



# Memorandum

**Date:** April 25, 2024

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

**From:** **Maria Azzarelli**, *Acting Director of Community Health* *MA*  
**Cassius Lockett, PhD**, *Deputy District Health Officer-Operations* *CL*  
**Fermin Leguen, MD, MPH**, *District Health Officer* *FL*

---

**Subject:** Community Health Division Monthly Activity Report – March 2024

---

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

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

The CDPP staff organized Heart Month activities in February. Nearly 500 people were reached through various activities and screenings including a 'Go Red for Women' screening event at the Beautiful Studio, participation in three (3) community blood pressure (BP) screenings, participating as a guest on the Healthier Tomorrow radio program, advertisements on women's health for the Delta Sigma Theta Sorority's annual Founder Day program, and ongoing BP screenings, education, and referrals at all BSHOP/BeSHOP locations.

CDPP staff completed three (3) community Diabetes Self-Management Education & Support (DSMES) classes in February, including classes in Spanish and English, in person and online. Twenty-three people participated in the classes and 74% of participants completed the class. In addition, CDPP provided training for the SNHD Clinical Services RD to complete the DSMES curriculum training. They will be integrating DSMES curriculum into their 1:1 clinical interaction with clients who have diabetes.

Our CDPP staff hosted an in-person meeting of the Partners for a Healthy Nevada coalition in February. Forty-one people attended the meeting in person with another five (5) participating online. Presentations included information about the RTC's Areas of Persistent Poverty grant and UNLV's EARN-FS grant.

As part of the REACH grant, RTC met with the After Market, a CDPP partner and implementation site for the Double Up Food Bucks (DUFb) program to assess transportation-related barriers and

opportunities to increase access to the After Market and DUFB program. The following ideas were discussed: adding EV charging stations, a shuttle service connecting the After Market to surrounding neighborhoods, addition of trees and shade structures along streets and sidewalks leading to the After Market, and improved bus stops with better lighting, seating, and shade. RTC is currently pulling data to understand how customers are currently accessing the After Market (walking, biking, transit, etc.). Findings will be included in the landscape assessment required by the REACH grant. Additional assessment work will begin in the fall.

The CDPP CHWs participated in two (2) health fairs at: (1) The James Down Towers Senior Apartments and (2) the Heritage Senior Center in February. The CHWs provided diabetes class flyers and signed up interested people in our DSMES classes. Approximately 200 people participated in the health fairs.

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

TCP staff have worked to advance tobacco free campus policy discussions with College Southern Nevada and Nevada State University. Meetings with faculty, student government, and campus organizations have occurred.

Our TCP staff distributed culturally competent educational materials aimed at increasing awareness, preventing the initiation of tobacco use, and promoting the Because We Matter brand and Nevada Quitline cessation services to attendees at Spring Preserve's Black History Month Festival, Rainbow Dreams Educational Foundation's Black History Month awards gala (A Night In Harlem), TLMBC's Go Red For Women event, and the collaborative community Black History event, Shades of The Black Experience.

As part of smoke-free multi-unit housing efforts, staff attended a Market Trends event hosted by the Nevada State Apartment Association. 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 connect with managers and owners to promote the smoke-free policy during breaks. The event had over 350 attendees and over 22 property management companies were represented.

The tobacco-free multi-unit housing webpage located on the Get Healthy Clark County site is currently being redesigned to include more user-friendly features. The new features will allow users to search properties based on location with a map view. It will also include filters and highlight properties that have a comprehensive smoke-free policy. The online housing directory totals 62,012 smoke-free units. Staff continues to work on obtaining updated information on properties to keep data on current master list up to date.

In February, 20 businesses in Clark County implemented and/or expanded their smoke and vape free policy. Staff provided technical assistance with policy recommendations as well as signage upon request.

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

**A. 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 working on proposed revisions to the Clark County EMS Emergency Medical Care Protocols.

