



Memorandum

Date: June 8, 2022

To: Southern Nevada District Board of Health

From: **Cassius Lockett, PhD, Director of Disease Surveillance & Control** *CL*
Fermin Leguen, MD, MPH, District Health Officer *FL*

Subject: Disease Surveillance & Control Division Monthly Activity Report – May 2022

A. Division of Disease Surveillance and Control

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

	May 2021	May 2022		FYTD 20-21	FYTD 21-22	
Sexually Transmitted						
Chlamydia	1117	934	↓	12391	11150	↓
Gonorrhea	598	412	↓	6451	6030	↓
Primary Syphilis	24	8	↓	237	224	↓
Secondary Syphilis	39	17	↓	403	345	↓
Early Non-Primary, Non-Secondary ¹	55	25	↓	503	548	↑
Syphilis Unknown Duration or Late ²	100	53	↓	925	1202	↑
Congenital Syphilis (presumptive)	3	0	↓	40	37	↓
Moms and Babies Surveillance						
HIV Pregnant Cases	2	0	↓	32	22	↓
Syphilis Pregnant Cases	14	12	↓	134	200	↑
Perinatally Exposed to HIV	0	3	↑	6	17	↑
¹ Early Non-Primary, Non-Secondary= CDC changed the case definition from Early Latent Syphilis to Early Non-Primary, Non-Secondary ² Syphilis Unknown Duration or Late=CDC changed the case definition from Late Latent Syphilis to Syphilis Unknown Duration or Late						
Vaccine Preventable						
Haemophilus influenzae, invasive disease	0	2	↑	1	7	↑
Hepatitis A	0	0	→	1	3	↑
Hepatitis B, acute	1	1	→	6	10	↑
Influenza	2	81	↑	34	368	↑
Pertussis	1	5	↑	2	29	↑
Enteric Illness						

	May 2021	May 2022		FYTD 20-21	FYTD 21-22	
Campylobacteriosis	20	11	↓	59	33	↓
Cryptosporidiosis	0	3	↑	4	8	↑
Giardiasis	3	1	↓	17	15	↓
Rotavirus	5	25	↑	9	107	↑
Salmonellosis	13	10	↓	63	61	↓
Shiga toxin-producing Escherichia coli (STEC)	4	3	↓	15	36	↑
Shigellosis	17	2	↓	36	15	↓
Other						
Coccidioidomycosis	14	10	↓	69	49	↓
Hepatitis C, acute	0	0	→	1	2	↑
Invasive Pneumococcal Disease	5	15	↑	51	88	↑
Lead Poisoning	8	6	↓	46	53	↑
Legionellosis	3	0	↓	9	7	↓
Lyme Disease	0	0	→	3	1	↓
Meningitis, aseptic	3	0	↓	17	4	↓
Streptococcal Toxic Shock Syndrome (STSS)	3	3	→	12	6	↓
New Active TB Cases Counted (<15 yo)	0	0	→	1	4	↑
New Active TB Cases Counted (>= 15 yo)	7	4	↓	50	48	↓

2. Number of Cases Investigated by ODS

Monthly DIIS Investigations CT/GC/Syphilis/HIV/TB	Contacts	Clusters ¹	Reactors/ Symptomatic/ Xray ²	OOJ/ FUP ³
Chlamydia	60	1	152	0
Gonorrhea	53	0	195	0
Syphilis	54	6	261	0
HIV/AIDS (New to Care/Returning to Care)	11	0	69	1
Tuberculosis	23	0	11	0
TOTAL	201	7	688	1

¹ Clusters= Investigations initiated on named clusters (clusters= named contacts who are not sex or needle sharing partners to the index patient)
² Reactors/Symptomatic= Investigations initiated from positive labs or reported symptoms
³ OOJ= Investigations initiated Out of Jurisdiction reactors/partners/clusters
 Fup= Investigations initiated to follow up on previous reactors, partners, or clusters

