

**The National Electronic Telecommunications System for Surveillance (NETSS)  
CDC Implementation Plan for STD Surveillance Data  
Effective as of January 2011**

**CDC CONTACTS:**

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| 1) Public Health Surveillance Program Office (PHSPO) | (404) 498-6635 (phone) or <a href="mailto:soib@cdc.gov">soib@cdc.gov</a> |
| 2) Division of STD Prevention (DSTDP)                | (404) 639-8356 (phone) or <a href="mailto:sdmb@cdc.gov">sdmb@cdc.gov</a> |

**A. RECORD LAYOUT:**

CDC STD surveillance data must consist of 1) the core 60-byte demographic portion established by the Public Health Surveillance Program Office (PHSPO) at CDC, and 2) extended record data beyond the 60-byte record determined by the Division of STD Prevention (DSTDP). See **ATTACHMENT A** for the **Record Layout and additional instructions for Transmission of STD Morbidity Data**. If you have questions regarding the 60-byte record layout, contact PHSPO. If there are questions on STD data in the extended record, contact DSTDP.

**B. SOFTWARE:**

Microcomputer software (**STD\*MIS**) for STD morbidity data entry, analysis, and creation of NETSS transmission records is available to states desiring to use it. Installation and training in the use of STD\*MIS software will be provided by DSTDP staff. Contact DSTDP staff for more information on STD\*MIS.

**C. CDC TRANSMISSION DEADLINES:**

As required by the MMWR, STD surveillance data and verification records should be transmitted to Atlanta via Secure Data Network (SDN) on a **WEEKLY** basis. Data collected through Saturday of a given week should be transmitted to CDC by the following **Tuesday, 12:00 noon**, Atlanta time. Sites are encouraged to report on the following Monday, if possible. **Any data transmitted after the Tuesday, noon deadline will NOT be included in the MMWR published that week.** Be sure to check with the State Epi Office for their internal deadlines for data transmission.

**D. STEPS FOR INITIAL TRANSMISSION:**

1. The **STD surveillance reporter** should contact the state General Epi office to coordinate transmission of STD data from the STD office to the state. Issues to cover:
  - a. What **diseases/event codes** will be reported through NETSS, and are there any problems with the record layout as specified by PHSPO and DSTDP?
  - b. **How** (CD, e-mail, handcarry) **will data be sent** to General Epi office?
  - c. Will STD data be **"piggy-backed"** with General Epi data or sent to CDC separately?
  - d. A policy in the event that STD data transmission is **interrupted**. Conversely, would STD office be able to transmit General Epi data if the General Epi office was unable to transmit. If STD office transmission to PHSPO should be necessary, contact PHSPO for more information.
  - e. Establish how weekly CDC NETSS **PHSPO Transmission Summary Reports** are distributed to the states, including STD Program staff and other reporting areas. Be sure to review these reports as soon as possible to facilitate weekly reconciliation of data, and contact PHSPO if there are any questions.

For an example of the **Transmission Summary Report**, see **ATTACHMENT B**.

2. **If a reporting area is using STD\*MIS software:** In addition to contacting the state General Epi Office, the STD coordinators in the field should contact the appropriate CDC STD\*MIS field representative to inform them that they are ready to begin transmission.

If a project area wants to begin transmitting during the middle of a calendar year, they will be asked by PHSP0 to transmit **YTD (year-to-date)** data. CDC STD\*MIS field reps may be asked to provide additional technical assistance.

3. **If a reporting area is using their own software, not STD\*MIS:** The STD Coordinators should contact their General Epi Office to inform them that they are ready to begin transmission of STD morbidity data.

PHSP0 will ensure that the core data matches the required NETSS record layout. The extended data must match the record layout in **ATTACHMENT A**.

**ATTACHMENT C** lists data elements that may need to be re-coded for NETSS transmission.

If a project area wants to begin transmitting during the middle of a calendar year, they will be asked by PHSP0 to transmit **YTD (year-to-date)** data.

4. **BEFORE official transmission of STD data**, a test file should be sent from the STD office to SDMB. SDMB will check the test transmission and report the results back to the STD office. Coordination between the state STD office and SDMB is essential to ensure that all parties understand that "this is only a test".
5. **If available, YTD data should be included in the first "official" transmission of data.** Contact PHSP0 for questions and final approval before transmitting any YTD data. **Do NOT transmit an incomplete YTD file. A complete YTD file is a file which contains year-to-date data starting on January 1st of the current year through the date that the transmission was prepared.** (For example, if data has only been entered for March 2007-September 2007, this is an **incomplete** YTD file, whereas data entered for January-September 2007 would be considered a **complete** YTD file).

**If you are unable to transmit a complete YTD file**, transmit only routine weekly data until you have a complete YTD file available. The state STD office and state General Epi office should coordinate reporting of STD data during this transition phase.

## **E. GUIDELINES FOR ONGOING OPERATION:**

Communication between the reporting areas and CDC is critical to the success of NETSS. **CDC maintains a basic list of contacts** for each reporting area which includes the CDC/DSTDP Project Officer, STD\*MIS CDC Representative, the STD Program contact, and the PHSPO NETSS contact. **Please keep CDC (PHSPO and DSTDP) informed (via e-mail, phone, etc.) of any changes in NETSS-related staff, including changes to office addresses and phone numbers.**

**A verification record should be included with EVERY transmission, whenever possible.** NETSS transmissions to PHSPO from the General EPI Office should include a complete explanation of data received, i.e., if data is a re-transmission of YTD, all data files must be labeled as such.

**PHSPO is responsible for maintaining the core (60-byte) record.** PHSPO will receive the data, check the core portion for errors, and notify the state NETSS reporter of the number of records received and errors to be corrected (weekly **PHSPO Transmission Summary Reports** from CDC). **STD field personnel should make sure they receive a copy of this report from the General Epi Office in order to receive notice of their errors.** Currently, the Transmission Summary Report (See Attachment B) lists errors by year, week, site code and caseid.

**DSTDP is responsible for maintaining program specific (extended record) data beyond the 60-byte core record.** PHSPO will assemble both core records and extended records for STD data and make them available to DSTDP on a weekly basis. The DSTDP Data Management Unit will be responsible for checking the extended record data and communicating with the state STD office regarding corrections. DSTDP will be responsible for contacting the state.

Whenever NETSS **unique identifiers** (STATE, YEAR, SITE, and CASEID) in previously-transmitted data need to be corrected or updated, a DELETION record should be sent to remove the previously-transmitted data from the CDC database. A new record should then be sent to PHSPO to add the corrected or updated data to the CDC database.

If the data being corrected is **not a unique identifier**, then you can simply modify the record and re-transmit it, without deleting the record.

## **F. FOR A COPY OF THIS IMPLEMENTATION PLAN:**

Contact DSTDP staff via phone (404-639-8356) or e-mail ([sdmb@cdc.gov](mailto:sdmb@cdc.gov)) for the most recent version of this plan either as hardcopy or as an electronic document. Your suggestions or comments for improving and clarifying this implementation plan are welcome!

**ATTACHMENT A**

**THE NATIONAL ELECTRONIC  
TELECOMMUNICATIONS SYSTEM  
FOR SURVEILLANCE (NETSS)  
and  
STD SURVEILLANCE DATA:  
RECORD LAYOUT AND INSTRUCTIONS**

**The National Electronic Telecommunications System for Surveillance (NETSS)  
And STD Surveillance Data: Record Layout and Instructions**

**CDC Contacts for STD-related NETSS Questions**

DSTDP staff: (404) 639-8356 (phone) or [sdmb@cdc.gov](mailto:sdmb@cdc.gov) (e-mail)

**Types of NETSS Records:**

There are three types of records that can be transmitted via NETSS: (1) CASE record; (2) DELETION record; and, (3) VERIFICATION record.

1. **CASE** Record:

A separate record is submitted for each case reported (line-listed data).  
[Column 1 = M for MMWR report].

2. **DELETION** Record:

This record is used to delete any previously-transmitted records with incorrect unique identifiers (STATE, YEAR, SITE and CASEID) or to delete records that should no longer be reported.  
[Column 1 = D for Deletion].

3. **VERIFICATION** Record:

A single record is used for each disease to report the total number of cases that have been transmitted year-to-date. This record is used to assist in reconciling any differences between the number of cases in the CDC database and the number of cases in the State database.  
[Column 1 = V for Verification].

- \* **NOTE:** To UPDATE a previously sent record, you must re-transmit the record and the CDC system will overwrite the old record, based on the unique identifiers. However, if the error is one of the unique identifiers, then you must first send a deletion record and then re-transmit the corrected record.

**Content of NETSS Record:**

CORE DATA:

The first 60 bytes of any of the 3 types of NETSS records (referred to as CORE data) are transmitted for all notifiable diseases. The accompanying NETSS record layouts indicate which data items within the CORE data are required by CDC, i.e., a NETSS record will not be accepted at CDC unless those data are on the record. Any data beyond 60 bytes (referred to as PROGRAM or EXTENDED data) are program-specific data, i.e., the data are used only by the specific programs and not by the MMWR staff for any weekly MMWR tables.