**B. OEMSTS – March 2023 / 2024 Data**

EMS Statistics	March 2023	March 2024	
Total certificates issued	921	724	↓
New licenses issued	57	102	↑
Renewal licenses issued (recert only)	855	616	↓
Driver Only	33	41	↑
Active Certifications: EMT	853	877	↑
Active Certifications: Advanced EMT	1640	1831	↑
Active Certifications: Paramedic	1916	2016	↑
Active Certifications: RN	70	70	=

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

**A. Planning and Preparedness**

1. Continuance of drafting the Shelter Support Annex and Administrative Preparedness Annex.
2. Planners continue to review and revise the CHEMPACK, Nuclear and Radiation, Administrative Preparedness, Mass Care Support, and Highly Infectious Disease plans. Met with Human Resources to discuss staffing and activation triggers for preparedness annex.
3. Planner updates to Threat Response Guides for Anthrax, Plague, and Tularemia, Botulism, and Viral Hemorrhagic Fever (VHF). The VHF TRG was sent to subject matter experts within the District for review.
4. Assistance provided to revisions of COVID-19 AAR.
5. Planners continue to update Nevada Continuity tool in order to streamline the process of generating a usable Continuity of Operations Plan (COOP).

6. Senior Planner and Planner I continue to transition closed POD program management to Planner I. Coordinating the setup of the Closed POD Working Group with the LVCVA and Boyd Gaming as Co-Chairs.
7. Eighteen SNHD employees were fit tested for personal protective equipment.
8. OPHP staff are participating in the various working groups to develop the state DPBH Strategic Plan.
9. Senior Planner conducted the Jurisdictional Risk Assessment for southern Nevada.
10. Planner I participated in EOP review for Faith Lutheran Jr./Sr. High School.
11. Planner I participated in State of Nevada Department of Education EOP Working Group.
12. Received and processed requests for HPP grant funding of emergency response equipment (City of NLV FD, Mountain View Hospital, Summerlin Hospital).
13. Senior Planner continued to review *Aedes aegypti* Invasive Mosquito Plan and Community Reception Center Plan.

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

1. OPHP Staff attended the National Association of County and City Health Officials (NACCHO) Preparedness Summit March 25<sup>th</sup> – 28<sup>th</sup>. The OPHP Supervisor presented with the Clark County Emergency Manager on collaborative planning for events.
2. Continued work with Clark County and a software developer on an Impacted Persons Database.
3. Extending work on reviewing and revising plans, threat response guides, and planning for exercises coming up in the next few months.
4. Participation in work groups to develop the State Department of Public and Behavioral Health, Public Health Preparedness 5-year Strategic Plan.
5. Trainers continue to develop Position Specific Task Books and related training curricula. Operations Section Chief Position Specific Training completed on March 27<sup>th</sup> for 17 SNHD staff. Invites sent for Logistics Section Chief Training on April 25<sup>th</sup>.
6. A New Hire Orientation for Emergency Preparedness and Security was provided on March 20<sup>th</sup>, for 17 SNHD new employees.
7. Trainers continue to coordinate registration of ICS 300 course at Decatur campus April 16<sup>th</sup> – 18<sup>th</sup> for recent SNHD staff identified on the Emergency Personnel List. The course is listed on the state training website.
8. Three (3) SNHD employees participated in CPR Training
9. Planning efforts are being coordinated for the upcoming recovery workshop.
10. Trainers provided ICS 300 training to community partners at the City of North Las Vegas Fire Administration Office on March 5<sup>th</sup> - 7<sup>th</sup>.
11. Planner I participated in FEMA Exercise Evaluation and Improvement Planning training.
12. Senior Planner and Planner I coordinated with Environmental Health, SNPHL, and EPA on exercise development for the EPA Water Laboratory Alliance Advanced Practice full scale exercise.

13. COOP tool training has been provided by Planners to Managers, Supervisors, and those delegated to update each Division, Department and Program at the SNHD.
14. Planner I attended integration of Access and Functional Needs (AFN) in Emergency Management training held by State of Nevada AFN Coordinator.
15. Planner I continued to coordinate Point of Dispensing (POD) setup/takedown drill with CCSD.
16. Planner I continued to plan for May 9<sup>th</sup> SNHD COOP tabletop exercise.

