



MARATHON COUNTY BOARD OF HEALTH AGENDA

Date & Time of Meeting: **Tuesday, August 13, at 8 a.m.**

Meeting Location: **Courthouse Assembly Room, B-105, 500 Forest Street, Wausau WI**

Committees Members: Tara Draeger, Helen Luce, Stacey Morache, Jennifer Aarrestad, Yee Leng Xiong, Ann Lemmer, Kelly Sinkler, John Kroll

Marathon County Mission Statement: *Marathon County Government serves people by leading, coordinating, and providing county, regional, and statewide initiatives. It directly or in cooperation with other public and private partners provides services and creates opportunities that make Marathon County and the surrounding area a preferred place to live, work, visit, and do business. (Last updated: 12-20-05)*

Persons wishing to attend the meeting by phone may call into the **telephone conference beginning five (5) minutes prior to the start time indicated above using the following number:**

Phone #: +1-408-418-9388

Access Code: 2486 058 5170

When you enter the telephone conference, **PLEASE PUT YOUR PHONE ON MUTE!**

1. **Call Meeting to Order**
2. **Pledge of Allegiance**
3. **Public Comment (15 Minutes)** *(Any person who wishes to address the County Board, or one of its committees, during the "Public Comment" portion of meetings, must provide his or her name, address, and the topic he or she wishes to present to the Marathon County Clerk, or chair of the committee, no later than five minutes before the start of the meeting.)*
4. **Approval of the June 4, 2024, Board of Health Meeting Minutes**
5. **Policy Issues for Discussion and Possible Action**
 - A. None
6. **Operational Functions Required by Statute, Ordinance, or Resolution**
 - A. None
7. **Educational Presentations and Committee Discussion**
 - A. Advocacy Opportunities Educational Presentation by Maureen Busalacchi, Director of the Wisconsin Alcohol Policy Project
 - B. H5N1 Update, Meranda Eggebrecht, Marathon County Health Department Family Health and Communicable Disease Director
 - C. Xylazine Information, Laura Scudiere, Marathon County Health Officer
8. **Next Meeting Date & Time, Location, Announcements and Future Agenda Items:**
 - A. Committee members are asked to bring ideas for future discussion.
 - B. Next Board of Health Meeting: Tuesday, Oct. 8 at 8 am
9. **Adjournment**

**Any person planning to attend this meeting who needs some type of special accommodation in order to participate should call the County Clerk's Office at 261-1500 or e-mail countyclerk@co.marathon.wi.us one business day before the meeting*

SIGNED: _____
Presiding Officer or Designee

EMAILED TO: Wausau Daily Herald, City Pages, and other Media Groups

NOTICE POSTED AT COURTHOUSE _____

EMAILED BY: _____

BY: _____

DATE & TIME: _____

DATE & TIME: _____



BOARD OF HEALTH MEETING AGENDA WITH MINUTES

Date & Time of Meeting: **Tuesday, June 4th, 2024, at 8 a.m.**

Meeting Location: **Courthouse Assembly Room, B-105, 500 Forest Street, Wausau, WI 54403**

Committee Members:

John Kroll	In-person
Tara Draeger	In-person
Helen Luce	In-person
Jennifer Aarrestad	In-person
Yee Leng Xiong	WebEx
Ann Lemmer	In-person
Kelly Sinkler	WebEx
Stacey Morache	WebEx

MCHD Staff Present: Laura Scudiere, Kang Chu Yang, Mai Choua Lee, Amanda Ostrowski, Jenna Flynn, Kate Florek

Others via WebEx: 7152****35(Kevin Obrien); 2627****65; 7155****81

Others In Person: Officer Andrew Kutchenriter, Michelle Carr

1. **Call Meeting to Order** – Tara Draeger called the meeting to order at 8:00 AM.
2. **Pledge of the allegiance.**
3. **Public Comment Period.**
 - A: The following member of the public provided comments.
 - i. Officer Andrew Kutchenriter
4. **Approval of the April 4th, 2024, Board of Health Meeting Minutes**
Motion to approve the minutes of the April 9th, 2024. Board of Health meeting made by Jennifer Aarrestad. Second by Ann Lemmer. Motion approved.
5. **Policy discussion and Possible Action**
 - A. None
6. **Operational Functions Required by Statute, Ordinance, or Resolution**
 - A. Board of Health Officer Elections
Elections were called by the former vice-chair, Tara Draeger, for the nomination of Chair and Vice Chair. Tara Draeger was nominated as Chair (AL, HL). Jennifer Aarrestad was nominated as Chair (SM). No second was recorded. Ann Lemmer was nominated as Vice Chair (TD, JK). Jennifer Aarrestad was nominated as Vice Chair (SM). No second was recorded. A slate ballot was brought forward: Tara Draeger for Chair and Ann Lemmer for Vice Chair (TD, HL). Motion passed.
7. **Educational Presentations and Committee Discussion**
 - A. THC is Changing Campaign- Presented by the Marathon County AOD Partnership
Michelle Carr, Vice Chair of the AOD Partnership, presented on THC availability in Marathon County and elaborated on the ongoing efforts of the Marathon County AOD Partnership to increase awareness. Data and resources were shared with the board. Questions were asked and answered.
 - B. Annual Report Update
Scudiere provided an overview of the 2023 Marathon County Health Department Annual Report, which is available on the Marathon County web site and was submitted to the Department of Health Services per state health department requirements. Scudiere pointed



BOARD OF HEALTH MEETING AGENDA WITH MINUTES

out achievements and outcomes for each program team. Questions were asked and answered.