PROGRAM/EXTENDED DATA:

In the STD NETSS EXTENDED CASE record, it is important to transmit **information about where the case was identified**, i.e., the facility type (information source) on the Interview Record currently being implemented. This information will allow DSTDP staff in Atlanta to examine the number of cases from STD clinics versus all other sources.

It is also important to transmit **information about how each case was detected**, i.e., the method of case detection from the Interview Record currently being implemented. Not all reporting areas will have this information easily linked to their morbidity data. However, those areas that do have that information linked with their morbidity data are asked to transmit that information as part of the STD NETSS EXTENDED CASE record.

In addition to facility type and method of case detection, the STD NETSS EXTENDED CASE record can include the Zip Code of residence for the case IF that information is available and easily linked with the morbidity data.

For congenital syphilis case records, the STD NETSS EXTENDED CASE record should include data from the Congenital Syphilis (CS) Case Investigation and Report form (the 126 form) that was not included in the CORE data. A specific format for transmission of the 126 data is provided on the accompanying STD NETSS record layouts.

## Transmission of NETSS Data

STD surveillance data should be transmitted to Atlanta via NETSS **every week**. Specifically, data collected through Saturday of a given week should be transmitted to CDC by the following Tuesday, 12:00 Noon, Atlanta time. Sites are encouraged to report to their General Epi Office on the following Monday if possible. **Any data transmitted after the Tuesday Noon deadline will NOT be included in the MMWR published that week.**

Whenever previously-transmitted STD surveillance data needs to be corrected or updated, the following rules apply.

(1) **If the fields that need correcting or updating are STATE/YEAR/CASEID/SITE**, a DELETION record should be sent to remove the previously-transmitted data from the CDC database. A new record should then be sent to add the correct data to the CDC database. (2) **If the field(s) that need correcting or updating are any other than those listed above**, simply transmit the record with the updated information to CDC. The corrected/updated record should have STATE/YEAR/CASEID/SITE fields that match the previously-transmitted record. This new corrected/updated record will replace the previously-transmitted record in the CDC database.

### Specific STDs Reported Via NETSS:

1. **SYPHILIS**
  - a. Submit CASE record
  - b. Disease Codes:
    - 10311 = Primary syphilis
    - 10312 = Secondary syphilis
    - 10313 = Early Latent syphilis
    - 10314 = Late Latent syphilis
    - 10315 = Syphilis, Unknown Latency
    - 10316 = Congenital syphilis
    - 10318 = Late Syphilis with clinical manifestations
2. **CHANCROID**
  - a. Submit CASE record
  - b. Disease Code: 10273
3. **CHLAMYDIA**
  - a. Submit CASE record
  - b. Disease Code: 10274
4. **GRANULOMA INGUINALE (GI)**
  - a. Submit CASE record
  - b. Disease Code: 10276
5. **GONORRHEA**
  - a. Submit CASE record
  - b. Disease Code: 10280
6. **LYMPHOGRANULOMA VENEREUM (LGV)**
  - a. Submit CASE record
  - b. Disease Code: 10306
7. **NON-GONOCOCCAL URETHRITIS (NGU)**
  - a. Submit CASE record
  - b. Disease Code:10307
8. **MUCOPURULENT CERVICITIS (MPC)**
  - a. Submit CASE record
  - b. Disease Code:10308
9. **PELVIC INFLAMMATORY DISEASE (PID) [unknown etiology]**
  - a. Submit CASE record
  - b. Disease Code:10309

## **COUNTY and CITY of Residence**

Cases should be counted for morbidity purposes by the patient's usual place of residence (state or county) and not by place of occurrence or diagnosis. When a case is diagnosed and the patient is a resident of another state, the state in which the case is diagnosed should forward the case report to the state of usual residence for inclusion in the latter state's morbidity system. When usual place of residence is not clear or when cases are diagnosed among merchant seamen or foreign nationals, the cases should be counted in the place of diagnosis.

**National Electronic Telecommunications System for Surveillance (NETSS)  
REVISED RECORD LAYOUT FOR TRANSMISSION OF STD MORBIDITY DATA  
(Chancroid, Chlamydia, Gonorrhea, GI, LGV, MPC, NGU, PID, Syphilis)  
(Effective as of January 2011)**

Data Element Name	N/ M*	Data Element Definition	Columns	Data Element "legal" Values	Data Element "legal" value definition	Required/ Optional <sup>+</sup>
<b>CODE KEY</b>						
*N=New (2011); M=Modified (2011)						
<sup>+</sup> Req=Required; Opt=Optional; CT=Chlamydia; G=Gonorrhea; S=Syphilis; CH=Chancroid						
RECORD TYPE		Record type will determine how the record is handled when it arrives at CDC.	1	M=MMWR report		Req CT, G, S, CH
UPDATE		Currently not implemented (pad with a 9).	2	9		Req CT, G, S, CH
STATE		State reporting case information & jurisdiction of case (based on patient residence).	3-4	Standard 2-digit State FIPS code.	Reporting state is defined using CSTE/CDC criteria available at: <a href="http://www.cdc.gov/ncepi/od/ai/phs/files/03-ID-10_residency_rules.pdf">http://www.cdc.gov/ncepi/od/ai/phs/files/03-ID-10_residency_rules.pdf</a>	Req CT, G, S, CH
YEAR		MMWR Year for which case information was reported to CDC. Derived from MMWR week.	5-6	2-digit year (##)	Based on MMWR week assignment.	Req CT, G, S, CH
CASE REPORT ID		Unique Case Report ID (numeric) assigned by the state.	7-12	6-digit numeric	Non-identifying ID for case report, NOT case-patient. Represents incident case report. Assigned by state, in combination with other variables (e.g. Reporting state +/- associated date) will represent a unique case in national data base.	Req CT, G, S, CH
SITE CODE		Location code assigned by the state to indicate where report originated and who has responsibility for maintaining the record.	13-15	S01=State epidemiologist S02=State STD Program S03=State Chronic Disease Program S04-S99=Other state offices R01-R99=Regional or district offices 001-999=County health depts (FIPS codes) L01-L99=Laboratories within state CD1=Historical records (prior to new format) CD2=Entered at CDC (based on phone reports) #<##>=Entered in STD*MIS application; 2-digit code represents the state specific installation of STD*MIS	Project areas should NOT re-use SITE codes over time. If a new site is added, please assign a new, unique SITE ID. If a site is no longer reporting to your surveillance system, RETIRE the site ID - do not re-use. Project areas should also maintain up-to-date lists of SITE IDs with information describing the site characteristics (e.g. location, contact person and contact information), so the SITE IDs and their meaning can be shared as needed.	Req CT, G, S, CH
WEEK		MMWR Week on Surveillance Calendar, i.e., week for which case information is reported to CDC. Assigned by reporting jurisdiction.	16-17	01 through 53, dependent upon Surveillance Calendar		Req CT, G, S, CH
EVENT or DIAGNOSIS		STD or associated syndrome (health event) for which the case-patient has been diagnosed (regardless of case status per CSTE/CDC surveillance case definition).	18-22	10273=Chancroid  10274=Chlamydia trachomatis infection  10276=Granuloma inguinale (GI)	Health event = "Chancroid" per CSTE/CDC surveillance case definition (regardless of case classification status [confirmed, probable, or suspect])  Health event = "Chlamydia trachomatis infection" per CSTE/CDC surveillance case definition (regardless of case classification status [confirmed, probable, or suspect]) Reporting of non-nationally notifiable STDs is optional. Currently, GI is not nationally notifiable.	Req CT, G, S, CH

