



# Memorandum

**Date:** April 24, 2025

**To:** Southern Nevada District Board of Health

**From:** **Xavier Gonzales, PhD, Director, Community Health**  
**Cassius Lockett, PhD, District Health Officer**

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**Subject:** Community Health Division Monthly Activity Report – March 2025

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## **I. OFFICE OF CHRONIC DISEASE PREVENTION & HEALTH PROMOTION (OCDPHP)**

### **A. Chronic Disease Prevention Program (CDPP)**

The CDPP staff planned and implemented several activities to commemorate Heart Month in February and raise awareness of cardiovascular disease prevention and self-management strategies. Activities included:

- Heart of the Community Block Party. The event was held at the Martin Luther King Jr. Senior Center and included collaboration from 27 community partners. Activities included health screenings including a women's mobile health clinic, a 'Talk with a Doc' panel, physical activities, free haircuts from BSHOP partners, and activities for children. Over 100 people attended the event.
- Blood Pressure Screenings at BSHOP and BeSHOP locations with a special Go Red for Women screening at a BeSHOP partner.
- An appearance on the Healthier Tomorrow radio program to discuss heart disease and paid and earned social media to promote heart disease awareness, prevention and self-management.

Our **CDPP staff partnered with the Obodo Collective** to support the opening of the Obodo Greengrocer, a **small produce store** that also sells other grocery essentials. The grand opening was held in February and support from the community was overwhelming with a line around the block for people to get into the store and purchase produce. CDPP hosted a table at the grand opening providing nutrition education, resources and free BP checks. An **estimated 300 people attended** the grand opening. The **Obodo Greengrocer serves as one of the only locations in the Historic Westside to purchase fresh produce.** The Obodo

Greengrocer accepts SNAP/EBT and we are working with Together We Can, to make them an implementation site for the Double Up Food Bucks Program.

The Partners for a Healthy Nevada (PHN) meeting was held in February with 47 people in attendance. This meeting served to commemorate the 20<sup>th</sup> Anniversary of the PHN coalition. Dr. Lockett made opening remarks and in addition to regular agenda items, an advocacy training was provided by the Nevada Institute for Children's Research and Policy. During February, CDPP staff hosted three (3) Diabetes Self-Management Education & Support (DSMES) classes. Two (2) classes were provided in Spanish, and one class was provided virtually in English. A total of 27 people attended one of the classes.

#### B. **Tobacco Control Program (TCP) Update**

The SNHD TCP's youth vaping prevention initiative, BreakDown, partnered with the Nevada Interscholastic Athletic Association for their annual Athletic Director Conference. This event promoted the importance of tobacco-free lifestyles for youth, reaching Athletic Directors for high schools throughout Southern Nevada.

This month, staff conducted an educational training presentation for Communities in Schools coordinators on vaping prevention and how to address the use of e-cigarettes and other tobacco products among middle school students. Vaping prevention materials were distributed to thirteen (13) middle schools.

Our TCP's African American focused tobacco prevention initiative entitled, Because We Matter sponsored and participated in the Spring Preserves' Black History Month Festival on February 15<sup>th</sup>. This smoke-free event promoted community unity while providing valuable tobacco prevention resources and educational material to over 3,000 attendees.

**In February, thirteen (13) local businesses implemented voluntary smoke-free policies in their establishments.** Policies consist of minimum distance policies which limit smoking and vaping near entrances and exits to buildings.

Staff collaborated with the **Nevada State Apartment Association** to promote the smoke-free housing initiative at the annual Market Trends event. The event brings together multi-unit housing industry leaders including managers and owners through a one-day conference that seeks to empower, connect, and educate attendees on topics related to multi-unit housing. Strategic **distribution of smoke-free housing resources** included the direct placement of tailored resource packages on individual seats at the event site. Staff also tabled at the event to provide additional information and to directly connect with managers and owners. The event had over 300 attendees. The **TCP's online housing directory totals 65,095 smoke-free units**. Staff continues to work on obtaining updated information on properties to keep data on current master list up to date.

