



Commonwealth Healthcare Corporation

CNMI Weekly Syndromic Surveillance Report



EPI WEEK 3

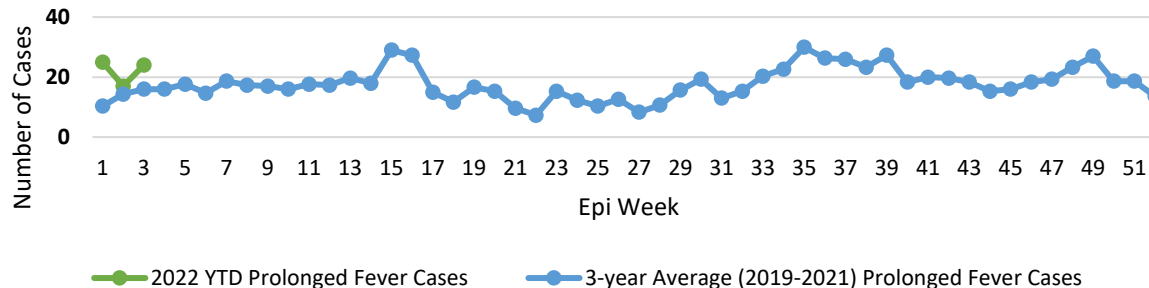
EPI WEEK DATE: January 16, 2022 – January 22, 2022

Clinic	Influenza-Like-Illness (ILI)		Diarrhea (DIA)		Prolonged Fever (PF)		Acute Fever and Rash (AFR)		Total Encounters	
	Last week	Current week	Last week	Current week	Last week	Current week	Last week	Current week	Last week	Current Week
CHCC Family Care Clinic	0	0	1	0	1	0	0	0	203	216
CHCC Women's Clinic	0	0	0	0	0	0	0	0	113	116
CHCC Children's Clinic	1	2	2	0	0	4	0	0	115	141
CHCC Emergency Room	6	14	5	4	4	17	1	0	262	481
Kagman Isla Community Health	0	0	0	0	1	0	0	0	186	180
Tinian Isla Community Health	0	0	0	0	0	0	0	0	28	32
CHCC Tinian Health Center	0	0	0	1	0	0	0	0	82	71
CHCC Rota Health Center	0	1	1	1	0	3	0	0	79	99
	7	17	9	6	6	24	1	0	1068	1336

KEY TAKEAWAYS

- **20% increase in total encounter cases** was seen this epi week (#3) compared to last epi week (#2).
- **96% increase in influenza like illness cases** was seen this epi week (#3) compared to the average of the previous 3 epi weeks (#52, 1 & 2).
- **14% increase in Prolonged fever cases** was seen this epi week (#3) compared to the average of the previous 3 epi weeks (#52, 1 & 2).

Total Number of Prolonged Fever Cases Reported at CNMI Sentinel Sites by Epi Week, 2022



ALERTS AND TRENDS

- ILI: Increase from previous week
- PF: Increase from previous week
- AFR: Stable from previous week
- DIA: Decrease from previous week

Syndromes	Epi Week				% Change from current week to previous 3 weeks
	3	2	1	52	
Acute Fever and Rash	0	1	1	0	Unstable
Prolonged fever	24	17	25	21	14%
Influenza-like illness	17	7	12	7	96%
Diarrhea	6	9	12	8	-38%

ANTIMICROBIAL RESISTANT SURVEILLANCE	
Site	Total Organisms
CHCC- ER	1
Total Counts	5
Rate per 10,000 outpatient encounters	37.4



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POLY-SUBSTANCE*	
PS OD	PS MISUSE
0	0

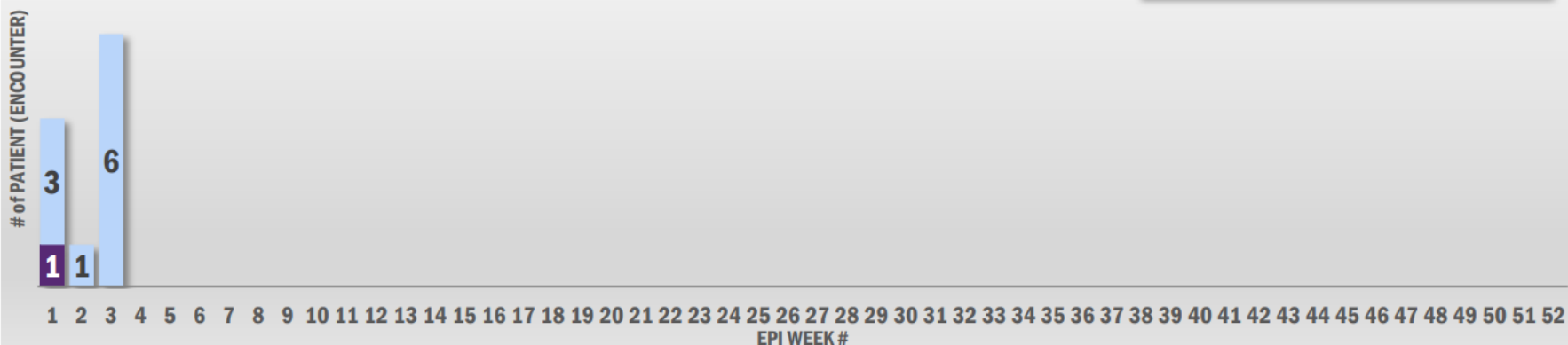
OPIOID				
OP OD	OD	S/P OD	OP MISUSE	S/P OP MISUSE
0	0	0	3	0

