Attachment 3

Summary of Changes to Data Collection Methods and Data Elements

STD Surveillance Network (SSuN)

Revision Request

OMB# 0920-1072

May 12, 2023

**Summary of Proposed Changes in the Approved ICR for the**

**Enhanced STD Surveillance Network (SSuN) OMB # 0920-1072**

**Summary of Proposed Changes**

We are requesting revision to the information collection request (ICR) for the STD Surveillance Network (SSuN), OMB #0920-1072. The revisions requested for this ICR future expansion to up to 29 additional STD clinical facilities inclusion of enhanced investigations of a sample of syphilis cases reported in up to 12 sites. Data collection revisions include non-substantive response coding modifications to currently collected data elements across multiple project components, addition of 22 new data elements to capture Mpox testing, diagnoses, and vaccination and for screening and eligibility for Pre-Exposure Prophylaxis for HIV among STD clinic patients and for patients sampled for enhanced investigations. Removal of 28 data elements associated with retired data items is also being proposed. These revisions are responsive to NCHHSTP’s intention to enhance monitoring for newly emergent STDs such as Mpox, enhance existing data collection activities to support evaluation of ‘End the HIV Epidemic’ initiatives and to better monitor health equity measures in relation to access to STD care, symptoms, diagnoses, and treatments associated with STDs.

Agency estimate of the burden for HIV surveillance registry matching is being reduced to zero (**wkst2e**) based on collaborating Health Department automation efforts and a modest increase in Health Department data management for Strategy A and B is requested to maintain this activity (see **wkst2b** and **wkst2d**).

Change in burden by adding new data elements and activities is partially offset by discontinuing multiple data elements and no change in burden is anticipated by the addition of investigations among a sample of syphilis cases; see **Table 1** for listing of data elements proposed for removal. Revisions to the valid response codes for existing sentinel surveillance (Strategy A) and enhanced surveillance (Strategy B) data elements are described in Tables 2A and 3A and have no additional burden associated with them. Proposed new data elements for both strategies are summarized in Tables 2B and 3B (below).

Additionally, diagnosed and reported cases of adult syphilis are proposed for addition to case-based enhanced case investigations to monitor patient demographics, HIV co-infection, treatment and repeat episodes of disease among persons diagnosed and reported with syphilis. Data elements associated with this activity are already collected as part of enhanced gonorrhea case investigations; this activity results in additional data transmitted to CDC in existing datasets.

Burden table (**Attachment 3A**) is updated to reflect these changes. **Attachment 6** is updated to reflect a change in personnel in collaborating health departments.

**Sentinel Surveillance Data Elements and Methods in STD Clinical Facilities (SSuN Strategy A)**

This component of SSuN collects existing data for patients presenting for care in STD-specialty clinical facilities. Expansion to include up to 25 additional facilities (total not to exceed 40) and addition of 24 data elements are proposed to characterize Mpox vaccination history, administration and the screening for, offer of and acceptance and use of HIV pre-and post-exposure. Several new data elements designed to capture symptomatic presentation and treatment for specific STDs are also added. Response options for existing laboratory data elements are revised to include the capture of Mpox testing and diagnosis. These changes in laboratory data element response coding for data collected from STD clinics will accommodate collection of Mpox-related tests, provide additional information on the uptake and potential cluster-vaccination, should emergent clusters of Mpox be observed in the participating communities. Because these data are abstracted electronically from clinic record systems, no additional burden is anticipated.

**Enhanced Case-based Surveillance Data Elements and Methods (SSuN Strategy B)**

This component of SSuN randomly samples reported cases of gonorrhea in collaborating health jurisdictions. Additional data elements (7) are proposed to characterize Mpox vaccination in an at-risk patient population and fully capture laboratory source for HIV-related laboratory results. Response options for existing laboratory data elements are being revised to include Mpox testing and enhanced investigations are being expanded to include a random sample of syphilis cases; these data will provide a valuable source of information to monitor characteristics of cases considering recent increases, especially in congenital syphilis. Reduction in the sample size for gonorrhea cases selected for enhanced investigations will offset any increase in burden from inclusion of a random sample of syphilis cases.

