entry date *(if available)*	text (date_dmy, Min: 2020-01-01) Custom alignment: RH
124	intermediate_exit_date_2 Show the field ONLY if: [intermediate_stay_2] = '1'	Intermediate care exit date *(if available)*	text (date_dmy, Min: 2020-01-01) Custom alignment: RH
125	intermediate_ventil_noninvasive_2 Show the field ONLY if: [intermediate_stay_2] = '1'	Non-invasive ventilation	radio, Required `0` No `1` Yes `-1` Unknown Custom alignment: RH
126	intermediate_stay_3 Show the field ONLY if: [intermediate_stay_2] = '1'	Any additional stay in intermediate care to report ?	radio, Required `0` No `1` Yes Custom alignment: RH
127	intermediate_entry_date_3 Show the field ONLY if: [intermediate_stay_3] = '1'	Section Header: *Intermediate care (third stay)* Intermediate care entry date *(if available)*	text (date_dmy, Min: 2020-01-01) Custom alignment: RH
128	intermediate_exit_date_3 Show the field ONLY if: [intermediate_stay_3] = '1'	Intermediate care exit date *(if available)*	text (date_dmy, Min: 2020-01-01) Custom alignment: RH

| 129 | intermediate_ventil_noninvasive_3

Show the field ONLY if:
[intermediate_stay_3] = '1' | Non-invasive ventilation | radio, Required

| 0 | No |
| 1 | Yes |
-1	Unknown	 Custom alignment: RH
130	icare_stay	Section Header: *Stay in Intensive care* Did the patient stay in intensive care ?	radio, Required | 0	No
1	Yes
-1	Unknown	 Custom alignment: LH
131	icare_entry_date_1 Show the field ONLY if: [icare_stay] = '1'	Section Header: *Intensive care (first stay)* Intensive care entry date *(if available)*	text (date_dmy, Min: 2020-01-01) Custom alignment: RH
132	icare_exit_date_1 Show the field ONLY if: [icare_stay] = '1'	Intensive care exit date *(if available)*	text (date_dmy, Min: 2020-01-01) Custom alignment: RH
133	icare_ventil_noninvasive_1 Show the field ONLY if: [icare_stay] = '1'	Non-invasive ventilation	radio, Required | 0	No
1	Yes
-1	Unknown	 Custom alignment: RH
134	icare_ventil_invasive_1 Show the field ONLY if: [icare_stay] = '1'	Invasive ventilation	radio, Required | 0	No
1	Yes
-1	Unknown	 Custom alignment: RH
135	icare_ecmo_1 Show the field ONLY if: [icare_stay] = '1'	Extra-Corporeal Membrane Oxygenation (ECMO)	radio, Required | 0	No
1	Yes
-1	Unknown	 Custom alignment: RH
136	icare_stay_2 Show the field ONLY if: [icare_stay] = '1'	Any additional stay in intensive care to report ?	radio, Required | 0	No
1	Yes	 Custom alignment: RH
137	icare_entry_date_2 Show the field ONLY if: [icare_stay_2] = '1'	Section Header: *Intensive care (second stay)* Intensive care entry date *(if available)*	text (date_dmy, Min: 2020-01-01) Custom alignment: RH
138	icare_exit_date_2 Show the field ONLY if: [icare_stay_2] = '1'	Intensive care exit date *(if available)*	text (date_dmy, Min: 2020-01-01) Custom alignment: RH
139	icare_ventil_noninvasive_2 Show the field ONLY if: [icare_stay_2] = '1'	Non-invasive ventilation	radio, Required | 0	No
1	Yes
-1	Unknown	 Custom alignment: RH

140	icare_ventil_invasive_2 Show the field ONLY if: [icare_stay_2] = '1'	Invasive ventilation	radio, Required 0 No 1 Yes -1 Unknown Custom alignment: RH
141	icare_ecmo_2 Show the field ONLY if: [icare_stay_2] = '1'	Extra-Corporeal Membrane Oxygenation (ECMO)	radio, Required 0 No 1 Yes -1 Unknown Custom alignment: RH
142	icare_stay_3 Show the field ONLY if: [icare_stay_2] = '1'	Any additional stay in intensive care to report ?	radio, Required 0 No 1 Yes Custom alignment: RH
143	icare_entry_date_3 Show the field ONLY if: [icare_stay_3] = '1'	Section Header: *Intensive care (third stay)* Intensive care entry date *(if available)*	text (date_dmy, Min: 2020-01-01) Custom alignment: RH
144	icare_exit_date_3 Show the field ONLY if: [icare_stay_3] = '1'	Intensive care exit date *(if available)*	text (date_dmy, Min: 2020-01-01) Custom alignment: RH
145	icare_ventil_noninvasive_3 Show the field ONLY if: [icare_stay_3] = '1'	Non-invasive ventilation	radio, Required 0 No 1 Yes -1 Unknown Custom alignment: RH
146	icare_ventil_invasive_3 Show the field ONLY if: [icare_stay_3] = '1'	Invasive ventilation	radio, Required 0 No 1 Yes -1 Unknown Custom alignment: RH
147	icare_ecmo_3 Show the field ONLY if: [icare_stay_3] = '1'	Extra-Corporeal Membrane Oxygenation (ECMO)	radio, Required 0 No 1 Yes -1 Unknown Custom alignment: RH
148	complications	Section Header: *Complications (probably related to COVID-19)* Did the patient have any complications ?	radio, Required 0 No 1 Yes -1 Unknown Custom alignment: LH
149	compl_ent Show the field ONLY if: [complications] = '1'	Ear/Nose/Throat (ENT) diseases	radio, Required 0 No 1 Yes -1 Unknown Custom alignment: RH

