



## TESSy - The European Surveillance System

### Coronavirus disease 2019 (COVID-19) data Reporting Protocol

Version 2.1, 10 March 2020

COVID-19 reporting protocol

March 2020

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*Note: changes are marked in grey*

## Introduction

This Reporting Protocol is for the continuous data collection of COVID-19 infections in the EU/EEA and the UK. It includes the information requested in the updated [Case Reporting Form](#) published by WHO on 27 February 2020. Cases to be reported include probable and confirmed cases according to the current global case definition:

**Probable case:** A suspected case for whom testing for virus causing COVID-19 is inconclusive (according to the test results reported by the laboratory) or for whom testing was positive on a pan-coronavirus assay.

**Confirmed case:** A person with laboratory confirmation of virus causing COVID-19 infection, irrespective of clinical signs and symptoms.

Data on suspected cases are not collected in TESSy.

Case-based data should be reported to TESSy within 72 hours of the case identification and records should be updated once additional data becomes available, for example related to outcome.

Aggregate testing data should be reported every Wednesday by 12:00 noon for cases tested the previous week Monday to Sunday and updated retrospectively.

ECDC's Reporting Protocols are data collection guidelines for reporting countries' data managers.

The Surveillance Protocol for COVID-19 is the WHO document: "[Global Surveillance for human infection with novel coronavirus \(2019-nCoV\)](#)".

## Aim

To support the timely reporting of key information on cases of COVID-19 identified in the EU/EEA.

## Objectives

- To describe key epidemiological characteristics and indicators such as source of infection, transmissibility, clinical spectrum, severity, risk factors for infection and for severity, of cases of COVID-19 infections detected in European countries.

## How to use this document

This Reporting Protocol provides information for reporting countries' data managers in three main sections:

- [Reporting to TESSy](#) – contains guidelines on how to prepare data for submission to TESSy, deadlines, subject-specific information (e.g. new changes to metadata), and links to further information.
- [Annex 1](#) – contains:
  - A history of metadata changes for the subject(s) covered by this Reporting Protocol.
  - The metadata set for the subject(s) covered by this Reporting Protocol.

## Finding further information

 Paragraphs denoted by the information icon tell where you can find further information.

Updated links to all the schedules, documentation and training materials mentioned in this Reporting Protocol are included in the [TESSy Technical Guidelines & Tools](#) (see the menu 'Technical Guidelines and Tools' when logged in TESSy), including:

- Metadata sets and history.

- Tutorials for data transformation using respectively Excel and Access.
- TESSy user documentation.
- *CSV* and *XML* transport protocols.

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## Reporting to TESSy

This section provides both an overview of the TESSy reporting process and tips on where you can find useful information.

The overall process is:

1. *Familiarise yourself with the data collection deadlines.*
2. *Prepare (export and transform) your data.*
3. *Check that your data comply with the metadata.*
4. *Check that your data source profile is up-to-date.*
5. *Submit your file(s) to TESSy.*
6. *Finalise and approve your submission.* Data collection schedule

ⓘ The data collection for COVID-19 is continuous (within 24 hours from case identification).

### Who, what and when to report

Countries should report to ECDC and the WHO Regional Office for Europe every case of COVID-19 meeting the current case definition for a probable or confirmed case. The data should be reported as case-based data (recordtype NCOV, recordtype versions 1 or 2) using the full set of variables as long as feasible. If countries are unable to report the full set of variables, countries should report only the mandatory variables (recordtype NCOV, recordtype versions 2): Age, PlaceOfInfection, Precondition, Hospitalisation, IntensiveCare, Outcome and RespSupport (UNK is allowed). Case-based data should be reported within 72 hours of diagnosis where possible.

**In addition**, Member States should as soon as possible, report using the aggregated recordtype (NCOVAGGR) the following variables:

- Total number of tests (TestedAll)
- Total number tested in influenza sentinel surveillance (TestedSentinel)
- Total number positive in influenza sentinel surveillance (PositiveSentinel)
- Number tested among hospitalised SARI patients by agegroup
- Number positive among hospitalised SARI patients by agegroup
- Description of SARI surveillance system (DescriptionSARI)

When Member States stop collecting case-based data on probable and confirmed cases, aggregated data should be reported using the aggregated recordtype (NCOVAGGR) for all variables (ie number of cases and deaths by age-group, total number hospitalised, total number ventilated, total number discharged, sex ratio for cases and deaths).

