



# Memorandum

**Date:** March 28, 2019

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

**From:** **Michael Johnson, PhD**, *Director of Community Health* MJ  
**Joseph P Iser, MD, DrPH, MSc**, *Chief Health Officer* JPI

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**Subject:** Community Health Division Monthly Report

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

### 1. Tobacco Control Program (TCP):

In January, UMC confirmed that electronic referral from UMC to the Nevada Tobacco Quitline is now live. This means that once screened for tobacco use, UMC patient information is extracted for the patient electronic health record and sent via direct message to the Quitline. The Quitline then contacts the patient and offers comprehensive cessation services free of charge.

A media plan to address cessation directed at African Americans and Hispanic populations has been developed and is currently running. The media buy consists of radio ads on stations that have high African American and Hispanic listenership with tailored scripts for these populations being run. Digital ads in English and Spanish were developed and are running as well as 2 E-Blasts targeted at those who had expressed an interest in smoking.

Staff participated in the first nationwide LGBT Cancer Network Klatch. The Klatch is an invitation only workgroup of tobacco control experts who share strategies and outreach efforts when working with the LGBTQ community.

Staff participates on the Nevada Department of Education's Health Curriculum Standards Development Panel. The panel's goal is to set statewide standards that all educators in Nevada should be teaching. These health topics include but are not limited to tobacco use, nutrition, physical activity, mental health, reproductive health, etc. Once adopted the standards should be executable for 7-10 years.

### 2. Chronic Disease Prevention Program (CDPP):

In January, the CDPP launched our new program, Slam Dunk Health. The program is in partnership with the Las Vegas Aces WNBA team and the Clark County School District (CCSD) and encourages kids in grades 1<sup>st</sup> – 5<sup>th</sup> to be physically active and eat fruits and vegetables. The program will run through the end of April. To date, participation in the program includes 13,315 students in over 568 classrooms in 98 CCSD elementary schools.

In January CDPD staff provided two (2) two-hour Diabetes Self- Management Education (DSME) workshops using the Journey for Control Diabetes Conversational Maps evidence-based curriculum. The workshops were provided at SNHD and the YMCA. A total of 12 people attended the workshops. Pre-surveys were distributed and collected. Participants will be invited to attend a second DSME workshop in the future to complete the series.

CDPD staff is working with UNLV to develop nutrition standards, increase utilization and healthier options at the UNLV Food Pantry. In January, staff conducted an assessment at the UNLV Food Pantry using the Healthy Food Pantry Assessment Tool. Results will be shared with the UNLV Food Pantry's director in February. Also, in January, ads in the UNLV Scarlet and Gray Free Press began running to promote two 100% healthy vending snack machines that have been installed at the UNLV Student Union and the Student Recreation and Wellness Center. Snacks in these vending machines align with First Class Vending's "Well Within Reach" nutrition guidelines.

In January, CDPD staff presented to the Advisory Council on the State Program for Wellness and Prevention of Chronic Disease on our efforts to support school wellness and the establishment of the Partners for a Healthy Nevada (PHN) coalition's School Wellness Task Force.

**II. OFFICE OF EPIDEMIOLOGY AND DISEASE SURVEILLANCE (OEDS)**

**a. Surveillance and Investigations:**

**Community Health -- OEDS -- Fiscal Year Data**

	Jan 2018	Feb 2018		FY17-18 (Jul- June)	FY18-19 (Jul- June)	
<b>Morbidity Surveillance</b>						
Chlamydia	1,064	974	↓	8,561	9,036	↑
Gonorrhea	381	331	↓	3,288	3,559	↑
Primary Syphilis	12	12	→	125	149	↑
Secondary Syphilis	30	6	↓	261	205	↓
Early Non-Primary, Non-Secondary <sup>1</sup>	35	12	↓	299	279	↓
Syphilis Unknown Duration or Late <sup>2</sup>	49	20	↓	386	414	↑
Congenital Syphilis (presumptive)	1	0	↓	11	16	↑
New Active TB Cases Counted - Pediatric	0	0	→	0	2	↑
Number of TB Active Cases Counted - Adult	2	2	→	43	30	↓

