From: Rhonda Braswell

To: FOIA Requests (CDC); Kocher, Paula L. (CDC/OCOO/OGC)

Subject: FOIA Request for Records

**Date:** Thursday, August 6, 2020 11:32:18 AM

Attachments: image001.png

2020.08.06 FOIA Ltr Req to CDC.pdf KWD CDC Release Form.PDF MSDPH Investigation Report.pdf KWD Death Certificate.pdf Ltrs of Administration.pdf

#### Good morning,

Please see attached correspondence together with documentation to support my request. Please confirm receipt and, if possible, provide an estimated response time to my request.

Do not hesitate to contact m should you have any questions or need any additional information.

Thank you. Rhonda

#### **Rhonda Braswell**

Paralegal

Morris Haynes, Attorneys at Law 3500 Colonnade Parkway, Suite 100 Birmingham, AL 35243

O: (205) 324-4008 | F: (205) 324-0803





Centers for Disease Control and Prevention (CDC) Atlanta GA 30333 December 9, 2020

#### SENT VIA EMAIL

Rhonda Braswell Morris Haynes Wheeles Knowles & Nelson 3500 Colonnade Parkway, Suite 100 Birmingham, Alabama 35243 rbraswell@mhhlaw.net

Dear Ms. Braswell:

This letter is our final response regarding your Centers for Disease Control and Prevention and Agency for Toxic Substances and Disease Registry (CDC/ATSDR) Freedom of Information Act (FOIA) request of August 6, 2020, assigned #20-02155-FOIA, for:

any and all records pertaining to the legionella case/outbreak/investigation pertaining to Kathy W. Douglas (State Investigation# xxx). Mrs. Douglas was exposed to legionella pneumophila in approximately June 2019, while she was a visitor at Quapaw Bath and Spa facility in Hot Springs, Arkansas.

Please provide us with any and all documents you may have pertaining to Mrs. Douglas and/or the legionella outbreak associated with visitors at Quapaw Bath and Spa facility in Hot Springs, Tennessee in June 2019.

Also, provide us with any and all documents you have pertaining to any exposure to legionella pneumophila, at Quapaw Bath and Spa facility, for the past 5 years. . . .

We received your fee limit of \$150.00 email dated October 13, 2020.

We also received your search terms agreement email dated October 5, 2020, which you agreed to the following search terms: "Quapaw" within 10 words of "hot springs".

We located 88 pages of responsive records (66 pages released in full; 22 pages released in part). After a careful review of these pages, some information was withheld from release pursuant to 5 U.S.C. §552 Exemptions 5 and 6.

Exemption 5 protects inter-agency or intra-agency memorandums or letters which would not be available by law to a party other than an agency in litigation with the agency. Exemption 5 therefore incorporates the privileges that protect materials from discovery in litigation, including the deliberative process, attorney work-product, and attorney-client privileges. Information withheld under this exemption was protected under the <u>deliberative process privilege</u>. The deliberative process privilege protects the decision-making process of government agencies. The deliberative process privilege protects materials that are both predecisional and deliberative. The materials that have been withheld under the deliberative process privilege of Exemption 5 are both predecisional and deliberative, and do not contain or represent formal or informal agency policies or decisions. Examples of information withheld include deliberative conversations.

#### Page 2 – Rhonda Braswell

Exemption 6 protects information in personnel and medical files and similar files when disclosure would constitute a clearly unwarranted invasion of personal privacy. The information that has been withheld under Exemption 6 consists of personal information, such as cell phone numbers. We have determined that the individuals to whom this information pertains has a substantial privacy interest in withholding it.

We have received your check dated October 12, 2020, for payment in the amount of \$1702.00.

You may contact our FOIA Public Liaison at 770-488-6277 for any further assistance and to discuss any aspect of your request. Additionally, you may contact the Office of Government Information Services (OGIS) at the National Archives and Records Administration to inquire about the FOIA mediation services they offer. The contact information for OGIS is as follows: Office of Government Information Services, National Archives and Records Administration, 8601 Adelphi Road-OGIS, College Park, Maryland 20740-6001, e-mail at ogis@nara.gov; telephone at 202-741-5770; toll free at 1-877-684-6448; or facsimile at 202-741-5769.

If you are not satisfied with the response to this request, you may administratively appeal by writing to the Deputy Agency Chief FOIA Officer, Office of the Assistant Secretary for Public Affairs, U.S. Department of Health and Human Services, Hubert H. Humphrey Building, 200 Independence Avenue, Suite 729H, Washington, D.C. 20201. You may also transmit your appeal via email to <a href="FOIARequest@psc.hhs.gov">FOIARequest@psc.hhs.gov</a>. Please mark both your appeal letter and envelope "FOIA Appeal." Your appeal must be postmarked or electronically transmitted by Tuesday, March 9, 2021.

Additionally, documents (776 pages) that originated by National Park Service (NPS) were found in our search. Your request and NPS's equity were referred to the NPS's FOIA Office for a direct response to you. The information you requested falls under their jurisdiction. Should you have questions about the status of your request, you may contact:

Ramona Turner 601 Riverfront Drive Omaha, NE 68102 Phone: 402-312-2521

Fax: 402-661-1737 (call to confirm receipt)

Sincerely,

Roger Andoh

CDC/ATSDR FOIA Officer

Office of the Chief Operating Officer

Phone: (770) 488-6399 Fax: (404) 235-1852

Enclosures

20-02155-FOIA

From: Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR)

**Sent:** Fri, 4 Jan 2019 15:08:09 +0000

To: Said, Maria

Cc: CATHERINE.WATERS@ARKANSAS.GOV;Debbie.Pledger@arkansas.gov;NCID

DBMD Travel-Legionella (CDC);David Kostamo;Lauren Miller;Haselow, Dirk (CDC arkansas.gov)

Subject: RE: [EXTERNAL] CONFIDENTIAL: travel-associated legionellosis \_\_\_\_\_\_\_

That sounds great – please let us know what time works best for you all. We are flexible here today.

Best, Sooji

From: Said, Maria <maria\_said@nps.gov> Sent: Friday, January 4, 2019 9:45 AM

To: Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) <npf3@cdc.gov>

Cc: CATHERINE.WATERS@ARKANSAS.GOV; Debbie.Pledger@arkansas.gov; NCID DBMD Travel-

Legionella (CDC) <travellegionella@cdc.gov>; David Kostamo <david\_kostamo@nps.gov>; Cooley, Laura A. (CDC/DDID/NCIRD/DBD) <whz3@cdc.gov>; Lauren Miller <lauren\_miller@partner.nps.gov>; Haselow,

Dirk (CDC arkansas.gov) < dirk.haselow@arkansas.gov>

Subject: Re: [EXTERNAL] CONFIDENTIAL: travel-associated legionellosis CDC45011

Thanks Sooji.

I just got off the phone with Dirk Haselow, the state epi in Arkansas. I would certainly be open to a call. I am cc'ing Dirk here too.

Maria

On Fri, Jan 4, 2019 at 9:39 AM Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) < npf3@cdc.gov > wrote:

Hi Maria.

Laura is out of the office, but we can certainly have a call today. We are pretty flexible – please let us know what time works best on your end.

Would anyone from Arkansas be available also for the call?

Many thanks,

Sooji

From: Said, Maria < maria\_said@nps.gov> Sent: Thursday, January 3, 2019 5:41 PM

To: Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) <npf3@cdc.gov>

**Cc:** <u>CATHERINE.WATERS@ARKANSAS.GOV</u>; <u>Debbie.Pledger@arkansas.gov</u>; NCID DBMD Travel-Legionella (CDC) < <u>travellegionella@cdc.gov</u>>; David Kostamo < <u>david\_kostamo@nps.gov</u>>; Cooley, Laura A. (CDC/DDID/NCIRD/DBD) < <u>whz3@cdc.gov</u>>; Lauren Miller < <u>lauren\_miller@partner.nps.gov</u>>

Subject: Re: [EXTERNAL] CONFIDENTIAL: travel-associated legionellosis CDC45011

Hi all,

I phoned the spa, and the voice message states that they are closed for annual maintenance January 1 through January 10.

I also posted an Epi-X, to see if there have been any additional cases.

I'm working on contacting the Superintendent of the park to make her aware.

This investigation/response will be complicated by the government shutdown.

Laura, would it be possible to talk tomorrow about appropriate next steps? An environmental assessment was done back in July. I'd be interested to hear your thoughts on environmental testing.

Thank you!

Maria

On Thu, Jan 3, 2019 at 5:00 PM Said, Maria < maria\_said@nps.gov > wrote:

Hi Sooji,

Thanks for letting us know about this. From Google maps, it looks like the address the first case (135 Central Avenue) gave is a building outside the park. However, if they named the Quapaw Baths & Spa specifically, I assume that is where they visited. It is concerning that this is the second case linked to the spa in the last 6 months.

The National Park Service is closed with the government shutdown, although some parks are continuing to operate. I will look into the situation at Hot Springs National Park to see if they are running, and if so, at what capacity.

Cat, have you had any clusters linked with any hotels in non-park land? It looks like these two patients stayed at different hotels.

Thanks.

Maria

On Thu, Jan 3, 2019 at 4:01 PM Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) < npf3@cdc.gov> wrote:

Dear Colleague(s):

Please see the attached notification regarding a case of Legionnaires' disease that may be travel-associated.

This case, 600 used the hot tub at Quapaw Baths & Spa in Hot Springs National
Park, with the address "413 Central Ave." There was another case in the past year,
ത്ര (attached), who used the hot tub at Quapaw, Hot Springs National Park as
well. However, for (b)(6) the address is written as (b)(6)
wondering if updated information may be available for <u>606</u> related to the patient's
hot tub use?

Thanks.

#### Sooji Lee, MS, MSPH

Foldemiologist (HRC, Inc.)

Ingianella Team (NC RD/DBD/RDB)

Centers for Disease Control and Prevention

1600 Clifton Road, MS H24-6 | Atlanta, GA 30329

Phone: 404-718-3192 | Its sleef@cdd.gov

--

Maria Said, MD, MHS | CDR, U.S. Public Health Service Epidemiology Branch Chief | Office of Public Health | National Park Service

Address: 1849 C. Street, NW, Room 2543, Mailstop 2560 | Washington, DC 20240

Office Tel: 202-513-7151 | Email: maria said@nps.gov

Website (public): https://www.nps.gov/orgs/1878/index.htm

Website (internal): https://sites.google.com/a/nps.gov/in2-protect-and-promote-

health/home/disease-surveillance-response

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health/home/disease-surveillance-response

From: Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR)

**Sent:** Fri, 4 Jan 2019 15:07:20 +0000

To: Dirk Haselow

Cc: Safi, Haytham (CDC arkansas.gov);Brandi Stricklin;Mike Cima, PhD;Cat

Waters; Debbie Pledger; Wheeler, Gary (CDC arkansas.gov)

Subject: RE: [EXTERNAL] CONFIDENTIAL: travel-associated legionellosis \_\_\_\_\_\_\_\_

Hello Dirk.

The best contact for TX is:

Hailey Rucas, MPH
Epidemiologist II - Invasive and Respiratory Infectious Disease Team
Emerging and Acute Infectious Disease Branch
Texas Department of State Health Services
(512) 776-6358 phone
(512) 776-7616 fax

\_\_\_\_\_

Hailey.rucas@dshs.texas.gov

Please reference TX state ID	(b)(6)	for this case.
We will update our distributi	on list.	

From: Dirk Haselow < Dirk. Haselow@arkansas.gov>

Sent: Friday, January 4, 2019 10:01 AM

To: Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) <npf3@cdc.gov>

Cc: Safi, Haytham (CDC arkansas.gov) <haytham.safi@arkansas.gov>; Brandi Stricklin

<Brandi.Stricklin@arkansas.gov>; Mike Cima, PhD <Michael.Cima@arkansas.gov>; Cat Waters

<Catherine.Waters@arkansas.gov>; Debbie Pledger <Debbie.Pledger@arkansas.gov>; Wheeler, Gary

(CDC arkansas.gov) <gary.wheeler@arkansas.gov>

Subject: FW: [EXTERNAL] CONFIDENTIAL: travel-associated legionellosis \_\_\_\_\_\_\_

Hi Sooji!

Best, Sooji

I just learned of this last night. Can you share contact information for the patient and the relevant TX jurisdiction. We'd like to get our hands on the case investigation form and interview data. We also determined that we need to add a couple more people to your notification list beyond Cat and Debbie. Please add me, Haytham, Brandi, and Mike, all CC'd, for future notifications.

Thank you so much

#### Dirk

From: Said, Maria [mailto:maria\_said@nps.gov] Sent: Friday, January 4, 2019 8:35 AM To: Dirk Haselow < Dirk. Haselow@arkansas.gov > Subject: Fwd: [EXTERNAL] CONFIDENTIAL: travel-associated legionellosis CDC45011 ----- Forwarded message -----From: Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) <npf3@cdc.gov> Date: Thu, Jan 3, 2019 at 4:01 PM Subject: [EXTERNAL] CONFIDENTIAL: travel-associated legionellosis To: CATHERINE.WATERS@ARKANSAS.GOV <CATHERINE.WATERS@arkansas.gov>, Debbie.Pledger@arkansas.gov < Debbie.Pledger@arkansas.gov >, maria said@nps.gov <maria said@nps.gov> Cc: NCID DBMD Travel-Legionella (CDC) <travellegionella@cdc.gov> Dear Colleague(s): Please see the attached notification regarding a case of Legionnaires' disease that may be travelassociated. This case, 600 used the hot tub at Quapaw Baths & Spa in Hot Springs National Park, with the address "413 Central Ave." There was another case in the past year, \_\_\_\_\_\_\_\_ (attached), who used the hot tub at Quapaw, Hot Springs National Park as well. However, for 600 the (b)(6) I was wondering if updated information may be address is written as available for bo related to the patient's hot tub use?

Sooji Lee, MS, MSPH

Epidemiologist (IERC, Inc.)

Legionella Team (NCIRD/DBD/RDB)

Centers for Disease Control and Prevention

Thanks.

1600 Clifton Road, MS +24-6 | Atlanta, GA 30329 Phone: 404-718-3192 | ... | : slee7@cdc.gov

--

Maria Said, MD, MHS | CDR, U.S. Public Health Service Epidemiology Branch Chief | Office of Public Health | National Park Service

Address: 1849 C. Street, NW, Room 2543, Mailstop 2560 | Washington, DC 20240

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health/home/disease-surveillance-response

Said, Maria From: Fri, 4 Jan 2019 09:19:39 -0500 Sent: Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) To: Re: [EXTERNAL] CONFIDENTIAL: travel-associated legionellosis CDC45011 Subject: Hi Sooji, I looked at the case report form for 37173. It clearly says that the person stayed at the Quapaw Spa. I don't see any address of 135 Central Ave on the report form. We are moving forward as if this person visited the Quapaw Spa, even though the 135 Central Ave address is different. Please let me know if you see this as an issue or if there are any additional reasons to think that the person did not visit the Quapaw. Thanks. Maria On Thu, Jan 3, 2019 at 4:01 PM Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) <npf3@cdc.gov> wrote: Dear Colleague(s): Please see the attached notification regarding a case of Legionnaires' disease that may be travel-associated. This case, 600 used the hot tub at Quapaw Baths & Spa in Hot Springs National Park, (attached), who used the hot tub at Quapaw, Hot Springs National Park as well. However, for I was wondering if updated া the address is written as information may be available for bo related to the patient's hot tub use? Thanks. Sooji Lee, MS, MSPH Epidemiologist (IHRC, Inc.) Tegionella Team (NCIRD/DBD/RDB).

Centers for Disease Control and Prevention.

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health/home/disease-surveillance-response

Google Calendar on behalf of maria said@nps.gov From: Sent: Fri, 4 Jan 2019 16:03:12 +0000 Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) To: Subject: Accepted: [EXTERNAL] CONFIDENTIAL: travel-associated legionellosis ... @ Fri Jan 4, 2019 12pm - 1pm (EST) (Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR)) Attachments: invite.ics maria\_said@nps.gov has accepted this invitation. (b)(6) [EXTERNAL] CONFIDENTIAL: travel-associated legionellosis Fri Jan 4, 2019 12pm - 1pm Skype Meeting (map) Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) maria\_said@nps.gov Haselow, Dirk (CDC arkansas.gov) Smith, Jessica (CDC/DDID/NCIRD/DBD) Lauren Miller Cat Waters Sara Newman Debbie Pledger Justin Cully David Kostamo Please see call information below! - Sooji Join Skype Meeting Trouble Joining? Try Skype Web App Join by phone (404) 553-8912 (Atlanta Dial-in Conference Region) English (United States) (855) 348-8390 (Atlanta Dial-in Conference Region) English (United States)

Forgot your dial-in PIN? |Help

[!OC([1033])!]

Conference ID:

Find a local number

.....

\_\_\_\_\_

From: Dirk Haselow >

Sent: Friday, January 4, 2019 10:48 AM

To: 'Said, Maria' >

Cc: Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) >; Cat Waters >; Debbie Pledger >; NCID DBMD Travel-Legionella (CDC) >; David Kostamo >; Cooley, Laura A. (CDC/DDID/NCIRD/DBD) >; Lauren Miller >; Justin Cully >; Sara Newman >

Subject: RE: [EXTERNAL] CONFIDENTIAL: travel-associated legionellosis

(b)(6)

That time works for me.

Fyi, to address your previous question to cat. We have a single other legionella case in the last 6 months other than the two you have associated with the park. That case was nowhere near hot springs

Dirk

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Sent: Friday, January 4, 2019 9:45 AM

To: Dirk Haselow >

Cc: Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) >; Cat Waters >; Debbie Pledger >; NCID DBMD Travel-Legionella (CDC) >; David Kostamo >; Cooley, Laura A. (CDC/DDID/NCIRD/DBD) >; Lauren Miller >; Justin Cully >; Sara Newman >

Subject: Re: [EXTERNAL] CONFIDENTIAL: travel-associated legionellosis CDC45011

Thanks Dirk. Are you available to join a call with CDC? Sooji, I am available whenever.

Can we aim for 12 noon Eastern Time?

I am including on this email Justin Cooly, the Chief Ranger for the park.

Maria

On Fri, Jan 4, 2019 at 10:41 AM Dirk Haselow > wrote:

Hi Maria,

I just briefed my director, Dr. Nate Smith, on this situation and he fully supports your suggestion of notifying customers. If that cannot be done quickly, he has directed me to proceed with public notification.

Respectfully,

Dirk

From: Said, Maria [mailto:maria said@nps.gov]

Sent: Friday, January 4, 2019 8:45 AM

To: Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) >

Cc: Cat Waters >; Debbie Pledger >; NCID DBMD Travel-Legionella (CDC) >; David Kostamo >; Cooley, Laura A. (CDC/DDID/NCIRD/DBD) >; Lauren Miller >; Dirk Haselow >

Subject: Re: [EXTERNAL] CONFIDENTIAL: travel-associated legionellosis CDC45011

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1600 Clifton Road, MS H24-6 |Atlanta, GA 30329

Phone: 404-718-3192 | •: slee7@cdc.gov

\_\_

Maria Said, MD, MHS | CDR, U.S. Public Health Service

Epidemiology Branch Chief | Office of Public Health | National Park Serv

Google Calendar

Learn More

From: Sent: To: Subject:	Said, Maria Fri, 4 Jan 2019 11:04:05 -0500 Lee, Sooji (CDC/DDID/NCIRD/DI Re: [EXTERNAL] CONFIDENTIAL	BD) (CTR) travel-associated legionellosis CDC45011
Thank you Sooji. Mu Maria	ch appreciated.	
On Fri, Jan 4, 2019 at <a href="mailto:npf3@cdc.gov">npf3@cdc.gov</a> > wro	t 10:59 AM Lee, Sooji (CDC/I ote:	DDID/NCIRD/DBD) (CTR)
Please see call inform	nation below! – Sooji	
Join Skype Me	eting	
Trou <b>bl</b> e Joini <b>n</b> g? <u>T</u>	ry Skype Web App	
Join by phone		
(404) 553-8912 (Atlant	a Dial-in Conference Region)	English (United States)
(855) 348-8390 (Atlant	a Dial-in Conference Region)	English (United States)
<u>Find a local number</u>		
Conference ID: <u>மெ</u>		
Forgot your dial-in PIN	? Help	
		······································

From: Dirk Haselow < Dirk. Haselow@arkansas.gov >

Sent: Friday, January 4, 2019 10:48 AM
To: 'Said, Maria' < maria said@nps.gov>

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Cooley, Laura A. (CDC/DDID/NCIRD/DBD) <whz3@cdc.gov>; Lauren Miller

<lauren miller@partner.nps.gov>; Justin Cully <justin cully@nps.gov>; Sara Newman

<sara newman@nps.gov>

**Subject:** RE: [EXTERNAL] CONFIDENTIAL: travel-associated legionellosis

(b)(6)

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To: Dirk Haselow < Dirk. Haselow@arkansas.gov>

Cc: Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) < npf3@cdc.gov >; Cat Waters

<<u>Catherine.Waters@arkansas.gov</u>>; Debbie Pledger <<u>Debbie.Pledger@arkansas.gov</u>>; NCID DBMD Travel-Legionella (CDC) <<u>travellegionella@cdc.gov</u>>; David Kostamo <<u>david\_kostamo@nps.gov</u>>;

Cooley, Laura A. (CDC/DDID/NCIRD/DBD) < whz3@cdc.gov>; Lauren Miller

<lauren miller@partner.nps.gov>; Justin Cully <justin cully@nps.gov>; Sara Newman

<sara newman@nps.gov>

Subject: Re: [EXTERNAL] CONFIDENTIAL: travel-associated legionellosis CDC45011

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From: Said, Maria [mailto:maria_said@nps.gov]  Sent: Friday, January 4, 2019 8:45 AM  To: Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) <npf3@cdc.gov> Cc: Cat Waters <catherine.waters@arkansas.gov>; Debbie Pledger  <ndebbie.pledger@arkansas.gov>; NCID DBMD Travel-Legionella (CDC) <ndebbie.pledger@arkansas.gov>; David Kostamo <ndebbie.gov>; Cooley, Laura A. (CDC/DDID/NCIRD/DBD)  <marhdightarrow <ndebbie.pledger@arkansas.gov="" miller="">; Dirk Haselow  <ndebbie.pledger@arkansas.gov>; Cooley, Laura A. (CDC/DDID/NCIRD/DBD)  <marhdightarrow <ndebbie.pledger@arkansas.gov="" miller="">; Dirk Haselow  <ndebbie.pledger@arkansas.gov> Subject: Re: [EXTERNAL] CONFIDENTIAL: travel-associated legionellosis CDC45011</ndebbie.pledger@arkansas.gov></marhdightarrow></ndebbie.pledger@arkansas.gov></marhdightarrow></ndebbie.gov></ndebbie.pledger@arkansas.gov></ndebbie.pledger@arkansas.gov></catherine.waters@arkansas.gov></npf3@cdc.gov>
Thanks Sooji.

pen to a call. I am cc'ing Dirk here too.
Maria
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Would anyone from Arkansas be available also for the call?
Many thanks,
Sooji
From: Said, Maria <maria_said@nps.gov> Sent: Thursday, January 3, 2019 5:41 PM To: Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) <npf3@cdc.gov> Cc: CATHERINE.WATERS@ARKANSAS.GOV; Debbie.Pledger@arkansas.gov; NCID DBMD Travel-Legionella (CDC) <travellegionella@cdc.gov>; David Kostamo <david_kostamo@nps.gov>; Cooley, Laura A. (CDC/DDID/NCIRD/DBD) <whratalwhyza@cdc.gov>; Lauren Miller <lauren_miller@partner.nps.gov> Subject: Re: [EXTERNAL] CONFIDENTIAL: travel-associated legionellosis CDC45011</lauren_miller@partner.nps.gov></whratalwhyza@cdc.gov></david_kostamo@nps.gov></travellegionella@cdc.gov></npf3@cdc.gov></maria_said@nps.gov>
Hi all,
I phoned the spa, and the voice message states that they are closed for annual maintenance January 1 through January 10.

I also posted an Epi-X, to see if there have been any additional cases.

I'm working on contacting the Superintendent of the park to make her aware.
This investigation/response will be complicated by the government shutdown.
Laura, would it be possible to talk tomorrow about appropriate next steps? An environmental assessment was done back in July. I'd be interested to hear your thoughts on environmental testing.
Thank you!
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On Thu, Jan 3, 2019 at 5:00 PM Said, Maria < maria_said@nps.gov > wrote:
Hi Sooji,
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The National Park Service is closed with the government shutdown, although some parks are continuing to operate. I will look into the situation at Hot Springs National Park to see if they are running, and if so, at what capacity.
Cat, have you had any clusters linked with any hotels in non-park land? It looks like these two patients stayed at different hotels.
Thanks.
Maria

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Dear Colleague(s):
Please see the attached notification regarding a case of Legionnaires' disease that may be travel-associated.
This case, used the hot tub at Quapaw Baths & Spa in Hot Springs National Park, with the address "413 Central Ave." There was another case in the past year, (b)(6) (attached), who used the hot tub at Quapaw, Hot Springs
National Park as well. However, for both the address is written as
® I was wondering if updated information may be available for ௵
related to the patient's hot tub use?
Thanks.
Sooji Lee, MS, MSPH
Epidemiologist (I=RC, Inc.)
Legiosella Toam (NCIRD/DBD/RDB)
Contens for Disease Control and Provention

Phone: 404-718-3192 | 1 1: slee7@cdc.gov

--

Maria Said, MD, MHS | CDR, U.S. Public Health Service Epidemiology Branch Chief | Office of Public Health | National Park Service Address: 1849 C. Street, NW, Room 2543, Mailstop 2560 | Washington, DC 20240

Office Tel: 202-513-7151 | Email: maria\_said@nps.gov

Website (public): https://www.nps.gov/orgs/1878/index.htm

Website (internal): <a href="https://sites.google.com/a/nps.gov/in2-protect-and-promote-health/home/disease-surveillance-response">https://sites.google.com/a/nps.gov/in2-protect-and-promote-health/home/disease-surveillance-response</a>

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Website (internal): https://sites.google.com/a/nps.gov/in2-protect-and-promote-

<u>health/home/disease-surveillance-response</u>

From: Google Calendar on behalf of justin_cully@nps.gov  Sent: Fri, 4 Jan 2019 16:33:03 +0000  To: Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR)  Subject: Accepted: [EXTERNAL] CONFIDENTIAL: travel-associate  Jan 4, 2019 11am - 12pm (CST) (Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR))  Attachments: invite.ics	d legionellosis @ Fri
justin_cully@nps.gov has accepted this invitation.	
[EXTERNAL] CONFIDENTIAL: travel-associated legionellosis	(b)(6)
Fri Jan 4, 2019 11am – 12pm	
Skype Meeting ( <u>map</u> )	
Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR)	
<ul> <li>Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR)</li> <li>justin_cully@nps.gov</li> <li>Haselow, Dirk (CDC arkansas.gov)</li> <li>'Said, Maria'</li> <li>Smith, Jessica (CDC/DDID/NCIRD/DBD)</li> <li>Debbie Pledger</li> <li>Cat Waters</li> <li>David Kostamo</li> <li>Lauren Miller</li> <li>Sara Newman</li> </ul> Please see call information below! – Sooji	
Join Skype Meeting	
Trouble Joining? Try Skype Web App	
Join by phone	
(404) 553-8912 (Atlanta Dial-in Conference Region) English (United States)	
(855) 348-8390 (Atlanta Dial-in Conference Region) English (United States)	
Find a local number	
Conference ID: (b)(6)	
Forgot your dial-in PIN?  Help	
[IOC([1033])I]	

From: Dirk Haselow >
Sent: Friday, January 4, 2019 10:48 AM
To: 'Said, Maria' >
Cc: Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) >; Cat Waters >; Debbie Pledger >; NCID DBMD Travel-Legionella (CDC) >; David Kostamo >; Cooley, Laura A. (CDC/DDID/NCIRD/DBD) >; Lauren Miller >; Justin Gully >; Sara Newman >
Subject: RE: [EXTERNAL] CONFIDENTIAL: travel-associated legionellosis
That time works for me.
Fyi, to address your previous question to cat. We have a single other legionella case in the last 6 months other than the two you have associated with the park. That case was nowhere near hot springs
Dirk
From: Said, Maria [mailto: <u>maria_said@nps.gov]</u>
Sent: Friday, January 4, 2019 9:45 AM
To: Dirk Haselow >
Cc: Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) >; Cat Waters >; Debbie Pledger >; NCID DBMD Travel-Legionella (CDC) >; David Kostamo >; Cooley, Laura A. (CDC/DDID/NCIRD/DBD) >; Lauren Miller >; Justin Cully >; Sara Newman >
Subject: Re: [EXTERNAL] CONFIDENTIAL: travel-associated legionellosis (b)(6)
Thanks Dirk. Are you available to join a call with CDC? Sooji, I am available whenever.
Can we aim for 12 noon Eastern Time?
I am including on this email Justin Cooly, the Chief Ranger for the park.
Maria
On Fri, Jan 4, 2019 at 10:41 AM Dirk Haselow > wrote:

I just briefed my director, Dr. Nate Smith, on this situation and he fully supports your suggestion of notifying customers. If that cannot be done quickly, he has directed me to proceed with public notification.

