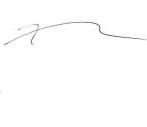




Memorandum

Date: January 22, 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 – December 2025

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

A. Chronic Disease Prevention Program (CDPP)

The 2025 fall **Pop-Up Produce Stands** wrapped up in December. In total, twelve (12) pop-ups were held during 2025, each offering low-cost, fresh, produce for people experiencing transportation and/or financial barriers to accessing healthy foods. In total, over 1,113 pounds of produce was sold and nearly 45% of all transactions were SNAP sales. The Nevada Division of Welfare & Supportive Services' SNAP outreach team attended several fall pop-ups and assisted clients with signing up for or renewing SNAP. The 2026 pop-ups will begin in March. Planning is underway.

We completed the **Partners for a Healthy Nevada (PHN)** (OCDPHP-facilitated coalition) End of Year Summary of progress towards goals and objectives. The summary was shared with members, and the PHN webpage was updated with the new 2026 goals and objectives.

Created and distributed **Healthy Headlines**, a quarterly e-newsletter that shares information on CDPP programs, resources, and services. The December issue featured a review of our successful 2025 initiatives. It was sent to over 6,700 people and had a 32% open rate.

B. Tobacco Control Program (TCP) Update

Successfully partnered with local healthcare providers, including SNHD's FQHC to promote tobacco cessation through the **Nevada Tobacco Quitline**. Through these efforts, local healthcare providers successfully referred 5,069 patients to free cessation resources in 2025.

The TCP's Hispanic/Latino initiative, Por Mi Por Ti Por Nosotros, Viva Saludable established a collaboration **with Latinas in Power (LIP)** to promote tobacco-free lifestyles through the power of shared stories. In a new media campaign, LIP members shared their personal reasons for living smoke-free, helping inspire healthier choices within the community through authentic, culturally relevant messaging. These video messages were shared via LIPs social media and distribution networks.

The **Nevada Tobacco Control & Smoke-free Coalition (NTCSC)** is comprised of various state and national partners whose mission is to work together to improve the health of Nevadans by reducing the burden of tobacco use and nicotine addiction. Each year, the NTCSC recognizes local community champions who work to reduce tobacco use and secondhand smoke exposure. This year, the TCP named Nevada State University, Papa Ola Lōkahi, Robin Crawford from the Nevada State Apartment Association, and Ms. Ginger from the Nevada Association of Student Councils for their commitment and efforts to reduce the toll of tobacco among Southern Nevadans.

In partnership with the Nevada Cancer Coalition, staff participated in the **NBA Cares Total Health Fair** on December 14, 2025, at the Heinrich YMCA to distribute tobacco cessation information, tobacco flavoring educational and chronic disease prevention and resource materials to the community. Event organizers estimate that over 300 community members attended the event.

The TCP's High School-focused vaping prevention initiative called BreakDown partnered with the **Nevada Interscholastic Athletic Association** to promote tobacco & vaping cessation resources at CCSD sporting events and championship games. This collaboration is estimated to reach over 65,000 teens with view impressions of over 320,000.

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

The OEMSTS plays a vital role in maintaining a responsive, well-trained, and integrated EMS and trauma system that serves the diverse needs of Southern Nevada's population.

A. Education Committee

The Education Committee assists the OEMSTS, the Medical Advisory Board (MAB), and the QI Directors Committee in researching, developing, editing, and approving new and existing education for initial training and continuing education purposes. Members include volunteer representatives from permitted agencies, receiving hospitals, and individuals involved with the training of EMS professionals.

The Committee approved the finalized SNHD Paramedic Mentorship/Internship Program.

B. Drug/Device/Protocol Committee (DDP)

The DDP Committee assists the OEMSTS, the Medical Advisory Board (MAB), and the QI Directors Committee in researching, developing, and editing new and existing protocols. Members include volunteer representatives from permitted agencies, receiving hospitals, and individuals involved with the training of EMS professionals.

