



# Memorandum

**Date:** January 25, 2024

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

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**Subject:** Disease Surveillance & Control Division Monthly Activity Report – **December 2023**

**A. Division of Disease Surveillance and Control**

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

\*This section has been modified to reflect calendar year reporting instead of fiscal year reporting, effective February 2023. This change is in line with MMWR reporting.

	Dec 2022	Dec 2023		YTD 22	YTD 23	
<b>Sexually Transmitted</b>						
Chlamydia	1264	980	↓	12829	12584	↓
Gonorrhea	600	460	↓	6412	5795	↓
Primary Syphilis	13	7	↓	283	222	↓
Secondary Syphilis	34	10	↓	432	309	↓
Early Non-Primary, Non-Secondary <sup>1</sup>	84	28	↓	730	596	↓
Syphilis Unknown Duration or Late <sup>2</sup>	117	49	↓	1485	1404	↓
Congenital Syphilis (presumptive)	7	2	↓	50	50	→
<b>Moms and Babies Surveillance</b>						
HIV Pregnant Cases	2	1	↓	34	34	→
Syphilis Pregnant Cases	17	8	↓	236	293	↑
Perinatally Exposed to HIV	0	1	↑	4	11	↑
<sup>1</sup> Early 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						
<b>Vaccine Preventable</b>						
Haemophilus influenzae, invasive disease	4	4	→	24	31	↑
Hepatitis A	0	2	↑	7	8	↑
Hepatitis B, acute	0	2	↑	20	27	↑
Influenza	486	329	↓	1262	742	↓

	Dec 2022	Dec 2023		YTD 22	YTD 23	
<b>Pertussis</b>	0	3	↑	80	44	↓
<b>Enteric Illness</b>						
<b>Campylobacteriosis</b>	7	2	↓	131	185	↑
<b>Cryptosporidiosis</b>	5	0	↓	18	12	↓
<b>Giardiasis</b>	3	1	↓	46	65	↑
<b>Rotavirus</b>	3	2	↓	133	104	↓
<b>Salmonellosis</b>	11	2	↓	157	194	↑
<b>Shiga toxin-producing Escherichia coli (STEC)</b>	7	2	↓	72	57	↓
<b>Shigellosis</b>	6	3	↓	75	83	↑
<b>Other</b>						
<b>Candida auris</b>	60	12	↓	431	540	↑
<b>Coccidioidomycosis</b>	20	13	↓	160	260	↑
<b>Hepatitis C, acute</b>	1	0	↓	4	5	↑
<b>Invasive Pneumococcal Disease</b>	45	37	↓	220	223	↑
<b>Lead Poisoning</b>	14	3	↓	138	165	↑
<b>Legionellosis</b>	2	0	↓	27	29	↑
<b>Meningitis, aseptic</b>	0	0	→	33	30	↓
<b>Meningitis, Bacterial Other</b>	0	1	↑	10	11	↑
<b>Streptococcal Toxic Shock Syndrome (STSS)</b>	2	0	↓	10	33	↑
<b>New Active TB Cases Counted (&lt;15 yo)</b>	0	0	→	1	2	↑
<b>New Active TB Cases Counted (&gt;= 15 yo)</b>	1	0	↓	50	70	↑

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/ FUP <sup>3</sup>
<b>Chlamydia</b>	12	0	30	0
<b>Gonorrhea</b>	7	0	16	0
<b>Syphilis</b>	88	9	229	1
<b>HIV/AIDS (New to Care/Returning to Care)</b>	45	5	88	0
<b>Tuberculosis</b>	687	0	8	0
<b>TOTAL</b>	839	14	371	1
<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= Investigations initiated from positive labs or reported symptoms <sup>3</sup> OOJ= Investigations initiated Out of Jurisdiction reactors/partners/clusters Fup= Investigations initiated to follow up on previous reactors, partners, or clusters				