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

1. SNHPC meeting was held on March 7<sup>th</sup>. The next meeting is scheduled for May 2<sup>nd</sup>.
2. The Pediatric Surge Annex was approved at the March 7<sup>th</sup> SNHPC meeting.
3. SNHPC Clinical Advisor and OPHP Planner conducted a Pediatric Surge tabletop with pediatric hospitals on March 14<sup>th</sup>.
4. SNHPC Clinical Advisor and OPHP Planner continued planning for April 18<sup>th</sup> Pediatric Surge tabletop and medical response surge exercise for all hospitals.
5. Trainer confirmed First Receiver Decontamination training with Mtn View Tenaya Hospital on June 26<sup>th</sup> and UMC Hospitals on August 14<sup>th</sup>.
6. Trainer continues to promote and manage upcoming TEEX Pediatric Disaster Response & Emergency Preparedness course May 7<sup>th</sup> - 8<sup>th</sup>, 2024.
7. Trainer coordinating return of the following courses to Las Vegas; TEEX Medical Preparedness & Response to Bombing Incidents, TEEX Medical Management of CBRNE Events and Radiological Training for Hospital Personnel.

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

1. Currently recruiting for a new Public Health Analyst.

**E. Grants and Administration:**

1. OPHP is awaiting carryover subawards for PHEP and CRI grants and an amendment to the current CRI budget.
2. New Senior Administrative Assistant started March 18<sup>th</sup>.
3. OPHP is recruiting a Public Health Fusion Center Analyst.
4. OPHP received the Notice of Funding Opportunity and Scope of Work templates for the PHEP and CRI grants for budget period 1 of the new cooperative agreement which begins on July 1<sup>st</sup>.

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

1. MRC Coordinator planned training and activities for upcoming months, sent out newsletters, and continues to recruit and deactivate volunteers.

2. MRC Coordinator attended monthly NACCHO MRC Workgroup meeting and SNHPC meetings and the quarterly SERV-NV Partners meeting. Attended the national MRC Virtual Townhall.
3. Two MRC Volunteers provided blood pressure screening at the Las Vegas Convention Center job for March 8<sup>th</sup>.

**MRC Volunteer Hours FY2024 Q3**

(Economic impact rates updated August 2023):

Activity	January	February	March
Preparedness Exercise	27	0	0
Community Event/BP	0	0	13
SNHD Clinic	4.5	0	0
<b>Total Hours</b>	<b>27</b>	<b>0</b>	<b>13</b>
<b>Economic impact</b>	<b>\$858.60</b>	<b>0</b>	<b>\$578.63</b>

**IV. VITAL RECORDS**

- A. March 2024 is currently showing a 19% decrease in birth certificate sales in comparison to March 2023. Death certificate sales currently showing a 6% decrease in comparison to March 2023. SNHD received revenues of \$35,139 for birth registrations, \$23,998 for death registrations; and an additional \$8,339 in miscellaneous fees.

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

Vital Statistics Services	Mar 2023	Mar 2024		FY 22-23 (Mar)	FY 23-24 (Mar)	
<b>Births Registered</b>	1,832	1,901	↑	17,386	18,147	↑
<b>Deaths Registered</b>	1,979	1,730	↓	16,089	15,778	↓
<b>Fetal Deaths Registered</b>	17	20	↑	148	156	↑

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

Vital Statistics Services	Mar 2023	Mar 2024		FY 22-23 (Mar)	FY 23-24 (Mar)	
Birth Certificates Sold (walk-in)	8	42	↑	326	502	↑
Birth Certificates Mail	177	117	↓	1,091	1,145	↑
Birth Certificates Online Orders	4,595	3,711	↓	33,737	31,838	↓
Birth Certificates Billed	139	95	↓	1,023	998	↓
<b>Birth Certificates Number of Total Sales</b>	<b>4,919</b>	<b>3,965</b>	<b>↑</b>	<b>36,177</b>	<b>34,483</b>	<b>↓</b>
Death Certificates Sold (walk-in)	23	33	↑	149	315	↑

Death Certificates Mail	226	122	↓	1,473	1,331	↓
Death Certificates Online Orders	8,695	8,189	↓	73,902	68,506	↓
Death Certificates Billed	49	29	↓	313	322	↑
<b>Death Certificates Number of Total Sales</b>	<b>8,993</b>	<b>8,373</b>	<b>↓</b>	<b>75,837</b>	<b>70,474</b>	<b>↓</b>