## **II. OFFICE OF EMERGENCY MEDICAL SERVICES & TRAUMA SYSTEM (OEMSTS)**

### **A. OEMSTS – March 2024 / 2025 Data**

<b>EMS Statistics</b>	<b>March 2024</b>	<b>March 2025</b>	
<b>Total certificates issued:</b>	724	1085	↑
<b>New licenses issued:</b>	102	104	↑
<b>Renewal licenses issued (recert only):</b>	616	981	↑
<b>Driver Only:</b>	41	58	↑
<b>Active Certifications: EMT:</b>	877	886	↑
<b>Active Certifications: Advanced EMT:</b>	1831	1843	↑
<b>Active Certifications: Paramedic:</b>	2016	2141	↑
<b>Active Certifications: RN:</b>	70	78	↑

## **III. OFFICE OF PUBLIC HEALTH PREPAREDNESS (OPHP)**

### **A. Planning and Preparedness**

1. Staff continued collaborating with Clark County and a software developer on an Impacted Persons Database. We are currently working through the legal implications of providing patient data to Resiliency Center for extension of services and other limited uses of this information for response and recovery operations. SNHD and community partners from Clark County Office of Emergency Management will be answering questions at a booth for Emergency Management Day at Legislature in Carson City, NV at the end of March.
2. OPHP continued to review and revise plans, threat response guides, and both internal and external training.
3. The Planners continue to review and revise the CHEMPACK, Nuclear and Radiation, Administrative Preparedness, Mass Care Support, and Highly Infectious Disease plans.
4. Planners continue to update the Nevada Continuity tool to streamline the process of generating a usable Continuity of Operations Plan (COOP). Planner has created a working group to complete the COOP process.
5. Twenty SNHD employees were FIT tested for personal protective equipment during the month of March.
6. Planners perpetuated revision of SNHD Basic EOP and Direction and Control Annexes.
7. Senior Planner met with representatives from the Closed POD Working group to discuss the direction of the working group and a revamp of the working group materials. Material review is underway.

8. Planners continued work on the development of the 2026 preparedness calendars.
9. Staff continue to participate in NACCHO's Virtual Learning Collaborative for the Inclusion of MCH Populations in Emergency Preparedness and Response.
10. Senior Planner participated in State Strategic Plan – Supply Chain Workgroup. Staff also participated in several other working groups that resulted from the State of Nevada Division of Public and Behavioral Health Public Health Preparedness Strategic Plan.
11. Planning staff held an Interim Planning Meeting for a tabletop exercise scheduled for June 23<sup>rd</sup>.
12. OPHP planners are developing a Recovery Annex based on lessons learned from real world events and exercises.
13. The Clinical Advisor and OPHP management attended the monthly Local Emergency Planning Committee (LEPC) at Station 18.

**B. Training, Exercises and Public Health Workforce Development:**

1. Trainers continue to develop Position Specific Task Books and related training curricula. Planning is currently in process for the next round of Incident Command System (ICS) Position Specific Training (PST) to pre-assigned Emergency Personnel staff on April 15<sup>th</sup> at SNHD Main location.
2. Trainers provided ICS 300 training at Bureau of Reclamation March 13<sup>th</sup> – 21<sup>st</sup>, to support City of Las Vegas ICS training calendar throughout 2025.
3. CPR training was provided to six (6) SNHD staff on March 12<sup>th</sup> - 13<sup>th</sup>.
4. New Hire Orientation was not provided to ten (10) staff on March 19<sup>th</sup>.
5. Planners conducted the **Excessive Heat Seminar** on March 12<sup>th</sup>.
6. Our Planners developed the After-Action Report for Excessive Heat Seminar.
7. Trainers are planning for Introduction to Radiological/Nuclear WMP Operations (AWR-140) course at for SNHD on June 16<sup>th</sup>.
8. Senior Planners participate in SNHD's Website Committee.
9. Manager, Supervisor, and Senior Planner participate in NACCHO Chemical Workshop Planning Meeting.
10. OPHP staff attended the TEEX MGT 348 training in North Las Vegas.
11. Senior Planner and Supervisor coordinate with Clark County Fire on radiological incident response planning.

