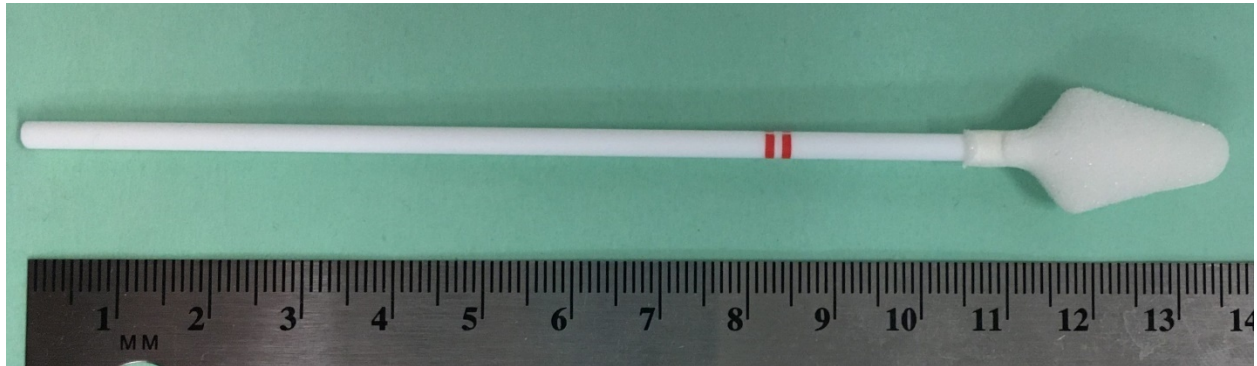
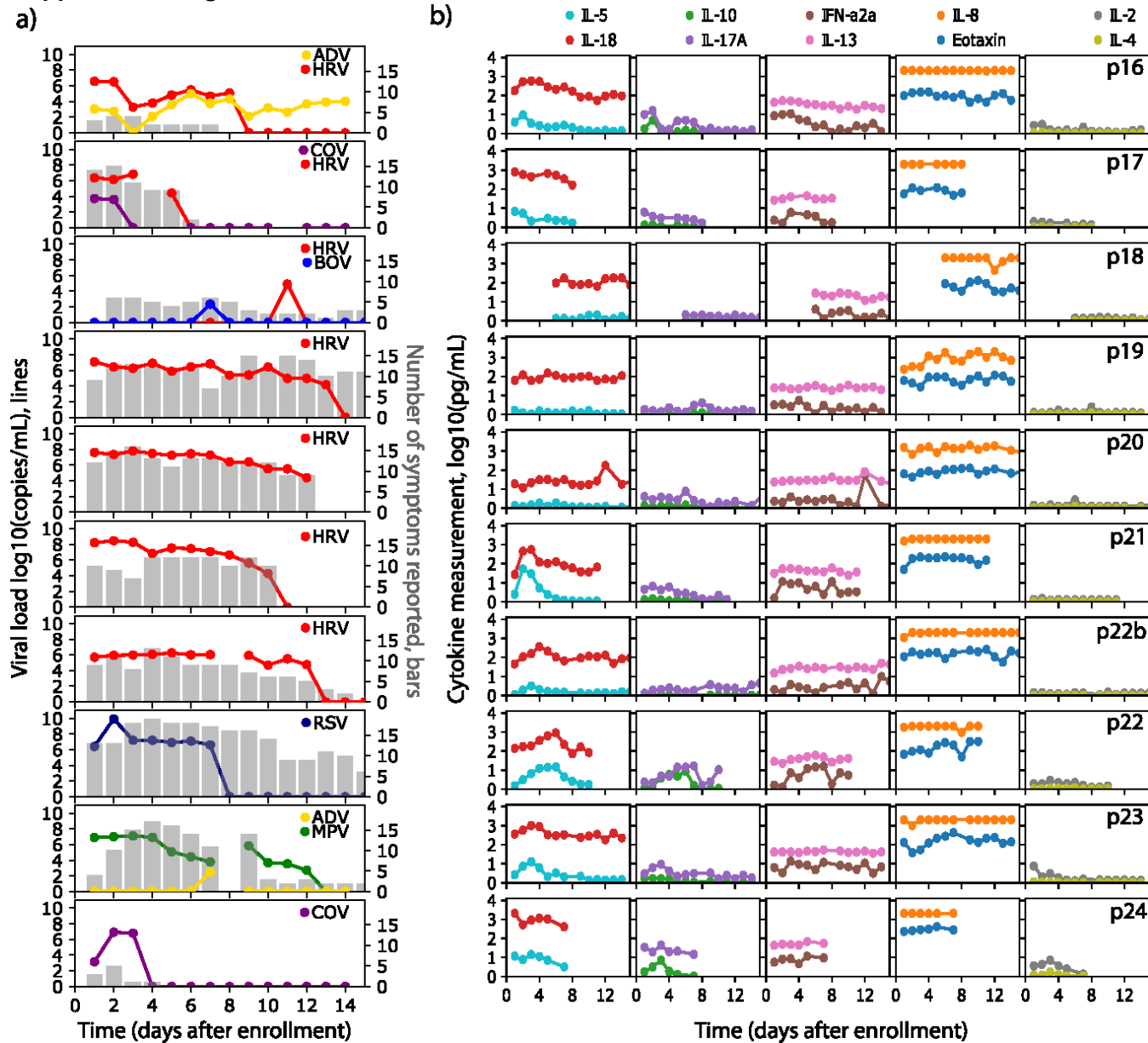