8. Next Meeting Date & Time, Location, Announcements and Future Agenda Items:

- A.** Committee members are asked to bring ideas for future discussion.
 - i. Board members requested more information on Xylazine and advocacy options to address public health needs as it relates to THC and synthetic THC products.
- B.** Next Board of Health Meeting: Tuesday, August 13th at 8 am.

9. Adjournment

Motion to adjourn (JA, HL). Motion approved. Meeting adjourned at 9:05 AM.

Minutes prepared by Mai Choua Lee, Marathon County Health Department Senior Administrative Specialist.

DRAFT

Marathon County BOH: Effective Strategies for Improving Health

Maureen Busalacchi

Population Health Consulting

President-elect, Wisconsin Public Health Association

Agenda

- Quick Introductions
- Advocacy and Lobbying
- Communication techniques
- Sphere of influence
- Understanding power
- Bringing it all together

Introductions

Name

Position on Board of Health

Employment

Top Issue

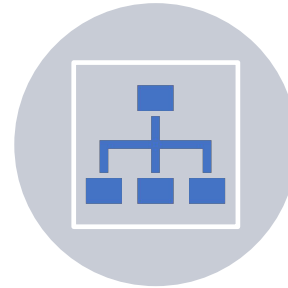
WHAT'S LOBBYING?

LOBBYING: FEDERAL DEFINITION

Oral, written, or electronic communications to a covered legislative or executive branch official in an attempt to influence:



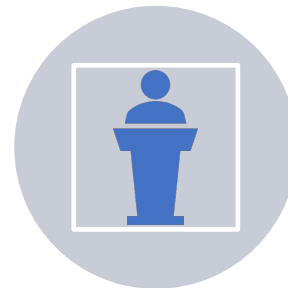
The formulation, modification, or adoption of federal legislation.



The administration or execution of a federal program or policy.



Formulation, modification, or adoption of a federal rule, regulation, executive order, policy, or position of the US government.



The nomination or confirmation of a person subject to confirmation by the Senate.

DIRECT LOBBYING

CDC Guidance has 3 simple statements that are clear/helpful:

1. Refers to specific legislation or other executive order;
2. Reflects a point of view;
3. Contains an overt call to action.

TAX: IRS FORM 990

IRS Form 990 is used to report lobbying/advocacy/political activities and defines direct lobbying even more broadly and includes "any attempt to influence any legislation through communication with:

(1) a member or employee of a legislative or similar body;

(2) a government official or employee (other than a member or employee of a legislative body) who may participate in the formulation or the legislation, but if the principal purpose of the communication is to influence legislation only; or

(3) the general public in a referendum, initiative, constitutional amendment, or similar procedure.“

(APHA Presentation from ChangeLab Solutions, APHA 2020 Annual Meeting.)

LOBBYING: WISCONSIN DEFINITION

A communication must express a view on a specific legislative proposal that has been introduced before a legislative body (federal, state, or local) to a decision maker. This means working to influence the outcome of specific legislation—trying to get a bill passed or defeated—by communicating your or your organization’s views or position to those who participate in the formulation of the specific legislation—your Members of Congress, your state legislators, your local elected officials, or the staff of policy-makers.

Lobbying communications are:

“an oral or written communication with any agency official, elective state official, or legislative employee that attempts to influence legislative or administrative action.”

<http://docs.legis.wisconsin.gov/statutes/statutes/13/III/62/10g>



Federal: IRS **Grass roots** lobbying refers to efforts to influence legislation through an attempt to affect the opinions of the general public or any segment of the general public.



Direct and grassroots defined: *Direct* lobbying refers to attempts to influence a legislative body through communication with a member or employee of a legislative body, or with a government official who participates in formulating legislation. *Grass roots* lobbying refers to attempts to influence legislation by attempting to affect the opinion of the public with respect to the legislation and encouraging the audience to take action with respect to the legislation. In either case, the communications must refer to and reflect a view on the legislation. [IRS link](#)

GRASSROOTS LOBBYING

LOBBYING BOILS DOWN TO THREE ACTIONS:

- Communicating with an elected official* (or encouraging others to communicate)
- On a specific proposal or bill



- And communicate a point of view – call to action: support, oppose or amend

QUESTIONS?



OTHER IMPORTANT CONSIDERATIONS

What hat are you wearing?

- Your organization
- Your professional affiliation
- Yourself



WHAT'S ADVOCACY?

WHAT IS ADVOCACY? *AND NOT* *LOBBYING* (FEDERAL)



A speech, article, publication or other material that is distributed and made available to the public through a medium of mass communication.

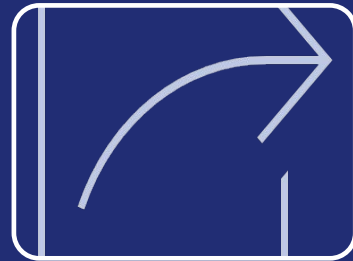


A request for a meeting, a request for the status of an action, or other similar administrative request.

