Public Health Reporting and Surveillance of *Vibrio* Infection in Massachusetts

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Overview

- Reporting of Vibrio
- Vibrio case investigation
- Incidence in the United States & Massachusetts
- Vibrio parahaemolyticus and oysters in Massachusetts
- Traceback investigation
- Preventing infection

Reporting of Vibrio

Nationally Reportable Condition

- Vibrio cholera has been reportable in Massachusetts since 1964
- Vibriosis (non-cholera) became a nationally reportable disease in 2007
 - Reported through the <u>National Notifiable Diseases</u>
 <u>Surveillance System (NNDSS)</u>

Reporting *Vibrio* in Massachusetts



IN ACCORDANCE WITH M.G.L.c. 111D, s. 6. EVIDENCE OF INFECTION' DUE TO THE FOLLOWING INFECTIOUS AGENTS IS REPORTABLE BY ALL CLINICAL LABORATORIES TO THE MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH

Evidence of infection includes results from culture methods, specific antigen or genomic tests, histology, other microscopy, and clinically-relevant serologic tests. Infection in Massachusetts' residents, ascertained out-of-state, should also be reporter

REPORT IMMEDIATELY BY PHONE! This includes both suspected and confirmed cases. Telephone: (617) 983-6800 and ask for the Epidemiologist On-Call

REPORT WITHIN 24 HOURS ELECTRONICALLY or Telephone: (617) 983-6801 Confidential Fax: (617) 983-6813

⇔⊡

be submitted to

Hinton State

Laboratory

- Anaplasma sp.
- Babesia sp.
- 🕿 Bacillus anthracis 😅 🖬
- Bordetella pertussis, B. bronchiseptica, B. holmseii and B. parapertussis
- Borrelia burgdorferi Borrelia mivamotoi
- 🕿 Brucellaish 😅 💽
- Burkholderia mallei and B. pseudomallei ⇔⊡ Calymmatobacterium (Donovania) granulomatis
- Campylobacter sp.
- Chlamydia trachomatis
- Chlamydophila psittaci
- 🖀 Clostridium botulinum 🗢 🖬
- Clostridium difficile
- Clostridium perfringens Clostridium tetani
- Corvnehacterium dinhtheriae
- Coxiella burnetii
- Cryptococcus gattii
- Cryptococcus neoformans
- Cryptosporidium sp. Cyclospora cayetanensis
- Dengue virus

Eastern equine encephalitis virus a

- Ehrlichia so. Entamoeha histolytica
- · Enterobacteriacea, carbapenemase-producing and or carbapenem- resistant
- Enteroviruses (from CSF)
- · Escherichia coli O157:H7 or other shiga-toxin producing
- E. coli ⇔⊡
- Francisella tularensis ⇒
- Giardia sp. Group A streptococcus, invasive
- · Group B streptococcus (from blood, CSF or other normally sterile body fluid)
- Haemophilus ducrevi Haemophilus influenzae (from blood, CSF or other normally sterile body fluid) ⇔ 🖬
- Hantavirus
- Hemorrhagic fever viruses (including Ebola, Marburg and other filoviruses, arenaviruses, bunyaviruses and flaviviruses) Hepatitis A virus
- Hepatitis B virus
- Hepatitis C virus
- Hepatitis D virus
- Hepatitis E virus
- · Herpes simplex virus, neonatal infection (onset within 60 days after birth)

 Influenza virus (⇔ if antiviral resistant Influenza A virus, novel Leaionella sp. ⇔

- Leptospira sp.
- asles virus ⇔ 🖬
- Mumps virus ⇒
- Mycobacterium africanum, M. bovis

Human immunodeficiency virus (HIV)

Human prion disease (evidence of)

- Mvcobacterium leprae
- Neisseria gonorrhoeae, fluoroguinolone or ceftriaxone
- resistant 🖘 🖬 Neisseria meningitidis (from blood, CSF or other normally
- · Plasmodium sp. including P. falciparum, P. malariae, P. ovale,