**C. Southern Nevada Healthcare Preparedness Coalition (SNHPC)**

1. Trainers and Clinical Advisor confirmed upcoming dates for First Receiver Decontamination Training at Henderson Hospital on March 5<sup>th</sup>. Planning continues for additional training at Centennial Hills Hospital on April 9<sup>th</sup>, UMC on May 19<sup>th</sup>, and Valley Hospital on May 28<sup>th</sup>.
2. Our Trainer finalized dates and locations for two TEEX trainings is 2026; Pediatric Disaster Response and Emergency Management; Medical Management of Chemical,

- Biological, Nuclear and Explosive (CBRNE) Events. Continued planning and advertisements will be forthcoming.
3. The Trainer confirmed the upcoming briefing from Nevada National Security Site (NNSS) for June SNHPC meeting.
  4. Planners and Clinical Advisor have finalized planning efforts for the Medical Response Surge Exercise 2025.
  5. Planners attended healthcare system partner's Emergency Management Committee Meetings.
  6. Planners attended the UMC Emergency Preparedness Meetings.
  7. SNHPC returned to a monthly scheduled basis, next meeting is on April 3<sup>rd</sup>.
  8. Planners, Clinical Advisor and Trainer continuing development of the Resource Management Annex (SNHPC).
  9. Program manager and senior planner continue to leverage HPP award to support equipment and PPE needs of coalition members. Current requests for reimbursement include purchase of AEDs and CPR devices for local and rural fire department EMS to be used following mass casualty incidents and medical surge emergencies.
  10. Planner, Readiness Response Coordinator, Clinical Advisor and Trainer attended "Human Trafficking Awareness & Prevention" briefing coordinated by Nevada National Security Site/MSST/SOAR Team on March 25<sup>th</sup>.
  11. Planners have started efforts for SNHPC August workshop.
  12. Planners completed Readiness Assessment and Training and Exercise Plan.
  13. Planner, Readiness Response Coordinator, Clinical Advisor, and Trainer completed HCC Readiness Plan which includes HCC T&E Plan and submitted to DPBHP.

**D. Fusion Center Public Health Analyst:**

1. Disseminated public health information between SNHD and the Southern Nevada Counter Terrorism Center (SNCTC), such as assessing the risks to human life and environmental concerns of a lithium-ion battery fire and updating the Emergency Counter Measures Coordinating Plan between LVMPD and SNHD.
2. Provided public health input for threat assessments on special event assessment rating (SEAR) 2, 3, and 4 events, such as St. Patrick's Day Parade and Celebration.
3. Participate in weekly counter terrorism analytic group (CTAG) meetings.
4. Develop appropriate connections to increase communication between SNHD, SNCTC and its partner organizations.
5. Collaborate with five (5) surrounding fusion centers on areas of public health concern. Produce and distribute monthly joint public health bulletins.
6. Provide SNHD Disease Surveillance and Control with white papers from fusion center sources for situation awareness.
7. Distribute information on major recalls.
8. Provide SNHD Security with training opportunities from federal partners.
9. Evaluate restricted access material for potential impact and mitigation by SNHD.

**E. Grants and Administration:**

1. OPHP continues to monitor and review grant spending.
2. Our manager continues to participate in leadership training with SNHD contractors.
3. OPHP staff continue to complete budget activities for SNHD finance and coordination of quarterly progress reports for state.
4. The OPHP Manager continues to represent Community Health Division management on various SNHD working group committees.
5. The OPHP team is revising scopes of work and budgets for FY2026 fiscal grant year. Current Budget assumptions are that we will be receiving level funding as a basis for estimating special revenue activities.

**F. Medical Reserve Corps (MRC) of Southern Nevada:**

1. The MRC Coordinator attended NACCHO PPAG meeting, MRC meetings, SNHPC meeting, planned training and activities for upcoming months, sent out newsletters, and continued to recruit and deactivate volunteers.
2. MRC Coordinator attended VOAD meeting at United Way offices and the Extreme Heat seminar at the UNLV extension.
3. MRC provided blood pressure checks and distributed preparedness information at Senior Resource Fair hosted by Henderson City Councilman Jim Seebeck.