3. ACDC COVID-18 CT Staffing and Activities
  - a. Contact Tracers (CTs) – SNHD
    - i. SNHD staff, Current Total: 18
      1. Lead CTs – 4
      2. Contact Tracers; investigators and outreach – 14
  - b. Testing
    - i. Contact tracing team continues to work the College of Southern Nevada (CSN) (2 sites) outreach testing on any testing day, overall >80% CTs rotating to testing sites
    - ii. Strike teams for testing are deployed for outbreak and clusters identified as necessary
    - iii. Vending Machines - providing accessible antigen home kits to vulnerable populations.
    - iv. Coordinating Covid Antigen test kit Distribution through CBO partnerships
  - c. Contact Tracing/Outreach/Outbreak Investigations
    - i. Priorities – CTs prioritize outbreak reports, and reports of multiple cases in settings of high-risk transmissions and vulnerable populations. This may include, but not limited to, detention centers, homeless shelters, daycares, and congregate settings.
4. Disease and Outbreak Investigations
  - a. **Monkeypox:** As of December 27, 2023, Clark County had 309 cases of monkeypox.
  - b. **Influenza:** SNHD started the influenza surveillance for the 2023-2024 season on October 7, 2023. Influenza surveillance for Clark County, Nevada includes data collected from local acute care hospitals and other healthcare providers. Nationwide, seasonal influenza activity is elevated and continued to increase in parts of the country. Statewide, the outpatient respiratory illness activity in Nevada has been increased to a remarkably high level. Locally, as of 12/23/2023, for the 2023 - 2024 influenza season, 244 influenza-associated hospitalizations and 9 deaths associated with influenza were reported. Influenza A has been the dominant type circulating. The influenza surveillance will continue through 5/18/2024.
  - c. **Scabies and Lice:** On December 14, 2023, a local facility reported a potential outbreak affecting a significant number of individuals. This facility sought additional resources from ACDC and other local organizations to manage the situation. Subsequently, on December 28, 2023, a health intervention event was conducted, and treatment was administered to 42% of individuals who tested positive for the condition.

## 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 through SAMHSA’s First Responders-Comprehensive Addiction and Recovery Act (FR-CARA) grant which began on September 30, 2022. 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 December:

Naloxone Distribution	Agency	# Trained	# of Naloxone doses distributed
12/5/2023	Nevada Transportation Authority	22	0
12/6/2023	Merryhill School	15	0
12/7/2023	North Las Vegas Police Department		384
12/13/2023	The Nestled Recovery Center	5	0
12/14/2023	Starbase	0	312
12/14/2023	LV METRO	0	1200
12/14/2023	TINHIIH	0	400
12/14/2023	Immunize Nevada	30	2
12/20/2023	Caesar's Entertainment	50	0
<b>Total</b>		<b>122</b>	<b>2296</b>

- 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 December:

- 12/13/2023 SNHD Ryan White Program (300 Strips)
- 12/28/2023 SNHD Linkage to Action Team (200 Strips)

**6. Prevention - Community Outreach/Provider Outreach/Education**

- a. Ongoing promotion continues of the [Collect2Protect](#) (C2P) program, an online service for those requesting testing for gonorrhea, chlamydia, and at-home HIV test kits. The C2P program allows users to order an at-home HIV test kit conveniently and privately, at no cost and get their results at home. Test kits for chlamydia and gonorrhea are also available for a fee. Express Testing will also be available at SNHD’s main public health center, 280 S. Decatur Blvd., Las Vegas, for those who are asymptomatic and would like to get tested and know their HIV status. 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, and AHF continue to offer ongoing HIV/STD, PrEP/PEP, and rapid stART services to the community.

Free HIV testing is also available from 8 a.m. – 4:30 p.m. at the Southern Nevada Health District, 280 S. Decatur Blvd., Las Vegas, NV 89107 through the Express Testing/Annex A clinic.

- b. ODS has teamed with community partners to participate at outreach events. This month in observance of World AIDS Day on Dec 1<sup>st</sup> we offered rapid testing at the SNHD Fremont campus. As SNHD’s main campus is not open on Fridays, this was a great opportunity to expand this service to our newest site and the surrounding community once again. At this site, HIV rapid and syphilis testing were offered along with information on PrEP/PEP, condoms, and resources for additional services. Our collaboration and presence at events in the community like these is key to gaining community trust and to help destigmatize HIV/STI testing which is vital to ending the HIV epidemic. The ODS MTU is currently out for repair, so outreaches have been facilitated without it.
- c. TB Surveillance developed a laminated flyer titled “Is it TB?.” The content includes messaging that encourages providers to “think TB” when talking to their patients about their risks and symptoms. Additionally, there is reporting information and a QR code that links to the provider education training: <https://lp.constantcontactpages.com/su/p26ucWo/TBRRegistration>

