

**Regional Data Codebook: Chlamydia Prevalence Monitoring Project  
Infertility Prevention Project  
April 2011**

**I. National Screening Criteria**

**Chlamydia:**

CDC\* recommends screening:

- All sexually-active females aged  $\leq 25$  years annually
- Sexually-active females aged  $\geq 26$  years with risk factors (e.g., new sex partner or multiple sex partners)

From the 2010 CDC STD Treatment Guidelines:

“Annual screening of all sexually active women aged  $\leq 25$  years is recommended, as is screening of older women with risk factors (e.g., those who have a new sex partner or multiple sex partners). In June 2007, USPSTF reviewed and updated their chlamydia screening guidance and found that the epidemiology of chlamydial infection in the United States had not changed since the last review (81,271). In issuing recommendations, USPSTF made the decision to alter the age groups used to demonstrate disease incidence (i.e., from persons aged  $\leq 25$  years to those aged  $\leq 24$  years). CDC has not changed its age cutoff, and thus continues to recommend annual chlamydia screening of sexually active women aged  $\leq 25$  years.

Screening programs have been demonstrated to reduce both the prevalence of *C. trachomatis* infection and rates of PID in women (272,273). Although evidence is insufficient to recommend routine screening for *C. trachomatis* in sexually active young men because of several factors (including feasibility, efficacy, and cost-effectiveness) (94), the screening of sexually active young men should be considered in clinical settings with a high prevalence of chlamydia (e.g., adolescent clinics, correctional facilities, and STD clinics). Among women, the primary focus of chlamydia screening efforts should be to detect chlamydia and prevent complications, whereas targeted chlamydia screening in men should only be considered when resources permit and do not hinder chlamydia screening efforts in women (274,275). An appropriate sexual risk assessment should be conducted for all persons and might indicate more frequent screening for some women or certain men (see MSM).”

“Chlamydia-infected women and men should be retested approximately 3 months after treatment, regardless of whether they believe that their sex partners were treated (251,267). If retesting at 3 months is not possible, clinicians should retest whenever persons next present for medical care in the 12 months following initial treatment.”

\*Centers for Disease Control and Prevention. Sexually Transmitted Diseases Treatment Guidelines, 2010. MMWR 2006;59(No. RR-12):44-46. <http://www.cdc.gov/std/treatment/>

**Gonorrhea:**

No current CDC guidelines exist.

From the 2010 CDC STD Treatment Guidelines\*:

“The prevalence of gonorrhea varies widely among communities and populations; health-care providers should consider local gonorrhea epidemiology when making screening decisions. Although widespread screening is not recommended because gonococcal infections among women are frequently asymptomatic, targeted screening of young women (i.e., those aged <25 years) at increased risk for infection is a primary component of gonorrhea control in the United States. For sexually active women, including those who are pregnant, USPSTF (82) recommends that clinicians provide gonorrhea screening only to those at increased risk for infection (e.g., women with previous gonorrhea infection, other STDs, new or multiple sex partners, and inconsistent condom use; those who engage in commercial sex work and drug use; women in certain demographic groups; and those living in communities with a high prevalence of disease). USPSTF does not recommend screening for gonorrhea in men and women who are at low risk for infection.”

“Clinicians should advise patients with gonorrhea to be retested 3 months after treatment. If patients do not seek medical care for retesting in 3 months, providers are encouraged to test these patients whenever they next seek medical care within the following 12 months, regardless of whether the patients believe that their sex partners were treated.”

