

## Supplementary File 1: initial, and daily, questions on web-app

- (i) We would like to ask a couple of questions about you and do a short activity test. This shouldn't take long:
1. How old are you (select age from drop down menu)
  2. Are you male or female
  3. How active are you?
    - Active (At least 150 minutes of moderate activity e.g. could talk but not sing while performing; or 75 minutes of vigorous activity, could not talk while performing per week).
    - Not very active (Less than 150 minutes of moderate activity e.g. could talk but not sing while performing; or less than 75 minutes of vigorous activity, could not talk while performing, but more than 30 minutes of activity per week)
    - Inactive (less than 30 minutes of physical activity per week).
  4. Have you suffered any illness within the last year? Yes/ No
  5. Was the illness COVID-19? Yes/ No
  6. How long ago did your symptoms subside?
    - Less than 2 months ago
    - Between 2 and 6 months ago
    - Between 1 year and 6 months ago
    - Over 1 year ago
  7. What is your job/occupation <free text>
- (ii) Please provide an email address. This will be used to provide you with daily notifications to complete the daily check-in. This will be securely stored, and will not be shared with anyone else. Once the study is completed, it will be deleted.

### Daily wellbeing questions

Have you developed any new symptoms? Yes/No

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These can include obvious symptoms like cough, fever or chest pains, to other, less obvious ones, like lethargy or exhaustion (*we will expand this text to include other symptoms to better guide the individual*)

How was your sleep?

1: I slept very, very well      4: I slept ok      7: I slept very, very poorly

How fatigued are you?

1: I do not feel fatigued at all (fatigue levels are very, very low)    4: I feel a bit fatigued    7: I feel very, very fatigued

How emotionally stressed has today's activity made you feel?

1: I do not feel stressed at all (not)      4: I feel a bit stressed    7: I feel very, very stressed (elastic band completely stretched, feel anxious, panicked)

How sore are you?

1: My muscles are not sore at all      4: My muscles are a bit sore    7: My muscles are very, very sore

How recovered do you feel (to be able to do day to day activities)?

1: I feel completely recovered and can do all activities as normal (battery completely charged)    4: I haven't recovered completely (battery on half)    7: I haven't recovered at all and feel unable to do most or all day to day activities (battery completely depleted)