Respectfully,

Hi Maria,

Dirk

From: Said, Maria [mailto:maria said@nps.gov]

Sent: Friday, January 4, 2019 8:45 AM

To: Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) >

Cc: Cat Waters >; Debbie Pledger >; NCID DBMD Travel-Legionella (CDC) >; David Kostamo >; Cooley, Laura A. (CDC/DDID/NCIRD/DBD) >; Lauren Miller >; Dirk Haselow >

Subject: Re: [EXTERNAL] CONFIDENTIAL: travel-associated legionellosis

(b)(6)

Thanks Sooji.

I just got off the phone with Dirk Haselow, the state epi in Arkansas. I would certainly be open to a call. I am co'ing Dirk here too.

Maria

On Fri, Jan 4, 2019 at 9:39 AM Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) > wrote:

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Would anyone from Arkansas be available also for the call?

Many thanks.

Sooji

From: Said, Maria >

Sent: Thursday, January 3, 2019 5:41 PM

To: Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) >

Cc: <u>CATHERINE.WATERS@ARKANSAS.GOV</u>; <u>Debbie.Pledger@arkansas.gov</u>; NCID DBMD Travel-Legionella (CDC) >; David Kostamo >; Cooley, Laura A. (CDC/DDID/NCIRD/DBD) >; Lauren Miller >

Subject: Re: [EXTERNAL] CONFIDENTIAL: travel-associated legionellosis CDC45011

Hi all,

I phoned the spa, and the voice message states that they are closed for annual maintenance January 1 through January 10.

I also posted an Epi-X, to see if there have been any additional cases.

I'm working on contacting the Superintendent of the park to make her aware.

This investigation/response will be complicated by the government shutdown.

1600 Clifton Road, MS H24-6 |Atlanta, GA 30329

Phone: 404-718-3192 | •: slee7@cdc.gov

\_\_

Maria Said, MD, MHS | CDR, U.S. Public Health Service

Epidemiology Branch Chief | Office of Public Health | National Park Serv

Google Calendar

Learn More

From: Said, Maria

**Sent:** Fri, 4 Jan 2019 14:09:56 -0500

To: Smith, Jessica (CDC/DDID/NCIRD/DBD)
Subject: Re: [EXTERNAL] Legionella resources

Thanks Jessica - much appreciated. Maria

On Fri, Jan 4, 2019 at 2:08 PM Smith, Jessica (CDC/DDID/NCIRD/DBD) < <u>lyd7@cdc.gov</u>> wrote:

Hi all,

As follow-up to the call earlier today, attached and below are the resources I mentioned that may be of help.

The attached word doc is the cooling tower-specific assessment form that we've been using in recent months. I also threw in ASHRAE Standard 188 and Guideline 12, and the CTI guidance and NSF protocols for best practices for *Legionello* control in cooling towers.

Link to CDC environmental investigation resources, including assessment form and sampling procedure/potential sampling sites documents: <a href="https://www.cdc.gov/legionella/health-depts/environmental-inv-resources.html">https://www.cdc.gov/legionella/health-depts/environmental-inv-resources.html</a>

Re: the ozone question, the link to EPA document on technologies for Legionella control in premise plumbing: <a href="https://www.epa.gov/ground-water-and-drinking-water/technologies-legionella-control-premise-plumbing-systems">https://www.epa.gov/ground-water-and-drinking-water/technologies-legionella-control-premise-plumbing-systems</a>

Link to CDC hot tub disinfection guidance: <a href="https://www.cdc.gov/legionella/downloads/hot-tub-disinfection.pdf">https://www.cdc.gov/legionella/downloads/hot-tub-disinfection.pdf</a>

Thanks and please let us know if there's anything we can do to be of assistance as the investigation continues.

#### Jessica

## 

### Join Skype Meeting

Trouble Joining? Try Skype Web App

#### Join by phone

(404) 553-8912 (Atlanta Dial-in Conference Region) English (United States)

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Find a local number

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< <u>Catherine.Waters@arkansas.gov</u> >; Debbie Pledger < <u>Debbie.Pledger@arkansas.gov</u> >; NCID DBMD
Travel-Legionella (CDC) < <a href="mailto:travellegionella@cdc.gov">travellegionella@cdc.gov"&gt;travellegionella@cdc.gov</a> ; David Kostamo < <a href="mailto:david_kostamo@nps.gov">david_kostamo@nps.gov</a> ;
Cooley, Laura A. (CDC/DDID/NCIRD/DBD) < whz3@cdc.gov >; Lauren Miller
<pre><lauren_miller@partner.nps.gov>; Justin Cully <justin_cully@nps.gov>; Sara Newman</justin_cully@nps.gov></lauren_miller@partner.nps.gov></pre>
< <u>sara_newman@nps.gov</u> >
Subject: RE: [EXTERNAL] CONFIDENTIAL: travel-associated legionellosis

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Cc: Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) < npf3@cdc.gov >; Cat Waters

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Sent: Friday, January 4, 2019 8:45 AM

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David Kostamo <<u>david\_kostamo@nps.gov</u>>; Cooley, Laura A. (CDC/DDID/NCIRD/DBD)

<whratauren miller <lauren miller@partner.nps.gov>; Dirk Haselow

<<u>Dirk.Haselow@arkansas.gov</u>>

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**Cc:** <u>CATHERINE.WATERS@ARKANSAS.GOV</u>; <u>Debbie.Pledger@arkansas.gov</u>; NCID DBMD Travel-Legionella (CDC) <travellegionella@cdc.gov>; David Kostamo <david kostamo@nps.gov>;

Cooley, Laura A. (CDC/DDID/NCIRD/DBD) <whz3@cdc.gov>; Lauren Miller

<lauren miller@partner.nps.gov>

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related to the patient's hot tub use?
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Sooji Lee, MS, MSPH
Upidemiologist (IHRC, Inc.)
Legionella Team (NCIRD/DBD/RDB)
Centers for Disease Control and Prevention

1600 Cifton Road, MS H24-6 | Atlanta, GA 30329

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Phone: 404-718-3192 | : slee7@cdc.gov

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health/home/disease-surveillance-response

From: Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR)

**Sent:** Fri, 4 Jan 2019 17:47:23 -0500

To: Said, Maria; Smith, Jessica (CDC/DDID/NCIRD/DBD); Haselow, Dirk (CDC

arkansas.gov)

Cc: Justin Cully; Kesteloot, Kurt; Sara Newman; Laura Miller

Subject: RE: Case Report Form review

Attachments: (b)(6) \_\_.pdf, Legionellosis 1-3-19 AR.docx

Hi Maria,

I can reach out to IL and TX so that they can send their case report forms to you. Typically, I would wait for their permission/acknowledgement, however, in the interest of time, I am copying the case notifications we received. TX and IL may have additional information/more completed case report form.

Best, Sooji

From: Said, Maria <maria\_said@nps.gov> Sent: Friday, January 4, 2019 5:41 PM

To: Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) <npf3@cdc.gov>; Smith, Jessica (CDC/DDID/NCIRD/DBD)

<lyd7@cdc.gov>; Haselow, Dirk (CDC arkansas.gov) <dirk.haselow@arkansas.gov>

Cc: Justin Cully <justin\_cully@nps.gov>; Kesteloot, Kurt <kurt\_kesteloot@nps.gov>; Sara Newman

<sara\_newman@nps.gov>; Laura Miller <laura\_a\_miller@nps.gov>

Subject: Case Report Form review

Hi Sooji, Jessica, and Dirk,

I'd like to review the full 2 case report forms before we start guest notifications.

I know Dirk is working on getting them (thank you Dirk), but he may not have the most recent one, as it is a TX case and we were all notified about it just yesterday.

Sooji and Jessica, are you able to contact TX and IL to help us see these case report forms?

I'm happy to hear anyone's thoughts and the best way forward.

Thanks.

Maria

I-NEDSS Page 1 of 8

# Legionellosis - Legionnaires Disease - L. pneumophila serogroup 1 Case Report

<u>Demographic | General Illness | Symptoms | Laboratory Tests | Symptomatic Contacts | Exposure History | Hote Information | Epidemiologic Data | Reporting Source | View Logs | Contacts | Contacts | Description | Properties | Contacts | Description | Desc</u>

State C	ase N	umber:
---------	-------	--------

(b)(6)

\* Demographic

General Illness

Disease/Onset Date:07/27/2018Diagnosis Date:08/02/2018Date patient sought initial medical evaluation:07/29/2018

Location where first seen: Emergency Department

Patient's Physician:

Physician's Phone Number:

Other Physician:

**ER Hospital:** 

Was the patient seen in an emergency department? Yes

Northwest Community

Hospital

Arlington Heights, IL (847) 618-1000

Other ER Hospital:

**Was the patient admitted to a hospital?**Yes **Was the hospital admitted to the same as ER Hospital?**Yes

Northwest Community

Hospital

Arlington Heights, IL (847) 618-1000

Other Hospital:

Hospital:

 Admission Date:
 07/29/2018

 Discharge Date:
 08/03/2018

**Duration of Stay:** 5 **Is the patient pregnant?** No

**Estimated Due Date:** 

Estimated Due Date was calculated based on:

If the patient died, did the patient die due to the disease or condition under investigation?

Age at Onset:

Address at Onset:



I-NEDSS Page 2 of 8

Symptoms

Fever: Yes
Highest Fever, if one exists: 103 °F
Diarrhea (3 or more loose or watery stools in 24 hours): No
Cough: Yes
Headache: No
Myalgia: No
Shortness of Breath: Yes
Pneumonia (clinical diagnosis): Yes

Pneumonia (radiographically consistent w/

Pneumonia):

Was the patient immunocompromised? No Was the patient treated in the ICU? No

Laboratory Tests

Were human laboratory tests conducted? Yes

- Edit

Collection Specimen Laboratory

Date Source

07/31/2018 Not Specified Mayo Clinic Laboratory On First, Dept Of Lab Med And

Pathology

Specimen Number: (b)(6)

Specimen Source: Not Specified

Other:

**ELR Specimen Source:** 

Other: SPUTUM - Specimen Collection Date: 07/31/2018

Mayo Clinic Laboratory On Laboratory: First, Dept Of Lab Med And

Pathology

Other:

Ordering Facility Name: Northwest Comm Hlth Care

Ordering Facility Address: 800 W Central Rd

Arlington Heights, IL 60005

Ordering Facility Phone: (847) 618-6076
Ordering Provider Name: Patricia M Stringer

Ordering Provider Phone:

Reason for Study:

Edit Lab Results

**Test Type Test Result** Legionella sp DNA Positive

**Lab Report Date:** 08/02/2018

Test Type: Legionella sp DNA

Other:

I-NEDSS Page 3 of 8

**Test Method:** Probe.Amplification.Target Other: **Test Result:** Positive Other: Reference Range: PCR POSITIVITY MAY BE **DUE TO LEGIONELLA** INFECTION OR ENVIRONMENTAL/WATER LEGIONELLA DNA IN PATIENT SPECIMEN. SEMI-URGENT RESULT. THIS TEST WAS **DEVELOPED AND ITS** Comment: PERFORMANCE CHARACTERISTICS **DETERMINED BY MAYO** CLINIC IN A MANNER CONSISTENT WITH CLIA REQUIREMENTS. THIS **TEST HAS NOT BEEN** CLEARED OR APPROVED BY THE U.S. FOOD AND DRUG ADMINISTRATION. Symptomatic Contacts Does the patient know anyone with similar symptoms? No Name: Alias Name: DOB: Current Age: Sex: Ethnicity: Races: **Home Phone:** Work Phone: Cell Phone: Address Type: Address Line 1: Address Line 2: City: County: State: Zip: Country:

Relationship to Case: If other, specify: I-NEDSS Page 4 of 8

Did the contact have symptoms consistent with Legionellosis? Onset Date: (mm/dd/ccyy) Contact Occupation: Restricted? Immunization referrals for contact? **Contact Comment:**  Exposure History - Have exposure to water (hot tubs, pools, recreational Yes water, misters, fountains, away from home showers)? Potential Source Reason for Exposure First Exposure Date Last Exposure Date Visitor 07/19/2018 07/19/2018 Other Potential Source of Exposure: Other If other, specify: Bath House Reason for Exposure: Visitor If other, specify: Date of First Exposure: (mm/dd/ccyy) 07/19/2018 Date of Last Exposure: (mm/dd/ccyy) 07/19/2018 Name: (b)(6) Address: Hot Springs National Park City: State: Arkansas United States Country: Take a shower: Yes Use a humidifier: No Use or walk by a whirlpool/spa: Yes No Use or walk by a pool or water park: Spend any time near a decorative fountain: No Have exposure to aerosolized water or mist: Yes Stated She Was In Tub Comment: For 25 Minutes. Edit Potential Source Reason for Exposure First Exposure Date Last Exposure Date Hotel/Motel/Inn Visitor 07/20/2018 07/22/2018 Potential Source of Exposure: Hotel/Motel/Inn If other, specify: Reason for Exposure: Visitor If other, specify: Date of First Exposure: (mm/dd/ccyy) 07/20/2018 Date of Last Exposure: (mm/dd/ccyy) 07/22/2018 (b)(6) Name: Address:

I-NEDSS Page 5 of 8

City		Hot Caringo
City: State:		Hot Springs Arkansas
Country:		United States
Take a shower:		Yes
Use a humidifier:		No
Use or walk by a whirlpool/spa:		No
Use or walk by a pool or water par	-b.	No
Spend any time near a decorative		No
Have exposure to aerosolized wat		Yes
Comment:	ei oi iilist.	163
- Edit  Potential Source Reason for Exposur	e Eiret Evneeuse Dat	te I set Evneeure Date
Hotel/Motel/Inn Visitor	07/17/2018	07/20/2018
, ,	07/17/2016	
Potential Source of Exposure:		Hotel/Motel/Inn
If other, specify:		
Reason for Exposure:		Visitor
If other, specify:		
Date of First Exposure: (mm/dd/ccyy)		07/17/2018
Date of Last Exposure: (mm/dd/ccyy)		07/20/2018 (b)(6)
Name:		(-7.5)
Address:		
City:		
State:		Arkansas
Country:		United States
Take a shower:		Yes
Use a humidifier:		No
Use or walk by a whirlpool/spa:		No
Use or walk by a pool or water par	r <b>k</b> :	No
Spend any time near a decorative	fountain:	No
Have exposure to aerosolized wat	er or mist:	Yes
Comment:		
- <u>Hotel Information</u>		
Did the patient stay overnight at a ho	otel?	Yes
- Edit		
	hecked In Date Chec	ked Out
(b)(6)		
<u> </u>		(b)(6)
Hotel Name:		(5)(6)
Address:		
City:		Hot Springs Village
State:		Arkansas
Country:		United States

I-NEDSS Page 6 of 8

Date Checked In: (mm/dd/ccyy) 07/17/2018 Date Checked Out: (mm/dd/ccyy) 07/20/2018 **Hotel Room Number:** Edit Hotel Date Checked In Date Checked Out (b)(6) 07/20/2018 07/22/2018 (b)(6) **Hotel Name:** Address: Hot Springs City: State: Arkansas United States Country: Date Checked In: (mm/dd/ccyy) 07/20/2018 Date Checked Out: (mm/dd/ccyy) 07/22/2018 (b)(6) **Hotel Room Number:**  Epidemiologic Data Case Opened Date: 08/03/2018 Case Status: Not A Case Date Last Changed: 08/07/2018 Is case part of an outbreak? Outbreak ID: Occupation: Other Occupation: Name of Employer: **Employer Address:** Employer City: **Employer State:** Patient attends/resides in: Other Facility: Day Care / Facility Name: Date Investigation Initiated: 08/03/2018 Date Patient/Proxy interview completed to answer the 08/03/2018 **I-NEDSS** module questions: Were referrals made as appropriate for services and/or Yes treatment? Was educational information provided on disease Yes containment? Yes Has the patient smoked in the last year? If yes, for how many years? 30 Was the patient a former smoker? No If yes, for how many years? Has the patient received an organ transplant? No Use any respiratory therapy devices (e.g., nebulizers or No CPAP)? Does this device use a humidifier or misty water?

I-NEDSS Page 7 of 8

No

Yes

30 years). Onset 7.27.18 sluggishness. Onset 7.28.18 fever (103F), chills, sweats, productive cough minimal clear sputum, wheezing & 50B->ARD requiring O2

via NC. On admission CXR + RUL/RLL & LLL PNA.
ARF. Labs + leukocytosis (15), hyponatremia (131), hypokalemia (3.3) & transaminitis (AST 116, ALT 75). Multiple possible exposures (please see exposure section).

How is it cleaned?

Date of First Exposure: (mm/dd/ccyy)
Date of Last Exposure: (mm/dd/ccyy)

Do you recall any general construction, plumbing projects, water main breaks or water line work either at No your home or while traveling in those days?

If yes, please describe the type of work and location:

Did you shop at a grocery store where there were mister machines for fruits and vegetables?

If yes, please supply the name of the store and location:

What is your home water source? Municipal

If Municipal, from what Company:

Was this case associated with a healthcare exposure?

Was a health care exposure investigation initiated?

Date HCA Investigation Initiated: (mm/dd/ccyy)

If yes, select all measures implemented:

Has out-of-state travel information been sent to CDC?

PMH: hypothyroidism & smoking abuse (1.5 ppd x

Epi Comment:

Reporting Source

 Earliest Report Date:
 08/02/2018

 Date LHD Received:
 08/03/2018

Reporter Name:

Reporter Phone:

Reporter Comment:

Reporting Organization Type: Lab - Private

Reporting Organization Name:

Mayo Clinic Laboratory -

First Street

Address Line 1: 200 First Street Southwest

Address Line 2:

City: Rochester
County: Out Of State

https://inedss.dph.illinois.gov/dss/dss.jsp?1533668624712

8/7/2018

I-NEDSS Page 8 of 8

State:MinnesotaZip:55905-0001Country:United States

If Reporting Organization not found, enter information here:

View Logs

User

Comments:

Case Activity: August 6, 2018 12:50:11 PM, TPADOVAN: Case Opened by user August 6, 2018 12:50:17 PM, TPADOVAN: Investigator assignment changed to

PADOVANI, THOMAS August 6, 2018 12:50:17 PM, TPADOVAN:

Investigation status changed to in-progress August 6, 2018 12:54:38 PM, TPADOVAN: Diagnosis was changed from Legionellosis - Legionnaires Disease to Legionellosis - Legionnaires Disease - L. pneumophila serogroup

1 August 6, 2018 1:09:46 PM, TPADOVAN: Case status changed to

'Confirmed'. August 7, 2018 8:38:36 AM, TPADOVAN: Case status changed

to 'Not A Case'.

Report Logs:

August 3, 2018 8:12:09 AM, TPADOVAN: Report reviewed by user

ELR Logs: August 3, 2018 5:05:29 AM, ELRIMPORT: Imported from ELR: 24D0404292,

2018-08-03 01:09:06.0, 20180803003448754314

Date: 01/03/2019

Sooji Lee, Centers for Disease Control and Prevention; CDC Legionella team.

From: Hailey Rucas, Texas Department of State Health Services, Austin, TX, USA

### RE: Notification of a single case of Legionnaires' disease

disease	e in a 😘	year-old female	resident of TX (State I	D: (b)(6)	a confirmed case of Leg whose illness may be ass 18 and the patient recove	sociated
Results	of diagr	nostic testing for	Legionella are as follo	ws:		
<b>Fest</b> Jrine A	untigen	Positive? YES	Legionella species pneumophila	Serogroup 1	Date of test 11/25/2018	
		nformation: orted travel to:				
1.	Hotel I	nformation:	(b)(6)			
		number: of stay: ures:	No reported exposure	s other than a s	hower at the hotel	
2.	Other e	exposure:	Quapaw Baths & Spa 413 Central Ave			
	Date of		Hot Springs National I 11/16/18 The case reported sta		springs for approximately	2 hours

From: Said, Maria

 Sent:
 Mon, 7 Jan 2019 13:16:16 -0500

 To:
 Haselow, Dirk (CDC arkansas.gov)

Cc: Smith, Jessica (CDC/DDID/NCIRD/DBD);Lee, Sooji (CDC/DDID/NCIRD/DBD)

(CTR); Kesteloot, Kurt

Attachments: Legionella\_HOSP\_Quapaw\_Supplemental questionnaire.docx

Dirk,

Please see the attached supplemental questionnaire aimed at better understanding what activities the case patients took part in while they were at the park. I'm happy to hear any suggestions to improve it.

Also, let us know the best way to obtain this information. I can make the calls or defer to you in Arkansas or defer to the health departments in the other states (IL,TX) -- whatever you all think best.

Thanks.

Матіа

## Legionellosis Supplemental Questionnaire — Hot Springs National Park, AR — January 2019 Patient Name: \_\_\_\_\_ Sex: M/F County, State: Date of Birth: \_\_\_\_/\_\_\_\_ In the 10 days prior to the onset of your illness: 1. Did you visit the Quapaw Baths & Spa at 413 Central Avenue, Hot Springs National Park, AR 71901? [] Yes [] No 2. If you were at the spa, did you (please check all that apply): [] Take a shower in the spa [] Sit in a thermal pool in the spa [] Use a private bath in the spa [] Sit in the steam cave in the spa [] Spend time next to or walk past a fountain in the basement massage area 3. While you were within Hot Springs National Park, did you take part in any other activity that may have exposed you to aerosolized water? [] Yes [] No 4. If you did take part in another activity that may have exposed you to aerosolized water, please describe the activities: 5. Do you have any additional concerns regarding Legionella exposure that you would like to share?

Sent: Fo:	Mon, 7 Jan 2019 13:51:01 -0500 Smith, Jessica (CDC/DDID/NCIRD/DBD) Hasslavy, Dirk (CDC arkspass gray) Los Spaii (CDC/DDID/NCIRD/DBD)
CCR);Kesteloot, Kurt	Haselow, Dirk (CDC arkansas.gov);Lee, Sooji (CDC/DDID/NCIRD/DBD)
Subject: Attachments:	Re: [EXTERNAL] RE: Legionella_HOSP_Quapaw_Supplemental questionnaire.V2.docx
Version 2 attached), a and, I've made the ne he city of Hot Spring	we can certainly ask more about that. I've added it to the questionnaire (see and because I am not sure if these fountains are in national park or state ext question more inclusive to ask about activities both on park land and in s, AR. My assumption is that people are probably not aware if they are on ing different activities.
Maria	
On Mon, Jan 7, 2019 wrote:	at 1:43 PM Smith, Jessica (CDC/DDID/NCIRD/DBD) < <u>lyd7@cdc.gov</u> >
Hi Maria,	
I know this wasn't di	rected at CDC but just thought I'd ask since the case report form that Texas just <sup>(b)(ڇ)</sup>
	(b)(s)
	\\u00e4
Thanks, Jessica	
From: Said, Maria < <u>n</u> Sent: Monday, Janua	naria_said@nps.gov> nry 7, 2019 1:16 PM

Cc: Smith, Jessica (CDC/DDID/NCIRD/DBD) < lyd7@cdc.gov>; Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR)

To: Haselow, Dirk (CDC arkansas.gov) < dirk.haselow@arkansas.gov>

<<u>npf3@cdc.gov</u>>; Kesteloot, Kurt <<u>kurt\_kesteloot@nps.gov</u>>

Subject:

From:

Said, Maria

T->	•	•
11		• 1-
		Α.
_		

Please see the attached supplemental questionnaire aimed at better understanding what activities the case patients took part in while they were at the park. I'm happy to hear any suggestions to improve it.

Also, let us know the best way to obtain this information. I can make the calls or defer to you in Arkansas or defer to the health departments in the other states (IL,TX) -- whatever you all think best.

Thanks.

Maria

--

Maria Said, MD, MHS | CDR, U.S. Public Health Service Epidemiology Branch Chief | Office of Public Health | National Park Service Address: 1849 C. Street, NW, Room 2543, Mailstop 2560 | Washington, DC 20240

Office Tel: 202-513-7151 | Email: maria\_said@nps.gov

Website (public): https://www.nps.gov/orgs/1878/index.htm

Website (internal): <a href="https://sites.google.com/a/nps.gov/in2-protect-and-promote-">https://sites.google.com/a/nps.gov/in2-protect-and-promote-</a>

health/home/disease-surveillance-response

### Legionellosis Supplemental Questionnaire — Hot Springs National Park, AR — January 2019 Patient Name: \_\_\_\_\_ Sex: M/F County, State: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_/\_\_\_\_ In the 10 days prior to the onset of your illness: 1. Did you visit the Quapaw Baths & Spa at 413 Central Avenue, Hot Springs National Park, AR 71901? [] Yes [] No 2. If you were at the spa, did you (please check all that apply): [] Take a shower in the spa [] Sit in a thermal pool in the spa [] Use a private bath in the spa [] Sit in the steam cave in the spa [] Spend time next to or walk past a fountain in the basement massage area 3. While you were in Hot Springs, AR, did you walk next to or spend time around any decorative fountains? [] Yes [] No If so, where?\_\_\_\_\_ 4. While you were in Hot Springs, AR, and Hot Springs National Park did you take part in any other activity that may have exposed you to aerosolized water? [] Yes [] No 5. If you did take part in another activity that may have exposed you to aerosolized water, please describe the activities: 6. Do you have any additional concerns regarding Legionella exposure that you would like to share?

From: Smith, Jessica (CDC/DDID/NCIRD/DBD)

**Sent:** Fri, 4 Jan 2019 19:06:34 +0000

To: Haselow, Dirk (CDC arkansas.gov); 'Said, Maria'; Cat Waters; Debbie

Pledger;David Kostamo;Lauren Miller;Justin Cully;Sara Newman
Cc: Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR)

**Subject:** Legionella resources

Attachments: Cooling Tower EH Assesstment Form.docx, CTI legionellosis guideline.pdf, NSF P453-2017 - Cooling Tower Water Systems - Treatment Operation and Ma....pdf, ASHRAE standard 188-

2015.pdf, ASHRAE guideline 12-2000.pdf

Hi all,

As follow-up to the call earlier today, attached and below are the resources I mentioned that may be of help.

The attached word doc is the cooling tower-specific assessment form that we've been using in recent months. I also threw in ASHRAE Standard 188 and Guideline 12, and the CTI guidance and NSF protocols for best practices for *Legionella* control in cooling towers.

Link to CDC environmental investigation resources, including assessment form and sampling procedure/potential sampling sites documents: <a href="https://www.cdc.gov/legionella/health-depts/environmental-inv-resources.html">https://www.cdc.gov/legionella/health-depts/environmental-inv-resources.html</a>

Re: the ozone question, the link to EPA document on technologies for Legionella control in premise plumbing: <a href="https://www.epa.gov/ground-water-and-drinking-water/technologies-legionella-control-premise-plumbing-systems">https://www.epa.gov/ground-water-and-drinking-water/technologies-legionella-control-premise-plumbing-systems</a>

Link to CDC hot tub disinfection guidance: <a href="https://www.cdc.gov/legionella/downloads/hot-tub-disinfection.pdf">https://www.cdc.gov/legionella/downloads/hot-tub-disinfection.pdf</a>

Thanks and please let us know if there's anything we can do to be of assistance as the investigation continues.