**MRC Volunteer Hours FY2025 Q3**

(Economic impact rates updated April 2024):

Activity	January	February	March
Training	36		
Community Event		8	6
SNHD Clinic			
Total Hours	36	8	6
Economic impact	\$1205.64	\$300.98	\$267.06

**IV. VITAL RECORDS**

- A. March is currently showing a **20% increase in birth certificate** sales in comparison to March 2024. **Death certificate** sales are currently showing a **2% decrease** in comparison to March 2024. SNHD received revenues of \$41,756 for birth registrations, \$29,995 for death registrations; and an additional \$10,120 in miscellaneous fees.

**COMMUNITY HEALTH Vital Statistics Program Birth/Deaths Registered – Fiscal Year Data**

Vital Statistics Services	Mar 2024	Mar 2025		FY 23-24 (Mar)	FY 24-25 (Mar)	
<b>Births Registered</b>	1,901	1,887	↓	14,203	18,554	↑
<b>Deaths Registered</b>	1,730	1,880	↑	15,778	16,555	↑
<b>Fetal Deaths Registered</b>	20	15	↓	156	147	↓

**COMMUNITY HEALTH Vital Statistics Program Birth/Deaths Certificates – Fiscal Year Data**

Vital Statistics Services	Mar 2024	Mar 2025		FY 23-24 (Mar)	FY 24-25 (Mar)	
Birth Certificates Sold (walk-in)	42	3	↓	502	56	↓
Birth Certificates Mail	117	112	↓	1,145	1,048	↓
Birth Certificates Online Orders	3,750	4,629	↑	32,108	33,366	↑
Birth Certificates Billed	95	74	↓	998	992	↓
<b>Birth Certificates Number of Total Sales</b>	4,004	4,818	↑	34,753	35,462	↑
Death Certificates Sold (walk-in)	33	9	↓	315	207	↓
Death Certificates Mail	122	230	↑	1,331	1,413	↑
Death Certificates Online Orders	8,213	7,930	↓	68,553	71,158	↑
Death Certificates Billed	29	46	↑	322	384	↑
<b>Death Certificates Number of Total Sales</b>	8,397	8,215	↓	70,521	73,162	↑

**COMMUNITY HEALTH Vital Statistics Program Birth/Deaths Cert. Sales by Source – Fiscal Year Data**

Vital Statistics Sales by Source	Mar 2024	Mar 2025		FY 23-24 (Mar)	FY 24-25 (Mar)	
Birth Certificates Sold Valley View (walk-in)	1%	.1%		1.4%	.2%	↓
Birth Certificates Mail	2.9%	2.3%	↓	3.3%	3%	↓
Birth Certificates Online Orders	93.7%	96.1%	↑	92.4%	94.1%	↑
Birth Certificates Billed	2.4%	1.5%	↓	2.9%	2.8%	↓
Death Certificates Sold Valley View (walk-in)	.4%	.1%	↓	.4%	.3%	↓
Death Certificates Mail	1.5%	2.8%	↑	1.9%	1.9%	
Death Certificates Online Orders	97.8%	96.5%	↓	97.2%	97.3%	↑
Death Certificates Billed	.3%	.6%	↑	.5%	.5%	

**COMMUNITY HEALTH Vital Statistics Program Birth/Deaths Certificates Sales – Fiscal Year Data**

Revenue	Mar 2024	Mar 2025		FY 23-24 (Mar)	FY 24-25 (Mar)	
Birth Certificates (\$25)	\$100,100	\$120,450	↑	\$868,825	\$886,550	↑
Death Certificates (\$25)	\$209,925	\$205,375	↓	\$1,763,025	\$1,829,050	↑
Births Registrations (\$13)	\$35,529	\$41,756	↑	\$302,302	\$300,885	↓
Deaths Registrations (\$13)	\$24,063	\$23,995	↓	\$203,567	\$210,883	↑
Convenience Fee (\$2)	\$7,906	\$9,330	↑	\$66,250	\$67,848	↑
Miscellaneous Admin	\$517	\$790	↑	\$5,940	\$6,125	↑
<b>Total Vital Records Revenue</b>	<b>\$378,040</b>	<b>\$401,696</b>	<b>↑</b>	<b>\$3,209,909</b>	<b>\$3,301,341</b>	<b>↑</b>

