Commonwealth Healthcare Corporation

CNMI Weekly Syndromic Surveillance Report

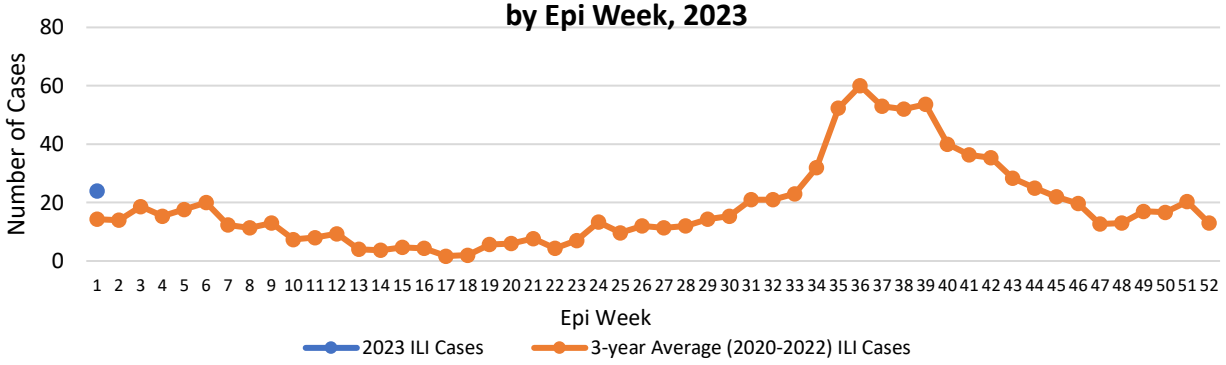
EPI WEEK 01 **EPI WEEK DATE:** January 01 - January 07, 2023

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	0	2	1	0	0	0	271	302
CHCC Women's Clinic	0	0	0	0	0	0	0	0	84	88
CHCC Children's Clinic	8	5	0	1	0	0	0	0	198	186
CHCC Emergency Room	14	15	12	6	6	5	0	0	478	426
Kagman Isla Community Health	1	0	0	0	0	0	0	0	191	191
Tinian Isla Community Health	1	0	0	0	0	0	0	0	22	18
CHCC Tinian Health Center	6	4	0	0	0	1	0	0	107	87
CHCC Rota Health Center	0	0	0	1	0	1	0	0	70	81
	30	24	12	10	7	7	0	0	1421	1379

KEY TAKEAWAYS

- **3% Decrease** in **Total Encounters** from the last epi week to the current epi week.
- **32% Decrease** in **Diarrhea cases** were seen this epi week (#01) compared to the average of the previous 3 epi weeks (#52, 51, & 50).
- **28% Decrease** in **Influenza-like cases** were seen this epi week (#01) compared to the average of the previous 3 epi weeks (#52, 51, & 50).

Total Number of Influenza-like Illness (ILI) Cases Reported in the CNMI by Epi Week, 2023



ALERTS AND TRENDS

ILI: Decrease from previous week

PF: Stable from previous week

AFR: Stable from previous week

DIA: Decrease from previous week

Syndromes	Epi Week 01	52	51	50	% Change from current week to previous 3 weeks	COVID Hospitalizations: Date Range	COVID Hospitalizations: Totals
Acute Fever and Rash	0	0	0	0	*Unstable*	January 01 – January 07, 2023	2
Prolonged fever	7	7	7	5	11%	December 25 – December 31, 2022	2
Influenza-like illness	24	30	41	29	-28%	**11/09/2021 – 01/07/2023**	**280**
Diarrhea	10	12	15	17	-32%		