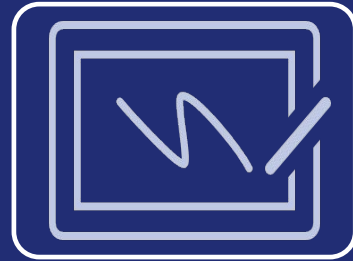


Testimony given before congress or submitted for inclusion in the public record

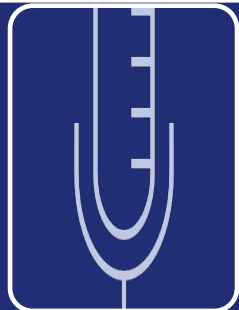
WHAT IS ADVOCACY? AND NOT LOBBYING - FEDERAL



Information provided in writing in response to an oral or written request, or in response to a request for public comments in the Federal Register.



Written comment filed in the course of a public proceeding.



Anything made by the media if the purpose is gathering and disseminating news and information to the public.

WHAT IS ADVOCACY AND NOT LOBBYING (STATE)

Communicating with legislators in a personal capacity;

Mass communications through the media;

Requests for information from the legislature, legislative employee, or an agency official;

Participation as a member in the deliberations of a committee of the legislature;

Lobbying of an agency official by another agency official a different agency or the same agency; and

An elective state official or legislative employee acting in an official capacity.

DISCUSSION

BEFORE THE
QUIZ!

WHAT ARE
YOUR
QUESTIONS?

DECISION MAKERS



We don't pay attention to boring things.

Photo by [Priscilla Du Preez](#) on [Unsplash](#)

COMMUNICATIONS



Goal:



Clear, concise
communications



Ideally, a
30-second pitch

KNOW YOUR AUDIENCE



- Make sure you know what message needs to be delivered
- It works best if you're talking to the right person!

PREPARING



- What do you know about the person you are talking to?

WHAT DO THEY WANT?



What do they care about?



How can you identify with them?



What do they want from you?



What will create a favorable reaction?



APPROACH

- Single thought or sentence that will best lead to your objective
- Encompasses the needs and interests of the listener
- What you want, who can give it to you and how to get it