Poliovirus

- Pox viruses, including variola, vaccinia, and other orthopox and parapox viruses
- Rabies virus
- Rickettsia akari Rickettsia prowazekii
- Rickettsia rickettsii
- Rubella virus
- Salmonella sp. (non typhi) ⇔
- 🕿 Salmonella typhi 😅 Shiga-toxin producing organisms ⇔⊡
- Shigella sp. ⇒
- Simian herpes virus
- Staphylococcus aureus enterotoxin producing organisms
- Staphylococcus aureus, methicillin-resistant (MRSA), invasive Staphylococcus aureus, vancomycin-int diate (VISA) and
- vancomycin-resistant (VRSA)
- Streptococcus pneumoniae (from blood, CSF or other normally sterile body fluid) (⇔ is if patient <18 years)
- Streptococcus pneumoniae, invasive, penicillin-resistant
- Trenonema nallidum
- Trichinella so.
- Varicella-zoster virus Vibrio sp. ⇔
- West Nile virus Com
- Yellow fever virus
 - 🕿 Yersinia pestis 🖘 🖬
 - Yersinia sp. ⇒
- emiological investigation M.G.L. c. 111, s. 7.).

MDPH, its authorized agents, and

local boards of health have the

authority to collect pertinent

information as part of

Healthcare providers and clinical laboratories are required by law to report infectious diseases to public health

- Chapter 105, Code of Massachusetts Regulations (CMR), Section 300.00: Reportable Diseases, Surveillance, and **Isolation & Quarantine** Requirements

Reporting is lab-based

 Primarily occurs through electronic laboratory reporting (ELR)

105 CMR 300.000 Reportable Diseases, Surveillance, and Isolation and Quarantine Requirements. Effective December 2013

 Listeria sp. ⇒⊡ Lymphocytic choriomeningitis virus

- Mycobacterium tuberculosis
- Neisseria gonorrhoeae ⇒
- Isolates should
 - sterile body fluid) ⇔ 🖬 Noroviruses
 - Novel coronaviruses causing severe disease
 - and P. vivax

Iceberg of public health reporting

Illness reported to public health

Laboratory identifies pathogen

Laboratory tests for pathogen

Specimen submitted for testing

Person seeks medical care

FOOD SAFETY

Disease Agents	Percentage compared v	e change in 2013 vith 2006–2008	2013 rate per 100,000 Population	2020 target rate per 100,000 Population	CDC estimates that
Campylobacter		13% increase	13.82		For every <i>Campylobacter</i> case reported, there are 30 cases not diagnosed
<i>Escherichia coli</i> O157		No change	1.15		For every <i>E. coli</i> O157 case reported, there are 26 cases not diagnosed
Listeria		No change	0.26		For every <i>Listeria</i> case reported, there are 2 cases not diagnosed
Salmonella		No change	15.19		For every <i>Salmonella</i> case reported, there are 29 cases not diagnosed
Vibrio	<mark></mark>	75% increase	0.51		For every <i>Vibrio parahaemolyticus</i> case reported, there are 142 cases not diagnosed
Yersinia		No change	0.36		For every <i>Yersinia</i> case reported, there are 123 cases not diagnosed



U.S. Department of Health and Human Services Centers for Disease Control and Prevention

For more information, see http://www.cdc.gov/foodnet/

Preliminary FoodNet 2013 Data

April 2014

05246920

Vibrio Case Investigation

Vibrio Case Investigation

- Conducted using the state's case management system, the Massachusetts Virtual Epidemiologic Network (MAVEN)
- Responsibility of case investigation falls on the state's 351 local boards of health



Management of cases in Massachusetts: Massachusetts Virtual Epidemiologic Network (MAVEN)