The DDP continued its discussion of the addition of the Emergency Medical Responder (EMR) level of certification and approved a new Chair and Vice Chair.

C. Medical Advisory Board (MAB)

The primary mission of the MAB is to support the Health Officer's role to ensure quality patient care within the EMS system by making recommendations and assisting in the ongoing design, operation, and evaluation of the EMS system from initial patient access to definitive patient care. The members include: 1) One (1) medical director of each firefighting/franchised agency; 2) One (1) operational director of each firefighting/franchised agency; 3) Chairman of the Regional Trauma Advisory Board; and 4) An employee of the District whose duties relate to the administration and enforcement of EMS Regulations as an ex-officio member.

The Board heard reports from the Education and DDP sub-committees and approved a new Chair and Vice Chair.

D. OEMSTS – December 2024 / 2025 Data

December EMS Statistics	Dec	Dec	Mo. Fiscal
	2024	2025	Average
	2024-2025		
Total certificates issued	103	88	244
New licenses issued	100	82	75
Renewal licenses issued (recert only)	3	1	134
Driver Only	51	61	54
Active Certifications: EMT	890	1165	922
Active Certifications: Advanced EMT	1860	1885	1732
Active Certifications: Paramedic	2126	2317	2028
Active Certifications: RN	68	85	75

III. OFFICE OF PUBLIC HEALTH PREPAREDNESS (OPHP)

A. Planning and Preparedness

Ongoing/Continuing Activities

(Emergency Planning & Preparedness)

1. Continued review and revision of:
 - a) Nuclear and Radiation
 - b) Administrative Preparedness
 - c) SNHD Basic EOP and Direction and Control Annexes
 - d) BioWatch
 - e) Recovery Annex
 - f) Medical Countermeasures Annex

- g) Tularemia Threat Response Guide
2. SNHD Continuity of Operations Plan
 - a) A COOP working group comprised of staff from each office that will oversee regular updates to the approved plan. The group meets quarterly, and the next meeting will be in January.
 - b) Planners met with IT Manager to begin planning for Essential Record COOP Update.
 - c) BioWatch Plan under review considering elimination in federal funding to support local operations and local impacts to future emergency management and preparedness operations.
 - d) OPHP planners are continuing development of a Recovery Annex based on lessons learned from real world events and exercises.
 - e) Our Planners are making updates to the medical countermeasures plan to incorporate lessons learned from Watership Down exercise and beginning creation of a Vulnerable Populations appendix.
 - f) The Tularemia Threat Response Guide was updated based on revised information from the MMWR.
 - g) Planners are serving as co-chairs for Access to Care working group as part of Community Health improvement Plan Steering Committee.
 - h) Senior Planner finished draft of the Basic EOP and it is currently under review.
3. State and Local Community Working Group meetings and OPHP Participation
 - a) Monthly State of Nevada Division of Public and Behavioral Health Public Health Preparedness Strategic Plan Subcommittees (Required Activity under federal grants)
 - i. Resources & Supply Chain Work Group
 - ii. Health Equity Work Group
4. OPHP Planner is serving as a panel evaluator for the RTC Extreme Heat Resilience Improvement Plan.
5. Monthly SNHD Meetings
 - a) Central Safety Committee
 - b) Joint Labor Management Committee
 - c) Policy Committee (Manager)
 - d) Institutional Review Committee
 - e) Community Health Improvement Plan Steering Committee
 - i. Funding and Access to Care Working Group
 - f) Resort Emergency Management Working Group

B. Training, Exercises, and Public Health Workforce Development

Ongoing/Continuing Activities

1. OPHP continues to support the City of Las Vegas with provision of ICS 300/400 training schedule. ICS 300 was provided on December 2nd – 3rd at City of Las Vegas OEM to and G191 at the City of Henderson OEM Community Partners.
2. A CPR course and skills training scheduled for December 11th for four (4) SNHD staff at SNHD Decatur.

