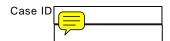
	Cluster Interv	view Template	
Person Being Interviewed:	OP Case #		
Relationship to OP:		Associate Type: Worker	Interview Date Lot No.
Medical Status/Hist. of Interviewee:			
AKAs/internet info (Screen names, e-mail address, etc):			
Cluster Interview Instructions:	=		P = Pursue C = Covered
1 P C		7 C	
2		8	
3		9	
4		10	
5		11	
6		12	
Risk Factors Y/O/N Within the last 12 months, has the client reported:	U/N/R/D Y/N/R/ No risk identified.	D Optional for 900 r Sex without using a condom?	regative sexual & social contacts, associates, or cohorts. Y-Yes N-No R-Refused to Answer
Y-Yes-Anal or Vaginal Intercourse (with or without Oral Sex) O-Yes, Oral Sex Only	Sex with male? Sex with female?	Engaged in injection drug use?	D-Did Not Ask
U-Unspecified Type of Sex N-No R-Refused to Answer	Sex with transgender?	Shared injection drug equipment? Other (Specify):	
900 PS Information	Co		ntacts, & Associates regardless of testing status
Interviewed?:	Sex at Birth M F	If additional Gender, Specify:	
Notifiability:	Notification Plan:		Actual Notification Method Used:
Self-Reported 900 Test Result:	Confirmed Client's Serostatus:		Date of Last 900 Test
Referred to Testing: Referral	Testing Performed:	Referral Test Result:	900 Result Provided:
	Inter	view Notes	



	Partner/Social Contact/Associate Information												
	Last Name	First Name				AKA					Jurisdiction		
1	Referral Basis First Exposure / /	Freq. Last Exposure/			Gender M F T U R Pregnant Y N U R Spouse Y N U					U R			
Со	andition / / / -		lx Typ	e Referra	I FR#			Dispo	/	_/	Cond.	l l ſ	SO/SP
Со	Ix Date Init. Date	Ix DIS #	Іх Тур	e Referra	al FR#			Dispo	Dispo	Date /	Cond.	DIS# L	SO/SP
	2 Ix Date Init. Date	Ix DIS #			Dispo Date					DIS#			
2	Last Name	First Name			AKA					Jurisdiction			
	Referral Basis First Exposure / /	Freq. Last Exposure/			Gender M F T U R Pregnant Y N U R					Spouse Y N U R			
	ndition / / / / / / / / Init. Date —	Ix DIS #	lx Typ	e Referra	l FR#			Dispo	/ Dispo	/ Date	Cond.	S	SO/SP
Cor	ndition / / /		Іх Тур	e Referra	l FR#			Dispo			Cond.		SO/SP
F	Ix Date Init. Date Last Name	First Name	DIS#			AKA		DI2h0	Date		DIS #		
3		Freq.	<u> </u>	Last				ender	P Preg	nant V	N U R		U R
	Referral Basis Exposure / /	1.104.	lx Typ	Exposure .	/ al FR#		MF	T U	R Preg	,	Cond.		SO/SP
	1 / / / Init. Date	Ix DIS #	- Ix Typ		al FR#			Dispo	/ Dispo	Date	Cond.	DIS#	SO/SP
Со	ondition / / / / / / / / / / / / / / / / / / /	Ix DIS #	- 17	, c	11(#			2.000	/ Dispo	Date	Oona.		00/01
	Marginal Partners, Social Contacts, & Associates												
Name			Sex Age Race Height Weight Hair Exposure Locati				Locating	Information					
1													
2													
3													
4													
7													
5													
5					Additiona	l Notes	=						
5					Additiona	l Notes	=						
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