

# Memorandum

Date:

April 8, 2022

To:

Southern Nevada District Board of Health

From:

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Subject:

Disease Surveillance & Control Division Monthly Activity Report - March 2022

#### Α. **Division of Disease Surveillance and Control**

1. Number of Confirmed and Probable Cases of Selective Illnesses Reported

	Mar 2021	Mar 2022		FYYTD 20-21	FYYTD 21-22	
Sexually Transmitted						
Chlamydia	1258	886	Ψ	10099	8877	4
Gonorrhea	641	485	4	5298	4928	4
Primary Syphilis	29	6	4	185	184	4
Secondary Syphilis	35	12	Ψ	321	284	4
Early Non-Primary, Non-Secondary <sup>1</sup>	56	25	4	384	440	1
Syphilis Unknown Duration or Late <sup>2</sup>	88	65	<b>\</b>	718	965	1
Congenital Syphilis (presumptive)	1	1	$\rightarrow$	30	27	4
Moms and Babies Surveillance						
HIV Pregnant Cases	3	0	4	24	14	4
Syphilis Pregnant Cases	18	18	<b>→</b>	122	155	1
Perinatally Exposed to HIV	0	0	<b>→</b>	6	11	1

Early Non-Primary, Non-Secondary= CDC changed the case definition from Early Latent Syphilis to Early Non-Primary, Non-Secondary

Syphilis Unknown Duration or Late=CDC changed the case definition from Late Latent Syphilis to Syphilis Unknown Duration or

Vaccine Preventable						
Haemophilus influenzae, invasive disease	0	2	<b>1</b>	1	4	1
Hepatitis A	0	1	<b>1</b>	1	2	1
Hepatitis B, acute	0	1	<b>1</b>	3	8	1
Influenza	6	91	<b>↑</b>	21	130	1
Enteric Illness						
Campylobacteriosis	11	3	$\downarrow$	26	13	4
Cryptosporidiosis	0	2	<b>1</b>	4	3	4

	Mar 2021	Mar 2022		FYYTD 20-21	FYYTD 21-22	
Giardiasis	5	1	<b>+</b>	12	12	1
Rotavirus	2	27	1	3	44	<b></b>
Salmonellosis	15	5	<b>+</b>	41	27	<b>→</b>
Shiga toxin-producing Escherichia coli (STEC)	4	8	1	8	23	<b></b>
Shigellosis	5	1	<b>→</b>	13	6	<b>→</b>
Other						
Coccidioidomycosis	14	6	<b>→</b>	42	28	<b>→</b>
Hepatitis C, acute	1	0	4	1	2	<b>↑</b>
Invasive Pneumococcal Disease	11	12	<b>1</b>	35	54	1
Lead Poisoning	8	7	+	30	29	4
Legionellosis	3	0	4	5	5	<b>→</b>
Lyme Disease	1	0	4	2	0	4
Meningitis, aseptic	3	1	<b>+</b>	13	3	+
Streptococcal Toxic Shock Syndrome (STSS)	2	1	<b>→</b>	7	3	<b>+</b>
New Active TB Cases Counted (<15 yo)	0	0	<b>→</b>	1	0	4
New Active TB Cases Counted (>= 15 yo)	6	3	<b>→</b>	35	32	<b>→</b>

## 2. Number of Cases Investigated by ODS

Monthly DIIS Investigations CT/GC/Syphilis/HIV/TB	Contacts	Clusters <sup>1</sup>	Reactors/ Symptomatic/ Xray <sup>2</sup>	OOJ/ FUP³
Chlamydia	50	2	93	0
Gonorrhea	88	0	152	0
Syphilis	74	5	209	0
HIV/AIDS (New to Care/Returning to Care)	17	0	57	1
Tuberculosis	32	0	6	0
TOTAL	261	7	517	1

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

OOJ= Investigations initiated Out of Jurisdiction reactors/partners/clusters Fup= Investigations initiated to follow up on previous reactors, partners, or clusters

Monthly DIIS Investigations Other Communicable Diseases (March 2022)									
Confirmed Case	Confirmed		001	OOI					
(Clinical and Lab	Case	Full	with	without					
Required)	(Lab Only)	Investigation	Investigation	Investigation					
174	20	39	2	1					

## 3. COVID-19 Specific Staffing and Response

a. Contact Tracers (CTs) - SNHD

Reactors/Symptomatic= Investigations initiated from positive labs or reported symptoms

- i. SNHD staff, Current Total: 47
  - 1. Two Supervisors
  - 2. Lead CTs 8
  - 3. Contact Tracers; investigators and outreach 37
- ii. Contracted Contact Tracers, Current Total: 100
  - 1. CSAA team of 100