**B. High Impact HIV/STD/Hepatitis Screening Sites**

Testing is currently 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	Dec -22	Dec-23		YTD 22	YTD 23	
Outreach/Targeted Testing	945	556	↓	11745	12156	↑
Clinic Screening (SHC/FPC/TB)	335	282	↓	3717	4040	↑
Outreach Screening (Jails, SAPTA)	93	145	↑	1522	3286	↑
Collect2 Protect	17	0	↓	281	145	↓
<b>TOTAL</b>	<b>1390</b>	<b>983</b>	<b>↓</b>	<b>17265</b>	<b>19627</b>	<b>↑</b>
Outreach/Targeted Testing POSITIVE	12	1	↓	99	64	↓
Clinic Screening (SHC/FPC/TB) POSITIVE	0	0	→	10	10	→
Outreach Screening (Jails, SAPTA) POSITIVE	0	0	→	5	14	↑
Collect2 Protect POSITIVE	0	0	→	0	0	→
<b>TOTAL POSITIVES</b>	<b>12</b>	<b>1</b>	<b>↓</b>	<b>114</b>	<b>88</b>	<b>↓</b>

**C. Staff Facilitated/Attended the following Trainings/Presentations**

1. 12/01/2023: Clark County Children's Mental Health Consortium (CCCMHC) meeting attended by ODS Health Educator Staff as Vice-Chair; ~25 people in attendance from multiple agencies; 2 SNHD ODS staff attendees.
2. 12/06/2023: Presented "Preventing Perinatal HIV: Building on Best Practices" for Obstetrics and Women's Health Project Echo; 25 people in attendance; 3 SNHD ODS Staff attendees.
3. 12/07/2023: Public Health Climate for Health Ambassadors Training; 40 people in attendance; 1 ODS Health Educator attendee.
4. 12/11/2023: Attended "NaRCAD Academic Detailing 101 Techniques Training"; 25 people in attendance; 4 SNHD ODS Staff attendees.
5. 12/12/2023: "Mental Health in Corrections Training" facilitated by ODS Health Educator Staff; 5 people in attendance; 5 SNHD ODS staff attendees.
6. 12/12/2023: "Motivational Interviewing Training" facilitated by ODS Health Educator Staff; 3 people in attendance; 3 SNHD ODS staff attendees.
7. 12/12/2023 – 12/14/2023: Attended Academic Detailing 101 Training; ~30 people in attendance; 2 ODS Health Educator attendees.
8. 12/13/2023: Health Educator Guest Speaker on "A Healthier Tomorrow Radio Show" facilitated by SNHD; 5 people in attendance; 4 SNHD ODS Staff attendees.
9. 12/19/2023: Chaired National Public Health Vending Machine Public Health Vending Machine (PHVM) Collaborative; 50 people in attendance; 1 ODS Health Educator attendee.
10. 12/19/23: Presented a Field Safety Question and Answer for Contact Tracers for ICS; 8 people in attendance; 8 SNHD ODS Staff attendees.
11. 12/19/2023: Spanish Suicide Prevention 101 Workshop attended by ODS Health Educator as a consultant; 8 people in attendance from multiple agencies; 1 SNHD ODS staff attendee.
12. 12/21/2023: Facilitated Naloxone Training - Legacy Counseling and Workforce; 15 people in attendance; 1 ODS Health Educator trainer.

**D. Other**

1. Communicable Disease Statistics: November 2023 disease statistics are attached (see Table 1).

**MONTHLY REPORT – December 2023**

**OFFICE OF INFORMATICS AND EPIDEMIOLOGY (OIE)**

**A. EpiTrax and Data Warehouse**

- a. Work with Epi and Surveillance teams to monitor system and applications, and investigate, review, troubleshoot, and resolve issues. Continuous user account support and form updates.
- b. Continue to update and enhance Data Warehouse- standardize schemas and coded values, update facilities and hospital data.
- c. Pentaho report updates: investigate and correct reported discrepancies to ensure data is correct.