Jessica

\_

Jessica C. Smith, MPH

Epidemiologist | Centers for Disease Control and Prevention NC RD/DBD/Respiratory Diseases Branch 404.718.5205 | lyd7@cdc.gov

-----Original Appointment-----

From: Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) <npf3@cdc.gov>

Sent: Friday, January 4, 2019 10:59 AM

To: Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR); Haselow, Dirk (CDC arkansas.gov); 'Said, Maria'; Smith,

Jessica (CDC/DDID/NCIRD/DBD)

Cc: Cat Waters; Debbie Pledger; David Kostamo; Lauren Miller; Justin Cully; Sara Newman

<b>Subject:</b> [EXTERNAL] CONFIDENTIAL: travel-associated <b>When:</b> Friday, January 4, 2019 12:00 PM-1:00 PM (UT <b>Where:</b> Skype Meeting	-
Please see call information below! – Sooji	
Join Skype Meeting Trouble Joining? <u>Try Skype Web App</u>	<del></del>
Join by phone	
(404) 553-8912 (Atlanta Dial-in Conference Region) (855) 348-8390 (Atlanta Dial-in Conference Region)	English (United States) English (United States)
<u>Find a local number</u>	
Conference ID: (b)(6)  Forgot your dial-in PIN?   Help	······································
	_
From: Dirk Haselow < <u>Dirk, Haselow@arkansas, gov</u> > Sent: Friday, January 4, 2019 10:48 AM	
To: 'Said, Maria' <maria_said@nps.gov></maria_said@nps.gov>	
Cc: Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) <npf3@c< td=""><td>dc.gov&gt;; Cat Waters</td></npf3@c<>	dc.gov>; Cat Waters
< <u>Catherine.Waters@arkansas.gov</u> >; Debbie Pledger <	Debbie.Pledger@arkansas.gov>; NCID DBMD
Travel-Legionella (CDC) < travellegionella@cdc.gov >; D	avid Kostamo < <u>david_kostamo@nps.gov</u> >; Cooley
Laura A. (CDC/DDID/NCIRD/DBD) < whz3@cdc.gov>; La	auren Miller < lauren miller@partner.nps.gov>;
Justin Cully < <u>justin_cully@nps.gov</u> >;	ara_newman@nps.gov>
Subject: RE: [EYTERNAL] CONFIDENTIAL: travel accord	ated logiopollogic (b)(6)

That time works for me.

Fyi, to address your previous question to cat. We have a single other legionella case in the last 6 months other than the two you have associated with the park. That case was nowhere near hot springs

Dirk

From: Said, Maria [mailto:maria said@nps.gov]

Sent: Friday, January 4, 2019 9:45 AM

To: Dirk Haselow < Dirk. Haselow@arkansas.gov>

Cc: Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) < npf3@cdc.gov>; Cat Waters

<<u>Catherine.Waters@arkansas.gov</u>>; Debbie Pledger <<u>Debbie.Pledger@arkansas.gov</u>>; NCID DBMD Travel-Legionella (CDC) <travellegionella@cdc.gov>; David Kostamo <david kostamo@nps.gov>; Cooley,

Laura A. (CDC/DDID/NCIRD/DBD) < whz3@cdc.gov >; Lauren Miller < lauren miller@partner.nps.gov >;

Justin Cully < <u>justin\_cully@nps.gov</u>>; Sara Newman < <u>sara\_newman@nps.gov</u>>

Subject: Re: [EXTERNAL] CONFIDENTIAL: travel-associated legionellosis CDC45011

Thanks Dirk. Are you available to join a call with CDC? Sooji, I am available whenever.

Can we aim for 12 noon Eastern Time?

I am including on this email Justin Cooly, the Chief Ranger for the park.

Maria

On Fri, Jan 4, 2019 at 10:41 AM Dirk Haselow < <u>Dirk, Haselow@arkansas.gov</u> > wrote:

Hi Maria,

I just briefed my director, Dr. Nate Smith, on this situation and he fully supports your suggestion of notifying customers. If that cannot be done quickly, he has directed me to proceed with public notification.

Respectfully,

Dirk

From: Said, Maria [mailto:maria\_said@nps.gov]

Sent: Friday, January 4, 2019 8:45 AM

To: Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) <npf3@cdc.gov>

**Cc:** Cat Waters < <u>Catherine.Waters@arkansas.gov</u>>; Debbie Pledger < <u>Debbie.Pledger@arkansas.gov</u>>;

NCID DBMD Travel-Legionella (CDC) < travellegionella@cdc.gov >; David Kostamo

<david\_kostamo@nps.gov>; Cooley, Laura A. (CDC/DDID/NCIRD/DBD) <whz3@cdc.gov>; Lauren

Miller < <u>lauren\_miller@partner.nps.gov</u>>; Dirk Haselow < <u>Dirk.Haselow@arkansas.gov</u>>

Subject: Re: [EXTERNAL] CONFIDENTIAL: travel-associated legionellosis CDC45011

Thanks Sooji.

I just got off the phone with Dirk Haselow, the state epi in Arkansas. I would certainly be open to a call. I am cc'ing Dirk here too.

Maria

# On Fri, Jan 4, 2019 at 9:39 AM Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) <npf3@cdc.gov> wrote:

Hi Maria,

Laura is out of the office, but we can certainly have a call today. We are pretty flexible – please let us know what time works best on your end.

Would anyone from Arkansas be available also for the call?

Many thanks, Sooji

From: Said, Maria < maria said@nps.gov > Sent: Thursday, January 3, 2019 5:41 PM

To: Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) < npf3@cdc.gov>

**Cc:** <u>CATHERINE.WATERS@ARKANSAS.GOV</u>; <u>Debbie.Pledger@arkansas.gov</u>; NCID DBMD Travel-Legionella (CDC) < <u>travellegionella@cdc.gov</u>>; David Kostamo < <u>david\_kostamo@nps.gov</u>>; Cooley,

Laura A. (CDC/DDID/NCIRD/DBD) < whz3@cdc.gov >; Lauren Miller

<lauren\_miller@partner.nps.gov>

Subject: Re: [EXTERNAL] CONFIDENTIAL: travel-associated legionellosis CDC45011

Hi all,

I phoned the spa, and the voice message states that they are closed for annual maintenance January 1 through January 10.

I also posted an Epi-X, to see if there have been any additional cases.

I'm working on contacting the Superintendent of the park to make her aware.

This investigation/response will be complicated by the government shutdown.

Laura, would it be possible to talk tomorrow about appropriate next steps? An environmental assessment was done back in July. I'd be interested to hear your thoughts on environmental testing.

Thank you!

Maria

On Thu, Jan 3, 2019 at 5:00 PM Said, Maria < maria\_said@nps.gov > wrote: Hi Sooji,

Thanks for letting us know about this. From Google maps, it looks like the address the first case gave is a building outside the park. However, if they named the Quapaw Baths & Spa specifically, I assume that is where they visited. It is concerning that this is the second case linked to the spa in the last 6 months.

The National Park Service is closed with the government shutdown, although some parks are continuing to operate. I will look into the situation at Hot Springs National Park to see if they are running, and if so, at what capacity.

Cat, have you had any clusters linked with any hotels in non-park land? It looks like these two patients stayed at different hotels.

Thanks. Maria

On Thu, Jan 3, 2019 at 4:01 PM Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) < npf3@cdc.gov> wrote:

Dear Colleague(s):

Please see the attached notification regarding a case of Legionnaires' disease that may be travel-associated.

This case,	(b)(6)	, used the	e hot tub at	Quapaw Bath:	s & Spa in F	Hot Springs	Nationa
Park, with	the addres	ss "413 C	entral Ave."	There was an	other case	in the past <sup>a</sup>	year,
(b)(6)	(attached	), who us	ed the hot t	ub at Quapaw	, Hot Sprin	gs National	Park as
well. Howe	ever, for	(b)(6)	the address	s is written as	(b	)(6)	l was
wondering	g if updated	d informa	tion may be	available for	(0)(0)	related to t	he
patient's h	ot tub use	?				1	

Thanks.

Sooji Lee, MS, MSPH

Epidemiologist (F-RC, Inc.) *Legionella* Team (NCIRD/DBD/RDB) Centers for Disease Control and Prevention 1600 C fton Road, MS H24-6 [Atlanta, GA 30329

Phone: 404-718-3192 | . . : <u>slee7@cdc.gov</u>

Maria Said, MD, MHS | CDR, U.S. Public Health Service

Epidemiology Branch Chief | Office of Public Health | National Park Service

Address: 1849 C. Street, NW, Room 2543, Mailstop 2560 | Washington, DC 20240

Office Tel: 202-513-7151 | Email: maria\_said@nps.gov

Website (public): https://www.nps.gov/orgs/1878/index.htm

Website (internal): https://sites.google.com/a/nps.gov/in2-protect-and-promote-

health/home/disease-surveillance-response

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Website (public): https://www.nps.gov/orgs/1878/index.htm

Website (internal): https://sites.google.com/a/nps.gov/in2-protect-and-promote-

health/home/disease-surveillance-response

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Office Tel: 202-513-7151 | Email: maria said@nps.gov

Website (public): https://www.nps.gov/orgs/1878/index.htm

Website (internal): https://sites.google.com/a/nps.gov/in2-protect-and-promote-

health/home/disease-surveillance-response

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#### **Cooling Towers and Evaporative Condensers Environmental Assessment Form**

Note: It is important to gain an understanding of where the cooling towers are located, how they work, and how they are maintained. Cooling towers are frequently maintained by an outside contractor, and you may need to contact them directly if facility management does not have an in-depth knowledge of these systems. Request copies of the maintenance logs.

Persons completing the assessmen	ıt:
Name:	Organization:
Name:	Organization:
Name:	Organization:
Date of Assessment:	
Facility Details:	
Facility Name:	
Facility Address:	
GPS Coordinates:	
Building Owner Name:	Telephone:
E-mail:	<del></del>
Party Responsible for Cooling Towe	er Maintenance:
Telephone:	E-mail:
What services do the maintenance	contractor perform and at what frequency?:
Person(s) interviewed during asses	ssment:
Name:	Job Title:
Telephone:	E-mail:
Name:	Job Title:
Telephone:	E-mail:
Additional space for notes:	

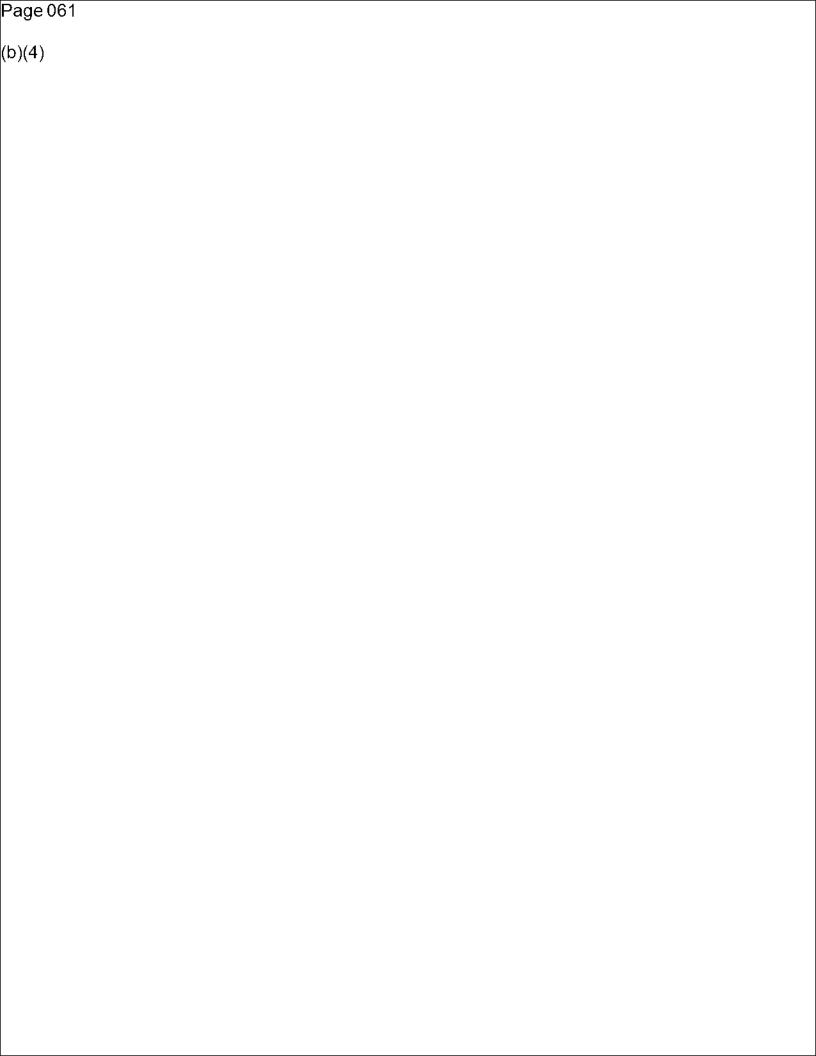
### List all cooling towers and evaporative condensers on the facility premises

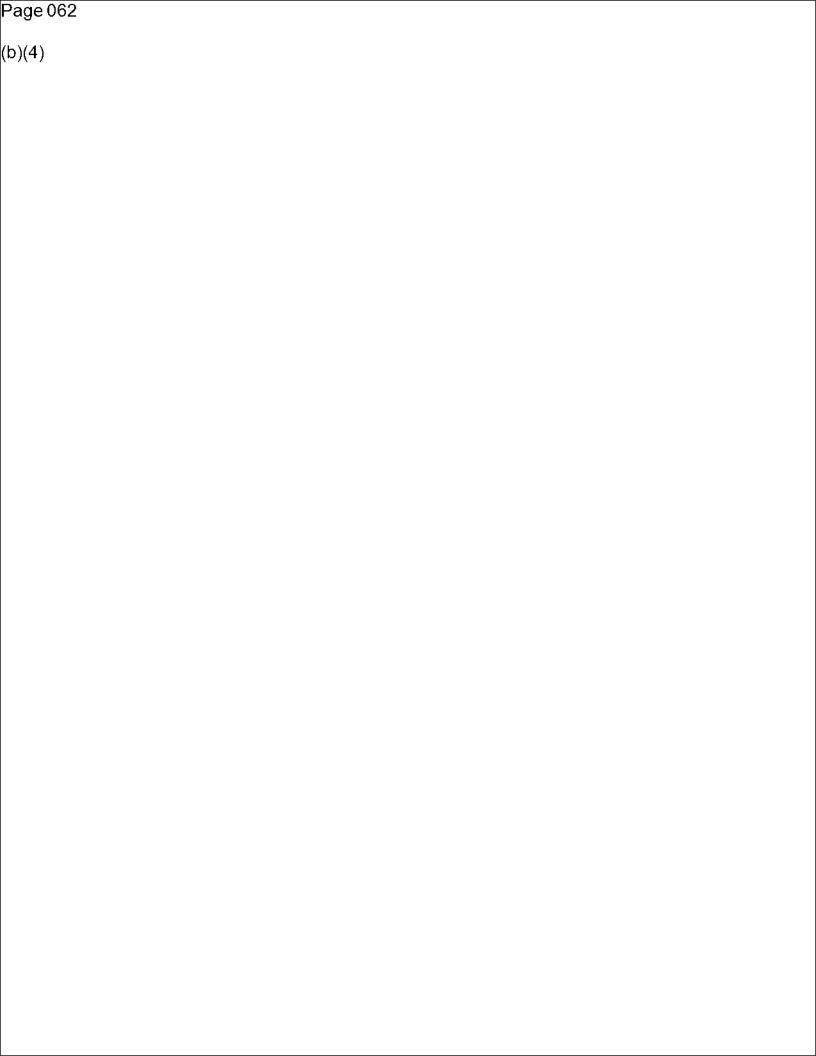
Name of	In	Manufacturer	~Age	Location of Device	# of	Drift	Purpose of
Device	Operation				Cells	Eliminators	towers? (e.g.,
(e.g., CT	(Y/N)					used?	heating/cooling
1)						(Y/N)	or industrial
							process)

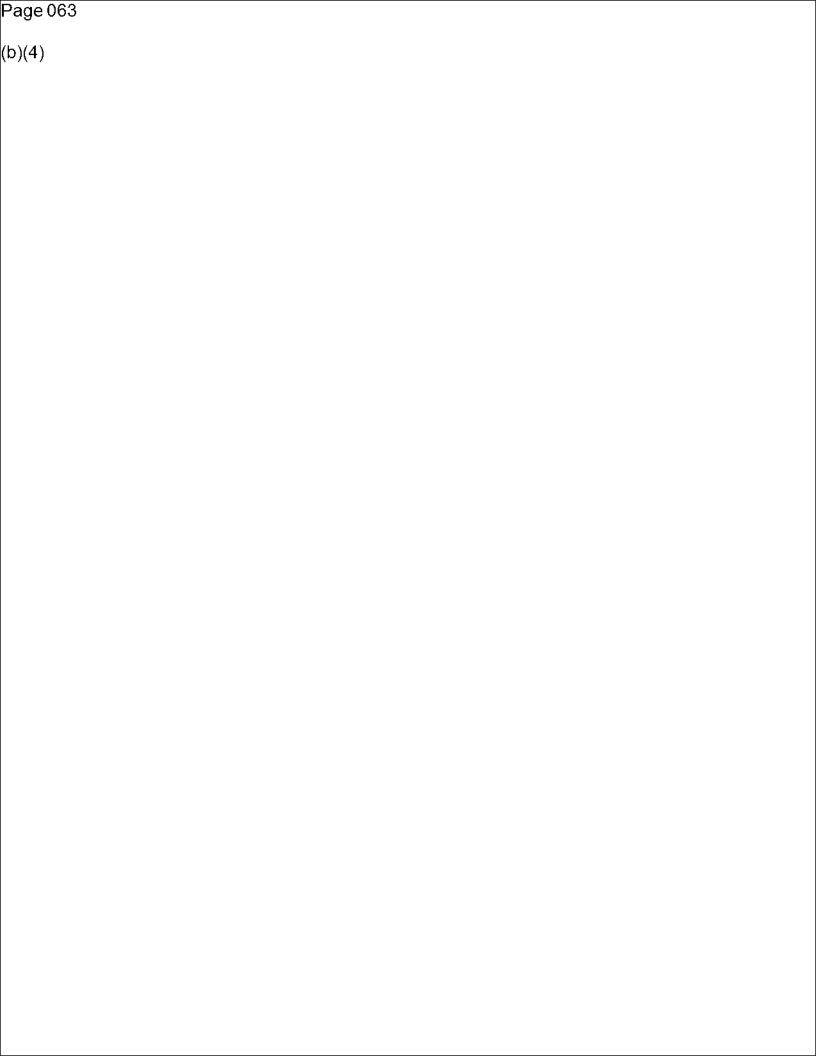
### Cooling tower disinfection, operation and maintenance characteristics

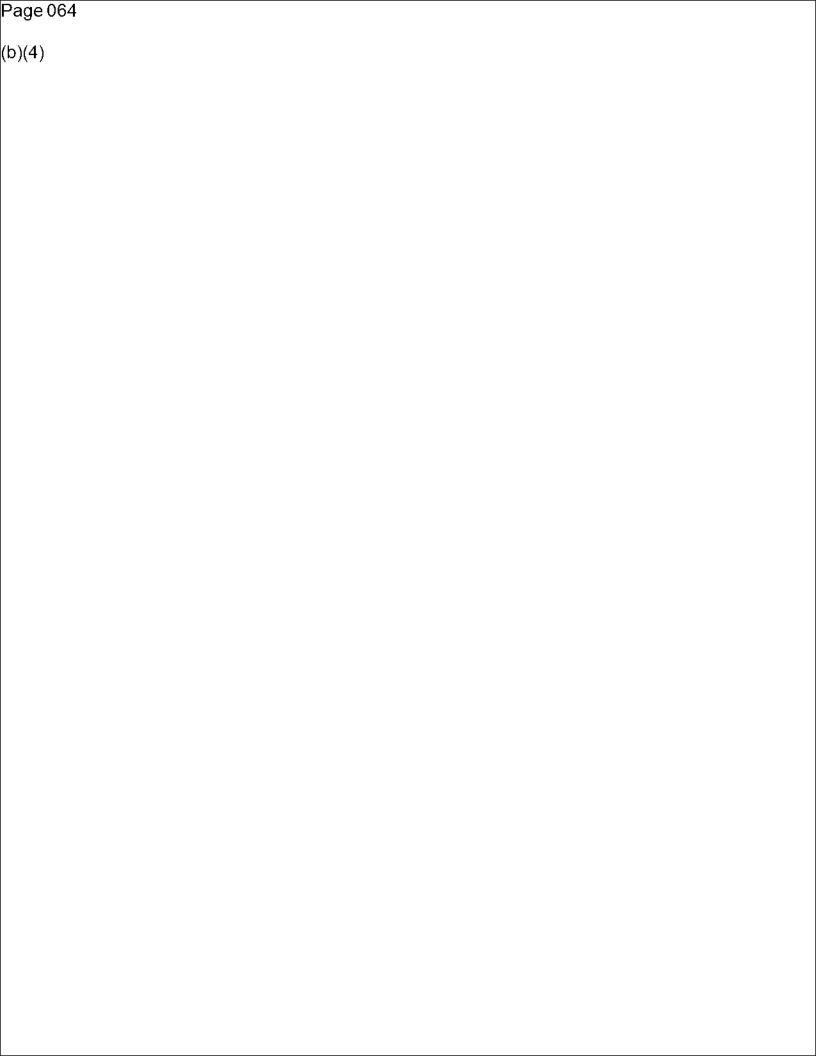
1.	Name of device from above:
2.	What is the source of the water for the cooling tower? (e.g., municipal)
3.	Disinfectant used in cooling tower (Y/N)
4.	If yes, what type of biocide used, Oxidizing (Y/N)Non-oxidizing (Y/N)
5.	List name(s) of biocide used (e.g., chlorine, bromine)
6.	Disinfectant level observed during inspection Date measured
7.	Range in which the biocide is regularly maintained? (e.g., .5 ppm to 2 ppm)
	Describe the biocide dosing system. Hand fed (Y/N)Automatic dosing by chemical controllers (Y/N)
9.	Schedule of adding biocide: (e.g., daily, weekly, as needed)
10.	Are biocide levels monitored (Y/N) How often and by who?
	Scale and/or corrosion inhibitors used (Y/N)Schedule of adding scale and corrosion inhibitors (e.g., daily, weekly, as needed)
	Is Legionella testing ever performed on the cooling tower (Y/N)How often and by who?
13.	Is the cooling tower turned off at any time (Y/N) If yes include schedule
14.	Are there start-up and shut-down procedures for the cooling tower (Y/N)Describe

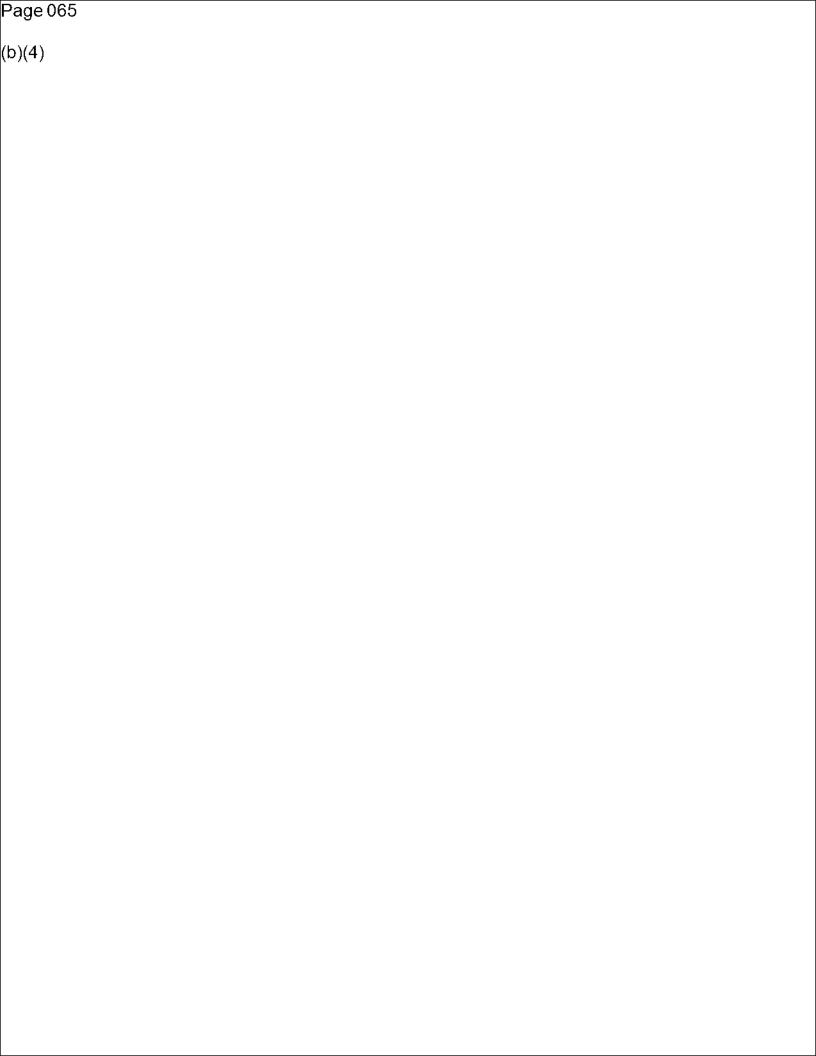
Were there any recent (last 6 months) special (non-routine) treatments, maintenance or repairs to the cooling tower (Y/N)DateAction taken
Is the cooling tower ever cleaned (Y/N)At what frequency and how?
Visual inspection of cooling tower
Scale and corrosion observed on cooling tower fill (Y/N)Notes
Biofilm build-up observed on cooling tower fill (Y/N)Notes
Sediment observed in cooling tower basin (Y/N)Notes
Biofilm build-up observed in cooling tower basin (Y/N)Notes
Poor water clarity observed in cooling tower basin (e.g., green, extreme foam) (Y/N) Notes
Record keeping review  Are records available regarding cooling tower operation and maintenance (Y/N)  Notes