Across both strategies of SSuN, 28 data elements are being fully retired as no longer required or analytically useful.

**Update to the STD Surveillance Network Principal Investigator’s Contact Information in Attachment 6.**

We have updated information from funded entities reflecting changes in staff and contact information for collaborating key personnel. These changes are reflected in **Attachment 6**.

***Table1. Data Elements Being Retired (Removed)***

|  |  |
| --- | --- |
| **Data Element Name** | **Reason** |
| **P1\_RecSx** | No longer relevant/not well ascertained/not required analytically |
| **P1\_PrevPtx** | No longer relevant/not well ascertained/not required analytically |
| **P1\_Othno** | No longer relevant/not well ascertained/not required analytically |
| **P1\_Othsx** | No longer relevant/not well ascertained/not required analytically |
| **P1\_Dispo** | No longer relevant/not well ascertained/not required analytically |
| **P1\_Referral1** | No longer relevant/not well ascertained/not required analytically |
| **P3\_PTX\_HISPOrgin** | No longer relevant/not well ascertained/not required analytically |
| **P3\_PTX\_HISPTXT** | No longer relevant/not well ascertained/not required analytically |
| **P3\_PTX\_AsianOrigin** | No longer relevant/not well ascertained/not required analytically |
| **P3\_PTX\_PIOrigin** | No longer relevant/not well ascertained/not required analytically |
| **P3\_PTXNativity** | No longer relevant/not well ascertained/not required analytically |
| **P3\_PTXBirtState** | No longer relevant/not well ascertained/not required analytically |
| **P3\_PTXBirtCount** | No longer relevant/not well ascertained/not required analytically |
| **P3\_PTX\_reasA** | No longer relevant/not well ascertained/not required analytically |
| **P3\_PTX\_reasB** | No longer relevant/not well ascertained/not required analytically |
| **P3\_PTX\_reasC** | No longer relevant/not well ascertained/not required analytically |
| **P3\_PTX\_reasD** | No longer relevant/not well ascertained/not required analytically |
| **P3\_PTX\_reasE** | No longer relevant/not well ascertained/not required analytically |
| **P3\_PTX\_reasF** | No longer relevant/not well ascertained/not required analytically |
| **P3\_PTX\_reasI** | No longer relevant/not well ascertained/not required analytically |
| **P3\_PTX\_reasG** | No longer relevant/not well ascertained/not required analytically |
| **P3\_PTX\_reasH** | No longer relevant/not well ascertained/not required analytically |
| **P3\_PTX\_reasJ** | No longer relevant/not well ascertained/not required analytically |
| **P3\_PTX\_othReasonText** | No longer relevant/not well ascertained/not required analytically |
| **P3\_PTX\_refusreason** | No longer relevant/not well ascertained/not required analytically |
| **P3\_PTX\_DIS\_EPT** | No longer relevant/not well ascertained/not required analytically |
| **P3\_PTX\_DIS\_EPTnum** | No longer relevant/not well ascertained/not required analytically |
| **P3\_PTX\_DIS\_OtherPS** | No longer relevant/not well ascertained/not required analytically |
| **F1\_Sympt** | No longer relevant/not well ascertained/not required analytically |
| **F1\_Contact\_STD** | No longer relevant/not well ascertained/not required analytically |
| **F1\_MSM\_12** | No longer relevant/not well ascertained/not required analytically |
| **F1\_CMT** | No longer relevant/not well ascertained/not required analytically |
| **F1\_Adnexal** | No longer relevant/not well ascertained/not required analytically |
|  |  |
|  |  |

