

**Data Codebook — Region IX
Quarter 2 2009**

I. Regional Screening Criteria

Chlamydia:

- Screen all sexually active females who are twenty-five years of age and younger at the first visit and annually thereafter.
- Re-screen all females 3-4 months after treatment for chlamydia.
- Test of cure is not generally recommended. Test of cure advised after 3-4 weeks completion of treatment with erythromycin only.
- Routine screening of women over age 25 is not recommended. Screening of these older women may be individualized based on risk factors (e.g., multiple sex partners).

Gonorrhea:

- **Routine screening among young women:** Sexually active women 25 years of age and younger should be screened for gonorrhea annually, unless the prevalence of gonorrhea in the client population is known to be less than one percent. When practical, gonorrhea screening should be conducted in conjunction with chlamydia screening.
- **Targeted screening based on risk factors:** Among women older than 25 years of age, routine screening is not recommended and should be targeted only to those with risk factors for gonorrhea: history of gonorrhea in the previous two years, more than one sex partner in the previous 12 months, and partner with other partners. Certain racial groups are also at higher risk for infection across different Region IX states/project areas (e.g., African American women age <30 years in California and Nevada).
- **Screening in pregnancy:** Pregnant women 25 years of age and younger (and those women over age 25 with other risk factors for infection) should be screened for gonorrhea at the first prenatal visit. Repeat screening prior to term should be performed for those at continued risk.
- **Diagnostic testing:** Women with clinical exam findings indicative of gonococcal infection, e.g., cervicitis or pelvic inflammatory disease (PID), should be tested for gonorrhea.
- **Testing of STD contacts:** Women who report contact to an STD, specifically gonorrhea, chlamydia, nongonococcal urethritis, epididymitis, trichomoniasis, syphilis, or HIV, should be tested for gonorrhea.
- **Testing among women with a new STD diagnosis:** Women with a newly diagnosed STD, including chlamydia, trichomoniasis, syphilis, or HIV, should be tested for gonorrhea.
- **Re-testing after treatment:** Women treated for gonorrhea should have a repeat test for repeat infection three months after treatment. A test-of-cure (TOC) at three to four weeks is not necessary if recommended treatment regimens are used (Reference 2002/2006 CDC Treatment Guidelines).

All project areas in Region IX are using dual test technology (BD Probec, GenProbe Pace 2, GenProbe Aptima). GC screening almost always occurs simultaneously with CT. In a few locations, providers are requesting and receiving only CT results but this practice is sporadic. Decreasing GC screening in low prevalence populations has been a goal of the Region IX IPP project but without changing to a single test rather than a dual test, there is no financial incentive to request only CT results from a dual test. There have been some discussions in some project areas about using a single test, but none are currently doing so and we do not currently have variables set up to collect that information if they did.

II. Test Types

For CT:

- Transcription Mediated Amplification (TMA); Gen-Probe Aptima Combo 2 CT/GC
- Strand Displacement Assay (SDA); Becton Dickinson; BDProbeTec CT/GC
- Polymerase Chain Reaction (PCR); Roche; Amplicor CT/GC
- Nucleic Acid Hybridization; Gen-Probe; PACE 2C CT/GC

For GC:

- Transcription Mediated Amplification (TMA); Gen-Probe Aptima Combo 2 CT/GC
- Strand Displacement Assay (SDA); Becton Dickinson; BDProbeTec CT/GC
- Polymerase Chain Reaction (PCR); Roche; Amplicor CT/GC
- Nucleic Acid Hybridization; Gen-Probe; PACE 2C CT/GC
- Culture
- Gram Stain

III. National Core IPP Data Elements as Reported to CDC

Currently, none of the local project areas use this format to report to the Region. Instead, they report the variables listed in sections “IV. Regional Core IPP Data Elements” and “V. Core IPP Data Elements as Reported to the Region only.”

