



Appendix G8 Cover Sheet

Protocol Title	All of Us Research Program <u>C</u> Ovid-19 <u>P</u> articipant <u>E</u> xperience (COPE) Survey (PPI)
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Appendix G8: COvid-19 Participant Experience (COPE) Survey

English language version

What should I know before participating?

The All of Us Research Program is interested in understanding the changes in your experiences and health during the time of the coronavirus disease 2019 (COVID-19) pandemic. Help us learn more by completing this survey. Participating in this survey may help researchers around the world understand better the impact of COVID-19 during this challenging time. The All of Us Research Program will repeat this survey throughout the pandemic.

The questions in this survey may be sensitive and may cause worry or anxiety. Remember your privacy is very important to us. Your name and identity will be separated from your answers before information is shared with approved researchers.

No one will monitor your answers in real time. But, based on your answers, the system may suggest free phone and text resources to help you.

You can choose not to answer any question at any time. This survey will take approximately 15 to 20 minutes to complete.

Yes, I still want to take the survey.

No, I do not want to take the survey.

Intro Text:

Please answer each question as honestly as possible. We are looking for your own answers, and not what you think your doctors, family, or friends want you to say.

Don't feel like you must spend a long time on each question. The first answer that comes to you is usually the best one. If you aren't sure how to answer a question, choose the best answer from the options given. Some questions also let you say if you don't know an answer or would rather not answer. Some of the questions may be sensitive. You can choose not to answer any question.

Outro Text:

In times of stress, it's important to take care of yourself. Taking short breaks throughout the day to get fresh air and connect with loved ones (while practicing social distancing guidelines) are good for your mental health and well-being.

Section 3: COVID-19 Related Testing

The next questions ask about your experiences with testing related to COVID-19 symptoms in the past month.

<p>CDC/NIH Common Data Element bank and COPE Consortium Tool/C-19 App</p>	<p>Were you tested for novel coronavirus (COVID-19)?</p> <p>Yes No Unknown</p>	<p>Were you tested for COVID-19 in the past month?</p> <p>Yes No Unknown</p>	<p>New Question</p>
	<p>If 'Yes' or 'Unknown', ask: Was the test for novel coronavirus positive?</p> <p>Yes No Unknown Waiting for results</p> <p>How were you tested?</p> <p>Nasal swab Throat Swab Blood Sample</p>	<p>Branching logic: If 'Yes' ask: Was the test for COVID-19 positive?</p> <p>Yes No Unknown Waiting for results</p> <p>Branching logic: If 'Yes' ask: How were you tested? Please select all that apply.</p> <p>Nasal swab Throat Swab Blood Sample</p>	

CDC/NIH Common Data Element bank	Were you tested for influenza? Yes No Unknown	Were you tested for influenza (flu) in the past month? Yes No Unknown	New Question
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