



Memorandum

Date: January 25, 2024

To: Southern Nevada District Board of Health

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Subject: Disease Surveillance & Control Division Monthly Activity Report – **November 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.

	Nov 2022	Nov 2023		YTD 22	YTD 23	
Sexually Transmitted						
Chlamydia	934	943	↑	11565	11,586	↑
Gonorrhea	477	480	↑	5812	5331	↓
Primary Syphilis	20	10	↓	270	212	↓
Secondary Syphilis	24	12	↓	398	294	↓
Early Non-Primary, Non-Secondary ¹	73	29	↓	646	549	↓
Syphilis Unknown Duration or Late ²	115	77	↓	1368	1302	↓
Congenital Syphilis (presumptive)	4	1	↓	43	48	↑
Moms and Babies Surveillance						
HIV Pregnant Cases	3	4	↑	32	32	→
Syphilis Pregnant Cases	17	21	↑	219	280	↑
Perinatally Exposed to HIV	1	1	→	4	10	↑
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	2	1	↓	20	27	↑
Hepatitis A	1	0	↓	7	6	↓
Hepatitis B, acute	3	0	↓	20	24	↑
Influenza	280	119	↓	776	372	↓

	Nov 2022	Nov 2023		YTD 22	YTD 23	
Pertussis	10	4	↓	80	33	↓
Enteric Illness						
Campylobacteriosis	12	12	→	124	175	↑
Cryptosporidiosis	0	1	↑	13	13	→
Giardiasis	4	2	↓	42	62	↑
Rotavirus	2	5	↑	130	102	↓
Salmonellosis	11	8	↓	146	186	↑
Shiga toxin-producing Escherichia coli (STEC)	7	4	↓	65	53	↓
Shigellosis	5	6	↑	69	73	↑
Other						
Candida auris	26	17	↓	371	523	↑
Coccidioidomycosis	18	14	↓	140	235	↑
Hepatitis C, acute	0	0	→	3	5	↑
Invasive Pneumococcal Disease	36	19	↓	175	184	↑
Lead Poisoning	10	7	↓	124	163	↑
Legionellosis	2	0	↓	25	29	↑
Meningitis, aseptic	3	0	↓	33	30	↓
Meningitis, Bacterial Other	2	1	↓	10	10	→
Streptococcal Toxic Shock Syndrome (STSS)	2	2	→	8	31	↑
New Active TB Cases Counted (<15 yo)	0	0	→	1	2	↑
New Active TB Cases Counted (>= 15 yo)	3	11	↑	49	74	↑

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	22	0	34	0
Gonorrhea	18	0	23	0
Syphilis	30	3	195	0
HIV/AIDS (New to Care/Returning to Care)	32	15	84	0
Tuberculosis	16	0	15	0
TOTAL	118	18	351	0

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. 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 November 30, 2023, Clark County had 307 cases of monkeypox.
 - b. **Influenza:** SNHD started the influenza surveillance for the 2023-2024 season on October 7, 2023, and will continue through May 18, 2024. Weekly surveillance reports will be distributed throughout this period containing information on influenza cases provided by local hospitals and health care providers to SNHD. As of 11/25/2023, for the 2023 - 2024 influenza season, 87 influenza-associated hospitalizations and 3 deaths associated with influenza were reported in Clark County.

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 November:

Naloxone Distribution	Agency	# of Naloxone doses distributed
11/1/2023	Summit View Youth Center	48

11/1/2023	City of Henderson	400
11/1/2023	Sober Testing Services	300
11/1/2023	Planned Parenthood	200
11/1/2023	Caesar's Entertainment	400
11/1/2023	Fremont St Experience	20
11/1/2023	Breaking the Cycle Drug Court	100
11/2/2023	Wynn	400
11/2/2023	Desert Hope (American Addiction Ctr)	300
11/2/2023	Las Vegas City Attorney's Office - Criminal Division	72
11/2/2023	Happy Campers	150
11/2/2023	Catholic Charities	50
11/9/2023	TINHIIH	400
11/13/2023	CCDC (LVMPD)	200
11/15/2023	Toni's House	600
11/16/2023	Zoox	6
11/22/2023	Las Vegas Convention and Visitor's Authority	40
11/27/2023	City of Las Vegas Dept of Public Safety	60
Total		3746