#### b. Testing

- i. Contact tracing team continues to work the College of Southern Nevada (CSN) (3 sites) outreach testing on any testing day, overall >80% CTs rotating to testing sites.
- ii. Contact tracing team continues to assist SNHD with in-house clinical testing at METS clinic.
- iii. Strike teams for testing are deployed for outbreak and clusters identified.
- c. Contact Tracing/Outreach/Outbreak Investigations
  - School Team A dedicated team of Contact Tracers who have been assigned to support the schools and work closely with CCSD and other local schools.
  - ii. Priorities CTs prioritize outbreak reports, and reports of multiple cases in settings of high-risk transmissions and vulnerable populations. This may include, but is not limited to, detention centers, homeless shelters, daycares, and congregate settings.

#### 4. Disease and Outbreak Investigations

- a. Influenza: Influenza surveillance for Clark County, Nevada includes data collected from local acute care hospitals and other healthcare providers. In Clark County, for the season as of 3/26/2022, 120 influenza-associated hospitalizations and 7 deaths associated with influenza have been reported. The percentage of emergency room (ER) and urgent care clinic visits for ILI increased to 4% in week 12. Approximately 28% of area ER and urgent care clinic visits for ILI were made by children 0-4 years of age. Influenza A has been the dominant type circulating.
- b. 2019 Novel Coronavirus (COVID-19): As of March 31, Clark County had 4498,040 cases; 7,821 deaths, and 108 cases of MIS-C (Multisystem Inflammatory Syndrome in Children). The Health District continues to utilize the Incident Command System to expand our efforts in COVID-19 response and gain access to additional staffing and resources. The Health District continues to meet with Clark County emergency managers, Fire, EMS, School Officials, hospital emergency response and infection control staff to communicate the current response and plan for continued partnership. The Office of Disease Surveillance (ODS) at the SNHD is receiving and following up on reports of confirmed illness, conducting disease investigations, contact tracing, and working with local medical providers to determine levels of risk and recommended actions for anyone who may be ill or exposed. ODS is making recommendations of isolation and guarantine for individuals that are diagnosed with COVID-19 or have

been identified as exposed to someone with COVID-19. Currently SNHD has contact tracers including staff from SNHD, CSAA and other partnering agencies responding to reports of positive cases and maintain community testing sites, and strike teams for testing. This is an ongoing response effort.

- c. **COVID-19 Variants:** The Southern Nevada Health District continues to monitor for new and/or emerging variants.
- d. Respiratory Illness: A local school reported an unusual number of student absences to SNHD on March 17, 2022. Symptoms included fever, cough, and body aches. A strike team composed of contact tracers visited the school on March 24, 2022 and were able to collect 19 nasopharyngeal specimens. All specimens were tested for COVID-19, influenza A and influenza B. Five specimens were positive for influenza A, 0 were positive for COVID-19, and 14 were negative for both COVID-19 and influenza. This investigation is now closed.
- e. THC Investigation: DSC is investigating reports of THC toxicity among patrons that consumed food or drink from a local restaurant. Symptoms being reported include hallucinations, tachycardia, blurry vision, confusion, dry mouth, numbness or tingling in extremities, and loss of consciousness. Some of the ill sought medical attention and tested positive for THC, denying any marijuana use 30 days prior to their test. Multiple dishes tested through Las Vegas Metro Police Department were positive for THC. The restaurant is now reopened. SNHD's final report is pending.
- Norovirus Investigation: ACDC investigated Acute Gastroenteritis f. cases associated in some instances with the Norovirus at 10 local schools. The reported symptoms included nausea, vomiting, abdominal pain, fever, and diarrhea. Symptom onset dates ranged from 2/25/2022-3/31/2022. A total of 4 investigations have been completed and 5 confirmed Norovirus cases have been reported thus far. Currently, there are 6 ongoing investigations. Additionally, ACDC is investigating a possible Norovirus outbreak at a local shelter. The reported symptoms include nausea, vomiting, abdominal pain, fever, and diarrhea. A total of four illnesses have been reported. Two ill individuals sought medical attention and were diagnosed with acute viral illness. Stool samples have been submitted to SNPHL for testing and the results are pending. DSC collaborated with EH and the facility began implementing the prevention and control recommendations provided. All test results were negative for Norovirus and all other organisms tested. This investigation is now closed.
- g. Listeria Outbreak: ACDC, in collaboration with EH, SNPHL and NSPHL, is assisting in the CDC's ongoing investigating of an outbreak of Listeria monocytogenes. This outbreak is associated with prepackaged lettuce from various brands. The investigation includes 13 cases from 6 jurisdictions [CA (4), DC, GA, HI (4), MD, WA & NV]. Specimen collection dates range from August 19, 2014-December 20, 2021. Eleven illnesses occurred in 2021. Information on hospitalization is available for 11 patients and all 11 were hospitalized, there is one reported death. One illness is pregnancy-associated. Retail sampling of three local grocery stores was conducted. All sampling results were non-detected for listeria. This investigation is now closed.

