**Supplemental Digital Content 5.** Additional clinical details of Eight SARS-CoV-2 positive cases in whom post-mortem minimal invasive tissue sampling (MITS) was not done

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| **Case No.** | **Comment** |
| **i.** | 35 weeks gestation twin, HIV-exposed, HIV PCR negative.Stayed in maternal ward after delivery by caesarean section, admitted at 9 days of life with nosocomial infection |
| **ii.** | Born at term, HIV-exposed, HIV PCR negative. Presented with jaundice and worsened respiratory distress, septic shock |
| **iii.** | Presented dead on arrival to hospital, verbal autopsy. Born at 33 weeks gestation, HIV-unexposed, presented day before to local doctor with apnoea.  |
| **iv.** | Presented dead on arrival to hospital, verbal autopsy. Born at term, HIV-unexposed, was groaning and irritable day before |
| **v.** | Presented dead on arrival to hospital, verbal autopsy. Born at term, HIV-unexposed, had cough, runny nose and fever previous night |
| **vi.** | Thriving baby, HIV-unknown, nosocomial sepsis after admitted for hot water burns |
| **vii.** | Presented dead on arrival to hospital, verbal autopsy. Thriving baby, HIV -negative, had diarrhoea and vomiting, parents also had diarrhoea and vomiting. Suspected poisoning, both parents had COVID-19 |
| **viii.** | Known with poor compliance to treatment, HIV-negative,presented with severe metabolic acidosis and later had respiratory collapse |