<sup>1</sup> Early Non-Primary, Non-primary, Non-Secondary=CDC changed the case definition from early Latent Syphilis to Early Non-Primary, Non-Secondary

<sup>2</sup> Syphilis Unknown Duration or Late=CDC changed the case definition from Late Latent Syphilis to Syphilis Unknown Duration or Late

**Community Health -- OEDS -- Fiscal Year Data**

	Feb 2018	Feb 2018		FY17-18 (Jul- June)	FY18-19 (Jul- June)	
<b>Moms and Babies Surveillance</b>						
HIV Pregnant Cases	3	1	↓	28	22	↓
Syphilis Pregnant Cases	14	10	↓	66	95	↑

Perinatally Exposed to HIV

0	1	↑	28	19	↓
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**Community Health – OEDS – Monthly Data**

Monthly DIIS Investigations CT/GC/Syphilis/HIV	Contacts	Clusters <sup>1</sup>	Reactors/ Symptomatic/ X-ray <sup>2</sup>	OOJ /FUP <sup>3</sup>
Chlamydia	26	0	46	0
Gonorrhea	24	1	79	1
Syphilis	75	10	97	1
HIV/AIDS (New to Care/Returning to Care)	18	0	35	50
Tuberculosis	47	0	22	4
<b>TOTAL</b>	<b>190</b>	<b>11</b>	<b>279</b>	<b>56</b>

**1. Prevention-Community Outreach/Provider Outreach and Education:**

In February the OEDS office coordinated National Black HIV/AIDS Awareness Day testing events within the Sexual Health Clinic. Testing was promoted to those who have put themselves at risk for HIV and needed testing. SNHD OEDS also worked with The Center to help promote their testing efforts and with the Southern Nevada HIV Consortium group for their event held on February 9<sup>th</sup> at Lorenzi Park Community Center. Partners came together for this year's National Black HIV/AIDS Awareness Day with the theme "Together for Love, Stop HIV Stigma." The African American community continues to be disproportionately impacted by HIV/AIDS. According to the Centers for Disease Control and Prevention (CDC), in 2017 African Americans accounted for 43 percent of HIV diagnoses in the United States; more than half of those were among gay or bisexual men. In addition, 47 percent of people who received an AIDS diagnosis in 2016 were African American.

OEDS participated in -

**A. High Impact Screening Sites (HIV, STD, Hepatitis):**

- a. Mondays – Thursdays: The Center - LGBTQ Community of Nevada – Rapid HIV; Target population - MSM, transgender.
- b. Mondays and Wednesdays: Trac-B Exchange - Rapid HIV and Hepatitis C testing; target population - IDU.
- c. Express testing services in the Sexual Health Clinic - Rapid HIV, Syphilis, Gonorrhea, and Chlamydia testing - Target population-all.
- d. 02/25 - Harm Reduction Outreach with community partners - HIV/HCV testing, distribution of Sterile syringes, Needle Recovery, Naloxone, Homeless services.

<sup>1</sup> Clusters= Investigations initiated on named clusters (clusters= named contacts who are not sex or needle sharing partners to the index patient)

<sup>2</sup> Reactors/Symptomatic/X-Ray= Investigations initiated from positive labs, reported symptoms or chest X-Ray referrals

<sup>3</sup> OOJ= Investigations initiated Out of Jurisdiction reactors/partners/clusters; FUP= Investigations initiated to follow up on previous reactors, partners, or clusters

Target population - Homeless, IDU.

- e. Harm Reduction monthly Outreach event with community partners AHF, HELP of SO. NV, TRACB and SNHD/OEDS.