National Core Field Name	Type	Length	Description	Valid Values/Definitions (from CDC, slightly modified)	Regional notes
region	C	2	The HHS region submitting the record.	01 ... 10	This is Region 9
quarter	C	1	The time period during which the test was conducted.	0-End of Year 1-Quarter 1 ... 4-Quarter 4	Quarter when specimen was collected , not when test was conducted
year	C	4	The year during which the test was conducted.	YYYY format Valid value range: 1988 - present	Year when specimen was collected , not when test was conducted
state_code	C	2	The person’s state GNIS code of residence.	2-digit code identifying state. Refer to: http://geonames.usgs.gov/domestic/index.html	State where specimen was collected, not the person's residence
county_code	C	3	The person’s county GNIS code of residence.	3-digit code identifying county. Refer to: http://geonames.usgs.gov/domestic/index.html	Not collected in R9.
birth_dt	D		The person’s date of birth.	Date variable type	
age	C	2	The age of the person at the time the test was conducted. This variable is reported by the region and may be based on self-report or regional calculation.	Valid value range: 00 - 99 Unknown values are left blank	Valid range is from ages 10-79; otherwise blank. Age is calculated by the Region if birth date is available.
calculated_age	C	2	The calculated age of the patient at the time the test was conducted. This variable is calculated at CDC (specimen date – date of birth).	Valid value range: 00 - 99 Invalid or unknown values are left blank	Not calculated by Region.
sex	C	1	The biological sex of the person.	1-Male 2-Female 9-Unknown	Region also reports: 3-Transgender
race_a	C	1	Self-reported race is Asian	1-Yes	

National Core Field Name	Type	Length	Description	Valid Values/Definitions (from CDC, slightly modified)	Regional notes
race_i	C	1	Self- reported race is American Indian/ Alaska Native.	1-Yes	
race_b	C	1	Self- reported race is African American/ Black.	1-Yes	
race_p	C	1	Self- reported race is Pacific Islander/ Native Hawaiian.	1-Yes	
race_w	C	1	Self- reported race is White.	1-Yes	
race_o	C	1	Self- reported race is Other.	1-Yes	
race_r	C	1	The person refused to report race.	1-Yes (person refused to report race)	Not collected in RIX.
race_u	C	1	The person could not provide information regarding their race.	1-Yes (person could not provide information regarding their race)	Not collected in RIX.
ethnicity	C	1	Self- reported ethnicity is Hispanic or Latino.	1-Yes, Hispanic or Latino 2-No, not Hispanic or Latino 9-Unknown	
specimen_source	C	2	The source of the specimen used to conduct the test.	01- Cervix/Endocervix 05- Oropharynx 07- Other 09- Rectum 10- Urethra 11- Urine 12- Vagina 99- Unknown	
specimen_dt	D		The date the specimen was collected.	Date variable type	
facility_id	C	22	The health care provider or facility identification number.	Format varies by region	Calculated from Regional variables Agency, Clinid and Clintype.
visit_type	C	1	If the facility type is an integrated clinic (facility_type on Facility Reference File="27"), the type of visit that occurred.	1- Family Planning 2- STD 3- Prenatal 4- Other 9- Not applicable	
facility_link_id	C	24	A facility identifier that links the facility to the Facility Reference File, which contains additional information about the facility.	Format varies by region, although often times a combination of state and facility_id	Combination of Area and facility_id.
lab_id	C	20	The laboratory identification number.	Format varies by region.	CLIA lab ID.