- d. Perform daily task/issue review with Informatics team and weekly review with Epi teams, Surveillance teams and end users. Continuing management of Teams tasks to resolve issues. 293 tasks have been completed.
  - e. Completed closing of 120K EpiTrax COVID cases from Dec 2022 and prior.
  - f. Maintain QA dictionary with updates and modifications, to include question text.
  - g. Second round of Person Deduplication in EpiTrax completed.
  - h. Multiple issues resolved for EpiTrax events with duplicated forms and duplicated data.
- B. Electronic Message Staging Area (EMSA)**
- a. Maintain and enhance systems and provide support to staff.
  - b. Continue to work on EMSA2: mapping new codes, incoming labs, data processing and logic review for exceptions and errors.
  - c. QA for messages from HCA, Desert Springs Hospital, SNPHL.
  - d. Message exception review sessions.
  - e. Onboarded 22 new providers.
- C. Southern Nevada Public Health Laboratory (SNPHL)**
- a. Continue National Respiratory and Enteric Virus Surveillance System (NREVSS) support.
  - b. Interoperate with other internal and external systems. Ongoing interface upkeep with full data clean-up, security updates, and server maintenance. This has been set as a priority as requested by Harvest.
  - c. Continue SNPHL data warehouse cleanup and maintenance.
  - d. Maintain COVID interface between instruments, COVID POD app and Orchard, to include COVID testing and reporting as needed. Implementing combined testing for SNPHL of Covid/Flu for certain testing locations. Modifications will be needed for the current automated processes to support this change. A temporary result delivery system for providers was created based on NPI number and location. System is ready for implementation.
  - e. Continue exploring the acquisition and implementation of the Outreach Module for Orchard to make specimen ordering and result delivery from/to partners more efficient and timelier. Project go-live June 2024.
- D. Electronic Health Record (EHR) System**
- i. Maintain the system for COVID test ordering and COVID vaccination. Configuration modifications to improve charting, reporting efficiency and to accommodate new locations and services.
  - ii. Continue data transfer to Wellpartner on prescription notification from eClinicalWorks (eCW).
  - iii. Discussion on prioritizing projects and tickets with Strategic Account Manager.
  - iv. Continue data extraction and processing using Fast Healthcare Interoperability Resources (FHIR).
  - v. Continue adoption of Azara, the data warehouse/analytics platform.
  - vi. New configurations built for Primary and Preventive Sexual Health Outreach and Prevention Program (PPC-SHOPP), e.g., POC Tests, Resources, and Facilities.
  - vii. Actively engaged in cloud migration of the Electronic Health Record.
  - viii. Planning and preparations for data submission for Uniform Data System (UDS) and Family Planning Annual Report (FPAR).
- E. Clark County Coroner's Office (CCCO)**
- a. Continue to provide support to CCCO on new CME implementation, testing, data requests, and reports. Providing post go-live support.
  - b. Fulfill internal and external data requests using aggregated death data.
  - c. Provide reports and media requests for various agencies.
- F. COVID19 Support**

