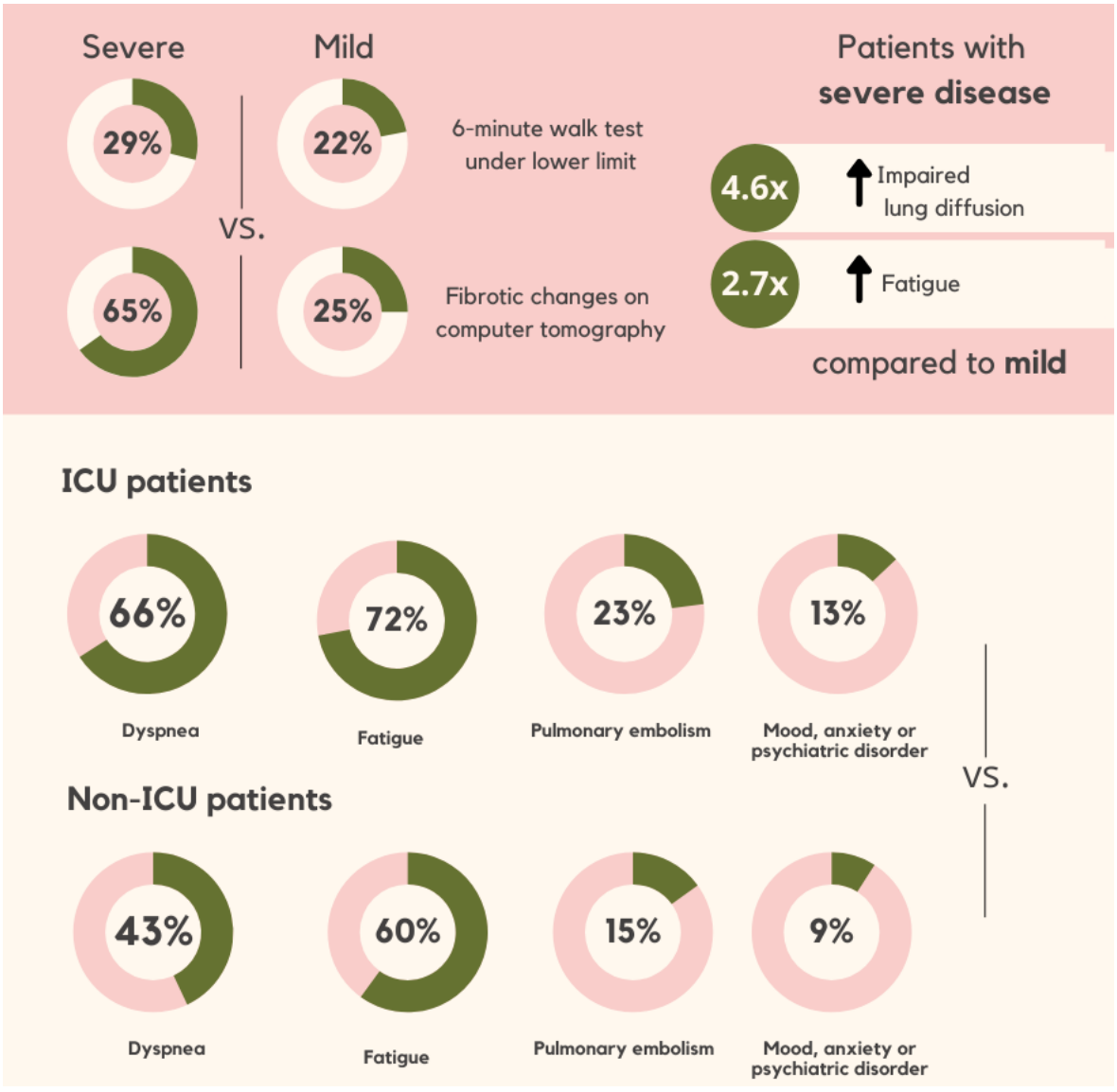
Supplemental Table 1: Timeline and categories of acute and post-acute COVID-19 as defined by different organizations.