3. The next New Hire Orientation was not provided in December, the next orientation date is January 21st, 2026.
4. ALERRT Civilian Response Active Shooter Events (CRASE) briefing was presented to EH Engineering department on December 10th.

Upcoming Training and Exercise Events

1. Trainers updated the 2026 calendar for course offerings to include Introduction to Radiological/Nuclear WMD Operations AWR-140, ALERRT Civilian Response to Active Assailant, Response to Bombing Incidents and ICS Position Specific Training.
2. Our Planners held the Initial Planning Meeting for the SNHD Radiation Workshop 2026.
3. Planners executed the SNHD Radiation Game practice day for December 17th.

C. Southern Nevada Healthcare Preparedness Coalition (SNHPC)

Ongoing/Continuing Activities

1. SNHPC held its monthly meeting. Supervisor, Senior Planners, and Planners attended.
2. Our Trainer, Clinical Advisor, Senior Planner and Planner HVA Committee followed up with local SMEs and provided edits for draft.
3. The Planners attended the Emergency Management Committee meetings for UMC and Dignity Health St. Rose Siena and De Lima Hospitals.
4. OPHP Staff conducted the POETE review with the State of Nevada.
5. SNHPC members will staff MSST at the MACC for ESF 8 for New Year's Eve.
6. SNHPC members attended the National Healthcare Coalition Preparedness Conference 2025 in Grapevine, TX.
7. Senior Planner submitted HPP grant deliverables (HHC Governance/jurisdiction information review and update, HVA, Readiness Assessment, Readiness Plan, and Training and Exercise Plan) into CAAMP.
8. The Senior Planners, Planners, Clinical Advisor and Trainer will begin reviewing and updated the SNHPC COOP, Cybersecurity Assessment, Extended Downtime Health Care Delivery Impact Assessment, Information Sharing Plan, Med Surge Support Plan, Recovery Plan and Resource Management Plan.
9. Trainer and Readiness Response Coordinator updated the T&E Calendar/Readiness Plan for submittal by Senior Planner to State HPP.

New/Upcoming Activities

1. Senior Planner has continuous planning and coordination for the Radiation/Community Reception Center workshop scheduled for February 2026.
2. Ongoing coordination for the 2026 TEEX trainings:
 - a) Medical Management of Chemical I, Biological, Nuclear and Explosive (CBRNE) Events PER-211 August 26th – 27th, hosted by City of North Las Vegas (NLV City Hall).
 - b) Pediatric Disaster Response and Emergency Management MGT-439 October 7th – 8th, 2026, hosted by Dignity Health Siena Campus.
3. Trainer confirmed HERT course at UMC on March 25th – 26th, 2026. This training will also open up registration for other hospitals in Clark County.

4. Trainers confirmed instructional support to DEM Basic Academy March 2nd – 6th, 2026 at Station 18.

D. PHP Technician and N-95 Fit Testing

1. Thirty-five SNHD Employees were FIT tested for personal protective equipment during the month of December.

E. Fusion Center Public Health Analyst

Ongoing/Continuing Activities

1. Disseminated public health information between SNHD and the Southern Nevada Counter Terrorism Center (SNCTC) in December.
2. Provided public health input for threat assessments on special events of local significance including religious festivals and New Year's Eve including religious festivals and New Year's Eve.
3. Monthly Analyst continues to provide weekly verbal public health briefings during SNCTC collaboration meetings.
4. Analysts continue to participate in weekly Counter Terrorism Analytic Group (CTAG) meetings.
5. Our analyst continues to develop 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 for production of monthly joint public health bulletins.

F. Grants and Administration

Ongoing/Continuing Activities

1. The manager continues to monitor grant deliverables and budgets for FY 2026 with the State of Nevada Division of Public and Behavioral Health.
2. Our manager continues to represent Community Health Division management on various SNHD working group committees and initiatives.
3. The OPHP Manager and Supervisor in process of preparing budgets and scopes of work for continuation of unspent FY 2025 federal funds.
4. OPHP Manager continues to reduce physical inventory of miscellaneous stockpiled preparedness resources and transfer of excess grant purchased surplus property to community partners for use.
5. Manager, Supervisor and Senior Planners attended the Partners' Meeting.