#### 5. Non-communicable Reports and Updates

a. Naloxone Training: SNHD is training and distributing naloxone (Narcan) to first responders and members of key community sectors throughout Nevada to better respond to the large-scale burden of opioid overdoses. SNHD is receiving naloxone via State Targeted Response funding through the Center for the Application of Substance Abuse Technologies (CASAT) at the University of Nevada, Reno. ODS has implemented a policy for SNHD staff to carry and administer Naloxone. ODS has also been given permission at the Clark County Detention Center to place Naloxone in a person's property at the facility.

The following Naloxone trainings/distributions have taken place in the month of March:

3/1/22 - Nevada State Police (180 kits distributed)

3/1/22 - SNHD Pharmacy (80 kits distributed)

3/1/22 - Caesars Response Team (60 kits distributed)

3/2/22 - Mesquite PD (40 kits distributed)

3/3/22 - DOC: High Desert & Southern Desert (20 kits distributed)

3/4/22 - Southern Nevada EMS Training Institute (40 kits distributed)

3/9/22 - MGM Security (10 trained, 400 kits distributed)

3/11/22 - Care Coalition (22 kits distributed)

b. Overdose Data to Action Grant (ODTA): The ODS ODTA Health Education Team has been tasked to streamline and monitor the Fentanyl Test Strip Program. An improved application process to receive the test strips has been implemented. Since implementation of the program, 5 agencies have joined bringing the total number of participating agencies to 11. Three of the participating agencies are within SNHD and include the Office of Disease Surveillance, The Linkage to Action team, and the Pharmacy. There are 8 additional agencies in the application process and an additional 4 that have moved into the training phase. The asynchronous training for this program is currently sitting at a 96.25% completion rate. This is well above the average completion rate for asynchronous, virtual trainings which is 13%.

#### B. Prevention - Community Outreach/Provider Outreach/Education

Ongoing promotion of Collect2Protect (C2P) online service for those requesting testing for gonorrhea, chlamydia, and HOME HIV test kits. ODS continues to work with OOC to help promote C2P on SNHD web sites, social media and with the help of community partners. The Center, Huntridge Family Clinic and AHF continue to offer ongoing HIV/STD, PrEP/PEP, and rapid stART services to the community.

Express Testing in SHC/Annex A services continues to do well. Walk in Services have resumed making it much easier for the community to access services with limited barriers. Outreach events this month include Hawks Gym and Fun Hog Ranch Bar. Both are monthly recurring events targeting MSM. HIV and syphilis testing are offered along with information on PrEP/PEP and condoms. ODS staff work with the managers of the businesses to help promote prior to the outreach event. This month we observed and promoted National Women and Girls HIV Awareness Day. Every year on March 10, local, state, federal, and national organizations come together to shed light on the impact of HIV and AIDS on women and girls and show support for those

at risk of and living with HIV. This year marks the 17th annual observance of National Women and Girls HIV/AIDS Awareness Day (NWGHAAD). ODS worked with OOC to promote Express Testing services and Collect 2 Protect.

### C. High Impact HIV/STD/Hepatitis Screening Sites

Testing is currently being offered at Trac-B for HIV and Hep C. Also, The Center is offering screenings for HIV, Hep C, Gonorrhea, Chlamydia and Syphilis to the community Monday-Thursday from 1pm-5pm and every Saturday from 9am-2pm. AHF is also offering HIV and STD screenings at their Wellness clinic locations on Monday, Wednesday, and Friday, and on their MTU.