STIMULANT				
ST OD	SUD	S/P SUD	ST MISUSE	S/P ST MISUSE
0	0	0	3	0

OTHER
OS OD
0

*Poly-Substance encounters are also counted under respective categories.

OD2A: OPIOID & STIMULANT SURVEILLANCE PATIENT ENCOUNTER by EPI WEEK 2022



■ FATAL OVERDOSE
■ NON-FATAL OVERDOSE
■ SUBSTANCE USE DISORDER or MISUSE

ACRONYMS			
FATAL / NON-FATAL CASE		OUD, SUD or MISUSE	Confirmed Poly-Substance Misuse
PS OD	Poly-Substance Overdose		Confirmed Opioid Use Disorder or Opioid Misuse
OP OD	Opioid Overdose		Confirmed Stimulant Use Disorder or Stimulant Misuse
ST OD	Stimulant Overdose	S/P OUD, SUD or MISUSE	Suspected Opioid Use Disorder or Opioid Misuse
OS OD	Other Substance Overdose		Suspected Stimulant Use Disorder or Stimulant Misuse

REPORTING SITE:

ED - Emergency Department, CHCC;
CC - Children's Clinic, CHCC; **FCC** - Family Care Clinic, CHCC;
WC - Women's Clinic, CHCC;
THC - Tinian Health Clinic, CHCC; **RHC** - Rota Health Center, CHCC;
KICH - Kagman Isla Community Health; **TICH** - Tinian Isla Community Health



Overdose Data to Action Program Suite 305, Marina Heights II Building
P.O. Box 500409, Saipan, MP 96950
Telephone: (670) 322-0061 Email: cnmi2a@chcc.gov.mp



Commonwealth Healthcare Corporation

CNMI Weekly Notifiable Disease Report



EPI WEEK 3

EPI WEEK DATE: January 16, 2022 – January 22, 2022

In the table below, weekly and year to date counts are displayed through epi week 2. Additionally, a 3-year weekly average of incident counts comparing the incident count for this time period to the average of the previous 3 years (2018-2020) is included as well as incident rates for conditions that have counts greater than 20. Rates cannot be calculated for counts less than 20 due to statistical unreliability.

Condition	Epi Week 2*	2022 YTD	3-year weekly average incident counts	2022 YTD Incident Rate*	2021 Incident Rate*
Enteric					
Campylobacter	0	0	0		
Ciguatera fish poisoning	0	0	0		
Salmonella	1	1	0		
Environmental					
Elevated Blood Lead Levels	0	0	0		
Sexually Transmitted					
Chlamydia	4	15	5	10.6	400.7
Gonorrhea	2	4	0	4.2	32.9
Syphilis	0	0	0	0	5.8
Respiratory					
COVID-19	297	708	0*	868.4	6,190.6
Post-Vaccine	201	448**			
Tuberculosis					
TB, Confirmed	0	0	0	0.0	44.6
TB, Under Investigation	1	19			

*Rate per 100,000; Data are preliminary and subject to change. CNMI population estimates were determined using 2021 Census International Database (https://www.census.gov/data-tools/demo/idb/#/country?YR_ANIM=2021&COUNTRY_YR_ANIM=2021&FIPS_SINGLE=CQ)



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CNMI Weekly COVID-19 Surveillance Report



