





CNMI Weekly Syndromic Surveillance Report

EPI WEEK 42 EPI WEEK DATE: October 12, 2025 – October 18, 2025

Clinic	Influenza-Like-Illness (ILI)		Diarrhea (DIA)		Prolonged Fever (PF)		Acute Fever and Rash (AFR)		Total Encounters	
Cilino	Last week	Current week	Last week	Current week	Last week	Current week	Last week	Current week	Last week	Current week
CHCC Family Care Clinic	4	1	0	0	3	0	0	0	399	339
CHCC Women's Clinic	0	0	0	0	0	0	0	0	104	91
CHCC Children's Clinic	5	1	1	0	0	0	0	0	189	166
CHCC Emergency Room	35	43	8	6	13	18	0	0	452	460
Saipan Health Clinic	-	-	-	-	-	-	-	-	-	-
Marianas Health Services	0	0	0	0	0	0	0	0	151	122
Kagman Isla Community Health	0	1	0	0	0	0	0	0	120	73
Southern Isla Community Health	0	0	1	0	0	0	0	0	170	128
Tinian Isla Community Health	0	3	0	0	0	0	0	0	64	47
CHCC Lucia "Chiang" Villagomez Arizapa Health Center*	6	3	0	2	0	1	0	0	109	75
CHCC Rota Health Center	6	9	0	4	1	2	0	0	115	93
*CHCC Tinian Health Center was renamed to LCVA Health Center	56	61	10	12	17	21	0	0	1873	1594

ALERTS AND TRENDS



ILI: Increased from previous week



DIA: Stable from previous week



PF: Increased from previous week



AFR: Stable from previous week

KEY TAKEAWAYS

- 25% Increase in Influenza Like Illness cases were seen this Epi Week (#42) compared to the average of the previous 3 Epi Weeks (#41, 40, 39).
- > 33% Increase in Diarrhea cases were seen this Epi Week (#42) compared to the average of the previous 3 Epi Weeks (#41, 40, 39).
- 29% Increase in Prolonged Fever cases were seen this Epi Week (#42) compared to the average of the previous 3 Epi Weeks (#41, 40, & 39).

❖ 54 Influenza cases:

❖ 54 Flu A

		Epi V	Veek	Percent (%) change from		
Syndromes	42	41	40	39	current week to previous 3 weeks	
Influenza-Like Illness	61	56	46	44	25%	
Diarrhea	12	10	10	7	33%	
Prolonged Fever	21	17	19	13	29%	
Acute Fever and Rash	0	0	1	0	0%	

Antimicrobial Resistant (AMR) Infections							
Organism	EW 42	2025 YTD Totals					
MRSA	0	45					
VRE	0	3					
ESBL	2	104					
CRE	0	0					