- 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 November:

- 11/06/2023 Roseman University (100 Strips)
- 11/15/2023 Shine a Light (2400 Strips)
- 11/22/2023 SNHD Health Education (600 Strips)
- 11/22/2023 Trac-B/Impact Exchange (300 Strips)
- 11/21/2023 The Center (300 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 we attended Project Homeless Connect at the Cambridge Community Center and the Moapa Valley Community Resource Fair at the Clark County Fairgrounds in Logandale, NV. At these sites, 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	Nov -22	Nov-23		YTD 22	YTD 23	
Outreach/Targeted Testing	1125	916	↓	10,800	11,522	↑
Clinic Screening (SHC/FPC/TB)	434	260	↓	3382	3665	↑
Outreach Screening (Jails, SAPTA)	81	257	↑	1429	3140	↑
Collect2 Protect	20	7	↓	264	143	↓
TOTAL	1660	1440	↓	15875	18327	↑
Outreach/Targeted Testing POSITIVE	10	2	↓	87	61	↓
Clinic Screening (SHC/FPC/TB) POSITIVE	0	0	→	10	9	↓
Outreach Screening (Jails, SAPTA) POSITIVE	1	1	→	5	13	↑
Collect2 Protect POSITIVE	0	0	→	0	0	→
TOTAL POSITIVES	11	3	↓	102	83	↓

C. Staff Facilitated/Attended the following Trainings/Presentations

- 1. 11/01/2023: “Mental Health First Aid for Youth” facilitated by ODS Health Educator Staff; 10 people in attendance; 3 SNHD ODS staff attendees.
- 2. 11/01/2023 – 11/02/2023: Attended and presented at NAMI Annual Education Conference: Sparking Change; ~200 people in attendance; 1 ODS Health Educator attendee.

3. 11/03/2023: 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 attendee.
4. 11/03/2023: Presented to UNLV OBGYN Residents on Congenital Syphilis and Perinatal HIV; 30 people in attendance; 2 ODS Staff attendees.
5. 11/07/2023: Facilitated Naloxone Training - SNHD Clinical Staff; 18 people in attendance; 1 ODS Health Educator attendee.
6. 11/09/2023: Facilitated Naloxone Training – There is No Hero in Heroin TINHIH; 16 people in attendance; 1 ODS Health Educator attendee.
7. 11/09/2023: Facilitated and met with Salt Lake City Department of Health to discuss Community Health Assessment initiatives; 2 people in attendance; 1 ODS Health Educator attendee.
8. 11/09/2023: Latinx Steering Committee meeting attended by ODS Health Educator as a representative; 16 people in attendance from multiple agencies; 2 SNHD ODS staff attendees.
9. 11/09/2023: UNLV Harm Reduction in Action Presentation facilitated by ODS Health Educator; 9 people in attendance; 1 ODS Health Educator attendee.
10. 11/13/23: Presented “Preventing Perinatal HIV: Building on Best Practices” to 39 UNLV School of Nursing Students; 1 ODS Health Educator attendee.
11. 11/13/2023 – 11/16/2023: “TB Manager’s Intensive Training” facilitated by Curry Center Of Excellence; 1 ODS Communicable Disease Supervisor attended.
12. 11/14/2023: Clark County Children’s Mental Health Consortium (CCCMHC) Public Awareness Workgroup meeting attended by ODS Health Educator Staff as a representative; ~11 people in attendance from multiple agencies; 2 SNHD ODS staff attendee.
13. 11/14/2023: Harm Reduction 101 Training facilitated by ODS Health Educators; 11 people in attendance; 2 ODS Health Educators attendee.
14. 11/15/2023: Southern Nevada Health Consortium Meeting facilitated by the Southern Nevada Health Consortium; 20 people in attendance; 2 ODS Health Educator attendees.
15. 11/15/2023: ODTA Community Needs Assessment facilitated by NICRP; 12 people in attendance; 3 ODS Health Educator attendees.
16. 11/15/2023: Chaired SURG Prevention Subcommittee Meeting; 23 people in attendance; 1 ODS Health Educator attendee.
17. 11/15/2023: Facilitated Naloxone Training - Toni's House; 7 people in attendance; 1 ODS Health Educator attendee.
18. 11/16/2023: Facilitated Naloxone Training – Zoox; 11 people in attendance; 1 ODS Health Educator attendee.
19. 11/16/2023 – 11/17/2023: National Overdose Prevention Leadership Summit facilitated by San Diego Substance Use and overdose Prevention Taskforce attended by ODS Health Educator Staff; ~250 people in attendance from multiple agencies; 2 SNHD ODS staff attendee.
20. 11/21/2023: Tabled at Project Homeless Connect hosted by Nevada Homeless Alliance; ~100 people in attendance; 3 ODS Health Educator attendees.
21. 11/22/2023: Facilitated Naloxone Training - Las Vegas Convention and Visitors Authority; 4 people in attendance; 1 ODS Health Educator attendee.
22. 11/27/2023: Harm Reduction Technical Assistance facilitated by PACT; 6 people in attendance; 2 ODS Health Educator attendees.

