



Memorandum

Date: June 26, 2025

To: Southern Nevada District Board of Health

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

Subject: Community Health Division Monthly Activity Report – May 2025

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

A. Chronic Disease Prevention Program (CDPP)

Our CDPP worked with our contractor, Together We Can (TWC), to expand the **Double Up Food Bucks (DUFb) program**, a fruit and vegetable nutrition incentive program for people with SNAP benefits, to **two (2) new locations, which increases the total number of DUFb program locations to five (5)**. Obodo Greengrocer and The Just One Project Mobile Market were trained and onboarded in April. CDPP and TWC are also working together to implement strategies to increase the uptake and utilization of the DUFb program at the three (3) other DUFb implementation sites. A **transportation assessment** in partnership with the RTC is being conducted at **the three (3) other sites** to identify barriers to accessing these locations by bus, bicycle, or walking.

During April, CDPP staff **provided two (2) Diabetes Self-Management, Education & Support classes**. One (1) of the classes was provided virtually in English and one (1) in person class was provided in Spanish. A total of 20 people participated in one of the classes.

CDPP staff participated in **two (2) outreach events to promote the 5210 Healthy Habits Every Day initiative** in April. Over 550 people participated in the First 5 and Healthy Kids Day events. Also in April, CDPP added **one (1) new healthcare provider** to our list of 5210 champions. Additionally, CDPP staff developed new 5210 promotional materials including a coloring book and healthcare provider flyer.

The CDPP conducted **two (2) community blood pressure and prediabetes screenings** in April at a senior apartment complex and a place of faith. A total of 66 people were screened, and eleven (11) people were referred to local resources. In total this fiscal year, our community screening efforts have reached over 144 people at eleven (11) community and faith-based locations. Over 100 people have been referred to local resources including primary care, diabetes classes, and tobacco cessation resources.

B. Tobacco Control Program (TCP) Update

Work is ongoing to provide technical assistance and support tobacco-free policy adoption at **Nevada State University (NSU)** and **College of Southern Nevada (CSN)**. This month, TCP staff were notified that the NSU policy was signed and approved by leadership.

This month, the TCP and Clark County Medical Society (CCMS) began their annual partnership consisting of educational outreach to all CCMS members on the importance of evidence-based cessation treatments, best practices for tobacco use brief intervention and tobacco use prevention.

Staff **collaborated with Mater Academy East Las Vegas** to promote the Por Mi Por Ti Por Nosotros initiative during the school's annual Eggstravaganza and resource fair. Mater Academy ELV, serves students K-12 who are predominantly low-income and come from Spanish-speaking households. Staff were provided with various platforms to deliver the smoke-free living messages during the event. Staff distributed tobacco cessation resources in Spanish and English. There was an estimated attendance of over 1,000 people.

Staff collaborated with Fiesta Radio station 98.1 on the **Dia del Niño event held at the Craig Ranch Park Amphitheater in North Las Vegas.** This outdoor smoke and vape-free event gathered local and national musical talent to promote culture, diversity, and tobacco-free lifestyles among the Hispanic and Latino community. The event had over 8,500 people in attendance with a majority being Spanish speakers.

In April, **eight (8) local businesses** implemented voluntary smoke-free policy expansion such as limiting smoking outside entrances and exits to buildings.

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

A. OEMSTS – May 2024 / 2025 Data

May EMS Statistics	May 2024	May 2025		Mo. Fiscal Average 2024-2025
Total certificates issued	75	107	↑	319
New licenses issued	63	90	↑	85
Renewal licenses issued (recert only)	0	6	↑	228
Driver Only	41	58	↑	52
Active Certifications: EMT	908	952	↑	897
Active Certifications: Advanced EMT	1854	1880	↑	2048
Active Certifications: Paramedic	1944	2187	↑	2122
Active Certifications: RN	63	83	↑	72

III. OFFICE OF PUBLIC HEALTH PREPAREDNESS (OPHP)

A. Planning and Preparedness

1. Staff continued collaborating with Clark County an Impacted Persons Database. Currently working with community partners such as Las Vegas Resiliency Center for extension of services and other limited uses of the minimal necessary patient 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 end of month.
2. OPHP continued to review and revise emergency operation plans, threat response guides, and test these plans through internal and external training and exercises.
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. Our Planners have compiled departmental COOPs to create agency COOP and have submitted them to the program Supervisor.
6. Seventeen SNHD employees were FIT tested for personal protective equipment during the month of May.
7. Planners perpetuated revision of SNHD Basic EOP and Direction and Control Annexes.