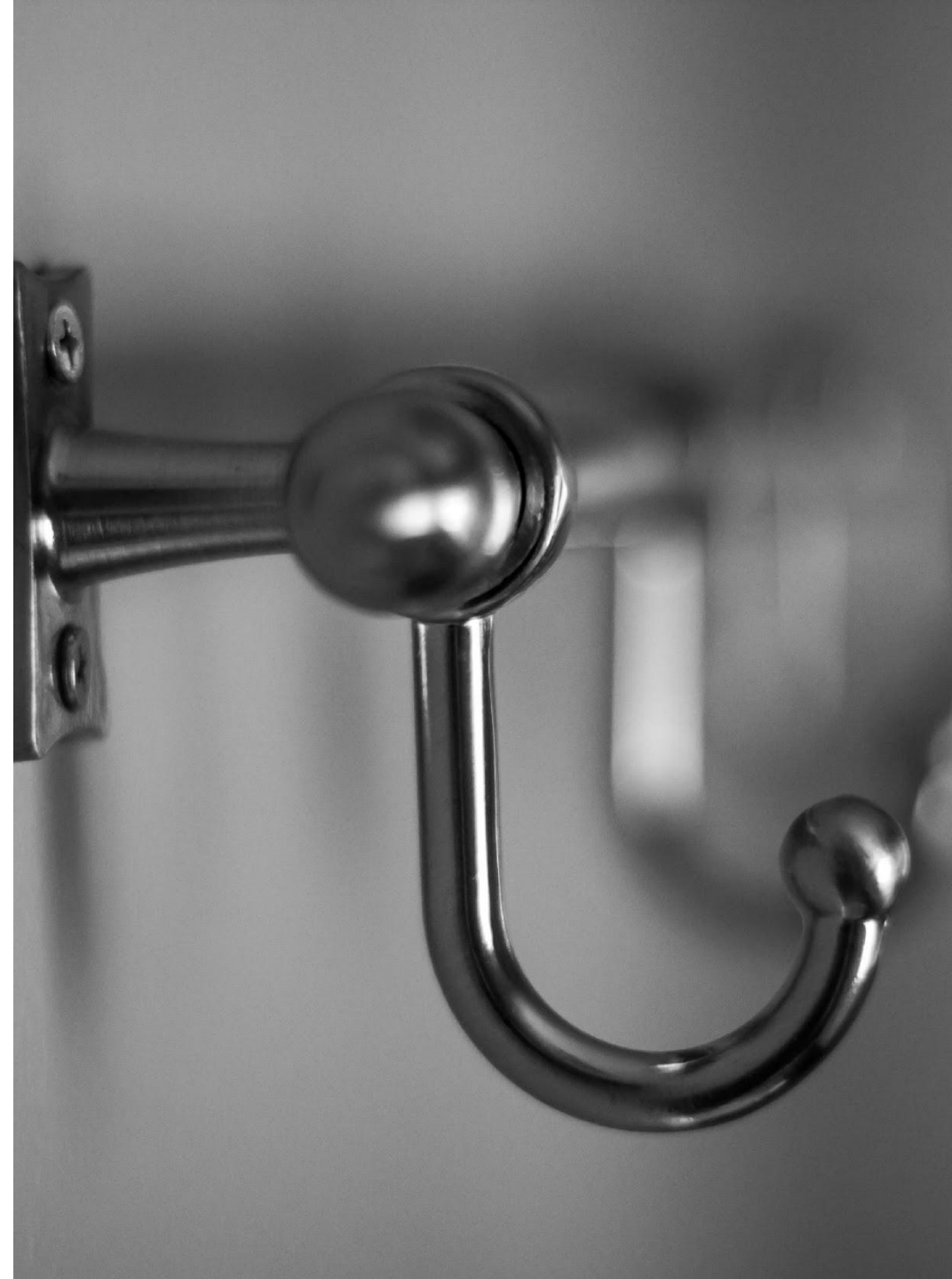
HOOK

A hook is a statement used to get attention

Should be first statement

Relates to your objective

Anecdotes or personal experiences make excellent hooks



THE ASK



- Message needs an ask
- Action close calls for specific action in a specific timeframe
- Reaction close
- Ideally, decide in advance

MEETING FOLLOW UP



YOUR TURN



Scenario – You want to talk about an issue BOH is working on



You know who makes decision (pick one decision maker)



Run through the exercise



3 minutes to think through this on your own



6 minutes to work through it with a partner



If comfortable, share out



SPHERE OF INFLUENCE

CIRCLES OF INFLUENCE



WHAT ARE THEY CONCERNED ABOUT



EXERCISE



Write down your sphere of influence



Think about who you might have influence with and need to build that relationship



Think about the decision-maker and if there are people in their circle that also cross with your own

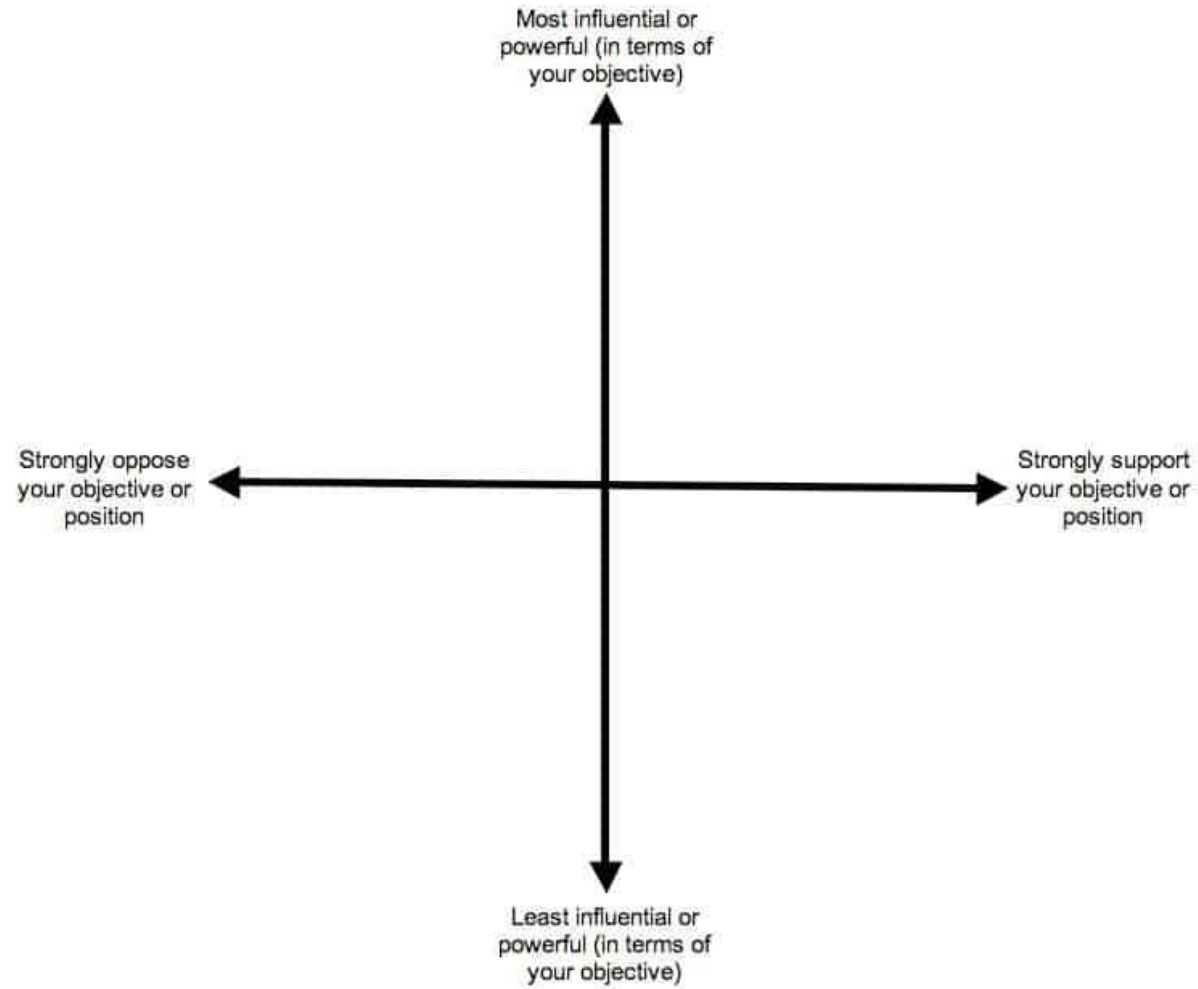


What pressures surrounding the decision-maker?