3. COVID-19 Specific Staffing and Response

a. Contact Tracers (CTs) – SNHD

- i. SNHD staff, Current Total: 40
 - 1. Lead CTs – 7
 - 2. Contact Tracers; investigators and outreach – 33
- 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. CT 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
 - i. 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:** 2021-2022 influenza season was to end on 5/21/2022; however, current influenza surveillance efforts have shown that Nevada, along with the nation, is experiencing higher case rates, influenza-like illness rates, and hospitalization rates than what is typically expected during this time of the year. It is unclear how influenza rates and hospitalizations will trend moving into the summer months. Given this uncertainty, along with the increasing trends, the current influenza surveillance season in Nevada will be extended through the summer months and into the 2022-2023 season, which will begin on October 2, 2022. Influenza surveillance for Clark County, Nevada includes data collected from local acute care hospitals and other healthcare providers. In Clark County, as of 5/28/2022 (week 21), 383 influenza-associated hospitalizations and 10 deaths associated with influenza have been reported. The percentage of emergency room (ER) and urgent care clinic visits for ILI increased to 4.0% in week 21. Approximately 23% 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 May 30, Clark County had 527,915 cases; 8,513 deaths, and 109 cases of MIS-C (Multisystem Inflammatory Syndrome in Children). The Health District continues to utilize the Incident Command System to expand our efforts as needed and sustain the COVID-19 response. 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 Acute Communicable Disease Control (ACDC) program at the SNHD is receiving and following up on reports of confirmed illness,

conducting disease investigations and contact tracing for outbreaks and vulnerable populations. ACDC is making recommendations of isolation and quarantine for individuals that are diagnosed with COVID-19 or have been identified as exposed to someone with COVID-19 through use of technology as capacity allows. Currently SNHD has contact tracers including staff from SNHD, CSAA to follow up on the reports of positive cases and maintain community testing sites, and strike teams for testing. This is an ongoing response effort.

- c. **THC Investigation:** DSC investigated reports of THC toxicity among patrons that consumed food or drink from a local restaurant. Symptoms reported included 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 investigation is now closed. SNHD's final report is pending internal reviews.
- d. **Hepatitis of Unknown Cause:** ACDC worked with Informatics to identify any reported adenovirus cases that met criteria for further investigation. SNHD has had 0 reported cases. ACDC continues to participate in CDC calls and monitor for possible cases.

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 May:

- 5/3/22 - SNHD – Jails (192 doses distributed)
- 5/6/22 - The Center (1 trained, 54 doses distributed)
- 5/6/22 - Foundation for Recovery (200 doses distributed)
- 5/6/22 - Clinical and Community Partnerships (72 doses distributed)
- 5/6/22 - Join Groups (100 doses distributed)
- 5/6/22 - SNHD – Pharmacy (50 doses distributed)
- 5/9/22 - VA (100 doses distributed)
- 5/11/22 - Community Ambulance (100 doses distributed)
- 5/13/22 - Westgate Casino (200 doses distributed)
- 5/18/22 - Touro University (70 trained, 140 doses distributed)

5/19/22 – COMC (40 trained, 80 doses distributed)
5/20/22 - Desert Hope (14 trained, 40 doses distributed)
5/20/22 - Dignity Health Hospital (96 doses distributed)
5/23/22 - Desert Hope (20 trained, 40 doses distributed)
5/27/22 - The Center (50 doses distributed)

- b. Overdose Data to Action (ODTA): The ODS ODTA Health Education team monitors the Fentanyl Test Strip Program.

The following participating agencies and internal SNHD programs received FTS during the month of May:

05/17/22 - PACT Coalition (300 strips)
05/17/22 - SNHD Linkage to Action mobile unit (100 strips)
05/17/22 - ODS internal teams (100 strips)
05/17/22 - TRAC B/Impact Exchange (300 strips)
05/18/22 - The Cupcake Girls (300 strips)
05/19/22 - SNHD Pharmacy (400 strips)
05/23/22 - UNLV Student Health (300 strips)
05/27/22 – The Center (400 strips)

6. 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.

The L2A (Linkage to Action team) had outreaches on May 5th, 10th, 12th, 18th and 26th for those experiencing homelessness. These outreaches were held with community partners TRAC-B Exchange, SNHD Immunizations, LGBTQ Center of So. NV, Foundation for Recovery, and Touro University. Services provided included 1 substance use disorder linkage, 14 HIV tests, Foundation for Recovery spoke with 11 people and gave them information about peer support. 889 sterile syringes were provided by TRAC-B Exchange, Touro University provided wound care for 12 clients, 26 vaccinations were given, 70 hygiene kits, 88 Fentanyl test strips, and 35 syringe sterilization instruction pamphlets including a 1oz container of bleach. These outreaches were held in the following areas: Community Impact Center, The Courtyard, Seigel Suites, homeless encampments and tunnels, and other areas in need in Las Vegas.