National Core Field Name	Type	Length	Description	Valid Values/Definitions (from CDC, slightly modified)	Regional notes
ct_test_type	C	4	The type of chlamydia test (laboratory technology).	Method/Manufacturer/Brand Name 17.1- TMA/GP/Aptima Combo 2CT/GC 18.1- SDA/BD/BDProbeTec CT/GC 19.1- PCR/Roche/Amplicor CT/GC 19.2- PCR/Roche/COBAS CT/GC 20- Nucleic Acid Hybrid./GP/PACE 2CT/GC 21- Signal Amplification/Digene/Hybrid Capture 2 CT/GC DNA 09.1- TMA/GP/Aptima CT 06.1- PCR/Roche/Amplicor CT 06.2- PCR/Roche/COBAS Amplicor CT 08.1- SDA/BD/BDProbeTec CT 05.1- Nucleic Acid Hybrid./GP/PACE 2CT 04- EIA 03- DFA 02- Culture 88- Other (Please inform CDC if this code is used) 99- Unknown (Test type not specified, or unavailable)	
ct_test_rslt	C	1	The chlamydia test result.	1-Positive 2-Negative 3-Indeterminate 9-Unknown	
gc_test_type	C	4	The type of gonorrhea test (laboratory technology).	Method/Manufacturer/Brand Name 17.1- TMA/GP/Aptima Combo 2CT/GC 18.1- SDA/BD/BDProbeTec CT/GC 19.1- PCR/Roche/Amplicor CT/GC 19.2- PCR/Roche/COBAS Amplicor CT/GC 20- Nucleic Acid Hybrid./GP/PACE 2CT/GC 21- Signal Amplification/Digene/Hybrid Capture 2 CT/GC DNA 16.1- TMA/GP/Aptima GC 11.1- Nucleic Acid Hybrid./GP/PACE 2GC 12.1- PCR/Roche/Amplicor GC 12.2- PCR/Roche/COBAS Amplicor NG 15.1- SDA/BD/BDProbeTec GC 10- Culture 88- Other (Please inform CDC if this code is used) 99- Unknown (Test type not specified or otherwise unavailable)	

National Core Field Name	Type	Length	Description	Valid Values/Definitions (from CDC, slightly modified)	Regional notes
gc_test_rslt	C	1	The gonorrhea test result.	1-Positive 2-Negative 3-Indeterminate 9-Unknown	

Field Names, Types, Length, Description, and Valid Values/Definitions are very slightly modified from CDC's model regional codebook.
Type: C=character; D=date

IV. Regional Core IPP Data Elements — these elements are then reported to CDC as “Enhanced”

Regional Core Field Name	Type	Length	Description	Valid Values	These fields are reported to CDC as “Enhanced” <i>Other notes —</i>
AREA	N	1	Data origin by Project Area	0- AZ 1 - CA 2 - LA 3 - HI 4 - NV 5 - SF	W/ClinID, Agency and Clintype, combined to make unique identifier
AGENCY	N	10	Agency Number	Any number up to 10 digits	W/ClinID, Area and Clintype, combine to make unique identifier
CLINID	N	10	Clinic ID	Any number up to 10 digits	W/Area and Agency and Clintype, combined to make unique identifier
RACE	N	1	Race	1 - White 2 - Black 3 - American Indian/ Alaskan Native 4 - Asian/Pacific Islander 5 - Other 6 - Multi-racial 8 – Undeclared	CORE/OPTIONAL VARIABLE — Core only if clinic is not collecting multiple choice race measures. AZ - currently collects single race only and then codes a “yes” into the one appropriate multi-race field. HI - currently collects multi-race data CAPA - mostly multi-race except for STD/alt clinics NV – clinics collect either single race or multi-race fields LAPA - clinic by clinic, most FP data is multi-race. Some detention sites collect both single race and multi-race fields. SFPA - collects multi, but uses single race to note “primary” race identification
ZIP	C	5	Zip code of residence		Missing data are 99999 or blank

V. Core IPP Data Elements as Reported to the Region only — these are NOT reported to CDC

These variables are NOT reported to CDC; they have been superseded by CDC variables that convey the same information. The Region converts these data elements into the CDC format.

Region Core Field Name	Type	Length	Description	Valid Values	These fields NOT reported to CDC. <i>Other notes —</i>
GENDER	N	1	Gender of client	1 - Male 2 - Female 3 - Transgender	Transgender added 3/ Collected as character 00
AGE	N	2	Age in years	9-99	
BIRTHDTE	DATE		Date of birth	<MM/DD/YYYY>	Only Age, not birthdate in Hawaii
CLINTYPE	N	2	Clinic type	0 -School-based clinic 1 -Family planning 2 -STD 3 -Teen 4 -Pre-natal 5 - Other 6 -Juvenile custody 7 -Adult detention 8 -College student health 9 -Primary Care 10 -Alternative setting 91 -Family planning in primary care	This variable is frequently auto-coded at the clinic or project area.
RAIAK	N	1	Race – American Indian or Alaska Native	1 - Yes	Noted or otherwise left blank Collected as character or numeric
RASIAN	N	1	Race – Asian	1 - Yes	Noted or otherwise left blank Collected as character or numeric
RBLACK	N	1	Race – Black or African American	1 - Yes	Noted or otherwise left blank Collected as character or numeric
RHIPI	N	1	Race – Hawaiian or other Pacific Islander	1 - Yes	Noted or otherwise left blank Collected as character or numeric
RWHITE	N	1	Race – White	1 - Yes	Noted or otherwise left blank Collected as character or numeric
ROTHER	N	1	Race - Other	1 - Yes	Noted or otherwise left blank Collected as character or numeric