\*Centers for Disease Control and Prevention. Sexually Transmitted Diseases Treatment Guidelines, 2010. MMWR 2006;59(No. RR-12):49,52. <http://www.cdc.gov/std/treatment/>

## II. Test Types

<i>Valid Chlamydia Test Types</i>			
<b>Common name (method)</b>	<b>Manufacturer</b>	<b>Test brand name</b>	<b>CT or CT/GC</b>
Transcription Mediated Amplification (TMA)	Gen-Probe	Aptima Combo 2 Assay	CT/GC
Strand Displacement Amplification (SDA)	Becton Dickinson	BDProbeTec ET System	CT/GC
Polymerase Chain Reaction (PCR)	Roche	Amplicor CT/NG	CT/GC
Polymerase Chain Reaction (PCR)	Roche	COBAS Amplicor CT/NG	CT/GC
Polymerase Chain Reaction (PCR)	Abbott	RealTime CT/NG II assay	CT/GC
Nucleic Acid Hybridization	Gen-Probe	PACE 2C CT/GC	CT/GC
Signal Amplification	Digene	Hybrid Capture 2 CT/GC DNA Test	CT/GC
Transcription Mediated Amplification (TMA)	Gen-Probe	Aptima CT Assay	CT
Polymerase Chain Reaction (PCR)	Roche	Amplicor CT	CT
Polymerase Chain Reaction (PCR)	Roche	COBAS Amplicor CT	CT
Strand Displacement Amplification (SDA)	Becton Dickinson	BDProbeTec ET System	CT
Nucleic Acid Hybridization	Gen-Probe	PACE 2 CT	CT
Enzyme Immunoassay (EIA)	Various	Various	CT
Direct Florescent Assay (DFA)	Various	Various	CT
Culture	Various	Various	CT

<i>Valid Gonorrhea Test Types</i>			
<b>Common name (method)</b>	<b>Manufacturer</b>	<b>Test brand name</b>	<b>GC or CT/GC</b>
Transcription Mediated Amplification (TMA)	Gen-Probe	Aptima Combo 2 Assay	CT/GC
Strand Displacement Amplification (SDA)	Becton Dickinson	BDProbeTec ET System	CT/GC
Polymerase Chain Reaction (PCR)	Roche	Amplicor CT/NG	CT/GC
Polymerase Chain Reaction (PCR)	Roche	COBAS Amplicor CT/NG	CT/GC
Polymerase Chain Reaction (PCR)	Abbott	RealTime CT/NG II assay	CT/GC
Nucleic Acid Hybridization	Gen-Probe	PACE 2C CT/GC	CT/GC
Signal Amplification	Digene	Hybrid Capture 2 CT/GC DNA Test	CT/GC
Transcription Mediated Amplification (TMA)	Gen-Probe	Aptima GC Assay	GC
Nucleic Acid Hybridization	Gen-Probe	PACE 2 GC	GC
Polymerase Chain Reaction (PCR)	Roche	Amplicor NG	GC
Polymerase Chain Reaction (PCR)	Roche	COBAS Amplicor NG	GC
Strand Displacement Amplification (SDA)	Becton Dickinson	BDProbeTec ET System	GC
Culture	Various	Various	GC

### III. Core IPP Data Elements

Field Name	Type	Length	Description	Valid Values/Definitions	Notes
region	C	2	The HHS region submitting the record.	01-Region 1 02-Region 2 03-Region 3 04-Region 4 05-Region 5 06-Region 6 07-Region 7 08-Region 8 09-Region 9 10-Region 10	
quarter	C	1	The time period during which the test was conducted.	0-End of Year 1-Quarter 1 2-Quarter 2 3-Quarter 3 4-Quarter 4	
year	C	4	The year during which the test was conducted.	YYYY format Valid value range: 1988 - present	
state_code	C	2	The person's state GNIS code of residence.	2-digit code identifying state. Refer to: <a href="http://geonames.usgs.gov/domestic/index.html">http://geonames.usgs.gov/domestic/index.html</a> <i>See Section VII for more detailed information</i>	
county_code	C	3	The person's county GNIS code of residence.	3-digit code identifying county. Refer to: <a href="http://geonames.usgs.gov/domestic/index.html">http://geonames.usgs.gov/domestic/index.html</a>	
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	
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	
sex	C	1	The biological sex of the person.	1-Male 2-Female 9-Unknown	
race_a	C	1	The person's self-reported race is Asian	1-Yes	
race_i	C	1	The person's self- reported race is American Indian/ Alaska Native.	1-Yes	
race_b	C	1	The person's self- reported race is African American/ Black.	1-Yes	
race_p	C	1	The person's self- reported race is Pacific Islander/ Native Hawaiian.	1-Yes	
race_w	C	1	The person's self- reported race is White.	1-Yes	