POWER IN COMMUNITY

POWER IN COMMUNITY

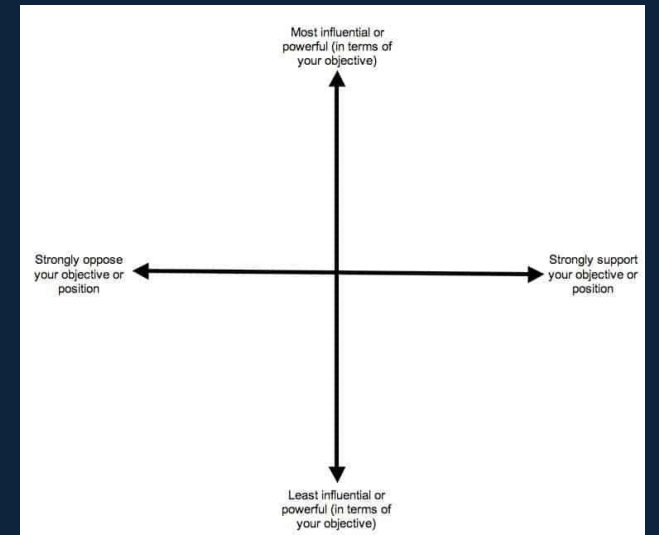


EXAMPLES OF POWER



EXERCISE: MAP POWER

- Pick an issue
- Put at least 5 people or organizations on the power axis
- Consider how this may focus your strategy





BRINGING IT HOME

GET READY TO GO!





THANK YOU!

MBUSALACCHI@MCW.EDU

WWW.MCW.EDU/WISAPP

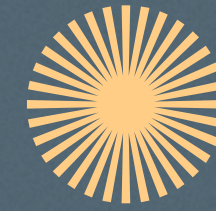
HIGHLY PATHOGENIC AVIAN INFLUENZA A (H5) UPDATE

AUGUST 13, 2024

MERANDA EGGBRECHT, MPH, BSN, RN
DIRECTOR OF FAMILY HEALTH & COMMUNICABLE DISEASE
MARATHON COUNTY HEALTH DEPARTMENT



ABOUT



- Highly Pathogenic Avian Influenza (HPAI) is a disease that is highly contagious and often deadly in poultry, caused by highly pathogenic avian influenza A (H5) and A (H7) viruses; it is also known as bird or avian flu.
- H5N1 bird flu is a strain of Highly Pathogenic Avian Influenza.
- Infection lull in birds from 2016 to 2022.
- U.S. experienced a large outbreak in 2022 first among wild birds and then domesticated birds, like commercial chickens.
- Current situation includes spread to some mammals, like dairy cows.
- Human infections have been rare since 1997, and there is no evidence of sustained human-to-human transmission.





HOW IT SPREADS

H5 bird flu spreads to humans when enough virus gets into a person's eyes, nose, or mouth or is inhaled from an infected bird or animal.

H5 bird flu symptoms are similar to the seasonal influenza virus. Possible symptoms include fever, cough, sore throat, muscle aches, nausea, abdominal pain, vomiting, diarrhea, eye infections, difficulty breathing, pneumonia, and severe respiratory disease.

WHY DOES IT MATTER?

Highly Pathogenic Avian Influenza virus A has been around for over 20 years.

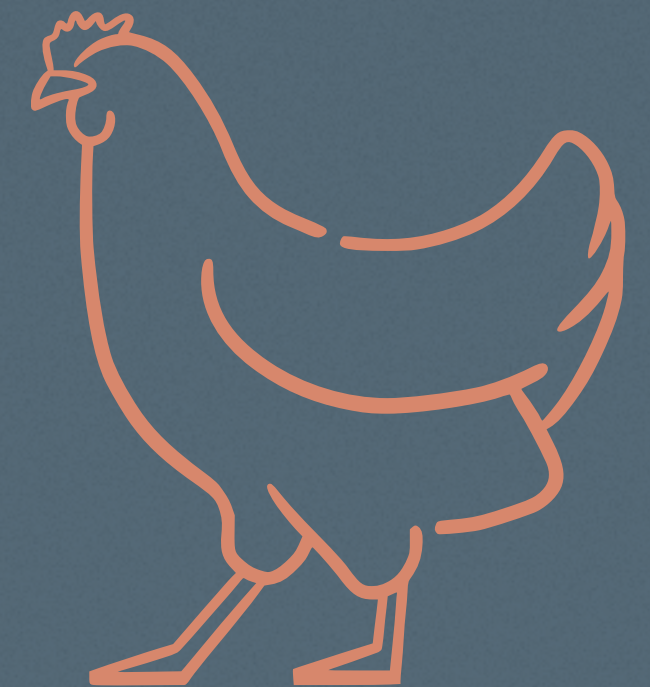
Human infections have been rare; human-to-human transmission has not occurred yet.

The more the virus jumps from animal to animal or human, the more chance it has to mutate (change) to infect humans.