- a. Maintain COVID interface between instruments, COVID POD app and Orchard, to include COVID testing and reporting as needed.
  - b. Provide support by automating COVID19 hospitalization notifications, demographic extracts, lab tests and treatment information from HIE CCDs for public health surveillance.
  - c. Completed redesign of COVID19 dashboard to match CDC's COVID dashboard layout and data metrics. Updated vaccination data up to December 2023.
  - d. Maintain and enhance COVID19 lab results portal.
  - e. Attend bi-weekly meetings with UNLV for COVID19 race/ethnicity data geocoding and geospatial analysis.
  - f. Bi-weekly upload of State COVID vaccine files.
  - g. Maintenance of data pipeline from Nevada Hospital Association for occupied beds.
- G. API Server**
- i. Continue enhancing API server to extend functionality for internal processes and 3<sup>rd</sup> party app.
  - ii. Development of data import form OCR project into EpiTrax using API. Completed back-end process to generate HL7 messages from lab results, and process through EMSA into EpiTrax.
- H. Data Modernization Initiative (DMI)**
- a. Continue to work with the State on DMI project. Mirth channel set up, mapping EMSA codes, successful test of full data flow into EMSA/EpiTrax.
  - b. eCR project: UMC reporter added to EMSA2 and first set of test messages successful.
  - c. Continue working on OCR project pipeline into EpiTrax using Mongo and web services.
  - d. State GENV2 Generic MMG excel document comparison.
  - e. Continue collaboration with the State on matching data formats for submission to CDC.
  - f. Tested CDC-provided test cases successfully.
- I. National Syndromic Surveillance Platform/Electronic Surveillance System for the Early Notification of Community-Based Epidemics (ESSENCE)**
- a. Continue to maintain and enhance syndromic system for new providers and future support.
  - b. Dignity Health and United Health Services transitioned from Cerner's HealthSentry to Public Health Surveillance platform for public health reporting.
  - c. Planning meeting for upcoming Superbowl event.
  - d. Conducted enhanced surveillance for New Year's Eve
- J. Grant Updates**
- a. Completed ELC ED grant budget.
  - b. Completed the new ELC grants.
  - c. Completed Health Disparity Grant redirect.
  - d. Submitted ELC BP5 QTR 1 report.
- K. Reports**
- i. The following FQHC/Clinical reports were completed and submitted:
    - Reports for Chronic Disease Prevention & Health Promotion
    - PrEP Data and reporting in eCW for EHE.
    - Data reporting, STD Clinic EHE Learning Community Working Group
    - FOCUS reports for September
    - EPI data request RW
    - RSR Completeness Report and annual report for RW Part B
    - DRVS HIV Module + Ryan White Reporting
    - FPNV quarterly report
    - MPOX Immunization All Facility Report revision
    - PrEP reason report for Disease Surveillance



- FQHC Annual Comparison Reports
  - New FP Provider Report
  - FQHC Financial Reporting
  - RN visits reports
  - Weekly Patient Age Group Count report for Office of Preparedness
  - EpiTrax warehouse access
  - SBIRT report for ODTA grant
- ii. Epidemiology Reports:
- COVID-19 trend reports (public and internal versions)
  - Weekly COVID Variants Report updated to include variant data from wastewater surveillance.
  - Data quality reports to support the Office of Disease Surveillance's activities and STD/HIV grant deliverables.
  - Monthly - Drug Overdose Report – Internal
  - Monthly - BOH report
  - Ran daily, biweekly, bimonthly, and monthly COVID reports.
  - Weekly Mpox case and vaccination report
  - Ongoing monthly and quarterly reports for FOCUS HIV grant project
  - Monthly NVDRS, SUDORS and NCLPP reports.
  - Influenza report weekly.
  - Outreach site HIV testing stats-weekly
  - EPT report- weekly
- iii. Other report updates:
- Daily, weekly, and monthly SNPHL reports and upkeep.
  - State NETSS weekly/YTD report
  - Continue working on the Health Southern Nevada, Chronic Disease Dashboard.
  - CSTE/CDC Forecasting Workgroup calls
  - DIIS performance report discussion with ODS

#### L. Training

- i. Staff attended and/or completed the following trainings, conferences, presentations, and webinars:
- Attending EPI OCR working meetings.
  - Nevada Digital Government Summit
  - Attending weekly EMSA learning meetings with Utah.
  - 1 epi staff attended Mountain West HPV Learning Collaborative Meeting (EPI)
  - Five staff members completed the one-year CSTE Data Science Team Training (DSTT) program.
  - Staff attended the Childhood Lead Poisoning Prevention Program Annual Recipient Meeting in Atlanta, GA.
  - Senior Epidemiology Staff attended the DiSC training in December.

#### M. Contracts

- i. Renewed interlocal agreements with Clark County Coroner's Office for NRVDRS SUDORS and SUDI/SDY Registry Grants
- ii. Renewed contract with LVMPD
- iii. Renewed interlocal agreement with Clark County for RWCQM grant.
- iv. Working on contract for Open Enterprise Master Person Index (OpenEMPI)