***Table2A. Proposed Response Coding changes to existing Data Elements, Strategy A, Sentinel Surveillance in STD Clinical Facilities***

|  |  |  |
| --- | --- | --- |
| **Existing Variable** | **Description** | **Valid Response Values Added** |
| **F2\_DXCODE** | Diagnosis Code | MPX1=MPX(Suspected)MPX2=MPX(Probable)MPX3=MPX(Confirmed) |
| **F3\_Test\_Type** | What type of test was used? (Will be expanded, recoded) | 74=Syphilis EIA test75=T. Vaginalis Rapid Test76=T. Vaginalis NAAT81=T. Vaginalis Culture84=Mpox (Orthopoxvirus), DNA, PCR |
| **F4\_Medication** | What medication was prescribed to the patient (brand name)? | 73=Apretude (Cabotegravir) |
| **F4\_Dosage** | What was the dosage of the medication prescribed? | 17=2.4 Million Units18=7.2 Million Units |

***Table2B. Proposed New Variables, Strategy A, Sentinel Surveillance in STD Clinical Facilities***

|  |  |  |
| --- | --- | --- |
| **Data Element/Variable Name** | **Description** | **Valid Values** |
| **F1\_MPOX\_VaxHx** | Has this patient been previously vaccinated for smallpox or mpox? | 1=Yes, fully vaccinated2=Yes, not fully vaccinated3=No, no prior smallpox or mpox vaccination4=Refused to provide vaccination information9=Not captured |
| **F1\_MPOX\_VaxDATE** | If patient previously vaccinated for smallpox or mpox, date of most recent dose. | MM/YY../.. |
| **F1\_MPOX\_Vax** | Was this patient vaccinated for smallpox or mpox at this visit? | 1=Yes, Administered Initial Dose2=Yes, Administered Second Dose3=Yes, Administered >2nd dose4=No, no MPX vaccine administered9= Not captured*A response of 9 indicates the information is not captured or collected by the facility or is not provided to SSuN. Null value not allowed.* |
| **F1\_MPOX\_Vax\_Spec** | What smallpox or mpox vaccine was administered at this visit? | *1=JYNNEOS (Imvamune or Imvanex)**2=ACAM2000**A response of 9 indicates the information is not captured or collected by the facility or is not provided to SSuN. Null value not allowed if F1\_MPX\_Vax= 1,2 or 3.* |
| **F1\_MPOX\_Vx\_Mthd** | What was the method of smallpox or mpox vaccine administration at this visit? | 1=Intradermal (ID)2=Subcutaneous (SQ)9= Not captured*A response of 9 indicates the information is not captured or collected by the facility or is not provided to SSuN. Null value not allowed if F1\_MPX\_Vax= 1,2 or 3.* |
| **F1\_MPOX\_Vx\_Lot** | What is the vaccine lot number of the vaccine administered at this visit? | Text*A response of 9999 indicates the information is not captured or collected by the facility or is not provided to SSuN. Null value not allowed if F1\_MPX\_Vax= 1,2 or 3.* |
| **F1\_MPOX\_Vx\_dosage** | What vaccine dose was administered at this visit? | #####*A response of 9999 indicates the information is not captured or collected by the facility or is not provided to SSuN. Null value not allowed if F1\_MPX\_Vax= 1,2 or 3.* |
| **F1\_MPOX\_Vx\_dosUnit** | What was the vaccine dose unit for the vaccine administered at this visit? | 1=mL2=CC3=mG4=μG (microgram)9=Not Captured*A response of 9 indicates the information is not captured or collected by the facility or is not provided to SSuN.  Null value not allowed if F1\_MPX\_Vax= 1,2 or 3* |
| **F3\_Source** | Did lab record originate from eHARS match? | *Default to 0 for records NOT coming from the eHARS registry, 1 for lab data from eHARS* |