**COMMUNITY HEALTH Passport Program – Fiscal Year Data**

**B. PASSPORT SERVICES** – Passport Services is appointment only.

Applications	Mar 2024	Mar 2025		FY 23-24 (Mar)	FY 24-25 (Mar)	
Passport Applications	722	810	↑	5,830	6,455	↑
Revenue	Mar 2024	Mar 2025		FY 23-24 (Mar)	FY 24-25 (Mar)	
Passport Execution/Acceptance fee (\$35)	\$25,270	\$28,350	↑	\$204,050	\$225,925	↑

**V. HEALTH EQUITY**

- A. The Health Equity program received a No Cost Extension from the CDC COVID Disparities Grant. This extension aims to enhance infrastructure support for COVID prevention and control among underserved populations at higher risk and underserved.
  1. Per Executive Order 14222, **funding for the COVID Health Disparities Grant (CVDHE) was discontinued on March 24<sup>th</sup>**. This order halts all program activities under the no cost extension that was scheduled to end May 31<sup>st</sup>. This order halts all program activities under the no cost extension that was scheduled to end May 31<sup>st</sup>.
- B. The Health Equity Program works toward reducing health disparities through increasing organizational capacity and implementing community strategies.
- C. The Health Equity Program works towards establishing community partnerships and collaborations to increase the capacity of communities to address health disparities.
  1. The Health Equity program finalized execution of contracts for the implementation of a new community health strategy with Al-Maun Neighborly Needs and the Clark County Law Foundation. The health strategy will focus on nutrition, education and advocacy.



**VI. SOUTHERN NEVADA PUBLIC HEALTH LABORATORY (SNPHL)**

**A. Clinical Testing:**

1. SNHD Nursing Division:
  - a. Molecular and microbiology culture.
  - b. Sexually Transmitted Disease (STD) testing.
2. SNHD STD Department:
  - a. Participates in the CDC Gonococcal Isolate Surveillance Project (GISP) and the enhanced Gonococcal Isolate Surveillance Project (eGISP).
  - b. SNPHL performs NAAT and culture testing of *N. gonorrhoeae* isolates and submits them to a reference laboratory for the determination of antibiotic susceptibility patterns.
  - c. SNPHL has joined eGISP Part B to expand culture-independent testing for antimicrobial resistance genes of gonococcal isolates.
3. The total monthly samples tested are listed in the table below:

Test Name	Monthly Count	Avg Year to Date
GC Cultures	47	37
NAAT NG/CT	1427	1373
Syphilis	861	805
RPR/RPR Titers	136/58	134/52
Hepatitis Total	2444	2074
HIV/differentiated	820/30	736/20
HIV RNA	112	113

4. COVID testing:
  - Performed SARS-CoV-2 PCR extraction on the KingFisher Flex platform exclusively.
  - SNPHL maintains a capacity of 2000 tests/day with a turnaround-time of <48 hours (current TAT two-day currently at / near goal).
  - For March, the average daily testing was 32 and the average turnaround time was 41 hours from collection date to release of the report.
  - IT created easy patient accession and direct report verification from SNPHL LIMS into SNHD patient report portal.
  - Incorporate high throughput instruments such as Eppendorf 5073 automation of specimen fluid handling station.