B. 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 Prevention Screening/Testing Efforts						
Prevention - SNHD HIV Testing	May -21	May-22		FY 20-21	FY 21-22	
Outreach/Targeted Testing	802	338	↓	8305	9479	↑
Clinic Screening (SHC/FPC/TB)	449	143	↓	3723	2392	↓
Outreach Screening (Jails, SAPTA)	58	131	↑	615	707	↑
Collect2 Protect	0	2	↑	31	170	↑
TOTAL	1309	614	↓	12674	12748	↑
Outreach/Targeted Testing POSITIVE	6	2	↓	59	72	↑
Clinic Screening (SHC/FPC/TB) POSITIVE	3	0	↓	19	9	↓
Outreach Screening (Jails, SAPTA) POSITIVE	0	0	→	2	3	↑
Collect2 Protect POSITIVE	0	0	→	0	1	↑
TOTAL POSITIVES	9	2	↓	80	85	↑

C. Staff Facilitated/Attended the following Trainings/Presentations

- 05/02/2022: Postvention CCSD School Presentation Discussions Facilitated by ODS Health Educator; 6 people in attendance 2 ODS Health Educators in attendance.
- 05/02/2022-05/03/2022: 5th Annual Southern Nevada Summit on Children's Mental Health attended by ODS Health Educator Staff; ~60 people in attendance; 1 SNHD OEDS staff attendee.
- 05/03/2022-05/05/2022: 2022 Arizona Virtual HIV, HCB, and STD Symposium, attended by ODS Health Educator staff; ~100 people in attendance.
- 05/04/2022: Henderson Fentanyl Test Strip filming facilitated by Henderson Overdose Response Team; ~12 people in attendance; 2 ODS Health Educators in attendance.
- 05/10/2022: Nevada Resilience Project (NRP) Overview presentation facilitated by ODS Health Educator Staff for AAA; ~100 people in attendance; 2 SNHD ODS staff attendees.
- 05/10/2022-05/12/2022: Prevention Technology Transfer Center (PTTC) Prevention Academy hosted by PTTC; ~50 people in attendance; 1 ODS Health Educator in attendance.
- 05/12/2022: Annual Incident Command (IC) training attended by ODS Health Educator; ~20 people in attendance; 1 ODS Health Educator attendee.
- 05/16/2022: 5th Annual Older Adult Mental Health Awareness Day Symposium attended by ODS Health Educator Staff; ~300 people in attendance; 1 SNHD ODS staff attendee.
- 05/16/2022-05/20/2022: "ESCALATE Stigma Training" facilitated by NMAC, 22 people in attendance, 1 ODS staff in attendance.
- 05/17/2022: Southern Nevada Opioid Advisory Committee (SNOAC) Technical Assistance attended by SNHD Health Educators; 5 people in attendance; 2 ODS Health Educators in attendance.

11. 05/17/2022: Clark County Children's Mental Health Consortium (CCCMHC) Public Awareness Workgroup meeting attended by ODS Health Educator Staff as a representative; 10 people in attendance from multiple agencies; 1 SNHD ODS staff attendee.
12. 05/17/2022: 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.
13. 05/18/2022: Health District After Dark - Heat Illness Awareness; presentation given by ODS Health Educator Staff; ~30 people in attendance; 6 SNHD DSC staff attendees.
14. 05/19/2022: San Diego Center for HIV Research on "Advancing HIV Health Equity for the Trans and Nonbinary Community" and "HIV Cluster Detection and Response: Connecting data, partners, and programs to identity and close gaps in HIV Prevention"; ~50 people in attendance; 1 ODS Health Educator in attendance.
15. 05/21/2022: "Collect 2 Protect" presentation by ODS Health Educator for the "STI/HIV Clinical Update"; ~65 people in attendance; 1 ODS Health Educator in attendance.
16. 05/22/2022" Facilitated "HIV Testing and Disclosure" workshop for Skills Building Workshop for the "STI/HIV Clinical Update"; ~65 people in attendance; 1 ODS Health Educator in attendance.
17. 05/24/2022: "SafeTALK Suicide Prevention" training facilitated by ODS Health Educator Staff; 18 people in attendance; 6 SNHD DSC staff attendees.
18. 05/25/2022: Fentanyl Test Strip Training facilitated by ODS Health Educator; ~8 people in attendance.
19. 05/26/2022: Harm Reduction 201 Training facilitated by ODS Health Educators; 18 people in attendance.

D. Other

Communicable Disease Statistics: April 2022 and Quarter 1 2022 disease statistics are attached (see Table 1).

