Participant ID:	HVTN 405/HPTN 1901	Visit Code:
articipant ib.	110 110 700/111 110 1501	VISIL OCCC.

Did the participant experience any COVID-19 symptoms?	Yes
	No
if "No", end of form.	
What was the date of onset of symptoms?	
Total duration of acute symptoms	Fixed Unit: # days
During the illness, did the participant experience any of the following?	
Fever	Yes
S INITED AND IN LINE COURT OF THE PROPERTY OF	No.
if "No" or "Unknown", go to Dyspnea with exertion	Unknown
	Olklowii
Duration of symptom	Fixed Unit: # days
Maximum temperature	Fixed Unit: C
	Tixed offic. C
Respiratory/Cardiac	
Dyspnea with exertion	Yes
if "No" or "Unknown", go to Dyspnea at rest	No
	Unknown
Does symptom persist after COVID-19 resolution?	Yes O
boes symptom persist after COVID-13 resolution:	$\subseteq$
	No
Duration of symptom	Fixed Unit: # days
Dyspnea at rest	Yes
if "No" or "Halmoura", go to Cough	No
if "No" or "Unknown", go to Cough	Unknown
Does symptom persist after COVID-19 resolution?	Yes
	No
Duration of symptom	Fixed Unit: # days
	Yes
	No
if "No" or "Unknown", go to Hemoptysis	Unknown
	Olikilowii
Does symptom persist after COVID-19 resolution?	Yes
	No
Duration of symptom	Fixed Unit: # days
	Yes
f "No" or "Unknown", go to Sputum production	No

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	Unknown
	GIIKIIOWII
Does symptom persist after COVID-19 resolution?	Yes
	No
Duration of symptom	Fixed Unit: # days
	Yes
	$\subseteq$
if "No" or "Unknown", go to Chest pain	No Unknown
	GIIKIIOWII
Does symptom persist after COVID-19 resolution?	Yes
	No
Duration of symptom	Fixed Unit: # days
——Chest pain	Yes
CONTROL OF THE CONTRO	No
if "No" or "Unknown", go to Unable to sleep lying down	Unknown
Door symptom partiet after COVID 10 resolution?	Vas O
Does symptom persist after COVID-19 resolution?	Yes
	No
Duration of symptom	Fixed Unit: # days
	Yes
	No
if "No" or "Unknown", go to Rhinorrhea/nasal congestion	Unknown
Does symptom persist after COVID-19 resolution?	Yes
	No O
Duration of symptom	Fixed Unit: # days
HEENT	
Rhinorrhea/nasal congestion	Yes
f "No" or "University" se to Core threat	No
if "No" or "Unknown", go to Sore throat	Unknown
	OTIKIOWIT
Does symptom persist after COVID-19 resolution?	Yes
	No
Duration of symptom	Fixed Unit: # days
Sore throat	Yes
CHAIR AND	No
if "No" or "Unknown", go to Anosmia (loss of smell)	Unknown

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Does symptom persist after COVID-19 resolution?	Yes
	No
Duration of symptom	Fixed Unit: # days
Anosmia (loss of smell)	Yes
If "No" or "Unknown", go to Ageusia (loss of taste)	No
1. No of animality go to rigidadia (loss of taste)	Unknown
Does symptom persist after COVID-19 resolution?	Yes
	No
Duration of symptom	Fixed Unit: # days
Ageusia (loss of taste)	Yes
If "No" or "Unknown", go to Anorexia	No O
	Unknown
Does symptom persist after COVID-19 resolution?	Yes
	No
Duration of symptom	Fixed Unit: # days
Gastrointestinal	
Anorexia	Yes
If "No" or "Unknown", go to Nausea or vomiting	No
	Unknown
Does symptom persist after COVID-19 resolution?	Yes
	No
Duration of symptom	Fixed Unit: # days
Nausea or vomiting	Vos
-	Yes No
If "No" or "Unknown", go to Diarrhea	Unknown
Does symptom persist after COVID-19 resolution?	<u>U</u>
Does symptom persist after COVID 15 resolution.	Yes No
Duration of symptom	Fixed Unit: # days
Duration of Symptom	Tixed Offic. # days
Diarrhea	Yes
If "No" or "Unknown", go to Abdominal pain	No
	Unknown
Does symptom persist after COVID-19 resolution?	Yes
	_

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	No
Duration of symptom	Fixed Unit: # days
Abdominal pain	Yes
If "No" or "Unknown", go to Fatigue	No
	Unknown
Does symptom persist after COVID-19 resolution?	Yes
	No
Duration of symptom	Fixed Unit: # days
General ———	
Fatigue	Yes
If "No" or "Unknown", go to Myalgia	No
	Unknown
Does symptom persist after COVID-19 resolution?	Yes
	No
Duration of symptom	Fixed Unit: # days
Myalgia	Yes
If "No" or "Unknown", go to Headache	No
	Unknown
Does symptom persist after COVID-19 resolution?	Yes
	No
Duration of symptom	Fixed Unit: # days
Headache	Yes
If "No" or "Unknown", go to Confusion/mental status changes	No
	Unknown
Does symptom persist after COVID-19 resolution?	Yes
	No
Duration of symptom	Fixed Unit: # days
Confusion/mental status changes	Yes
If "No" or "Unknown", go to Chills	No
	Unknown
Does symptom persist after COVID-19 resolution?	Yes
	No

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Duration of symptom	Fixed Unit: # days
Chills	Yes
If "No" or "Unknown", go to New skin findings attributable to	No
COVID-19	Unknown
Does symptom persist after COVID-19 resolution?	Yes
	No
Duration of symptom	Fixed Unit: # days
 Dermatalogical	
New skin findings attributable to COVID-19	Yes
If "No", go to Other	No
i No , go to other	Unknown
Specify (max 200 characters):	
Does symptom persist after COVID-19 resolution?	Yes
	No
Duration of symptom	Fixed Unit: # days
Other	
Other COVID-19 symptom	Yes
If "Yes", specify up to 3 symptoms below.	No
If "No", end of form.	
Specify (max 200 characters):	
Does symptom persist after COVID-19 resolution?	Yes
	No C
Duration of symptom	Fixed Unit: # days
Specify (max 200 characters):	
Does symptom persist after COVID-19 resolution?	Yes
	No
Duration of symptom	Fixed Unit: # days
Specify (max 200 characters):	
Does symptom persist after COVID-19 resolution?	Yes
· · · · · · · ·	No
Duration of symptom	Fixed Unit: # days