Region Core Field Name	Type	Length	Description	Valid Values	These fields NOT reported to CDC. <i>Other notes —</i>
HISPANIC	N	1	Hispanic ethnicity	1 - Yes 2 - No 8 - Undeclared	Collected as character or numeric
SPECDTE	DATE		Date of specimen collection:	<MM/DD/YYYY>	
LABID	C	10	Lab ID as assigned by CLIA		
TYPCTTES	N	2	Initial laboratory CT test type	0 - Not tested 1 - Culture 2 - Gen-Probe PACE2 3 - PCR (Roche Amplicor) 4 - Syva EIA 5 - Chlamydiazyme [discontinued] 6 - Other EIA 7 - DFA 8 - LCR (Abbott LCx) [discontinued] 9 - Missing 10 - Other 11 - TMA [CT-only, now outside US only] 12 - ProbeTec (Becton Dickinson) 13 - Hybrid Capture (Digene) 14 - Rapid point of care test 15 - Aptima Combo Essay	Collected as character or numeric
TYPGCTES	N	2	Type of GC test	0 - Not tested 1 - Culture 2 - Gen Probe PACE2 3 - PCR (Roche Amplicor) 4 - Gram stain 5 - LCR (Abbott LCx) [discontinued] 7 - Other 12 - Probe Tec (Becton Dickinson) 13 - Hybrid Capture (Digene) 15 - Aptima Combo Essay	Collected as character
CTRESULT	N	1	CT test result:	0 - Not tested 1 - Positive 2 - Negative 3 - Inconclusive 4 - Unsatisfactory	“Not tested” code changed from “5” to “0” as of 3/2000 Collected as character or numeric

Region Core Field Name	Type	Length	Description	Valid Values	These fields NOT reported to CDC. <i>Other notes —</i>
SOURCESP	N	1	Source of CT specimen	1 - Cervix 2 - Urethra 3 - Urine 4 - Rectum 5 - Vagina 6 - Other 7 - N/A (not tested)	Collected as character or numeric
STATE	C	2	State of project area	AZ - Arizona CA - California HI - Hawaii NV - Nevada	Standard USPS abbreviations
ZIP	C	5	Zip code of residence		Missing data are 99999 or blank

VI. Enhanced IPP Data Elements as reported to the Region and to CDC

Field Name	Type	Length	Description	Valid Values	Notes
CLINANID	C	10	Clinician ID	Any 10 characters	
CONTACT	N	1	Contact to chlamydia	1 - Yes 2 - No 3 - Unknown STD	Collected as character
CTTREAT	N	1	Type of CT treatment:	1 Doxycycline/Tetracycline 2 Azithromycin 3 Erythromycin 4 Other	Other not specified Collected as character
CTTREDTE	DATE		Date of CT treatment	<MM/DD/YYYY>	
DOUCH	N	1	Douching during past 30 days	1 Yes, last 24 hours 2 Yes, more than 24 hours but in last 30 days 3 No 4 N/A (males)	Collected as character
GCSCREEN	N	1	GC screening performed at this visit	1 - Yes 2 - No	Collected as character