**B. Staff Facilitated/Attended Training/Presentations**

- a. 02/01 - SNHD OEDS staff offered Insti Training to The Center staff. The Center staff requested training so that additional methods of POC testing could be offered to the community. 4 people from The Center participated in the training.
- b. 2/02 - Presentation HIV/STI 101 for Rape Crisis Center Las Vegas. Approximately 10 advocates in training and 1 staff were in attendance.
- c. 2/04 - SoNV Harm Reduction Alliance- Education subcommittee meeting-1 OEDS staff attended.
- d. 02/05 - Network Provider Recruitment event sponsored by Desert Rose Health; 3 OEDS staff in attendance.
- e. 02/06 - HCV/Harm Reduction/Overdose Prevention training - facilitated by OEDS with 6 OEDS/SNHD staff in attendance.
- f. 2/08 - Presentation on *Fundamentals of HIV for A New Way* - Behavioral Health LLC, Las Vegas, NV. Approximately 14 staff in attendance and 1 representative from OEDS.
- g. 02/09 - Presentation of "HIV/STIs in Nevada" for First Offender Program (FOPP) at the Regional Justice Center. Approximately 2 court ordered participants in attendance as well 1 representative from both METRO and City of Las Vegas Alternative Sentencing Program.
- h. 02/11 - "There is No Hero in Heroin" event - SNHD conducted Harm Reduction trainings and outreach for community members; 22 people attended this training.
- i. 2/12-2/14 - HIV Rapid Testing Training, Counseling and Safety Certification at Washoe County Health District (Reno, NV) provided by SNHD staff. 10 participants in attendance from Rural Nevada Counseling, Washoe County Health Department, Ridge House, and New Frontier Treatment Center.
- j. 02/14 - Opioid Advisory Council Steering Committee Meeting - 1 OEDS staff attended and coordinated. Community members included LVMPD, Chamberlain

College, HIDTA, PACT, Central Recovery, Centers for Behavioral Health, Silver State Health.

- k. 02/19 - Las Vegas Metropolitan Dept. Homeless Compstat; 5 OEDS staff attended.
- l. 02/20 - Nevada Homeless Alliance provider meeting; 1 OEDS attended.
- m. 2/27 - Ryan White Part A Planning Council Meeting; 1 OEDS staff in attendance. Other representatives include SNHD Clinical Services, Golden Rainbow, Community Counseling Center, UMC Wellness and community representatives.
- n. OEDS staff attended the PulseNet/OutbreakNet Joint Regional Mountain West meeting held in San Diego, CA from 02/05-02/07.

**Community Health -- OEDS -- Fiscal Year Data**

	Feb 2018	Feb 2019		FY17-18 (Jul- June)	FY18-19 (Jul- June)	
Prevention - SNHD HIV Testing						
Outreach/Targeted Testing	685	233	↓	6,303	5,248	↓
Clinic Screening (SHC/FPC/TB)	469	516	↑	5,219	4,024	↓
Outreach Screening (Jails, SAPTA)	74	232	↑	887	1241	↑
<b>TOTAL</b>	<b>1,228</b>	<b>981</b>	<b>↓</b>	<b>12,409</b>	<b>10,513</b>	<b>↓</b>
Outreach/Targeted Testing POSITIVE				85	71	↓
Clinic Screening (SHC/FPC/TB) POSITIVE				42	39	↓
Outreach Screening (Jails, SAPTA) POSITIVE				14	12	↓
<b>TOTAL POSITIVES</b>				<b>141</b>	<b>122</b>	<b>↓</b>