G. Medical Reserve Corps (MRC) of Southern Nevada

1. MRC Coordinator attended the SNHPC meeting, planned training and activities for upcoming months, sent out newsletters, and continued to recruit and deactivate volunteers.

MRC Volunteer Hours FY2026 Q1

(Economic impact rates updated April 2025):

Activity	October	November	December
Training			
Community Event	32.50	24	
SNHD Clinic			
Emergency Deployment			
Total Hours	32.50	24	0
Economic Impact	\$1,318.53	\$1,342.86	\$0
FY2025 Total Hours	5.00	3.0	0
FY2025 Economic Impact	\$167.45	\$100.47	\$0

Source: Department of Labor Economic Value Calculator for medical volunteers. For general volunteer help, which is most of the time, the Independent Sector calculates the value of volunteer time and publishes it each year. Current amount is \$34.79. <https://independentsector.org/research/value-of-volunteer-time/> (Economic impact rates updated April 2025):

IV. VITAL RECORDS

A. December is currently showing a **19% decrease** in **birth certificate** sales in comparison to December 2024. **Death certificate** sales are currently showing a **16% increase** in comparison to December 2024. SNHD received revenues of \$23,192 for birth registrations, \$25,012 for death registrations; and an additional \$6,304 in miscellaneous fees.

COMMUNITY HEALTH Vital Statistics Program – Fiscal Year Data

Vital Statistics Services	Dec	Dec	Yr Average 12/2024- 12/2025
	2024	2025	
Births Registered	1,773	1,765	↓ 1,974
Deaths Registered	1,808	1,578	↓ 1,777
Fetal Deaths Registered	8	14	↑ 16

COMMUNITY HEALTH Vital Statistics Program – Fiscal Year Data

Vital Statistics Services	Dec	Dec	Yr Average
	2024	2025	12/2024-12/2025
Birth Certificates Sold (walk-in)	7	3	11
Birth Certificates Mail	92	89	112
Birth Certificates Online Orders	3,124	2,507	3,847
Birth Certificates Billed	150	124	110
Birth Certificates Number of Total Sales	3,373	2,723	4,081
Death Certificates Sold (walk-in)	7	28	19
Death Certificates Mail	122	182	160
Death Certificates Online Orders	7,321	8,442	7,852
Death Certificates Billed	24	52	45
Death Certificates Number of Total Sales	7,474	8,704	8,077

Revenue	Dec	Dec	Yr Average
	2024	2025	12/2024-12/2025
Birth Certificates (\$25)	\$84,325	\$68,075	\$102,017
Death Certificates (\$25)	\$186,850	\$217,600	\$201,913
Births Registrations (\$13)	\$28,028	\$23,192	\$34,336
Deaths Registrations (\$13)	\$20,982	\$25,012	\$23,066
Convenience Fee (\$2)	\$6,130	\$5,678	\$7,794
Miscellaneous Admin	\$795	\$626	\$640
Total Vital Records Revenue	\$327,110	\$340,183	\$369,766

COMMUNITY HEALTH Passport Program – Fiscal Year Data

B. PASSPORT SERVICES – Passport Services is appointment only.

Applications	Dec	Dec	Yr Average
	2024	2025	12/2024-12/2025
Passport Applications	633	465	732
Revenue	Dec	Dec	Yr Average
	2024	2025	12/2024-12/2025
Passport Execution/Acceptance fee (\$35)	\$22,155	\$16,275	\$25,649

V. HEALTH EQUITY

Health Equity Program – December Highlights

The Health Equity Program continues to strengthen community partnerships and collaborations aimed at increasing the capacity of local communities to address health disparities.