Commonwealth Healthcare Corporation

CNMI Weekly OD2A Surveillance Report

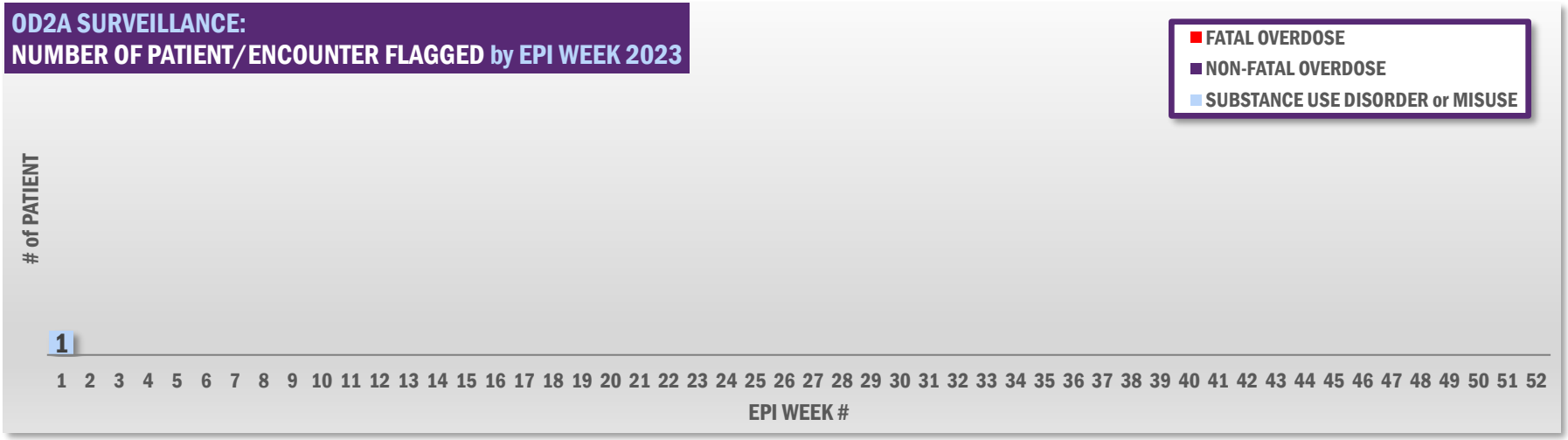
EPI WEEK 1 | EPI WEEK DATE: JANUARY 1 – JANUARY 7, 2023

WEEKLY CASE COUNTS

POLYSUBSTANCE		OPIOID			STIMULANT			BENZODIAZEPINE			OTHER SUBSTANCE
OVERDOSE	MISUSE	OVERDOSE	OUD	MISUSE	OVERDOSE	SUD	MISUSE	OVERDOSE	BUD	MISUSE	OVERDOSE
0	0	0	0	0	0	0	0	0	0	1	0

NOTE: The encounters have been monitored since 2020. Some individuals might be involved in multiple cases or flagged multiple times for the same type of encounter in a single EPI week. The OD2A Surveillance has expanded to include Stimulant and Polysubstance cases in 2021, Benzodiazepine cases in 2022. The Polysubstance cases are also counted under respective categories. Prior cases of any overdose related encounters might be duplicated under Other Substance Overdose category. Other Substance category analysis is solely depending on indications from the providers' notes. The substances reported are not verified by NDC number or DEA substance database.

OD2A SURVEILLANCE:
NUMBER OF PATIENT/ENCOUNTER FLAGGED by EPI WEEK 2023



CASE: DEFINITION	
OVERDOSE	Injury to the body (poisoning) that happens when a drug is taken in excessive amounts. An overdose can be fatal or nonfatal, accidental or intentional.
POLY-SUBSTANCE	The use of more than one drug, also known as polysubstance use, is common. This includes when two or more are taken together or within a short time period, either intentionally or unintentionally. Intentional polysubstance use occurs when a person takes a drug to increase or decrease the effects of a different drug or wants to experience the effects of the combination. Unintentional polysubstance use occurs when a person takes drugs that have been mixed or cut with other substances, like fentanyl, without their knowledge. Whether intentional or not, mixing drugs is never safe because the effects from combining drugs may be stronger and more unpredictable than one drug alone, and even deadly. *For OD2A Surveillance, Poly-Substance Use only includes encounters associated with Opioids, Stimulants, and/or Benzodiazepines.
MISUSE	The use of illegal drugs and/or the use of prescription drugs in a manner other than as directed by a doctor, such as use in greater amounts, more often, or longer than told to take a drug or using someone else's prescription.
OPIOID USE DISORDER STIMULANT USE DISORDER BENZODIAZEPINE USE DISORDER	A problematic pattern of opioid, stimulant, or benzodiazepine uses that lead to serious impairment or distress. Diagnosing OUD/SUD/BUD requires a thorough evaluation, which may include obtaining the results of urine drug testing and prescription drug monitoring program (PDMP) reports, when OUD/SUD/BUD is suspected. A diagnosis is based on specific criteria such as unsuccessful efforts to cut down or control use, or use resulting in social problems and a failure to fulfill obligations at work, school, or home, among other criteria.
SUSPECTED MISUSE	Any encounters that possibly leading to the above descriptions with such providers' comments as "requesting prescription refills (at emergency department)", "drug-seeking-behavior", and "frequent ER visitor for the same complaint for chronic pain and requesting 'stronger' medication". Also, cases where providers indicate there is possibility for misuse on the EHR system or when patients inform that they took Oxycodone (for example) and no PDMP data to support the patients' statement.