| **F1\_Prep\_Scrn** | Was this patient counseled and screened for PrEP eligibility? | 1=Yes2=No, Patient HIV+3=No, Patient Refused4=No, Express Visit Only9= Not captured*A response of 9 indicates the information is not captured or collected by the facility or is not provided to SSuN. Null value not allowed.* |
| **F1\_Prep\_Elig** | Was this patient eligible for PrEP? | 1=Yes2=No, Patient Not Eligible (HIV+)3=No, Patient Not Eligible (Other Reason)9= Not captured*A response of 9 indicates the information is not captured or collected by the facility or is not provided to SSuN. Null value not allowed.* |
| **F1\_Prep\_Ref** | Was this patient referred for PrEP services? | 1=Yes, Referred to in-house PrEP specialist2=Yes, Referred to external PrEP provider3=No, Patient Not Eligible9= Not captured*A response of 9 indicates the information is not captured or collected by the facility or is not provided to SSuN. Null value not allowed.* |
| **F1\_Prep\_Rx** | Was this patient prescribed PrEP at this visit? | 1=Yes, Initial PrEP prescription given2=Yes, Prescription refilled3=No, Patient not prescribed PrEP9= Not captured*A response of 9 indicates the information is not captured or collected by the facility or is not provided to SSuN. Null value not allowed.* |
| **F1\_dPEP\_Rx** | Was the patient prescribed doxycycline prophylaxis at this visit? | 1=Yes2=No9=Not Captured*A response of 9 indicates the information is not captured or collected by the facility or is not provided to SSuN. Null value not allowed.* |
| **F1\_Contact\_GC** | Was the patient a contact to or exposed to gonorrhea? | 1= Yes2= No9= Not captured*A response of 9 indicates the information is not captured or collected by the facility or is not provided to SSuN. A response of null indicates that the information is collected by the facility but is unknown for this record.* |
| **F1\_Contact\_CT** | Was the patient a contact to or exposed to chlamydia? | 1= Yes2= No9= Not captured*A response of 9 indicates the information is not captured or collected by the facility or is not provided to SSuN. A response of null indicates that the information is collected by the facility but is unknown for this record.* |
| **F1\_Contact\_SY** | Was the patient a contact to or exposed to syphilis? | 1= Yes2= No9= Not captured*A response of 9 indicates the information is not captured or collected by the facility or is not provided to SSuN. A response of null indicates that the information is collected by the facility but is unknown for this record.* |
| **F1\_contact\_Other** | Was the patient a contact or exposed to a STD (other than syphilis, chlamydia, or gonorrhea)? | 1= Yes, HSV2= Yes, MPX3. Yes, multiple4. Yes, don’t know specific STD5. No, not a contact or exposed to STD9= Not capturedA response of 9 indicates the information is not captured or collected by the facility or is not provided to SSuN. A response of null indicates that the information is collected by the facility but is unknown for this record. |
| **F4\_TxMethod** | Method of administration | 1=PO - oral dosing2=IM - intramuscular 3=IV - intravenous/infusion4=Other5=Unknown6=Intravaginal7=Topical |
| **F1\_Sxitching**  | Did the patient report a vaginal (abnormal), rectal or penile (urethral) itching? |

