



# Gonococcal Isolate Surveillance Project Form 1: Demographic/Clinical Data

Sentinel Site: (3 letter code)

Specimens collected during:    
Year Month

(SEE CODING INSTRUCTIONS ON BACK)

Form approved OMB no. 0920-0307 exp.08/31/2016

Patient Number	Clinic	Sex	Ethnicity	American Indian/ Alaskan Native	Asian	Black	Native Hawaiian/ Pacific Islander	White	Other	Date of Clinic Visit (mm/dd/yyyy)	Age	Sexual orientation	Symptoms	Previous hx of gonorrhea (ever)	# of previous episodes (past 12 mos.)	HIV status	Travel history	Sex work exposure	Previous antibiotic use	IDU	Non-IDU	Treatment 1 (gonorrhea)	Other treatment 1	Treatment 2	
01										___/___/___															
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Public reporting burden for this collection of information is estimated to average 11 minutes per client record extracted (for a total monthly burden of 3 hours and 40 minutes per clinic respondent), which includes the time required for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC, Project Clearance Officer, 1600 Clifton Road, MS E-11, Atlanta, GA 30333, ATTN: PRA (0920-0307). Do not send the completed form to this address.

# Coding Instructions

## Sentinel site codes

Albuquerque	ALB
Atlanta	ATL
Birmingham	BHM
Boston	BOS
Buffalo	BUF
Chicago	CHI
Cleveland	CLE
Columbus	COL
Dallas	DAL
Greensboro	GRB
Honolulu	HON
Indianapolis	IND
Kansas City	KCY
Las Vegas	LVG
Los Angeles	LAX
Minneapolis	MIN
New Orleans	NOR
New York City	NYC
Orange County	ORA
Philadelphia	PHI
Phoenix	PHX
Pontiac	PON
Portland	POR
San Diego	SDG
San Francisco	SFO
Seattle	SEA
Tripler	TRP

## Specimens collected during:

Enter all four digits of the year, followed by the two digit code corresponding to the month (01 for January, 02 for February, etc.) in which the specimens were collected.

## Clinic:

For sentinel sites using more than one clinic, enter the single digit assigned to the clinic from which the gonococcal isolate was obtained.

## Sex:

This variable refers to biological sex, rather than gender. If the patient has male genitalia, please code as male.

- 1=male
- 2=female
- 9=unknown

## Ethnicity:

- 1=Hispanic or Latino
- 2=not Hispanic or Latino
- 9=unknown

## Race (check all that apply):

American Indian or Alaska Native:

- 1=Yes
- 2=No
- 9=Unknown

Asian:

- 1=Yes
- 2=No
- 9=Unknown

Black or African-American:

- 1=Yes
- 2=No
- 9=Unknown

Native Hawaiian or other Pacific Islander:

- 1=Yes
- 2=No
- 9=Unknown

White:

- 1=Yes
- 2=No
- 9=Unknown

Other:

- 1=Yes
- 2=No
- 9=Unknown

## Date of clinic visit (mm/dd/yyyy):

Enter month, day, and year of clinic visit at which positive gonococcal culture was obtained. If day is unknown, enter "01" for day.

## Age:

Age in years. Code as "99" if unknown.

## Sexual orientation:

Sex of the patient's sexual partners within the past 3 months.

- 1=women only (heterosexual)
- 2=men only (homosexual)
- 3=women and men (bisexual)
- 9=unknown

## Symptoms of urethral gonorrhea:

- 1=discharge and/or pain with urination (dysuria)
- 2=no discharge and no dysuria
- 9=unknown

## Previous history of gonorrhea (ever):

Previous history of gonorrhea (lifetime); can be obtained from medical record or by patient self-report.

- 1=Yes
- 2=No
- 9=Unknown

## Number of previous gonorrhea episodes (past 12 months):

Enter the number of previous episodes of gonorrhea documented in the patient's record within the past 12 months.

- 0=no documented previous episodes in the past 12 months (includes patients for whom this is the initial clinic visit)
- 99=unknown (patient record not available or clinic staff unable to collect this variable due to record-keeping system)

## HIV status:

Most current HIV status known at the time of clinic visit for gonorrhea; obtained from medical record or by patient self-report. Can include rapid tests for which results are available on the day of the clinic visit.

- 1=positive
- 2=negative
- 3=indeterminate
- 9=unknown

## Travel history:

Travel outside of the United States (50 U.S. States) during the previous 60 days.

- 1=Yes
- 2=No
- 9=Unknown

## Sex work exposure:

History of giving or receiving drugs/money for sex in the previous 12 months.

- 1=Yes
- 2=No
- 9=Unknown

## Previous antibiotic use:

Any antibiotic use during the previous 60 days. This should only include systemic antibiotics, taken orally or by injection, and should not include antibiotic ointments or eye drops.

- 1=Yes
- 2=No
- 9=Unknown

## Injection drug use (IDU):

History of injection drug use in the previous 12 months.

- 1=Yes
- 2=No
- 9=Unknown

## Non-injection drug use (Non-IDU):

History of non-injection recreational drug use in the previous 12 months. This excludes alcohol, medications for erectile dysfunction, and steroids.

- 1=Yes
- 2=No
- 9=Unknown

## Treatment 1:

Primary treatment for gonorrhea.

- 00=none
- 03=spectinomycin (Trobicin) 2 gm
- 04=ceftriaxone (Rocephin) 250 mg
- 05=ceftriaxone (Rocephin) 125 mg
- 06=ciprofloxacin (Cipro) 500 mg
- 07=cefoxitin (Mefoxin) 2 gm
- 12=cefixime (Suprax) 400 mg
- 14=cefepodoxime proxetil (Vantin) 200 mg
- 15=ofloxacin (Floxin) 400 mg
- 17=ceftizoxime (Cefizox) 500 mg
- 18=cefotaxime (Claforan) 500 mg
- 21=azithromycin (Zithromax) 2 gm
- 22=levofloxacin (Levaquin) 250 mg
- 23=cefepodoxime proxetil (Vantin) 400 mg
- 24=ceftibuten (Cedax) 400 mg
- 25=cefdinir (Omnicef) 300 mg
- 26=cefdinir (Omnicef) 600 mg
- 27= gemifloxacin 320 mg
- 28= gentamicin 240 mg (or weight-based dosage)
- 88=other (please indicate in Other Treatment 1)
- 99=unknown

## Other Treatment 1:

If code "88" was entered for Treatment 1, please type in the name and dosage of the drug used for primary treatment of gonorrhea.

## Treatment 2:

Second antimicrobial used as part of dual therapy for gonorrhea treatment (and treatment of chlamydia, if present)

- 00=none
- 01=ampicillin/amoxicillin
- 09=doxycycline (Vibramycin)/tetracycline
- 10=erythromycin
- 11=azithromycin (Zithromax) 1 gm
- 15=ofloxacin
- 21=azithromycin (Zithromax) 2 gm
- 22=levofloxacin
- 88=other
- 99=unknown