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(continued)						
				10280=Gonorrhea	Health event = "Gonorrhea" per CSTE/CDC surveillance case definition (regardless of case classification status [confirmed, probable, or suspect])	
				10306=Lymphogranuloma venereum (LGV)	Reporting of non-nationally notifiable STDs is optional. Currently, LGV is not nationally notifiable.	
				10307=Non-Gonococcal Urethritis (NGU)	Reporting of non-nationally notifiable STDs is optional. Currently, NGU is not nationally notifiable.	
				10308=Mucopurulent Cervicitis (MPC)	Reporting of non-nationally notifiable STDs is optional. Currently, MPC is not nationally notifiable.	
				10309=Pelvic Inflammatory Disease (PID) [unknown etiology]	Reporting of non-nationally notifiable STDs is optional. Currently, PID is not nationally notifiable.	
				10311=Syphilis, primary	Health event = "Syphilis, primary" per CSTE/CDC surveillance case definition (regardless of case classification status [confirmed, probable, or suspect])	
				10312=Syphilis, secondary	Health event = "Syphilis, secondary" per CSTE/CDC surveillance case definition (regardless of case classification status [confirmed, probable, or suspect])	
				10313=Syphilis, early latent	Health event = "Syphilis, early latent" per CSTE/CDC surveillance case definition (regardless of case classification status [confirmed, probable, or suspect])	
				10314=Syphilis, late latent	Health event = "Syphilis, late latent" per CSTE/CDC surveillance case definition (regardless of case classification status [confirmed, probable, or suspect])	
				10315=Syphilis, unknown latent	Health event = "Syphilis, unknown latent" per CSTE/CDC surveillance case definition (regardless of case classification status [confirmed, probable, or suspect])	
				10318=Late Syphilis with clinical manifestations	Health event = "Late Syphilis with clinical manifestations" per CSTE/CDC surveillance case definition (regardless of case classification status [confirmed, probable, or suspect])	
				10317=RETIRED	NOTE: Neurosyphilis code "10317" is retired (no longer used for case reporting). Neurosyphilis can occur at almost any stage of syphilis; therefore it is not considered a distinct stage. Neurosyphilis without any other symptoms or of unknown stage of syphilis should be reported as event code 10318. However, you should also code the neurologic involvement variable as "Yes, confirmed" or "Yes, probable".	
COUNT		Represents # of cases reported in this 'record'; supports aggregate- (when >1) or case-specific (when=1) reporting.	23-27	#####	Number of case reports represented in this record. Default = 00001 for case-specific records where a single case is represented by data record.	<b>Req</b> CT, G, S, CH
COUNTY		Standard FIPS code for county of case-patient's residence in reporting state.	28-30	3-digit county FIPS	In combination with State FIPS, represents a unique US county ID.	<b>Req</b> CT, G, S, CH
DATE OF BIRTH		Date of birth of case-patient in YYYYMMDD format.	31-38	YYYYMMDD (Unknown=99999999)		<b>Req</b> CT, G, S, CH

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AGE		Age of case-patient at time of initial exam or specimen collection for case report "condition".	39-41	### Unknown=999	Note: Must report "AGETYPE" value to determine time units associated with "AGE".	Req CT, G, S, CH
AGETYPE		Indicates the units (years, months, etc.) for the AGE field.	42	0=0-120 years 1=0-11 Months 2=0-52 Weeks 3=0-28 Days 9=Age Unknown (AGE field should be 999)		Req CT, G, S, CH
SEX		Current sex of patient	43	1=Male 2=Female 9=Unknown		Req CT, G, S, CH
RACE		Race	44	9=(Default)	This variable should default to 9. It has been superseded by the individual RACE variables located in columns 98-105.	Req CT, G, S, CH
HISPANIC		Indicator for Hispanic ethnicity.	45	9=(Default)	This variable should default to 9. It has been superseded by the HISPANIC/LATINO variable located in column 106.	Req CT, G, S, CH
EVENT DATE		Date of disease in YYMMDD format. This date depends upon how case dates are assigned in the STD program, i.e., date could be the onset of symptoms date, diagnosis date, laboratory result date, date case first recognized and/or reported to STD program, or date case reported to CDC.	46-51	YYMMDD (Unknown=999999)		Req CT, G, S, CH
DATETYPE		Describes the type of date provided in EVENT DATE.	52	1=Onset Date 2=Date of diagnosis 3=Date of laboratory result 4=Date of first report to community health system 5=State/MMWR report date 9=Unknown		Req CT, G, S, CH
CASE STATUS		Status of the case/event as suspect, probable, or confirmed.	53	1=Confirmed case 2=Probable case 3=Suspect case 9=Unknown case status	Note: Please review CSTE/CDC case definitions for information on case classification status. ( <a href="http://www.cdc.gov/epo/dphsi/casedef/case_definitions.htm">http://www.cdc.gov/epo/dphsi/casedef/case_definitions.htm</a> )	Req CT, G, S, CH
IMPORTED		Indicates if the case was imported into the state or the U.S.	54	9=(Default)	This variable should default to 9. It has been superseded by the STD IMPORT variable located in column 113.	Req CT, G, S, CH
OUTBREAK		Indicates whether the case was associated with an outbreak.	55	1=Yes 2=No 9=Unknown		Req CT, G, S, CH
FUTURE		Reserved for future use	56-60	99999		Req CT, G, S, CH
INFOSRCE - Facility Type (STD dx, rx)		Setting or health care facility where a person first received diagnosis, treatment or testing for STD or associated syndrome reported in this case report (i.e., facility type of STD diagnosis, facility type where person was tested for STD).	61-62	01=HIV Counseling and Testing Site  02=STD clinic (Represents PUBLIC to match old reporting forms.)  03=Drug Treatment	A public clinic whose primary mission is to provide counseling and HIV testing services.  A clinic whose primary mission is to provide diagnosis, treatment, counseling, and sex partner notification for sexually transmitted diseases.  A residential or outpatient clinic whose	Req CT, G, S, CH

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					primary mission is to provide treatment for an individual's drug, alcohol, and other substance addiction.	
				04=Family Planning	A clinic whose primary mission is to provide contraceptive and reproductive health care for the prevention and achievement of pregnancy. Such sites receive federal and/or state family planning funds and are situated in state or county health departments or are community-based organizations (may include Title X and non-Title X funded facilities, including Planned Parenthood clinics).	
				05=(RETIRED CODE ID)	Former "Prenatal/Obstetrics". Use either "Labor and Delivery/Obstetrics" (14) or "Prenatal" (15).	
				06=Tuberculosis clinic	A clinic for the screening, diagnosis, treatment, and follow-up of individuals with tuberculosis and contacts of individuals positive for TB.	
				07=Other Health Department Clinic	A public clinic administered by a local or state health department that can not be classified in one of the other defined disease- or medical service-specific facility types.	
				08=Private Physician/HMO	A non-publicly-funded group of health care providers or an individual health care provider who provides medical care (e.g., general/family/internal medicine practitioners, pediatricians).	
				09=(RETIRED CODE ID)	Formerly "Hospital - Inpatient" - now included in "Hospital - Other (29)"	
				10= Hospital - Emergency Room; Urgent Care facility	A department in a hospital or clinic staffed and equipped to provide emergency care to persons requiring immediate medical treatment. (includes Urgent Care).	
				11=Correctional facility	A prison, jail, detention center, or other correctional facility where persons are incarcerated or supervised by the criminal justice system.	
				12=Laboratory	Facility providing the clinical diagnostic testing of biological or environmental specimens using a variety of test methods and reporting of results.	
INFOSRCE - Facility Type (STD dx, rx) (continued)				13=Blood Bank	Facility where blood donations are taken, blood is screened and processed to ensure viability, and stored until needed.	
				14=Labor and delivery	A facility providing health care services to women during labor and delivery through birth of the infant.	
				15=Prenatal	A clinic whose primary mission is to provide health care and education to pregnant women (from time of diagnosis of pregnancy to the time of labor and delivery).	
				16=National Job Training Program	A residential, educational, and job training	

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				17=School-based Clinic	program for at-risk youth aged 16 to 24 years. National Job Training Program is a public-private partnership administered by the U.S. Department of Labor and the Employment and Training Administration.  A clinic located in or affiliated with a middle school, junior high school, senior high school, or other type of school providing education at or below 12th grade that provides medical care and health education to students.	
				18=Mental Health Provider	Facility or provider providing inpatient or outpatient mental health services.	
				29=Hospital – Other	A multidisciplinary public or private facility that provides non-emergency inpatient or outpatient medical services. Includes specialty clinics within a hospital (Excludes care sites that provide emergency or urgent care and obstetric or labor and delivery services.)	
				66=Indian Health Service	A medical care facility funded by the Indian Health Service.	
				77=Military	A facility operated by the U.S. military whose primary mission is to provide health care.	
				88=Other	A clinic that can not be categorized in any of the other defined facility types.	
				99=Unknown (if data not available)	Facility type not available.	
Method of Case Detection		How did the case patient first come to the attention of the health department for this condition?	63-64	01=(RETIRED CODE ID) 02=(RETIRED CODE ID) 03=(RETIRED CODE ID) 04=(RETIRED CODE ID) 05=(RETIRED CODE ID) 06=(RETIRED CODE ID) 07=(RETIRED CODE ID) 08=(RETIRED CODE ID) 09=(RETIRED CODE ID) 10=(RETIRED CODE ID) 99=(RETIRED CODE ID)	These codes have been RETIRED and are superseded by the legal values (20-24) below.	<b>Req S</b> <b>Opt CT,</b> <b>G, CH</b>
				20=Screening	An asymptomatic patient was identified through screening (routine testing of populations who are asymptomatic in order to identify those with disease). Examples of screening programs include health department outreach to high-risk populations (e.g., commercial sex-workers), HIV care clinics, family planning, blood donation, corrections-based, and prenatal. This includes STD and other health department clinic visits by a client who tests positive for a condition with which they were unaware (e.g., asymptomatic walk-ins) of before being seen at the clinic.	
				21=Self-referred	Refers to patient who sought health services because of signs of an STD and was subsequently tested for the disease being reported. This includes symptomatic	