8. 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.
9. The 2026 preparedness calendars were ordered and delivered. Distribution will begin in October 2025.
10. Staff continue to participate in NACCHO's Virtual Learning Collaborative for the Inclusion of MCH Populations in Emergency Preparedness and Response.
11. Senior Planner participated in Resources & Supply Chain Work Group and the Health Equity Work Group. 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.
12. Planning staff continue to work on the biological tabletop exercise that will be held June 23rd.
13. OPHP planners are developing a Recovery Annex based on lessons learned from real world events and exercises.
14. 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. OPHP Trainers continue to provide ICS Position Specific training to pre-assigned SNHD Emergency Personnel. The next offering is scheduled for June 25th.
2. OPHP continues to support the City of Las Vegas ICS 300/400 training schedule.
3. CPR training was provided to twelve (12) SNHD staff & MRC Volunteers May 7th - 8th.
4. The New Hire Orientation was provided to five (5) staff on May 21st.
5. Planners are developing the After-Action Report for the **Excessive Heat Seminar**.
6. Our Trainers continue planning for Introduction to Radiological/Nuclear WMP Operations (AWR-140) course at SNHD on June 16th.
7. An OPHP completed Instructor Re-certification for "Response to Bombing Incidents (RBI)" at New Mexico Tech/Energetic Materials Research and Testing Center. This course is planned to be offered to SNHD staff this Fall/Winter 2025.
8. Senior Planners participate in SNHD's Website Committee.
9. Our staff attended the NACCHO Preparedness Summit in San Antonio, TX April 28th – May 2nd.
10. Senior Planner participated in the LAS In-Person & Virtual Tabletop Exercise (TTX) – LAS Aircraft Emergency Response.
11. Our staff presented at the Resort Emergency Management Working group.
12. The Senior Planner attended the HSEEP course.
13. Senior Planners and Clinical Advisor attend AAST Disaster Committee – Hospital Disaster Preparedness: Pediatric Perspectives and 25NV-0574 HCV13 (Non-Resident) Healthcare Facility Mass Fatality Management seminars.

14. A collaboration between Community Health - OPHP and Disease Surveillance and Control participated in a measles exercise with Clark County School District to evaluate processes and plans should we get a measles case in Southern Nevada schools.

C. Southern Nevada Healthcare Preparedness Coalition (SNHPC)

1. Trainers and Clinical Advisor provided First Receiver Decontamination Training to ten (10) hospital staff at UMC on May 19th.
2. Trainers and Clinical Advisor are reviewing updates to the First Receiver Decontamination Training Program and plan for relaunch in Fall/Winter 2025.
3. Ongoing planning for Pediatric Disaster Response and Emergency Management and Medical Management of Chemical, Biological, Nuclear and Explosive (CBRNE) Events courses in 2026.
4. There is ongoing planning for PER 320 – Personal Protective Measures for Biological Events in Fall 2025, date/location TBD.
5. We are planning for Cybersecurity education by Cybersecurity & Infrastructure Security Agency (CISA), TBD.
6. Planners attended the UMC Emergency Preparedness Meetings.
7. 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.
8. Planners continue efforts for the SNHPC August workshop.
9. Our Senior Planner and Clinical Advisor participate as advisors in Mountain View Hospital's Emergency Management Full Scale Community Wide MCI-Decontamination Drill with an influx of patients.
10. A Senior Planner and Clinical Advisor conducted initial coordination for Hospital Area Command Full Scale Exercises to be held in October.
11. Senior Planner and Clinical Advisor met with Nellis AFB to discuss the establishment of an RMOC (Regional Medical Operations Center).
12. Our Clinical Advisor supported City of Henderson's Ammonia Awareness Exercise.