Field Name	Type	Length	Description	Valid Values	Notes
GCRESLT	N	1	Initial lab GC test result:	0 - Not tested 1 - Positive 2 - Negative 3 - Inconclusive 4 - Unsatisfactory	Collected as character
GCTREAT	N	1	Type of GC treatment:	1 cefixime 2 ceftriaxone 3 ciprofloxacin 4 ofloxacin 5 levofloxacin 6 cefpodoxime 7 Other	Other not specified Collected as character
GCTREDTE	DATE		Date of GC treatment	<MM/DD/YYYY>	
IDNUM	C	15	Patient identification number	Any 15 characters	IDs may not be unique across project areas
NSEXPART	N	1	New sex partner in past 2 months	1 - Yes 2 - No	Collected as character
NUMPART	N	4	Number of partners in past 30 days	Any 4 digit number	
PARTNER	N	1	Partner has other partners	1 - Yes 2 - No 3 - Maybe/possibly 4 - Don't know 5 - N/A	Collected as character
PREGNOW	N	1	Client Pregnant	1 - Yes 2 - No	Collected as character
PRETREAT	N	1	Presumptive treatment for CT	1 - Yes 2 - No	Collected as character
PRIORCT	N	1	Prior history of CT	1 - Yes 2 - No	Collected as character
PRIORGC	N	1	Prior history of GC	1 - Yes 2 - No	Collected as character
REASBLD	N	1	Abnormal vaginal bleeding present	1 - Yes	Noted or otherwise left blank Collected as character
REASDYS	N	1	Dysuria present	1 - Yes	Noted or otherwise left blank Collected as character
REASOTH	N	1	Reason - other symptoms	1 - Yes	Noted or otherwise left blank Collected as character

Field Name	Type	Length	Description	Valid Values	Notes
REASPAIN	N	1	Pelvic pain present	1 - Yes	Noted or otherwise left blank Collected as character
REASVAG	N	1	Vaginal/urethral discharge present	1 - Yes	Noted or otherwise left blank Collected as character
SEXPART	N	1	Two or more sex partners past 2 months	1 - Yes 2 - No	Collected as character
SUPPDATA	N	1	Supplemental Data	Code: Value: 1 - Yes	Notes data that meets most but not all core measures -- not counted against missing core measures
SYMPTVIS	N	1	CT symptoms at this visit	1 - Yes 2 - No	Collected as character
UNIVREAS	N	2	Universal Reason for Visit	Code: Value: 1 - STD screen 2 - Symptomatic of any STD 3 - Contact to STD 4 - Follow-up/return <1 month 5 - Other 6 - High risk rescreen >1 month 7 - Sex worker screen 8 - Prenatal 9 - Unknown 10 - Family planning initial (first) 11 - Family planning annual 12 - Family planning limited 13 - Pregnancy test only	If more than one reason is collected at site, should code reasons hierarchically into one reason as follows: 1) Symptomatic, 2) Contact to STD, 3) STD screen, 4) Follow-up/return <1 month, 5) high risk rescreen >1 month, 6) FP initial, 7) FP annual, 8) FP limited, 9) pregnancy test only, 10) sex worker screen, 11) other. Thus, if STD screen and symptoms were both reasons for visit, “symptoms” should be coded as reason for visit for this data set. HI no longer able to distinguish FP visit types

VII. Facility Reference File

The following two tables detail the facility reference file for the Region; the ‘Description’ column shows suggested file layout from CDC (for core variables) or modified from DR. DIPSAs (for enhanced variable). See section VII for more detailed information about facility types.

Core Variables Field Name	Type	Length	Description	Valid Values/Definitions	Regional notes
facility_link_id	C	24	An facility identifier that links the facility to the primary dataset, which contains line-listed test results.	Format varies by region, although often times a combination of state and facility_id	Combination of Area and facility_id.
facility_id	C	22	The health care provider or facility identification number.	Format varies by region	Calculated from Regional variables Agency, Clinid and Clintype.
facility_city_code	C	6	The facility GNIS city code.	6-digit code identifying city. Refer to: http://geonames.usgs.gov/domestic/index.html Note: Regions are not required to implement GNIS for cities. If not using GNIS, please provide a description of codes used in regional codebook.	Region reports 4-digit GSA city code See http://www.gsa.gov/gsa/cm_attachments/GSA_BASIC/FRPP%20GLC%20-%20United%20States_R2-x-n9-o_0Z5RDZ-i34K-pR.xls
facility_city_name	C	100	The facility city name.	Text name of city	
facility_county_code	C	3	The facility GNIS county code.	3-digit code identifying county. Refer to: http://geonames.usgs.gov/domestic/index.html	Region reports 2-digit GSA code. See http://www.gsa.gov/gsa/cm_attachments/GSA_BASIC/FRPP%20GLC%20-%20United%20States_R2-x-n9-o_0Z5RDZ-i34K-pR.xls
facility_county_name	C	100	The facility county name.	Text name of county	
facility_name	C	100	The health care provider or facility name.	Text name of facility	