PRECAUTIONS

GENERAL POPULATION

- Avoid contact with poultry, wild birds, and other animals that appear ill or are dead, as well as contact with surfaces that may have been contaminated with their feces.
- Avoid uncooked or undercooked poultry, meat, and eggs (cook to right internal temperature).
- Drink pasteurized milk.
- Wash your hands and surfaces thoroughly before and after handling poultry, meat, and eggs.





CURRENT RISK

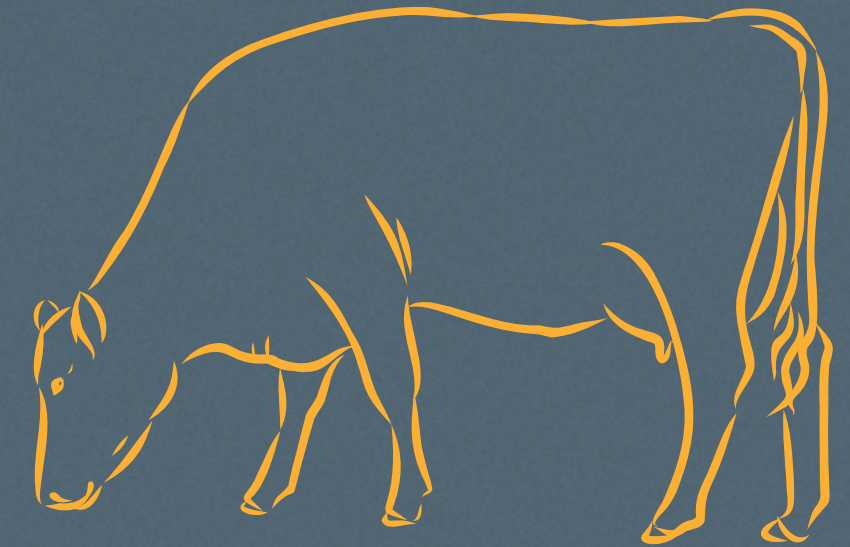
People with close and/or sustained unprotected contact with infected birds or animals or their contaminated environments are at a greater risk of infection.

People who work with or have recreational exposures to infected animal populations, maintain backyard birds/poultry, and engage in hunting should consider taking additional protections.

DHS resource:

[What Workers Should Know about Highly Pathogenic Avian Influenza](#)

MILK AND BEEF



- In April, the FDA announced that about 20% of milk samples from U.S. stores had traces of H5N1 bird flu. However, pasteurization kills harmful bacteria and viruses, so the H5N1 traces found are not live or infectious.
- The USDA requires bird flu testing for dairy cows crossing state lines. Only milk from healthy animals can be sold, and pasteurization is mandatory for interstate milk.
- The USDA tested ground beef from stores in states with infected cows. No H5N1 was found in the tested samples. Testing will continue, and only USDA-approved meat can be sold in U.S. stores and restaurants.

ANIMAL CASES

9,674

Wild Birds Detected (as
of 7/31/2024)

100,707,371

Poultry Affected (as of
7/26/2024)

178

Dairy Herds Affected (as
of 8/5/2024)

HUMAN CASES

14

Total Reported Human Cases of H5 in the United States since 2022

4

Human Cases of H5 Following Exposure to Dairy Cows since April 1, 2024

10

(9 in 2024)
Human Cases of H5 Following Exposure to Poultry since April 28, 2022

3

States with Reported Human Case(s): Colorado, Michigan, Texas

WHAT NEXT?

Education

- Ensure awareness of situation, resources available, protections offered

Identification of infection

- Reduce exposure and spread to other flocks or herds
- Ensure precautions for farm works, owners of domesticated animals

Reduce transmission to limit the chance of mutation (change) of virus

MONITORING AND SURVEILLANCE

WASTEWATER MONITORING

- Current wastewater monitoring methods detect influenza A viruses but do not distinguish the subtype.
- Wastewater data cannot determine the source of the influenza A virus. It could come from a human or from an animal (like a bird) or an animal product (like milk from an infected cow).

LAB MONITORING

CDC collects data through the U.S. WHO Collaborating Laboratories System or the National Respiratory and Enteric Virus Surveillance System (NREVSS) – monitors for Influenza A.

ED VISIT SURVEILLANCE

The National Syndromic Surveillance Program (NSSP) collects, analyzes, and shares electronic data received from multiple health care settings, including emergency departments (ED).



HEALTH DEPARTMENT RESPONSE

Internal response team formed

Monitoring and surveillance

Outreach to farm owners

Training to community health workers

Collaboration with health care providers

BOARD OF HEALTH

As with any developing health-related issue, the situation can evolve quickly. Stay tuned for updates.