SENTINEL SITES

Commonwealth Healthcare Corporation (CHCC)

ER - Emergency Room, **PCAP** - Primary Care Access Point,
CC - Children's Clinic, **FCC** - Family Care Clinic, **WC** - Women's Clinic,
THC - Tinian Health Clinic, **RHC** - Rota Health Center

Private Clinic

KICH - Kagman Isla Community Health,
TICH - Tinian Isla Community Health

Overdose Data to Action Program
Suite 305, Marina Heights II Bldg.
P.O. Box 500409, Saipan, MP 96950
TEL: (670) 322-0061 | Email: od2a@chcc.health

Commonwealth Healthcare Corporation

CNMI Weekly Notifiable Disease Report

EPI WEEK 01 **EPI WEEK DATE:** January 01 - January 07, 2023

In the table below, weekly and year to date counts are displayed through epi week 01. 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 (2020-2022) 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 01	2023 YTD	3-year weekly average incident counts	2023 YTD Incident Rate*	2022 Incident Rate*
Enteric					
Campylobacter	1	1	0	1.9	81.6
Ciguatera fish poisoning	0	0	0	0.0	7.8
Salmonella	0	0	0	0.0	44.7
Environmental					
Elevated Blood Lead Levels	0	0	0	0.0	9.7
Sexually Transmitted					
Chlamydia	2	2	3	3.9	423.5
Gonorrhea	0	0	0	0.0	33.0
Syphilis	0	0	0	0.0	5.8
Respiratory					
COVID-19	45	41	70	79.9	19061.7
Post-Vaccine	34	32	45	62.4	12594.5
Tuberculosis					
TB, Confirmed	0	0	0	0.0	11.7
TB, Under Investigation	0	0	0.1	0.0	50.5

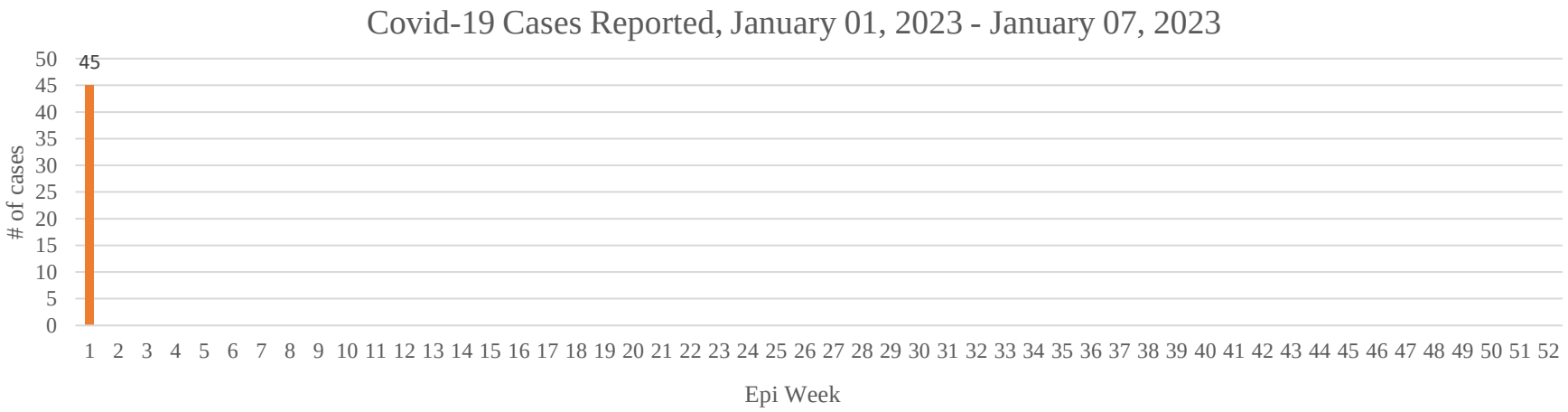
*Rate per 100,000; Data are preliminary and subject to change. CNMI population estimates were determined using 2021 & 2022 Census International Database (https://www.census.gov/data-tools/demo/idb/#/country?YR_ANIM=2021&COUNTRY_YR_ANIM=2021&FIPS_SINGLE=CQ)