Core Variables Field Name	Type	Length	Description	Valid Values/Definitions	Regional notes
facility_type	C	2	The health care provider or facility type.	01-HIV Counseling and Testing Site 02-STD 03-Drug Treatment 04-Family Planning 07-Other Health Department Clinic 08-Private Physician/HMO 10- Hospital - Emergency Room (ER), Urgent care facility 14-Labor and Delivery 15-Prenatal 16-National Job Training Program 17-School-based clinic 18-Mental Health Provider 19-Adult Correctional Facility 20-Juvenile Correctional Facility 21-Adolescent/Teen Clinic 22-Alternative/Outreach Settings 23-Homeless Shelter 24-Community Health Center 25-HIV Clinic 26-University/College Health Center 27-Integrated Clinic 28-School Screening 29- Hospital - Other 66-Indian Health Service 77-Military 88-Other	Local project areas report these as CLINTYPE — 0 -School-based clinic 1 -Family planning 2 -STD 3 -Teen 4 -Pre-natal 5 - Other 6 -Juvenile custody 7 -Adult detention 8 -College student health 9 -Primary Care 10 -Alternative setting 91 -Family planning in primary care The Region converts CLINTYPE into the valid facility_type values and labels. Area, Agency, ClinID and facility_id are combined to make facility_id
facility_state_code	C	2	The facility GNIS state code.	2-digit code identifying state. 04 - AZ 06 - CA 32 - NV 15 - HI	
facility_state_postal	C	2	The facility state postal abbreviation.	2-character alpha postal code AZ - Arizona CA - California HI - Hawaii NV -Nevada	State of project area

Core Variables Field Name	Type	Length	Description	Valid Values/Definitions	Regional notes
facility_zip_code	C	5	The facility zip code.	5-digit zip code.	

Field Names, Types, Length, Description, and Valid Values/Definitions are very slightly modified from CDC's model regional codebook.

Type: C=character; D=date

Enhanced Variables Field Name	Type	Length	Description	Valid Values	Notes
AREA	N	2	Key to link to clinic reference file - project area		Area, Agency, ClinID and facility_id are combined to make facility_id
AGENCY	N	10	Key to link to clinic reference file - Agency ID		Area, Agency, ClinID and facility_id are combined to make facility_id
AGNAME	C	20	Agency Name		
CLINID	N	10	Key to link to clinic reference file - Clinic ID		Area, Agency, ClinID and facility_id are combined to make facility_id
CLINAME	C	25	Clinic name		
CLINTYPE	N	2	0 -School-based clinic 1 -Family planning 2 -STD 3 -Teen 4 -Pre-natal 5 - Other 6 -Juvenile custody 7 -Adult detention 8 -College student health 9 -Primary Care 10 -Alternative setting 91 -Family planning in primary care		Not reported to CDC The Region converts these values into the valid values and labels for field facility_type..
CHECK	N	1		1	For internal use

VIII. CDC Data Submission Process

Data Entry Techniques: In most states all or part of the data is collected by lab MIS or merged via unique patient identifier between lab MIS and clinic MIS data. For California and LA project area, family planning data is scanned using a Scantron form and converted to a data file.

Conversion Procedures: LA and Nevada submit in SPSS directly. California and Hawaii submit files in EPI-Info rec formats, which are converted to SPSS. San Francisco sends a DBF file, and Arizona submits in an Excel file that can be exported to a DBF file. DBF files can be opened and saved in SPSS. Conversion at the Region level occurs in two steps: in the first step, very little conversion is done to measures except to change characters to numerics and check quality and validity; in the second step, a more extensive conversion changes the regional data variables into the CDC format for variables and values. As of late 2008, the region has been submitting in SAS format.

Software Used: Region uses SPSS 16.0 to process records, and imports records into SAS. San Francisco use SAS. LA and Nevada use SPSS. Hawaii exports from mainframe. Data comes to Arizona in a largely in tab-delimited or Excel and they are using Access and Excel for merging and storage. California is using EPI-Info and the files come to them in a variety of formats.

