



# Eight lessons from 2 years of use of the Post-COVID-19 Functional Status scale

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**Based on the literature and users' experiences, lessons could be learned after 2 years' use of the Post-COVID-19 Functional Status (PCFS) scale, that could contribute to its optimal use. All in all, the PCFS scale provided added value during the pandemic.** <https://bit.ly/3KkI5Ak>

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*To the Editor:*

The number of confirmed cases of coronavirus disease 2019 (COVID-19) worldwide exceeded 750 million as of February 2023 [1], leaving an estimated 65 million individuals experiencing post-acute sequelae of COVID-19 or “long COVID”, or a modelled estimate of 6.2% of individuals experiencing long COVID symptoms 3 months after symptomatic SARS-CoV-2 infection [2, 3]. Early in the pandemic, we proposed the Post-COVID-19 Functional Status (PCFS) scale in the *European Respiratory Journal* [4], which resulted from a slight adaptation of the Post-Venous thromboembolism Functional Status (PVFS) scale developed in 2019 [5, 6]. The PCFS scale is designed to monitor functional recovery and identify patients with incomplete or poor recovery after COVID-19 in research and clinical practice.