Field Name	Type	Length	Description	Valid Values/Definitions	Notes
race_o	C	1	The person's self- reported race is Other.	1-Yes	
race_r	C	1	The person refused to report race.	1-Yes (person refused to report race)	
race_u	C	1	The person could not provide information regarding their race.	1-Yes (person could not provide information regarding their race)	
ethnicity	C	1	The person's 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 13- Vagina - Provider collected 14- Vagina - Patient collected 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	
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. The facility identifier should be unique and not be changed, maintaining a consistent facility_link_id over time allows for analyses of clinic-specific changes. Please inform the CDC data manager of any changes and document all data issues in the QA memo that is sent to CDC with each data submission.	Please provide documentation in the Notes column of the regional data codebook.
lab_id	C	20	The laboratory identification number.	Format varies by region.	

Field Name	Type	Length	Description	Valid Values/Definitions	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 19.3- PCR/Abbott/RealTime CT/NG II assay 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 otherwise 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 19.3- PCR/Abbott/RealTime CT/NG II assay 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)	
gc_test_rslt	C	1	The gonorrhea test result.	1-Positive 2-Negative 3-Indeterminate 9-Unknown	

*Field Name:* Actual variable name as found in dataset

*Type:* C=character; D=date

*Length:* Length of field as stored in dataset

*Description:* Full explanation of field

*Valid Values and Value Definitions:* Code stored in database followed by full definition of code value

**IV. Enhanced IPP Data Elements** (*To be addressed at a later time.*)

**V. Facility Reference File** (Please maintain one facility reference file over time by adding facility information. Please do NOT delete records.)

**Core Variables**

Field Name	Type	Length	Description	Valid Values/Definitions	Notes
facility_link_id	C	24	A 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. The facility identifier should be unique and not be changed, maintaining a consistent facility_link_id over time allows for analyses of clinic-specific changes. Please inform the CDC data manager of any changes and document all data issues in the QA memo that is sent to CDC with the data submission.	Please provide documentation in the Notes column of the regional data codebook.
facility_id	C	22	The health care provider or facility identification number.	Format varies by region	
facility_name	C	100	The health care provider or facility name.	Text name of facility	
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 <i>See section VII for more detailed information</i>	

Field Name	Type	Length	Description	Valid Values/Definitions	Notes
facility_city_code	C	6	The facility GNIS city code.	6-digit code identifying city. Refer to: <a href="http://geonames.usgs.gov/domestic/index.html">http://geonames.usgs.gov/domestic/index.html</a> Note: Regions are not required to implement GNIS for cities. If not using GNIS, please provide a description of codes used in regional codebook.	
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: <a href="http://geonames.usgs.gov/domestic/index.html">http://geonames.usgs.gov/domestic/index.html</a>	
facility_county_name	C	100	The facility county name.	Text name of county	
facility_state_code	C	2	The facility GNIS state code.	2-digit code identifying state. Refer to: <a href="http://geonames.usgs.gov/domestic/index.html">http://geonames.usgs.gov/domestic/index.html</a> <i>See Section 3 for more detailed information</i>	
facility_state_postal	C	2	The facility state postal abbreviation.	2-character alpha postal code <i>See Section 3 for more detailed information</i>	
facility_zip_code	C	5	The facility zip code.	5-digit code. Refer to: <a href="http://www.usps.gov">http://www.usps.gov</a>	

**Enhanced Variables** (*To be addressed at a later time.*)

## VI. CDC Data Submission Process

CDC receives data from each region on a quarterly basis, as well as an annual end-of-year data file. The preferred format for data submission is in a SAS database format (.sd2 or .sas7bdat). If regions are unable to send SAS data to CDC, CDC will accept data in other formats, given that (1) SAS can read the data file (SAS can read most data files) and (2) the data are in the format (variable names, values, types, lengths) specified in this codebook. Data should be encrypted and submitted via the CDC FTP site.