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

<b>Vital Statistics Sales by Source</b>	<b>Mar 2023</b>	<b>Mar 2024</b>		<b>FY 22-23 (Mar)</b>	<b>FY 23-24 (Mar)</b>	
Birth Certificates Sold Valley View (walk-in)	.2%	1.1%	↑	.9%	1.5%	↑
Birth Certificates Mail	3.6%	3%	↓	3%	3.3%	↑
Birth Certificates Online Orders	93.4%	93.6%	↑	93.3%	92.3%	↓
Birth Certificates Billed	2.8%	2.4%	↓	2.8%	2.9%	↑
Death Certificates Sold Valley View (walk-in)	.3%	.4%	↑	.2%	.4%	↑
Death Certificates Mail	2.5%	1.5%	↓	1.9%	1.9%	
Death Certificates Online Orders	96.7%	97.8%	↑	97.4%	97.2%	↓
Death Certificates Billed	.5%	.3%	↓	.4%	.5%	↑

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

<b>Revenue</b>	<b>Mar 2023</b>	<b>Mar 2024</b>		<b>FY 22-23 (Mar)</b>	<b>FY 23-24 (Mar)</b>	
<b>Birth Certificates (\$25)</b>	\$122,975	\$99,125	↓	\$904,425	\$862,075	↓
<b>Death Certificates (\$25)</b>	\$224,825	\$209,325	↓	\$1,895,925	\$1,761,850	↓
<b>Births Registrations (\$13)</b>	\$45,435	\$35,139	↓	\$337,181	\$298,090	↓
<b>Deaths Registrations (\$13)</b>	\$24,817	\$23,998	↓	\$210,483	\$203,268	↓
<b>Convenience Fee (\$2)</b>	\$9,648	\$7,822	↓	\$72,434	\$65,348	↓
<b>Miscellaneous Admin</b>	\$869	\$517	↓	\$5,914	\$5,900	↓
<b>Total Vital Records Revenue</b>	<b>\$428,569</b>	<b>\$375,926</b>	<b>↑</b>	<b>\$3,426,362</b>	<b>\$3,196,531</b>	<b>↓</b>

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

**B. PASSPORT SERVICES** – Passport Services is appointment only. Passport photos remain suspended.

<b>Applications</b>	<b>Mar 2023</b>	<b>Mar 2024</b>		<b>FY 22-23 (Mar)</b>	<b>FY 23-24 (Mar)</b>	
Passport Applications	998	722	↓	6,916	5,830	↓

  

<b>Revenue</b>	<b>Mar 2023</b>	<b>Mar 2024</b>		<b>FY 22-23 (Mar)</b>	<b>FY 23-24 (Mar)</b>	
Passport Execution/Acceptance fee (\$35)	\$34,930	\$25,270	↓	\$242,060	\$204,050	↓

**V. HEALTH EQUITY**

- A. The Health Equity program received a No Cost Extension from the Center for Disease Control to build, leverage, and expand infrastructure support for COVID prevention and control among populations that are at higher risk and underserved.
  - 1. The program continues to collaborate with SNHD programs and grant subrecipients to plan and coordinate COVID community strategies and events.
- B. The Health Equity Program works towards 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.

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

**A. Clinical Testing:**

- 1. The SNHD Nursing Division: molecular and microbiology culture, Sexually Transmitted Disease (STD) testing.
- 2. SNHD STD department: the CDC Gonococcal Isolate Surveillance Project (GISP) as well as enhanced Gonococcal Isolate Surveillance Project (eGISP). SNPHL performs NAAT and culture testing of *N. gonorrhoeae* isolates and submits isolates to a reference laboratory for the determination of antibiotic susceptibility patterns. SNPHL has also joined eGISP Part B to expand culture-independent testing for antimicrobial resistance genes of gonococcal isolates.
- 3. A total monthly samples tested is listed in the following table:

Test Name	Monthly Count	Avg Year to Date
GC Cultures	47	60
NAAT NG/CT	1168	1185
Syphilis	868	889
RPR/RPR Titers	161/71	154/77
Hepatitis Total	956	1054
HIV/differentiated	595/19	632/20
HIV RNA	76	91