For the aggregated recordtype, data should be aggregated by week of sampling and reported to TESSy once a week. The deadline for reporting is Wednesday 12:00 noon to report data for cases notified during the previous week.

**Please note that case-based data should be updated when outcome information becomes available. ECDC will send reminders when outcome is marked as "STILLTREATMENT" for two weeks after reporting.**

### Preparing data

Data on COVID-19 cases may be entered directly in TESSy for individual cases ('Manually create a record'). For any batch reporting by file upload (CSV or XML format), after you have exported the data from your national database, you need to ensure that the data are in a format that TESSy can accept.

## Checking metadata

The TESSy metadata define the fields and data formats that are valid as input to TESSy for a given subject.

As requirements to the data to be shared among TESSy users change, the data changes needed to support the new requirements are identified and agreed upon between the National Surveillance Contact Points, the Network Coordination Groups and ECDC's Disease Experts, and then implemented as changes to the TESSy metadata.

In order to ensure that your data can be saved correctly in TESSy, you therefore need to check that your data are correctly formatted according to the most recent metadata set.

Changes to the metadata for the subject of this Reporting Protocol are described in:

- *Changes to current metadata* – changes since the last Reporting Protocol.
- *Annex 1 Metadata change history* – all preceding changes.

It is especially important to focus on:

- **Field formats**

Many fields require that data are formatted in a specific way. For example, dates must be in the YYYY-MM-DD format; dates in the DD/MM/YYYY format will be rejected.

- **Coded values**

Some fields only permit the use of specific values (coded values). For example, **M**, **F**, **UNK**, or **Other** are the coded values for *Gender* and any other value in a *Gender* field will be rejected.

The metadata file contains all the definitions and rules you need to comply with to format your data correctly for every subject (usually a disease). The file can be downloaded as an Excel file from the TESSy documents website.

By filtering the fields in the file by subject, you can see the fields required for your subject and the rules applying to these fields.

 The *Tessy User Guide*<sup>1</sup> provides an overview of how you work with the metadata file, and the TESSy user documentation provides in-depth details on metadata.

## Submitting your data

Data are submitted through the TESSy web interface (go to **Upload**). Previously reported data can be consulted through TESSy (go to **Review**).

 Home           

 The *Tessy User Guide*<sup>2</sup> provides an overview of how you submit files to TESSy, and the TESSy user documentation provides in-depth descriptions of all the upload methods.

## Finalising your submission

The compliance of your data with the validation rules in the metadata is checked automatically during the data upload process.

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<sup>1</sup>TESSy User Guide, available at:  
[https://tessy.ecdc.europa.eu/TessyHelp/HelpAndManuals/TESSy%20\\_User\\_Guide\\_v3.28.pdf](https://tessy.ecdc.europa.eu/TessyHelp/HelpAndManuals/TESSy%20_User_Guide_v3.28.pdf)

<sup>2</sup>TESSy User Guide, available at:  
[https://tessy.ecdc.europa.eu/TessyHelp/HelpAndManuals/TESSy%20\\_User\\_Guide\\_v3.28.pdf](https://tessy.ecdc.europa.eu/TessyHelp/HelpAndManuals/TESSy%20_User_Guide_v3.28.pdf)

The result of your upload – i.e. rejected or validated – is displayed immediately after the conclusion of the check in the **Validation details** webpage. Please review the result carefully:

- If your file has been rejected, there will be a message explaining each instance of non-compliance with the metadata that you need to correct.
- If your file has been validated, there might be warnings and remarks relating to possible data quality issues or to potential overwriting of existing records that you should consider.

When you file has been validated and you are satisfied that all corrections have been made, please ensure prompt approval – unapproved uploads can block for the approval of other uploads.

 The TESSy user documentation provides information on reviewing validation results and adjusting reporting periods to avoid overwriting existing records.

