

Section and variable	Change proposed	Reason for change
Changes made across multiple forms		
Section: Cluster Variables Forms: Follow-up (Revised Q2/ Current Q2) Annual/Closeout (Revised Q2/ Current Q2)	Deleted instructions on how to complete this field. <i>Wording removed:</i> A local cluster ID must be populated on this form and in eHARS. For molecular clusters, the recommended nomenclature is the two-letter jurisdiction abbreviation followed by the year and month in which the cluster was first identified and Secure HIV-TRACE cluster ID. For time-space clusters, the recommended nomenclature is the two letter jurisdiction abbreviation followed by the year and month in which the cluster was first identified and cluster ID with the initials 'TS' (e.g., GA_YYYYMM_TS789). Jurisdictions may use any naming convention to develop the cluster ID as long as it includes the initials 'TS' and does not contain personal identifiers.	No longer needed because the response to this question will be auto-populated from an earlier form
Section: Cluster Variables Forms: Initial (Revised Q4), Follow-up (Revised Q3), Annual/Closeout (Revised Q3)	Changed wording. <i>Current wording:</i> National cluster ID. <i>Revised wording:</i> CDC cluster ID	To clarify the source (CDC) of the cluster identifier
Section: Status of Cluster Response Forms: Follow-up (Revised Q4), Annual/Closeout (Revised Q4)	Changed wording. <i>Current wording:</i> Are response activities for this cluster currently ongoing? <i>Revised wording:</i> Are investigation or response activities for this cluster currently ongoing?	To clarify the intent of the question
Section: Case Definition and Characteristics Forms: Follow-up (Revised Q6/6a), Annual/Closeout (Revised Q5/5a)	Added question. Since the last time you submitted a cluster report form for this cluster, has the cluster case definition changed? (If yes), describe any changes to the cluster case definition.	To document changes to the cluster case definition and allow for more targeted technical assistance
Section: Case Definition and Characteristics Forms: Follow-up (Revised Q7/7a), Annual/Closeout (Revised Q7/7a)	Added question. Since the last time you submitted a cluster report form for this cluster, have there been any notable changes to the characteristics of the cluster? (If yes), describe notable changes to the characteristics of the cluster.	To allow health departments to better explain the evolving context of the cluster
Section: Cluster Detection, Case Definition, and Characteristics	Changed wording. <i>Current wording: Initial:</i> Size of transmission cluster in your jurisdiction as identified through review of available data.	To clarify the intent of the question and standardize wording across forms

Forms: Initial (Revised Q9/Current Q20) Follow-up (Revised Q8/Current Q5), Annual/Closeout (Revised Q7/Current Q6a)	<i>Follow-up:</i> Current number of persons in the transmission cluster in your jurisdiction. <i>Annual/Closeout:</i> Transmission cluster (within your jurisdiction) <i>Revised wording:</i> Number of people with HIV in the cluster residing in your jurisdiction at the time of this report.	
Section: Case Definition and Characteristics Forms: Initial (Revised Q11/Current Q22), Annual/Closeout (Revised Q9/Current Q6b)	Changed wording. <i>Current wording:</i> Initial: Number of persons in the risk network in your jurisdiction identified through review of available data who are not known to be HIV infected. <i>Annual/Closeout:</i> Risk network (persons not known to be HIV-infected residing in your jurisdiction) <i>Revised wording:</i> Number of named partners of cluster members not known to have HIV residing in your jurisdiction at the time of this report.	To clarify the intent of the question
Section: Overlapping Clusters Forms: Follow-up (Revised Q9/9a-b), Annual/Closeout (Revised Q11/11a-b)	Added question. - Since the last time you submitted a cluster report form for this cluster, has this cluster been newly identified as overlapping with a cluster identified by a different method? (If yes), select the method of identification, date of detection and Cluster ID of the overlapping cluster(s). Instructions: For overlapping national molecular or time-space clusters identified by CDC, the date of detection should be populated with the date your jurisdiction was notified of the existence of the cluster by CDC. (If yes), include any relevant additional information on the overlapping clusters. This is an optional question.	To more easily capture additional information about the content of the cluster not already captured in other questions.
Section: Gaps or Challenges Forms: Initial (Revised Q16/16a), Follow-up (Revised Q10/10a), Annual/Closeout (Revised Q12/12a)	Added question (OPTIONAL for initial form). What gaps or challenges have you encountered in responding to this cluster? Check all that apply. a. Limited ability to conduct partner services b. Limited understanding of factors facilitating transmission c. Limited knowledge about HIV testing, care, prevention, or other related topics among people in the network or providers d. Limited access to or acceptability of HIV testing e. Limited access to or acceptability of HIV care f. Limited access to or acceptability of HIV prevention (e.g., PrEP, SSPs) g. Limited access to or acceptability of testing, care, or prevention due to structural issues or for syndemic conditions h. Other [OPTIONAL] Provide additional information on any of the selected challenges	For health departments to provide additional information more easily about the content of the cluster not already captured in other questions
Section: Investigation or	Added question (OPTIONAL for initial form): What investigation or response activities, if any,	To allow health