- Monthly summary of COVID PCR/NAAT testing:

5. Reportable disease reports:

- [illegible]

	WGS (PulseNet)	14	12	20										46
Salmonella	Salmonella Screen	3	6	14										23
	Salmonella Serotype	3	7	13										23
Shigella	Shigella Screen	2	5	3										10
	Shigella Serotype	2	4	3										9
STEC	STEC Screen	0	3	3										6
	STEC Serotype	0	0	1										1
Unknown	Stool Culture	1	5	1										7
Vibrio	Vibrio ID	0	0	0										0
	Vibrio Screen	1	0	0										1
Yersinia	Yersinia Culture/ID	1	0	0										1

**B. Epidemiological Testing and Consultation:**

1. SNPHL participates in the SNHD Outbreak Investigation Committee and Foodborne Illness Taskforce. There were four (4) samples for GI outbreak investigation in March.
2. SNPHL continues to report results of influenza testing to the CDC National Respiratory and Enteric Virus Surveillance System (NREVSS). In March, SNPHL performed six (6) respiratory panels on the BioFire.

**C. Emergency response and reportable disease isolate testing report:**

1. SNPHL performs reportable disease isolate testing and confirmation. Isolates submitted by local laboratories are serotyped and/or confirmed by Whole Genome Sequencing; stored on-site; and results reported and/or samples submitted to CDC through various national programs; Public Health Laboratory Information System (PHLIS), National Antimicrobial Resistance Monitoring System (NARMS), and Influenza Surveillance, and PulseNet Bacterial Outbreak Surveillance.

2. SNPHL's additional mission is as a member of the CDC Laboratory Response Network (LRN) testing for the identification of potential biological weapons/agents on environmental daily samples within its unique BSL3 environment.

2025	Jan	Feb	Mar	Apr	May	Jun	July	Aug	Sep	Oct	Nov	Dec
Select Agent Rule out (total PCR)	0	2	0									

3. SNPHL is clinically validated for **using Whole Genome Sequencing (WGS) for the identification of Campylobacter species (select species), pathogenic Escherichia coli, and Salmonella** species. SNPHL is also validated for the determination of Salmonella serotypes and STEC (Shiga toxin-producing E. coli) serotypes and Shiga toxin genes.
4. SNPHL performed 20 Whole Genome Sequencing tests (WGS) as part of PulseNet Foodborne Outbreak Surveillance in March 2025.
5. SNPHL uses Bruker MALDI-TOF instrument for streamlined screening of bacterial isolates. A total # of 118 bacterial organisms have been identified in March.
6. SNPHL is validated for sequencing of SARS-CoV-2 and variants of concern through the identification of lineages and clades.
7. SNPHL has sustained capacity of sequencing many 96 SARS-CoV-2-positive RNA extracts per week with expectations of increasing this capacity with appropriate staffing, instrumentation, and method development. As of March 2025, SNPHL has sequenced 14 SARS-CoV-2-positive RNA extracts.
8. SNPHL coordinates and participates with Environmental Health and Veritas Labs for Legionella surveillance.

2025	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Legionella	3	22	0									

9. SNPHL provides vector testing for Environmental Services, Viral testing for Zika, West Nile, Western Equine Encephalitis, and Saint Louis encephalitis. Our facility hosted a CDC demonstration for the Vector team. In March, we tested a total of zero (0) mosquito pool samples. There were zero (0) positive WNV mosquito pool samples identified in March. Environmental Health released the test result to the public after we informed the test result to them.
10. As part of the Gonococcal Isolation Surveillance Program (GISP) and enhanced GISP (eGISP), in March, a total of 47 clinical isolates, Neisseria gonorrhoeae thirteen (13) isolates and Neisseria meningitidis three (3) isolate, were collected and will be sent to

either the regional laboratory for antimicrobial susceptibility testing (AST) or the CDC, respectively. Remnant NAATs or N. gonorrhoeae samples will be sent to the CDC for molecular-based AST testing as part of eGISP Part B.