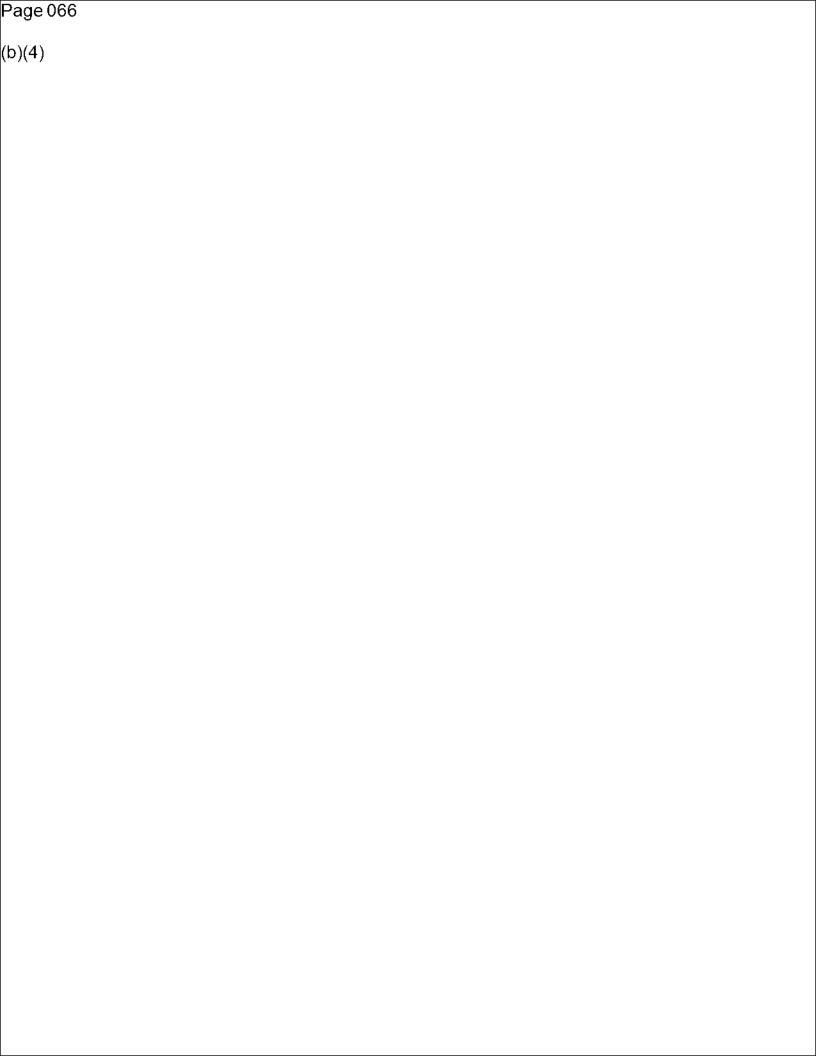


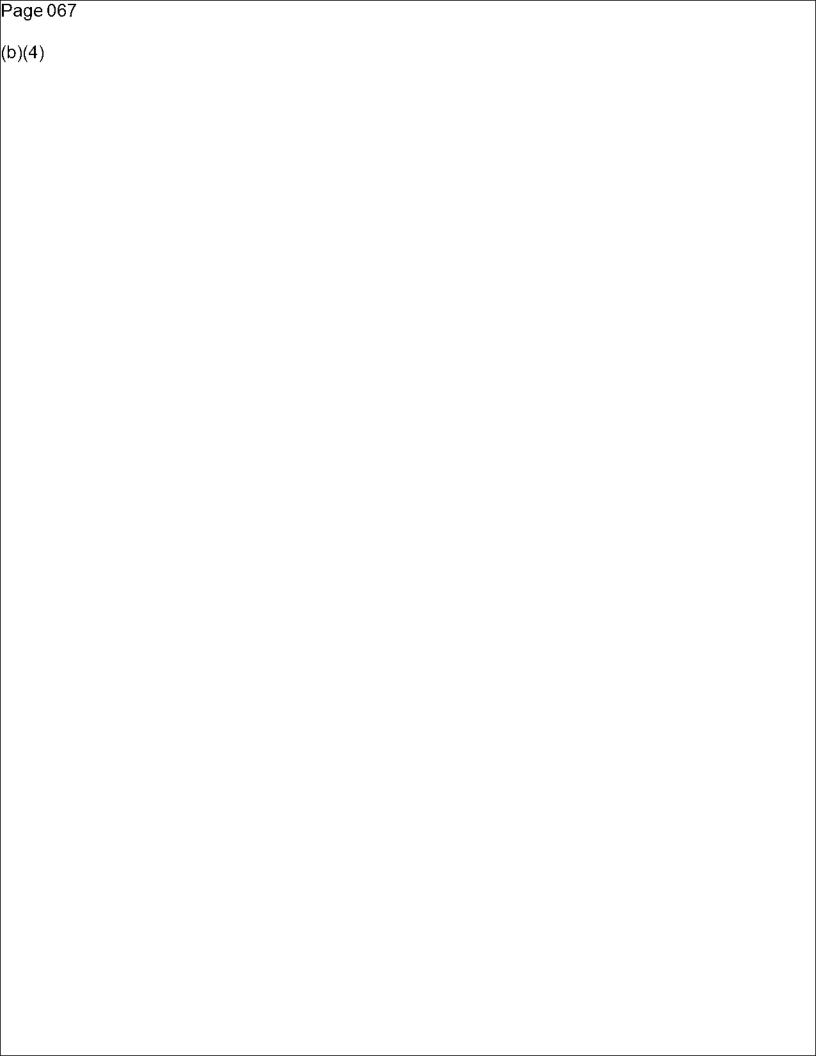


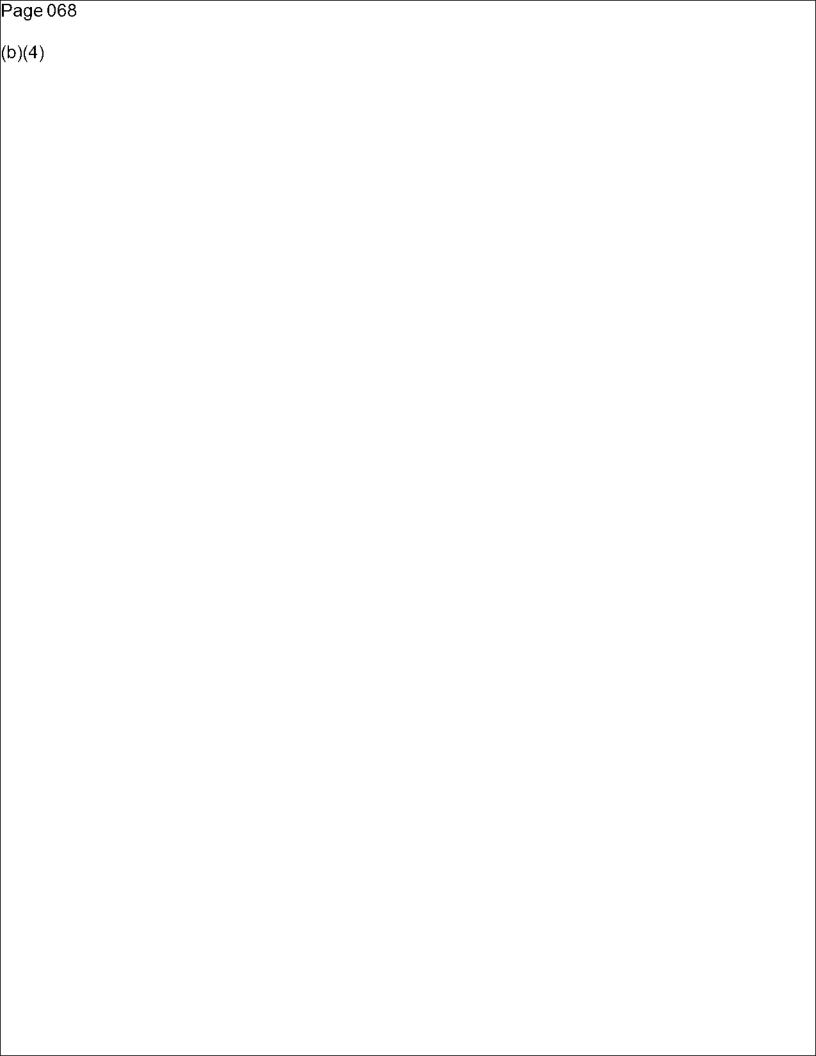


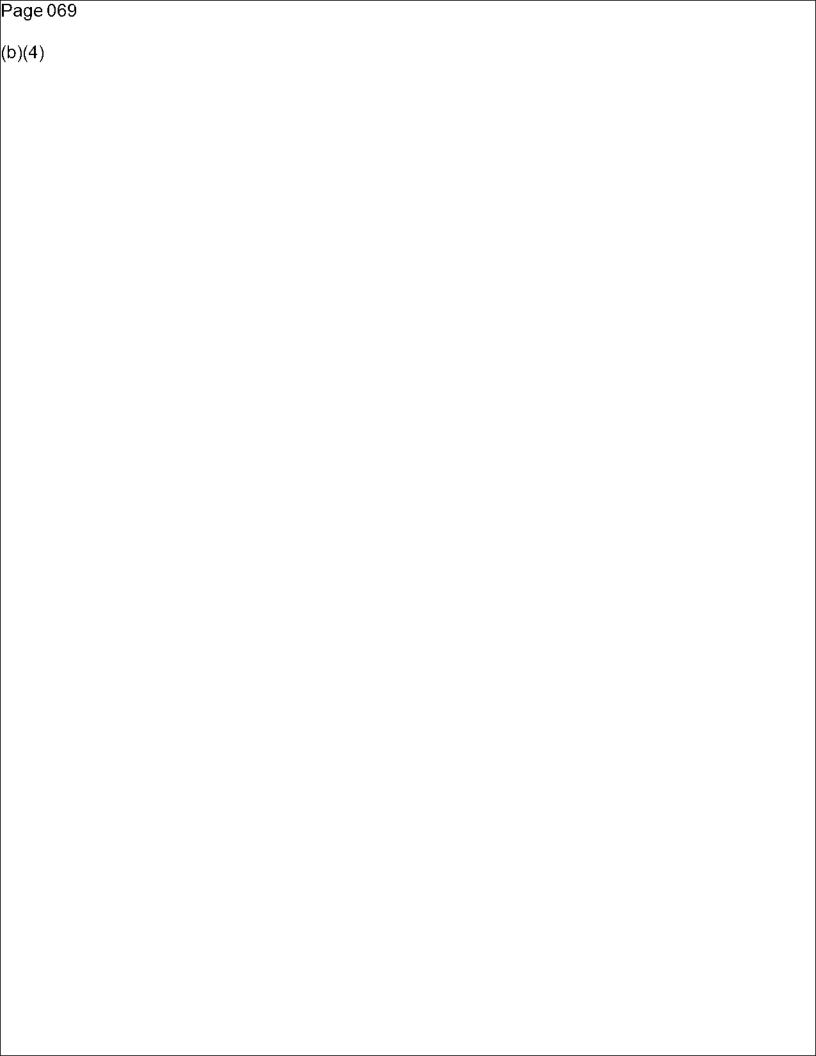


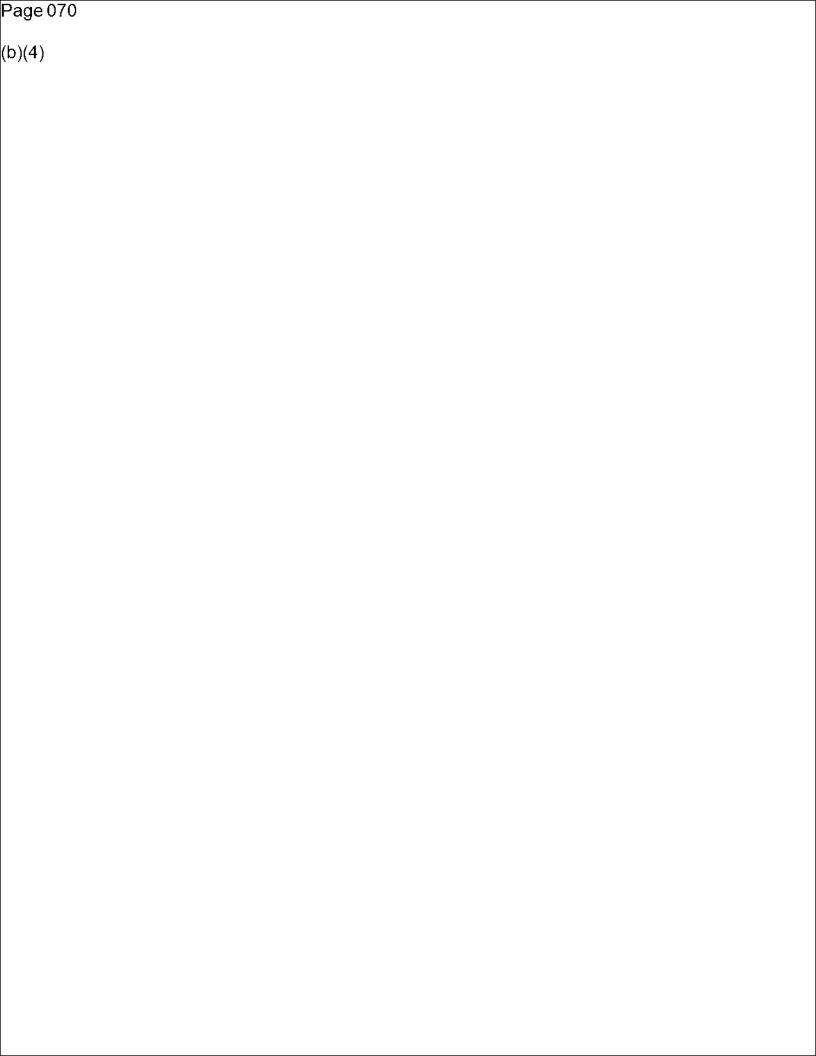


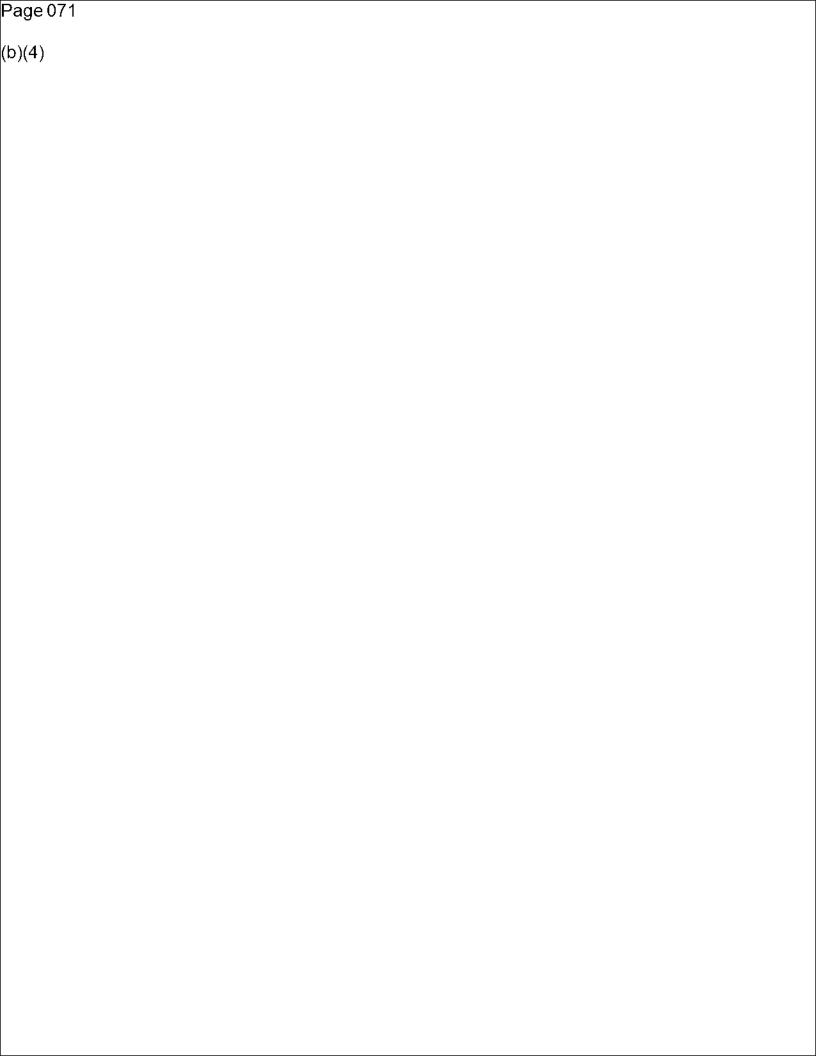


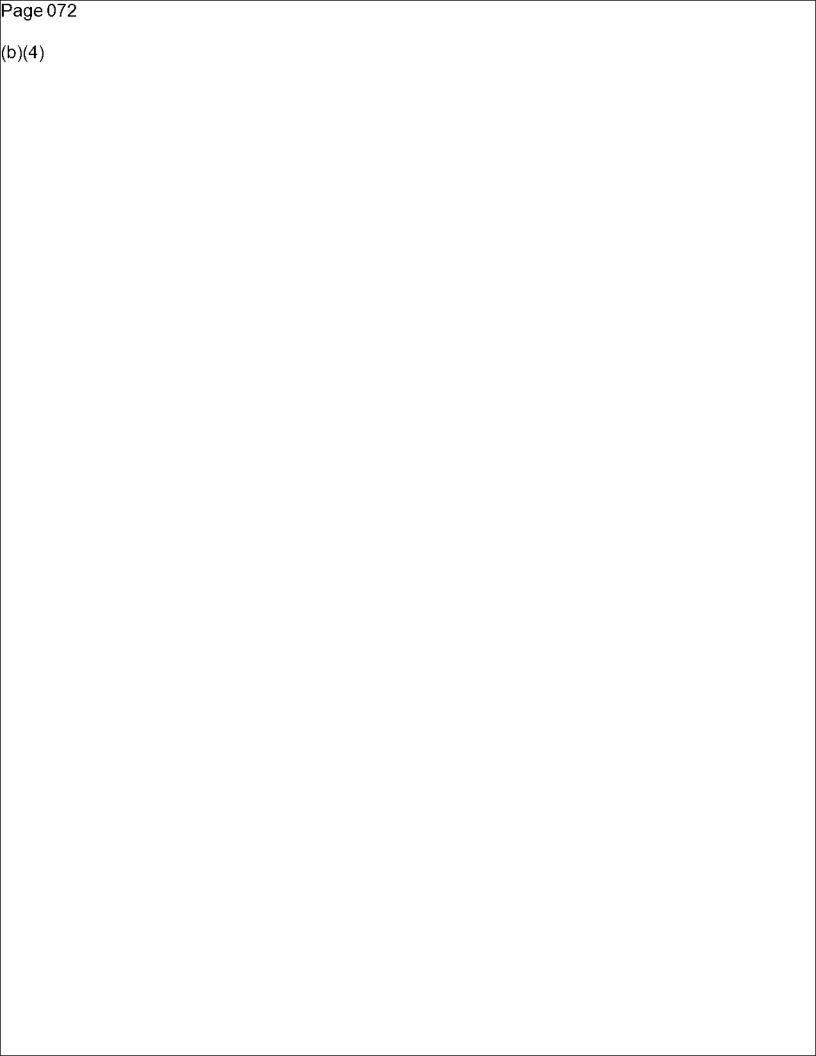


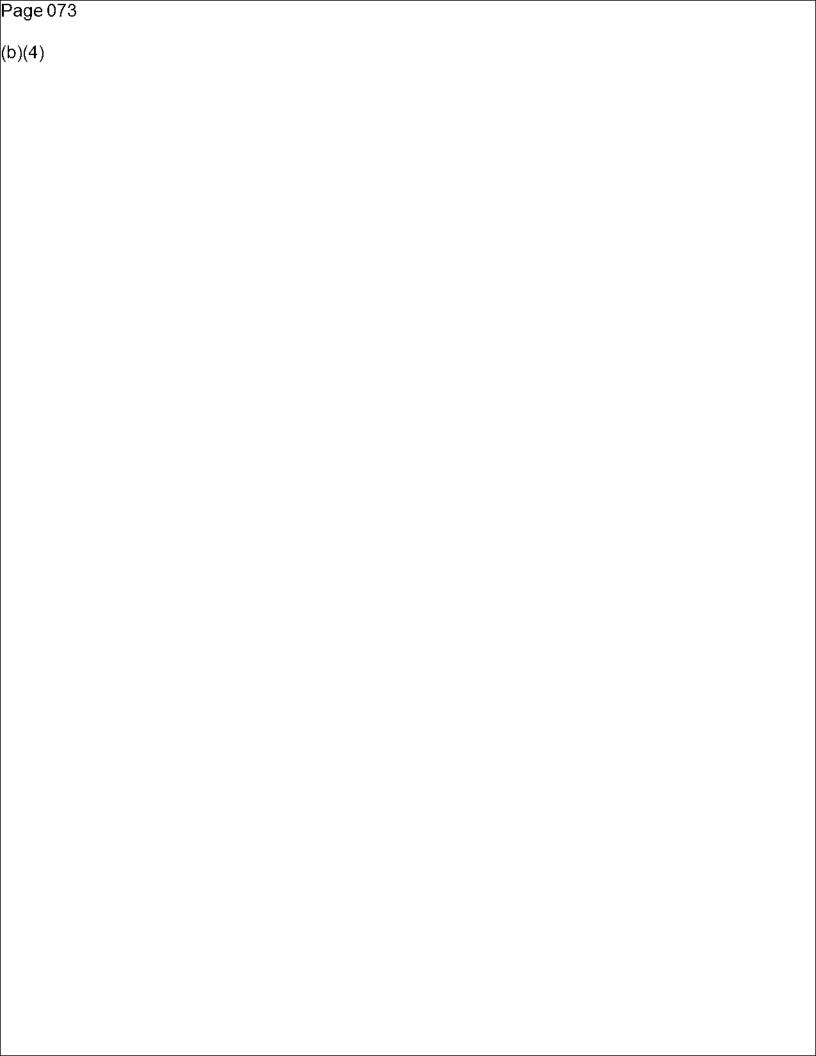


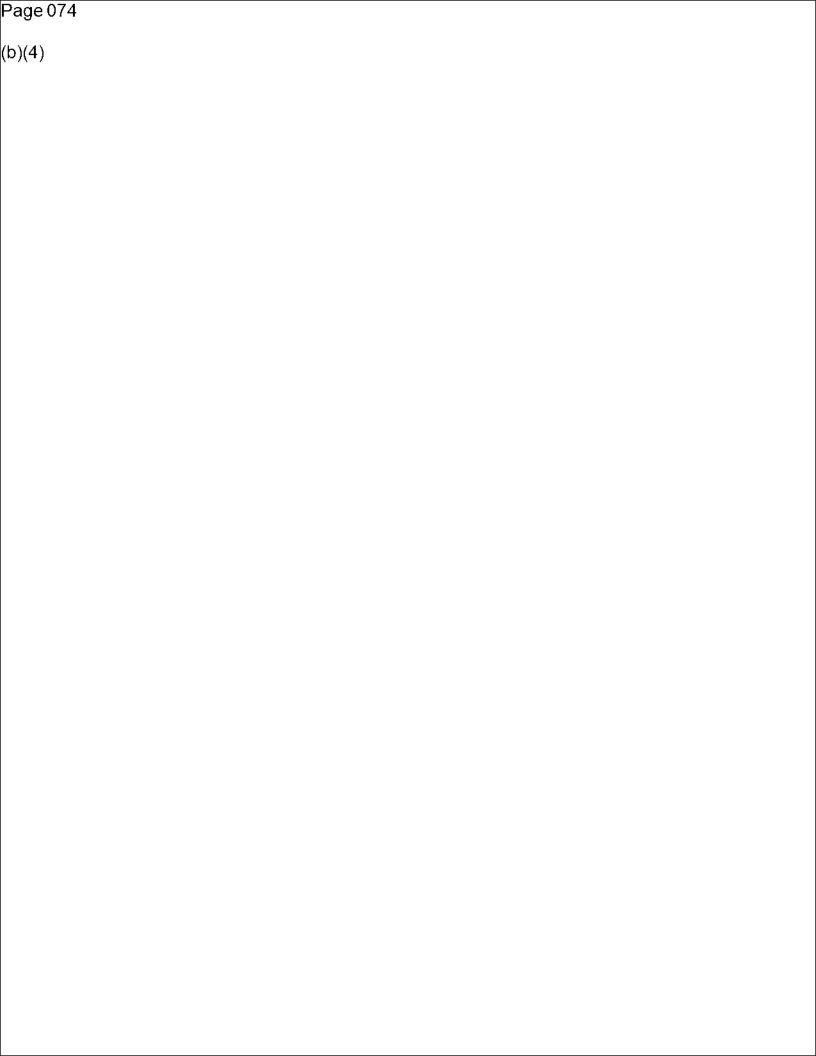


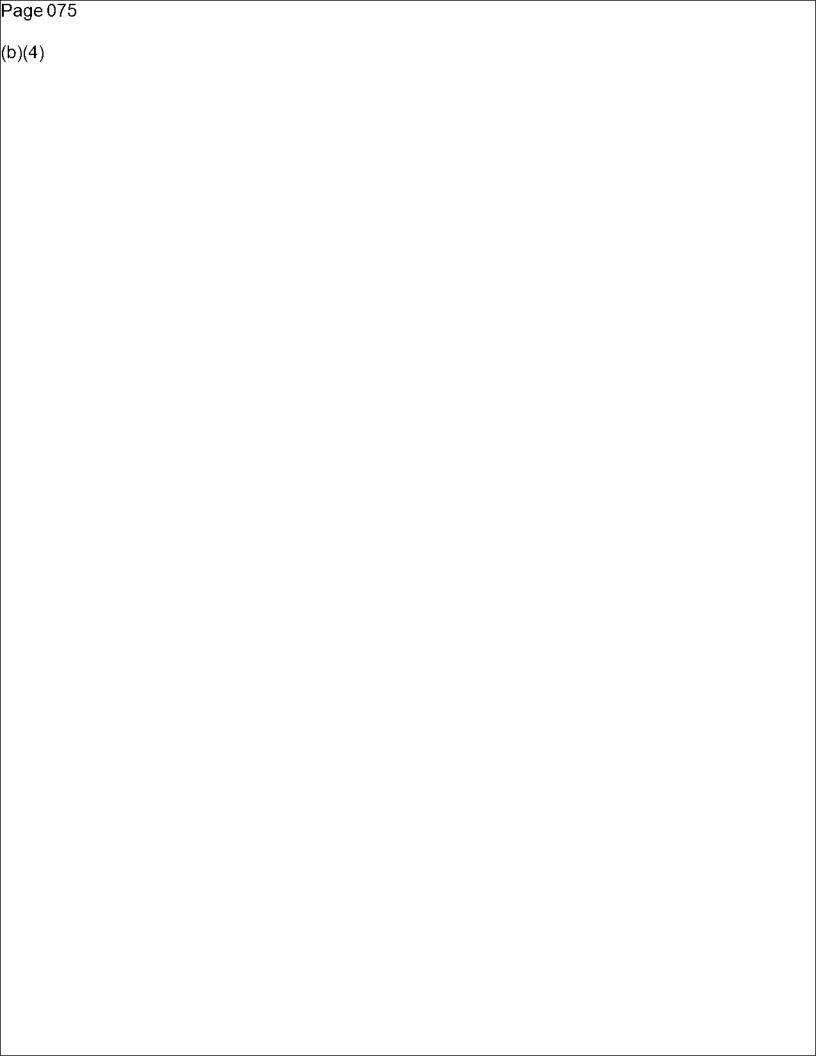


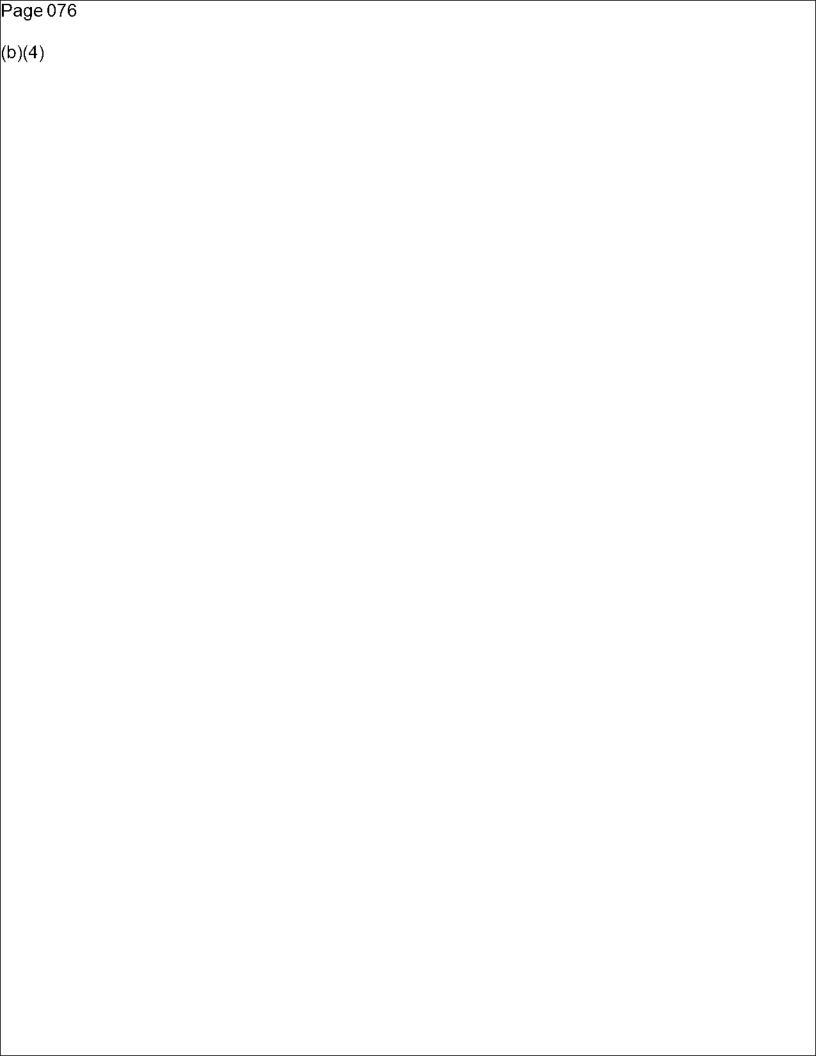


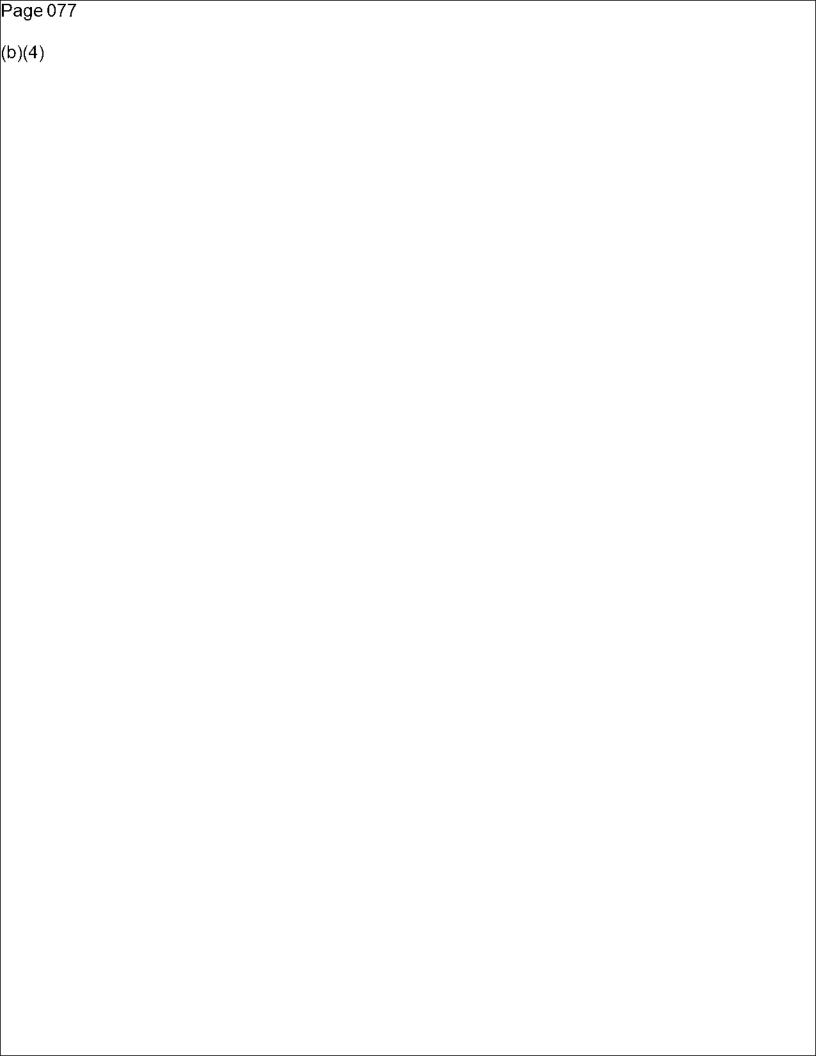


