

**Supplementary Figure S1. Diagram flow for triage and screening of suspected COVID-19 cases in ambulatory clinics.** At entry of each clinic we implemented a triage to all HCW that includes measuring body temperature, looking for fever ( $T \geq 38^{\circ}\text{C}$ ), and asking for COVID-19 related symptoms (\*) in the last 24 hrs. Such as fever, cough, breath difficulty, chest pain, body pain, chills, anosmia and ageusia.

**Supplementary Table S1. Questionnaire for detection of COVID-19 suspicious cases by EpiSD app**

<b>Triage by EpiSD tool from COVID-19 control program</b>	
1.	Name
2.	Registration date
3.	Birth date
4.	Clinic's affiliation
5.	Job
6.	Phone
7.	Have you been in touch with someone confirmed with COVID-19?
8.	Have you been in touch with someone suspected of COVID-19?
9.	Have you had a fever greater than 38 degrees?
10.	Have you had a constant, dry cough?
11.	Have you had trouble breathing?
12.	Have you had a loss of smell?
13.	Have you had a loss of taste?
14.	Have you had a headache?
15.	Have you had a runny nose?
16.	Have you had muscular pain?
17.	Have you had a loss of taste?
18.	Have you had conjunctivitis?
19.	Have you had pain when swallowing?
20.	Have you had diarrhea?
21.	What was the date of onset of symptoms?

**Supplementary Table S2. Questionnaire for epidemiologic study**

<b>Epidemiological information of COVID-19 positive cases</b>	
1.	Case number
2.	Sex
3.	Age
4.	Birth date
5.	State of Residence
6.	Clinic's affiliation
7.	Job
8.	Have you previously received the influenza vaccine?
9.	Are you pregnant or breastfeeding?
10.	What was the date of onset of symptoms?
11.	What was the sampling date?
12.	Do you receive PCR or rapid antigen test?
13.	How many tests have you received?
14.	Have you been in touch with someone confirmed with COVID-19?
15.	<b>Have you had any of the following comorbidities?</b>
	Hypertension
	Diabetes
	Obesity
	Hyper/
	Hypothyroidism
	Asthma
	Arthritis
	Cardiac disease

Cancer  
Renal insufficiency  
HIV  
Pulmonary hypertension  
COPD  
Lupus  
Hepatic insufficiency  
Smoking

**16. Have you had any of the following symptoms?**

Headache  
Myalgia or Arthralgia  
Sore throat  
Cough  
Runny nose  
Fever  
Chills  
Diarrhea  
Breath difficulty/Chest pain  
Chest pain  
Abdominal pain  
Conjunctivitis  
Anosmia  
Ageusia  
Vomit

