ESCV/ENPEN COVID-19 SURVEILLANCE ON SEROLOGICAL TESTING

Fields marked with * are mandatory.

QUESTIONNAIRE 1

YOUR DETAILS

* Name of your Institute:

* How would you classify your institution?
- ☐ National public health institute
- ☐ Regional public health institute
- ☐ Hospital virology or microbiology laboratory
- ☐ University laboratory or research unit
- ☐ Other please specify

Other, please specify

* City:

* Country:

* Job title:

* Email address:

BACKGROUND TO SARS-CoV-2 EPIDEMIOLOGY IN YOUR CONTEST

1. What was the case definition applied in your institution for a confirmed case of COVID-19?

2. Please estimate the number of confirmed ases of COVID-19 identified or reported at your institution between 1st March and 31st June 2020?

- ○ <10
- ○ 10-100
- ○ 101-1,000
- ○ 1,000-5,000
- ○ 5,000-10,000
- ○ >10,000

3. Which month were the highest number of cases detected?

- ○ February
- ○ March
- ○ April
- ○ May
- ○ June

MITIGATION STRATEGY APPLIED

4. Were any mitigation strategies applied to reduce the number of new SARS-CoV-2 infections?

- ○ Yes
- ○ No

4a. What actions were undertaken as mitigation strategy and how long these were applied to?

Outbreak / increased number of cases	February	March	April	May	June
A national lockdown was undertaken	☐	☐	☐	☐	☐
A regional lockdown was undertaken	☐	☐	☐	☐	☐
Local lockdown was undertaken where a new outbreak was identified	☐	☐	☐	☐	☐
Schools were closed in regions where an outbreak was identified	☐	☐	☐	☐	☐
Restaurant were closed in regions where an outbreak was identified	☐	☐	☐	☐	☐
Other, please specify	☐	☐	☐	☐	☐

Other, please specify

[   ]

5. Was a quarantine introduced to reduce the number of new SARS-CoV-2 infections?

- ○ Yes
- ○ No

5b. If "Yes", in which epidemiological circumstances did you require to start a quarantine and how long for?

	14 days	More than 14 days	Depending on swab test results of source patient	Depending on serology results of exposed individual
Known close contact with a confirmed SARS-CoV-2 case	☐	☐	☐	☐
Known close contact with a suspected SARS-CoV-2 case	☐	☐	☐	☐
Known travel in the European area with ongoing outbreak	☐	☐	☐	☐
Known travel in an extra European area with ongoing outbreak	☐	☐	☐	☐
Other (please specify)	☐	☐	☐	☐

Other, please specify

[   ]

SEROLOGICAL TESTING

6. Did your institution perform/have access to any serological SARS-CoV-2 results?

- ○ Yes
- ○ No

6a. If "No", is your institute planning a serological study on SARS-CoV-2 in the next few months?

- ○ Yes
- ○ No

Please specify which assay you have chosen and considering for serology:

[   ]

3

7. What is/are the target/s in your serological assay/es?

	ELISA	CLIA	LFA	Rapid test	IgG	IgM	IgA	Total Ig	Antigen S	Antigen N	Antigen RBD
Commercial assay	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
In-house assay	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Virus neutralisation assay	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Pseudotype assay	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Other	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐

Please provide the name for commercial assay(s) you have used:

Please provide the reference or details for your in-house assay:

Please provide reference or details for neutralisation assay used (i.e. cell line, virus strain and method [plaque assay, microneutralisation or other] used)

Please provide reference or details for pseudotype assay used (i.e. vector and cell line).

Please provide reference or details for other methods you may have used

8. Did you perform a validation/verification of the assay prior the use on clinical samples?

☐ Yes
☐ No
☐ Not applicable as our testing is performed elsewhere

8.a Why did you not perform a validation for your serological assay?

9. How many known positive and negative samples were included in validation/verification?

[blank text box]

10. Did you do any further work on seropositive samples (i.e. confirmation of result by another assay/ neutralising antibody testing etc…)?