Reporting Schedule

In Region IX, all data submissions are cumulative through the end of the calendar year being reported.

Period Covered	Current Schedule Local Project Areas Submit to Region 9	Current Schedule Submit to CDC	CDC Goal LPAs to Region	CDC Goal Due to CDC	File Naming Conventions*	
					Prevalence Dataset	Facility Reference File
Qtr 1 Jan-Mar	June 1	June 15*	May 1	May 15	P_2008Q1_R09	F_2008Q1_R09
Qtr 2 Apr-Jun	September 1	September 15	August 1	August 15	P_2008Q2_R09	F_2008Q2_R09
Qtr 3 Jul-Sep	December 1	December 15	Nov 1	Nov 15	P_2008Q3_R09	F_2008Q3_R09
Qtr 4 Oct-Dec	<i>Not applicable in R9</i>	<i>Not applicable in R9</i>	<i>Not applicable in R9</i>		P_2008Q4_R09	F_2008Q4_R09
End Year	April 1	April 15	April 1	April 15	P_2008EY_R09	F_2008EY_R09

P=Prevalence; F=Facility (Facility Reference File); Q=Quarter; EY=End Year; R=Region

IX. Additional Data Definitions*Facility Type*

Value	Name	Description
01	HIV Counseling and Testing Site	A site whose primary mission is dedicated to providing counseling and HIV testing services.
02	Sexually Transmitted Disease (STD) Clinic	A clinic whose primary mission is to provide diagnosis, treatment, counseling, and sex partner notification for sexually transmitted diseases.
03	Drug Treatment	A residential or outpatient clinic whose primary mission is to provide treatment for drug, alcohol, and other substance abuse.
04	Family Planning Clinic	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).
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).
10	Hospital - Emergency Room (ER), Urgent care facility	A department in a hospital or clinic staffed and equipped to provide emergency care to persons requiring immediate medical treatment.
14	Labor and Delivery	A facility providing health care services to women during labor and delivery through birth of the infant.
15	Prenatal Clinic	A clinic whose primary mission is to provide health care and education to pregnant women.
16	National Job Training Program	A residential, educational, and job training program for at-risk youth aged 16 to 24 years. Job Corps is a public-private partnership administered by the U.S. Department of Labor and the Employment and Training Administration.
17	School-Based Clinic	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 12 th grade that provides medical care and health education to students.
18	Mental Health Provider	Facility or provider providing inpatient or outpatient mental health services.
19	Adult Correctional Facility	A prison, jail, detention center, or other correctional facility where persons aged 18 years and older are incarcerated or supervised by the criminal justice system.

Value	Name	Description
20	Juvenile Correctional Facility	A prison, jail, detention center, or other correctional facility where persons aged 17 years and younger are incarcerated or supervised by the criminal justice system.
21	Adolescent/Teen Clinic	A clinic whose primary mission is to provide medical and social services to adolescents aged 10-19 years and is not affiliated with a school- or university-based health clinic.
22	Alternate/Outreach Settings	Medical services that are provided by a mobile van or at locations that change frequently or are non-traditional health care locations (e.g., public housing settings or recreation center settings).
23	Homeless Shelter	A public or private facility whose primary mission is to provide services (including health care) to homeless individuals.
24	Community Health Center	A facility whose primary mission is to provide primary and preventive health care services in medically-underserved areas throughout the U.S. Rural Health Centers/Clinics are included in this category.
25	HIV Clinic	A clinic whose primary mission is to provide HIV primary care.
26	University/College Health Center	A clinic operated by a college or university whose primary mission is to provide health care for enrolled students.
27	Integrated Clinic	A site that provides both family planning and STD services, in addition to other services, to any patient at any time. (Note: the 'visit type' variable must be used to differentiate family planning, STD, prenatal and "other" clients.)
28	School Screening	Testing occurs as part of a screening program in a junior high, high school, university, or other formal educational setting, such as charter schools, where the provision of a test is not contingent upon a student seeking care at a school-based health clinic. (This code should be used only for school screening programs, not for student health centers or school-based clinics).
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 Services	A facility funded as part of the Indian Health Services.
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.