MONTHLY REPORT – May 2022

OFFICE OF PUBLIC HEALTH INFORMATICS (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 interface between instruments, COVID POD app and Orchard, COVID testing and reporting as needed.
- E. Work with IT to implement and maintain the Electronic Health Record (EHR) system for COVID test ordering and COVID vaccination. Working on import COVID 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.** Enhance COVID19 surveillance by automating COVID19 hospitalization notification, and extract demographics, lab tests and treatment information from HIE CCDs for public health surveillance.
- K.** Continue working with Wellpartner on prescription notification from eCW. Encounter reports completed.
- L.** Maintain and update COVID19 dashboard, COVID19 maps, lab testing and ED admission trend analysis and other urgent data requests.
- M.** Maintain automated COVID19 patient notification application and perform QA for contact tracing and identification.
- N.** Maintain and enhance COVID19 lab results portal to include NSPHL overflow test results. Clients can access their results online.
- O.** Maintain applications to automate COVID19 contacts upload for contact tracing and testing referral and produce COVID19 DECIPHER report.
- P.** Continue to work with Epi and Surveillance teams to test EpiTrax and Data warehouse.
- Q.** Continue working on EpiTrax migration from Trisano and address issues identified from UAT test.
- R.** Continue to work with state on DMI project including eCR onboarding and RCKMS training.
- S.** Enhance Syndromic Surveillance System for the Early Notification of Community Based Epidemics (ESSENCE) for new providers and future support. New Hospital added.
- T.** Continue bi-weekly meetings with NV HIE for improving COVID19 race/ethnicity data collection and reporting.
- U.** Grant development and work plan discussion with Clark county for RWCQM grant.
- V.** Completed various reports including: Monthly BOH report, UDS Report; ELC Quarterly Reports, Heat related deaths report; GISP/eGISP Report;
- W.** Continue to work with Epi office on the Yale project for case conferencing.
- X.** Continue working with the state to analyze discrepancy of COVID cases reported by State and SNHD.
- Y.** Attended CDC Data Modernization Workshop and ASTHO TechXpo virtual conference for workforce development
- Z.** Updated CDC Health Disparity work plan and budget to upgrade SNHD data infrastructure.
- AA.** Completed enhancement of SVM application and ready for testing.
- BB.** Completed development of an interface between SNPHL and NSPHL's LIMS.
- CC.** Completed CDC Public Health Laboratory Interoperability Project (PHLIP) and in production.



April 2022: Clark County Disease Statistics*

Disease	2020		2021		2022	
	April	YTD	April	YTD	April	YTD
VACCINE PREVENTABLE						
Haemophilus influenzae, invasive	0	8	0	1	1	5
Hepatitis A	1	11	0	1	1	3
Hepatitis B, acute	1	1	2	5	0	9
Influenza	5	857	11	32	145	287
Meningococcal disease (<i>N. meningitidis</i>)	0	1	0	0	0	0
Pertussis	0	6	1	1	7	24
SEXUALLY TRANSMITTED						
Chlamydia	791	4195	1179	4527	1014	3966
Gonorrhea	354	1562	565	2460	549	2109
Syphilis (Early non-primary, non-secondary)	18	110	64	227	41	192
Syphilis (Primary & Secondary)	44	213	71	259	42	200
CONGENITAL CONDITIONS						
Hepatitis C, Perinatal Infection	0	0	1	2	0	0
Congenital Syphilis	1	13	7	13	2	19
ENTERICS						
Amebiasis	0	3	0	1	0	0
Campylobacteriosis	4	27	13	39	6	22
Cryptosporidiosis	1	5	0	4	2	5
Giardiasis	2	11	2	14	1	14
Rotavirus	1	13	1	4	37	82
Salmonellosis	5	35	9	50	18	51
Shiga toxin-producing <i>E. coli</i> (STEC)	0	8	3	11	7	33
Shigellosis	3	16	6	19	7	13
Vibriosis (Non-cholera <i>Vibrio</i> species infection)	1	3	0	0	0	0
Yersiniosis	0	2	3	4	0	2
OTHER						
Coccidioidomycosis	8	43	13	55	8	39
Exposure, Chemical or Biological	0	0	0	1	0	1
Hepatitis C, acute	1	2	0	1	0	2
Invasive Pneumococcal Disease	19	121	11	46	16	73
Lead Poisoning	3	47	8	38	7	47
Legionellosis	0	11	1	6	1	7
Listeriosis	0	0	0	0	0	1
Lyme Disease	1	3	1	3	1	1
Malaria	0	1	0	0	1	2
Meningitis, Aseptic	5	29	1	14	0	3
Meningitis, Bacterial Other	1	8	2	5	0	2
Meningitis, Fungal	1	2	2	4	0	0
RSV	16	1718	6	15	94	681
Rabies, exposure to a rabies susceptible animal	15	49	21	79	29	111
Streptococcal Toxic Shock Syndrome (STSS)	1	9	2	9	1	3