Response Activities Forms: Initial (Revised Q17), Follow-up (Revised Q11), Annual/Closeout (Revised Q13)	have you initiated in response to the cluster? <u>Instructions:</u> Check off all the activities that have been part of your cluster response. Your response should reflect a cumulative list of all activities that have been initiated, tailored, or enhanced in response to the cluster except for reporting on activities 1-4 related to individual cluster member/partner follow-up. You may check off activities 1-4 even if they were initiated before the identification of the cluster. Note that if you are unsure of where an activity fits within a domain you can place it in the “other” category of the domain. Please see form for full list of response options.	departments to communicate, in a systematic manner, the major activities that they have implemented in response to the cluster.
Section: Investigation or Response Forms: Initial (Revised Q18/18a), Annual/Closeout (Revised Q16/16a)	Changed wording and split into two questions. <i>Current wording:</i> If the transmission cluster or risk network includes persons outside of your jurisdiction, please describe any collaboration efforts with the other jurisdictions involved. <i>Revised wording:</i> If the cluster or network includes persons outside of your jurisdiction, have you contacted other jurisdictions involved? If yes, describe any collaboration or communication with other jurisdictions involved	To simplify data collection, reduce burden and clarify the intent of the question
Section: Level of Concern Forms: Initial (Revised Q19-19a/Current Q28-28a), Follow-up (Revised Q12-12a/Current Q11-11a), Annual/Closeout (Revised Q17-17a/Current Q15)	Standardized wording across all forms. <i>Current wording: Initial:</i> Based on your initial review of the data, what is your level of concern for this cluster? <i>Follow-up:</i> What is your current level of concern for this cluster? (Provide comments regarding your current level of concern in the box below.) Note: Select 'High' if additional response is needed, 'Medium' if additional information about the cluster is needed, or 'Low' if no additional investigation activities are needed at this time. <i>Annual/Closeout:</i> Briefly describe your level of concern for this cluster and why ongoing response is still needed. If the cluster response has been closed, instead describe how you will continue monitoring the cluster for future growth. <i>Revised wording:</i> What is your current level of concern for this cluster? a. High b. Medium c. Low <u>Instructions:</u> Consider a variety of factors that may modify your level of concern. See Cluster Review and Prioritization in CDC’s HIV CDR Guidance for Health Departments for additional considerations. [If answered High], Describe why you've assigned this level of concern using a brief, narrative summary of key findings: _____ <u>Instructions:</u> In the narrative summary, include any notable or concerning epidemiological or	To simplify wording and clarify the intent of the question