## TESSy HelpDesk

Email: [\(10\)\(2e\)@ecdc.europa.eu](mailto:(10)(2e)@ecdc.europa.eu)

Telephone number: +46-(0)8-5860 1601

Availability: 9:00 – 16:00 Stockholm time, Monday to Friday (except ECDC Holidays)

## Changes to COVID-19 disease metadata

RecordType Version 2: Major revision

- Implementation of updated WHO case reporting and follow-up form.
- Simplification of metadata by removal of complex fields and variables, which are not relevant for updated WHO case report form.
- Implementation of aggregated recordtype for collection of sentinel surveillance data and SARI data.

The recordtype version has changed to "2". It will be possible to report using recordtype version "1", however this recordtype version will eventually be deactivated.

 Information on changes to the metadata for other subjects is available on the TESSy documentation website.

## Annex 1 - Coronavirus disease 2019 (COVID-19) metadata

### Revisions of COVID-19 disease metadata set

The COVID-19 metadata have been developed based on WHO case reporting form<sup>3</sup>. The most recent metadata set is available from the TESSy website under technical guidelines and tools tab (as shown below).



### Current record type versions

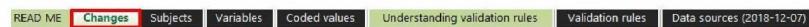
Table 1 shows the record type versions to be used when reporting COVID-19 (Record type: NCOV) data to TESSy.

Table 1: COVID-19 record type versions

Record	Case-based record type version
NCOV	2
NCOV	1

### NCOV metadata change history

When you open a metadata set, the Excel file has a tab 'Changes', recording historical changes.



<sup>3</sup> World Health Organization, 2020: Interim case reporting form for 2019 Novel Coronavirus (2019-nCoV) of confirmed and probable cases, available at: [https://www.who.int/docs/default-source/coronavirus/2020121-2019-ncov-reporting-form.pdf?sfvrsn=96eff954\\_4](https://www.who.int/docs/default-source/coronavirus/2020121-2019-ncov-reporting-form.pdf?sfvrsn=96eff954_4)

## NCOV metadata

The NCOV metadata, recordtype verion 2 has only one level. The fields which were previously implemented as complex fields are now implemented as repeatable fields.

### Common TESSy variables

#### Record Identifier (mandatory)

Field: RecordId

Coding: Text (max 80 characters)

The record identifier is provided by the Member State. It must be

- unique within the national COVID-19 disease surveillance system
- anonymous.

#### Record type (mandatory)

Field: RecordType

Coding: NCOV

The record type defines the structure and the format of the data reported. The record types are defined by ECDC and are related to the subject. Only valid combinations of subject, record type and data source are accepted.

#### Record type version

Field: RecordTypeVersion

Coding: 2

The version of the record type defines the current structure of the data reported. If the dataset is changed, the version changes to the next higher integer. The current version of the NCOV record type is 2.

This variable is not mandatory as TESSy concludes the record type version from the metadataset indicated. The variable RecordTypeVersion allows to override this default.

#### Subject (mandatory)

Field: Subject

Coding: NCOV

The subject describes the disease to be reported.

#### Data source (mandatory)

Field: DataSource

Coding: Pre-assigned as CountryCode-NCOV to each country; can be modified by National Coordinator

The data source specifies the surveillance system from which the data originates and is generated and revised/updated by the national contact point for surveillance in each Member State. The descriptions of the surveillance systems submitted to TESSy should be kept up to date and will be used to assist with data interpretation.

#### Reporting country (mandatory)

Field: ReportingCountry

Coding: International organization for standardization (ISO) 3166-1-alpha-2, (two-letter code)

This variable identifies the country reporting the case.

**Date used for statistics (mandatory)**

Field: DateUsedForStatistics

Coding: yyyy-mm-dd (preferred)  
 yyyy-Www  
 yyyy-mm  
 yyyy-Qq  
 yyyy

This is the date used by the national surveillance institute/organisation in case reports and official statistics. The date used for statistics can vary from country to country but is preferably date of notification for NCOV as defined in WHO case reporting form.

*It is recommended to use the date of notification of the case to national health authorities as the date used for statistics.*

**Status (mandatory)**

Field: Status

Coding: NEW/UPDATE  
 DELETE

The status is used for updating data; the default is New/Update. By choosing 'Delete', the selected record (or batch of data) will be marked as inactive, but will remain in TESSy to reconstruct the data for a given date in the past.

