

## TECHNICAL NOTES

With few exceptions, HIV and AIDS case data for Tennessee presented in this report are based on cases diagnosed through December 31, 1995 and reported through March 31, 1996, among persons who lived in Tennessee at the time of diagnosis with HIV or AIDS, or who are current Tennessee residents. These criteria for establishing Tennessee residence differ from those used by the Centers for Disease Control and Prevention who define residence by residence at the time of diagnosis.

Data in this report are provisional. In general, cases are presented according to date of diagnosis, without adjusting for delays in reporting cases to CDC. Exceptions are noted.

Unless otherwise noted, all HIV and AIDS case data refer to adults (20 or older at the time of diagnosis) and adolescents (ages 13 to 19 at the time of diagnosis). In general, pediatric HIV and AIDS cases are reported separately. The term "pediatric" refers to children under the age of 13. AIDS cases are reported based on the revised AIDS surveillance case definition implemented in January 1993 (see Appendices 3 and 4).

The HIV/AIDS Reporting System (HARS) separates persons with HIV (not AIDS) from persons with AIDS. HIV cases later reported as having developed AIDS are deleted from the HIV data set and are added to the AIDS data set. For the purposes of this report, HIV (not AIDS) and AIDS are generally reported separately. The exception to this rule is the segment on HIV seroprevalence surveys, where the blinded nature of the studies means that the clinical disease status is not known, and separating HIV cases from AIDS cases is not possible.

HIV-only reports from the TDH HARS data set are for persons who have not yet progressed to AIDS through March 1996.

HIV data based on the HARS data set are presented by date of report, defined as the date case data were entered onto the HARS computer system.

Where possible, cases among persons of Hispanic, Asian/Pacific Islander and American Indian/Alaskan Native race/ethnicity are reported separately. In most cases, however, these numbers are too small to report without the possibility of inadvertently disclosing the identity of individuals, and these groups are combined into the category "other races" to protect confidentiality.

Population data are based on the US Census for 1990 and on estimates provided by the Division of Information Resources, Tennessee Department of Health, for subsequent years.