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<sup>+</sup> Req=Required; Opt=Optional; CT=Chlamydia; G=Gonorrhea; S=Syphilis; CH=Chancroid						
Method of Case Detection (continued)				22=Patient Referred Partner	STD clinic testing. Patient referred by another infected person. This may be a named or unnamed partner. No health department involvement was necessary for this referral.	
				23=Health Department referred partner	This patient is a named partner of a known case. Patient identified through DIS, or other health department personnel, activity following an interview of another known case. The health department was involved in the referral of this individual (e.g., the DIS contacted, called, visited, sent letter, etc., the patient to inform them of their need to be tested).	
				24=Cluster related	Patient was originally identified as a Social Contact (Suspect) or Associate. Cluster brought to the attention of the program as a result of a DIS interview.	
				88=Other	In the event that values 20-24 do not apply, please select this value.	
ZIP		5-digit Zip code of residence of the case patient.	65-69	#####; (Unknown=99999, if data not available)		<b>Req</b> CT, G, S, CH
CITY (DISCONTINUED)		Previously collected CITY data.	70-73	9999	This variable should be set to 9999. It is no longer being collected by DSTDP.	
PID (DISCONTINUED)		Previously collected PID data.	74	9	This variable should be set to 9. It is no longer being collected by DSTDP.	
Pregnant - initial exam		Was the case patient pregnant at time of initial exam for the condition reported in this case report?	75	1=Yes 2=No 9=Unknown		<b>Req</b> S Opt CT, G, CH
ORIGIN (DISCONTINUED)		Previously collected ORIGIN-Source of morbidity report.	76	9	This variable should be set to 9. It is no longer being collected by DSTDP.	
DX_DATE (DISCONTINUED)		Previously collected date of diagnosis.	77-84	99999999	This variable should be set to 99999999. It is no longer being collected by DSTDP.	
Specimen source		Anatomic site or specimen type from which positive lab specimen was collected.	85-86	01=Cervix/Endocervix 02=Lesion-Genital 03=Lesion-Extra Genital 04=Lymph Node Aspirate 05=Oropharynx 06=Ophthalmia/Conjunctiva 07=Other 08=Other Aspirate 09=Rectum 10=Urethra 11=Urine 12=Vagina 13=Blood/Serum 14 - Cerebrospinal fluid (CSF) 88=Not Applicable 99=Unknown		<b>Req</b> CT, G <b>Opt</b> S, CH

Data Element Name	N/ M*	Data Element Definition	Columns	Data Element "legal" Values	Data Element "legal" value definition	Required/ Optional <sup>+</sup>
<b>CODE KEY</b>						
*N=New (2011); M=Modified (2011)						
<sup>+</sup> Req=Required; Opt=Optional; CT=Chlamydia; G=Gonorrhea; S=Syphilis; CH=Chancroid						
Date of laboratory specimen collection		Date of collection of initial laboratory specimen used for diagnosis of health event reported in this case report.	87-94	YYYYMMDD format (Unknown=99999999)	PREFERRED date for assignment of MMWR week. First date in hierarchy of date types associated with case report/event.	Req CT, G, S, CH
Neurological involvement?		If event = some stage of syphilis, does the patient have neurologic involvement based on current case definition?	95	1=Yes, Confirmed 2=Yes, Probable 3=No 9=Unknown		Req S
INTERVIEW (DISCONTINUED)		Previously collected interview case status.	96	9	This variable should be set to 9. It is no longer being collected by DSTDP.	
PARTNER (DISCONTINUED)		Previously collected sex of sex partners.	97	9	This variable should be set to 9. It has been superseded by the sex partner data located in columns 147-148.	
American Indian/ Alaska native?		Case patient reported Am Indian/Alaska Native (AI/AN) race	98	Y = Yes; Variable value is Y or Blank, dependent upon case-patient's reported race.	Y = Yes, case-patient reports AI/AN race.	Req CT, G, S, CH
Asian?		Case patient reported Asian race	99	Y = Yes; Variable value is Y or Blank, dependent upon case-patient's reported race.	Y = Yes, case-patient reports Asian race.	Req CT, G, S, CH
Black/African American?		Case patient reported Black/African American (B) race	100	Y = Yes; Variable value is Y or Blank, dependent upon case-patient's reported race.	Y = Yes, case-patient reports Black race.	Req CT, G, S, CH
Native Hawaiian/ Pacific Islander?		Case patient reported Native Hawaiian/Pacific Island (NH/PI) race	101	Y = Yes; Variable value is Y or Blank, dependent upon case-patient's reported race.	Y = Yes, case-patient reports NH/PI race.	Req CT, G, S, CH
White?		Case patient reported White (W) race	102	Y = Yes; Variable value is Y or Blank, dependent upon case-patient's reported race.	Y = Yes, case-patient reports White race.	Req CT, G, S, CH
Other race?		Case patient reported some other race (not AI/NA, Asian, Black, NH/PI, White)	103	Y = Yes; Variable value is Y or Blank, dependent upon case-patient's reported race.	Y = Yes, case-patient reports some other race (not AI/AN, Asian, Black, NH/PI, or White).	Req CT, G, S, CH
Refused to report race		Case patient refused to report race	104	Y = Yes; Variable value is Y or Blank, dependent upon case-patient's reported race.	Y = Yes, case-patient refused to report race.	Req CT, G, S, CH
Unknown race		Case patient could not answer this question for any reason	105	Y = Yes; Variable value is Y or Blank, dependent upon case-patient's reported race.	Y = Yes, case-patient could not provide information regarding their race.	Req CT, G, S, CH
Hispanic/Latino?		Indicator for case-patient's Hispanic/Latino ethnicity.	106	Y=Yes  N=No  U=Unknown  R = Refused to answer	Case-patient reports Hispanic or Latino ethnicity.  Case-patient does NOT report Hispanic or Latino ethnicity.  Case-patient's ethnicity information is not known.  Case-patient refused to respond to questions regarding ethnicity.	Req CT, G, S, CH
Census tract of case-patient residence		Census tract where the address is located is a unique identifier associated with a small statistical subdivision of a county. Census tract data allows a user to find population and housing statistics about a specific part of an urban area. A single community may be composed of several census tracts.	107-112	6-character length alphanumeric		Opt CT, G, S, CH

Data Element Name	N/M*	Data Element Definition	Columns	Data Element "legal" Values	Data Element "legal" value definition	Required/Optional <sup>+</sup>
<b>CODE KEY</b>						
*N=New (2011); M=Modified (2011)						
<sup>+</sup> Req=Required; Opt=Optional; CT=Chlamydia; G=Gonorrhea; S=Syphilis; CH=Chancroid						
STD IMPORT		Was case imported? Was disease acquired elsewhere? Indicates probable location of disease acquisition relative to reporting state.	113	N - Not an imported case  C - Yes, imported from another country  S - Yes, imported from another state  J - Yes, imported from another county/ jurisdiction in the state  D - Yes, imported but not able to determine source state and/or country  U - Unknown	Health event for this case report was acquired in the reporting state or intrastate jurisdiction that was responsible for case management.  Health event for this case report was acquired outside the US  Health event for this case report was acquired in the US, but not in the reporting state  Health event for this case report was acquired in another county/jurisdiction in the state. Implies intrastate cross-jurisdictional activity may have been initiated for STD control.  Health event for this case report was imported from outside the reporting state, but there is insufficient information to determine if the disease was acquired within or outside the US  Insufficient information is available to determine where disease acquisition occurred.	<b>Opt</b> CT, G, S, CH
Date of initial health exam associated with case report "health event"		Date of <b>earliest</b> healthcare encounter/visit /exam associated with this event/case report. May equate with date of exam or date of diagnosis.	114-121	YYYYMMDD format (Unknown=99999999) (N/A=99999999)		<b>Req</b> CT, G, S, CH if date of laboratory specimen collection is not reported
Date of first report of case/event to public health system		Date of first report of case to local or state health department (first tier of public health system in reporting jurisdiction; may equate to city, county, region, or state public health system level).	122-129	YYYYMMDD format (Unknown=99999999) (N/A=99999999)		<b>Req</b> CT, G, S, CH if date of laboratory specimen collection AND date of initial health exam associated with the case report "health event" are not reported
Treatment date		Date treatment initiated for the condition that is the subject of this case report.	130-137	YYYYMMDD format (Unknown=99999999)		<b>Req</b> S <b>Opt</b> CT, G, CH
Date case report <u>initially</u> sent from reporting jurisdiction to CDC		INITIAL date case report was sent from reporting jurisdiction to CDC. <u>Generated by the reporting jurisdiction</u> at the time of report to CDC. Can be generated by the information system.	138-145	YYYYMMDD format (Unknown=99999999)		<b>Opt</b> CT, G, S, CH
HIV status?		Documented or self-reported HIV status at the time of event.	146	P = HIV positive N = HIV negative E = Equivocal HIV test result U = Unknown R = Refused to answer D = Did not ask		<b>Req</b> S <b>Opt</b> CT, G, CH