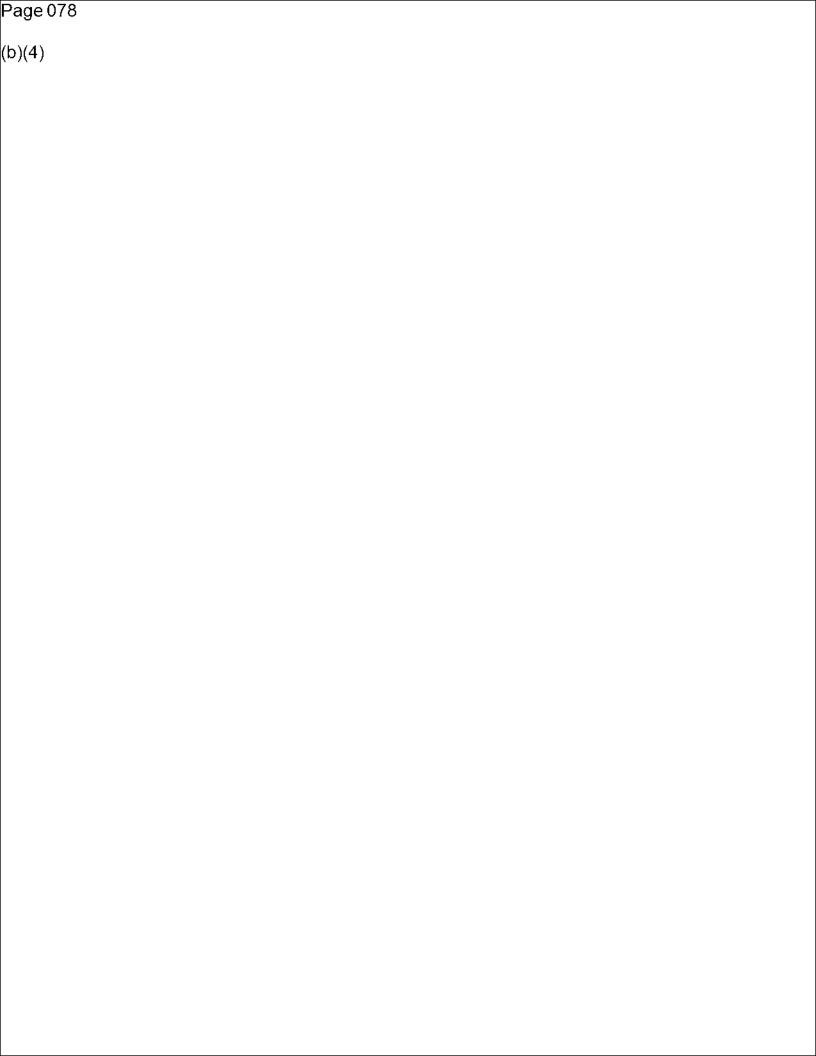


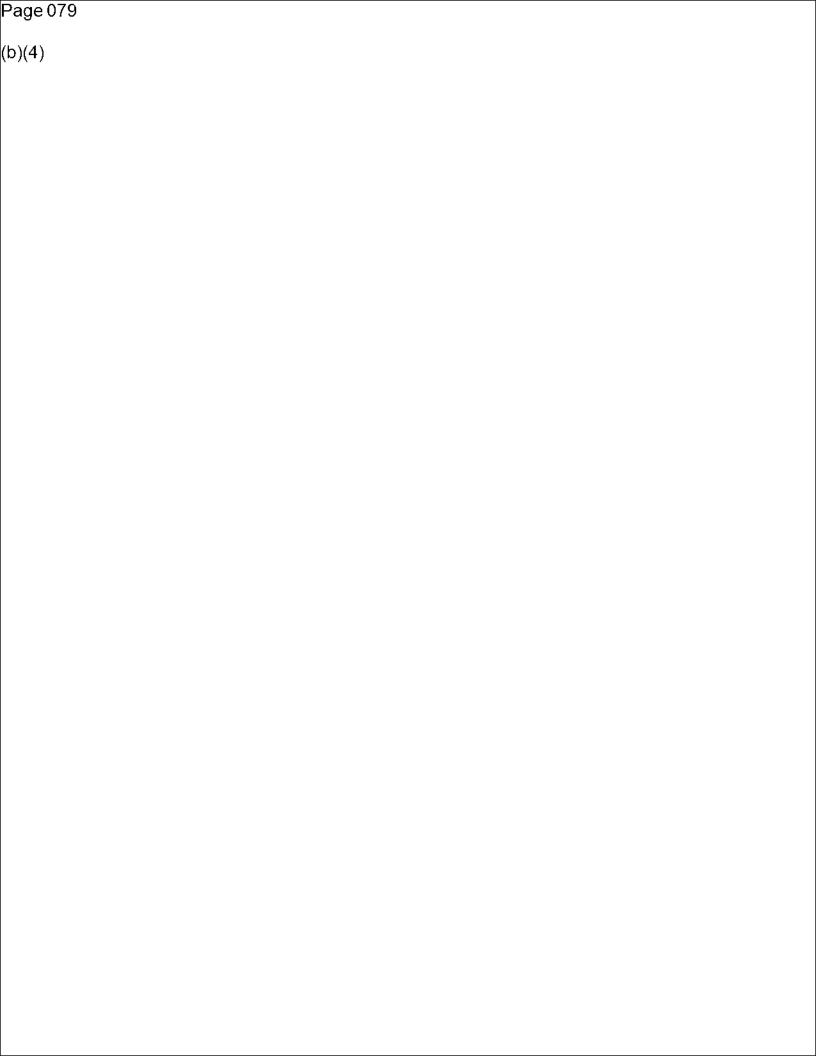


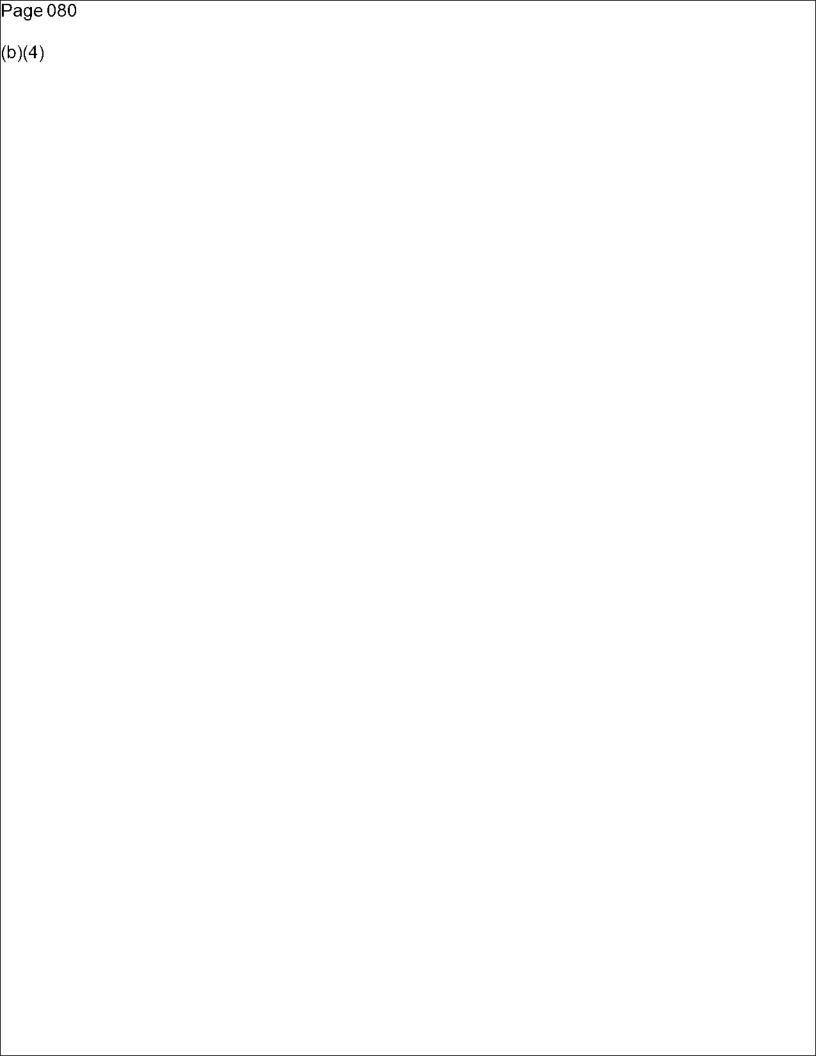


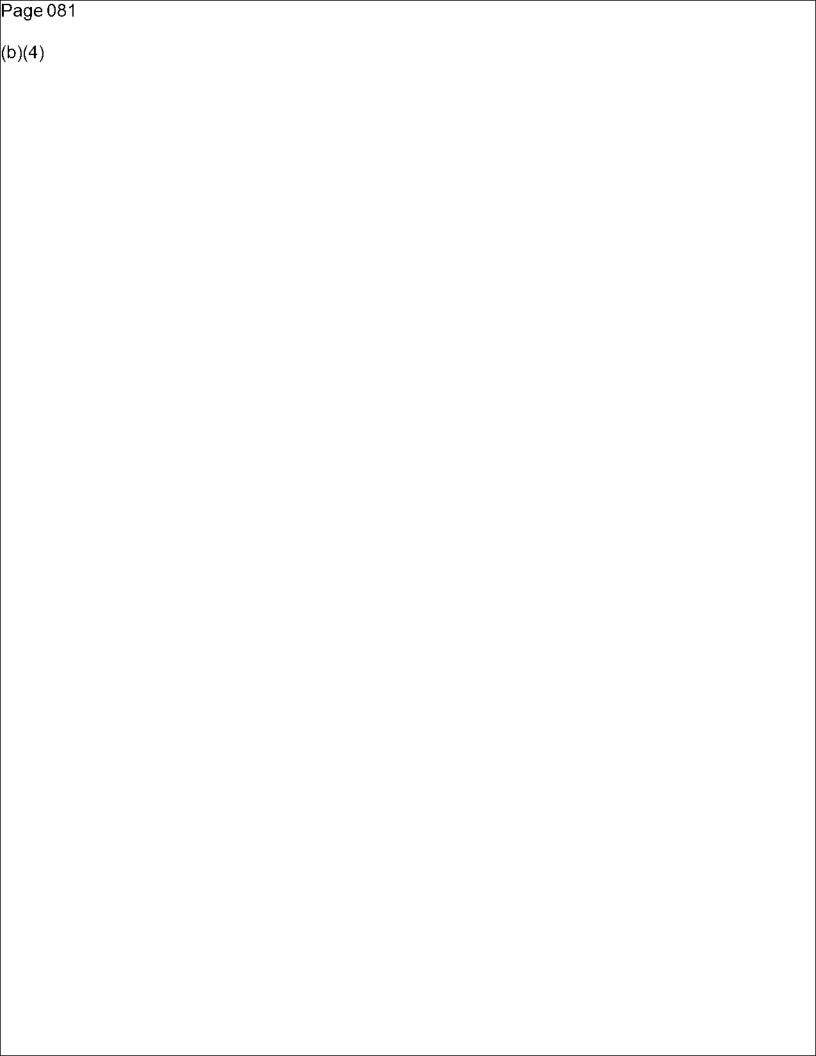


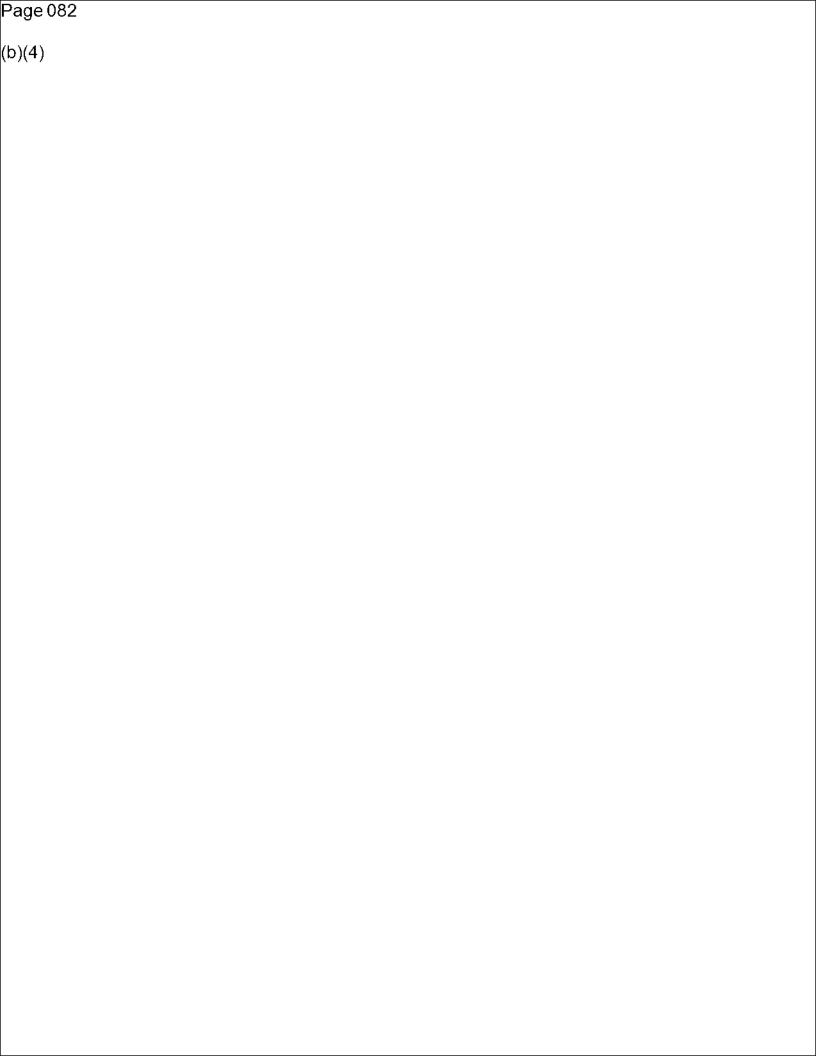


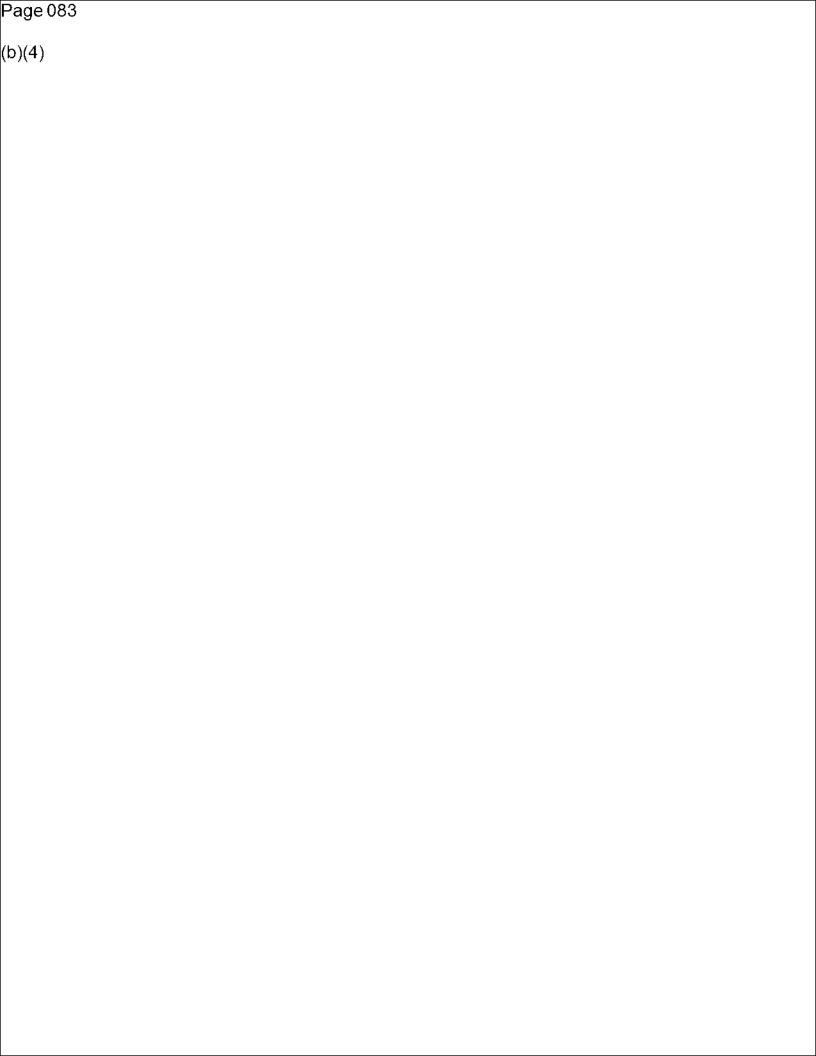


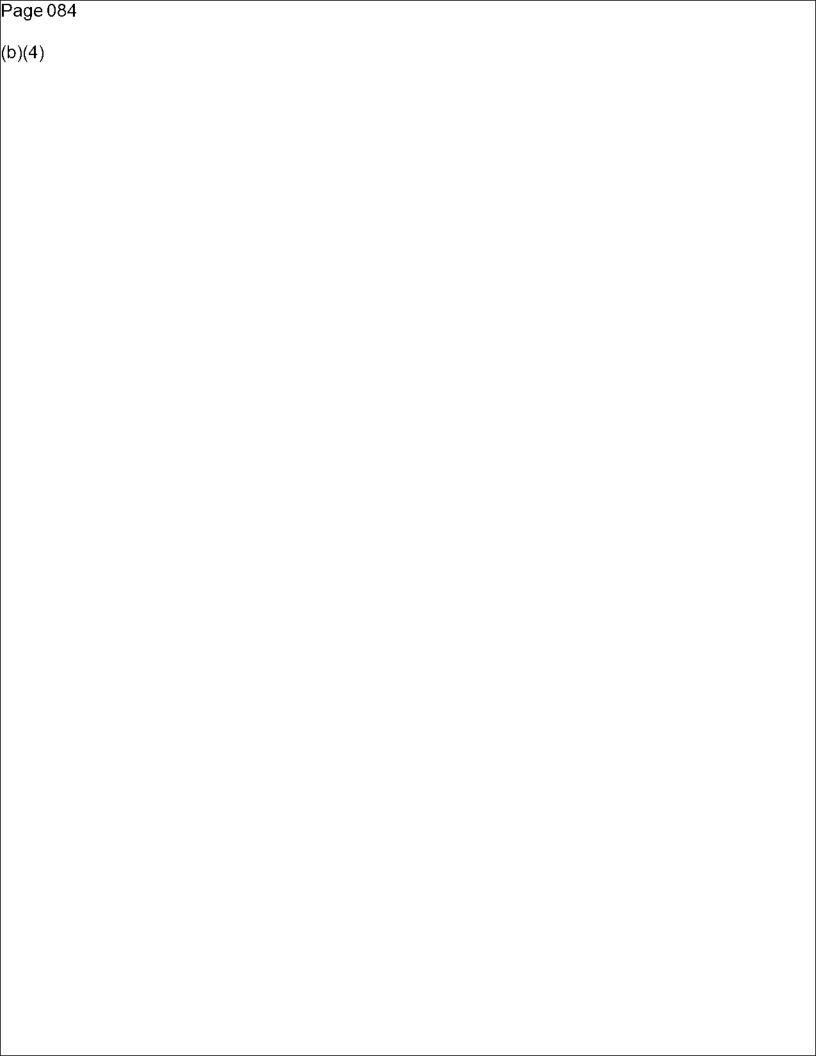


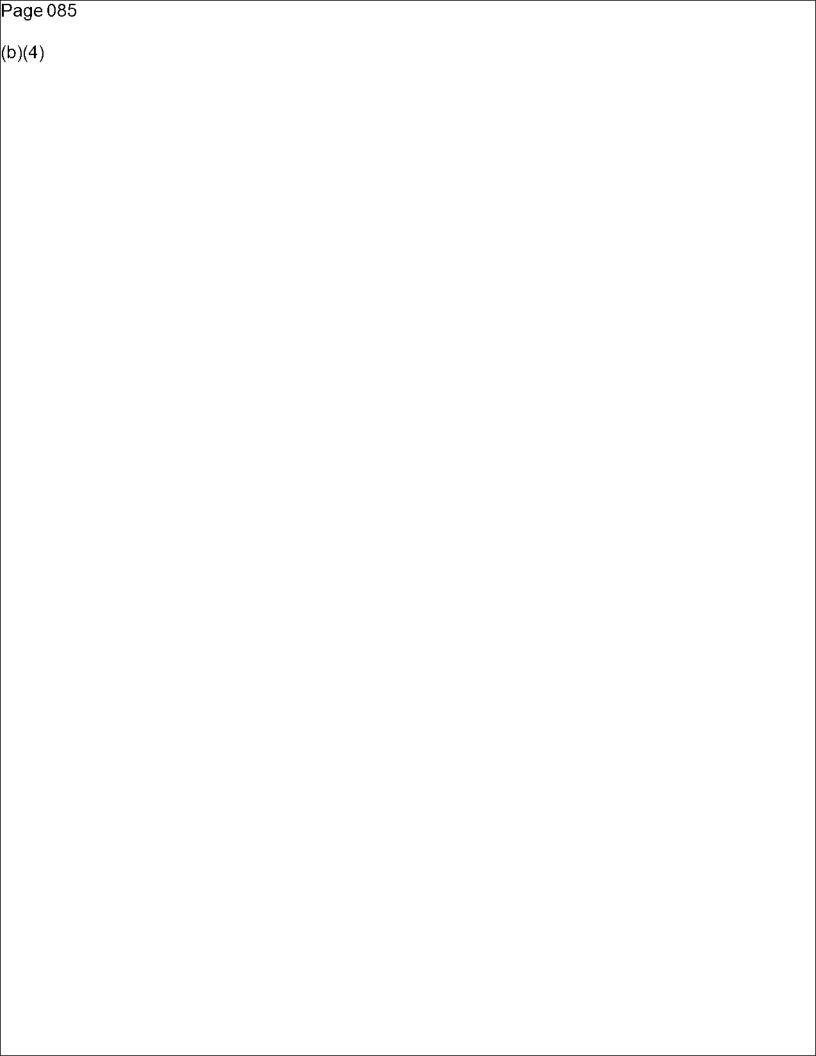


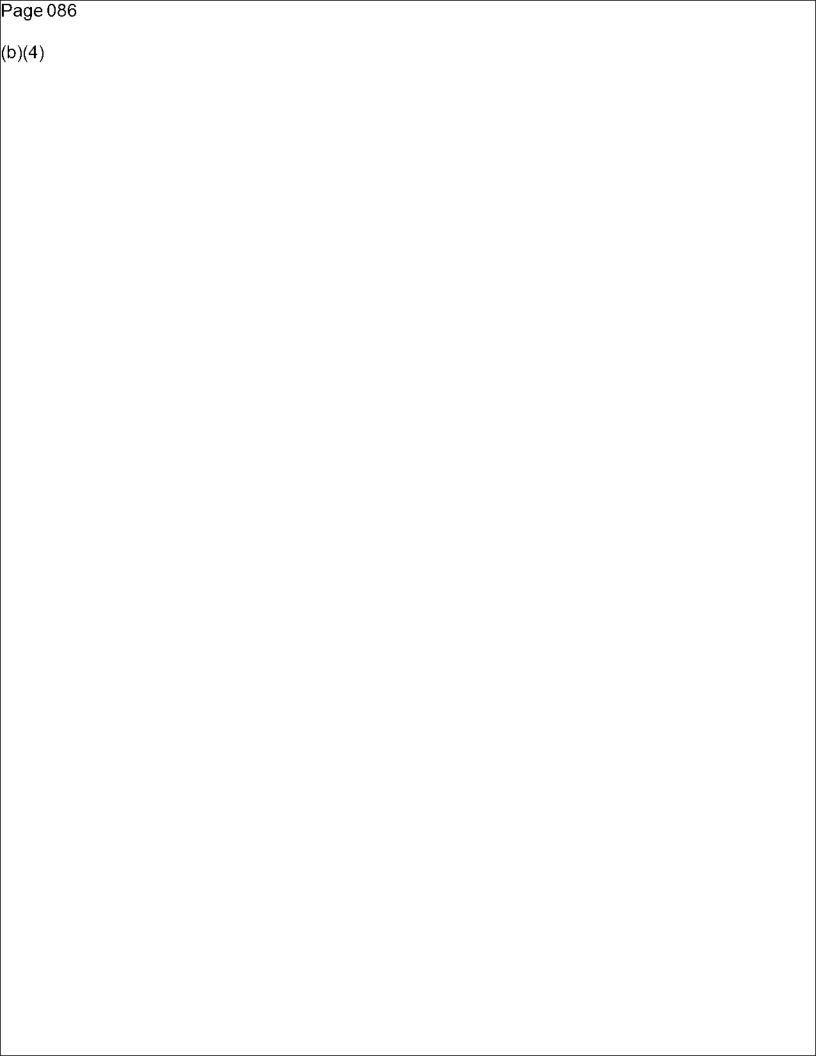


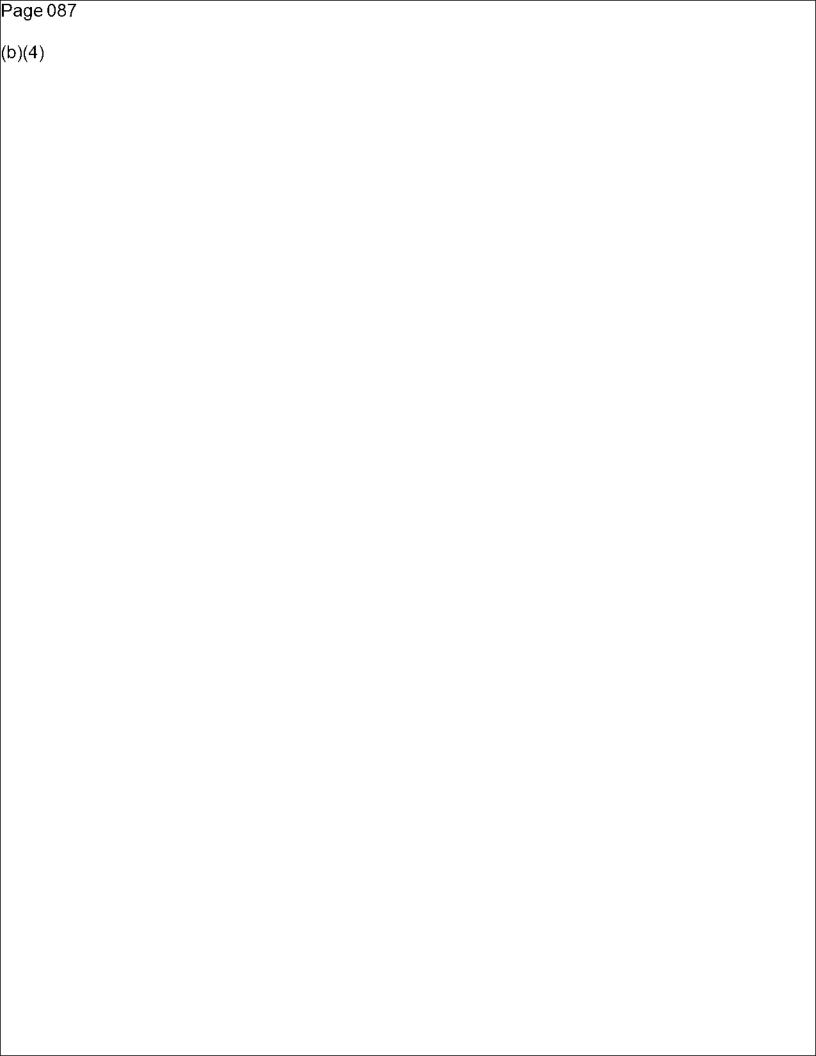


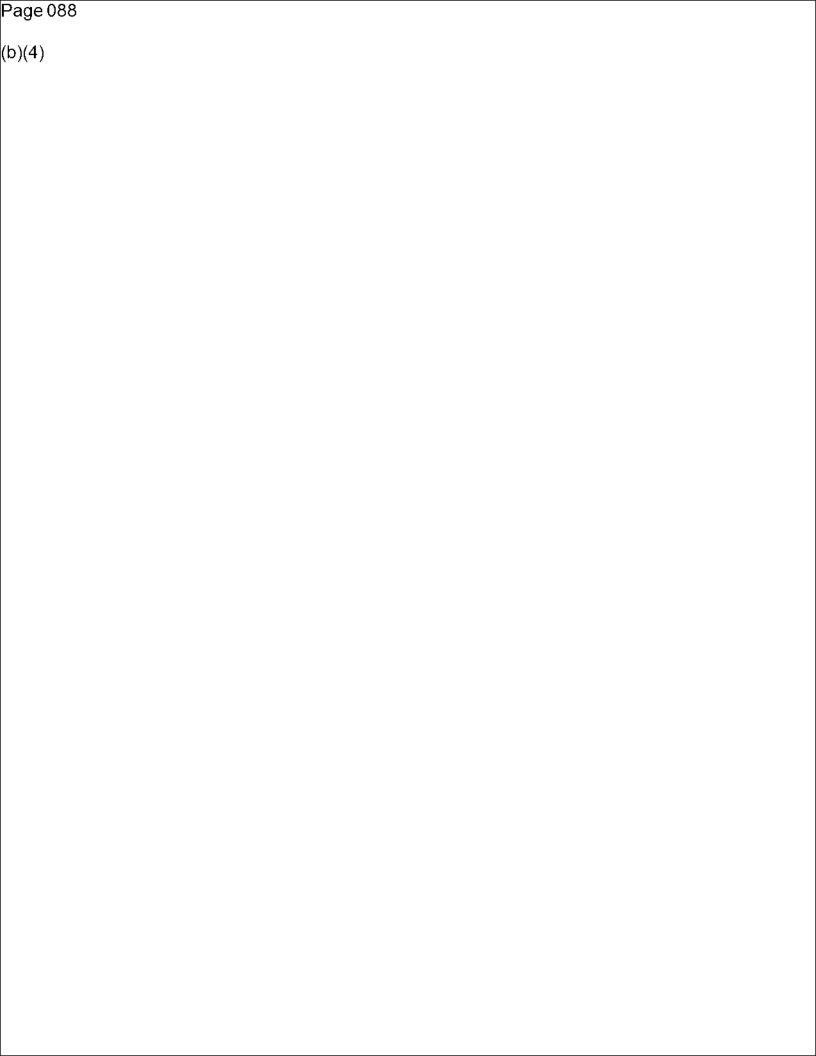