**2. Disease and Outbreak Investigations**

**A. Disease reports and updates:**

- a. **Ricin Incident Reported:** SNHD was notified of a potential ricin exposure on 02/19/19. Caster beans and acetone were identified in a private residence. The Southern Nevada Public Health Laboratory and the CDC had confirmed that the substance tested positive for the toxin ricin. SNHD assisted multiple agencies in this investigation and ensured that exposed persons have been identified and evaluated. First responders and coroner's office personnel who were potentially exposed have been medically evaluated, and none of the potentially exposed individuals had any signs of ricin poisoning. People who have been exposed to ricin poison usually show signs as early as 4 hours after exposure or rarely as late as 24 hours later. Based on the investigation thus far, we do not believe there is risk to the general public, and this investigation is in its final stages before closure.
- b. **Acute Flaccid Myelitis:** OEDS investigated a fourth suspect AFM case. Specimens were collected and shipped to CDC for AFM testing. The CDC classification for this person is pending. In 2018, OEDS had investigated three potential AFM cases, and to date, Clark County has had only one case of confirmed AFM.

- c. ***Influenza Surveillance:*** Influenza activity remains elevated locally and nationally. In the state of Nevada, the geographic spread of influenza was widespread. In Clark County, for the season, as of 2/16/2019, 499 influenza-associated hospitalizations and 15 influenza-associated deaths were reported. Three reported deaths occurred in children under age 18. Influenza A was the dominant type circulating. Southern Nevada Health District will continue to update the public on the progression of the season and encourage influenza vaccination for all persons 6 months of age and older.
- d. ***Hand, Foot, and Mouth Disease (HFMD) Outbreak at a local Private Elementary School:*** On January 17, OEDS received a report from a parent whose child was diagnosed with HFMD at the school's daycare. According to the parent, there were other ill kids as well. EH was notified, which conducted a site visit and inspection. Numerous violations were found. OEDS contacted the school which stated there were 5 ill kids, all from the same room and age group. No other illnesses have been reported to date. This investigation is now closed.
- e. ***Norovirus Cluster Among Infants at a Local Hospital:*** On February 1, an investigation was started on an infant that tested positive for Norovirus at a local hospital. The investigation indicated that the case may have been infected while at the hospital. The investigation revealed that there were two other cases in the same area of the hospital diagnosed with norovirus. NDPBH was notified and began their own investigation. Hospital management met, the area was disinfected, and visitor rules were modified. SNHD's investigation is now closed.

**B. Non-communicable Reports and updates:**

- a. **Narcan training:** The Substance Abuse and Mental Health Services Administration (SAMHSA) Center for Substance Abuse Prevention (CSAP) awarded SNHD with the First Responders-Comprehensive Addiction and Recovery Act (FR-CARA) grant in September of 2017. The purpose of this 4-year FR-CARA grant is to train and distribute naloxone to first responders and members of other key community sectors throughout Nevada to better respond to the large-scale burden of opioid overdoses. Trainings continue in Nye County communities, Tonopah, and numerous first responder, medical, and treatment organizations.

The following Narcan/overdose trainings have been conducted in the month of February:

- 2/6/19: SNHD staff (6 people trained, 0 kits distributed)
- 2/7/19: Dr. Slattery (0 people trained, 15 kits distributed)
- 2/8/19: FirstMed (8 people trained, 32 kits distributed)
- 2/22/19: Westcare (0 people trained, 200 kits distributed)

**C. Other:**

- a. A peer-reviewed article titled "Transmission of *Francisella tularensis*, the Causative Agent of Tularemia, by Solid Organ Transplantation", co-authored by OEDS staff Christian Murua and Ying Zhang along with Dr. Joseph Iser and Dr. Michael Johnson was accepted for publication on Emerging Infectious Diseases.
- b. OEDS welcomed Robert Nagele, HIV Prevention Planning Coordinator.

