



# Gonococcal Isolate Surveillance Project

## Form 1: Demographic/Clinical Data

Sentinel Site: (3 letter code) \_\_\_\_\_ (2-4)

Specimens collected during: \_\_\_\_\_  
Year (5-8) Month (9-10)

(1)

Form approved OMB no. 0920-0307 exp.1/31/2008

(SEE CODING INSTRUCTIONS ON BACK)

Patient # <small>(26-27)</small>	Corresponding date (yyyy/mm) of clinic totals for gonorrhea: <small>Year (11-14) Month (15-16)</small>											Number of gonorrhea episodes diagnosed: Female: <input type="text"/> (17-19) Male: <input type="text"/> (20-22) Total episodes: <input type="text"/> (Sum of the two) (23-25)															
	Clinic <small>(28)</small>	Sex <small>(29)</small>	Ethnicity <small>(30)</small>	American Indian / Alaskan Native <small>(31)</small>	Asian <small>(32)</small>	Black <small>(33)</small>	Native Hawaiian / Pacific Islander <small>(34)</small>	White <small>(35)</small>	Other <small>(36)</small>	Date of clinic visit (mm/dd/yyyy) <small>(37-46)</small>	Date of birth (mm/dd/yyyy) <small>(47-56)</small>	Age <small>(57-58)</small>	Sexual orientation <small>(59)</small>	Symptoms <small>(60)</small>	Reason for visit <small>(61)</small>	Previous hx of gonorrhea (ever) <small>(62)</small>	# of previous episodes (past 12 mos.) <small>(63-64)</small>	Zipcode <small>(65-69)</small>	HIV status <small>(70)</small>	Travel history <small>(71)</small>	Sex work exposure <small>(72)</small>	Previous antibiotic use <small>(73)</small>	IDU <small>(74)</small>	Non-IDU <small>(75)</small>	Treatment 1 (Gonorrhea) <small>(76-77)</small>	Other treatment 1 <small>(78-88)</small>	Treatment 2 (Chlamydia) <small>(89-90)</small>
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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 30 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.



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