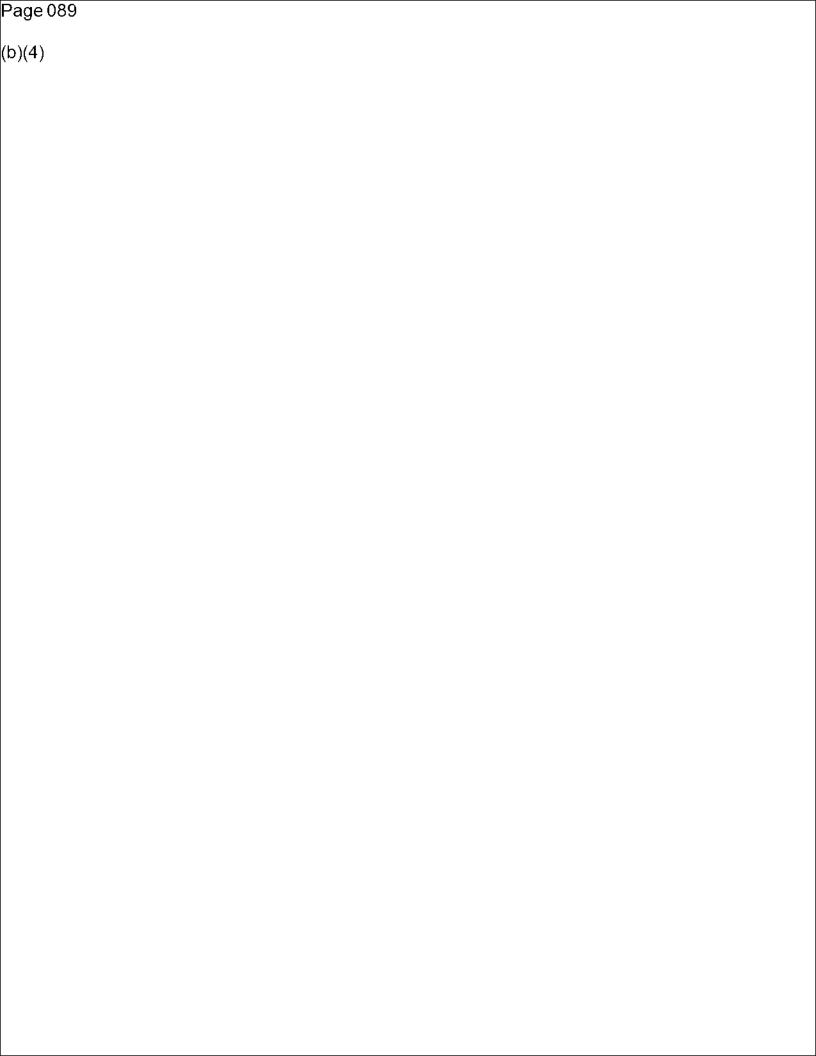


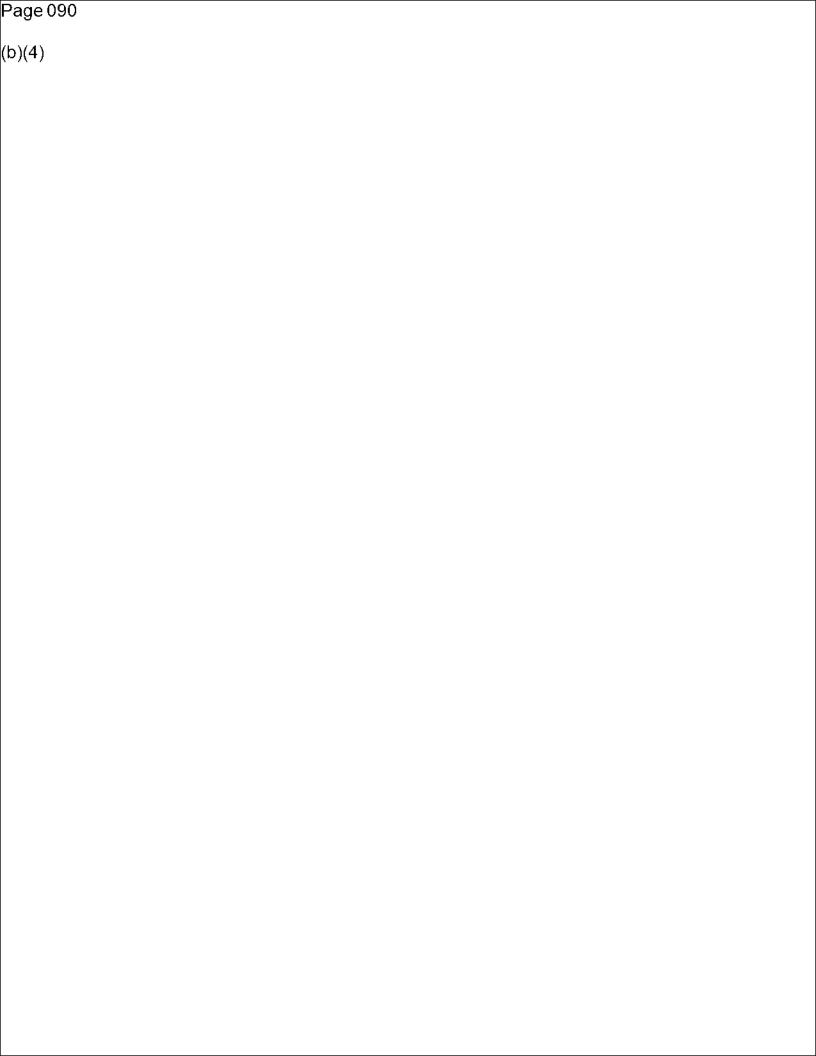


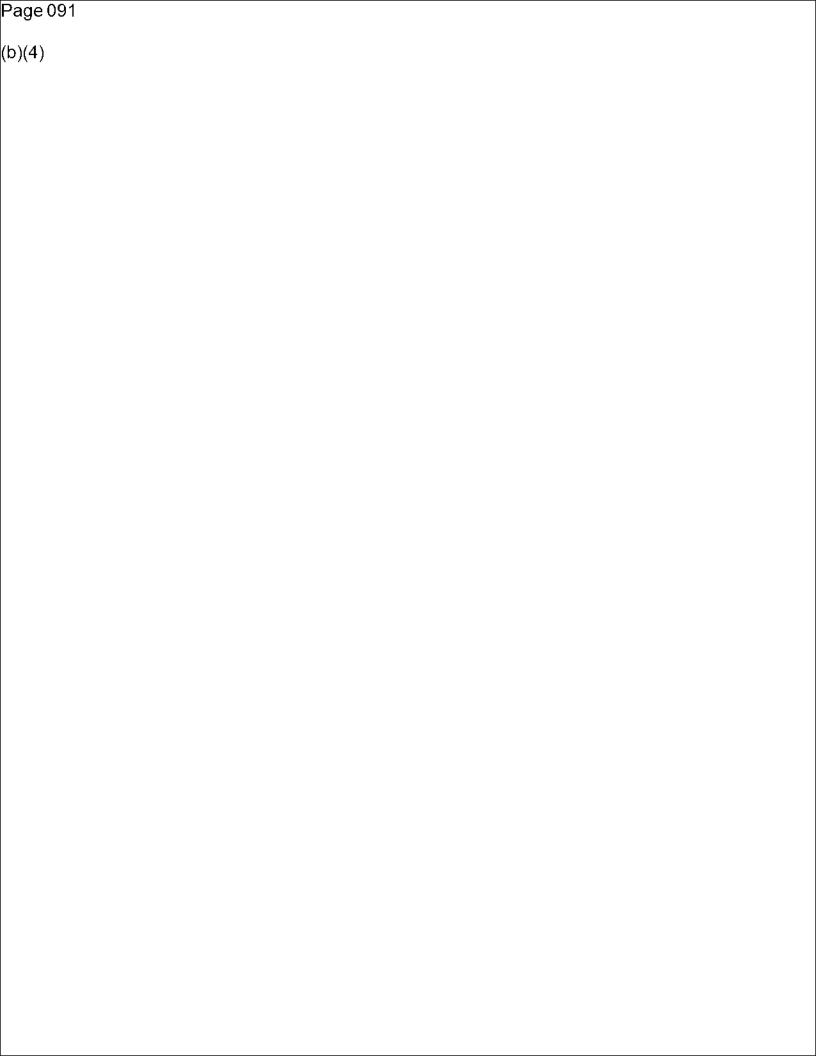


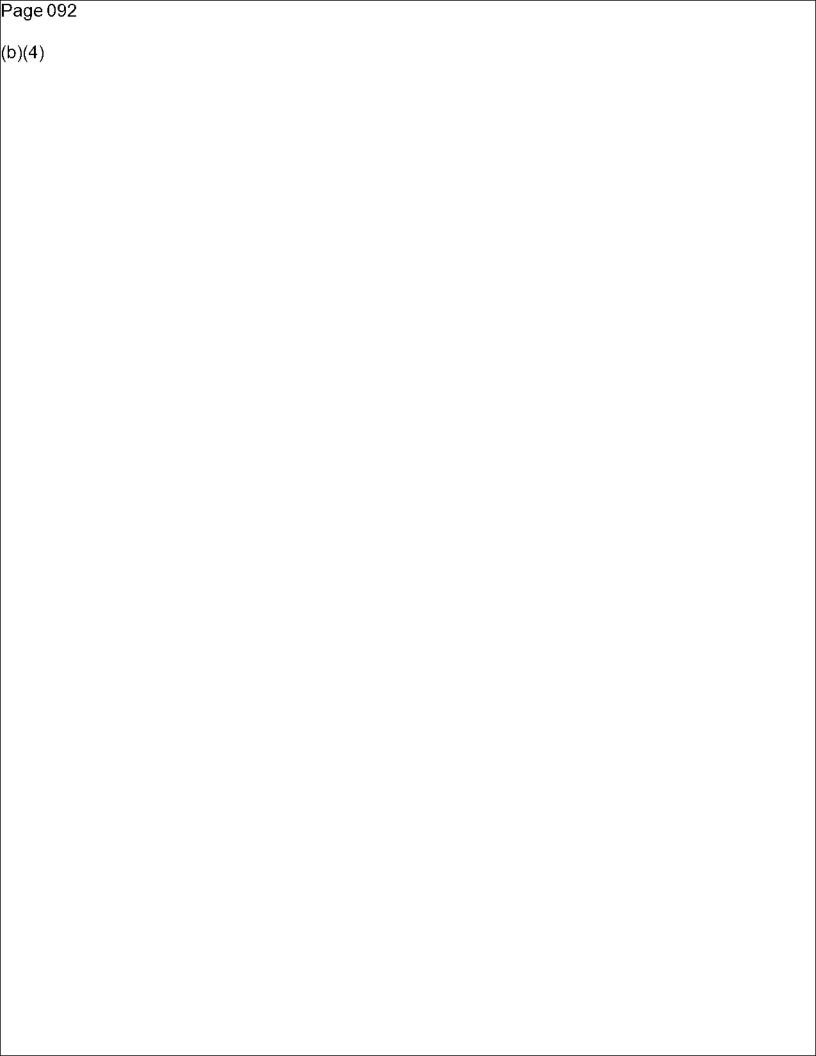


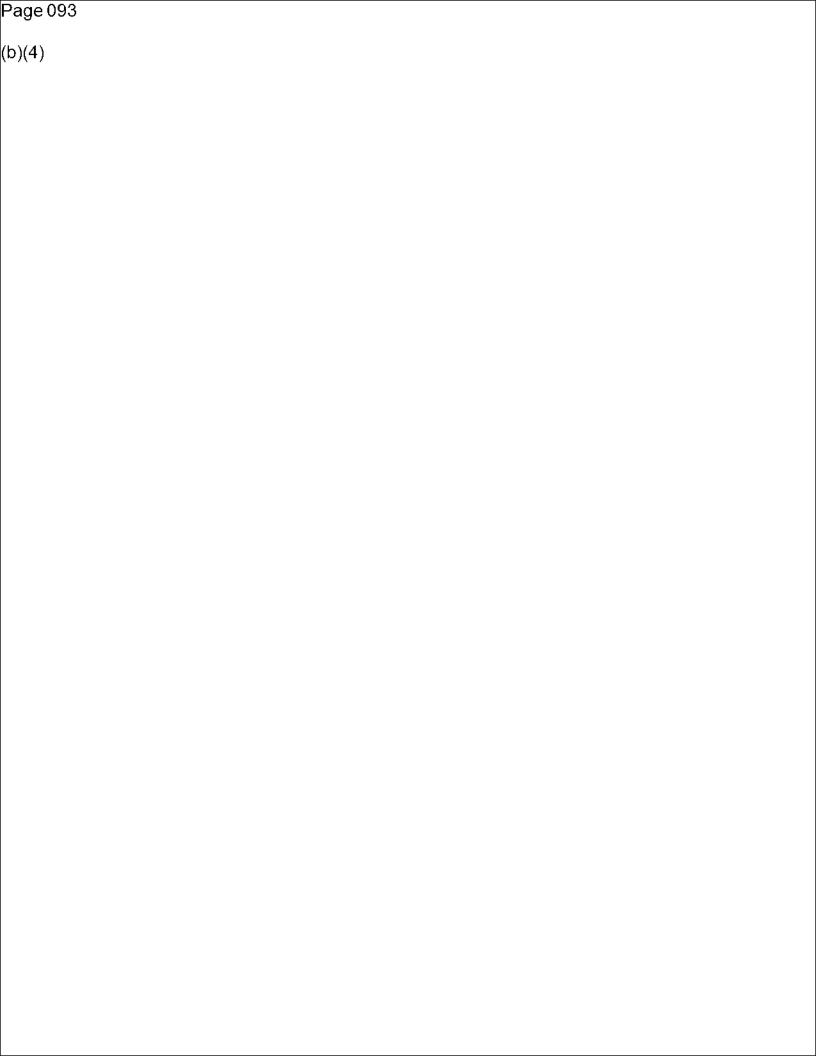


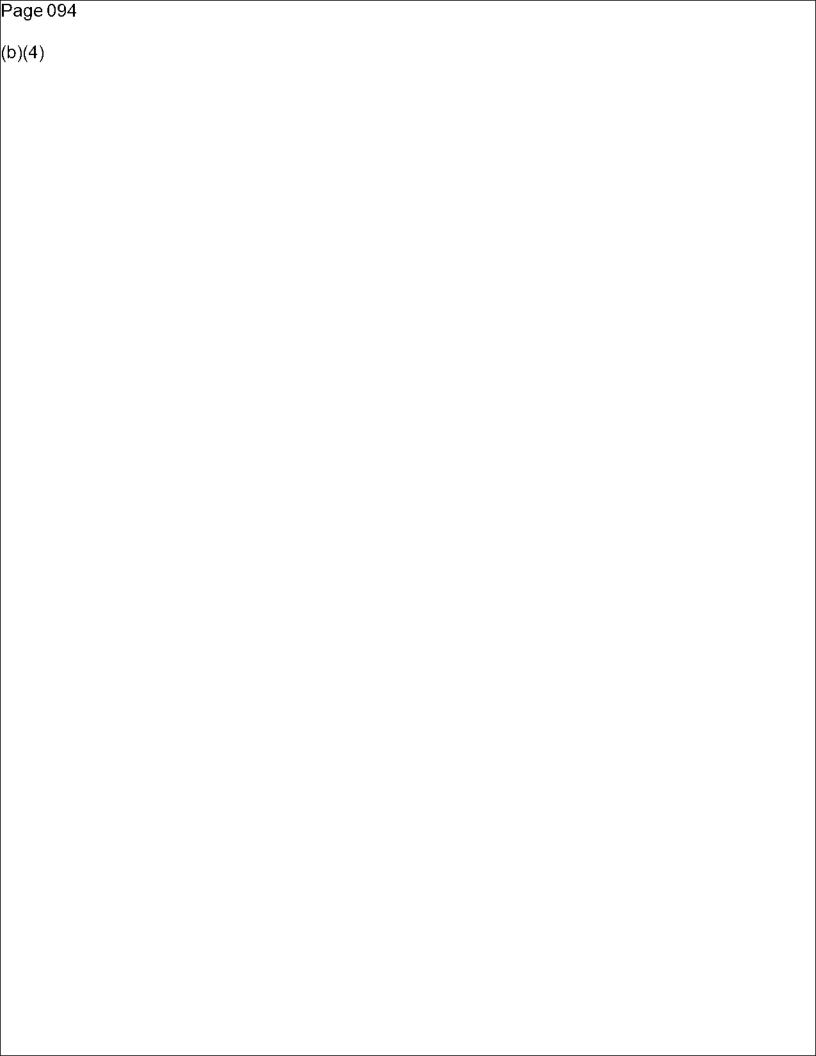


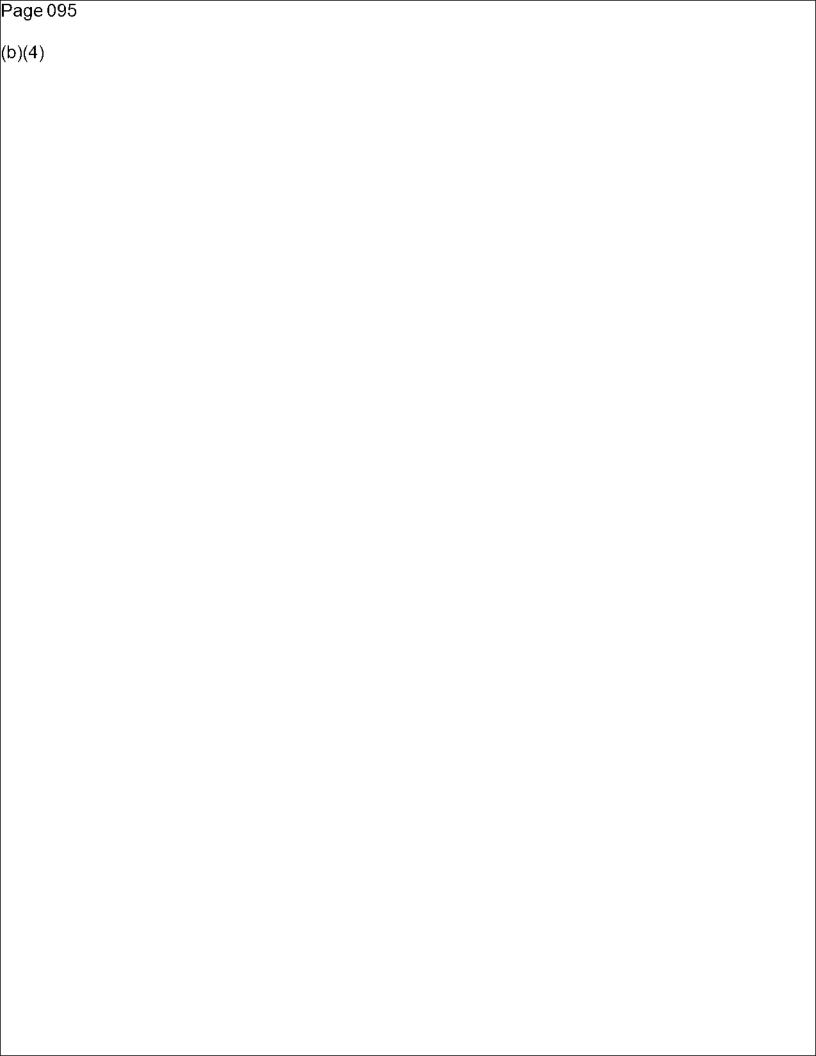


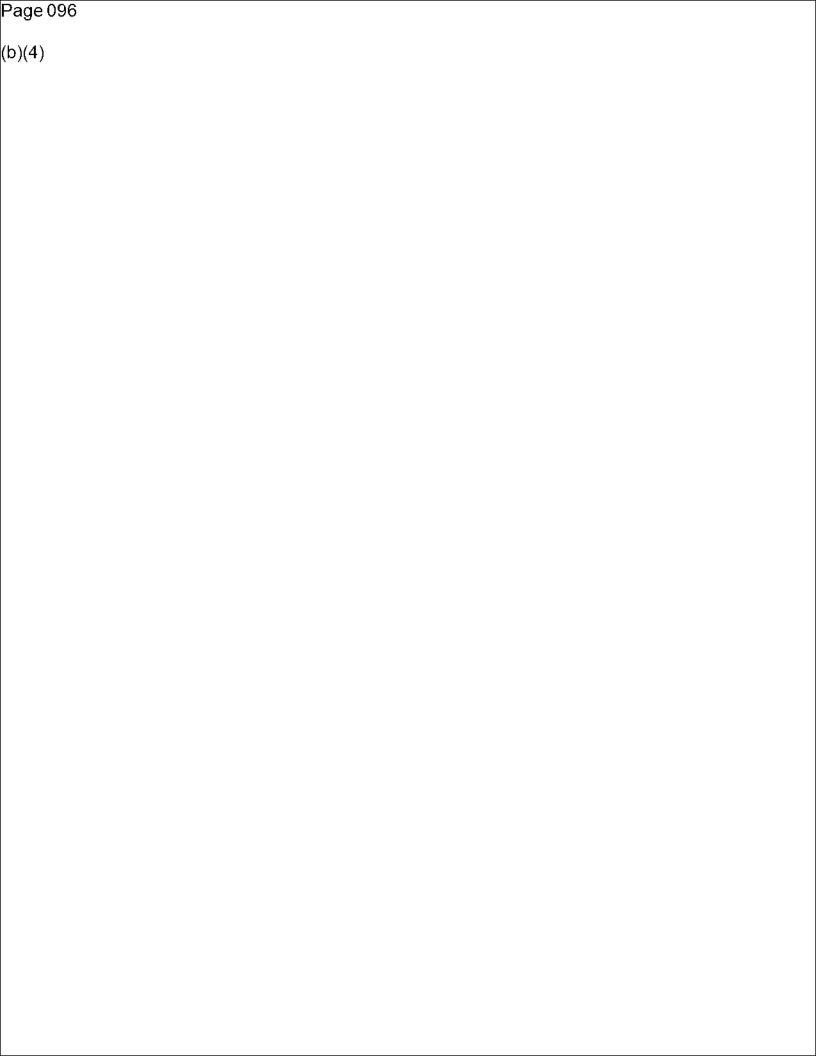


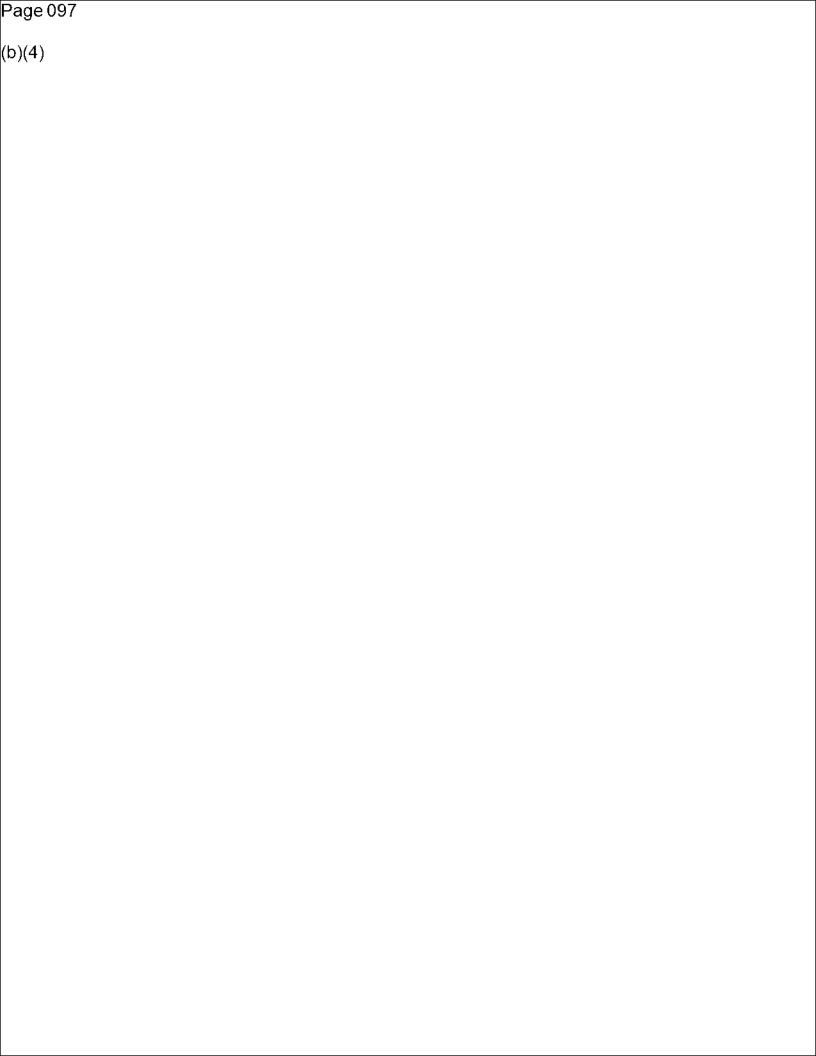


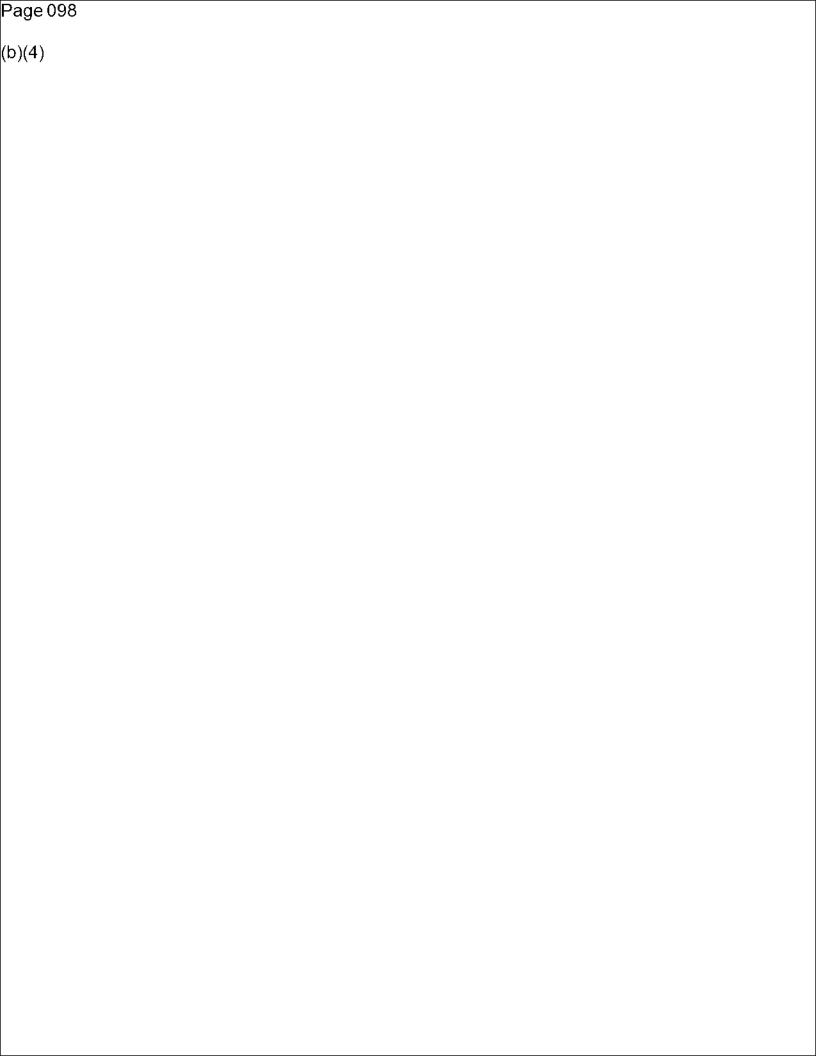


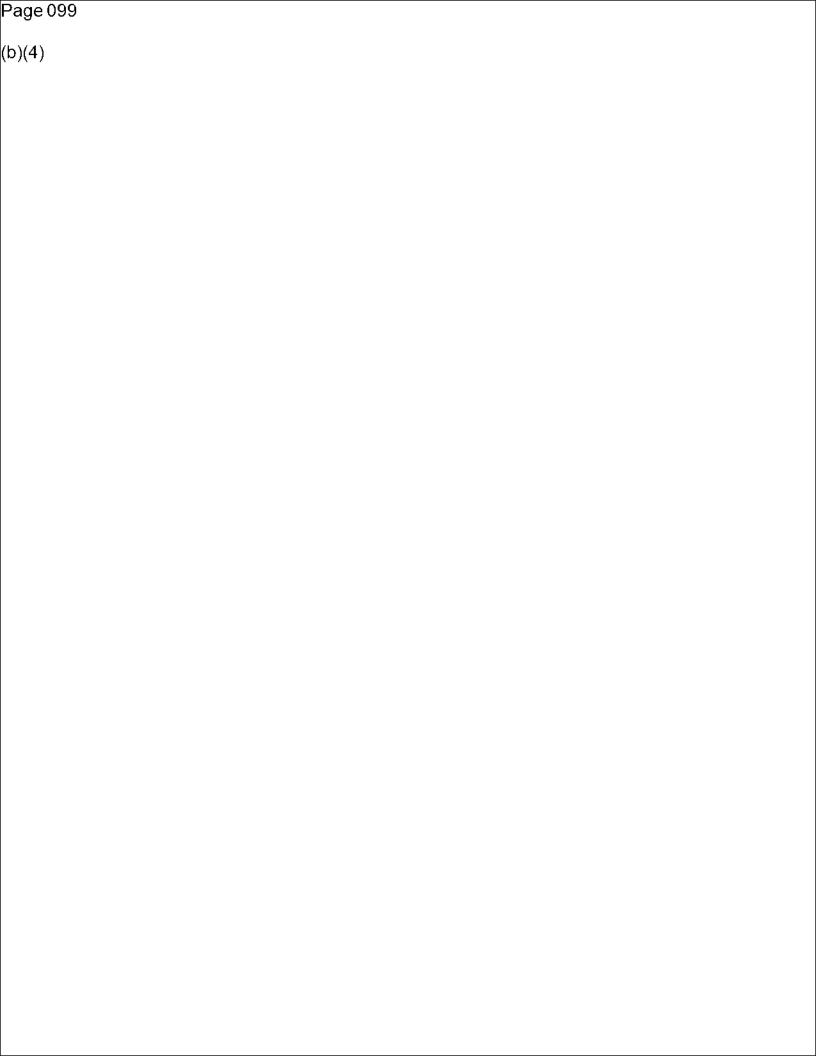


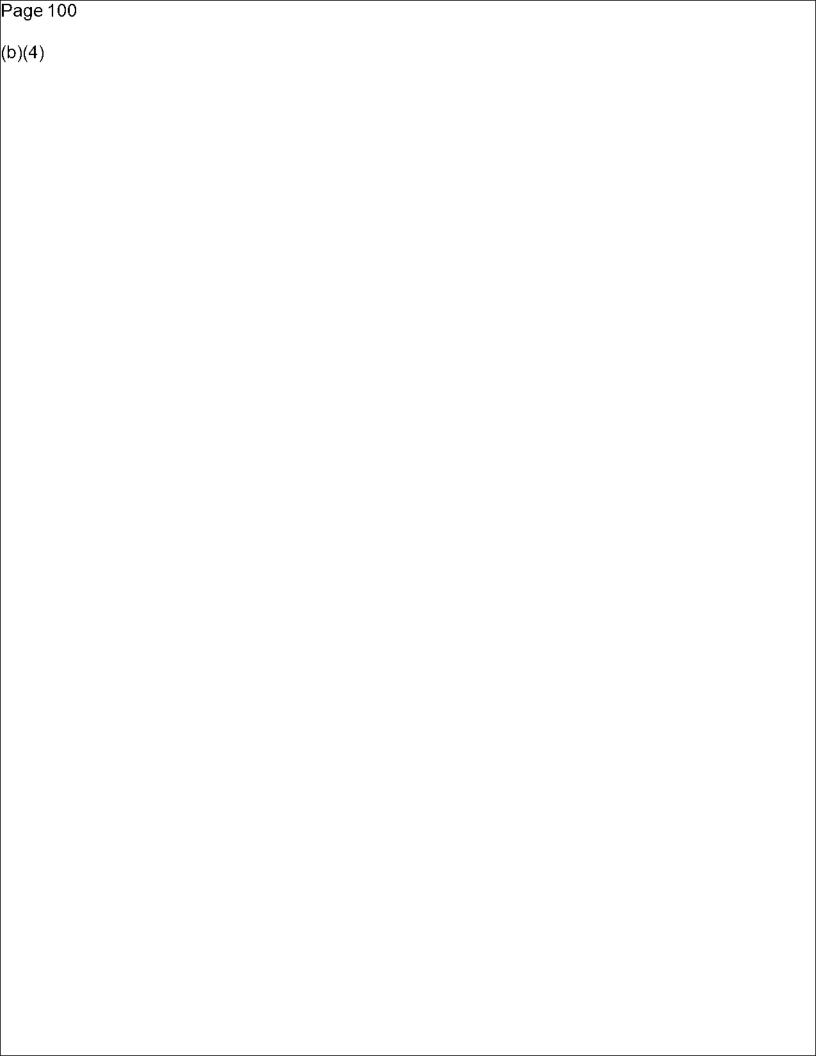