**D. Communicable Disease Statistics:** January 2019 disease statistics are attached. (see table 1)

### **III. OFFICE OF PUBLIC HEALTH INFORMATICS (OPHI)**

1. Continue to enhance Trisano disease surveillance system.
2. Continue to maintain and enhance Electronic Message Staging Area (EMSA) systems.
3. Work continues on the new Southern Nevada Public Health Laboratory (SNPHL) Laboratory Information Management System (LIMS) system to interoperate with other internal and external systems. Informatics is also assisting with the changes that need to be made to the LIMS to accommodate new instruments and testing offered by the Clinical Laboratory.
4. Assisting SNPHL with data extraction and reporting needed for the laboratory.
5. Migrations to the new SNHD SFTP server continued.
6. Assisting with the implementation of the Electronic Health Record (EHR) system.
7. Assisting the Office of Public Health Preparedness (OPHP) to develop SNHD Weekly Domestic Disease Outbreak and Investigation Report and Monthly Public Health Fusion Center Summary Report.
8. Assisting the Office of Epidemiology and Disease Surveillance (OEDS), Office of EMS/Trauma System, and Clinic Services with various data requests, data exports, and report generation.
9. Work continues on the iCircle web application for OEDS, and transmission of HIV testing data to CDC.
10. Continue to work with the State to migrate STD data into the State NEDSS Base System (NBS).
11. Developed a software application and worked with the Harm Reduction Center- Las Vegas and the CDC for the Syringe Exchange Vending Machine (SVM) project. The application is under testing.
12. Updated the online dashboard for childhood lead poisoning prevention project.
13. Developed a resident evaluation application for the Residency program.
14. Abstract "Integrating Jurisdictional Investigation Grid with the ELR Automation" is accepted by the 2019 CSTE conference.
15. Recruiting PHIS new hires.

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

#### **1. February Meetings:**

##### **A. Southern Nevada Injury Prevention Partnership (SNIPP)**

The SNIPP is a committee with the primary purpose of advising and assisting the RTAB in the structure and development of the injury prevention component of the Southern Nevada Trauma System Plan and assuring the provision of injury prevention efforts with emphases on those that directly impact the trauma system.

The SNIPP Committee identified five major areas of injury to examine existing programs in the community:

1. Traffic related injuries
2. Choose Your Partner Carefully campaign
3. Child Maltreatment
4. LV Metro Police Dept. – Office of Community Engagement
5. Peer Navigation/Connection to Care

Their goal is to invite representatives from these programs to the Committee to lend them support and additional resources through contacts and promotion of events.

**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 Committee continued its annual review of the Emergency Medical Care Protocols.

**COMMUNITY HEALTH – OEMSTS - Fiscal Year Data**

EMS Statistics	Feb			FY17-	FY18-	
	2018	2019		18	19	
				(July- June)	(July- June)	
Total certificates issued	30	104	↑	1006	2065	↑
New licenses issued	21	50	↑	264	639	↑
Renewal licenses issued (recert only)	0	0	↑	578	1102	↑
Active Certifications: EMT	626	615	↓			
Active Certifications: Advanced EMT	1382	1432	↑			
Active Certifications: Paramedic	1319	1721	↑			
Active Certifications: RN	41	46	↑			
Driver Only	7	27	↑			

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

**1. Planning and Preparedness:**

- A. OPHP participated in an Ebola exercise with several local hospitals. The exercise patient presented at the emergency room at a front-line hospital. The organization consulted with Southern Nevada Health District Office of Epidemiology and Disease Surveillance for a potential, consultation on whether the patient meet evaluation criteria for person under investigation for Ebola. Upon confirmation, Emergency Medical Service (Ebola trained) arrived to transport the patient to an assessment hospital. The patient was received, put into isolation, and the Southern Nevada Public Health Laboratory was contacted to conduct a blood draw of patient, after which, the organization completed internal training objectives.
- B. OPHP and UMC hosted a two-day Pediatric Disaster Response and Emergency Preparedness Course at UMC's trauma building. The course is designed to assist community partners with planning for medical surge following disasters and special considerations for unique needs of pediatric patients.
- C. OPHP hosted a community-wide Pediatrics Tabletop Exercise at the Southern Nevada Health District. Southern Nevada Healthcare Preparedness Coalition Members from Southern Nevada participated including local, Fire, Law Enforcement, and Healthcare partners. The realistic exercise scenario brought



stakeholders together to discuss what actions and resources would be necessary to treat medical surge following an emergency that involved injured children under the age of 18.