C. Fusion Center Public Health Analyst:

1. Disseminating 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. Providing public health input for threat assessments on special event assessment rating (SEAR) 2, 3, and 4 events, such as Electric Daisy Carnival.
3. Participating in weekly counter terrorism analytic group (CTAG) meetings.
4. Attended Department of Homeland Security training for Analysts.
5. Developing appropriate connections to increase communication between SNHD, SNCTC and its partner organizations.

6. Collaborating with five (5) surrounding fusion centers on areas of public health concern. Produce and distribute monthly joint public health bulletins.
7. Distributing information on major recalls.
8. Monitored and advised select Fusion Center contacts of potential medical event of concern.

D. Grants and Administration:

1. OPHP continues to monitor and review grant spending for year end closeout.
2. Our manager continues to participate in SNHD 's second budget augmentation as well as monitor budgets for next fiscal year.
3. OPHP staff continue to complete budget and scope of work plan 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.
6. Our staff updated State on Preparedness Planning, Operations, Exercises, Training and Evaluation (POETE) working group.

E. Medical Reserve Corps (MRC) of Southern Nevada:

1. The MRC Coordinator attended the NACCHO Preparedness Summit in San Antonio, TX.
2. MRC Coordinator attended NACCHO PPAG meeting, MRC national program meetings, SNHPC meeting, planned training and activities for upcoming months, sent out newsletters, and continued to recruit and deactivate volunteers.
3. MRC Coordinator and one MRC Volunteer attended the United Way Volunteer Fair on May 10th to recruit new volunteers and distribute preparedness calendars.
4. MRC nurses provided blood pressure checks and distributed health information at health information at a Community Health Fair hosted by SNHD Fremont Clinic on May 29th. Some high readings were found and advised to seek care.
5. MRC and SNHD EMS office hosted Stop the Bleed training for 13 CERT volunteers.

MRC Volunteer Hours FY2025 Q4

(Economic impact rates updated April 2025):

Activity	April	May	June
Training	11		
Community Event	22	15	
SNHD Clinic			
Total Hours	33	15	
Economic impact	\$1,361.91	\$628.77	

IV. VITAL RECORDS

- A. May is currently showing **25% increase in birth certificate** sales in comparison to May 2024. **Death certificate** sales currently showing a **7% increase** in comparison to May 2024. SNHD received revenues of \$37,674 for birth registrations, \$22,555 for death registrations; and an additional \$9,188 in miscellaneous fees.

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

Vital Statistics Services	May 2024	May 2025		FY 23-24 (May)	FY 24-25 (May)	
Births Registered	1,692	2,005	↑	21,704	22,772	↑
Deaths Registered	1,794	1,747	↓	19,520	20,107	↑
Fetal Deaths Registered	11	16	↑	184	179	↓

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

Vital Statistics Services	May 2024	May 2025		FY 23-24 (May)	FY 24-25 (May)	
Birth Certificates Sold (walk-in)	16	1	↓	540	66	↓
Birth Certificates Mail	139	144	↑	1,405	1,342	↓
Birth Certificates Online Orders	3,261	4,160	↑	38,982	42,196	↑
Birth Certificates Billed	97	102	↑	1,242	1,229	↓
Birth Certificates Number of Total Sales	3,513	4,407	↑	42,169	44,833	↑
Death Certificates Sold (walk-in)	21	3	↓	367	231	↓
Death Certificates Mail	176	192	↑	1,692	1,811	↑
Death Certificates Online Orders	7,286	7,831	↑	84,270	87,473	↑
Death Certificates Billed	47	38	↓	417	463	↑
Death Certificates Number of Total Sales	7,530	8,064	↑	86,746	89,978	↑