|  |
| --- |
| 1= Yes |
| 2= No |
| 9= Not captured |
| A response of 9 indicates the information is not captured or collected by the facility or is not provided to SSuN. Null values are allowed if the information is collected by the facility but (1) is unknown for this record or (2) there is not an opportunity for a “no” response.  |

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| **F1\_SXPain** | Did the patient report a vaginal (abnormal), rectal or genital pain? |

|  |
| --- |
| 1= Yes |
| 2= No |
| 9= Not captured |
| A response of 9 indicates the information is not captured or collected by the facility or is not provided to SSuN. Null values are allowed if the information is collected by the facility but (1) is unknown for this record or (2) there is not an opportunity for a “no” response.  |

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| **F1\_SXRash** | Did the patient report a genital/anal rash? |

|  |
| --- |
| 1= Yes |
| 2= No |
| 9= Not captured |
| A response of 9 indicates the information is not captured or collected by the facility or is not provided to SSuN. Null values are allowed if the information is collected by the facility but (1) is unknown for this record or (2) there is not an opportunity for a “no” response.  |

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| **F1\_Sxbleeding** | Did the patient report a vaginal (abnormal), rectal or (urethral ) penile bleeding? |

|  |
| --- |
| 1= Yes |
| 2= No |
| 9= Not captured |
| A response of 9 indicates the information is not captured or collected by the facility or is not provided to SSuN. Null values are allowed if the information is collected by the facility but (1) is unknown for this record or (2) there is not an opportunity for a “no” response.  |

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| **F1\_GCtx** | Was patient prescribed antimicrobials for gonorrhea treatment? |

|  |
| --- |
| 1= Yes |
| 2= No, not indicated/refused |
| 9= Not captured |

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| **F1\_CTtx** | Was patient prescribed antimicrobials for chlamydia treatment? |

|  |
| --- |
| 1= Yes |
| 2= No, not indicated/refused |
| 9= Not captured |

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***Table2B. Proposed New Variables, Strategy B, Case-based Enhanced Surveillance***

|  |  |  |
| --- | --- | --- |
| **Data Element/Variable Name** | **Description** | **Valid Values** |
| **P2\_ProvPTX\_PrepRx** | Was patient prescribed PrEP? | 1=Yes2=No*Missing/unknown information code as null (‘.’).* |
| **P2\_ProvPTX\_dPEPRx** | Was patient prescribed doxycycline as STI prophylaxis? | 1=Yes2=No*Missing/unknown information code as null (‘.’).* |
| **P3\_mpox** | Has a doctor or other health care provider ever told you that you had Mpox (monkeypox)? | 1=Yes2=No3=Don't Know/Not sure/Unknown4=Refused |
| **P3\_mpox\_vax** | Have you ever received a vaccine for mpox? | 1=Yes2=No (skip to XXX)3=Don't Know/Not sure/Unknown (skip to XXX)4=Refused (skip to xxx) |
| **P3\_mpox\_vaxD** | How many doses of vaccine for mpox have you received? | 1=One2=Two3=Don't Know/Not sure/Unknown4=Refused |
| **P3\_mpox\_vaxDTE** | When was your last mpox vaccine shot? | This should be character data: ”MM/YYYY”, *missing/REFUSED information as”../YYYY” or “../….”* |
| **P1\_L1\_Source** | Did lab record originate from eHARS match? | *Default to 0 for records NOT coming from the eHARS registry, 1 for lab data from eHARS* |

**Changes in Estimates of Annualized Burden Hours**

We estimate increase in estimated annualized burden hours from the previously approved 6,303 to 7,510 for this ICR as part of this revision, as described in Exhibit 12.A (below), which provides the current burden table for this ICR with the requested revisions.

**Exhibit 12.A Estimates of Annualized Burden Hours**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Type of Respondents** | **Form Name (if applicable)** | **Number of Respondents** | **Number of Responses per Respondent** | **Average Burden per Response (in hours)** | **Total Burden (in hours)** |
| Data managers at sentinel STD clinics (**Table B.1.A**) | Electronic Clinical Record Abstraction (**ATT5**) | 40 | 6 | 4 | 960 |
| General Public – Adults (persons diagnosed with gonorrhea) | Patient interviews for a random sample of gonorrhea and syphilis cases (**ATT5, ATT8**) | 7,000 | 1 | 10/60 | 1,190 |
| Data Managers: local/state health departments (strategy A) (**ATT6**) | Data cleaning/ validation, HIV registry matching and data transmissions for all activity components(**ATT5**) | 11 | 6 | 40 | 2,640 |
| Data Managers: local/state health departments (strategy B) (**ATT6**) | Data cleaning/ validation, HIV registry matching and data transmissions for all activity components(**ATT5**) | 11 | 6 | 40 | 2,640 |
| General Public – Adults (persons presenting for care in STD Clinics) | Clinic waiting room surveys | 1000 | 1 | 0.08 | 80 |
| Total | ............ |  | .............. | ............. | 7,510 |