- D.** OPHP conducted an Active Shooter Tabletop Exercise with a local rehabilitation hospital. The tabletop included the organization's policies, procedures, and allowed the hospital's leadership team to discuss their policies' strengths, challenges, and mitigation strategy for enhancing the organization response and to take steps to prevent a potential active shooter.
- E.** OPHP staff participated in a Firearm Violence Symposium hosted by the Southern Nevada Counterterrorism Center on February 5<sup>th</sup>. Topics included awareness sharing with community partners for intrastate firearm trafficking, preventing violence in communities, and prevention of children from accessing firearms.
- F.** On February 21<sup>st</sup>, SNHD participated in a tabletop exercise federal partners and use of medications from the Strategic National Stockpile (DSNS). This exercise allowed state and local partners to discuss current plans should the need be identified to dispense antibiotic medications to provide prophylaxis protection for the 2.3 million residents and approximately 300,000 daily visitors following a biological threat. The exercise was well-attended by both SNHD staff and community partners.
- G.** OPHP staff conducted a Closed Point of Dispensing (POD) Workshop on February 26<sup>th</sup> to assist Health District's POD partners in the community on developing their agency POD plans.
- H.** OPHP staff conducted a Mid-Term Planning Meeting on February 28<sup>th</sup> for a full-scale POD exercise to be conducted on June 2<sup>nd</sup>.
- I.** On February 19<sup>th</sup> through February 25<sup>th</sup>, OPHP staff worked with Health District and community partner staff to support local response to a Ricin incident that occurred in the community.
- J.** OPHP staff received notification that the abstract: "Fusion Centers and Public Health Collaboration: Partners in Public Health Security" was accepted as a learning session at the NACCHO Preparedness Summit occurring March 25-29. This session will also include representatives from the Arizona Counter Terrorism Information Center and the St. Louis Fusion Center as part of a panel discussion.
- K.** OPHP met with American Dialysis, Fidelity Home Health Services, and Red Rock Montevista Behavioral Health Hospital to discuss the impact of the Centers for Medicare & Medicaid Services Emergency Preparedness Rules on the organization. The discussions covered membership in the Southern Nevada Healthcare Preparedness Coalition, emergency preparedness exercises, the coalition's Hazard Vulnerability Analysis, and Communications plan.
- L.** OPHP staff continue to conduct the monthly Incident Command Team, Directors, Managers and Supervisors call-down notifications. Call-down drills are deliverables required by CRI grant to ensure public health staff readiness to respond to a disaster. This monthly test of the system ensures that District staff contact information is current in the event a notification to all SNHD staff is needed to be able to respond to public health threat.
- M.** OPHP staff continue to work with the Southern Nevada Counterterrorism Center to provide public health updates and alerts of local, national, and global interest.
- N.** OPHP staff continue to participate in the monthly Southern Nevada Healthcare Preparedness Coalition, Homeland Security Urban Area Security Initiative, Local

Emergency Preparedness Committee, Southern Nevada Adult Mental Health Coalition and individual hospital emergency management committee meetings.

**2. PHP Training and PH Workforce Development:**

A. OPHP Education and Training: OPHP Training Officers continue to conduct new employee Emergency Preparedness Training, Intro to OPHP departmental presentations, co-instruct Regional Decon Training for SNHPC partners, conduct CPR and First Aid courses at the Health District; support community partners to conduct and ensure SNHD staff have opportunities to attend training for agency required ICS courses.

3. **Employee Health Nurse:** SNHD staff continue to receive respirator fit testing (16), annual TB testing (18), and vaccinations (2). The annual update of the Exposure Control Plan has been finalized. The Respiratory Protection Plan is in progress.

**4. Grants and Administration:**

A. OPHP has received the new sub-grants from the State. Currently we have the PHEP, CRI, and HPP grants in place and fully executed. OPHP has begun to work with other areas within the district to ensure spending of the grants as identified within the SOW occur. SNHD has not received the grant guidance for next year.