Basic Information				Notes (Add/Edit Mine))		
Event ID:	100024160			05/04/2015 11:25 AM (Generic) - Johanna Vostok [jvostoktest]			
Event:	Vibrio sp.			Interviewed case this morning. He reported consuming six raw			
Person:	John Snow Birth Date: 03/15/1913 (Male) Phone: (617) 500-0000			oysters as an appetizer at the Broad Street Restaurant on			
Investigation Status:	Open			Saturday. He chose w	which types of oysters he wanted	from the	
Linked Events/Contacts:	0 linked event(s)/contact	:(s) (<u>View</u>)		menu: 3 Wellfleet oys	ters and 3 Duxbury oysters.		
Attachments:	0 attachment(s) (Add)			05/04/2015 10·46 AM	(Generic) - Johanna Vostok livos	toktest]	
Notifications:	Event Date: 08/06/2014			From May 1 - October	r 31 2015. Vibrio parahaemolytici	us cases	
	Event Status: Suspect)neat Data		are being treated as in	mmediate events in MAVEN to all	low for	
	Age at time of event: 10	1 39		expedited interview of	cases and prompt traceback of s	seafood.	
	Age unit: Years	1.55		Please interview the c	ase as soon as possible to identi	ify any	
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Edit Event Properties ent Information Event Data Lab Question Packages QUESTION PACKAGE 1. Administrative 2. Demographic 3. Clinical 4. Vaccine and IG Informa 5. Risk/Exposure/Control 6. Epi-linked and Outbrea	Results Conc tion & Prevention k Information	erns Persons	Task	Event Pro	perties Event History Trail LAST UPDATE 10/07/2014 10/08/2014 10/08/2014 10/07/2014 0/07/2014 10/07/2014 05/04/2015 10/07/2014 05/04/2015	Sit	

MAVEN Laboratory Information

Eve	ent Data Lab	Results	Concerns	s Persons	Tasks	Event Proper	ties	Event History	Trail	
Labo										
Labs	Specimen Date	Specime	en Number	Specimen Source	Test		Res	ult	Lab	Ordering Facility
▶1	07/16/2014	2014000)1	Stool	Microor Pt: xxx:	ganism: Prid: Nom: Culture	Vibri para	o haemolyticus	South Shore Hospital Inc -	South Shore Hospital Inc
P ra	07/16/2014	14EN00	01	stool Trai	Microor Pt: xxx:	ganism: Prld: Nom: Culture	Vibri para	o haemolyticus	William A Hinton State Labo	South Shore Hospital Inc
Add Lat	Add Lab Result Update Lab Result Delete Lab Result									

MAVEN Clinical Question Package

Diagnosis date:	07/17/2014		
Did case have symptoms?	Yes		
Symptom onset date:	07/14/2014		
Symptom onset time:	04:00	AM / PM	PM 💌
Duration of symptoms:	4	unit	Days 💌
Abdominal cramps:	Yes 🔻		
Bloody Stool:	No 🔽		
Bullae:	No 🔽		
Cellulitis:	No Training Site		
Diarrhea:	Yes 🔹		
Max # of stools in 24 hours:	12		
Fever:	No 💌		
Headache:	Yes 🔹		
Muscle aches/pains (myalgia):	Yes 🔹		
Nausea:	No 💌		
Shock:	No 💌		
Vomiting:	Yes •		
Other symptoms (specify):			
Does patient have underlying illness?	Yes		
Please specify: E	Heart disease		

MAVEN Risk Question Package

Did case travel out-of-state or out-of-country during incubation period? Ξ	No Add New
Have close contacts had similar illness during incubation period?	No
Did the case consume any high-risk animal products during incubation period?	Yes
Product type: 🖃	Oysters Add New
When purchased:	07/13/2015
When consumed:	07/13/2015
Time consumed (i.e., 09:30 AM):	05:00 PM
Amount consumed:	6
Was it harvested by the case or a friend of the case?	No
Where purchased/obtained:	Broad Street Restaurant
Type of location where purchased:	Oyster bar or restaurant
Contact Name/Address/Phone # for purchase location:	Broad Street Restaurant 10 Elm Street Boston, MA (617) 555-0000
Where did the product originate from:	3 Welfleet oysters, 3 Duxbury oysters
How was it prepared after purchase?	Raw 💌