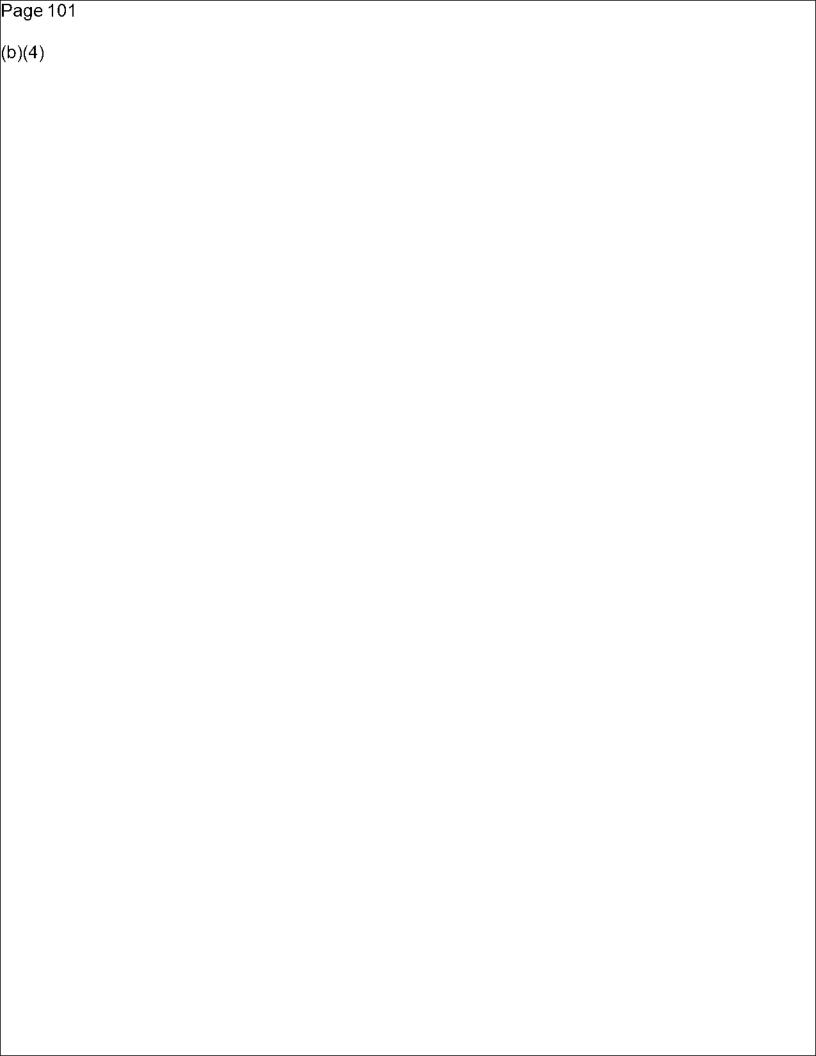


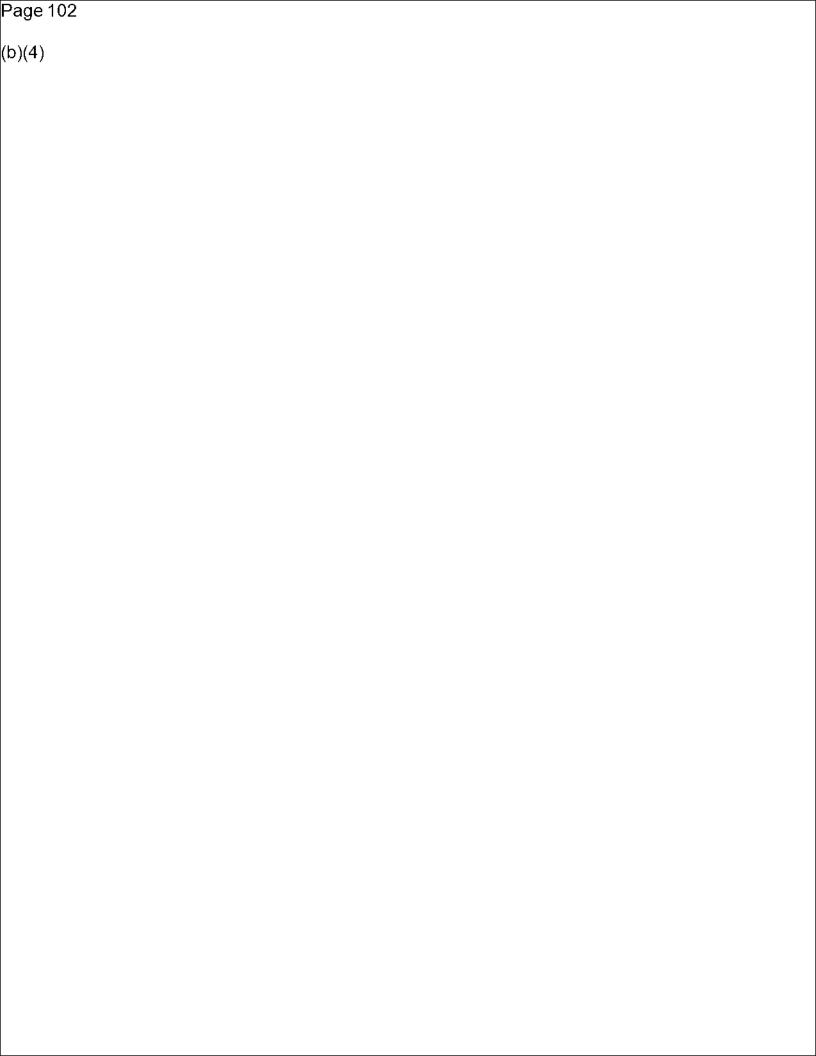


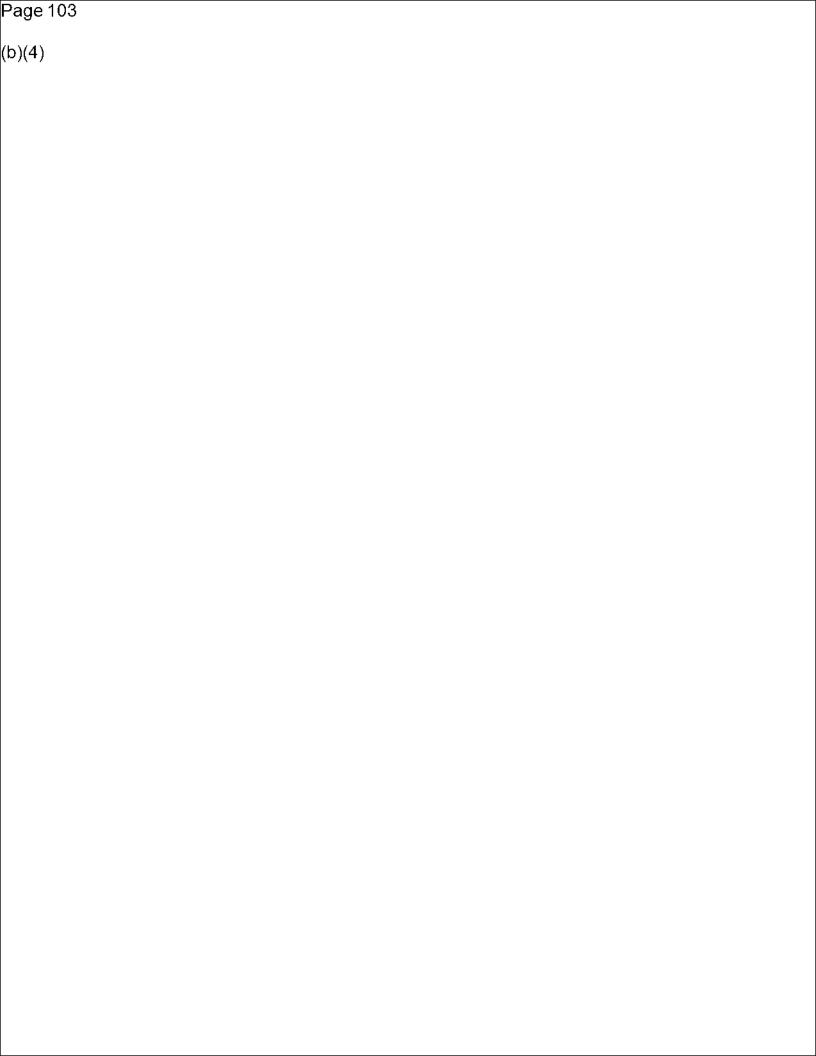


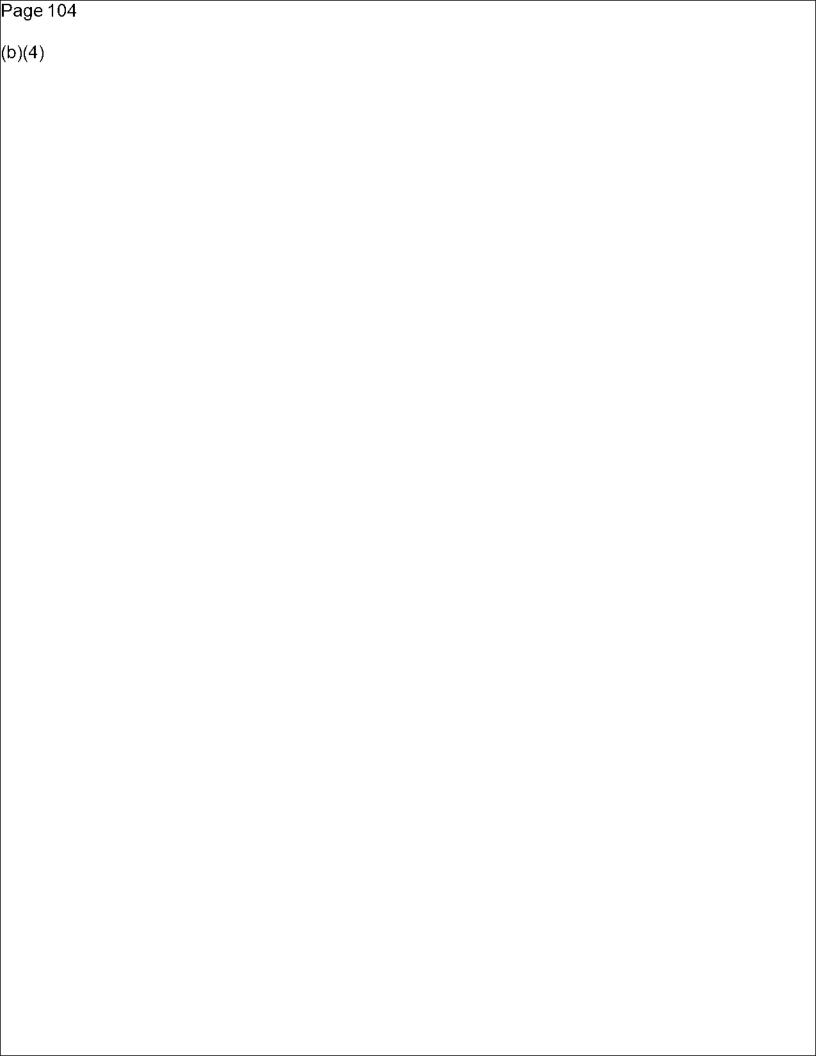


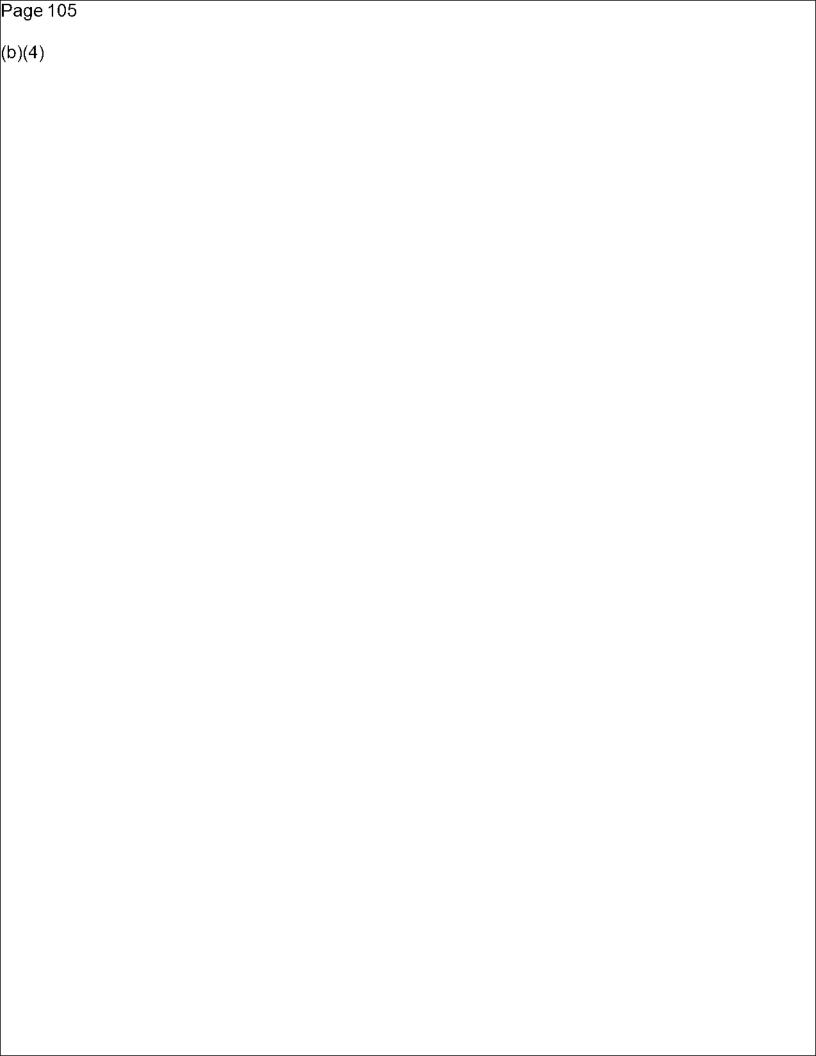


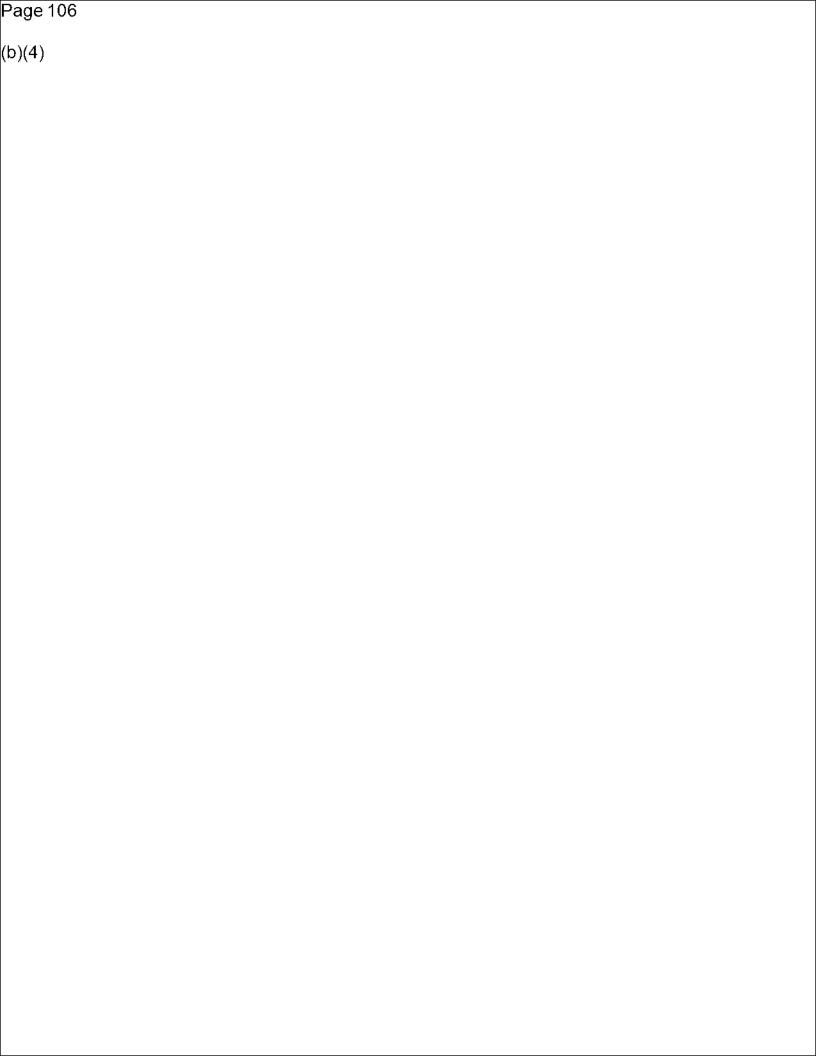


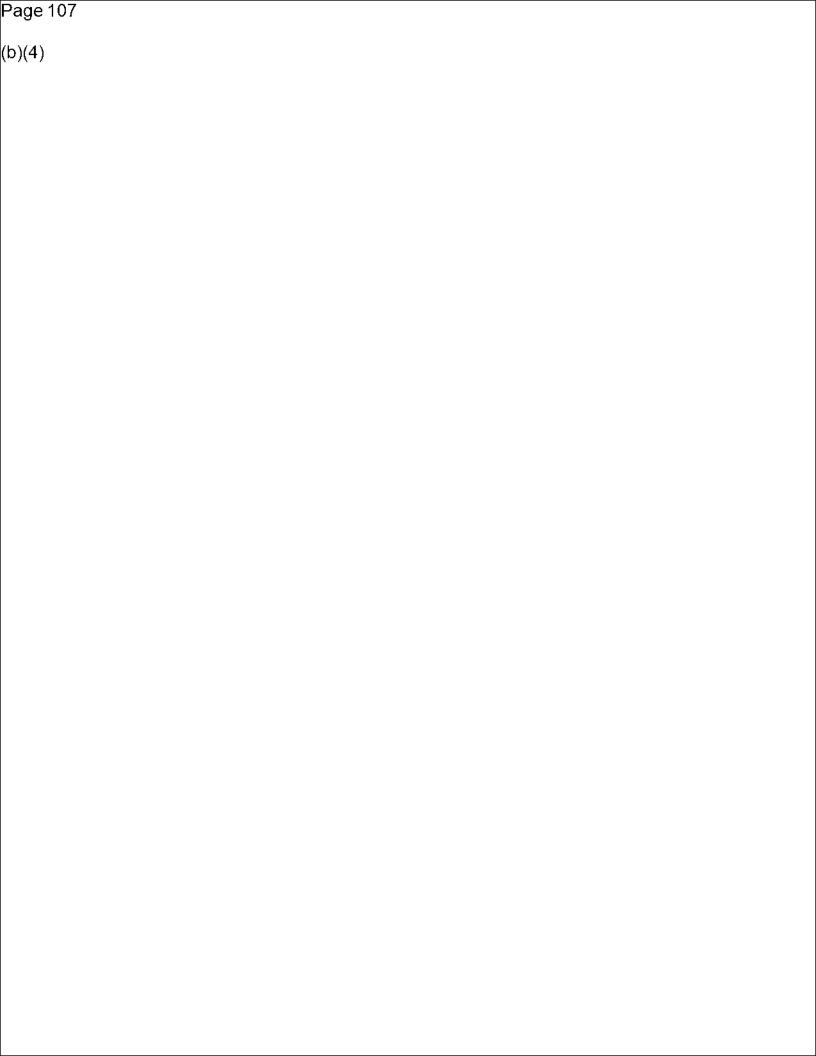


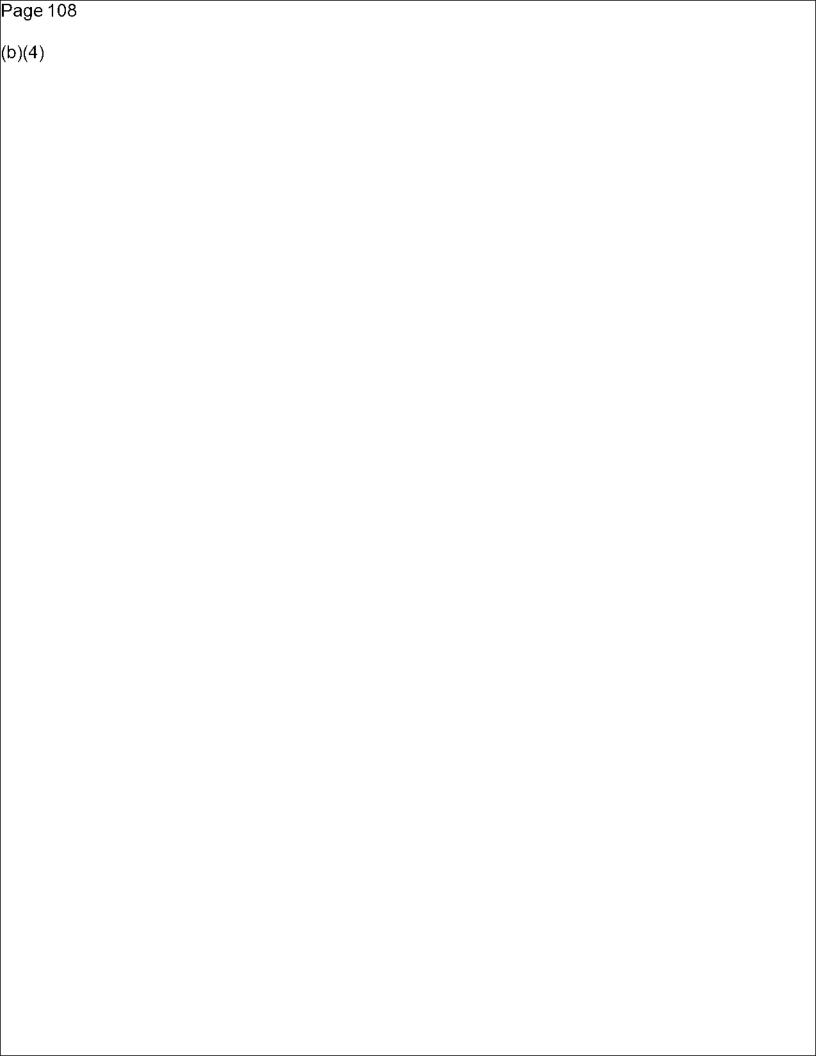


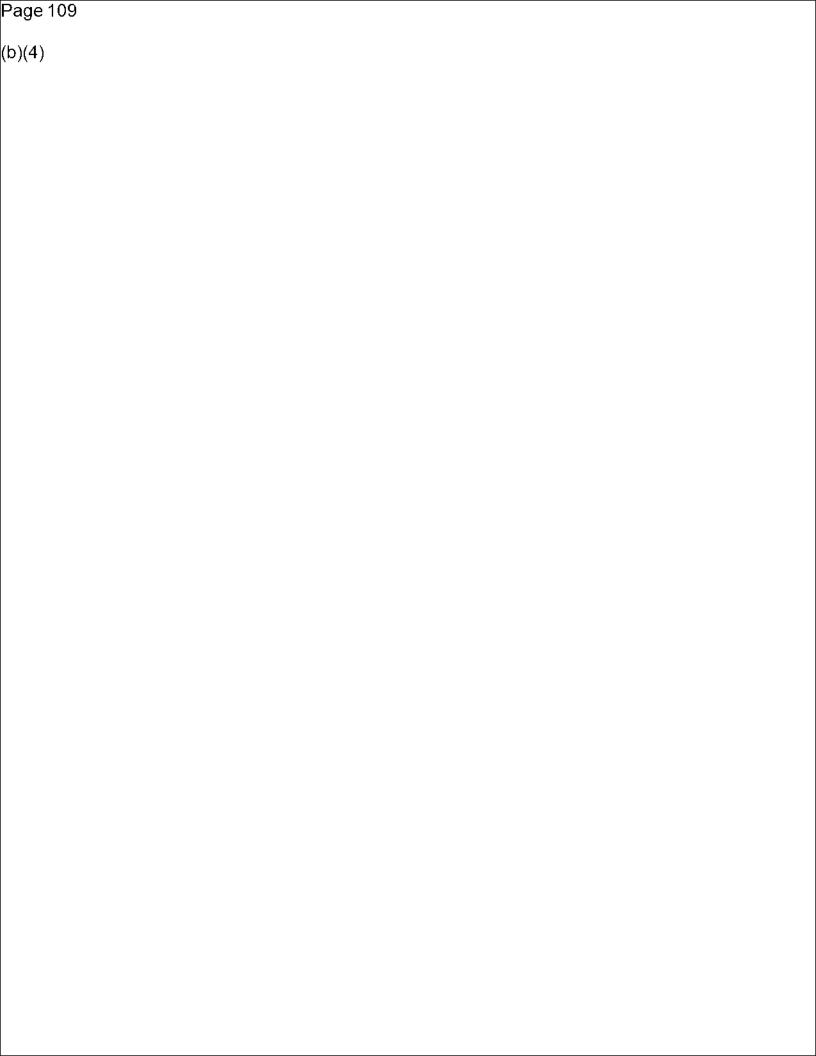


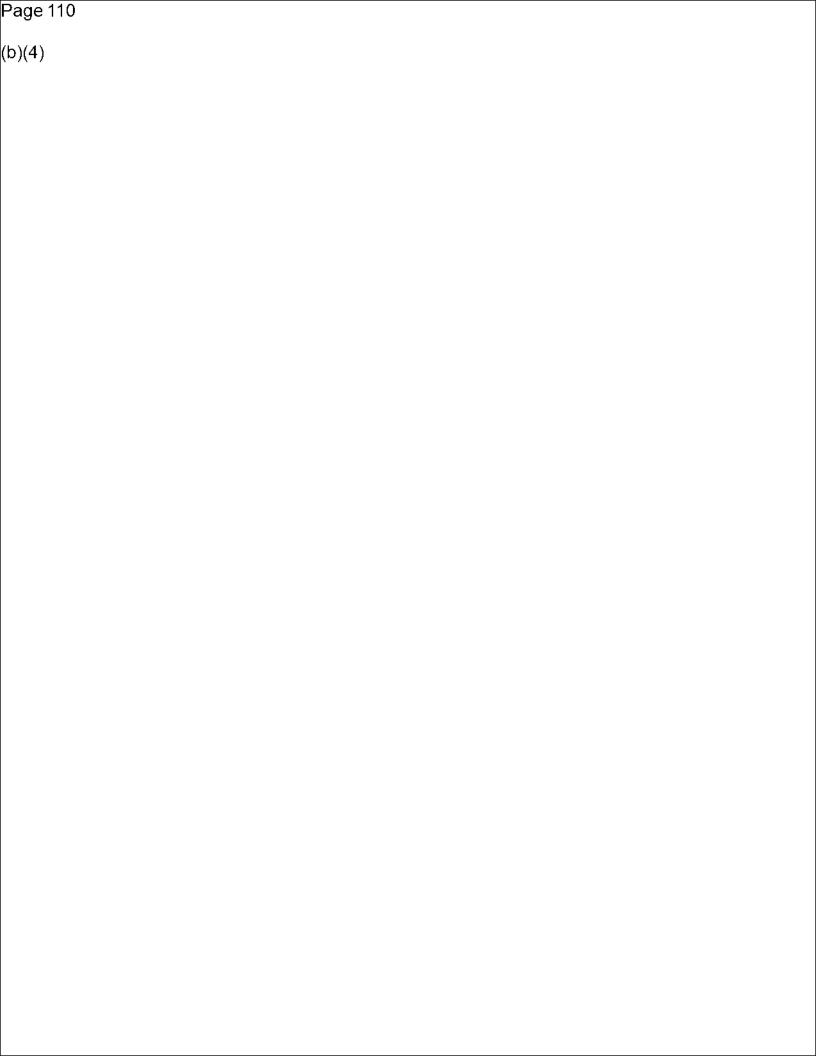


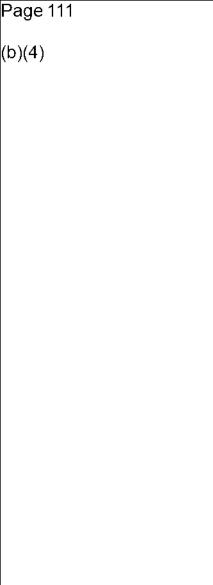


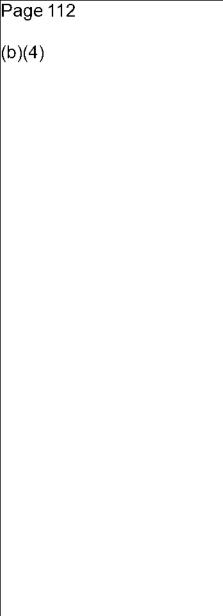