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

Vital Statistics Sales by Source	May 2024	May 2025		FY 23-24 (May)	FY 24-25 (May)	
Birth Certificates Sold Valley View (walk-in)	.5%	0%	↓	1.3%	.1%	↓
Birth Certificates Mail	4%	3.3%	↓	3.3%	3%	↓
Birth Certificates Online Orders	92.8%	94.4%	↑	92.4%	94.1%	↑
Birth Certificates Billed	2.8%	2.3%	↓	2.9%	2.7%	↓
Death Certificates Sold Valley View (walk-in)	.3%	0%	↓	.4%	.3%	↓
Death Certificates Mail	2.3%	2.4%	↑	2%	2%	
Death Certificates Online Orders	96.8%	97.1%	↑	97.1%	97.2%	↑
Death Certificates Billed	.6%	.5%	↓	.5%	.5%	

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

Revenue	May 2024	May 2025		FY 23-24 (May)	FY 24-25 (May)	
Birth Certificates (\$25)	\$87,825	\$110,175	↑	\$1,054,225	\$1,120,825	↑
Death Certificates (\$25)	\$188,250	\$201,600	↑	\$2,168,650	\$2,249,450	↑
Births Registrations (\$13)	\$29,588	\$37,674	↑	\$366,223	\$381,186	↑
Deaths Registrations (\$13)	\$21,619	\$22,555	↑	\$250,770	\$258,684	↑
Convenience Fee (\$2)	\$6,802	\$8,578	↑	\$80,720	\$85,730	↑
Miscellaneous Admin	\$708	\$610	↓	\$7,226	\$7,548	↑
Total Vital Records Revenue	\$334,792	\$381,192	↑	\$3,927,814	\$4,103,423	↑

COMMUNITY HEALTH Passport Program – Fiscal Year Data

B. PASSPORT SERVICES – Passport Services is appointment only.

Applications	May 2024	May 2025		FY 23-24 (May)	FY 24-25 (May)	
Passport Applications	721	781	↑	7,310	7,975	↑
Revenue	May 2024	May 2025		FY 23-24 (May)	FY 24-25 (May)	
Passport Execution/Acceptance fee (\$35)	\$25,235	\$27,335	↑	\$255,850	\$279,125	↑

V. HEALTH EQUITY

- A. The Health Equity program works towards establishing community partnerships and collaborations to increase the capacity of communities to address health disparities.
1. May 5th, the Health Equity team distributed their quarterly newsletter covering and providing information on heart health, brain health, and health disparities among seniors. The newsletter is distributed to SNHD staff, partners and the general public.
 2. May 13th, the Health Equity program provided Molina Healthcare case management department staff with a presentation on programs and services provided by the Southern Nevada Health District. As a result of this presentation Molina Healthcare (MH) reached out to SNHD to discuss future collaboration, where clients could access vital records paid by MH.
 3. May 14th & May 21st, the Health Equity program facilitated the Diabetes Conversational Maps training with clients from the YMCA.

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	30	38
NAAT NG/CT	1658	1535
Syphilis	817	859
RPR/RPR Titers	135/41	140/52
Hepatitis Total	2926	2510

HIV/differentiated	726/25	774/23
HIV RNA	122	121

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 May, the average daily testing was seven (7) and the average turnaround time was 62 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.
- Since the script problem of Tecan instrument cannot be resulted by manufacture, we asked SNHD Contracts and SNHD Purchasing to discuss with manufacture to return this instrument if it is feasible.

Monthly summary of COVID PCR/NAAT testing:

Month	# PCR & NAAT/#POS	Month	# PCR & NAAT/#POS
January	471/74	July	-----
February	656/55	August	-----
March	630/22	September	-----
April	195/22	October	-----
May	141/9	November	-----
June	-----	December	-----

5. Reportable disease reports:

- SNPHL continues to perform routine testing of reportable disease specimens submitted by community stakeholders. Isolates tested are reported to OEDS on a weekly basis to aid in disease investigation, and SNPHL and OEDS coordinate with CDC PulseNet if required.

