

Follow-up

Date of randomisation

Please only report events that occurred from first randomisation until 28 days later on this form (except for Q2).

Patient's date of birth

yyyy-mm-dd

1. Which of following treatment(s) did the patient **definitely** receive as part of their hospital admission after randomisation? *

(NB Include RECOVERY study-allocated drug, only if given, PLUS any of the other treatments if given as standard hospital care)

- No additional treatment
- Lopinavir-ritonavir
- Corticosteroid (dexamethasone, prednisolone or hydrocortisone)
- Hydroxychloroquine
- Azithromycin or other macrolide (eg, clarithromycin, erythromycin)
- Tocilizumab or sarilumab
- Remdesivir

The following questions only appear if the treatments have been allocated at randomisation

Please select number of days the patient received lopinavir-ritonavir

1 2 3 4 5 6 7 8 9 10

Please select number of days the patient received corticosteroid (dexamethasone, prednisolone or hydrocortisone)

1 2 3 4 5 6 7 8 9 10

Please select number of days the patient received hydroxychloroquine

1 2 3 4 5 6 7 8 9 10

Please select number of days the patient received azithromycin

This question and the following question cannot both be zero

0 1 2 3 4 5 6 7 8 9 10

Please select number of days the patient received other macrolides (eg, clarithromycin, erythromycin)

0 1 2 3 4 5 6 7 8 9 10

Please select number of doses of tocilizumab or sarilumab the patient received

1 >1

Please select number of days the patient received remdesivir

- 1 2 3 4 5 6 7 8 9 10

» **Convalescent Plasma**

How many convalescent plasma infusions did the patient receive?

This is plasma given as part of trial, not any standard fresh frozen plasma or other blood products that the patient may have been given

- 0 1 2

Were any infusions stopped early for any reason ie, the patient did not receive the full amount?

- Yes No

How many were stopped early?

- 1 2

» **Health Status**

2. Was a COVID-19 test done for this patient at any point during the admission??

(If multiple tests were done, and the results were positive and negative, please tick Yes – positive result and Yes – negative result)

- Yes – positive result
 Yes – negative result
 Not done

3. What is the patient's vital status?

*

- Alive
 Dead

3.1 What is the patient's current hospitalisation status?

Q3.1 is only completed if the patients is alive at Q3

- Inpatient
 Discharged

The patient has been enrolled in the trial for **NaN** days

3.1.1 Date follow-up form completed

Q3.1.1 is only completed if patient is still an inpatient at Q3

yyyy-mm-dd

3.1.1 What was the date of discharge? **Q3.1.1 is only completed if patient has been discharged at Q3**

yyyy-mm-dd

3.1 What was the date of death? **Q3.1.1 is only completed if patient has died at Q3**

yyyy-mm-dd

3.2 What was the underlying cause of death? *

This can be obtained from the last entry in part 1 of the death certificate

- COVID-19
- Other infection
- Cardiovascular
- Other

Please give details

4. Did the patient require any form of assisted ventilation (ie, more than just supplementary oxygen) from day of randomisation until 28 days later? *

- Yes
- No

Please answer the following questions:

4.1 For how many days did the patient require assisted ventilation? *

4.2 What type of ventilation did the patient receive?

Yes

No

Unknown

CPAP alone

Non-invasive ventilation (eg, BiPAP)

High-flow nasal oxygen (eg, AIRVO)

Mechanical ventilation (intubation/tracheostomy)



Total number of days the patient received invasive mechanical ventilation (intubation/tracheostomy) (from randomisation until discharge/death/28 days after randomisation)

Complete if invasive mechanical ventilation (intubation/tracheostomy) is Yes

5. Has the patient been documented to have a NEW cardiac arrhythmia at any point since the main randomisation until 28 days later?

- Yes
- No
- Unknown

5.1 Please select all of the following which apply

- Atrial flutter or atrial fibrillation **If Q5 is answered Yes, you must select at least one option here**
- Supraventricular tachycardia
- Ventricular tachycardia (including torsades de pointes)
- Ventricular fibrillation
- Atrioventricular block requiring intervention (eg, cardiac pacing)

6. Did the patient require use of renal dialysis or haemofiltration from main randomisation until 28 days later?

- Yes
- No

7. Please enter UKOSS case ID if known *

Enter the full UKOSS case ID ie, COR_123

Complete only if patient was pregnant at randomisation

(select if you do not know the UKOSS case ID)

Not known