Support for planning and preparation

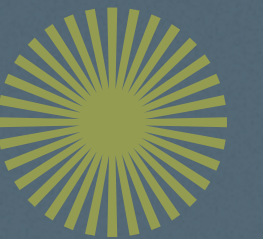
Reach out with questions



REFERENCES

- Centers for Disease Control and Prevention. H5 Bird Flu: Current Situation. July 31, 2024. Retrieved from <https://www.cdc.gov/bird-flu/situation-summary/index.html>
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- Jetelina, Katelyn. Your Local Epidemiologist. Avian flu: Birds, cows, and now a human. April 2, 2024. Retrieved from https://yourlocalepidemiologist.substack.com/p/avian-flu-birds-cows-and-now-a-human?utm_source=publication-search
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- U.S. Food & Drug Administration. Updates on Highly Pathogenic Avian Influenza (HPAI). July 19, 2024. Retrieved from [https://www.fda.gov/food/alerts-advisories-safety-information/updates-highly-pathogenic-avian-influenza-hpai#:~:text=Highly%20Pathogenic%20Avian%20Influenza%20\(HPAI\)%20is%20a%20disease%20that%20is,other%20bird%20and%20animal%20species](https://www.fda.gov/food/alerts-advisories-safety-information/updates-highly-pathogenic-avian-influenza-hpai#:~:text=Highly%20Pathogenic%20Avian%20Influenza%20(HPAI)%20is%20a%20disease%20that%20is,other%20bird%20and%20animal%20species)
- Wisconsin Department of Health Services. Avian Influenza A Virus. August 1, 2024. Retrieved from <https://www.dhs.wisconsin.gov/influenza/avian.htm>

QUESTIONS?



XYLAZINE



Tranq | Tranq Dope

What is it?

A non-opioid tranquilizer used in veterinary medicine, specifically with large animals. It is mixed with illicit substances like heroin, methamphetamine, and fentanyl.

Why is it concerning?

- ▶ Not approved for use in humans due to effects on body.
- ▶ Increases the risk of a fatal overdose because of the effects on the body.
- ▶ Increased presence in the drug supply. Individuals often don't know it's there.
- ▶ No known reversal protocol. Narcan does not work.
- ▶ Increased health care needs due to skin ulcers.

How does it affect the body?



Decreases
respirations



Decreases
blood pressure

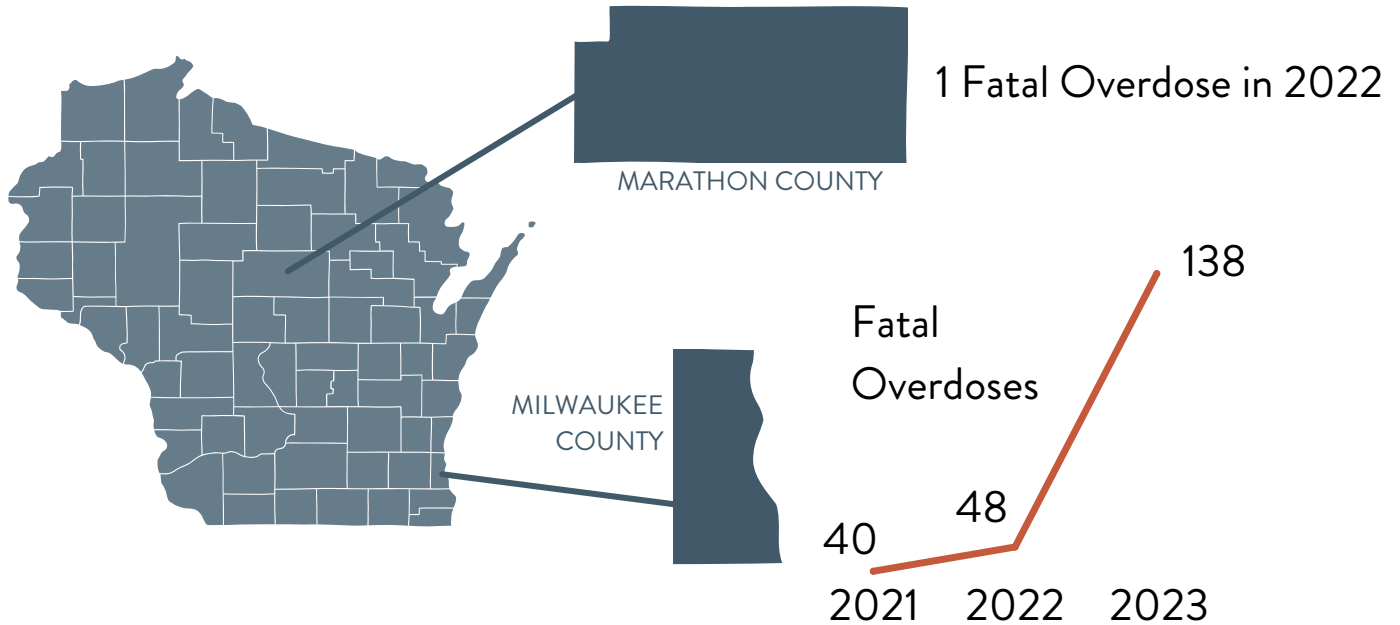


Develops skin
ulcers



Extends
substance effects

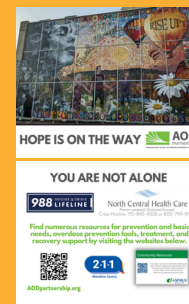
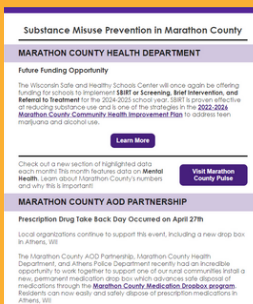
What's happening in Wisconsin?



