

**1. Patient data, diagnosis and admission**

Insurance number:.....

Name:.....

Date of birth:..... (APACHE II)

Gender: Female / Male

Ethnicity/Race: White / Black / Indian / Asian / Other: .....

Town:.....

Type of town: Village (less than 5,000 person) / Town (about 5,000 – 20,000 person) / City (more than 20,000 person)

Date of questioning:.....

Diagnosis of coronavirus (SARS-CoV-2) infection by PCR: date:.....

Reason for admission: severe clinical presentation /requirement for supportive care /potential risk factors for severe disease/ inability of the patients to self-isolate at home / other:..... (multiple choice)

if Severe clinical presentation: pneumonia / shock / arrhythmia / severe symptoms / severe abnormalities on imaging / severe abnormalities in laboratory parameters / secondary infections (multiple choice)

if Requirement for supportive care: vasopressor need / need for respiratory support / need for renal replacement therapy (multiple choice)

if Potential risk factors for severe diseases: comorbidities / age (multiple choice)

Admission date and time: .....

Admission site: ward / ICU

Transferred from: ER / ward / other hospital / from home

CoronApp user: yes / no

**2. Details from medical history**

**2.1 Lifestyle**

Smoking:yes / no

if yes: Amount (cigarettes/day):.....

For how many years? .....

if not: Did you smoke earlier?            yes / no  
if yes: amount (pcs/occasion):.....  
For how many years?.....  
How long ago did you stop smoking? .....

Alcohol consumption: yes / no  
if yes: frequency: occasionally/monthly/weekly/daily  
amount (g/day):.....  
since when? (years):.....  
Alcohol consumption in the last 2 weeks: .....

if not: Did you drink alcohol earlier?            yes / no  
if yes: frequency: occasionally/monthly/weekly/daily  
amount (g/occasion):.....  
For how many years?.....  
How long ago did you stop drinking alcohol?.....

Guide for estimation of the amount:  
*1 dl beer (4.5 vol. %) = ~3.5 g alcohol*  
*1 dl wine (12.5 vol. %) = ~10 g alcohol*  
*1 dl hard drink (50 vol. %) = ~40 g alcohol*

Drug abuse: yes / no            *Prescribed medication should not be included here.*  
if yes: type of drug:.....  
amount:.....  
for how many years:.....

## **2.2 Comorbidities**

Diabetes mellitus: yes / no  
if yes: type I. / type II / type III. / MODY  
date of diagnose (year):.....

Hypertension: yes / no  
if yes: since when (date: year):.....

COPD: yes / no  
if yes: date of diagnosis (year):.....

Cystic fibrosis: yes / no  
if yes: date of diagnosis (year):.....

Other chronic respiratory disease: yes / no  
if yes, specify:.....

Autoimmune disease: yes / no  
if yes: ...

Known underlying immunosuppression: yes / no (**Hscore**)  
if yes: HIV positive / long term glucocorticoids / cyclosporine / azathioprine / other:....

Heart Failure: yes / no  
if yes: class: I / II / III /IV

Cirrhosis: yes / no  
if yes: date of diagnosis:.....

Dialysis-dependent: yes / no  
if yes: since when:.....

Received BCG vaccine: yes / no

### **2.3 Medications**

Medications taken regularly: yes / no

*Please specify the name of the active substance (e.g. "acetylsalicylic acid"). Please specify the amount using the International System of Units –SI (e.g. milligram, gram)*

if yes:

name of medication:.....

active substance:.....

dose: ..... (number only!)

unit: g / mg / IU

if fluid, concentration (e.g. 10%, 1g/2ml, etc.).....

how many times per day (e.g. 3): .....

method of administration: intravenous / oral / enteral / subcutan

other notes: .....

### **3. File upload and comments**

File upload

Comments:.....