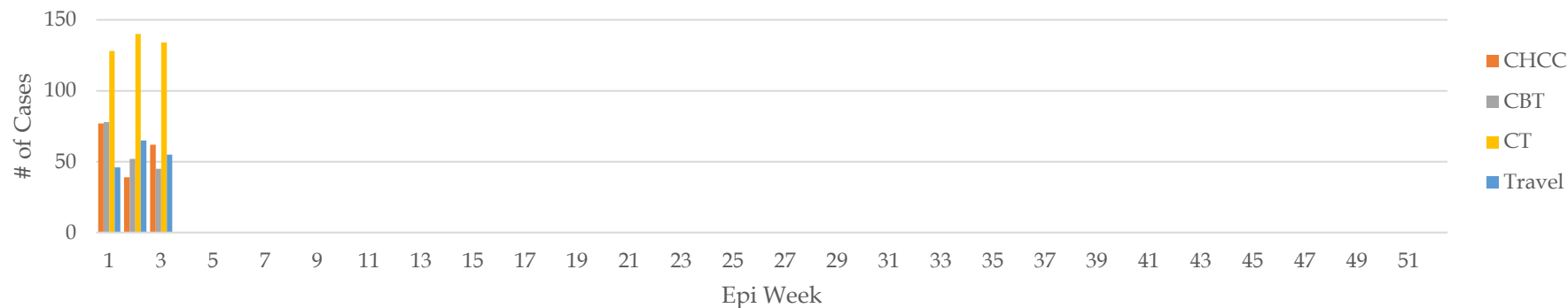
REPORTING PERIOD: EPI YEAR 2022 as of EPI WEEK 3

For additional COVID-19 data, please visit this link: <https://chcc.datadriven.health/ui/99/dashboard/cbaeede2-4f75-11eb-b380-0242ac1d004a>

Covid-19 Cases Reported, January 02, 2022 - January 22, 2022



Covid-19 Diagnoses Source, January 02, 2022 - January 22, 2022



For **COVID-19 vaccination data**, please visit this link: <https://www.vaccinatecnmi.com/vax-dashboard/>

*Data are preliminary and subject to change.



Commonwealth Healthcare Corporation

CNMI Weekly Health & Vital Statistics Report



REPORTING PERIOD: EPI YEAR 2022 as of EPI WEEK 3

The statistics on births, deaths, and causes of deaths in this report are derived from birth and death registrations processed daily at the Health and Vital Statistics Office.

<ul style="list-style-type: none">• Number of births: <u>8 (28)</u>• Average: <u>9 (per week)</u>• Infections present and/or treated during pregnancy:<ul style="list-style-type: none">○ Chlamydia: <u>0 (0)</u>○ Gonorrhea: <u>0 (0)</u>○ Syphilis: <u>0 (0)</u>○ Hepatitis B: <u>0 (0)</u>○ Hepatitis C: <u>0 (0)</u>○ COVID-19: <u>2 (3)</u>• Substance use during pregnancy:<ul style="list-style-type: none">○ Cigarette smoking: <u>0 (0)</u>○ Betelnut chewing: <u>2 (8)</u>○ Betelnut chewing + tobacco: <u>2 (8)</u>○ Alcohol use: <u>0 (0)</u>○ Drug use: <u>0 (0)</u>• Maternal risk factors in pregnancy:<ul style="list-style-type: none">○ Pre-pregnancy DM: <u>0 (2)</u>○ Gestational DM: <u>2 (6)</u>○ Pre-pregnancy HTN: <u>0 (0)</u>○ Gestational HTN: <u>0 (3)</u>	<ul style="list-style-type: none">• Number of deaths: <u>6 (23)</u>• Average: <u>8 (per week)</u>• Number of deaths who received COVID-19 vaccine:<table><tr><th>Age range:</th><th>< 5</th><th>≥ 5</th><th>12-17</th><th>18 & over</th></tr><tr><td>N° of death</td><td>0 (1)</td><td>0 (0)</td><td>0 (0)</td><td>6 (22)</td></tr><tr><td>N° Vaccinated</td><td>N/A</td><td>0 (0)</td><td>0 (0)</td><td>6 (14)</td></tr><tr><td>% Vaccinated</td><td>N/A</td><td>0%</td><td>0%</td><td>64%</td></tr></table>• Note 1: On 11/6/2021, children aged 5 & over are eligible to receive the COVID-19 vaccine in the CNMI.• COVID-19 related deaths: <u>1 (8)</u><ul style="list-style-type: none">○• Opioid related deaths: <u>0 (0)</u>• Top 5 Leading Causes of Death:<ul style="list-style-type: none">○ Codes for special purposes (COVID-19): <u>1 (7)</u>○ Diseases of the circulatory system: <u>4 (7)</u>○ Neoplasms: <u>0 (2)</u>○ External causes of mortality: <u>1 (2)</u>○ All other causes: <u>0 (5)</u>	Age range:	< 5	≥ 5	12-17	18 & over	N° of death	0 (1)	0 (0)	0 (0)	6 (22)	N° Vaccinated	N/A	0 (0)	0 (0)	6 (14)	% Vaccinated	N/A	0%	0%	64%
Age range:	< 5	≥ 5	12-17	18 & over																	
N° of death	0 (1)	0 (0)	0 (0)	6 (22)																	
N° Vaccinated	N/A	0 (0)	0 (0)	6 (14)																	
% Vaccinated	N/A	0%	0%	64%																	

Vital events reported, January 2 - January 22, 2022