**Epidemiological variables****Classification (mandatory)**

Field: Classification

Coding: CONF = Confirmed  
 PROB = Probable

Case classification according to the ECDC/WHO case definition.

**Age (mandatory)**

Field: Age

Coding: Numerical (0-120)  
 UNK = Unknown

Age of the person in years as reported to the national surveillance system of each Member State.

**Age in days**

Field: AgeDay

Coding: Numerical (0-31)  
 NA = Not applicable  
 UNK = Unknown

Age of patient in days as reported in the national system for cases < 1 month of age at the time of disease onset

**Age in months**

Field: AgeMonth

Coding: Numerical (0-23)  
 NA = Not applicable  
 UNK = Unknown

Age of patient in months as reported in the national system for cases < 2 years of age at the time of disease onset.

**Gender**

Field: Gender

Coding:      F = Female  
 M = Male  
 O = Other (for example, transsexual)  
 UNK = Unknown

Gender of the reported case.

**Reason tested**

Field: ReasonTested

Coding:

CONTACT = Contact of a case  
 ENTRY = Detected at point of entry  
 ILISURV = ILI/ARI surveillance  
 ILL = Ill seeking healthcare  
 REPAT = Repatriation  
 SARISURV = SARI surveillance  
 UNK = Unknown

Reason why patient was tested.

**Symptomatic**

Field: Symptomatic

Coding:

ASY = Asymptomatic  
 SYMP = Symptomatic  
 UNK = Unknown

**Close contact**

Field: CloseContactPreviousPositive

Coding:

N = No  
 UNK = Unknown  
 Y = Yes

Patient had contact with a probable or confirmed case in the 14 days prior to symptom onset.

**Close contact RecordID (repeatable)**

Field: CloseContactRecordId

Coding:      Text

The RecordID of other probable or confirmed cases that the reported case had contact with.

**Close contact first date: first date of close contact (repeatable)**

Field: CloseContactFirstDate

Coding:      YYYY-MM-DD

If multiple contacts, please use the same order as in the CloseContactRecordId

**Close contact last date: last date of close contact (repeatable)**

Field: CloseContactLastDate  
 Coding: YYYY-MM-DD

If multiple contacts, please use the same order as in the CloseContactRecordId

**Number of contacts followed**

Field: ContactsFollowed  
 Coding: Numeric

Total number of contacts followed for this case

**Date of Onset of Disease**

Field: DateOfOnset  
 Coding: Date (yyyy-mm-dd)  
 UNK= Unknown

Date of onset of symptoms. If not known precisely, the date of onset can be estimated. Not applicable in asymptomatic cases. If not applicable, please use 'UNK'.

**Hospitalisation (mandatory)**

Field: Hospitalisation

Coding: N = No  
 UNK = Unknown  
 Y = Yes

Admission to hospital.

**Intensive care (mandatory)**

Field: IntensiveCare

Coding: N = No  
 UNK = Unknown  
 Y = Yes

Case required care in an intensive care unit.

**Date of first positive result**

Field: DateOfFirstPositiveLabResult  
 Coding: Date (yyyy-mm-dd)  
 UNK= Unknown

Date when first positive laboratory result becomes available.

**Date of last laboratory result**

Field: DateOfLastLabResult  
 Coding: Date (yyyy-mm-dd)  
 UNK= Unknown

Date when last laboratory result becomes available.

**Result of last laboratory test**

Field: LaboratoryResult  
 Coding:

NA = Not applicable  
 NEG = Negative  
 POS = Positive  
 UNK = Unknown  
 WEAK = Technically not interpretable

Result of last laboratory test.

**Date of Hospitalisation**

Field: DateOfHospitalisation  
 Coding: Date (yyyy-mm-dd)  
 UNK= Unknown  
 If not applicable, please use 'UNK'.

**Date of isolation of patient**

Field: DateOfIsolation  
 Coding: Date (yyyy-mm-dd)  
 UNK= Unknown

Date of isolation of patient. If not applicable, please use 'UNK'.

**Date of hospital discharge**

Field: DateOfDischarge  
 Coding: Date (yyyy-mm-dd)  
 UNK= Unknown

If not applicable, please use 'UNK'.