Data Element Name	N/ M*	Data Element Definition	Columns	Data Element "legal" Values	Data Element "legal" value definition	Required/ Optional <sup>+</sup>
<b>CODE KEY</b>						
*N=New (2011); M=Modified (2011)						
<sup>+</sup> Req=Required; Opt=Optional; CT=Chlamydia; G=Gonorrhea; S=Syphilis; CH=Chancroid						
Had sex with a male within past 12 months?			147	Y = Yes N = No R = Refused to answer D = Did not ask		Req S Opt CT, G, CH
Had sex with a female within past 12 months?			148	Y = Yes N = No R = Refused to answer D = Did not ask		Req S Opt CT, G, CH
Had sex with an anonymous partner within past 12 months?			149	Y = Yes N = No R = Refused to answer D = Did not ask		Req S Opt CT, G, CH
Had sex with a person known to him/her to be an IDU within past 12 months?			150	Y = Yes N = No R = Refused to answer D = Did not ask		Req S Opt CT, G, CH
Had sex while intoxicated and/or high on drugs within past 12 months?			151	Y = Yes N = No R = Refused to answer D = Did not ask		Req S Opt CT, G, CH
Exchanged drugs/money for sex within past 12 months?			152	Y = Yes N = No R = Refused to answer D = Did not ask		Req S Opt CT, G, CH
Had sex with a person who is known to her to be an MSM within past 12 months?		NOTE: For women only.	153	Y = Yes N = No R = Refused to answer D = Did not ask		Req S Opt CT, G, CH
Engaged in injection drug use within past 12 months?			154	Y = Yes N = No R = Refused to answer D = Did not ask		Req S Opt CT, G, CH
<b>During the past 12 months, which of the following injection or non-injection drugs have been used?</b>						
Crack	M	A potent, relatively cheap, addictive variety of cocaine; often a rock, usually smoked through a crack-pipe (synonyms: rock, rock cocaine).	155	Y = Yes N = No R = Refused to answer D = Did not ask		Req S Opt CT, G, CH
Cocaine	M	A stimulant narcotic in the form of a white powder that users generally self-administer by insufflation through the nose (synonyms: coke, snow, blow).	156	Y = Yes N = No R = Refused to answer D = Did not ask		Req S Opt CT, G, CH
Heroin	M	An addictive, narcotic drug derived from opium (synonyms: horse, junk, smack).	157	Y = Yes N = No R = Refused to answer D = Did not ask		Req S Opt CT, G, CH

Data Element Name	N/ M*	Data Element Definition	Columns	Data Element "legal" Values	Data Element "legal" value definition	Required/ Optional <sup>+</sup>
<b>CODE KEY</b>						
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<sup>+</sup> Req=Required; Opt=Optional; CT=Chlamydia; G=Gonorrhea; S=Syphilis; CH=Chancroid						
Methamphetamines	M	A highly addictive phenethylamine stimulant drug (synonyms: ice, crystal, meth).	158	Y = Yes N = No R = Refused to answer D = Did not ask		<b>Req S</b> <b>Opt CT,</b> G, CH
Nitrates/Poppers	M	Any one of various alkyl nitrites (particularly amyl nitrite, butyl nitrite and isobutyl nitrite) taken for recreational purposes through direct inhalation.	159	Y = Yes N = No R = Refused to answer D = Did not ask		<b>Req S</b> <b>Opt CT,</b> G, CH
Erectile dysfunction (ED) medications	M	Any one of several drugs available by prescription (e.g. Viagra) used to treat erectile dysfunction.	160	Y = Yes N = No R = Refused to answer D = Did not ask	Note: Over-the-Counter (OTC) herbal medicines or remedies to treat ED should NOT be considered 'eligible' ED drugs for the purposes of this question.	<b>Req S</b> <b>Opt CT,</b> G, CH
Other drug(s) used?	M	Other drug = type of injection or non-injection drug used for recreational purposes that is not listed above.	161	Y = Yes N = No R = Refused to answer D = Did not ask		<b>Req S</b> <b>Opt CT,</b> G, CH
No drug use reported	M		162	Y = Yes N = No R = Refused to answer D = Did not ask		<b>Req S</b> <b>Opt CT,</b> G, CH
Been incarcerated within past 12 months?			163	Y = Yes N = No R = Refused to answer D = Did not ask		<b>Req S</b> <b>Opt CT,</b> G, CH
History of ever having an STD prior to this STD diagnosis?		Does the patient have a history of ever having had an STD prior to the condition reported in this case report?	164	Y=Yes, patient has a history of STD N=No, patient has never had a prior STD U=Unknown if patient has had a prior STD R = Patient refused to answer any questions regarding prior STD history		<b>Req S</b> <b>Opt CT,</b> G, CH
Have you met sex partners through the Internet in the last 12 months?		Did the patient use an online computer site to exchange messages by typing them onscreen to engage in conversation with other visitors to the site for the purpose of having sex?	165	Y = Yes N = No R = Refused to answer D = Did not ask		<b>Req S</b> <b>Opt CT,</b> G, CH
Total number of sex partners last 12 months?	M	Total number of claimed sex partners that the case patient has had in the last 12 months. Total partners equal the sum of all male, female, and transgender partners during the last 12 months. Those marked unknown or refused are excluded from the total.	166-168	### 888=Patient refused to answer questions regarding number of sex partners 999=Unknown number of sex partners in last 12 months		<b>Req S</b> <b>Opt CT,</b> G, CH
<b>Clinician-observed lesion(s) indicative of syphilis were identified at which of the following anatomic site(s)? (Mark all that apply.)</b>		If condition = any stage of syphilis, report anatomic site(s) of clinician-observed lesion(s) (e.g., chancre, rash, condyloma lata) at time of initial exam or specimen collection. Mark all that apply.				

<b>Data Element Name</b>	<b>N/M*</b>	<b>Data Element Definition</b>	<b>Columns</b>	<b>Data Element "legal" Values</b>	<b>Data Element "legal" value definition</b>	<b>Required/Optional<sup>+</sup></b>
<b>CODE KEY</b>						
*N=New (2011); M=Modified (2011)						
<sup>+</sup> Req=Required; Opt=Optional; CT=Chlamydia; G=Gonorrhea; S=Syphilis; CH=Chancroid						
A=Anus/Rectum		One or more lesion(s) indicative of syphilis were present in the anus or rectum.	169	Y= Yes; Variable value is Y or Blank, dependent upon whether a lesion compatible with syphilis was observed at this anatomic site.		<b>Req S Opt CH</b>
B=Penis		One or more lesion(s) indicative of syphilis were present on the penis.	170	Y= Yes; Variable value is Y or Blank, dependent upon whether a lesion compatible with syphilis was observed at this anatomic site.		<b>Req S Opt CH</b>
C=Scrotum		One or more lesion(s) indicative of syphilis were present on the scrotum.	171	Y= Yes; Variable value is Y or Blank, dependent upon whether a lesion compatible with syphilis was observed at this anatomic site.		<b>Req S Opt CH</b>
D=Vagina		One or more lesion(s) indicative of syphilis were present in the vagina.	172	Y= Yes; Variable value is Y or Blank, dependent upon whether a lesion compatible with syphilis was observed at this anatomic site.		<b>Req S Opt CH</b>
E=Cervix		One or more lesion(s) indicative of syphilis were present on the cervix.	173	Y= Yes; Variable value is Y or Blank, dependent upon whether a lesion compatible with syphilis was observed at this anatomic site.		<b>Req S Opt CH</b>
F=Nasopharynx		One or more lesion(s) indicative of syphilis were present in the nasopharynx.	174	Y= Yes; Variable value is Y or Blank, dependent upon whether a lesion compatible with syphilis was observed at this anatomic site.		<b>Req S Opt CH</b>
G=Mouth/Oral cavity		One or more lesion(s) indicative of syphilis were present in the mouth or oral cavity.	175	Y= Yes; Variable value is Y or Blank, dependent upon whether a lesion compatible with syphilis was observed at this anatomic site.		<b>Req S Opt CH</b>
H=Eye/conjunctiva		One or more lesion(s) indicative of syphilis were present on the eye or conjunctiva.	176	Y= Yes; Variable value is Y or Blank, dependent upon whether a lesion compatible with syphilis was observed at this anatomic site.		<b>Req S Opt CH</b>
I=Head		One or more lesion(s) indicative of syphilis were present on the head.	177	Y= Yes; Variable value is Y or Blank, dependent upon whether a lesion compatible with syphilis was observed at this anatomic site.		<b>Req S Opt CH</b>
J=Torso		One or more lesion(s) indicative of syphilis were present on the torso.	178	Y= Yes; Variable value is Y or Blank, dependent upon whether a lesion compatible with syphilis was observed at this anatomic site.		<b>Req S Opt CH</b>
K=Extremities (Arms, legs, feet, hands)		One or more lesion(s) indicative of syphilis were present on the extremities (arms, legs, feet, hands).	179	Y= Yes; Variable value is Y or Blank, dependent upon whether a lesion compatible with syphilis was observed at this anatomic site.		<b>Req S Opt CH</b>
N= No lesion noted		Patient was evaluated but no lesion(s) indicative of syphilis were observed.	180	Y= Yes; Variable value is Y or Blank, dependent upon whether a lesion compatible with syphilis was observed.		<b>Req S Opt CH</b>