23. 11/28/2023: "SafeTALK Suicide Prevention" training facilitated by ODS Health Educator Staff; 12 people in attendance; 2 SNHD ODS staff attendees.
24. 11/28/2023: Facilitated Harm Reduction 201 Training; 6 people in attendance; 2 ODS Health Educator attendees.
25. 11/29/2023: Facilitated Naloxone Training - Merryhill School; 3 people in attendance; 1 ODS Health Educator attendee.
26. 11/29/2023: Facilitated Southern Nevada HIV Prevention Planning Group Meeting; 30 people in attendance; 2 ODS Health Educator attendees.
27. 11/29/2023: Attended National Black HIV AIDS Awareness Day Meeting; facilitated by the Southern Nevada Health Consortium; 6 people in attendance; 1 ODS Health Educator attendee.
28. 11/30/2023: Facilitated Naloxone Training - Tropicana Hotel; 7 people in attendance; 1 ODS Health Educator attendee.

D. Other

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

MONTHLY REPORT – November 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, and standardize event_type column values in all tables.
- 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. 285 tasks have been completed.
- e. Maintain QA dictionary with updates and modifications, to include question text.
- f. First round of Person Deduplication in EpiTrax completed.

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. Updated routing logic for Hepatitis B, Influenza, Candida Auris, Tuberculosis.
- d. Message exception review sessions.
- e. Onboarded 19 new providers in November.

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 working on Laboratory Response Network- Biological Agents (LRN-B) automated delivery interface to CDC. Continue meetings with CDC and LRN staff to complete this project. Sending HL7 messages to CDC for validation.

- d. Continue SNPHL data warehouse cleanup and maintenance.
- e. 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.
- f. 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. eCW Migration to cloud completed. Post go-live support.
- vi. Continue adoption of Azara, the data warehouse/analytics platform.
- vii. New configurations built for Primary and Preventive Sexual Health Outreach and Prevention Program (PPC-SHOPP), e.g., POC Tests, Resources, and Facilities.
- viii. HPV Survey Patient Consent build.
- ix. Actively engaged in cloud migration of the Electronic Health Record.
- x. 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 3rd party app.
- ii. Development of data import form OCR project into EpiTrax using API.
- iii. Implemented Encounter creation/update into EpiTrax API.

H. Data Modernization Initiative (DMI)

- a. Continue to work with the State on DMI project. Mirth channel set up and mapping EMSA codes.