	other characteristics, including any indications that the underlying network is substantially larger than what has been identified.	
Section: Technical Assistance Needs Forms: Initial (Revised Q20/20a), Follow-up (Revised Q13/13a), Annual/Closeout (Revised Q18/18a)	Added question. Do you have any technical assistance needs related to this cluster? If yes, describe your technical assistance needs. If you have urgent technical assistance needs, reach out directly to your assigned Detection and Response Branch epidemiologist.	For health departments to communicate technical assistance needs
Section: Additional Comments Forms: Initial (Revised Q21), Follow-up (Revised Q14), Annual/Closeout (Revised Q19)	Added OPTIONAL question to initial and closeout forms. Relocated question in follow-up form. Additional comments	To provide additional information not captured in other questions
Section: N/A (deleted) Forms: Initial (Current Q18a-l), Annual/Closeout (Current Q11a-l)	Deleted questions. - Results of testing and re-testing for persons in 10a: a. Number new positive b. Acute (subset of 11a) c. Recent (not acute) [subset of 11a] d. Number negative e. Referred for PrEP (subset of 11d) f. Number tested but result unknown g. Number previous positive h. Number refused testing i. Number not located j. Number outside jurisdiction k. Number not tested because person was deceased l. Number not tested for other reason	No longer needed
Section: N/A (deleted) Forms: Follow-up (Current Q10a-i) Annual/Closeout (Current Q8a-i)	Deleted question. Since the time of cluster detection, were any of the following investigation and/or intervention activities conducted? a. Partner services interviews for persons in the transmission cluster who were not previously interviewed Yes/No b. Partner services re-interviews for persons in the transmission cluster who were previously interviewed? Yes/No c. Social network interviews and/or testing Yes/No d. Second-generation interviews Yes/No	No longer needed

	e. Targeted testing events Yes/No f. Medical chart reviews Yes/No g. Qualitative interviews Yes/No h. Messaging activities. Yes/No If yes, describe. i. Other activities. Yes/No If yes, describe.	
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Question	Change proposed	Reason for change
Changes to initial form only		
Revised: Q3 Current: Q3	Updated instructions on how to complete question. <i>Current wording:</i> A local cluster ID must be populated on this form and in eHARS. For molecular clusters, the recommended nomenclature is the two-letter jurisdiction abbreviation followed by the year and month in which the cluster was first identified and Secure HIV-TRACE cluster ID. For time-space clusters, the recommended nomenclature is the two letter jurisdiction abbreviation followed by the year and month in which the cluster was first identified and cluster ID with the initials 'TS' (e.g., GA_YYYYMM_TS789). Jurisdictions may use any naming convention to develop the cluster ID as long as it includes the initials 'TS' and does not contain personal identifiers. <i>Revised wording:</i> Instructions: A local cluster ID must be populated on this form and in eHARS. For additional information, see the “Entering Information Related to HIV Clusters into eHARS” document. For molecular clusters, the required nomenclature is the two-letter jurisdiction abbreviation followed by the year and month in which the cluster was first identified and Secure HIV-TRACE cluster ID (e.g., GA_202303_10.2 for a molecular cluster meeting national priority criteria through state/local analysis). For time-space clusters, the required nomenclature is the two-letter jurisdiction abbreviation followed by the year and month in which the cluster was first identified and cluster ID with the initials 'TS' (e.g., GA_YYYYMM_TS789). Jurisdictions may use any naming convention to develop the cluster ID as long as it includes the initials 'TS' and does not contain personal identifiers, a dash or a dot. For clusters identified through provider notification, partner services notification, or other means, the recommended nomenclature is the two-letter jurisdiction abbreviation followed by an underscore, followed by the year and month in which the cluster was first identified as YYYYMM_, followed by a unique identifier including the initials 'PN' for partner notification, 'PS' for partner services notification, or 'OTH' for other means (e.g., GA_202306_PN321).	CDC guidance on how to complete this field was recently updated. The instructions were updated to align with the revised guidance
Revised: Q5, options b and d	Changed wording. <i>Current wording:</i> Initial cluster detection method that identified this cluster. b. National molecular analysis	To simplify wording and clarify intent of the response options