Data Element Name	N/ M*	Data Element Definition	Columns	Data Element "legal" Values	Data Element "legal" value definition	Required/ Optional <sup>+</sup>
<b>CODE KEY</b>						
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<sup>+</sup> Req=Required; Opt=Optional; CT=Chlamydia; G=Gonorrhea; S=Syphilis; CH=Chancroid						
O=Other anatomic site not represented in other defined anatomic sites		One or more lesion(s) indicative of syphilis were present in some other anatomic site not represented in the defined anatomic sites.	181	Y= Yes; Variable value is Y or Blank, dependent upon whether a lesion compatible with syphilis was observed at some other anatomic site not represented in other defined anatomic sites.		<b>Req S</b> <b>Opt CH</b>
U=Unknown		Anatomic site of lesion information is not available for whatever reason, e.g. patient not evaluated or information is not available for data entry.	182	Y= Yes; Variable value is Y or Blank, dependent upon whether information on the anatomic site of lesion compatible with syphilis was available.		<b>Req S</b> <b>Opt CH</b>
Type of nontreponemal serologic test for syphilis		What type of non-treponemal serologic test for syphilis was performed on specimen collected to support case patient's diagnosis of syphilis?	183	1= Rapid Plasma Reagin (RPR) 2= Venereal Disease Research Laboratory test (VDRL) (serology) 3=VDRL test of cerebrospinal fluid (CSF) 9 = Unknown test type		<b>Req S</b>
Quantitative syphilis test result	M	If the test performed provides a quantifiable result, provide quantitative result (e.g. if RPR is positive, provide titer, e.g. 1:64)	184-189	##### (see Ex. A) <##### (see Ex. B) >##### (see Ex. B) NR= nonreactive WR= weakly reactive 999999= unknown	Example A: If titer is 1:64, enter 64; if titer is 1:1024, enter 1024. Example B: Valid entries: <titer value or >titer value. For example, <64 or >16384.  All entries should be left justified (no preceding or trailing zeroes).	<b>Req S</b>
NETSS Version	N	What version of the NETSS record layout are you providing? i.e. Version 3 (January 2011)	190-191	03=Version 3		

**National Electronic Telecommunications System for Surveillance (NETSS)  
 RECORD LAYOUT FOR TRANSMISSION OF STD MORBIDITY DATA  
 CONGENITAL SYPHILIS CASE RECORD (LINE-LISTED DATA)  
 (Effective as of January 2011)**

The CDC 73.126 form was revised (04/2010) to remove the reporting city and maternal residence city FIPS code fields.

Data Element Name	N/M N=New (2011) M=Modified (2011)	Columns	Data Element Definition/Values
RECTYPE		1	Record type will determine how the record is handled when it arrives at CDC. Value for case data: <i>M=MMWR report</i>
UPDATE		2	<b>Currently not implemented.</b> (Pad with a 9)
STATE		3-4	Reporting State <b>FIPS</b> code - (e.g., "06", "13").
YEAR		5-6	MMWR Year (2-digits) for which case information reported to CDC.
CASEID		7-12	Unique Case ID ( <b>numeric only</b> ) assigned by the state.
SITE		13-15	Location code used by the state to indicate where report originated and who has responsibility for maintaining the record. (NOTE: STD*MIS software substitutes a '#' for the leading 'S' in codes listed below). Values include: <i>S01=State epidemiologist</i> <i>S02=State STD Program</i> <i>S03=State Chronic Disease Program</i> <i>S04-S99=Other state offices</i> <i>R01-R99=Regional or district offices</i> <i>001-999=County health depts (FIPS codes)</i> <i>L01-L99=Laboratories within state</i> <i>CD1=Historical records (prior to new format)</i> <i>CD2=Entered at CDC (based on phone reports)</i>
WEEK		16-17	MMWR Week on Surveillance Calendar, i.e., week for which case information reported to CDC.
EVENT		18-22	Event (disease) code for the disease being reported: <i>10316=Syphilis (congenital)</i>
COUNT		23-27	<i>For case records this field will always contain "00001".</i>
COUNTY		28-30	FIPS code for reporting county (Unknown=999)
BIRTHDATE		31-38	Date of birth of infant in YYYYMMDD format (Unknown=99999999)
AGE		39-41	Estimated Gestational Age in weeks - (e.g., "038", "042") (Unknown=999)
AGETYPE		42	Indicates the units (weeks) for the AGE field. Values: <i>2=0-52 Weeks</i> <i>9=Gestational Age Unknown (AGE field should be 999)</i>

Data Element Name	N/M N=New (2011) M=Modified (2011)	Columns	Data Element Definition/Values
SEX		43	Gender - Values: <i>1=Male</i> <i>2=Female</i> <i>9=Unknown</i>
RACE		44	Race of Mother - Values: <i>1=American Indian/Alaskan Native</i> <i>2=Asian or Pacific Islander</i> <i>3=Black</i> <i>5=White</i> <i>8=Other</i> <i>9=Unknown</i> <b>NOTE: Please use only one of the codes above if a single race was selected. If multiple races were selected, enter code 8=Other for Race and also select the appropriate race categories that apply in columns 238-244.</b>
HISPANIC		45	Indicator for Mother's Hispanic ethnicity - Values: <i>1=Hispanic/Latino, 2=Non-Hispanic/Latino, 9=Unknown</i>
EVENTDATE		46-51	Date of Report to Health Department in YYMMDD format
DATETYPE		52	A code describing the type of date provided in EVENTDATE. Value: <i>4=Date of first report to community health system</i>
CASE STATUS		53	Recode of Case Classification <i>1=Confirmed, Presumptive, or Syphilitic stillbirth (Default for STD*MIS)</i>  <i>2=Not a case</i> <i>9=Unknown</i>
IMPORTED		54	Indicates if the case was imported into the state or the U.S. Values: <i>9=(Default)</i> This variable should default to 9. It has been superseded by the STD IMPORT variable located in Column 256.
OUTBREAK		55	Indicates whether the case was associated with an outbreak. Values: <i>1=Yes, 2=No, 9=Unknown</i>
FUTURE		56-60	Reserved for future use (Pad with 99999).
INFOSRCE		61-62	Information Source/Provider Codes (from Interview Record if available). Values: <i>01=HIV Counseling and Testing Site</i> <i>02=STD clinic</i> <i>03=Drug Treatment</i> <i>04=Family Planning</i> <i>05=(RETIRED CODE ID)</i> <i>06=Tuberculosis clinic</i> <i>07=Other Health Department clinic</i> <i>08=Private Physician/HMO</i> <i>09=(RETIRED CODE ID)</i> <i>10=Hospital-Emergency Room; Urgent Care Facility</i> <i>11=Correctional Facility</i> <i>12=Laboratory</i> <i>13=Blood Bank</i> <i>14=Labor and Delivery</i>

Data Element Name	N/M N=New (2011) M=Modified (2011)	Columns	Data Element Definition/Values
			15=Prenatal 16=National Job Training Program 17=School-based Clinic 18=Mental Health Provider 29=Hospital-Other 66=Indian Health Service 77=Military 88=Other 99=Unknown (if data not available)
DETECTED		63-64	Method of Case Detection (from Interview Record if available). Values: 01=(RETIRED CODE ID) 02=(RETIRED CODE ID) 03=(RETIRED CODE ID) 04=(RETIRED CODE ID) 05=(RETIRED CODE ID) 06=(RETIRED CODE ID) 07=(RETIRED CODE ID) 08=(RETIRED CODE ID) 09=(RETIRED CODE ID) 10=(RETIRED CODE ID) 99=(RETIRED CODE ID) 20=Screening 21=Self-referred 22=Patient referred partner 23=Health Department referred partner 24= Cluster related 88=Other
MZIP		65-69	Zip Code for Mother's Residence 99999=Unknown (if data not available)
FUTURE		70-79	Blank
CITY (DISCONTINUED)	M	80-83	Previously reporting City FIPS Code. <b>Leave blank.</b>
SENTINEL (DISCONTINUED)	M	84	Sentinel Reporting Site – Values: 1=Yes, 2=No <b>Leave blank.</b>
MSTATE		85-86	FIPS Code for Mother's State of Residence. Code 98 for Mexico and 97 for any other non-USA residence.
MCOUNTY		87-89	FIPS Code for Mother's County of Residence. Code 998 for Mexico and 997 for any other non-USA residence.
MCITY (DISCONTINUED)	M	90-93	Previously FIPS Code for Mother's City of Residence. Code 9998 for Mexico and 9997 for any other non-USA residence. <b>Leave blank.</b>
MBIRTH		94-101	Mother's Date of Birth in YYYYMMDD format.

