

**Request from Patrick Vallance: Details of PHE involvement with ISARIC and any information on samples collected and their distribution.**

PHE Colindale have received materials from approximately 50 people arising from collaborative work with Calum Semple, the PI. The volumes of these samples are 100 microlitres or less and they are from early after the onset of illness (for example, 43 samples from 1 day post onset and 23 samples from 3 days post onset). Although follow-up may be intended, none of these materials would be suitable for kit evaluation as they are too limited in volume.

PHE Porton have received around 20 samples described as small volumes. They believe it will only be enough to enable testing in a couple of assays (including microneutralization) and insufficient to make a standard for wide distribution. The current intention is to test the samples and if suitable use by NIBSC as a reference point for a convalescent standard that they would create with other samples.

Jake Dunning is a co-investigator and co-applicant on both ISARIC CCP and 4C, but via his academic positions at Imperial and Oxford, not his PHE role. He has not had any involvement in the samples collected or the distribution.

The CSA may wish to contact the study coordinator directly for more information about the study and to request access to the UK protocols (and ask about access to the research sample biobank); details are available via this link: [https://isaric.net/4c/virtual\\_site\\_visit/](https://isaric.net/4c/virtual_site_visit/).

**Factual content was corrected in committee to confirm the following:**

**PHE Colindale has received: In the first batch of material collected from any cases in the UK – 16 samples (10 patients), Second batch – 89 samples (a further 50 patients), acute and early samples. These sample volume ranges from 500ul to 1ml.**

**PHE Porton have received 63 samples. The acute and early samples number 45, and 18 samples from 9 donors of ~1ml convalescent >=d28 post discharge.**