- A monthly summary of reportable diseases tests is listed as follows:

		Jan	Feb	Mar	Apr	May	Jun	July	Aug	Sep	Oct	Nov	Dec	Total
Campylobacter	Campy ID	9	4	3	2	2								20
	Campy Screen	12	8	4	3	6								33
Neisseria species	Gonorrhoeae Culture	33	32	47	48	30								190
	Gram Stain/WBC	0	5	0	0	0								5
	Neisseria ID	2	0	0	0	0								2
	Haemophilus ID	0	0	0	0	1								1
Unknown ID	Bacterial ID	0	0	0	0	2								16
	WGS (PulseNet)	14	12	20	8	26								86
Salmonella	Salmonella Screen	3	6	14	13	11								47
	Salmonella Serotype	3	7	13	13	9								45
Shigella	Shigella Screen	2	5	3	6	4								20
	Shigella Serotype	2	4	3	0	1								10
STEC	STEC Screen	0	3	3	1	5								12
	STEC Serotype	0	0	1	0	1								2
Unknown	Stool Culture	1	5	1	4	5								16
Vibrio	Vibrio ID	0	0	0	1	0								1
	Vibrio Screen	1	0	0	3	0								4

Yersinia	Yersinia Culture/ID	1	0	0	2	2								5
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B. Epidemiological Testing and Consultation:

1. SNPHL participates in the SNHD Outbreak Investigation Committee and Foodborne Illness Taskforce. There were three (3) samples for GI outbreak investigation in May.
2. SNPHL continues to report results of influenza testing to the CDC National Respiratory and Enteric Virus Surveillance System (NREVSS). In May, SNPHL performed one (1) 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	1	3							

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 26 Whole Genome Sequencing tests (WGS) as part of PulseNet Foodborne Outbreak Surveillance in May 2025.
5. SNPHL uses Bruker MALDI-TOF instrument for streamlined screening of bacterial isolates. A total # of 162 bacterial organisms have been identified in May.
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 May 2025, SNPHL has sequenced three (3) 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	26	62							

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 May, we tested a total of 288 mosquito pool samples. There were zero (0) positive WNV mosquito pool samples identified in May. 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 May, a total of 30 clinical isolates, *Neisseria gonorrhoeae* thirteen (13) isolates and *Neisseria meningitidis* one (1) 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 1195 samples in May.

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. May 2025 SNPHL Activity Highlights:

1. SNPHL maintains a consistent supply of Viral Transport Medium (VTM) for COVID collection kits, even after the cessation of ELC COVID funding. The reagents for PCR and WGS are expected to be depleted by August 2025.

2. Proficiency tests of WSLH Bordetella, WSLH Legionella, CAP IDR-Infectious Disease, Respiratory BIOFIRE, ID3-NAA Respiratory Limited, CAP AHIV Anti-HIV 1/2nad GI panel, BIOFIRE are 100% grade.
3. The SNPHL received the renewed CMS CLIA certificate for SNPHL. The expiration date of the renewed Certificate of Compliance is April 11, 2027. Also, we received the new state CLIA certificate with clinical chemistry, hematology and urinalysis. Dr. Lockett has signed the certificate.
4. Phoenix controls started the process of upgrades on the second floor May 14th (BSL3 is the last area upgraded. This will take place this week. It will require BSL3 to be completely shut down).
5. According to the WGS and genomic data analysis, the Omicron variant LP.B.1.1 lineages are domain lineages in May, 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.
6. New influenza surveillance season showed that A/H3 and A/H1, and B/Victoria are major subtypes of influenza.
7. 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 May.
8. The new design may focus on building BSL-3 and Micro lab in the 2nd floor and leaving semi shell for the 1st floor in the Phase I project.
9. May 27th, to June 9th, a local contractor will be installing a new double door autoclave for the BSL-3 laboratory. Throughout this timeframe, NSPHL will help us to perform our LRN-B testing if the FBI or Biowatch provides us with screening samples of potential select agent specimens.

F. COMMUNITY HEALTH – SNPHL – Calendar Year Data

May SNPHL Services	2024	2025	
Clinical Testing Services ¹	5,303	7,179	↑
Epidemiology Services ²	386	290	↓
State Branch Public Health Laboratory Services ³	0	0	
All-Hazards Preparedness Services ⁴	6	5	↓
Environmental Health Services ⁵	409	351	↓

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

² Includes Stool culture, EIA, Norovirus PCR, Respiratory Pathogen PCR, Epidemiological investigations, or consultations.

³ 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.

⁴ Includes Preparedness training, teleconferences, and Inspections.

⁵ Includes vector testing.