Office of Disease Surveillance- HIV Prev	ention Scre	ening/Test	ing Ef	forts		
Prevention - SNHD HIV Testing	Mar-21	Mar-22		FY 20-21	FY 21-22	
Outreach/Targeted Testing	1002	381	4	6621	7759	1
Clinic Screening (SHC/FPC/TB)	521	258	4	2951	2028	4
Outreach Screening (Jails, SAPTA)	148	71	4	459	475	1
Collect2 Protect	5	2	4	27	167	1
TOTAL	1676	712	Ψ	10058	10429	1
Outreach/Targeted Testing POSITIVE	9	3	4	45	68	1
Clinic Screening (SHC/FPC/TB) POSITIVE	0	2	1	11	9	4
Outreach Screening (Jails, SAPTA) POSITIVE	0	1	<b>1</b>	1	3	1
TOTAL POSITIVES	9	6	4	57	80	1

#### D. Staff Facilitated/Attended the following Trainings/Presentations

- 03/02/2022: Public Health Detailing for First Person Medical Henderson, facilitated by ODS Health Educator; 4 UNLV School of Nursing student attendees.
- 2. 03/03/2022: Senate Bill (SB) 275 Advisory Task Force on HIV Exposure Modernization represented by ODS Health Educator as task force member; ~15 people in attendance.
- 3. 03/04/2022: Clark County Children's Mental Health Consortium (CCCMHC) meeting attended by ODS Health Educator Staff as representative; ~38 people in attendance from multiple agencies.
- 4. 03/10/2022: National Women and Girls HIV/AIDS Awareness Day at the Center Las Vegas presentation by ODS Health Educator; ~30 people in attendance.
- 5. 03/11/2022: Academic Detailing Information Session presented by ODS Health Educator; ~22 people in attendance; 2 SNHD ODS staff attendees.
- 03/15/2022: "ESCALATE Monthly Technical Assistance Call" presentation, facilitated by ESCALATE, 12 people in attendance, 1 SNHD ODS staff attendee.
- 7. 03/15/2022: Child Death Review (CDR) Board virtual meeting attended by ODS Health Educator Staff as a representative; ~35 people in attendance from multiple agencies; 2 SNHD ODS staff attendees.
- 8. 03/18/2022: Clark County Children's Mental Health Consortium (CCCMHC)
  Public Awareness Workgroup meeting attended by ODS Health Educator

- Staff as a representative; 8 people in attendance from multiple agencies; 1 SNHD ODS staff attendee.
- 9. 03/22/2022: "SafeTALK Suicide Prevention" training facilitated by 2 ODS Health Educator Staff; 15 people in attendance; 7 SNHD ODS staff attendees.
- 10. 03/29/2022: "Harm Reduction 201" Training facilitated and presented by 2 ODS Health Educators; 19 people in attendance.
- 11. 03/31/2022: Admiral Rachel Levine U.S. Human Health Services Meeting at Trac-B Exchange; 2 SNHD ODS Health Educators in attendance; ~20 people in attendance.
- 12. 03/31/2020-4/1/2022: "Empower Change: Rapid HIV Testing and Counseling" facilitated by 3 SNHD ODS Staff; 8 participants in attendance.

#### E. Other

Communicable Disease Statistics: February 2022 disease statistics are attached (see Table 1).

#### IN OFFICE OF PUBLICHEAUTHINFORMATICS (OPHI)

- A. Continue to maintain and enhance Trisano disease surveillance system.
- B. Continue to maintain and enhance Electronic Message Staging Area (EMSA) systems, and updated EMSA to process Coronavirus ELRs.
- C. Continue to work on the 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.
- D. Assist SNPHL to develop COVID-19 interface between instruments, COVID-19 POD app and Orchard, COVID-19 testing and reporting as needed.
- E. Work with IT to implement and maintain the Electronic Health Record (EHR) system for COVID-19 test ordering and COVID-19 vaccination. Working on import COVID-19 testing demographic data from POC application into eCW.
- F. Continue to work on CDC Influenza SARS-CoV-2 multiplex assay, CDC Subtyping, and CDC Genotyping order mapping.
- G. Assist Office of Epidemiology and Office of Disease Surveillance (OEDS), Office of EMS/Trauma System, Environmental Health (EH), Clinic Services with various data requests, data exports, and report generation.
- H. Continue to enhance the iCircle web application for OEDS by adding new form for STD TracB site questions, and transmission of STD, HIV and Hepatitis testing data to CDC, and enhance a QA process between iCircle with eCW data.
- I. Continue to support Clark County Coroner's Office (CCCO) on new CME implementation, data requests and reports.
- J. Continue to work with OEDS on SVM projects.
- K. Enhance COVID-19 surveillance by automating COVID-19 hospitalization notification, and extract demographics, lab tests and treatment information from HIE CCDs for public health surveillance.
- L. Completed Vector Data with EH staff.
- M. Continue working with Wellpartner on prescription notification from eCW.