**5. Medical Reserve Corps of Southern Nevada (MRC of So NV):**

A. MRC continues to assist the immunization clinics, safety office, pharmacy, community outreaches and first aid events upon request.

**VI. VITAL STATISTICS**

February 2019 showed a 7.8% decrease in birth certificate sales in comparison to February 2018. Death certificate sales showed a 4.7% increase for the same time frame. SNHD received revenues of \$46,137 for birth registrations, \$22,867 for death registrations; and an additional \$4,230 in miscellaneous fees for the month of February.

**COMMUNITY HEALTH Vital Statistics Program – Fiscal Year Data**

Vital Statistics Services	Feb	Feb		FY17-18	FY18-19	
	2018	2019		(July-June)	(July-June)	
Births Registered	2,054	2,220	↑	18,326	18,522	↑
Deaths Registered	1,458	1,510	↑	11,862	11,752	↓

Vital Statistics Services	Feb	Feb		FY17-18	FY18-19	
	2018	2019		(July-June)	(July-June)	
Birth Certificates Sold (walk-in)	3,480	3,224	↓	25,595	25,506	↓
Birth Certificates Mail	165	95	↓	1,159	804	↓
Birth Certificates Online Orders	1,123	1,079	↓	7,621	9,215	↑
Birth Certificates Billed	85	75	↓	832	852	↑
<b>Birth Certificates Number of Total Sales</b>	<b>4,853</b>	<b>4,473</b>	<b>↓</b>	<b>35,207</b>	<b>36,377</b>	<b>↑</b>

Death Certificates Sold (walk-in)	1,167	1,143	↓	9,282	8,149	↓
Death Certificates Mail	75	42	↓	668	509	↓
Death Certificates Online Orders	6,044	6,428	↑	48,117	49,424	↑
Death Certificates Billed	14	37	↑	183	237	↑
<b>Death Certificates Number of Total Sales</b>	<b>7,300</b>	<b>7,650</b>	<b>↑</b>	<b>58,250</b>	<b>58,319</b>	<b>↑</b>

<b>Vital Statistics Sales by Source</b>	<b>Feb 2018</b>	<b>Feb 2019</b>		<b>FY17-18</b>	<b>FY18-19</b>	
				<b>(July-June)</b>	<b>(July-June)</b>	
Birth Certificates Sold Decatur (walk-in)	71.7%	72.1%	↓	72.7%	70.1%	↓
Birth Certificates Mail	3.4%	2.1%	↓	3.3%	2.2%	↓
Birth Certificates Online Orders	23.1%	24.1%	↑	21.6%	25.3%	↑
Birth Certificates Billed	1.8%	2%	↑	2.4%	.2%	↓
Death Certificates Sold Decatur (walk-in)	16.%	14.9%	↓	15.9%	14%	↓
Death Certificates Mail	1%	.5%	↓	1.1%	.9%	↓
Death Certificates Online Orders	82.8%	84%	↑	82.6%	84.7%	↑
Death Certificates Billed	.2%	.5%	↑	.3%	.4%	↑

<b>Revenue</b>	<b>Feb 2018</b>	<b>Feb 2019</b>		<b>FY17-18</b>	<b>FY18-19</b>	
				<b>(Jul-June)</b>	<b>(Jul-June)</b>	
Birth Certificates (\$20)	\$97,060	\$89,460	↓	\$704,140	\$727,540	↑
Death Certificates (\$20)	\$143,160	\$153,000	↑	\$1,162,160	\$1,166,380	↑
Births Registrations (\$13)	\$50,752	\$46,137	↓	\$366,245	\$362,856	↓
Deaths Registrations (\$13)	\$23,517	\$22,867	↓	\$178,542	\$175,006	↓
Miscellaneous	\$4,232	\$4,230	↓	\$28,504	\$31,216	↑
<b>Total Vital Records Revenue</b>	<b>\$318,721</b>	<b>\$315,694</b>	<b>↓</b>	<b>\$2,439,591</b>	<b>\$2,462,998</b>	<b>↑</b>

## COMMUNITY HEALTH Passport Program – Fiscal Year Data

### Passport Services

Passport Services continues to stay busy and is proving to be a great addition to SNHD client services.

