HCW	Department week prior to start symptoms	Self-reported transmission event	Self-reported risk event	Self-reported source of infection
I03	Night shift	Household contact	None	Household contact
I10	ER	Unknown	None	Colleague
I06	COVID ward	Unknown	None	Colleague
I04	COVID ward	Unknown	Unprotected patient contact	Unknown
I08	COVID ward & ER	Nosocomial	None	Colleague
I07	COVID ward & ER	Nosocomial	None	Colleague
I09	Unknown	Nosocomial	None	Colleague
I05	COVID ward	Nosocomial	None	Colleague
I02	COVID ward	Unknown	Unprotected patient contact	Patient or colleague
I01	Night shift	Nosocomial	Held hand dying patient	Colleague

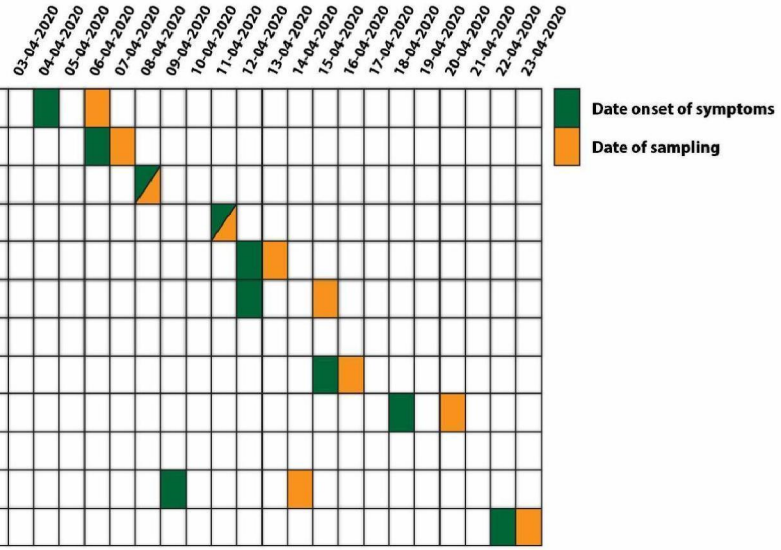

Table 2 Epidemiological findings of infected health-care workers