- N. Continue working with Epi team to automate Trisano update for COVID-19 death reporting.
- O. Maintain and update COVID-19 dashboard, COVID-19 maps, lab testing and ED admission trend analysis and other urgent data requests.
- P. Maintain automated COVID-19 patient notification application and perform QA for contact tracing and identification.
- Q. Maintain and enhance COVID-19 lab results portal to include NSPHL overflow test results. Clients can access their results online.
- R. Maintain applications to automate COVID-19 contacts upload for contact tracing and testing referral and produce COVID-19 DECIPHER report.
- S. Continue working on EpiTrax migration from Trisano and address issues identified from UAT test.
  - 1. Testing Pentaho reports from EpiTrax data warehouse.
  - Deployed EpiTrax NMI system for testing.
  - Added security measures to EpiTrax warehouse.
- T. Continue to work with state on DMI project including eCR onboarding and RCKMS training.
- U. Enhance Syndromic Surveillance System for the Early Notification of Community Based Epidemics (ESSENCE) for new providers and future support.
- V. Onboarded 16 providers from backlog for COVID-19 test reporting.
- W. Continue bi-weekly meetings with NV HIE for improving COVID-19 race/ethnicity collection and reporting.
- X. Continue to work with UNLV for COVID-19 contract and Data Management Plan (DMP).
- Y. Completed various reports including: Lab report; Focus report; Homeless deaths report; UDS Report; Heat related deaths; GISP/eGISP Report;
- Z. Continue to work with Epi office to improve grant reporting process for Yale project.
- **AA.** Continue working on Health Disparity project with the state.
- BB. Attended EpiTrax Consortium Peer-to-Peer Virtual Summit.
- **CC.** Submitted ELC BP4 Grant Application

#### Table 1



## February 2022: Clark County Disease Statistics\*

	202	10	2021		2022	
Disease	FEB	YTD	FEB	YTD	FEB	YTD
VACCINE PREVENTABLE	<u>*</u>					
Haemophilus influenzae, invasive	2	2	0	1	0	2
Hepatitis A	3	10	0	1	0	1
Hepatits B, acute	0	0	0	3	5	7
Hepaints B. chronic	47	95	36	73	62	121
Influenza	242	758	3	15	23	39
Meningococcal disease (M. meningitidis)	1	1	0	0	0	0
Pertussis	1	4	0	0	2	3
SEXUALLY TRANSMITTED	- 4864 1	i	1000	- 4844 1		4000
Chiamydia	1084	2320	1069	2089	929	1868
Genoritea Genoritea	415 32	872	655 48	1253 107	469 40	940 84
Syphilis (Early non-primary, non-secondary)   Syphilis (Primary & Secondary)	58	67 110	66	124	48	100
CONGENITAL CONDITIONS	- 30	110	- 60	124	40.1	100
Hepatilis C, Perinalal Infection	0	0	0	1	0	0
Congenital Syphits	<del>- 7</del> 1	10	- 6	- ;	- 5	9
ENTERICS		<u></u>				<u>-</u>
Amediasis	1	3	0	0	0	0
Campytobacteriosis	5	16	12	15	5	10
Cryptosportdiosis	1	4	2	4	0	1
Glardiasis	5	8	3	7	3	10
Roizvirus	8	10	1	1	15	17
Samonellosis	11	20	13	26	15	21
Shiga toxin-producing E. coll (STEC)	2	8	2	4	7	15
Shipelosis	8	11	6	8	1	5
Vibriosis (Kon-cholera Vibrio species infection)	0	2	0	0	0	0
Yersiniosis	0	2	0	0	1	1
OTHER						
Candida auris	0	0 22	0	0 28	14	26
Coccidiationycosts	11		13		7	19
Exposure, Chemical or Biological	0	- 0	0	1 0	0	<u>0</u>
Hepatits C, acute Hepatits C, chronic	454	916	265	598	247	468
Invasive Pneumococcai Disease	29	76	13	24	8	42
Lead Poisoning	11	33	7	22	<del> </del>	22
Lectonellosis	- 4	- 8	1	2	- 2	5
Listeriosis	0	0	ò	ō	0	<u></u>
Lyme Disease	Ö	2	- 6	1	Ö	Ö
Mataria	- 0	1	0	Ö	Ö	1
Meningitis, Aseptic	10	15	7	10	ő	1
Meningilis, Bacterial Other	2	6	0	0	0	0
RSV	611	1399	1	5	120	469
Ratites, exposure to a ratites susceptible animal	10	19	18	43	23	56
Streptococcal Toxic Shock Syndrome (STSS)	5	7	3	5	2	3

<sup>&</sup>quot;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.

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

<sup>-</sup>Hepacits C, chronic, numbers have changed due to surveillance decisions within the Office of Epidemiology & Disease Surveillance.

<sup>---</sup>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.