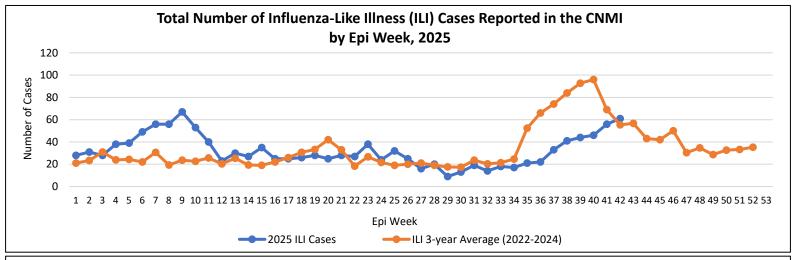


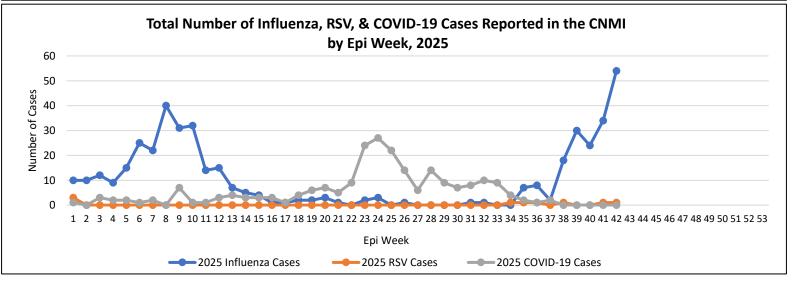




CNMI Weekly Syndromic Surveillance Trends

EPI WEEK 42 EPI WEEK DATE: October 12, 2025 – October 18, 2025





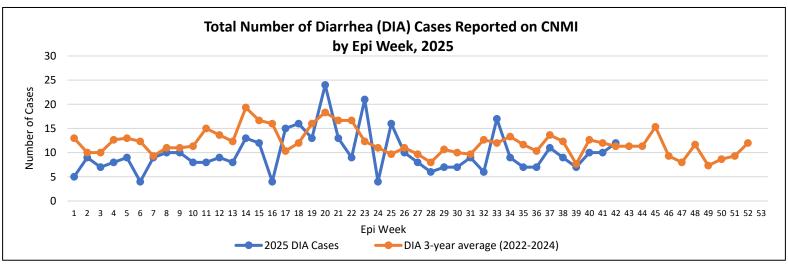


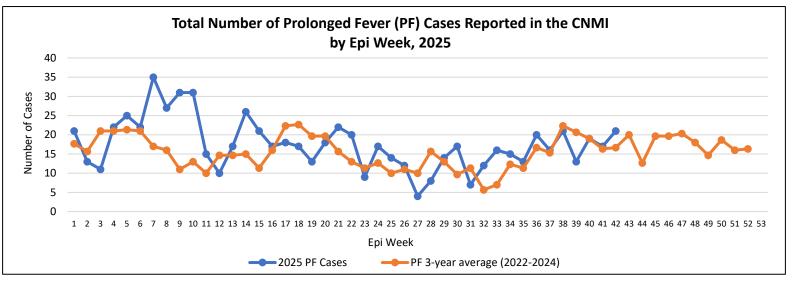




CNMI Weekly Syndromic Surveillance Trends

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Commonwealth of the Northern Mariana Islands

CNMI Weekly Notifiable Disease Report for Select NNDs

EPI WEEK 42 EPI WEEK DATE: October 12, 2025 – October 18, 2025

In the table below, weekly and year to date counts are displayed for Epi Week 42 and 2025, respectively. Additionally, a 3-year weekly average is calculated for the same Epi Week from the previous 3 years (2022-2024) for comparison to the current week. Incidence rates are calculated for 2024 and 2025 using the estimated population for the CNMI from the U.S. Census Bureau.

Condition	Epi Week 42	2025 YTD	3-year weekly average counts	2025 YTD Incidence Rates*	2024 Incidence Rates*	
Enteric Diseases:						
Campylobacter	1	15	1	29.4	35.2	
Ciguatera fish poisoning	0	6	0	11.8	9.8	
Salmonella	2	21	1	41.2	43.0	
Environmental:						
Elevated Blood Lead Levels	0	1	0	2.0	7.8	
Sexually Transmitted Infections:						
Chlamydia	3	155	4	304.2	418.6	
Gonorrhea	0	16	0	31.4	48.9	
Syphilis	0	10	0	19.6	5.9	
Respiratory Infections:						
Influenza	54	446	-	875.4	831.4	
RSV	1	9	-	17.7	142.8	
COVID-19	0	227	4	445.6	1299.0	
Tuberculosis:						
TB, Confirmed	0	15	0	29.4	19.6	
TB, Under Investigation	0	2	0	3.9	7.8	

^{*}Rate per 100,000; Data are preliminary and subject to change. CNMI population estimates were determined using 2024 and 2025 Census International Database (https://www.census.gov/data-tools/demo/idb/#/country?YR_ANIM=2021&COUNTRY_YR_ANIM=2021&FIPS_SINGLE=CQ)





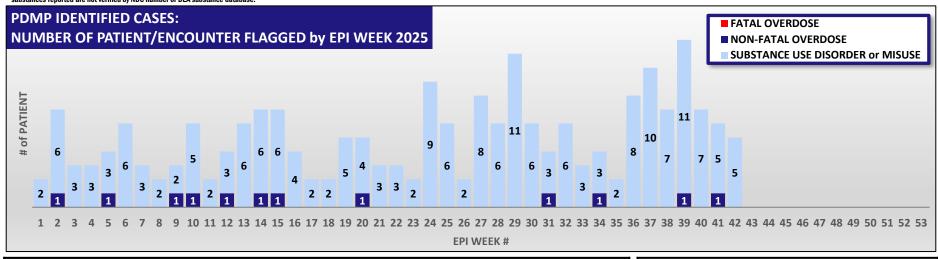


CNMI Weekly Prescription Drug Monitoring Program (PDMP) Report

EPI WEEK 42 | EPI WEEK DATE: OCTOBER 12 - OCTOBER 18, 2025

WEEKLY CASE COUNTS											
POLYSUI	BSTANCE		OPIOID		STIMULANT			BENZODIAZEPINE			OTHER SUBSTANCE
OVERDOSE	MISUSE	OVERDOSE	OUD	MISUSE	OVERDOSE	StUD	MISUSE	OVERDOSE	BUD	MISUSE	OVERDOSE
0	2	0	0	0	0	0	5	0	0	0	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 overdose 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.