- b. eCR – mapping of EMSA2 codes for incoming messages underway. EpiTrax NMI module configured. Generation of HL7 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.
- 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 Formula 1.
- 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
- Wrap up closeout reports for ODTA, Prepare ODTA 2.0 work plan and evaluation planning for Component B.
- Created and distributed Internal Fall 2023 COVID vaccine report.
- iii. Other report updates:
 - Daily, weekly, and monthly SNPDL 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.
 - Attending weekly EMSA learning meetings with Utah.
 - 2 Epidemiology staff attended Media Training from the Office of Communications.
 - 1 staff attended the 2023 Administrative Professionals Conference

M. Contracts

- i. Renewed interlocal agreement with Clark County for RWCQM grant.
- ii. 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. Assist Epidemiology and Surveillance programs, Office of EMS/Trauma System, Environmental Health, and Clinic Services with various data requests, data exports, and report generation.
- iv. Support online sign-up application for Syringe Vending (harm reduction) for Trac-B.
- v. Working on Women's Health Associates of Southern Nevada (WHASN) ELR feed implementation. Processing Gonorrhea/Chlamydia results via ELR.
- vi. Maintenance of the NHA Data Webservice Script.
- vii. Monthly Presentation on Death certificates for Residents doing rotations at SNHD.
- viii. NVCLPPP lead portal data review and quarterly advisory board meeting.
- ix. Assist with planning enhanced surveillance for the Formula 1 event in November 2023 and Superbowl in February 2024.
- x. Finalized the district strategy action plan.
- xi. Began Health Disparities dashboard platform discussions.
- xii. Refreshed Vital Records database.
- xiii. Continue working on Healthy Start Project.
- xiv. Participated in Full Scale Exercise – Spores Bowl
- xv. Completed State Hepatitis data submission.
- xvi. Completed Pneumonia and Influenza death data review.



September 2023: Clark County Disease Statistics*

Disease	2021		2022		2023	
	September	YTD	September	YTD	September	YTD
VACCINE PREVENTABLE						
COVID-19	15,120	135,235	2,641	190,637	1,348	14,884
Haemophilus influenzae, invasive	2	9	2	15	4	25
Hepatitis A	0	1	0	6	0	6
Hepatitis B, acute	1	13	1	17	2	20
Hepatitis B, chronic	42	451	80	604	153	1,035
Influenza	3	47	4	476	12	206
Meningococcal disease (<i>N. meningitidis</i>)	0	0	0	0	2	2
Pertussis	1	13	13	63	7	24
RSV	343	695	156	1,151	52	761
SEXUALLY TRANSMITTED						
Chlamydia	970	9,951	1,023	9,591	1,077	9,573
Gonorrhea	565	5,532	503	4,777	463	4,298
HIV	41	353	51	360	43	367
Stage 3 HIV (AIDS)	16	146	25	141	12	115
Syphilis (Early non-primary, non-secondary)	66	515	56	491	38	466
Syphilis (Primary & Secondary)	48	562	66	556	46	440
CONGENITAL CONDITIONS						
Hepatitis C, Perinatal Infection	0	3	0	0	0	1
Congenital Syphilis	3	24	1	36	6	42
ENTERICS						
Amebiasis	0	2	0	1	2	4
Campylobacteriosis	4	106	11	94	13	141
Cryptosporidiosis	2	13	0	12	4	10
Giardiasis	6	31	4	36	3	48
Rotavirus	0	22	1	126	7	96
Salmonellosis	11	117	16	122	18	157
Shiga toxin-producing <i>E. coli</i> (STEC)	5	49	3	54	4	41
Shigellosis	3	56	6	54	9	59
Vibriosis (Non-cholera <i>Vibrio</i> species infection)	0	2	0	5	1	4
Yersiniosis	0	8	0	6	0	11
OTHER						
Brucellosis	0	0	0	1	0	0
Coccidioidomycosis	13	126	15	108	24	202
Exposure, Chemical or Biological	0	2	0	9	0	1
Hepatitis C, acute	0	2	0	2	0	3
Hepatitis C, chronic	280	2,560	239	2,336	134	2,048
Invasive Pneumococcal Disease	7	81	10	126	9	149
Lead Poisoning	8	79	7	97	8	125
Legionellosis	2	16	3	22	4	28
Listeriosis	0	0	0	3	0	0
Lyme Disease	0	10	1	6	1	7
Malaria	0	1	1	7	0	7
Meningitis, Aseptic	3	26	7	25	5	24
Meningitis, Bacterial Other	1	8	0	6	3	8
Meningitis, Fungal	0	4	2	5	0	0
Q Fever, acute	0	1	0	0	0	0
Rabies, exposure to a rabies susceptible animal	30	203	20	250	23	263
Spotted Fever Rickettsiosis	0	1	0	0	0	0
Streptococcal Toxic Shock Syndrome (STSS)	0	17	0	5	1	26
Tuberculosis (Active)	3	38	5	44	7	54