Current: Q5, options b and d	c. National time-space analysis <i>Revised wording:</i> Initial cluster detection method. b. CDC molecular analysis d. CDC time-space analysis	
Revised: Q5b Current: Q5a	Changed wording. <i>Current wording:</i> County of time-space alert. <i>Revised wording:</i> County or other geographic area of cluster. Add 'County' after the name if entering the name of a county.	To clarify the intent of the question
Revised: Q5c Current: Q9a	Changed wording. <i>Current wording:</i> Please describe the case definition you are using to determine which cases are included in this cluster (i.e., inclusion criteria for person, place, and time). <i>Revised wording:</i> Describe the case definition you are using to determine which cases are included in this cluster. Include criteria for person, place, and time.	To clarify the intent of the question
Revised: Q6 Current: Q6	Changed wording. <i>Current wording:</i> For clusters identified through molecular analysis, does this cluster meet national priority cluster criteria? <i>Revised wording:</i> For clusters identified through molecular analysis, does this cluster meet national priority cluster criteria in your jurisdiction?	To clarify the intent of the question
Revised: Q10 Current: Q16	Changed wording. <i>Current wording:</i> How many people with HIV in the molecular cluster as reported in Q12 had been interviewed by partner services prior to cluster detection? <i>Revised wording:</i> Number of people with HIV in the cluster residing in your jurisdiction who had completed a partner services interview at the time of this report.	To simplify wording
Revised: Q12 Current: Q19c	Changed wording. <i>Current wording:</i> Number of marginal partners. <i>Revised wording:</i> Number of unnamed, marginal, and anonymous partners of cluster members at the time of this report.	To clarify the intent of the question
Revised: Q13 Current: Q9	Changed wording. <i>Current wording:</i> Please describe the characteristics of the cluster that have raised concern. (i.e. an increase in diagnoses over a baseline, an increase in IDU-associated HIV-infections, etc.). <i>Revised wording:</i> Briefly describe any notable characteristics of the cluster (e.g., predominant transmission risk, age group, race/ethnicity, gender, prevalence of coinfections, history of incarceration, housing instability).	To provide more contextual information when there are challenges to responding to a cluster
Revised: Q14 Current: Q24	Changed wording. <i>Current wording:</i> Were any common venues or physical sites identified? <i>Revised wording:</i> Were any common venues, physical sites, or virtual sites identified?	To Q24 and Q25 into a single question
Revised: Q14a Current: Q24a	Changed wording. <i>Current wording:</i> Describe. <i>Revised wording:</i> Describe common sites.	To clarify the intent of the question
Revised: Q15 Current: Q7	Changed wording. <i>Current wording:</i> Had this cluster been identified by any other method? <i>Revised wording:</i> Does this cluster overlap with a cluster identified by a different method?	To clarify the intent of the question
Revised: Q15a Current: Q7a	Changed wording. <i>Current wording:</i> If the cluster overlaps with another cluster identified by a different method, please select the method of identification, date of detection and Cluster ID. <i>Revised wording:</i> Select the method of identification, date of detection and Cluster ID of the overlapping cluster(s).	To simplify wording