**Date of death**

Field: DateOfDeath  
 Coding: Date (yyyy-mm-dd)  
 UNK= Unknown

Exact date for date of death. If not applicable, please use 'UNK'.

**Imported**

Field: Imported  
 Coding: N = No  
 Y = Yes  
 UNK = Unknown

Patient travelled in the 14 days prior to symptom onset.

**Outcome (mandatory)**

Field: Outcome  
 Coding: ALIVE = Alive, recovered, cured  
 DIEDNCOV = COVID-19 was the main or contributing cause of death  
 DIEDOTHER = COVID-19 did not contribute to the cause of death  
 DIEDUNK = Cause of death unknown  
 STILLTREATMENT = Still on medical treatment (not recovered)  
 UNK = Unknown outcome

Outcome refers to the patient's vital status resulting from COVID-19. If death occurred due to other disease, 'DIEDOTHER' should be reported. If the patient is still ill at the time of reporting, code the outcome as 'STILLTREATMENT'. The outcome should be updated when the final outcome is known. ECDC will send reminders to countries to update outcome of cases reported as "STILLTREATMENT" two weeks after they are reported.

#### **Place of infection (mandatory)**

Field: PlaceOfInfection

Coding: NUTS\_GAUL

UNK = Unknown

The probable place of infection should be provided at the NUTS 3 level. If the probable case of infection is not an EU/EEA country, then use GAUL nomenclature

#### **Place of residence**

Field: PlaceOfResidence

Coding: NUTS\_GAUL

UNK = Unknown

Place of residence of patient at the time of disease onset. Select the most detailed NUTS(EU/EEA) or GAUL(nonEU/EEA) level possible.

#### **Healthcare worker**

Field: HealthCareWorker

Coding: N = No

Y = Yes

UNK = Unknown

Information on whether the case was any type of healthcare worker.

#### **Healthcare worker details**

Field: HealthCareWorkerDetails

Coding: Text

If the case is a healthcare worker, details on the facility where working

#### **Precondition (repeatable field, mandatory)**

Field: Precondition

Coding: CANC = Cancer, malignancy

CARDIACDIS = Cardiac disorder, including hypertension

DIAB = Diabetes

HIV = HIV/other immune deficiency

KIDNEY = Kidney-related condition, renal disease

LIVER = Liver-related condition, liver disease

LUNG = Chronic lung disease

NEUROMUS = Neuromuscular disorder, chronic neurological

O = Other signs, please specify

PREG = Pregnancy, trimester is unknown

PREG1 = Pregnancy, 1st trim, the 1st trim is from week 1 to the end of week 12

PREG2 = Pregnancy, 2nd trim, the 2nd trim is from week 13 to the end of week 26

PREG3 = Pregnancy, 3rd trim, the 3rd trim is from week 27 to the end of the pregnancy

PREGPOST = Post-partum (<6 weeks)

**Precondition – Other**

Field: PreconditionOther

Coding: Text

UNK = Unknown

Details of underlying conditions, if Precondition is coded as 'other', but is known.

**Respiratory support (mandatory)**

Field: RespSupport

Coding: ECMO = Extracorporeal membrane oxygenation

N = No

O = Other, please specify

OXYGEN = Oxygen therapy

UNK = Respiratory support given unknown

VENT = Ventilator including non-invasive positive pressure ventilation

Level of respiratory support given to patient.

**Respiratory support - Other**

Field: RespSupportOther

Coding: Text

UNK = Unknown

Other respiratory support not found in the list of possible values.

**Patient visited health care facility**

Field: VisitedHealthCareFacility

Coding: N = No

UNK = Unknown

Y = Yes

Whether the patient visited a health care facility in the 14 days prior to symptom onset.

**Setting**

Field: Setting

Coding:

FAM = Family setting

HCS = Health care setting

O = Other location, please specify

UNK = Unknown

WORK = Work place

Setting in which the contact with a probable or confirmed case happened (during the 14 days prior to symptoms' onset).

**Close contact setting - other**

Field: SettingOther

Coding: Text

Other close contact setting.