MAVEN Risk Question Package

High-risk materials include bodies of water, drippings from raw or live seafoo	d, or other marine or freshwater life.
During incubation period, was case's skin exposed to any high-risk materials?	Yes -
Exposure type: 🗉	Body of water Add New
Specify:	Boston Harbor
Date:	07/12/2015
Time	3:00
Activity at time of exposure:	 Bitten/stung Boating/skiing/surfing Construction/repairs Handling/cleaning seafood Swimming/diving/wading Walking on beach/shore/fell on rocks Other
Water type:	Brackish 💌
Did the patient sustain a wound or have a pre-existing wound?	No raining

Incidence in the United States & Massachusetts

Relative rates of culture-confirmed infections compared with 2006–2008 rates, by year — FoodNet, United States, 2006–2013



Confirmed Vibrio cases in Massachusetts by species May 1 – October 31



"Other" Vibrio species 2008-2015

- Includes Vibrio cholerae, Vibrio vulnificus
 - 0-3 cases of Vibrio vulnificus reported annually
 - 52% associated with out-of-state travel
 - 0-8 cases of Vibrio cholerae reported annually
 - 50% associated with out-of-state travel

Vibrio parahaemolyticus and Oysters in Massachusetts

Vibrio parahaemolyticus

- Naturally inhabits coastal waters of the US and Canada
- Present in higher concentrations during the summer
- Normally present in many types of raw seafood
 - Not all strains are pathogenic
 - Gastrointestinal illness is commonly associated with raw oyster consumption

Why oysters?

Oysters are filter feeders

- Feed on particles (algae) in surrounding seawater by filtering water through gills
- Each oyster filters 50 gallons of water per day
- Oysters can accumulate Vibrio as they filter water
 - May result in concentrations 100 times greater than those found in surrounding seawater



Why oysters?

 Vibrio parahaemolyticus levels in oysters are influenced by environmental conditions, harvest methods, and handling after harvest

Time-temperature abuse promotes growth of bacteria

- Commonly consumed raw
 - No opportunity for Vibrio to be killed

Vibrio Traceback Investigation

Information

State Agency		Town	Responsibility	
Department of Public Heal Bureau of Infectious Disea	:h: se h	BOH public ealth nurses	III people	
Department of Public Heal Bureau of Environmenta Health	th:	BOH inspectors	Retail & wholesale	
Division of Marina Fishari				
Shellfish Sanitation & Management	25:		Harvesters &	
Office of Law Enforcemen Environmental Police	t:	ocal shellfish constables	growing areas	



Preventing Infection

Preventing Infection: Vibrio parahaemolyticus Control Plan

- First implemented in 2012 due to warming air and water temperatures
- Developed by the Division of Marine Fisheries and DPH Bureau of Environmental Health
- Aims to:
 - Manage time-temperature conditions relative to oyster harvest and handling
 - Prevent/limit post-harvest growth of Vibrio parahaemolyticus in oysters



Confirmed Vibrio parahaemolyticus cases in Massachusetts, 2013: week reported to MDPH vs. week of seafood consumption



5 cases with oyster exposure and no consumption date; 18 with no or unknown seafood consumption.