| 150 | compl_otitis

Show the field ONLY if:
[compl_ent] = '1' | Acute Otitis Media | radio, Required

| 0 | No |
| 1 | Yes |
-1	Unknown	 Custom alignment: RH
151	compl_respiratory Show the field ONLY if: [complications] = '1'	Respiratory diseases	radio, Required | 0	No
1	Yes
-1	Unknown	 Custom alignment: RH
152	compl_ards Show the field ONLY if: [compl_respiratory] = '1'	Acute respiratory distress syndrome	radio, Required | 0	No
1	Yes
-1	Unknown	 Custom alignment: RH
153	compl_pneumonia Show the field ONLY if: [compl_respiratory] = '1'	Pneumonia	radio, Required | 0	No
1	Yes
-1	Unknown	 Custom alignment: RH
154	compl_pneumonia_code Show the field ONLY if: [compl_pneumonia] = '1'	...pneumonia code [see pneumonia classification]	radio, Required | 1	PN1
2	PN2
3	PN3
4	PN4
5	PN5
6	Lobar pneumonia
99	Other	 Custom alignment: RH
155	compl_pneumonia_covid Show the field ONLY if: [compl_pneumonia] = '1'	...was the pneumonia associated with COVID-19?	radio, Required | 0	No
1	Yes
-1	Unknown	 Custom alignment: RH
156	compl_cardiovascular Show the field ONLY if: [complications] = '1'	Cardiac disease	radio, Required | 0	No
1	Yes
-1	Unknown	 Custom alignment: RH
157	compl_digestive Show the field ONLY if: [complications] = '1'	Digestive disease	radio, Required | 0	No
1	Yes
-1	Unknown	 Custom alignment: RH

| 158 | compl_liver

Show the field ONLY if:
[complications] = '1' | Liver disease | radio, Required

| 0 | No |
| 1 | Yes |
-1	Unknown	 Custom alignment: RH
159	compl_renal Show the field ONLY if: [complications] = '1'	Renal disease	radio, Required | 0	No
1	Yes
-1	Unknown	 Custom alignment: RH
160	compl_neuro_impair Show the field ONLY if: [complications] = '1'	Neurological impairment	radio, Required | 0	No
1	Yes
-1	Unknown	 Custom alignment: RH
161	compl_osteoarticular Show the field ONLY if: [complications] = '1'	Osteo-articular disease	radio, Required | 0	No
1	Yes
-1	Unknown	 Custom alignment: RH
162	compl_thrombosis Show the field ONLY if: [complications] = '1'	Thrombosis/Embolism	radio, Required | 0	No
1	Yes
-1	Unknown	 Custom alignment: RH
163	compl_bact Show the field ONLY if: [complications] = '1'	Other bacterial infections (excepted pneumonia)	radio, Required | 0	No
1	Yes
-1	Unknown	 Custom alignment: RH
164	compl_nonbact Show the field ONLY if: [complications] = '1'	Other non-bacterial infections	radio, Required | 0	No
1	Yes
-1	Unknown	 Custom alignment: RH
165	compl_other Show the field ONLY if: [complications] = '1'	Other complications...	radio, Required | 0	No
1	Yes	 Custom alignment: RH
166	compl_other_list Show the field ONLY if: [compl_other] = '1'	...please, specify (complications)	text, Required Custom alignment: RH