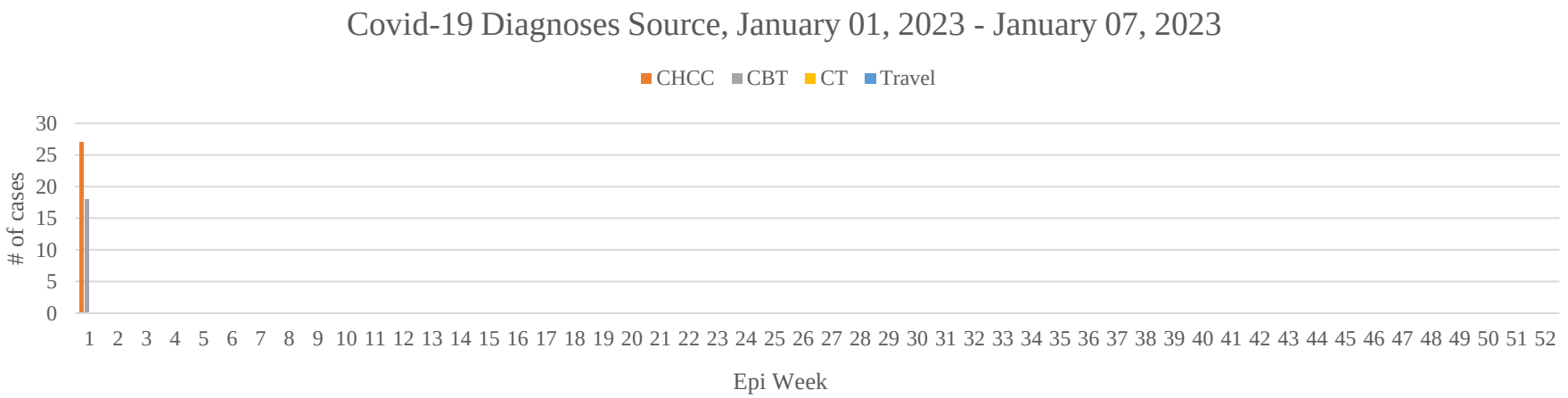
Commonwealth Healthcare Corporation

CNMI Weekly COVID-19 Surveillance Report

EPI WEEK 01 **EPI WEEK DATE:** January 01 - January 07, 2023

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





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 2023 as of EPI WEEK 01

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.

- **Number of births:** **12**(12)
- **Average:** **12**(per week)
- **Infections present and/or treated during pregnancy:**
  - Chlamydia: **0**(00)
  - Gonorrhea: **0**(00)
  - Syphilis: **0**(00)
  - Hepatitis B: **0**(00)
  - Hepatitis C: **0**(00)
  - COVID-19: **0**(00)
- **Substance use during pregnancy**:
  - Cigarette smoking: **0**(00)
  - Betelnut chewing: **0**(00)
  - Betelnut chewing + tobacco: **0**(00)
  - Alcohol use: **0**(00)
  - Drug use: **0**(00)
- **Maternal risk factors in pregnancy:**
  - Pre-pregnancy DM: **0**(00)
  - Gestational DM: **1**(1)
  - Pre-pregnancy HTN: **1**(1)
  - Gestational HTN: **0**(00)
- **Infant risk factors (Low survival births)**
  - Birth weight < 1500 grams: **0**(00)
  - Birth weight < 2500 grams: **2**(2)
  - Gestation age < 37 weeks: **3**(3)

- **Number of deaths:** **5**(5)
- **Average:** **5**(per week)
- **Number of deaths who received COVID-19 vaccine:**