Data current as of May 2015 Data source: Bureau of Infectious Disease. Massachusetts Closes Waters to Oyster Harvesting After Vibrio Outbreak

MA Shuts Down Several Oyster Beds for Vibrio; Recall Ordered

Oyster bed closures leave aquaculturists reeling "This marks the first time the state has closed A # 2 fic oyster beds INFECTIOUS DISEASE Bacterial outbreak roils Mass. oyster the industry

Published September 16, 2013 · Associated Press





Oysler cultivator Don Merry holds his oysler seed before spreading the seed into the waters of Duxbury Bay in Duxbury, Mass. Oysler harvesting on Massachusetts' South Shore has been closed since Aug. 30, 2013 due to bacterial contamination from the Vibrio parahaemolyticus bacteria and may remain closed until mid-October. (AP Photo/Stephan Savola) (AP2013)

BOSTON - A mystery of sorts threatens to stunt Massachusetts' small but growing oyster industry after illnesses linked to bacterial contamination forced the state to shut down beds for the first time ever.

The culprit is the Vibrio parahaemolyticus bacterium, which has occurred in state waters since the 1960s. Theories abound about the recent increase in illnesses linked to Massachusetts - but those are only theories.

Health Video



Study: Measles vaccine could protect against



other illnesses Killing cancer one



gene at a time

Study: Vitamin D supplements might help some lose veight

"...this year's closures affect about 14 percent of Massachusetts growers..."

Preventing Infection: Improved Communication

- Changes made after 2013 season:
 - Vibrio Working Group established
 - Improved training and guidance for local public health nurses
 - Improved management of information using MAVEN

Vibrio Working Group

- First meeting April 15, 2014
- Discuss new cases under investigation
- Aggregate traceback information across cases
 Discuss possible closures of harvest areas
- Work to improve Vibrio investigation in Massachusetts

PUBLIC HEALTH FACT SHEET Vibrio parahaemolyticus Infection

What is Vibrio parahaemolyticus?

V. parahaemolyticus is a germ (a bacterium) in the same family as the bacteria that cause naturally lives in coastal waters in the United States and causes an infection of the bowel

What are the symptoms of V. parahaemolyticus infection?

A person may have watery diarrhea, often with stomach cramps, nausea, vomiting, and c Symptoms usually appear within 24 hours of swallowing the germs. Illness usually lasts People with weakened immune systems or chronic liver disease are at a higher risk of be

How does infection with V. parahaemolyticus occur?

V. parahaemolyticus must be swallowed to cause illness in most cases. This usually hap food or drinking water that is contaminated with the germs. Most people become infecte or undercooked shellfish, particularly oysters. Illness can also occur by eating undercook shrimp. Less commonly, this germ can cause an infection in the skin when an open wou warm seawater. It is not spread from person to person.

How is V. parahaemolyticus infection diagnosed and treated?

Your doctor, nurse, or health center must send a stool, wound, or blood sample to a labor than drinking plenty of liquids to replace fluids lost through diarrhea, treatment is not nee cases of *V. parahaemolyticus* infection. There is no evidence that antibiotics decrease th length of the illness. People usually recover on their own in two to five days.

How can V. parahaemolyticus infection be prevented?

Most infections caused by *V. parahaemolyticus* in the United States can be prevented by cooking seafood. When an outbreak is traced back to an oyster or other shellfish bed, he may close the bed until the salt and temperature conditions are less favorable for this gen People should not consume oysters self-harvested from closed or contaminated oyster or beds. Wound infections can be prevented by avoiding exposure of open wounds to warm

The following advice can reduce the risk of foodborne illness from shellfish:

- When ordering shellfish in restaurants, ask that they be fully cooked unless they been treated with a method to reduce Vibrio (such as pressure treatment)
- · Keep raw foods from touching cooked foods and surfaces used for cooking and

- Apr 2014 | Page 2 of 2
- · Preparing oysters and other shellfish in the shell:
 - o Before cooking: Discard any with open shells
 - o During cooking: Boil for 3-5 minutes after shells open
 - o After cooking: Discard any with shells that did not open
- Preparing shucked oysters:
 - o Boil or simmer for at least 3 minutes or until the edges curl
 - o Fry at 375 degrees Fahrenheit for at least 3 minutes
 - Broil 3 inches from heat for 3 minutes
 - Bake at 450 degrees Fahrenheit for 10 minutes

Are there any health regulations for people with V. parahaemolyticus?