CDC will provide a valid SAS license to the Regional Coordinators with a STD grant number and title. To obtain a SAS license, please contact Darlene Davis ([dwd1@cdc.gov](mailto:dwd1@cdc.gov)) in the Statistics and Data Management Branch (CDC/NCHSTP/DSTDP). Instructions for FTP site usage (and encryption) are located in *Encryption and FTP Site Usage (IPP).doc*.

### Reporting Schedule

Period Covered	Due to CDC	File Naming Conventions*	
		Prevalence Dataset	Facility Reference File
(Quarter 1) January 1-March 31	May 15	P_2007Q1_R01	F_2007Q1_R01
(Quarter 2) April 1-June 30	August 15	P_2007Q2_R01	F_2007Q2_R01
(Quarter 3) July 1-September 30	November 15	P_2007Q3_R01	F_2007Q3_R01
(Quarter 4) October 1-December 31	February 15	P_2007Q4_R01	F_2007Q4_R01
(End Year) January 1-December 31	April 15	P_2007EY_R01	F_2007EY_R01

\* 2007, Region I used as an example

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

## VII. CDC IPP Standardized Data (National)

Data collected through the Infertility Prevention Project (IPP) function as part of a multi-region, multi-site surveillance network. IPP data collection is not intended as research; IPP data are collected for public health surveillance purposes, primarily to monitor chlamydia and gonorrhea prevalence and guide STD prevention and control efforts. Data are collected through IPP and compiled and stored by CDC. Resources permitting, CDC will make national IPP data available for use by all IPP Regional Coordinators, CDC investigators, and other interested parties, as defined in the CDC IPP Data Release Document (available upon request, please contact LaZetta Grier, [lgrier@cdc.gov](mailto:lgrier@cdc.gov)). No personal identifiers will be released. It is hoped that collective access to the data will promote and stimulate use of data to guide STD programs locally and nationally. For more information or to request data, refer to the CDC IPP Data Release Document.

## 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 <sup>th</sup> 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.

<b>Value</b>	<b>Name</b>	<b>Description</b>
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 ( <b>Excludes</b> 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.

## State Formats

	<u>\$STATE_POSTAL_F</u>	<u>\$STATE_CODE_F</u>			<u>\$STATE_POSTAL_F</u>	<u>\$STATE_CODE_F</u>
Alabama	AL	01		North Dakota	ND	38
Alaska	AK	02		Nebraska	NE	31
Arkansas	AR	05		New Hampshire	NH	33
Arizona	AZ	04		New Jersey	NJ	34
California	CA	06		New Mexico	NM	35
Colorado	CO	08		Nevada	NV	32
Connecticut	CT	09		New York	NY	36
Delaware	DE	10		Ohio	OH	39
Florida	FL	12		Oklahoma	OK	40
Georgia	GA	13		Oregon	OR	41
Hawaii	HI	15		Pennsylvania	PA	42
Iowa	IA	19		Rhode Island	RI	44
Idaho	ID	16		South Carolina	SC	45
Illinois	IL	17		South Dakota	SD	46
Indiana	IN	18		Tennessee	TN	47
Kansas	KS	20		Texas	TX	48
Kentucky	KY	21		Utah	UT	49
Louisiana	LA	22		Virginia	VA	51
Massachusetts	MA	25		Vermont	VT	50
Maryland	MD	24		Washington	WA	53
Maine	ME	23		Wisconsin	WI	55
Michigan	MI	26		West Virginia	WV	54
Minnesota	MN	27		Wyoming	WY	56
Missouri	MO	29		District of Columbia	DC	11
Mississippi	MS	28		Puerto Rico	PR	72
Montana	MT	30		Virgin Islands	VI	78
North Carolina	NC	37		UNKNOWN	99	99