	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 overdose 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	A problematic pattern of opioid, stimulant, or benzodiazepine uses that lead to serious impairment or distress. Diagnosing OUD/SUD/BUD requires a							
STIMULANT USE DISORDER	thorough evaluation, which may include obtaining the results of urine drug testing and prescription drug monitoring program (PDMP) reports, when							
BENZODIAZEPINE USE DISORDER	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,

CC - Children's Clinic, FCC - Family Care Clinic, WC - Women's Clinic,

LCVA HC- Lucia Chiang Villagomez Arizapa Health Center, RHC - Rota Health Center

Private Clinic

KICH - Kagman Isla Community Health,

TICH - Tinian Isla Community Health,

SICH – Southern Isla Community Health

SHC - Saipan Health Clinic







CNMI Weekly Health & Vital Statistics Report

REPORTING PERIOD: EPI YEAR 2025 as of EPI WEEK 42

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.

• N	umber of births:	9(432)		•	Number of death	s:	7 <u>(1</u>	.87)		
• A	/erage:	•	Average:							
• In	 Infections present and/or treated during 				Number of deaths who received COVID-19 vaccine:					
pr	egnancy:									
	Chlamydia:		0(10)		Age range:	< 5	≥5	12-17	18 & over	
	Gonorrhea:		0(1)		N∘ of death	0(7)	0(0)	0(1)	7(179)	
	Syphilis:		0(1)		N° Vaccinated	0(0)	0(0)	0 (0)	7(131)	
	Hepatitis B:		0(1)		% Vaccinated	0%	0%	0%	73%	
	Hepatitis C:		0(1)							
	COVID-19:		0(0)	•	Mortality Surveill	ance:			7 <u>(187)</u>	
• Su	bstance use during	g pregnancy:			o Non-communica	ble disea	ses:		5(120)	
	Cigarette smokin	g:	0(4)		 Cancer re 	lated dea	ths		0(29)	
0	Betelnut chewing	etelnut chewing: 0(31) • Tobacco related deaths					O (20)			
0	Betelnut chewing + tobacco: 1(28)				o COVID-19 related	0(1)				
0	Alcohol use:			■ COVID-19	O (0)					
0	Drug use: (Canna	bis, Crystal meth-	0(8)			other to	nenbacin	g conditions	5(5)	
	Ice, Op	pioid, Others, etc.)			o Fetal Deaths2:				0(5)	
0	E-Cigarette use:		0(3)							
	3 months b	efore pregnancy	O (0)		o Infant Deaths:				0(7)	
	 During preg 		0(3)		o Children (aged 1	- 4 years) Deaths:	:	0(0)	
• M	aternal risk factors				o Maternal Deaths	:			0(0)	
0		M:	0(8)				_	_		
0	Gestational DM:		0(54)		o Accident or Injui	•	d Deaths	3.	1(11)	
0			0(18)		 Drowning 	:			0(2)	
0	Gestational HTN:	•	0(38)		 Suicide: 				1(7)	
• In	fant risk factors (Lo				 Homicide 				0(1)	
0		_	0(4)		 Traffic fat 	ality:			0(2)	
0		_	0(33)		 Drug and, 	or opioid	doverdos	se:	0(4)	
0	Gestation age < 3	37 weeks:	0(45)		 Poisoning 	:			0(0)	

¹ Other significant condition contributing to death but NOT resulting in the underlying cause.

² Fetal deaths = Fetus weighed ≥ 350 grams, or fetal demise > 20 weeks of completed gestation.

³ Accident or Injury related deaths = Manner of death beyond Natural Causes: accidental deaths (traffic and drowning), suicide, homicide, drug overdose, and poisoning. Data source: Electronic Vital Registration System (EVRS)



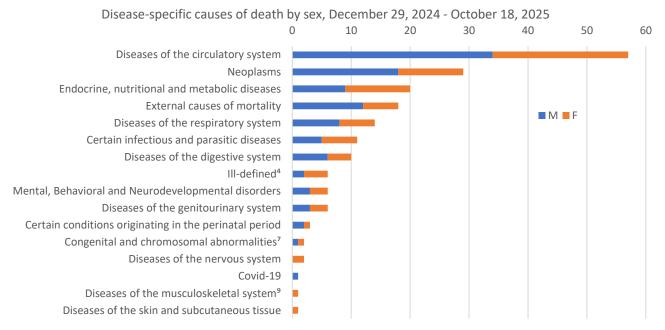




CNMI Weekly Health & Vital Statistics Report

REPORTING PERIOD: EPI YEAR 2025 as of EPI WEEK 42

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.



⁴Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified; 5 Mental, Behavioral and Neurodevelopmental disorders; 6 Certain conditions originating in the perinatal period; 7 Congenital malformations, deformations and chromosomal abnormalities; 8Injury, poisoning and certain other consequences of external causes; 9Diseases of the musculoskeletal system and connective tissue, 10Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism

Vital events reported, December 29, 2024 - October 18, 2025