**17. Wich of the following protective equipment (PPE) you use?**

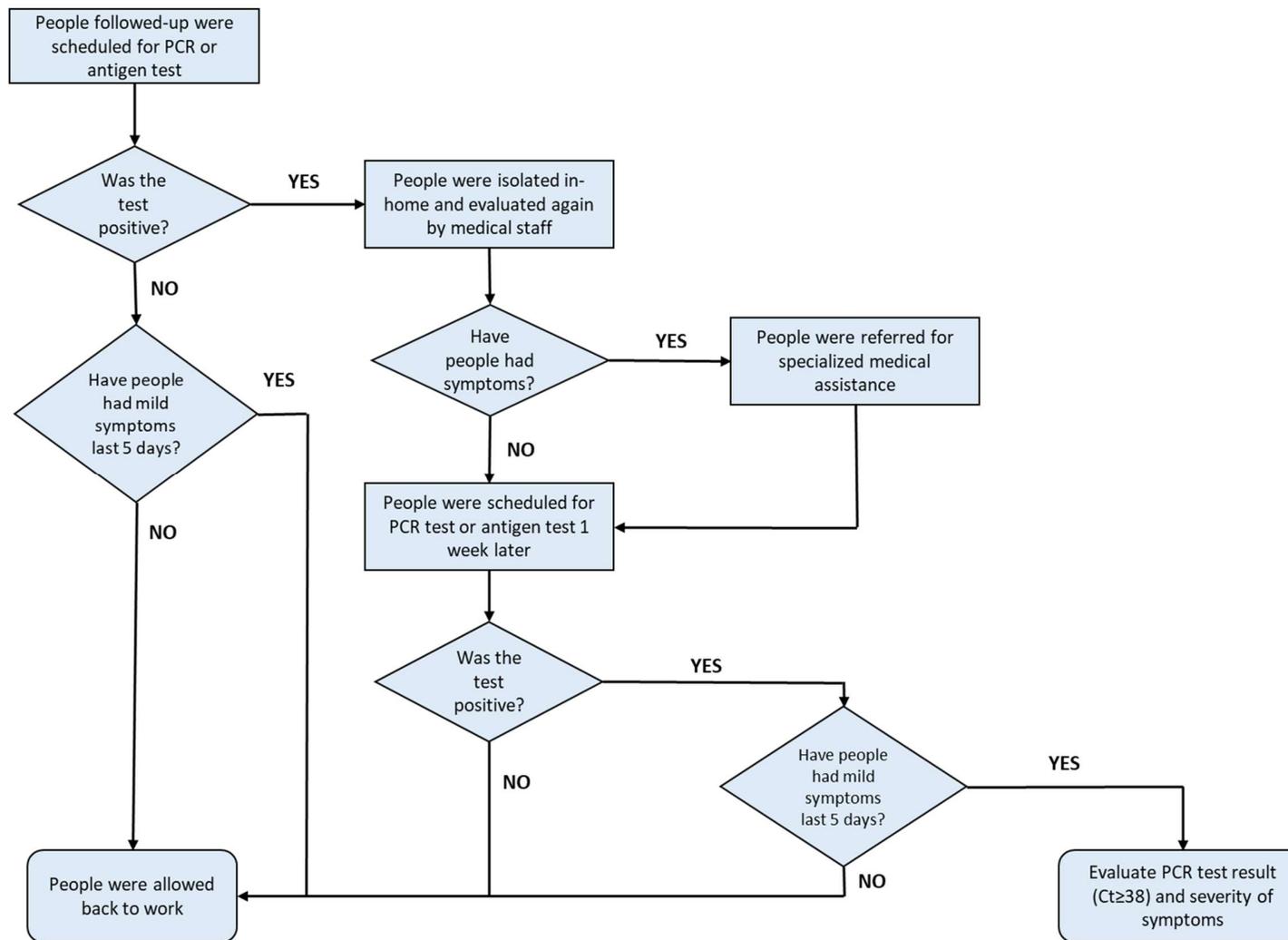
Face mask  
Mask  
N95  
Hand gel  
Gloves  
Disposable gown  
Shoe cover

**18. Wich of the following training programs did you receive?**

Hand washing  
Work area disinfection  
Use of mask  
Use of antibacterial gel  
Use of face mask  
COVID-19 symptoms recognition

**19. Through what media did you receive your training?**

Institutional website  
Platform Universidad Salud Digna  
Video recording  
Videocall  
Slide presentation  
Institutional statement  
Email



**Supplementary Figure S2. Diagram flow to discharge follow-up cases and back to work.**

COVID-19 cases were followed-up till 14 days after symptoms onset, then were scheduled for PCR test or rapid antigen test. We used a combination of test results and the presence of mild symptoms to make discharge criteria.



**Supplementary Figure S3. Examples in Spanish of a dashboard for analysis of epidemiological information and the follow-up cases.** These examples correspond to a dashboard from general information showing: the total of cases registered, daily incidence, the geographic distribution, type of job (first-line HCW and non-first-line HCW) and source of contagion (upper panel); Clinic, status of cases, symptoms, sex, and medical opinion (lower panel) (Dashboard retrieved 30<sup>th</sup> August, 2021).