Key Activities in December:

1. Youth Advisory Council (YAC - SPARK)

- A. On December 3rd, 2025, SNHD's youth advisory council SPARK (Students Promoting Awareness, Responsibility & Knowledge) completed their sixth meeting. The focus of this meeting included a workshop on social media and a presentation on the functions of the Office of Communications.

2. Mobility for All Workgroup

- A. On December 10th, 2025, the Health Equity Coordinator participated in the second Mobility for All workgroup. The Regional Transportation Commission of Southern NV assembled this workgroup to help guide the development of their All-Access Mobility Plan, which goal is to develop and identify strategies to improve access through enhanced transit stops and better connections to other modes of travel.

3. Youth Advisory Council (YAC - SPARK)

- A. On December 13th, 2025, SNHD's youth advisory council SPARK (Students Promoting Awareness, Responsibility & Knowledge) participated in a team building and networking in-person event at the Gold Coast Bowling Center. During this event, advisory council members had the opportunity to explore team building, teamwork and collaboration principles.

VI. SOUTHERN NEVADA PUBLIC HEALTH LABORATORY (SNPHL)

A. Clinical Testing: Key Updates

1. SNHD Nursing Division Support

SNPHL provides laboratory services to the SNHD Nursing Division, including:

- a) Molecular and microbiological culture testing
- b) Sexually Transmitted Disease (STD) diagnostics

2. STD Surveillance and Testing

SNPHL collaborates with the SNHD STD Department in the following activities:

- a) Participation in the CDC's Gonococcal Isolate Surveillance Project (GISP) and the enhanced GISP (eGISP).
- b) Performing NAAT (Nucleic Acid Amplification Test) and culture testing for *Neisseria gonorrhoeae* isolates, which are submitted to reference laboratories for antimicrobial susceptibility testing.

- c) Participation in eGISP Part B to expand culture-independent testing for antimicrobial resistance genes in gonococcal isolates.
- d) A detailed breakdown of monthly sample volumes provided on the accompanying table (RPR - Rapid Plasma Reagin):

Test Name	Monthly Count	Avg Year to Date
GC Cultures	30	31
NAAT NG/CT	1473	1524
Syphilis	593	712
RPR/RPR Titers*	113/32	121/41
Hepatitis Total	1951	2284
HIV/differentiated	552/13	661/18
HIV RNA	129	119

*= RPR / RPR Titers refer to tests used to screen for and monitor syphilis; RPR = Rapid Plasma Reagin

3. COVID-19 Testing Operations

- a) SARS-CoV-2 PCR testing is performed exclusively on the KingFisher Flex platform exclusively.
- b) SNPHL maintains a testing capacity of 2,000 tests per day, with a turnaround time (TAT) of less than 48 hours.
- c) In December, the average daily testing volume was twelve (12) samples, with an average TAT of 48 hours from collection to report release.
- d) IT enhancements include streamlined patient accession and direct report verification from SNPHL's Laboratory Information Management System (LIMS) into the SNHD patient portal.
- e) High-throughput automation has been incorporated, including the Eppendorf 5073 specimen fluid handling station.

A detailed summary of COVID-19 testing volumes and performance metrics provided in the accompanying table:

Month	# PCR & NAAT/#POS	Month	# PCR & NAAT/#POS
January	471/74	July	280/58
February	656/55	August	156/83
March	630/22	September	146/57

April	195/22	October	121/29
May	141/9	November	71/13
June	190/43	December	239/26

4. Reportable Disease Testing

- a) SNPHL continues routine testing of reportable disease specimens submitted by community stakeholders.
- b) A monthly summary of reportable disease testing provided on the accompanying table:

		Jan	Feb	Mar	Apr	May	Jun	July	Aug	Sep	Oct	Nov	Dec	Total
Campylobacter	Campy ID	9	4	3	2	2	5	6	4	7	7	2	10	61
	Campy Screen	12	8	4	3	6	10	8	6	8	10	7	11	93
Neisseria species	Gonorrhoeae Culture	33	32	47	48	30	33	21	35	33	12	14	30	368
	Gram Stain/WBC	0	5	0	0	0	5	0	0	5	0	0	0	15
	Neisseria ID	2	0	0	0	0	0	0	0	2	0	0	0	4
	Haemophilus ID	0	0	0	0	1	0	0	0	0	0	0	0	1
Unknown ID	Bacterial ID	6	0	8	0	2	0	14	0	0	0	0	0	30
	WGS (PulseNet)	14	12	20	14	26	25	33	21	24	35	25	33	282
Salmonella	Salmonella Screen	3	6	14	13	11	10	18	14	14	18	21	18	160
	Salmonella Serotype	3	7	13	13	9	8	17	10	14	14	18	16	142
Shigella	Shigella Screen	2	5	3	6	4	0	4	3	7	4	4	2	44
	Shigella Serotype	2	4	3	0	1	1	3	3	4	3	1	0	25

STEC	STEC Screen	0	3	3	1	5	4	3	4	4	1	1	4	33
	STEC Serotype	0	0	1	0	1	1	2	3	4	3	1	2	18
Unknown	Stool Culture	1	5	1	4	5	5	0	1	7	0	2	1	32
Vibrio	Vibrio ID	0	0	0	1	0	3	0	0	0	0	0	0	4
	Vibrio Screen	1	0	0	3	0	5	1	1	1	1	0	0	13
Yersinia	Yersinia Culture/ID	1	0	0	2	2	1	0	0	1	0	0	2	9

B. Epidemiological Testing and Consultation - Key Updates:

1. Outbreak Investigation Committee Participation

SNPHL actively participates in the SNHD Outbreak Investigation Committee and the Foodborne Illness Taskforce. There was one (1) gastrointestinal (GI) outbreak sample received for investigation in December.

2. Influenza Surveillance Reporting

SNPHL continues to report influenza testing results to the CDC's National Respiratory and Enteric Virus Surveillance System (NREVSS). In December, SNPHL performed 31 respiratory panel tests using the BioFire platform.

C. Emergency response and reportable disease isolate testing report - Key Activities and Capabilities:

1. Reportable Disease Isolate Testing and Confirmation

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. Whole Genome Sequencing (WGS) Validation

SNPHL is clinically validated to use 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.

3. PulseNet Surveillance

In December 2025, SNPHL performed 33 WGS tests as part of the PulseNet Foodborne Outbreak Surveillance program. PulseNet is a national laboratory network managed by the CDC that connects foodborne illness cases to detect and stop outbreaks early.

4. Bacterial Isolate Screening

Using the Bruker MALDI-TOF instrument for streamlined screening of bacterial isolates. A total identified 206 bacterial organisms in December.

5. SARS-CoV-2 Sequencing

SNPHL is validated for sequencing SARS-CoV-2 and variants of concern, through the identification of lineages and clades.

- a) Current capacity: up to 96 SARS-CoV-2-positive RNA extracts per week
- b) December 2025: 13 SARS-CoV-2-positive RNA extracts sequenced.

6. Legionella Surveillance

SNPHL collaborates with Environmental Health and Veritas Labs for Legionella surveillance. Monthly isolate counts for 2025 are as follows:

2025	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Legionella	3	22	0	26	62	45	33	22	61	46	11	31

7. Vector-Borne Disease Testing

SNPHL provides viral testing for Zika, West Nile Virus (WNV), Western Equine Encephalitis, and Saint Louis Encephalitis.

- a) No mosquito pool samples were tested in December.
- b) In December no WNV-positive mosquito pool was identified.
- c) Results were communicated to Environmental Health and subsequently released to the public.

8. Gonococcal Isolation Surveillance Program (GISP/eGISP)

In December, SNPHL collected eleven (11) clinical isolates:

- a) *Neisseria gonorrhoeae*: four (4) isolates
- b) *Neisseria meningitidis*: one (1) isolate

These will be sent to regional labs or the CDC for antimicrobial susceptibility testing (AST). Remnant NAATs (NAAT - Nucleic Acid Amplification Test) or *N. gonorrhoeae* samples will be submitted to the CDC for molecular-based AST under eGISP Part B.