**Specimen type**

Field: SpecimenType

Coding:

BAL	= Bronchoalveolar lavage
BLOOD	= Whole blood, blood
CSF	= Cerebrospinal fluid
ETA	= Endotracheal aspirate
LUNGTISSUE	= Tissue from biopsy or autopsy including from lung
NASALSWAB	= Nasal swab
NASOPHISWAB	= Nasopharyngeal swab
NPA	= Nasopharyngeal aspirate
O	= Other, please specify
OROSWAB	= Oropharyngeal swab
SALOR	= Saliva/oral fluid
SER	= Serum, acute or convalescent sample
SPUTUM	= Sputum including induced sputum
THROATSWAB	= Throat swab
UNK	= Unknown
URINE	= Urine

The relevant specimen type used for diagnosis of the case.

**Specimen - other**

Field: SpecimenOther

Coding: Text

Other specimen type.

**Wgs ENA identifier**

Field: WgsEnaId

Coding: Text

European Nucleotide Archive (ENA) run identifier, based on which the sequence read data can be retrieved. Starts with ERR or SRR, i.e. not the sample or experiment which ERS/ERX or SRS/SRX.

**Wgs Sequence read archive (RA) identifier**

Field: WgsSequenceId

Coding: Text

Sequence identifier for whole genome or gene sequence, based on which the sequence read data can be retrieved from external database such as GISAID, GenBank or other db (except ENA). GISAID isolate sequence accession number should be reported in format EPI\_ISL\_402123, GenBank MK334047.1. Please report ENAId in WgsEnaId variable.

**Travel places (repeatable)**

Field: TravelPlaces

Coding: NUTS\_GAUL

If the case has travelled, the places visited, at NUTS3/GAUL.

**Departure date (repeatable)**

Field: DepartureDate

Coding: yyyy-mm-dd  
 Date case departed from places visited (repeatable: report dates in same order as TravelPlaces).

## NCOVAGGR metadata

The NCOVAGGR metadata, recordtype verion 1 is the aggregated metadata for reporting of testing data including data from influenza sentinel surveillance and hospital data of patients admitted with severe acute respiratory infection. Once countries stop collecting and reporting case-based data, this recordtype can also be used for reporting of aggregated data on cases. Aggregated data should be reported by week and new cases in each category during the respective week should be reported (eg number of new cases, number of new deaths, etc).

## Common TESSy variables

### Record type (mandatory)

Field: RecordType  
 Coding: NCOV

The record type defines the structure and the format of the data reported. The record types are defined by ECDC and are related to the subject. Only valid combinations of subject, record type and data source are accepted.

### Record type version

Field: RecordTypeVersion  
 Coding: 2

The version of the record type defines the current structure of the data reported. If the dataset is changed, the version changes to the next higher integer. The current version of the NCOV record type is 2.

This variable is not mandatory as TESSy concludes the record type version from the metadataset indicated. The variable RecordTypeVersion allows to override this default.

### Subject (mandatory)

Field: Subject  
 Coding: NCOV

The subject describes the disease to be reported.

### Data source (mandatory)

Field: DataSource

Coding: Pre-assigned as CountryCode-NCOV to each country; can be modified by National Coordinator

The data source specifies the surveillance system from which the data originates and is generated and revised/updated by the national contact point for surveillance in each Member State. The descriptions of the surveillance systems submitted to TESSy should be kept up to date and will be used to assist with data interpretation.

### Reporting country (mandatory)

Field: ReportingCountry

Coding: International organization for standardization (ISO) 3166-1-alpha-2, (two-letter code)  
 This variable identifies the country reporting the case.

**Date used for statistics (mandatory)**

Field: DateUsedForStatistics

Coding: yyyy-Www

The week for which the reported data refer.

**Epidemiological variables****Age00<02**

Field: Age00&lt;02

Coding: Numeric

Number of confirmed cases in age group 0&lt;2 years, newly reported for week of reporting.

**Age02-04**

Field: Age02-04

Coding: Numeric

Number of confirmed cases in age group 2-4 years, newly reported for week of reporting.

**Age05-14**

Field: Age05-14

Coding: Numeric

Number of confirmed cases in age group 5-14 years, newly reported for week of reporting.

**Age15-24**

Field: Age15-24

Coding: Numeric

Number of confirmed cases in age group 15-24 years, newly reported for week of reporting.