<b>Data Element Name</b>	<b>N/M</b> N=New (2011) M=Modified (2011)	<b>Columns</b>	<b>Data Element Definition/Values</b>
MARITAL		102	Mother's Marital Status. Values: <i>1=Single, never married</i> <i>2=Married</i> <i>3=Separated/Divorced</i> <i>4=Widow</i> <i>8=Other</i> <i>9=Unknown</i>
LMP		103-110	Date of Mother's Last Menstrual Period before delivery in YYYYMMDD format.
PRENATAL		111	Did mother have prenatal care? Values: <i>1=Yes, 2=No, 9=Unknown</i>
PNCDATE1		112-119	Date of mother's first prenatal visit in YYYYMMDD format.
PNCNUM		120-121	Number of prenatal visits.
NONTREP		122	Did mother have nontreponemal test (e.g., RPR or VDRL) in pregnancy, at delivery, or soon after delivery? Values: <i>1=Yes, 2=No, 9=Unknown</i>
DATEA		123-130	Date of nontreponemal test in YYYYMMDD format.
RESULTA		131	Result of nontreponemal test. Values: <i>1=Reactive, 2=Nonreactive, 9=Unknown</i>
DATEB		132-139	Date of nontreponemal test in YYYYMMDD format.
RESULTB		140	Result of nontreponemal test. Values: <i>1=Reactive, 2=Nonreactive, 9=Unknown</i>
DATEC		141-148	Date of nontreponemal test in YYYYMMDD format.
RESULTC		149	Result of nontreponemal test. Values: <i>1=Reactive, 2=Nonreactive, 9=Unknown</i>
DATED		150-157	Date of nontreponemal test in YYYYMMDD format.
RESULTD		158	Result of nontreponemal test. Values: <i>1=Reactive, 2=Nonreactive, 9=Unknown</i>
TITER		159-162	Titer of nontreponemal test. The titers for dates b, c and d are in columns 214-225. <i>0=weakly reactive</i>

<b>Data Element Name</b>	<b>N/M</b> N=New (2011) M=Modified (2011)	<b>Columns</b>	<b>Data Element Definition/Values</b>
TREPONEM		163	Did mother have confirmatory treponemal test result (e.g., FTA-ABS or MHATP)? Values: <i>1=Yes, reactive</i> <i>2=Yes, nonreactive</i> <i>3=No test</i> <i>9=Unknown</i>
LESIONS		164	Did mother have darkfield or direct fluorescent antibody (DFA) exam of lesions at delivery? Values: <i>1=Yes, positive</i> <i>2=Yes, negative</i> <i>3=No test of lesions</i> <i>4=No lesions present</i> <i>9=Unknown</i>
LASTREAT		165	When was mother last treated for syphilis? . Values: <i>1=Before pregnancy</i> <i>2=During pregnancy</i> <i>3=No Treatment</i> <i>9=Unknown</i>
TXADQBEF		166	Before pregnancy, was mother's treatment adequate? - Values: <i>1=Yes, adequate</i> <i>2=No, inadequate</i> <i>9=Unknown</i>
TXADQDUR		167	During pregnancy, was mother's treatment adequate? Values: <i>1=Yes, adequate</i> <i>2=No, inadequate; non-penicillin therapy</i> <i>3=No, inadequate; penicillin therapy begun &lt; 30 days before delivery</i> <i>4=Unknown</i>
RESPAPPR		168	Appropriate serologic response? Values: <i>1=Yes, appropriate response with adequate serologic follow-up during pregnancy</i> <i>2=Yes, appropriate response but no follow-up serologic titers during pregnancy</i> <i>3=No, inappropriate response: evidence of treatment failure or reinfection</i> <i>4=No, response was equivocal or could not be determined from available nontreponemal titer information</i>
VITAL		169	Vital status of child Values: <i>1=Alive</i> <i>2=Born alive, then died</i> <i>3=Stillborn</i> <i>9=Unknown</i>
DEATHDAT		170-177	Date of death of child in YYYYMMDD format (Leave blank, if alive).
BIRTHWT		178-181	Birthweight in grams

Data Element Name	N/M N=New (2011) M=Modified (2011)	Columns	Data Element Definition/Values
REACSTS			Did infant have reactive non-treponemal test for syphilis? Values: <i>1=Yes, 2=No, 9=Unknown</i>
REACDATE		183-190	Date of child's first reactive non-treponemal test for syphilis in YYYYMMDD format.
SIGNSCS		191	Did child have any classic signs of CS? Values: <i>1=Yes, 2=No, asymptomatic child, 9=Unknown</i>
DARKFLD		192	Did child have a darkfield exam? Values: <i>1=Yes, positive 2=Yes, negative 3=No test 9=Unknown</i>
DFA (DISCONTINUED)		193	<b>Leave blank.</b> Did child have a direct fluorescent antibody test? Values: <i>1=Yes, positive 2=Yes, negative 3=No test 9=Unknown</i>
IGM		194	Did child have an IgM-specific treponemal test? Values: <i>1=Yes, reactive 2=Yes, nonreactive 3=No test 9=Unknown</i>
XRAYS		195	Did child have long bone x-rays? Values: <i>1=Yes, changes consistent with CS 2=Yes, no signs of CS 3=No xrays 9=Unknown</i>
CSFVDRL		196	Did child have a CSF-VDRL? Values: <i>1=Yes, reactive 2=Yes, nonreactive 3=No test 9=Unknown</i>
CSFCOUNT		197	Did child have a CSF cell count or CSF protein test Values: <i>1=Yes, one or both elevated 2=Yes, both not elevated 3=No test 9=Unknown</i>

<b>Data Element Name</b>	<b>N/M</b> N=New (2011) M=Modified (2011)	<b>Columns</b>	<b>Data Element Definition/Values</b>
TREATED		198	Was child treated? Values: 1=Yes, with Aqueous or Procaine Penicillin for >=10 days 2=Yes, with Ampicillin followed by Aqueous or Procaine Penicillin for a total of >=10 days 3=Yes, with Benzathine penicillin x 1 4=Yes, with other treatment 5=No treatment 9=Unknown
CLASS		199	Case Classification Values: 1=Not a case 2=Confirmed Case (laboratory confirmed identification of <i>T.pallidum</i> , e.g., darkfield or direct fluorescent antibody positive lesions) 3=Syphilitic stillbirth 4=Presumptive case (a case identified by the above algorithm, which is not a confirmed case or syphilitic stillbirth)
ID126		200-206	CDC 73.126 form Case ID number
VERSION		207-213	This information is automatically entered for areas using STD*MIS. Values: 09-1991 06-2000 10-2003 04-2010
TITERB		214-217	Titer of nontreponemal test b. 0=weakly reactive
TITERC		218-221	Titer of nontreponemal test c. 0=weakly reactive
TITERD		222-225	Titer of nontreponemal test d. 0=weakly reactive
TREATDAT		226-233	Date mother was treated in YYYYMMDD format.
INFITITER		234-237	Titer of infant's first reactive non-treponemal test for syphilis  <b>NOTE: If multiple races were selected and you entered code 8=Other for Race (column 44), please also select the appropriate race categories that apply in columns 238-244.</b>
AMIND		238	If mother multi-racial, 1 = Yes, 2 = No, otherwise blank.
ASIAN		239	If mother multi-racial, 1 = Yes, 2 = No, otherwise blank.
BLACK		240	If mother multi-racial, 1 = Yes, 2 = No, otherwise blank.
WHITE		241	If mother multi-racial, 1 = Yes, 2 = No, otherwise blank.
NAHAW		242	If mother multi-racial, 1 = Yes, 2 = No, otherwise blank.
RACEOTH		243	If mother multi-racial, 1 = Yes, 2 = No, otherwise blank.
RACEUNK		244	If mother multi-racial, 1 = Yes, 2 = No, otherwise blank.

Data Element Name	N/M N=New (2011) M=Modified (2011)	Columns	Data Element Definition/Values
MCOUNTRY		245-246	Mother's country of residence.
REACTREP		247	Did infant have reactive treponemal test? Values: <i>1 = Yes</i> <i>2 = No</i> <i>9 = Unknown</i>
RTDATE		248-255	Date of infant reactive treponemal test in YYYYMMDD format.
STD IMPORT		256	Was case imported? Was disease acquired elsewhere? Indicates probable location of disease acquisition relative to reporting state values: <i>N = Not an imported case</i> <i>C = Yes, imported from another country</i> <i>S = Yes, imported from another state</i> <i>J = Yes, imported from another county/jurisdiction in the state</i> <i>D = Yes, imported but not able to determine source state and/or country</i> <i>U = Unknown</i>

**National Electronic Telecommunications System for Surveillance (NETSS)  
RECORD LAYOUT FOR TRANSMISSION OF STD MORBIDITY DATA  
DELETION RECORDS**