Supplemental Figure 1

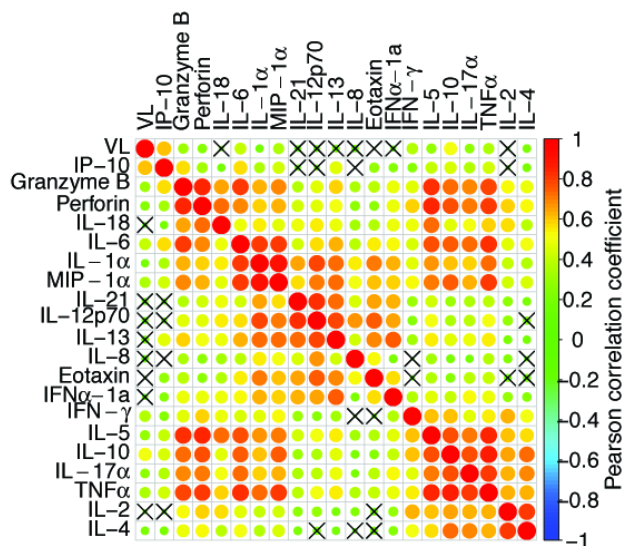


Supplemental Figure 2

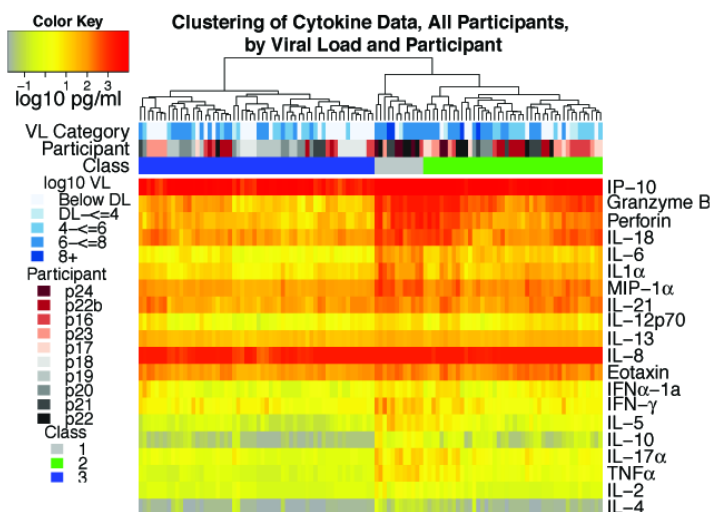


Supplemental Figure 3

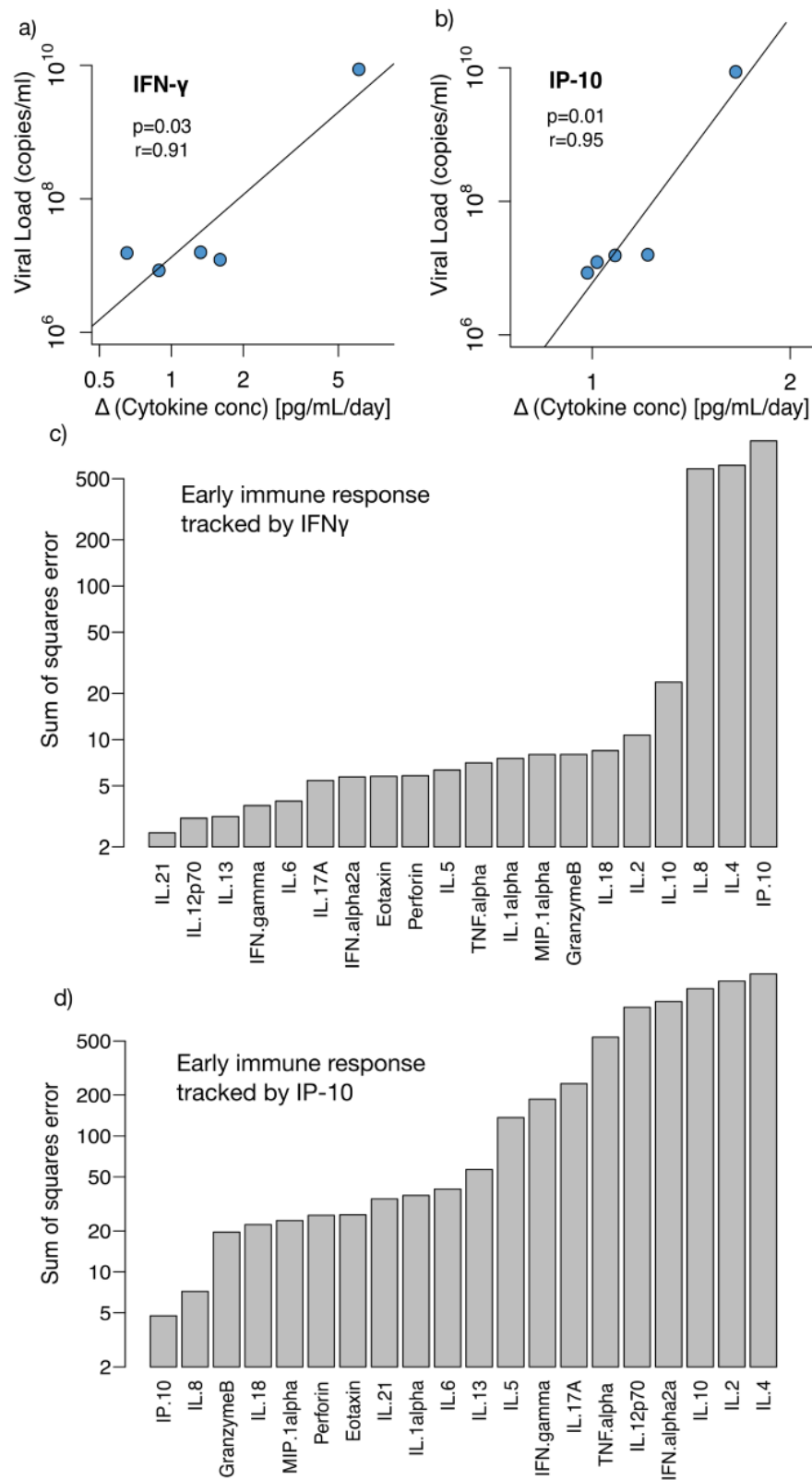
a)



