Last Name	First (& Nickname)	Address (Street) (Apt. #)	Home Phone
Cooke	Darren	415 Abrams Ave	(404) 213-8946

City	State	Age/D.O.B.	Race	Ethnicity	Sex	Marital Status
Stone Mountain 30088	Ga	43 08/21/1964	W ✔ ~~A PI~~ ~~AI AN~~ ~~O U~~	H ✔	✔ F	S ✔ W D SP U

Height	Size/Build	Hair	Complexion	Pregnant?	Place of Employment/Hours/Phone
6'1"	215lbs	bald	Brown	Y ____ Wks. ✔ U	Feldstein Engineering Inc.

Exposure First	Freq.	Last	Original Patient ID. Number
1/1/1993	2xwk	5/15/2008	0100412008

Other Identifying, Locating, or Medical Information

Soft-spoken

Referral Basis:		Disease 1	Disease 2	Initiating Agency
✔ **Partner**	P1	720		DeKalb
Cluster				Invest. Agency: DeKalb
Positive Lab Test				Clinic Code: 02
OOJ/ICCR				

Examination Date	Test	Result	Provider

Treatment Date	Drugs	Dosage	Provider

FR Number	OOJ No.	OOJ Area	Due Date
3456789D			

Disease 1

Interviewer Number:	201	Disease 1	Disposition:
Date Initiated:	06/02/2008	New Case #:	Dispo Date:
Type Interview:	O		Diagnosis:
Type Referral:	1	Post-test Counseled? Yes No	Worker Number: 201

Disease 2

Interviewer Number:		Disease 2	Disposition:
Date Initiated:		New Case #:	Dispo Date:
Type Interview:			Diagnosis:
Type Referral:		Post-test Counseled? Yes No	Worker Number:

030 - HepB acute w/o delta
031 - HepB acute w/ delta
033 - HepB chronic w/o delta
034 - HepB chronic w/ delta
042 - Hepatitis delta
051 - Hepatitis C, acute
053 - Hepatitis E
054 - Hepatitis C, chronic
070 - Hepatitis, unknown
100 - Chancroid
200 - Chlamydia
300 - Gonorrhea
350 - Resistant Gonorrhea
400 - NGU
410 - Pediculosis
420 - Scabies
450 - MPC
460 - Bacterial Vaginosis
470 - Trichomoniasis
480 - Candidiasis
490 - PID Syndrome
500 - Granuloma Inguinale
600 - LGV
700 - Syphilis, unknown
710 - Syphilis, primary
720 - Syphilis, secondary
730 - Syphilis, early latent
740 - Syphilis, unknown duration
745 - Syphilis, late latent
750 - Syphilis, late w symptoms
800 - Genital Warts
850 - Genital Herpes
900 - HIV Infection
901 - Recounsel of previous HIV
950 - AIDS (Syndrome)
951 - Recounsel for previous AIDS case

STD Disposition Codes

A - Preventative Treatment
B - Refused Preventative Treatment
C - Infected, Brought to Treatment
D - Infected, Not Treated
E - Previously Treated for This Infection
F - Not Infected
G - Treated, Not Tested
H - Unable to Locate
J - Located, Not Examined and/or Treated
K - Sent Out Of Jurisdiction
L - Other
S - Successful Completion
U - Unsuccessful Completion
Q - Administrative Closure
X - Patient Deceased

HIV Disposition Codes

1 - Previous Positive
2 - Previous Negative, New Positive
3 - Previous Negative, Still Negative
4 - Previous Negative, Not Re-tested
5 - Not Previously Tested, New Positve
6 - Not previously Tested, New Positive
7 - Not Previously Tested, Not Tested Now
G - Insufficient Information to Begin Investigation
H – Unable To Locate
J – Located, Refused Counseling and testing
K – Out Of Jurisdiction
L - Other

P1 – Sex Partner
P2 – Needlesharing Partner
P3 – Both Sex and Needle

S1 – Suspect 1
S2 – Suspect 2
S3 - Suspect 3

A1 – Associate 1
A2 – Associate 2
A3 – Associate 3

Type Interview
O – Original interview
R – Reinterview
C – Cluster
P – posttest Counseling
U – Unable to Interview (But Partners/Clusters are Initiated)

OOJ/ICCR Codes
1 – Partner
2 – Cluster
3 – Positive test

Type Referral
1 – Patient
2 - Provider