

Confidential

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Short questionnaire for the enrollment center participating to the project entitled 'Prevalence of SARS-CoV-2 positivity in infants with bronchiolitis'

Thank you for your participation in the project entitled: 'Prevalence of SARS-CoV-2 positivity in infants with bronchiolitis'. Please complete the short questionnaire on your enrollment center

Should you encounter any problem with the completion of the questionnaire, please contact Dr. Giangreco Manuela at manuela.giangreco@burlo.trieste.it

Thank you for your cooperation.

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- 1) Name, Surname and full affiliation of the research center contact person (All in lower case and separated by commas)
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- 2) Enrollment center (All in lower case with consistent wording)
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- 3) Number of visits in the Pediatric ED (Emergency Department) during the study period (1 October 2020 - 30 April 2021) (in numbers)
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- 4) Number of visits in the Pediatric ED in the period 1 October 2018 - 30 April 2019 (in numbers)
-
- 5) Number of visits in the Pediatric ED in the period 1 October 2019 - 30 April 2020 (in numbers)
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- 6) Number of episodes of bronchiolitis in the period 1 October 2018 - 30 April 2019 (in numbers)
-
- 7) Number of episodes of bronchiolitis in the period 1 October 2019 - 30 April 2020 (in numbers)
-
- 8) Number of visits in the Pediatric ED of children aged < 1 year during the study period (1 October 2020 - 30 April 2021) (in numbers)
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- 9) Number of visits in the Pediatric ED of children aged < 1 year and COVID-19 (SARS-CoV-2) positive during the study period (1 October 2020 - 30 April 2021) (in numbers)