Revised: Q15b Current: Q7b	Changed wording. <i>Current wording:</i> Please include additional information on the overlapping clusters if desired. <i>Revised wording:</i> Include any relevant information on the overlapping clusters	To simplify wording
Deletions from Initial Form Only		
Current: Q5c	Deleted question. Q5c. Other geographic area of alert	Now captured in question 5b in the proposed form
Current: Q8a-l.	Deleted questions Q8. Please indicate which data have been reviewed for persons identified in the cluster a. HIV partner services data: Yes/No b. HIV partner services notes: Yes/No c. HIV surveillance data: Yes/No d. Viral hepatitis surveillance data: Yes/No e. Social network sites: Yes/No f. Data from other jurisdictions: Yes/No g. STD partner services data: Yes/No h. STD partner services notes: Yes/No i. STD surveillance data: Yes/No j. Ryan White HIV/AIDS Program (including ADAP) : Yes/No k. Discussion with DIS who interviewed cases: Yes/No l. Other, describe:	No longer needed
Current: Q10	Deleted question. Q10. What is your current level of concern for this cluster?	Now captured in question 19 in the proposed form
Current: Q11	Deleted question. Q11. Please briefly describe data review and investigation/response activities conducted to date for this cluster, and any notable findings.	No longer needed
Current: Q12a and Q12b	Deleted questions. Q12a. Number of people with HIV in the molecular cluster at time of detection who have a report of HIV in your jurisdiction (overall number) Q12b. Number diagnosed in 12 months prior to detection	No longer needed
Current: Q13a and Q13b	Deleted questions. Q13a. CURRENT MEMBERS If additional people with HIV with a report of HIV in your jurisdiction have been added to the molecular cluster (based on any subsequent data analysis) since first identification, enter current numbers (overall number):____ Q13b. Number diagnosed in past 12 months:____	No longer needed
Current: Q17	Deleted question. Q17. How many people with HIV in the molecular cluster reported in Q12 were identified as connected to at least one other HIV-positive person in the molecular cluster through existing partner services data?	No longer needed
Current: Q19a	Deleted questions.	No longer needed

and Q19b	Q19a. Number of named partners residing in your jurisdiction. Q19b. Number of named partners residing outside your jurisdiction.	
Current: Q19d	Deleted question. Q19d. Number of anonymous partners	Now captured in question 12 in the new form
Current: Q21	Deleted question. Q21. How many people with HIV in the transmission cluster reported in Q20 have evidence of recent viral suppression (most recent viral load < 200 cp/mL with specimen collection date in the past 12 months)?	No longer needed
Current: Q25 and 25a.	Deleted questions. Q25. Were any common virtual sites identified? Q25a. Describe.	Now captured in proposed initial form Q14
Current: Q26	Deleted question. Q26. What other factors identified might be associated with increased transmission in this cluster?	No longer needed
Current: Q27	Deleted question. Q27. Please provide a brief, narrative summary of key findings based on existing data review.	To combine Q27 and 28a into a single question
Changes to Follow-Up Form Only		
Revised: Q5	Added question. Q5. Are there any updates to report? Instructions: If the case count has increased $\geq 10\%$ since the last report or there are updates to cluster definition (including whether a newly detected overlapping priority cluster has been identified), response activities, including gaps or challenges identified by the cluster response, or technical assistance needs, respond YES and proceed with the rest of the form. If there are no updates to the abovementioned sections, and the case count did not increase by $\geq 10\%$ since the last report, respond NO and submit the form to CDC.	To simplify data collection and reduce burden. If health departments answer no to this question, they don't need to fill out the rest of the form
Current: Q6	Deleted question. Q6. Current number of persons in the risk network in your jurisdiction who are not known to be HIV positive	No longer needed
Current: Q7.	Deleted question. Q7. Has testing or re-testing been conducted for any persons who were not known to be HIV positive at the time of identification as part of the risk network?	No longer needed
Current: Q8a-8c	Deleted questions Q8. Of persons who were HIV-negative or had unknown HIV status at the time of identification as part of the risk network, what are the results of testing or re-testing efforts to date? Q8a. Total number of persons in the risk network in your jurisdiction tested/re-tested to date Q8b. Total number of persons in the risk network in your jurisdiction who newly tested positive as a result of testing/re-testing efforts Q8c. Total number of persons in the risk network in your jurisdiction newly referred for PrEP	No longer needed
Current: Q9	Deleted question. Q9. Please describe any challenges you have encountered in promoting viral suppression among persons in the transmission cluster, or in conducting testing/re-testing and PrEP referral among persons in the risk network.	No longer needed