11. SNPHL performs C. auris PCR screening using Real-Time PCR platform. We performed a total of 1241 samples in March.

**D. All-Hazards Preparedness:**

1. The SNPHL provides/assists testing for SNHD COVID Emergency Incident Response, local community outreach, CCDC jail-detention centers, institutions of higher education, and long-term nursing facilities Rapid-Antigen POC (CDC-EUA: Abbott IDNow; Qiagen Sofia; BD Vector) with outbreak confirmation RT-PCR testing supported by SNPHL.
2. SNPHL provides COVID Biosafety Training/Guidelines to Non-Traditional testing sites.
3. Our SNPHL coordinates with training/exercises for First Responders including local Civil Support Team, HazMat, Federal Bureau of Investigation, and Las Vegas Metropolitan Police Department.
4. SNPHL provides information to local laboratorians on CDC packaging and shipping infectious substances and the chain of custody procedures.
5. Provided onsite training for COVID online ordering applications for long-term care facilities.
6. Supplied Biosafety Guidance to Sentinel Sites regarding Monkeypox.
7. Furnished Monkeypox and Bivalent COVID Booster vaccination to laboratory staff.
8. Perpetual Biosafety Training and guidance to SNPHL personnel.
9. The laboratory received double door autoclave and awaiting the local contractor to extend the dry wall and power connection before installation.

**E. March 2025 SNPHL Activity Highlights:**

1. SNPHL has a stable CDC supply of Viral Transport Medium (VTM) used in COVID collection kits.
2. CAP HCV2 (Hep. Viral load) – A is 100% grade.
3. The clinical health laboratory purchased three (3) instruments for clinical testing to enhance the community health service. SNPHL received the urine analysis and Hematology instruments. The validation for both instruments is being performed right now. The contract for clinical chemistry instruments is under development in the Contract Office.
4. SNPHL clinical lab is still working on the validation of the Abbot Alinity clinical chemistry instrument.
5. The state CLIA inspector is scheduled to conduct an inspection for the newly requested additional tests from our laboratory on Monday, April 28, 2025. Additionally, the CMS CLIA inspection will take place for renewal from April 8<sup>th</sup> – 10<sup>th</sup>.

6. According to the WGS and genomic data analysis, the Omicron variant KP.3.1.1 and LP.B.1 and XEC lineages are domain lineages in March, from the samples received in the laboratory. The new hybrid lineage XEC also detected in the late of August till present. Our laboratory will keep sequencing the closed contact samples to help ODS to follow up on the investigation.
7. New influenza surveillance season showed that A/H3 and A/H1, and B/Victoria are major subtypes of influenza.
8. SNPHL participates in the CDC Avian Flu surveillance project by sending the testing guidance and specimen collection procedure to the local hospitals through HAN system. Any ICU patient with influenza A positive must send the specimen to our laboratory to do influenza subtyping to rule out avian influenza. There was no suspect avian flu sample received in the lab in March.
9. The new design may focus on building BSL-3 and Micro lab in the 2<sup>nd</sup> floor and leaving semi shell for the 1<sup>st</sup> floor in the Phase I project.
10. CDC rescinded the COVID fund on Monday, March 24<sup>th</sup>. The total amount of the grants, \$11,793,364.00 for the laboratory, has been terminated immediately.

**F. COMMUNITY HEALTH – SNPHL – Calendar Year Data**

March SNPHL Services	2024	2025	
Clinical Testing Services <sup>1</sup>	5,228	6,564	↑
Epidemiology Services <sup>2</sup>	944	324	↓
State Branch Public Health Laboratory Services <sup>3</sup>	48	0	↓
All-Hazards Preparedness Services <sup>4</sup>	8	6	↓
Environmental Health Services <sup>5</sup>	13	0	↓

<sup>1</sup> Includes N. Gonorrhoeae culture, GISP isolates, Syphilis, HIV, CT/GC molecular, Gram stain testing, and COVID Ab immunologic tests.

<sup>2</sup> Includes Stool culture, EIA, Norovirus PCR, Respiratory Pathogen PCR, Epidemiological investigations, or consultations.

<sup>3</sup> Includes COVID PCR, WGS, and LRN testing, proficiency samples, reporting to CDC, courier services, infectious substance shipments, teleconferences, training, presentations and inspections, samples submitted to CDC or other laboratories' submissions.

<sup>4</sup> Includes Preparedness training, teleconferences, and Inspections.

<sup>5</sup> Includes vector testing.