



Data Collection Worksheet

Please Note: The Data Collection Worksheet (DCW) is a tool to aid integration of a PhenX protocol into a study. The PhenX DCW is not designed to be a data collection instrument. Investigators will need to decide the best way to collect data for the PhenX protocol in their study. Variables captured in the DCW, along with variable names and unique PhenX variable identifiers, are included in the PhenX Data Dictionary (DD) files.

1. Do you currently wear a mask at work?

No

Yes, during contact with patients with known or suspected COVID-19

Yes, at all times

1a. [If 1 = Yes] Please indicate the mask type:

Powered air-purifying respirator (PAPR)

N95 respirator

Surgical mask

Surgical mask for low risk followed by N95/PAPR for known or suspected COVID19

Another type

2. During the last day you were at work, how much of a problem did you have getting appropriate access to the following types of PPE?

	No problem	Small problem	Big problem	Not applicable to me
Respiratory mask (e.g., N95, KN95, or other)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Surgical mask	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Powered air purifying respirator (PAPR)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Face shield/goggles	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gloves	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gowns	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hand sanitizer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Soap	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cleaning/disinfecting products	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. During the last day you were at work, for how many patients did you have to re-use the same N95/KN95 mask respirator or surgical mask when you would have otherwise used a new mask?

- Did not have patient contact
- None (1 mask per patient)
- Some patients
- Most patients
- All patients

Protocol source: <https://www.phenxtoolkit.org/protocols/view/930301>