Changes to Annual/Closeout Form Only

Revised: Q8	Added question. Q9. Number of people with HIV in the cluster residing in your jurisdiction who had completed a partner services interview at the time of this report.	To allow health departments to better explain the evolving context of the cluster
Revised: Q11	Added question. Q11. Number of unnamed, marginal, and anonymous partners of cluster members at the time of this report.	To allow health departments to better explain the evolving context of the cluster
Revised: Q13a and 13b	Added question. 13a. Did you only check off activities in Domain 1? a. Yes b. No 13b. [If answered Yes in 16a] describe why response activities were limited to individual cluster member/partner follow-up.	To obtain context on why a health department chose limited cluster response activities and help CDC provide better technical assistance.
Revised: Q14	Added question “Reporting the outcomes of cluster response activities” Instructions: Pick at least three of the activities you checked off in question 16 to report on outcomes. The three activities should come from at least two different domains unless you only implemented activities from a single domain. For activities 1-3 provide the numerical value for the outcome(s) as per the table in the Cluster Report Form Instructions document. For all the other activities (activity numbers 4-34): - Describe the activity (what was done; who was the intended audience; who carried out the activity; how, where, and when was the activity implemented) - Indicate the current status (pick one) ☐ Planned ☐ In Progress ☐ Completed - Provide outcomes ☐ For activities 4, 5, 6, 7, 8, 9, 11, 12, 13, 18, 19, 21, 22, 23, 25, 27, 31, 33, 34, describe the outcome of the activity and how it was measured in the text box ☐ For activities 10, 14, 15, 16, 17, 20, 24, 26, 28, 29, 30, or 32 refer to the table in the instructions for the required numerical outcomes and put the result in the text box	This question simplifies and provides more flexibility for reporting the outcomes of the activities they have implemented in response to the cluster (replacing several other questions)
Revised: Q15 Current: Q14	Changed wording. <i>Current wording:</i> Please describe the impact of cluster investigation and response activities on current health department policies and processes. (i.e. whether any enhancements were made to regular HIV prevention and treatment processes such as provision of case management services or expansion of PrEP resources, whether communication within the health department or interactions between local and state health	To clarify intent of the question

	departments changed, whether the cluster was used to advocate for policy changes, whether additional resources were required to respond to this particular cluster, etc.). <i>Revised wording:</i> Describe any changes to policies or processes to support the prevention, diagnosis, and treatment of HIV in your jurisdiction implemented in response to this cluster, including any successes or innovations, not reported in question 14.	
Current: Q9a-b	Deleted questions. Q9a. How many persons in your jurisdiction did not have evidence of viral suppression at the time of identification as part of the cluster? Q9b. Among persons who did not have evidence of viral suppression at the time of identification as part of the cluster (9.a.), how many achieved viral suppression within six months?	No longer needed
Current: Q10/10a-c	Deleted questions. Q10a. How many persons in your jurisdiction were HIV-negative or had unknown HIV status at the time of identification as part of the risk network? Q10b. Of persons who were HIV-negative or had unknown HIV status at the time of identification as part of the risk network (10.a.), how many were tested/re-tested within 6 months? Q10c. Of persons who were HIV-negative or had unknown HIV status at the time of identification as part of the risk network (10.a.), how many were tested/re-tested at greater than 6 months?	No longer needed
Current: Q12a-d	Deleted questions. Q12a. How many persons in your jurisdiction were HIV-negative and not on PrEP at the time of identification as part of the risk network? Q12b. Of all persons who were HIV-negative and not on PrEP at the time of identification as part of the risk network (12a), how many were screened for PrEP within 6 months? Q12c. Of all persons who were screened for PrEP within 6 months (12.b.), how many were determined to be eligible? Q12d. Of all persons who were eligible for PrEP within 6 months (12.c.), how many were referred?	No longer needed. Health departments will have more flexibility in choosing outcomes to report in proposed Q14
Current: Q13	Deleted question. Q13. What key lessons were learned through the course of investigating this cluster?	No longer needed