**Age25-49**

Field: Age25-49

Coding: Numeric

Number of confirmed cases in age group 25-49 years, newly reported for week of reporting.

**Age50-64**

Field: Age50-64

Coding: Numeric

Number of confirmed cases in age group 50-64 years, newly reported for week of reporting.

**Age65-79**

Field: Age65-79

Coding: Numeric

Number of confirmed cases in age group 65-79 years, newly reported for week of reporting.

**Age80+**

Field: Age80+

Coding: Numeric

Number of confirmed cases in age group 80+ years, newly reported for week of reporting.

**AgeUNK**

Field: AgeUNK

Coding: Numeric

Number of confirmed cases with unknown age, newly reported for week of reporting.

**Deaths00<02**

Field: Deaths00&lt;02

Coding: Numeric

Number of deaths among confirmed cases in age group 0&lt;2 years, newly reported for week of reporting

**Deaths02-04**

Field: Deaths02-04

Coding: Numeric

Number of deaths among confirmed cases in age group 2-4 years, newly reported for week of reporting

**Deaths05-14**

Field: Deaths05-14

Coding: Numeric

Number of deaths among confirmed cases in age group 5-14 years, newly reported for week of reporting

**Deaths15-24**

Field: Deaths15-24

Coding: Numeric

Number of deaths among confirmed cases in age group 15-24 years, newly reported for week of reporting

**Deaths25-49**

Field: Deaths25-49

Coding: Numeric

Number of deaths among confirmed cases in age group 25-49 years, newly reported for week of reporting

**Deaths50-64**

Field: Deaths50-64

Coding: Numeric

Number of deaths among confirmed cases in age group 50-64 years, newly reported for week of reporting

**Deaths65-79**

Field: Deaths65-79

Coding: Numeric

Number of deaths among confirmed cases in age group 65-79 years, newly reported for week of reporting

**Deaths80+**

Field: Deaths80+

Coding: Numeric

Number of deaths among confirmed cases in age group 80+ years, newly reported for week of reporting

**DeathsUNK**

Field: DeathsUNK

Coding: Numeric

Number of deaths among confirmed cases with unknown age, newly reported for week of reporting

**Hospitalised**

Field: Hospitalised

Coding: Numeric

Number of new confirmed cases hospitalised for the week of reporting

**Ventilated**

Field: Ventilated

Coding: Numeric

Number of cases treated with mechanical ventilation or ECMO or admitted in intensive care unit (ICU) for the week of reporting (ie total number being ventilated, under ECMO or in ICU during the reporting week)

**Discharged**

Field: Discharged

Coding: Numeric

Number of confirmed cases discharged from hospital for the week of reporting

**Number of cases**

Field: NumberOfCases

Coding: Numeric

Total number of all confirmed cases for the week of reporting

**Sex ratio for cases**

Field: SexRatio

Coding: Numeric

Percentage of male cases

**Number of deaths**

Field: NumberOfDeaths

Coding: Numeric

Total number of deaths among confirmed cases for the week of reporting

**Sex ratio for deaths**

Field: SexRatioDeaths

Coding: Numeric

Percentage of male among deaths

**Tested all**

Field: TestedAll  
Coding: Numeric  
Total number of ALL tests for COVID-19 infection performed during the week of reporting

**Description of SARI surveillance system**

Field: DescriptionSARI  
Coding: Text  
Description of the SARI surveillance system in terms of case definition, hospitals and wards covered etc

**Tested SARI: Age00<02**

Field: TestedSARIAge00<02  
Coding: Numeric  
Number of tests for COVID-19 infection performed in hospitalised patients with severe acute respiratory infections aged 0<2 during the week of reporting

**Tested SARI: Age02-04**

Field: TestedSARIAge02-04  
Coding: Numeric  
Number of tests for COVID-19 infection performed in hospitalised patients with severe acute respiratory infections aged 2-4 during the week of reporting

**Tested SARI: Age05-14**

Field: TestedSARIAge05-14  
Coding: Numeric  
Number of tests for COVID-19 infection performed in hospitalised patients with severe acute respiratory infections aged 5-14 during the week of reporting