WI DHS currently estimates about 5-6% of fatal overdoses in Wisconsin may be attributed to Xylazine.

Data from Milwaukee County and Marathon County Medical Examiner's Offices.

What can you do?



1. Sign up for the Substance Misuse Newsletter

2. Support CHIP strategies aiming to prevent substance use

3. Share resources and work to reduce stigma

Sources:

<https://www.fda.gov/drugs/drug-safety-and-availability/fda-alerts-health-care-professionals-risks-patients-exposed-xylazine-illicit-drugs>
<https://www.ncbi.nlm.nih.gov/books/NBK594271/>
https://www.cdc.gov/mmwr/volumes/70/wr/mm7037a4.htm?s_cid=mm7037a4_w
<https://www.sciencedirect.com/science/article/abs/pii/S0955395923002013>
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC10370501/>
<https://www.ncbi.nlm.nih.gov/books/NBK595122/>
<https://nida.nih.gov/research-topics/xylazine>



YTD Disease Incidents by Episode Date
Incidents for MMWR Weeks 1 - 31 (Through the week ending August 5, 2024)
Jurisdiction: Marathon County

Disease Group	Disease	2024													Total
		Week 20	Week 21	Week 22	Week 23	Week 24	Week 25	Week 26	Week 27	Week 28	Week 29	Week 30	Week 31		
Babesiosis	Group Total:	0	1	0	0	0	0	1	1	1	0	0	0	6	
Blastomycosis	Group Total:	0	1	0	0	0	0	0	0	0	0	0	0	2	
Campylobacteriosis	Group Total:	0	0	2	2	0	1	2	1	3	1	1	1	25	
Carbapenemase producing organisms	Group Total:	0	0	0	1	0	0	1	0	0	0	0	0	2	
Carbon Monoxide Poisoning	Group Total:	0	0	0	1	0	0	0	0	0	0	0	0	5	
Chlamydia Trachomatis Infection	Group Total:	8	10	6	7	10	5	10	1	4	8	6	5	198	
Coronavirus-ASSOCIATED HOSPITALIZATION	Group Total:	1	1	1	1	2	2	0	1	1	4	4	1	84	
Cryptosporidiosis	Group Total:	0	1	1	0	0	0	0	2	1	1	2	0	14	
Ehrlichiosis / Anaplasmosis	Group Total:	3	3	6	0	1	3	0	1	2	2	0	0	24	
Free-Living Ameba	Group Total:	0	0	0	0	0	0	0	0	0	0	0	0	1	
Giardiasis	Group Total:	0	0	0	0	0	0	0	0	1	0	0	0	2	
Gonorrhea	Group Total:	1	1	0	0	0	1	0	1	0	1	1	0	17	
Haemophilus Influenzae Invasive Disease	Group Total:	0	0	0	0	1	0	0	0	0	0	0	0	2	
Hepatitis A	Group Total:	0	0	0	0	0	0	0	0	0	0	0	0	1	
Hepatitis B	Group Total:	0	0	0	0	0	0	0	0	0	0	0	0	5	
Hepatitis C	Group Total:	1	2	0	0	1	0	1	1	1	1	3	0	28	
INFLUENZA-ASSOCIATED HOSPITALIZATION	Group Total:	0	0	0	0	0	0	0	0	0	0	0	0	89	
Invasive Streptococcal Disease (Groups A And B)	Group Total:	0	0	0	0	1	3	0	0	1	2	1	0	16	
Legionellosis	Group Total:	0	0	0	1	0	0	0	0	0	0	0	0	1	
Lyme Disease	Group Total:	2	8	7	14	19	13	8	14	10	14	9	5	146	
Meningitis, Other Bacterial	Group Total:	0	0	2	0	0	0	0	0	1	0	0	0	5	
Mycobacterial Disease (Nontuberculous)	Group Total:	0	0	0	1	0	1	0	0	0	0	0	0	6	
Pathogenic E.coli	Group Total:	0	1	0	2	0	1	2	0	1	0	0	0	9	
Pertussis (Whooping Cough)	Group Total:	0	1	1	0	1	1	1	0	1	1	2	0	14	
RESPIRATORY SYNCYTIAL VIRUS (RSV) - ASSOCIATED HOSPITALIZATION	Group Total:	0	0	0	0	0	0	0	0	0	0	0	0	37	
Salmonellosis	Group Total:	0	1	0	2	0	1	0	1	2	1	0	0	17	
Shigellosis	Group Total:	0	0	0	0	0	0	0	0	0	0	0	0	1	
Streptococcus Pneumoniae Invasive Disease	Group Total:	1	0	0	0	0	0	0	0	0	0	0	0	9	
Syphilis	Group Total:	0	0	0	0	0	0	0	0	0	0	0	0	5	
Toxoplasmosis	Group Total:	0	0	0	0	0	0	0	0	0	0	0	0	2	
Tuberculosis	Group Total:	0	0	0	1	0	0	1	0	0	0	0	0	3	
Tuberculosis, Latent Infection (LTBI)	Group Total:	0	2	3	0	0	1	2	0	1	1	0	0	34	
Varicella (Chickenpox)	Group Total:	0	0	0	0	0	0	0	0	1	0	0	0	2	
	Period Total:	32	47	35	44	53	48	41	35	42	49	41	25	812	