<b>Data Element Name</b>	<b>Columns</b>	<b>Data Element Definition/Values</b>
RECTYPE	1	Record type will determine how the record is handled when it arrives at CDC. Value for deletion record: <i>D=Delete</i>
UPDATE	2	<b>Currently not implemented.</b>
STATE	3-4	Reporting State <b>FIPS</b> code - Q2 on 126 form.(e.g., "06", "13").
YEAR	5-6	MMWR Year (2-digits) in which record to be deleted was reported to CDC.
CASEID	7-12	Unique Case ID ( <b>numeric only</b> ) assigned by the state.
SITE	13-15	Location code used by the state to indicate where report originated and who has responsibility for maintaining the record. (NOTE: STD*MIS software substitutes a '#' for the leading 'S' in codes listed below). Values include: <i>S01=State epidemiologist</i> <i>S02=State STD Program</i> <i>S03=State Chronic Disease Program</i> <i>S04-S99=Other state offices</i> <i>R01-R99=Regional or district offices</i> <i>001-999=County health depts (FIPS codes)</i> <i>L01-L99=Laboratories within state</i> <i>CD1=Historical records (prior to new format)</i> <i>CD2=Entered at CDC (based on phone reports)</i>
WEEK	16-17	MMWR Week on Surveillance Calendar, i.e., week in which record to be deleted was reported to CDC.
FILLER	18-60	Blank

**National Electronic Telecommunications System for Surveillance (NETSS)  
RECORD LAYOUT FOR TRANSMISSION OF STD MORBIDITY DATA  
VERIFICATION RECORDS**

<b>Data Element Name</b>	<b>Columns</b>	<b>Data Element Definition/Values</b>
RECTYPE	1	Record type will determine how the record is handled when it arrives at CDC. Value for verification record: <i>V=Verification</i>
STATE	2-3	Standard Reporting State <b>FIPS</b> code.(e.g., "06", "13").
EVENT	4-8	Event (disease) code for the disease being reported. <i>STD Codes:</i> <i>10273=Chancroid</i> <i>10274=Chlamydia trachomatis infection</i> <i>10276=Granuloma inguinale (GI)</i> <i>10280=Gonorrhea</i> <i>10306=Lymphogranuloma venereum (LGV)</i> <i>10307=Non-Gonococcal Urethritis (NGU)</i> <i>10308=Mucopurulent Cervicitis (MPC)</i> <i>10309=Pelvic Inflammatory Disease (PID) [unknown etiology]</i> <i>10311=Syphilis (primary)</i> <i>10312=Syphilis (secondary)</i> <i>10313=Syphilis, early latent</i> <i>10314=Syphilis, late latent</i> <i>10315=Syphilis, unknown latent</i> <i>10316=Syphilis (congenital)</i> <i>10318=Late Syphilis with clinical manifestations</i>
COUNT	9-13	Number of cases reported year-to-date.
YEAR	14-15	Year (2-digits) in which verification record is being transmitted to CDC.
FILLER	16-60	Blank

**ATTACHMENT B**

**EXAMPLE OF TRANSMISSION SUMMARY REPORT**

**NNDSS STATE'S STATUS-SUMMARY REPORT**

WEEK 50 , WEEK ENDING DATE:12/15/2007

**TABLE 1**

PROCESS DATE: 12/18/2007

ANY STATE

PROCESS TIME: 11:31

FILENAME FOR LOAD: R:\LINK\MMWRPROD\INNET77\MDN01919.STD

SUMMARY TOTALS OF THIS WEEK'S REPORT

TOTAL RECORDS RECEIVED	928
<hr/>	
NUMBER OF NEW RECORDS ADDED TO DATABASE	553
NUMBER OF UPDATE/DELETION RECORDS	353
NUMBER OF VERIFICATION RECORDS	9
NUMBER OF NON_NOTIF RECORDS NOT ADDED TO DATABASE	0
NUMBER OF INVALID RECORDS NOT ADDED TO DATABASE	5

TABLE 2

PROCESS DATE: 12/18/2007

ANY STATE

PROCESS TIME: 11:31

THE FOLLOWING DIFFERENCES WERE NOTED BETWEEN THE CDC/PHSPO DATABASE AND THE VERIFICATION RECORDS SENT FROM THE STATE DATABASE

PLEASE RECONCILE THE COUNTS; CALL THE GENERAL BRANCH NUMBER @ (404) 498-6241 FOR ASSISTANCE, IF NECESSARY.  
PLEASE TRANSMIT CHANGES AND CORRECTIONS AS SOON AS POSSIBLE

EVENT	CDC	STATE	DIFFERENCE
ASEPTIC MENINGITIS	493		493+
BACTERIAL MENING., OTHER	58		58+
CHANCROID	1	1	
CHICKENPOX (VARICELLA)	6		6+
CHLAMYDIA TRACHOMATIS	19388	19378	10+
FLU ACTIVITY CODE	109		109+
GIARDIASIS	249		249+
GONORRHEA	5855	5850	5+
HAEMOPHILUS INFLUENZAE	79		79+
HEPATITIS B, V. ACUTE	125		125+
HEPATITIS C, V. ACUTE	29		29+
LEGIONELLOSIS	84		84+
LYME DISEASE	3019		3019+
MALARIA	63		63+
MENINGOCOCCAL DISEASE	20		20+
MUMPS	16		16+
PERTUSSIS	120		120+
RABIES, ANIMAL	327		327+
ROCKY MOUNTAIN SP. FEVER	90		90+
RUBELLA	1		1+
SALMONELLOSIS	865		865+
SHIGELLOSIS	113		113+
STAPHYLOCOCCUS (MRSA)	3		3+
STREPTOCOCCAL DISEASE, INV.GROUP A	207		207+
STREPTOCOCCAL DISEASE, INV.GROUP B	452		452+
SYPHILIS, CONGENITAL	15	15	
SYPHILIS, EARLY LATENT	283	279	4+
SYPHILIS, LATE LATENT	323	320	3+
SYPHILIS, LATE W/CLIN.	5	5	
SYPHILIS, PRIMARY	80	78	2+
SYPHILIS, SECONDARY	216	215	1+
SYPHILIS, UNKNOWN LATENT	43	40	3+
TUBERCULOSIS	250		250+
TYPHOID FEVER	16		16+

\* STATE HAS MORE RECORDS THAN CDC/PHSPO. PLEASE CHECK FILES AND TRANSMIT ANY ADDITIONAL RECORDS.

+ CDC\PHSPO HAS MORE RECORDS THAN STATE. PLEASE CHECK FILES AND TRANSMIT APPROPRIATE DELETIONS.

**TABLE 3**

PROCESS DATE: 12/18/2007

ANY STATE

PROCESS TIME: 11:31

## UPDATES AND DELETIONS PERFORMED AND POSSIBLE ERRORS DETECTED

YEAR	WEEK	SITE	CASEID	EVENT NAME	MESSAGE
2007	45	#01	48982	EVENT CODE INVALID	RECORD DELETED
2007	49	#01	50162	EVENT CODE INVALID	RECORD DELETED
2007	49	#01	50280	EVENT CODE INVALID	RECORD DELETED
2007	40	#01	1684	GONORRHEA	RECORD UPDATED
2007	40	#01	1688	CHLAMYDIA	INVALID RECORD TYPE: K * (INVALID RECORD)
2007	25	#01	1693	CHANCROID	INVALID STATE CODE: 88 * (INVALID RECORD)
2007	40	#01	1694	CHLAMYDIA	RECORD UPDATED
2006	40	#01	1696	GONORRHEA	DATABASE CLOSED FOR YEAR: 06 * (INVALID RECORD)
2007	54	#01	1707	SYPHILIS, PRIM	INVALID WEEK NUMBER: 54 * (INVALID RECORD)

\* (INVALID RECORD) - RECORD NOT ADDED TO DATABASE. PLEASE SEND CORRECTED RECORD.

(WARNING) - RECORD ADDED TO DATABASE. PLEASE SEND CORRECTIONS TO RECORD.

**ATTACHMENT C**

**RE-CODING OF EXISTING CASE DATA FOR TRANSMISSION**

## Re-coding of Existing Case Data for NETSS Transmission

Below is a list of data elements and the corresponding DSTDP recommendation on how they should be processed.

Element	Change	Recommendation
Event	Retirement of code 10317 - Neurosyphilis	DSTDP will no longer accept case reports with Event = 10317 (Neurosyphilis). Any cases entered with this diagnosis should be updated with the appropriate staging and should have the Neurosyphilis Involvement variable set to Confirmed.
Race	Implementation of multi-race selection.	Distribute single race selection appropriately across the multiple race selections. For example, if in the current data Race = White, then it would be reported as White = Yes with all other Race categories (Asian, Black, etc.) = blank.  If the existing Race = Asian or Pacific Islander, then it would be reported as Asian = Yes, Native Hawaiian/Pacific Island = Yes and all other Race categories = blank.
Imported	Updated coding scheme.	Re-code as follows:  If existing data = 1, report STD Import as N If existing data = 2, report STD Import as C If existing data = 3, report STD Import as S
Sex of sex partner	Discontinued.	This element has been superseded by the new elements Sex w/ Male in Past 12 Months and Sex w/ Female in Past 12 Months. The existing data should be re-coded as follows:  If existing data = M – report Sex w/ Male = Y, Sex w/ Female = N If existing data = F – report Sex w/ Female = Y, Sex w/ Male = N If existing data = B - report Sex w/ Male = Y and Sex w/ Female = Y If existing data = R – report Sex w/ Male = R and Sex w/ Female = R If existing data = U – report Sex w/ Male = blank and Sex w/ Female = blank