

OPA/OPF Integration of HIV/AIDS Prevention Services Project

CLIENT LEVEL DATA VARIABLE CODEBOOK

The following data should be reported in conjunction with worksheet **4. Client Level Data** for each client tested. If a client is tested more than once during the reporting period, report each test as a separate record, but use the same Client ID for those records. See Data Reporting Instructions for detailed variable definitions and acceptable file formats. If you need assistance, contact Melissa Nelson (mnelson@cicatelli.org) or call 212-594-7741 x 269.

Order	Variable	Description	Valid Values
1	Project_ID	Project ID	Assigned by Cicatelli Associates Inc.
2	Client_ID	Unique Client Identifier (NO personally identifiable information)	Assigned by your organization
3	Sex	Sex of client	M=Male, F=Female, T=Transgender, O=Other, U=Unknown
4	Birth_Year	Year of client's birth	Date Format (YYYY)
5	R_Asian	The person's self-reported race is Asian	Y=Yes
6	R_AIAN	The person's self-reported race is American Indian/Alaska Native	Y=Yes
7	R_Black	The person's self-reported race is African American/Black	Y=Yes
8	R_NHPI	The person's self-reported race is Native Hawaiian/Other Pacific Islander	Y=Yes
9	R_White	The person's self-reported race is White	Y=Yes
10	Ethnicity	The person's self-reported ethnicity	H=Hispanic/Latino(a); N=Not Hispanic/Latino(a); U=Unknown
11	Test_Date	Date the HIV test was performed	Date Format (MM/DD/YYYY)
12	Mode	HIV laboratory test mode (Confidential v. Anonymous)	C=Confidential; A=Anonymous
13	Type	HIV laboratory test type (Standard v. Rapid)	S=Standard; R=Rapid
14	Result	HIV laboratory test result (mark preliminary positive rapid tests as "P")	P=Positive; N=Negative; I=Indeterminate; U=Unknown
15	Confirm	Confirmatory test result (for preliminary positive rapid test only)	P=Positive; N=Negative; I=Indeterminate; U=Unknown
16	First_Time	Was this the client's first HIV test?†	Y=Yes; N=No; U=Unknown
17	Received	Client received results and post-test counseling	Y=Yes; N=No; U=Unknown
18	P_Aware	Was client previously aware of HIV status? (Positives only)	Y=Yes; N=No; U=Unknown
19	P_Referred	Was the client referred* to care? (Positives only)	Y=Yes; N=No; U=Unknown
20	P_Linked	Was the client linked** to care within 3 months? (Positives only)	Y=Yes; N=No; U=Unknown

†Excludes neonatal screening; intended to capture clients' first time tested since engaging in HIV risk behavior. * Referred to care is when clients are provided with information to facilitate initial contact with appropriate service providers. ** Linked to care is when a client is seen in a health-care setting by a physician, nurse practitioner, or physician assistant within 3 months of positive test.