Neisseria species	Gonorrhoeae Culture	48	85	47															180
	Gram Stain/WBC	0	0	0															5
	Neisseria ID	0	0	0															0
	Haemophilus ID	7	0	2															2
Unknown ID	Bacterial ID	0	0	0															0
	WGS (PulseNet)	27	24	16															67
Salmonella	Salmonella Screen	14	10	12															36
	Salmonella Serotype	13	10	12															35
Shigella	Shigella Screen	10	10	4															24
	Shigella Serotype	7	10	2															19
STEC	STEC Screen	10	2	2															14
	STEC Serotype	1	1	1															3
Unknown	Stool Culture	5	6	2															13
Vibrio	Vibrio ID	0	0	1															1
	Vibrio Screen	0	0	1															1
Yersinia	Yersinia Culture/ID	1	2	1															3

**B. Epidemiological Testing and Consultation:**

1. SNPHL participates in the SNHD Outbreak Investigation Committee and Foodborne Illness Taskforce. There was one (1) case 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 30 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.

2024	Jan	Feb	Mar	Apr	May	Jun	July	Aug	Sep	Oct	Nov	Dec
Select Agent Rule out (total PCR)	0	0	1									

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 16 Whole Genome Sequencing tests (WGS) as part of PulseNet Foodborne Outbreak Surveillance in March 2024.
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 192 SARS-CoV-2-positive RNA extracts per week with expectations of increasing this capacity with appropriate staffing, instrumentation, and method development. As of March 2024, SNPHL has sequenced 30 SARS-CoV-2-positive RNA extracts.

8. SNPHL is clinically validated 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.
9. SNPHL coordinates and participates with Environmental Health and Veritas Labs for Legionella surveillance.

2024	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Legionella	29	6	13									

10. 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 mosquito pool samples. There was no 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.
11. As part of the Gonococcal Isolation Surveillance Program (GISP) and enhanced GISP (eGISP), in March, a total of 47 clinical isolates, Neisseria gonorrhoeae ten (10) isolates and Neisseria meningitidis seven (7) isolates, 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.

**D. All-Hazards Preparedness:**

1. 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. 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. Perpetuated Biosafety Training and guidance to SNPHL personnel.

**E. March 2024 SNPHL Activity Highlights:**

1. SNPHL has a stable CDC supply of Viral Transport Medium (VTM) used in COVID collection kits.
2. Passed the CAP MVP, CAP Infectious Disease, Resp, Biofire Respiratory Virus panel, CAP SARS-CoV-2, CAP MEGN proficiency test in March 2024.
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 clinical chemistry instrument is under review in the Contract Office now.
4. The validation report of warrior panel has been completed in the Emergency Response laboratory.
5. According to the WGS and genomic data analysis, the Omicron variant JN.1., lineages are domain lineages, 80% respectively, in March, from the samples received in the laboratory. Our laboratory will keep sequencing the closed contact samples to help ODS to follow up on the investigation.
6. Identified zero Monkeypox positive test result in March 2024. The Whole Genome sequencing of March Monkeypox Positive samples has been completed. The clade for this case is IIb and the lineage is B.1.20 for three (3) sequencing data analyses.
7. According to the data of influenza surveillance in this flu season, the A/H3 and A/H1 are major subtypes of influenza and the percentage of ratio between three (3) subtypes are 53%, 21%, and 26%, respectively.
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 in order to rule out avian influenza.
9. SNPHL has validated the RSV subtyping method using PCR method and will share the data of environmental surveillance with CDC.
10. The document of the Shell and Core Basis of Design has been signed by Chief of Facilities Officer and Laboratory Director. The total number of SF for the new lab will be 12,600sf.

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

March SNPHL Services	2023	2024	
Clinical Testing Services <sup>1</sup>	5,308	4,497	↓
Epidemiology Services <sup>2</sup>	2,554	944	↓
State Branch Public Health Laboratory Services <sup>3</sup>	4,602	48	↓
All-Hazards Preparedness Services <sup>4</sup>	7	8	↑
Environmental Health Services <sup>5</sup>	0	13	↑

<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.