System	Name(s) used for post-acute COVID-19	Severity classification of acute COVID-19	Timeline of post-acute COVID-19	Systemic or symptomatic subcategories of post-acute COVID-19
Center for Disease Control and Prevention [1,2]	Post-acute hyperinflammatory illness (PHI); late sequelae (LS)	Mild to moderate: 81% Mild symptoms up to pneumonia Severe: 14% Dyspnea, hypoxia, or more than 50% lung Involvement on imaging Critical: 5% Respiratory failure, shock, or multiorgan system dysfunction	Week 0: symptom onset Week 2: PHI includes MIS-C and MIS-A Week 4: LS	PHI- Viral test (+/-) and antibody (+) Gastrointestinal, cardiovascular, dermatological/mucocutaneous, respiratory, neurological, musculoskeletal LS- No characterized profile Cardiovascular, pulmonary, neurological, and psychiatric
National Institute of Health [3]	Long-COVID; post-acute sequelae of COVID (PASC); long haulers	Asymptomatic: Viral test (+) or antibody (+) symptom (-) Mild: Viral test (+) or antibody (+) symptom (+, - dyspnea, SOB, imaging) Moderate: Viral test (+) or antibody (+) symptom (+) (SpO2) ≥94% on room air at sea level Severe: Viral test (+) or antibody (+) symptom (+) (SpO2) ≤ 94% on room air at sea level, PaO2/FiO2) <300 mm Hg, respiratory frequency >30 breaths/min, or lung infiltrates >50% Critical: Viral test (+) or antibody (+) symptom (+)	Sequelae that extend > 4 weeks after initial infection	Fatigue, cardiopulmonary, neuropsychiatric,

		Respiratory failure, septic shock, multiple organ dysfunction		
World Health Organization [4]	Post-COVID condition; chronic COVID syndrome; late sequelae of COVID-19; long COVID; long haul COVID; long-term COVID-19. post-COVID syndrome; post-acute COVID-19; post-acute sequelae of SARS-CoV-2 infection	Mild: exposure (day 0), symptom onset (day 5-6), recovery (week 2) Severe: exposure (day 0), symptom onset (day 5-6), recovery (week 6)	Any symptom that lasts for weeks to months after recovery from acute illness	Cardiovascular, respiratory, dermatologic, neurologic, psychiatric
European Centre for Disease Prevention and Control [5]	post-acute COVID-19; chronic COVID-19; sub-acute or ongoing symptomatic COVID-19; post-COVID condition; long COVID	Mild: no hospitalization or advanced care but still symptomatic Severe: Prolonged viral shedding, increased viral load, prolonged symptoms more common, requires hospitalization or advanced care	Week 0: symptom onset Week 3: post-acute COVID-19 Week 4 to 12: sub-acute or ongoing symptomatic COVID-19 Week 12+: chronic COVID-19	Respiratory, cardiovascular, neuropsychiatric, endocrine, gastrointestinal, renal, and skin