**Tested SARI: Age15-24**

Field: TestedSARIAge15-24  
Coding: Numeric  
Number of tests for COVID-19 infection performed in hospitalised patients with severe acute respiratory infections aged 15-24 during the week of reporting

**Tested SARI: Age25-49**

Field: TestedSARIAge25-49  
Coding: Numeric  
Number of tests for COVID-19 infection performed in hospitalised patients with severe acute respiratory infections aged 25-49 during the week of reporting

**Tested SARI: Age50-64**

Field: TestedSARIAge50-64  
Coding: Numeric  
Number of tests for COVID-19 infection performed in hospitalised patients with severe acute respiratory infections aged 50-64 during the week of reporting

**Tested SARI: Age65-79**

Field: TestedSARIAge65-79  
Coding: Numeric

Number of tests for COVID-19 infection performed in hospitalised patients with severe acute respiratory infections aged 65-79 during the week of reporting

**Tested SARI: Age80+**

Field: TestedSARIAge80+

Coding: Numeric

Number of tests for COVID-19 infection performed in hospitalised patients with severe acute respiratory infections aged 80+ during the week of reporting

**Tested SARI: Age unknown**

Field: TestedSARIAgeUNK

Coding: Numeric

Number of tests for COVID-19 infection performed in hospitalised patients with severe acute respiratory infections with unknown age during the week of reporting

**Tested SARI: Total**

Field: TestedSARITotal

Coding: Numeric

Total number of tests for COVID-19 infection performed in hospitalised patients with severe acute respiratory infections during the week of reporting

**Positive SARI: Age00<02**

Field: PositiveSARIAge00<02

Coding: Numeric

Number of positive tests for COVID-19 infection performed in hospitalised patients with severe acute respiratory infections aged 0<2 during the week of reporting

**Positive SARI: Age02-04**

Field: PositiveSARIAge02-04

Coding: Numeric

Number of positive tests for COVID-19 infection performed in hospitalised patients with severe acute respiratory infections aged 2-4 during the week of reporting

**Positive SARI: Age05-14**

Field: PositiveSARIAge05-14

Coding: Numeric

Number of positive tests for COVID-19 infection performed in hospitalised patients with severe acute respiratory infections aged 5-14 during the week of reporting

**Positive SARI: Age15-24**

Field: PositiveSARIAge15-24

Coding: Numeric

Number of positive tests for COVID-19 infection performed in hospitalised patients with severe acute respiratory infections aged 15-24 during the week of reporting

**Positive SARI: Age25-49**

Field: PositiveSARIAge25-49

Coding: Numeric

Number of positive tests for COVID-19 infection performed in hospitalised patients with severe acute respiratory infections aged 25-49 during the week of reporting

**Positive SARI: Age50-64**

Field: PositiveSARIAge50-64

Coding: Numeric

Number of positive tests for COVID-19 infection performed in hospitalised patients with severe acute respiratory infections aged 50-64 during the week of reporting

**Positive SARI: Age65-79**

Field: PositiveSARIAge65-79

Coding: Numeric

Number of positive tests for COVID-19 infection performed in hospitalised patients with severe acute respiratory infections aged 65-79 during the week of reporting

**Positive SARI: Age80+**

Field: PositiveSARIAge80+

Coding: Numeric

Number of positive tests for COVID-19 infection performed in hospitalised patients with severe acute respiratory infections aged 80+ during the week of reporting

**Positive SARI: Age unknown**

Field: PositiveSARIAgeUNK

Coding: Numeric

Number of positive tests for COVID-19 infection performed in hospitalised patients with severe acute respiratory infections with unknown age during the week of reporting

**Positive SARI: Total**

Field: PositiveSARITotal

Coding: Numeric

Total number of positive tests for COVID-19 infection performed in hospitalised patients with severe acute respiratory infections during the week of reporting

**Tested sentinel: Total**

Field: TestedSentinel

Coding: Numeric

Number of tests for COVID-19 infection deriving from influenza sentinel surveillance based on ILI or ARI sampling in outpatients during the week of reporting

**Positive sentinel: Total**

Field: PositiveSentinel

Coding: Numeric

Number of positive tests for COVID-19 infection deriving from influenza sentinel surveillance based on ILI or ARI sampling in outpatients during the week of reporting