#### N. Other Projects

- i. Continue to maintain and enhance iCircle web application for OEDS. Continuous user account support, site maintenance, data corrections and updates.
- ii. Continue to meet and work on UNLV Base model project.
- iii. Provided feedback to the IT team related to the new FormsAdmin2 project.
- iv. Assist Epidemiology and Surveillance programs, Office of EMS/Trauma System, Environmental Health, and Clinic Services with various data requests, data exports, and report generation.
- v. Support online sign-up application for Syringe Vending (harm reduction) for Trac-B.
- vi. Working on Women's Health Associates of Southern Nevada (WHASN) ELR feed implementation. Processing Gonorrhea/Chlamydia results via ELR.
- vii. Maintenance of the NHA Data Webservice Script.
- viii. OD2A phase 2, Component B. Currently working on data import of drug testing results.
- ix. Antibigram data from Quest/North Vista Hospital into data warehouse.
- x. Monthly Presentation on Death certificates for Residents doing rotations at SNHD.
- xi. NVCLPPP lead portal data review and quarterly advisory board meeting.
- xii. Finalized the district strategy action plan.
- xiii. Refreshed Vital Records database.
- xiv. Continue working on Healthy Start Project.
- xv. Completed State Hepatitis data submission.
- xvi. Completed Pneumonia and Influenza death data review.



November 2023: Clark County Disease Statistics\*

Disease	2021		2022		2023	
	November	YTD	November	YTD	November	YTD
<b>VACCINE PREVENTABLE</b>						
COVID-19	12592	159514	6727	201367	1566	17922
Haemophilus influenzae, invasive	2	12	2	20	1	27
Hepatitis A	1	2	1	7	0	6
Hepatitis B, acute	1	15	3	20	1	25
Hepatitis B, chronic	52	569	54	721	121	1285
Influenza	8	57	280	776	162	415
Meningococcal disease ( <i>N. meningitidis</i> )	0	0	0	0	0	2
Mumps	0	0	0	1	0	0
Pertussis	4	21	10	80	8	41
RSV	625	1802	2694	5077	698	1619
<b>SEXUALLY TRANSMITTED</b>						
Chlamydia	987	12018	934	11565	959	11603
Gonorrhea	551	6637	477	5812	484	5334
HIV	30	419	37	443	41	452
Stage 3 HIV (AIDS)	15	172	11	167	22	158
Syphilis (Early non-primary, non-secondary)	53	619	73	646	45	569
Syphilis (Primary & Secondary)	58	691	44	668	28	514
<b>CONGENITAL CONDITIONS</b>						
Hepatitis C, Perinatal Infection	0	5	0	0	0	1
Congenital Syphilis	1	29	4	43	2	48
<b>ENTERICS</b>						
Amebiasis	0	2	0	1	0	4
Campylobacteriosis	5	119	12	124	19	183
Cryptosporidiosis	1	14	0	13	0	12
Giardiasis	1	39	5	43	4	64
Rotavirus	2	28	2	130	5	102
Salmonellosis	10	140	11	146	14	193
Shiga toxin-producing <i>E. coli</i> (STEC)	1	51	7	65	6	55
Shigellosis	3	67	5	69	14	81
Vibriosis (Non-cholera <i>Vibrio</i> species infection)	0	3	0	7	1	6
Yersiniosis	1	10	1	7	1	14
<b>OTHER</b>						
Brucellosis	0	0	0	1	0	0
Candida auris	6	8	26	371	20	528
Coccidioidomycosis	21	164	18	140	26	247
Exposure, Chemical or Biological	0	2	0	9	1	2
Hepatitis C, acute	0	2	0	3	0	5
Hepatitis C, chronic	232	3066	178	2753	112	2243
Invasive Pneumococcal Disease	15	103	36	175	21	186
Lead Poisoning	6	89	10	124	7	162
Legionellosis	2	21	2	25	0	29
Listeriosis	1	2	0	4	1	1
Lyme Disease	3	13	2	9	1	8
Malaria	0	2	0	7	0	7
Meningitis, Aseptic	4	32	3	33	0	30
Meningitis, Bacterial Other	2	11	2	10	1	10
Meningitis, Fungal	0	4	0	5	0	0
Q Fever, acute	0	1	0	0	0	0
Rabies, exposure to a rabies susceptible animal	20	248	23	296	17	321
Spotted Fever Rickettsiosis	0	1	1	1	0	0
Streptococcal Toxic Shock Syndrome (STSS)	0	17	2	8	4	33
Tuberculosis (Active)	8	53	4	51	6	68

\*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.

--Hepatitis C, chronic, numbers have changed due to surveillance decisions within the Office of Epidemiology & Disease Surveillance.

---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.

----Please note that COVID-19 disease statistics include CONFIRMED cases only.