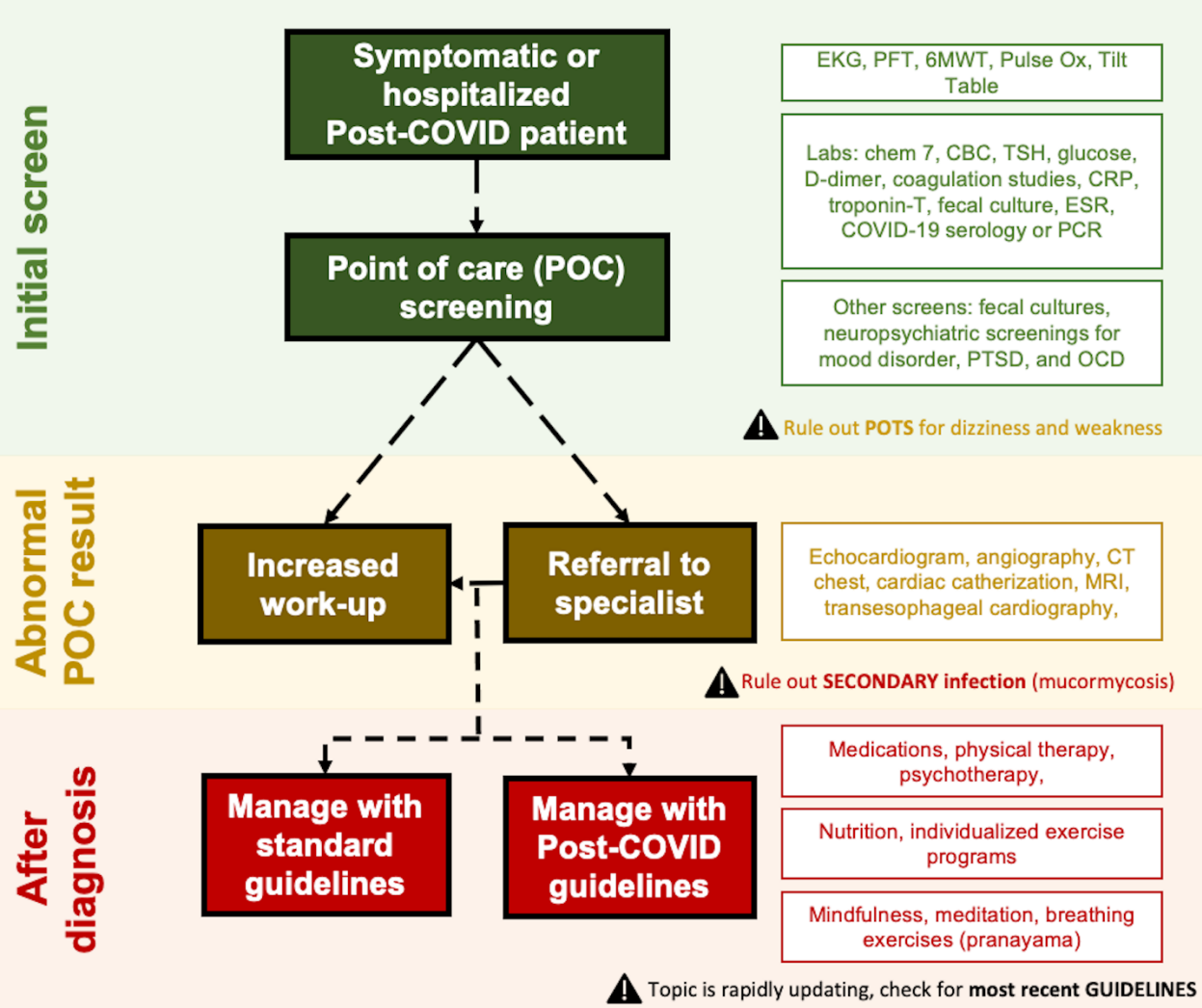
a FiO2, fraction of inspired oxygen; MIS-A, Multisystem inflammatory syndrome in adults; MIS-C, Multisystem inflammatory syndrome in children; PaO2, partial pressure of oxygen; SpO2, oxygen saturation

Supplemental Figure 1: Effect of severe disease and ICU admission on post-COVID symptom prevalence.[6–10] Images created with open-source images from Canva® (https://www.canva.com)



a ICU, intensive care unit

Supplemental Figure 2: Triage at time of initial follow-up for post-acute COVID-19. Images created using Microsoft® PowerPoint®



a 6MWT, 6-minute walk test; CBC, complete blood count; CT, computerized tomography; EKG, electrocardiogram; ESR, erythrocyte sedimentation rate; MRI, magnetic resonance imaging; OCD, obsessive compulsive disorder; PCR, polymerized chain reaction; PFTS, pulmonart function tests; PTSD, post-traumatic stress disorder; Pulse Ox, pulse oxygen; TSH, thyroid stimulating hormone

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