*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.



Quarter 3, 2023: Clark County Disease Statistics*

| Disease | 2021 | | 2022 | | 2023 | | Rate (Cases per 100,000 per quarter) | | Quarter Rate Comparison |
|---|-------|------|-------|------|-------|------|--------------------------------------|--------------|-----------------------------------|
| | Qtr 3 | YTD | Qtr 3 | YTD | Qtr 3 | YTD | Qtr 3 (2018-2022 aggregated) | Qtr 3 (2023) | Change b/t current & past 5-year? |
| VACCINE PREVENTABLE | | | | | | | | | |
| Haemophilus influenzae, invasive | 7 | 9 | 7 | 15 | 6 | 25 | 0.12 | . | ↑ |
| Hepatitis A | 0 | 1 | 3 | 6 | 3 | 6 | 0.22 | . | ↓ |
| Hepatitis B, acute | 4 | 13 | 3 | 17 | 8 | 20 | 0.10 | . | ↑ |
| Hepatitis B, chronic | 159 | 451 | 214 | 604 | 421 | 1035 | 4.77 | 5.80 | ↓X |
| Influenza | 10 | 47 | 23 | 476 | 50 | 206 | 0.38 | 0.69 | ↓X |
| Meningococcal disease (<i>N. meningitidis</i>) | 0 | 0 | 0 | 0 | 2 | 2 | . | . | ↑ |
| Mumps | 0 | 0 | 1 | 1 | 0 | 0 | . | . | ↓ |
| Pertussis | 7 | 13 | 19 | 63 | 13 | 24 | 0.23 | 0.18 | ↑ |
| SEXUALLY TRANSMITTED | | | | | | | | | |
| Chlamydia | 3171 | 9950 | 3288 | 9591 | 3309 | 9573 | 93.07 | 45.58 | ↓X |
| Gonorrhea | 1855 | 5531 | 1575 | 4777 | 1456 | 4298 | 42.50 | 20.06 | ↓X |
| HIV | 121 | 348 | 131 | 335 | 120 | 367 | 2.76 | 1.65 | ↑ |
| Stage 3 HIV (AIDS) | 50 | 145 | 38 | 115 | 42 | 115 | 0.97 | 0.58 | ↑ |
| Syphilis (Early non-primary, non-secondary) | 184 | 515 | 190 | 491 | 161 | 466 | 3.60 | 2.22 | ↑ |
| Syphilis (Primary, Secondary) | 174 | 562 | 207 | 556 | 151 | 440 | 4.63 | 2.08 | ↓X |
| CONGENITAL CONDITIONS | | | | | | | | | |
| Hepatitis C, Perinatal Infection | 1 | 3 | 0 | 0 | 0 | 1 | . | . | ↓ |
| Congenital Syphilis | 7 | 24 | 7 | 36 | 12 | 42 | 0.245912 | 0.1653 | ↑ |
| ENTERICS | | | | | | | | | |
| Amebiasis | 0 | 2 | 0 | 1 | 3 | 4 | . | . | ↑ |
| Campylobacteriosis | 26 | 106 | 41 | 94 | 45 | 141 | 1.01 | 0.62 | ↑ |
| Cryptosporidiosis | 8 | 13 | 3 | 12 | 5 | 10 | 0.14 | . | ↓ |
| Giardiasis | 13 | 31 | 16 | 36 | 16 | 48 | 0.37 | 0.22 | ↑ |
| Rotavirus | 8 | 22 | 5 | 126 | 33 | 96 | 0.18 | 0.45 | ↓X |
| Salmonellosis | 33 | 117 | 43 | 122 | 60 | 157 | 1.38 | 0.83 | ↑ |
| Shiga toxin-producing <i>E. coli</i> (STEC) | 22 | 49 | 10 | 54 | 18 | 41 | 0.29 | 0.25 | ↑ |
| Shigellosis | 15 | 56 | 27 | 54 | 22 | 59 | 0.53 | 0.30 | ↑ |