<b>Revenue</b>	<b>Feb 2018</b>	<b>Feb 2019</b>		<b>FY 17- 18 (Jul- June)</b>	<b>FY 18-19 (Jul- June)</b>	
Passport Execution/Acceptance fee (\$35)	n/a	\$22,155	↑	n/a	\$101,850	↑
Passport Photo Fee (\$12)	n/a	\$4,548	↑	n/a	\$18,792	↑
<b>Total Passport Program Revenue</b>	n/a	\$26,703	↑	n/a	120,642	↑

\*Passport program opened to public on August 1, 2018

MDJ/edm

Disease	2017		2018		2019	
	Jan	YTD	Jan	YTD	Jan	YTD
<b>VACCINE PREVENTABLE</b>						
Haemophilus influenzae, invasive	4	4	1	1	3	3
Hepatitis A	0	0	1	1	4	4
Hepatitis B, acute	0	0	4	4	1	1
Hepatitis B, chronic	8	8	30	30	21	21
Influenza	215	215	437	437	278	278
Meningococcal disease (N. meningitidis)	0	0	1	1	0	0
Pertussis	2	2	6	6	4	4
<b>SEXUALLY TRANSMITTED</b>						
Chlamydia	1,039	1,039	1,086	1,086	1,161	1,161
Gonorrhea	352	352	437	437	465	465
SYPHILIS (Early non-primary, non-secondary)	30	30	25	25	33	33
SYPHILIS (Primary & Secondary)	33	33	50	50	47	47
<b>CONGENITAL CONDITIONS</b>						
Congenital Syphilis	3	3	0	0	1	1
<b>ENTERICS</b>						
Amebiasis	1	1	1	1	0	0
Campylobacteriosis	10	10	8	8	5	5
Giardiasis	3	3	3	3	2	2
Rotavirus	10	10	1	1	1	1
Salmonellosis	4	4	6	6	3	3
Shiga toxin-producing E. coli (STEC)	1	1	1	1	1	1
Shigellosis	5	5	13	13	3	3
Typhoid	0	0	0	0	1	1
Yersiniosis	1	1	0	0	0	0
<b>OTHER</b>						
Coccidioidomycosis	9	9	30	30	4	4
Exposure, Chemical or Biological	0	0	2	2	1	1
Hepatitis C, acute	1	1	2	2	2	2
Hepatitis C, chronic	15	15	120	120	269	269
Invasive Pneumococcal Disease	27	27	36	36	21	21
Lead Poisoning	16	16	9	9	5	5
Legionellosis	0	0	3	3	2	2
Listeriosis	0	0	1	1	0	0
Lyme Disease	1	1	4	4	2	2
Meningitis, Aseptic	2	2	2	2	2	2
Meningitis, Bacterial Other	2	2	3	3	3	3
Meningitis, Fungal	0	0	1	1	0	0
RSV	461	461	445	445	501	501
Streptococcal Toxic Shock Syndrome (STSS)	2	2	2	2	7	7

\*The total number of cases presented in this report is subject to change due to possible delays in reporting and processing. Cases are counted based on CDC case definitions. HIV/AIDS/TB case counts are provided on a quarterly basis.

-Diseases not reported in the past two years or during the current reporting period are not included in this report.

--Monthly rates & monthly rate comparisons were removed from the Clark County Disease Statistics monthly report after July 2018 due to new data suppression rules adopted by the Office of Epidemiology & Disease Surveillance. Please see the Clark County Disease Statistics quarterly report for quarterly rates & quarterly rate comparisons.