[blank text box]

11. Why did your institute perform the SARS-CoV-2 serology? Please estimates the number of samples tested.

	Yes/Number of sample tested	No
For seroprevalance studies	☐	☐
For diagnostic purpose	☐	☐
To support convalescent plasma studies	☐	☐
To support larger studies	☐	☐
Other, please specify	☐	☐

Number of sample tested in serology studies:

[blank text box]

Number of sample tested for diagnostic purpose:

[blank text box]

Number of sample tested for convalescent plasma studies:

[blank text box]

Please specify which studies and estimate the number of samples tested:

Please, specify for which other reasons you performed SARS-CoV-2 serology and estimate the number of samples tested:

12. When do you perform SARS-CoV-2 serology? (multiple choice possible)
- ☐ To confirm past infection in those without SARS-CoV-2 PCR diagnosis
- ☐ To confirm past infection in those with negative SARS-CoV-2 PCR diagnosis
- ☐ To estimate the number of asymptomatic infections in outbreak situations
- ☐ To look for antibody response in immunocompromised individuals
- ☐ To prove immunity to SARS-CoV-2 infection
- ☐ Other, please specify

Other, please specify

13. What sample types are used for serological testing in your laboratory? (multiple choice applicable)
- ☐ Serum
- ☐ Plasma
- ☐ Saliva
- ☐ Other, please specify

Other, please specify

SPECIFIC QUESTIONS RELATING TO YOUR SEROPREVALENCE STUDIES

14. Did you perform **seroprevalence** studies?
- ☐ Yes

○ No

15. Please specify your study details filling the following table

	February	March	April	May	June	Still ongoing (Sep 2020)	Cohort study	Case-control study	Descriptive cross-sectional study	Convenient sampling
Population attending work /school	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Population attending hospitals /GP/ emergency room	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Blood donors	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Health care workers	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
General population	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Other, please specify	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐

Other, please specify

[ ]

15b. If the study was conducted on healthcare worker, please specify the criteria of inclusion:
- ○ We included all healthcare workers working in the hospital
- ○ We included only healthcare workers presenting symptoms
- ○ We included healthcare workers with a close contact with a SARS-CoV-2 positive case
- ○ We included healthcare workers actively working in a specific ward
- ○ Other, please specify

Please, specify which ward:

[ ]

Other, please specify

[ ]

16. Did you collect the following general information with serological testing /studies?

	Yes	No
Whether it was a laboratory confirmed infection	☐	☐
Asymptomatic/symptomatic infection	☐	☐
Data on severity of the infection	☐	☐
Outcome data	☐	☐
Presence of underlying disease	☐	☐
Date of symptoms onset	☐	☐
Date of sample collection	☐	☐
Date of diagnosis	☐	☐
Age	☐	☐
Other, please specify	☐	☐

Other, please specify

[ ]

16a. What outcome data you collected for SARS-CoV-2 infection in your seroprevalence studies? (multiple choice applicable)

- ☐ Fully recovered
- ☐ Recovered but SARS-CoV-2 RNA still detected by PCR
- ☐ Death
- ☐ Long-term respiratory issues
- ☐ Long-term cardiac issues
- ☐ Long-term tiredness
- ☐ Long-term neurological issues
- ☐ Other, please specify

Other, please specify

[ ]

16b. What information on severity of SARS-CoV-2 infection you collected? (multiple choice applicable)

- ☐ Not hospitalised
- ☐ Hospitalised but not in intensive care
- ☐ Intensive care
- ☐ Not known
- ☐ Length of hospitalisation
- ☐ Other, please specify

Other, please specify

[ ]

16c. What risk groups you have considered in your studies?

- ☐ Hypertension
- ☐ Diabetes
- ☐ Cardiovascular disease
- ☐ Chronic respiratory disease
- ☐ Chronic kidney disease (i.e. haemodialysis patients)
- ☐ Immune compromised
- ☐ Cancer
- ☐ Obesity
- ☐ Other, please specify

Other, please specify

16d. What age groups you have included in your work? (more than one choice applicable)
- [ ] 0-4 years
- [ ] 5-9 years
- [ ] 10-19 years
- [ ] 20-59 years
- [ ] 60-74 years
- [ ] 75-90 years
- [ ] >90 years

17. Would you be willing to share your data?
- [ ] Yes
- [ ] No

Thank you for participating to the questionnaire. Please, feel free to share your comments and suggestions. Please complete also the second shorter questionnaire on **prolonged SARS-CoV-2 infection** and let us know whether you would be interested participating to our planned hospital-based pilot surveillance on prolonged SARS-CoV-2 infection.

Thank you, 5.1.2e on the behalf of of ENPEN and ESCV.