Yes. Health care providers are required by law to report cases of illness to the local board of health.

In order to protect the public, workers at food-related businesses diagnosed with *V. parahaemolyticus* infection are advised not to return to work until their diarrhea is gone. Food-related businesses include restaurants, sandwich shops, hospital kitchens, supermarkets, dairy or food-processing plants. This also includes workers in schools, residential programs, day-care and health care facilities who feed, give mouth care or give medicine to clients.

Massachusetts Department of Public Health | Bureau of Infectious Diseases | 305 South Street, Jamaica

Massachusetts Department of Public Health | Bureau of Infectious Diseases | 305 South Street, Jamaica Plain, MA 02130



MAVEN Traceback Question Package

Distributor (name, address, phone): 🖃	Trainir		Oyster Lovers LLC, 1	00 Main St, Wel	Ifleet MA 508-2	22-0000
Distributor certification number:	1101111	IJ	165 962		ann	IJ
Was an inspection completed for this distributor?			Yes 💌			
Distributor inspection date:			05/06/2015			
Original Shippers Certification Number:			123 456			
Implicated food item:			Oysters 👻			
How was product distributed to retail outlet?			Shellstock 💌			
Name of retail establishment:			Broad Street Restau	rant		
Was an inspection completed for this retail establishme	ent?		Yes 💌			
Establishment inspection date:			05/06/2015			
Date retail outlet received product:	-		05/01/2015			
MA harvest location:	<u>i rainir</u>	10	Cape Cod Bay, CCB	11 - Wellfleet Ha	arbor	
Designated Shellfish Growing Areas						
Was seafood imported from another country?			No 🔽			
Are shipping tags available from the suspect lot?			Yes 👻			
Harvest Date:			04/30/2015			
Are physical characteristics of the narvest area available?	Yes -	Ocelar				
Maximum ambient temperature.	90	scale.	F ▼	Date	107/11/2014	
Surface water temperature:	60		DEALER NAME Dealer Address	CI	ERT. NO.	S with surred for
Caliate (ast)			City, State Zip Code ORIGINAL SHIPPER'S CERT. NO. IF OTI	ER THAN ABOVE:		TOMER ggs, fish, I ndviduals is are con th official
Sainnity (ppt).	35		HARVEST DATE:			JR CUS as beef, e illness. 1 these foo
Total rainfall (inches in previous 5 days):	1.2		HARVEST LOCATION:			RM Y O(gin such I foodbatthe her risk if sician or I
Fecal coliform count:			TYPE OF SHELLFISH:			S. INFO arrival on the risk of the at hig t your phy
r ecar comorni count.	5		QUANTITY OF SHELLFISH:			CTAILER steeds of reduces 1 litions may
Was there evidence of improper storage, cross-contamination, or holding temperature at any point?	Trainin		THIS TAG IS REQUIRED TO BE AT IS EMPTY AND THEREAFTER KEP	TACHED UNTIL CONT T ON FILE FOR 90 DA	AINER YS.	RE Theroughly cooking poutty, or shellfsh protection heath cond raw or undercodes further information.

Confirmed Vibrio parahaemolyticus cases in Massachusetts, 2015: week reported to MDPH vs. week of seafood consumption



1 VP case with seafood exposure and no consumption date; 8 with no or unknown seafood consumption;.

Data current as of October 5, 2015 Data source: Bureau of Infectious Disease.

Summary

In Summary...

- Vibrio case investigation begins with report of a positive clinical laboratory result
- Approximately 70% of *Vibrio* cases reported in Massachusetts are *Vibrio* parahaemolyticus
- Each case of *Vibrio parahaemolyticus* with reported oyster consumption is investigated by three state agencies
 - Case information is aggregated to inform public health action

Thank you

Questions? Johanna.Vostok@state.ma.us

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