Age range:	< 5	≥ 5	12-17	18 & over
N◦ of death	**0**(0)	**0**(0)	**0** (0)	**5**(5)
N◦ Vaccinated	0 (0)	0 (0)	**0** (0)	**4**(4)
% Vaccinated	0%	0%	0%	**80%**

- **Mortality Surveillance:** **5**(5)
  - Non-communicable diseases: **5**(5)
    - *Cancer related deaths* ***1(1)***
  - COVID-19 related deaths: **0**(0)
  - *COVID-19 as other contributing conditions:* ***0(0)***
    (Reported as other significant condition contributing to death but NOT resulting in the underlying cause)
  - Infant deaths: **0**(0)
  - Infant deaths: **0**(0)
  - Neonatal deaths: **0**(0)
  - Post neonatal deaths: **0**(0)
  - Children (aged 1 - 4 yrs) deaths: **0**(0)
  - Maternal deaths: **0**(0)
  - Suicide deaths, adolescent: **0**(0)
  - Suicide deaths, adult: **0**(0)
  - Traffic fatality deaths: **0**(0)
  - Opioid deaths: **0**(0)
  - Lead poisoning: **0**(0)

Data source: Electronic Vital Registration System (EVRS)

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CNMI Weekly Health & Vital Statistics Report

REPORTING PERIOD: EPI YEAR 2023 as of EPI WEEK 01

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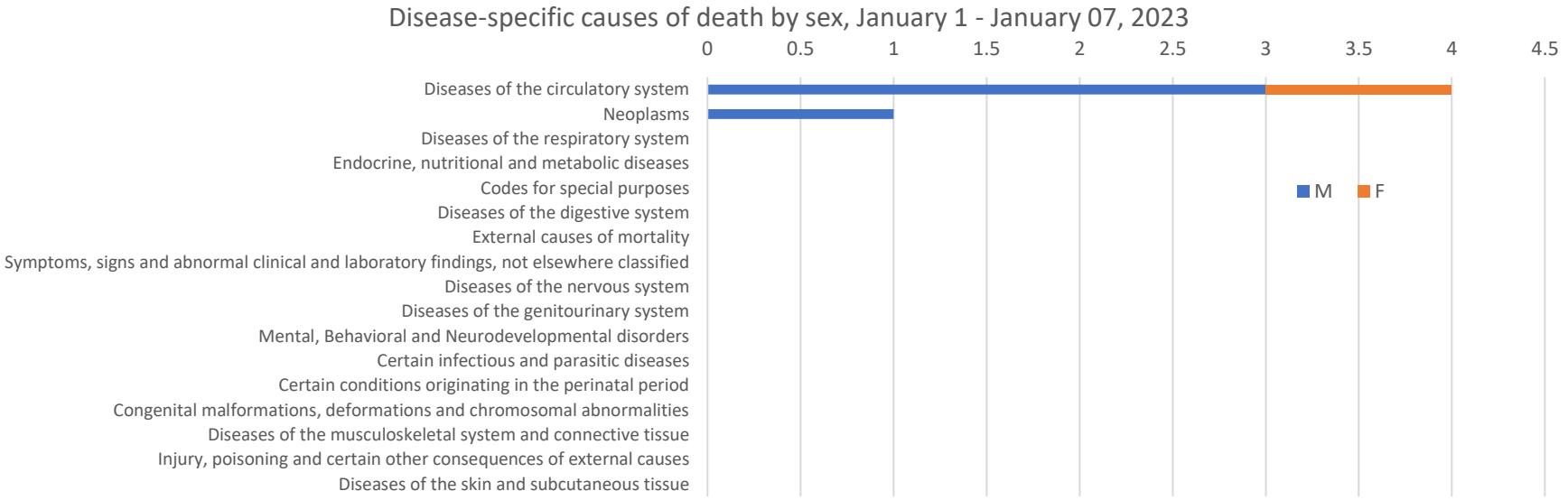

[1] Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified; [2] Mental, Behavioral and Neurodevelopmental disorders; [3] Congenital malformations, deformations and chromosomal abnormalities; [4] Injury, poisoning and certain other consequences of external causes; [5] Diseases of the musculoskeletal system and connective tissue