9. C. auris PCR Screening

SNPHL performed 1,443 Real-Time PCR screenings for *Candida auris* in December 2025.

D. All-Hazards Preparedness:

1. Coordination with First Responder Training

SNPHL collaborates on training and exercises with first responder agencies including the Civil Support Team, HazMat units, the Federal Bureau of Investigation (FBI), and the Las Vegas Metropolitan Police Department.

2. Laboratory Packaging and Shipping Guidance

SNPHL offers guidance to local laboratorians on CDC protocols for packaging and shipping infectious substances, including chain of custody procedures.

3. Onsite Training for Long-Term Care Facilities

SNPHL provided onsite training for long-term care facilities on the use of COVID-19 online ordering applications.

4. Monkeypox Biosafety Guidance

Biosafety guidance was supplied to sentinel sites in response to Monkeypox surveillance and containment efforts.

5. Vaccination Support for Laboratory Staff

SNPHL facilitated Monkeypox and bivalent COVID-19 booster vaccinations for laboratory personnel.

6. Ongoing Biosafety Training for SNPHL Staff

The laboratory continues to provide perpetual biosafety training and updated guidance to SNPHL personnel.

7. Training After Equipment Upgrade

SNPHL will provide training for all BSL-3 staff after installing the double door autoclave and fixing the leaking problem in December 2025.

E. December 2025 SNPHL Activity Highlights:

1. COVID-19 Testing Supplies and Reagent Forecast

SNPHL has maintained a consistent supply of Viral Transport Medium (VTM) for COVID-19 collection kits, even following the cessation of ELC COVID funding.

2. Proficiency Testing Performance

SNPHL achieved 100% proficiency across a wide range of tests, including:

- a) WSLH 6310 C. auris Detection LN15-B Hemoglobin Automated Diff Series
- b) CAP MVP-C 2025 Molecular Vaginal Panel and CAP IDR-C Infectious Disease
- c) Respiratory BIOFIRE

3. Facility Infrastructure and Equipment Calibration

Phoenix Controls completed system integration adjustments for the installation of the onsite monitor computer and network connection on the 2nd floor. This enables facility staff and Sunbelt Control employees to manage and modify the airflow, pressure, and temperature remotely or onsite.

4. Genomic Surveillance – SARS-CoV-2

WGS and genomic data analysis indicate that the Omicron variant XFG lineage was the dominant strain among samples received in December. SNPHL will continue sequencing close-contact samples to support ongoing investigations by the Office of Disease Surveillance (ODS).

5. Influenza Surveillance

Early data from the new influenza season show that A/H3, A/H1, and B/Victoria are the predominant subtypes of influenza.

6. Avian Influenza Surveillance

SNPHL participates in the CDC's Avian Influenza Surveillance Project by distributing testing guidance and specimen collection procedures to local hospitals via the Health Alert Network

(HAN). Any ICU patients testing positive for Influenza A are required to submit specimens for subtyping to rule out avian influenza. No suspect avian flu samples were received in December.

7. Facility Expansion Planning

Phase I of the new facility design may focus on constructing BSL-3 and microbiology laboratories on the 2nd floor, with a semi-shell layout planned for the 1st floor.

8. Expanded Clinical Testing Services

New test offerings in clinical chemistry, hematology, and urinalysis have formally opened for service for FQHC and DPP division. The SNPHL website of test menu has been updated and added those new additional tests.

9. BSL-3 Equipment Services

Provide the BSL-3 equipment's list of purchases for the new BSL-3 lab.

F. COMMUNITY HEALTH – SNPHL – Calendar Year Data

December SNPHL Services	2024	2025
Clinical Testing Services ¹	5,090	5,545
Epidemiology Services ²	351	392
State Branch Public Health Laboratory Services ³	0	0
All-Hazards Preparedness Services ⁴	4	4
Environmental Health Services ⁵	17	31

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.