Supplementary Figure 1. Weekly acute febrile illness cases with and without arboviral or acute respiratory viral infections, May 2012 – December 2022.
Supplementary Figure 2. Proportion of acute febrile illness cases testing positive for arboviruses and acute respiratory viruses by Puerto Rican Department of Health regions, May 2012 – December 2022.

The number of tests for each virus in each region is shown.
Weekly infections

Supplementary Figure 3. Epidemic curve of confirmed or probable dengue, chikungunya, and Zika cases from May 2012 – December 2022.

Cases were deemed to be laboratory−confirmed if a serum or urine specimen was PCR− or IgM−positive for a particular arbovirus.
Supplementary Figure 4. Epidemic curve of dengue serotypes 1 – 4 from May 2012 – December 2022.

Weekly infections

Dengue cases were assigned a serotype if a patient’s serum specimen was PCR-positive for a specific DENV serotype.
Supplementary Figure 5. Number of tests for arboviruses or acute respiratory viruses, and proportion of tests that were positive for each virus by year, May 2012 – December 2022.
Supplementary Figure 6. Epidemic curve of respiratory viruses from May 2012 – December 2022.

Respiratory viruses were identified and confirmed by RT-PCR testing of nasopharyngeal swabs.
Supplementary Figure 7. Symptoms for laboratory-confirmed arboviral or acute respiratory viral cases, May 2012 – December 2022.

### Arbovirus
- Chikungunya virus (N=2293)
- Dengue virus (N=1432)
- Zika virus (N=1918)

### Acute respiratory virus
- Human adenovirus (N=1550)
- Human metapneumovirus (N=862)
- Human parainfluenza virus 1 (N=407)
- Human parainfluenza virus 3 (N=993)
- Influenza A virus (N=3756)
- Influenza B virus (N=1430)
- Respiratory syncytial virus (N=1489)
- SARS-CoV-2 (N=1386)

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<th>Zika virus</th>
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Legend:
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- 75% Light Purple
- 50% Light Purple
- 25% Light Purple
- 0% Light Purple
Supplementary Table 1. Number of eligible patients and number recruited into SEDSS, 2012 – 2022.*

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<th>Total of recruited cases</th>
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* Estimate based on number of enrollees and dropouts.
† Number of eligible patients was unavailable for Auxilio Mutuo Hospital in San Juan (2018–2020).
Supplementary Table 2. Number and percentage of cases with laboratory evidence of dengue, Zika, or chikungunya infection*, by year — Puerto Rico, Sentinel Enhanced Dengue Surveillance System, 2012 – 2022.

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<td>Probable No. (%)</td>
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* Confirmed infection for the three arboviruses was by positive RT-PCR results. Before Zika, probable dengue included positive IgM tests. After Zika emerged, probable dengue included IgM positivity for DENV along with negative IgM results for ZIKV due to notable cross-reactivity between dengue IgM and Zika IgM antibodies in serologic tests.
### Supplementary Table 3. Number and percentage of cases with acute respiratory viral illness (caused by influenza, respiratory syncytial virus, adenovirus, human parainfluenza, human metapneumovirus, human coronaviruses, and SARS-CoV-2) among all participants assessed and tested, by year—Puerto Rico, Sentinel Enhanced Dengue Surveillance System, 2012 – 2022.

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<th>Influenza A No. (%)</th>
<th>Influenza B No. (%)</th>
<th>Respiratory syncytial virus No. (%)</th>
<th>Adenovirus No. (%)</th>
<th>Human parainfluenza virus 1 No. (%)</th>
<th>Human parainfluenza virus 3 No. (%)</th>
<th>Human metapneumovirus No. (%)</th>
<th>Human coronavirus† No. (%)</th>
<th>SARS-CoV-2 No. (%)</th>
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</thead>
<tbody>
<tr>
<td>2012</td>
<td>12 (0.3)</td>
<td>144 (10.1)</td>
<td>53 (3.6)</td>
<td>52 (3.4)</td>
<td>27 (1.9)</td>
<td>24 (2.4)</td>
<td>13 (1.5)</td>
<td>21 (45.7)</td>
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<td>2013</td>
<td>554 (14.7)</td>
<td>67 (4.7)</td>
<td>64 (4.3)</td>
<td>168 (10.8)</td>
<td>138 (9.9)</td>
<td>34 (3.4)</td>
<td>123 (14.3)</td>
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<td>139 (3.7)</td>
<td>183 (12.8)</td>
<td>84 (5.6)</td>
<td>95 (6.1)</td>
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<td>72 (7.3)</td>
<td>38 (4.4)</td>
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<td>195 (5.2)</td>
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<td>49 (4.9)</td>
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<tr>
<td>2016</td>
<td>586 (15.6)</td>
<td>326 (22.8)</td>
<td>166 (11.1)</td>
<td>203 (13.1)</td>
<td>181 (12.9)</td>
<td>140 (14.1)</td>
<td>150 (17.4)</td>
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<tr>
<td>2017</td>
<td>312 (8.3)</td>
<td>154 (10.8)</td>
<td>203 (13.6)</td>
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<td>96 (9.7)</td>
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<td>2018</td>
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<td>334 (23.4)</td>
<td>135 (9.1)</td>
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<td>161 (11.5)</td>
<td>133 (13.4)</td>
<td>199 (23.1)</td>
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<td>342 (23.0)</td>
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<td>170 (17.1)</td>
<td>66 (7.7)</td>
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<tr>
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<td>88 (6.2)</td>
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<td>15 (1.0)</td>
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<td>128 (12.9)</td>
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<td><strong>Total</strong></td>
<td><strong>3756 (100)</strong></td>
<td><strong>1430 (100)</strong></td>
<td><strong>1489 (100)</strong></td>
<td><strong>1550 (100)</strong></td>
<td><strong>407 (100)</strong></td>
<td><strong>993 (100)</strong></td>
<td><strong>862 (100)</strong></td>
<td><strong>46 (100)</strong></td>
<td><strong>1586 (100)</strong></td>
</tr>
</tbody>
</table>

Abbreviation: SARS-CoV-2 = severe acute respiratory syndrome coronavirus 2

* Respiratory syncytial virus includes subtypes A and B.

† Human coronavirus includes 229E, OC43, NL63, or HKU1.