167	compl_antibiotic_ttt	Section Header: *Antibiotic treatment (against complications)* Antibiotic treatment taken (against complications)	radio, Required 0 No 1 Yes -1 Unknown Custom alignment: RH
168	compl_antibiotic_code1 Show the field ONLY if: [compl_antibiotic_ttt] = '1'	Code of given antibiotics (main) [see list of AB codes] *[code required - 0 if n/a]*	text (number, Min: 0, Max: 9999) Custom alignment: RH
169	compl_antibiotic_code2 Show the field ONLY if: [compl_antibiotic_code1] > 0	Code of given antibiotics (additional) *[optional]*	text (number, Min: 1, Max: 9999) Custom alignment: RH
170	compl_antibiotic_code3 Show the field ONLY if: [compl_antibiotic_code2] > 0	Code of given antibiotics (additional) *[optional]*	text (number, Min: 1, Max: 9999) Custom alignment: RH
171	compl_antibiotic_code4 Show the field ONLY if: [compl_antibiotic_code3] > 0	Code of given antibiotics (additional) *[optional]*	text (number, Min: 1, Max: 9999) Custom alignment: RH
172	compl_antibiotic_code5 Show the field ONLY if: [compl_antibiotic_code4] > 0	Code of given antibiotics (additional) *[optional]*	text (number, Min: 1, Max: 9999) Custom alignment: RH
173	compl_antifungal_ttt	Antifungal treatment taken (against complications)	radio, Required 0 No 1 Yes -1 Unknown Custom alignment: RH
174	compl_cortico_ttt	Cortico-steroids treatment taken (against complications)	radio, Required 0 No 1 Yes -1 Unknown Custom alignment: RH
175	clinical_complementary_information_complete	Section Header: *Form Status* Complete?	dropdown 0 Incomplete 1 Unverified 2 Complete

Instrument: **Patient Follow Up** (patient_follow_up)   ∧ Collapse

176	transfer	Section Header: *Transfers* Was the patient transferred during hospitalisation?	radio, Required 1 Yes 0 No -1 Unknown Custom alignment: RH
177	transfer_to Show the field ONLY if: [transfer] = '1'	... the patient was transferred in	checkbox, Required 1 transfer_to___1 Medicine 2 transfer_to___2 Geriatrics 3 transfer_to___3 Intensive Care 4 transfer_to___4 Surgery 5 transfer_to___5 Paediatrics 99 transfer_to___99 Others...

178	transfer_other Show the field ONLY if: [transfer_to(99)] = '1'	... please specify (one item only)	text, Required Custom alignment: RH
179	death	Section Header: *Patient's destination* Deceased	radio, Required 1 Yes 0 No -1 Unknown Custom alignment: RH
180	death_where Show the field ONLY if: [death] = '1'	... death occured	radio, Required 1 during hospitalisation 2 after being discharged Custom alignment: RH
181	discharge_death_date Show the field ONLY if: [death] = '1'	Date of death	text (date_dmy, Min: 2020-01-01), Required Custom alignment: RH
182	death_covid Show the field ONLY if: [death] = '1'	Was the death caused by COVID-19?	radio, Required 0 No 1 Yes -1 Unknown Custom alignment: RH
183	discharge_destin Show the field ONLY if: [death_where] <> '1'	Destination	radio, Required 1 Domicile 2 LTC Facility 3 Another hospital 99 Other -1 Unknown
184	discharge_destin_other Show the field ONLY if: [discharge_destin] = '99'	... please specify destination	text, Required
185	discharge_other_hosp Show the field ONLY if: [discharge_destin] = '3'	Was the patient transferred to an hospital participating to this surveillance system?	radio, Required 0 No 1 Yes

186	discharge_destin_hospname Show the field ONLY if: [discharge_other_hosp] = '1'	In which participating hospital was the patient transferred? Make sure you give the patient ID to the hospital he/she is being transferred to in order to ease the follow-up process!	dropdown, Required

			dropdown, Required
			114	CHUV (Lausanne)
			112	EOC (Lugano)
			136	HFR (Fribourg)
			161	Hirslanden AG ZH (Zurich)
			113	Hopital VS (Sion)
			110	HUG (Geneva)
			117	Inselspital (Bern)
			120	KISPI (Basel)
			116	KISPI (Zurich)
			137	KSA (Aarau)
			133	KSGR (Graubuenden)
			166	KSNW (Niedwalden)
			111	KSSG (St.Gallen) & consortium
			138	KSW (Winterthur)
			140	LUKS (Luzern)
			134	OKS (St.Gallen)
			141	Spitaeler SH (Schaffhausen)
			150	STGAG KSM (Muensterlingen)
			119	USB (Basel)
			115	USZ (Zurich)

187	discharge_other_hosp_why Show the field ONLY if: [discharge_destin] = '3'	Why was the patient transferred to another hospital?	radio, Required
			1	Lack of space
			2	Favourable evolution (the patient was put in recovery care)
			3	Unfavourable evolution (the patient needed to be put in intensive care)
			-1	Unknown

188	discharge_date Show the field ONLY if: [death_where] <> '1'	Discharging date from hospital	text (date_dmy, Min: 2020-01-01), Required

189	sequelae Show the field ONLY if: [death_where] <> '1'	Did the patient leave with any sequelae requiring post-discharge treatment?	radio, Required
			1	Yes
			0	No
			-1	Unknown
			Custom alignment: RH

190	discharge_comments_4ae6c4	Section Header: *Comments* Comments	text

191	patient_follow_up_complete	Section Header: *Form Status* Complete?	dropdown
			0	Incomplete
			1	Unverified
			2	Complete