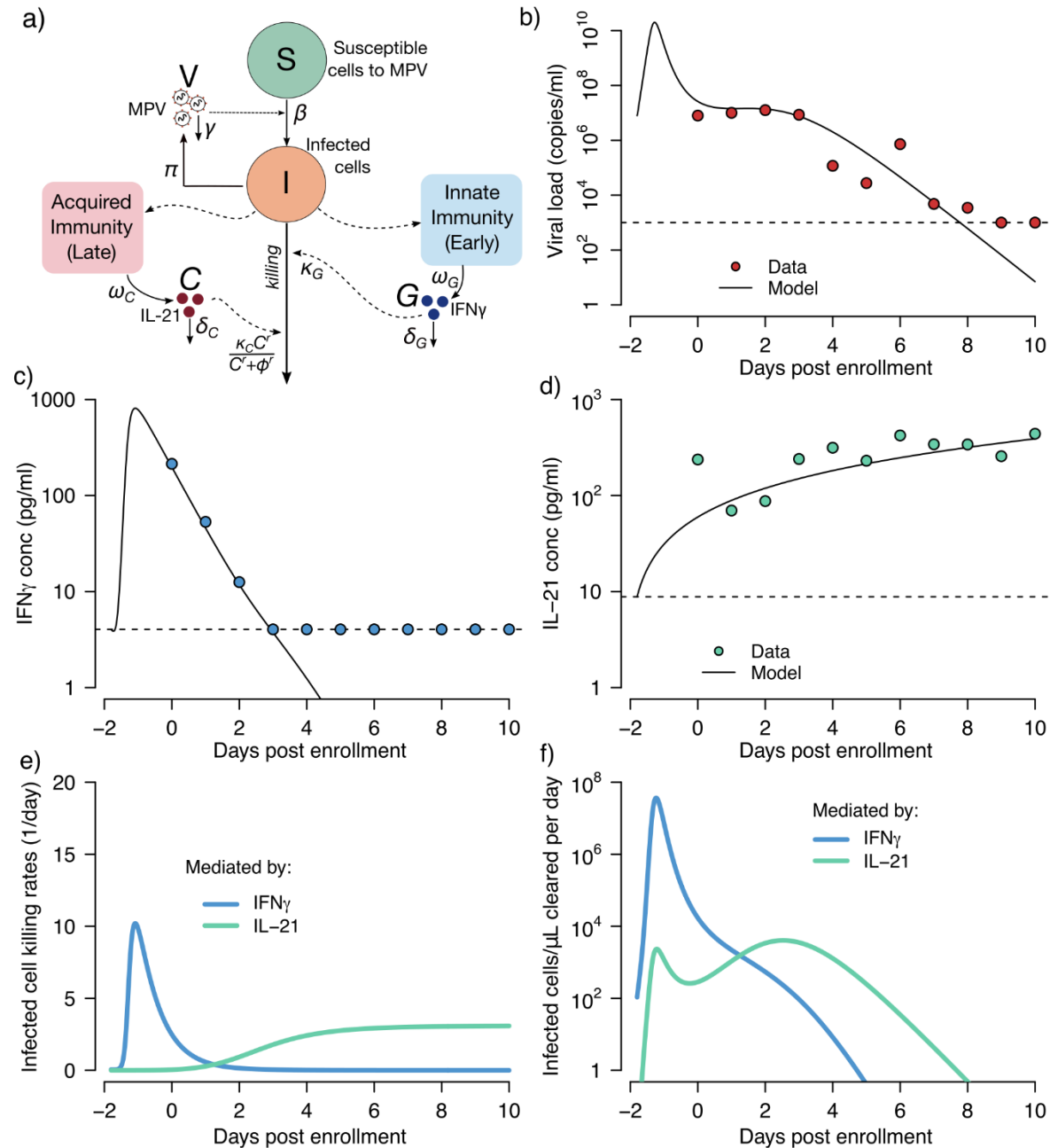
b)



Supplemental Figure 4



Supplemental Figure 5



Supplemental Table 1: Symptom survey administered at enrollment (foam vs flocked swab comparison study) and daily (longitudinal sampling study).

Symptom Category	Specific symptom
Nose	Runny nose
	Congestion
	Post-nasal drip
	Sinus Pain
	Sneezing
Eyes	Watery/burning eyes
Ears	Ear pain
Throat	Sore throat
	Hoarseness
Chest	Cough
	Phlegm production
	Wheezing or chest tightness
	Shortness of breath
	Chest pain
Gastrointestinal	Diarrhea
	Nausea
	Stomach pain
	Vomiting
General	Fatigue
	Fever
	Chills
	Headache
	Aching muscles
Sleep Changes	Sleep Disruption
Sensory Changes	Change in smell
	Change in taste

Supplemental Table 2A: Foam versus foam swab concordance in left nostril.

	Flocked Swab			
		Positive	Negative	Total
Foam Swab	Positive	4	2	6
	Negative	2	7	9
	Total	6	9	15

Supplemental Table 2B: Foam versus foam swab concordance in right nostril.

	Flocked Swab			
		Positive	Negative	Total
Foam Swab	Positive	5	3	8
	Negative	1	6	7
	Total	6	9	15

Supplemental Table 2C: Foam versus foam swab concordance with results from left and right nostril combined.

	Flocked Swab			
		Positive	Negative	Total
Foam Swab	Positive	9	5	14
	Negative	3	13	16
	Total	12	18	30