| Vibriosis (Non-cholera <i>Vibrio</i> species infection) | 2 | 2 | 5 | 5 | 2 | 4 | 0.06 | . | ↓ |
| Yersiniosis | 1 | 8 | 3 | 6 | 3 | 11 | . | . | ↑ |
| OTHER | | | | | | | | | |
| Coccidioidomycosis | 34 | 126 | 42 | 108 | 64 | 202 | 0.94 | 0.88 | ↑ |
| Encephalitis | 1 | 1 | 6 | 13 | 0 | 0 | . | . | ↓ |
| Exposure, Chemical or Biological | 1 | 2 | 8 | 9 | 0 | 1 | 0.06 | . | ↓ |
| Hepatitis C, acute | 0 | 2 | 0 | 2 | 2 | 3 | 0.07 | . | ↓ |
| Hepatitis C, chronic | 872 | 2560 | 756 | 2336 | 434 | 2048 | 24.43 | 5.98 | ↓X |
| Invasive Pneumococcal Disease | 25 | 81 | 23 | 126 | 25 | 149 | 0.58 | 0.34 | ↑ |
| Lead Poisoning | 25 | 79 | 25 | 97 | 35 | 125 | 0.69 | 0.48 | ↑ |
| Legionellosis | 7 | 16 | 7 | 22 | 10 | 28 | 0.16 | . | ↑ |
| Listeriosis | 0 | 0 | 0 | 3 | 0 | 0 | . | . | ↓ |
| Lyme Disease | 5 | 10 | 3 | 6 | 7 | 7 | 0.07 | . | ↑ |
| Malaria | 1 | 1 | 4 | 7 | 0 | 7 | 0.07 | . | ↓ |
| Meningitis, Aseptic | 6 | 26 | 17 | 25 | 15 | 24 | 0.42 | 0.21 | ↓X |
| Meningitis, Bacterial Other | 3 | 8 | 3 | 6 | 6 | 8 | 0.12 | . | ↑ |
| Meningitis, Fungal | 0 | 4 | 5 | 5 | 0 | 0 | . | . | ↓ |
| RSV | 633 | 695 | 273 | 1151 | 98 | 761 | 5.01 | 1.35 | ↓X |
| Spotted Fever Rickettsiosis | 0 | 1 | 0 | 0 | 0 | 0 | . | . | ↓ |
| Streptococcal Toxic Shock Syndrome (STSS) | 1 | 17 | 2 | 5 | 9 | 26 | 0.09 | . | ↑ |
| Tuberculosis, Active | 8 | 38 | 15 | 44 | 16 | 54 | 0.33 | 0.22 | ↑ |

*Use of illness onset date in data aggregation for cases other than STD or TB (since Jan-2013) causes changes in cases reported here from previously released reports. Numbers are provisional including confirmed, probable, and suspect cases that are reportable to CDC. HIV/AIDS/TB case counts are provided on a quarterly basis. Rate suppression denoted by '.' for rates corresponding to case counts < 12.

-Diseases not reported in the past five years (aggregate data) and not reported during the current reporting period are not included in this report.

0--Confidence intervals (not shown) for the quarterly disease incidence rates provided a basis for an informal statistical test to determine if the current quarterly rates changed significantly from those of the previous 5-year aggregated rates. Green text represents rates that decreased significantly, whereas red text represents rates that increased significantly. Statistically significant changes are indicated by 'X.'