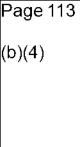


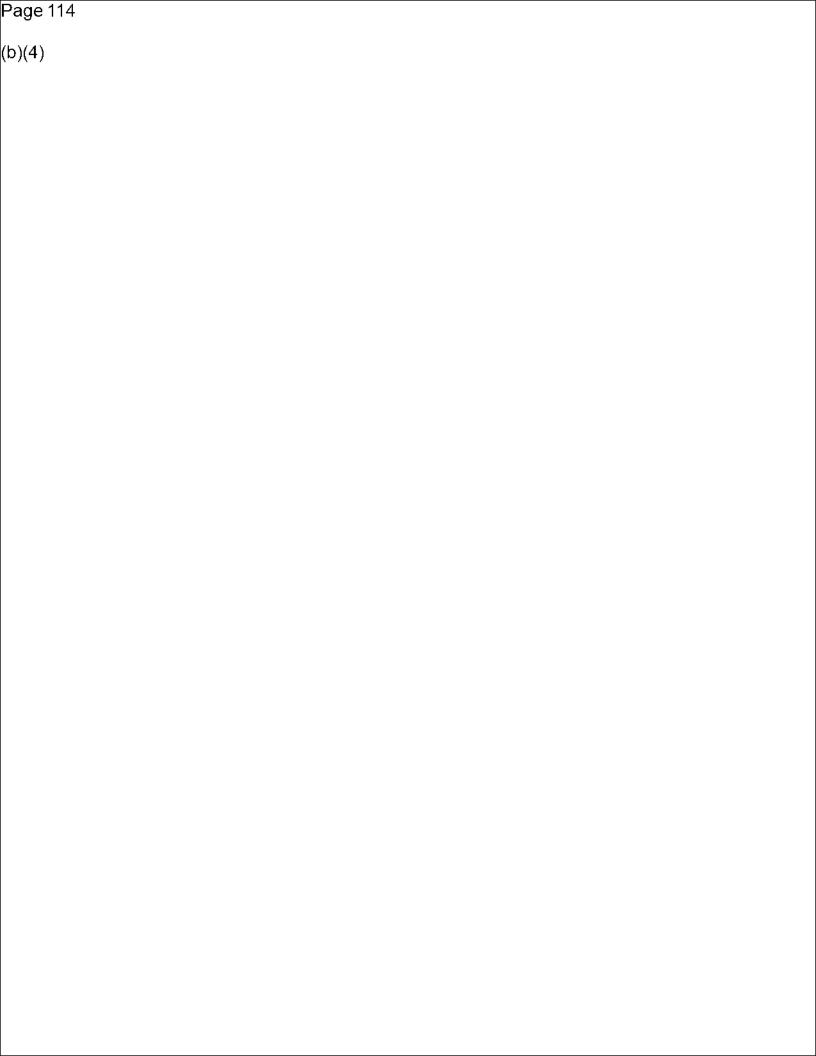


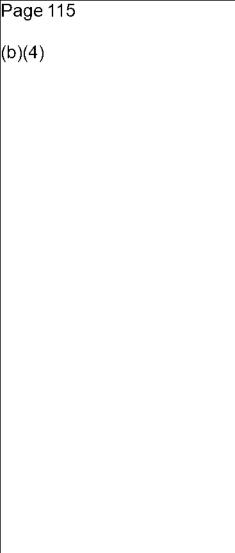


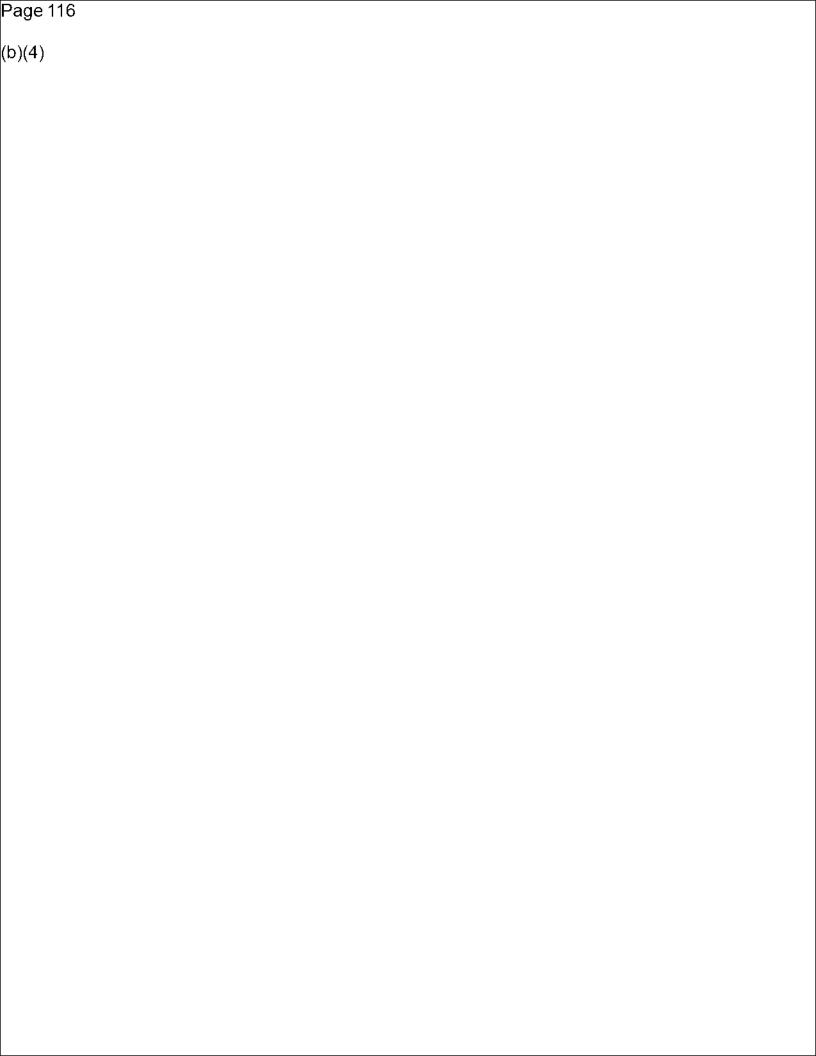






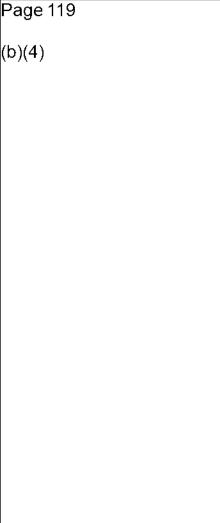


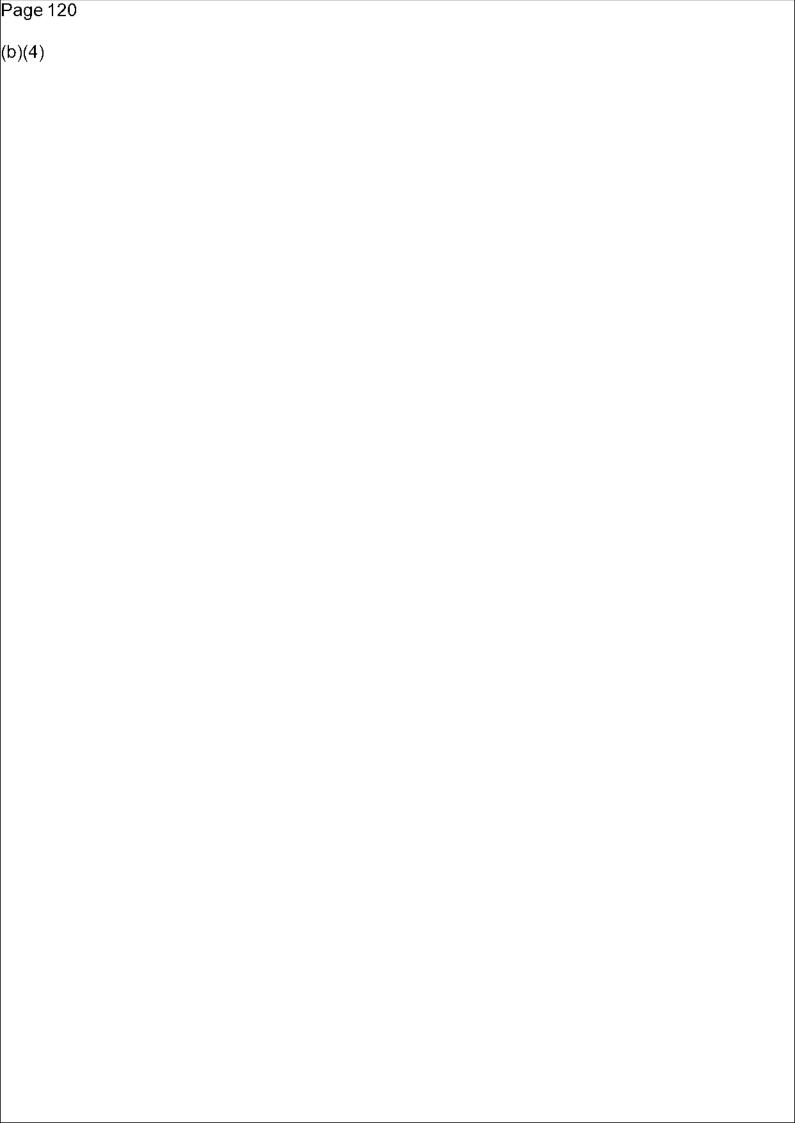


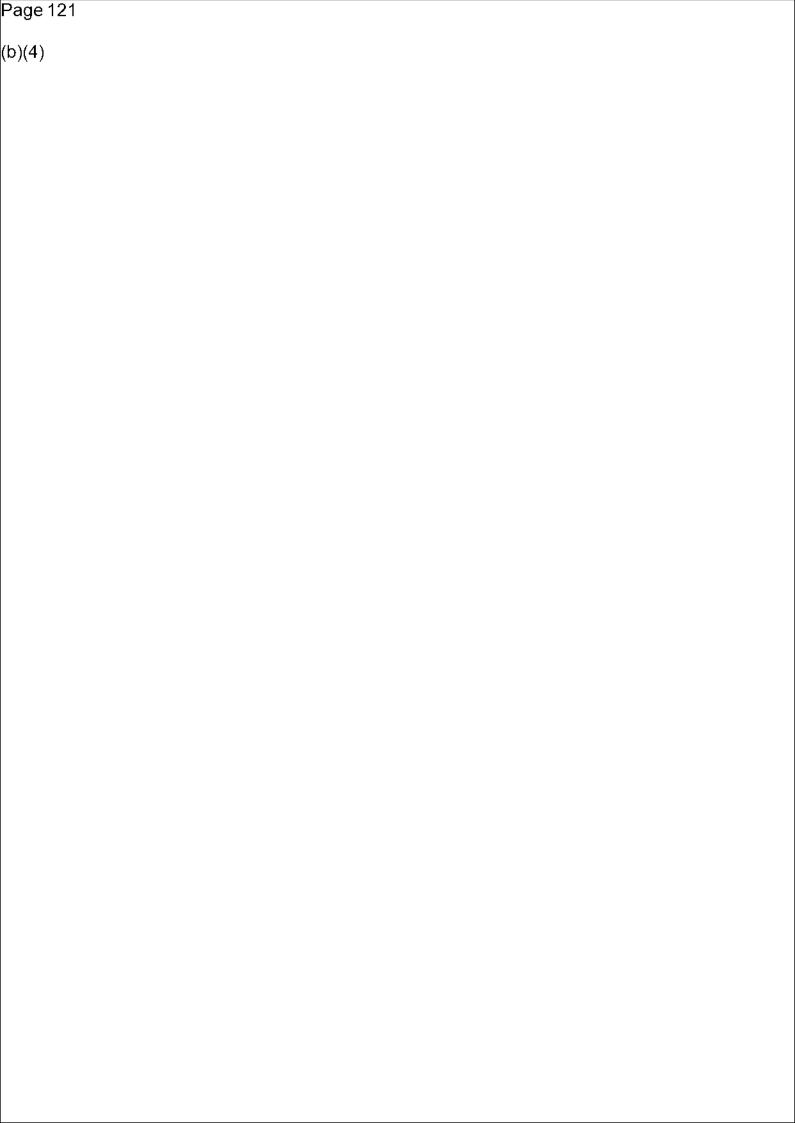


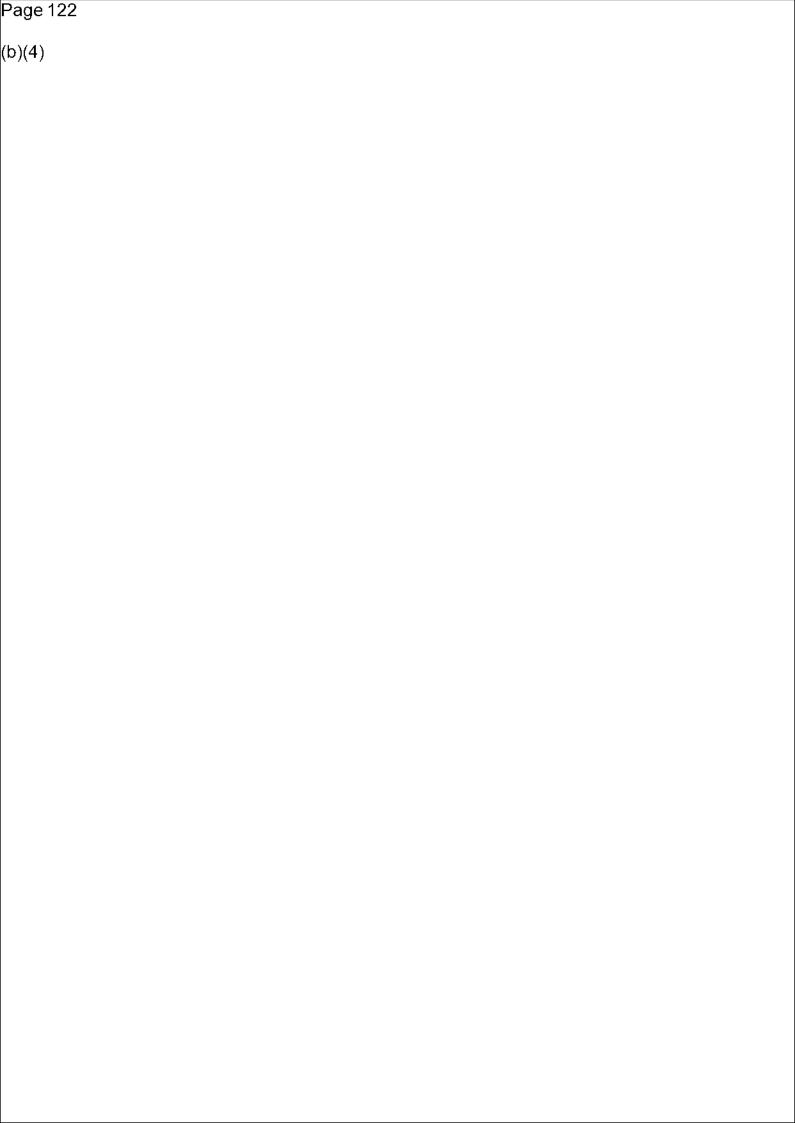
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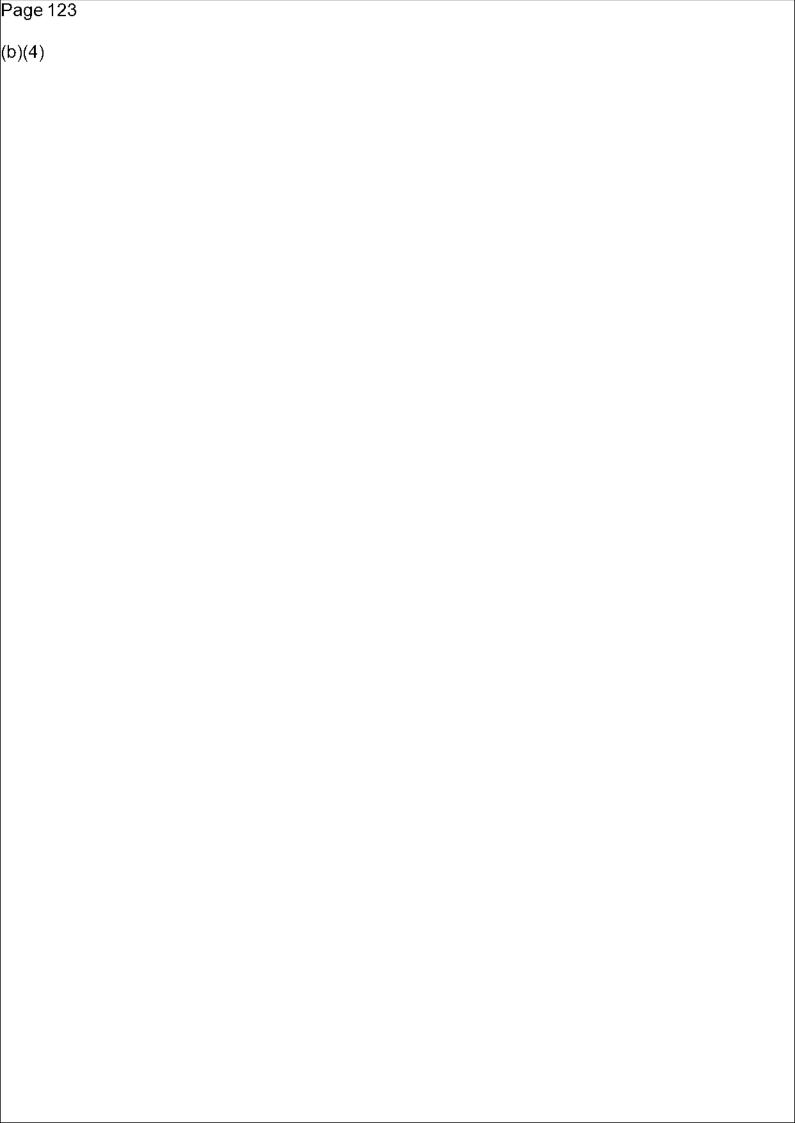
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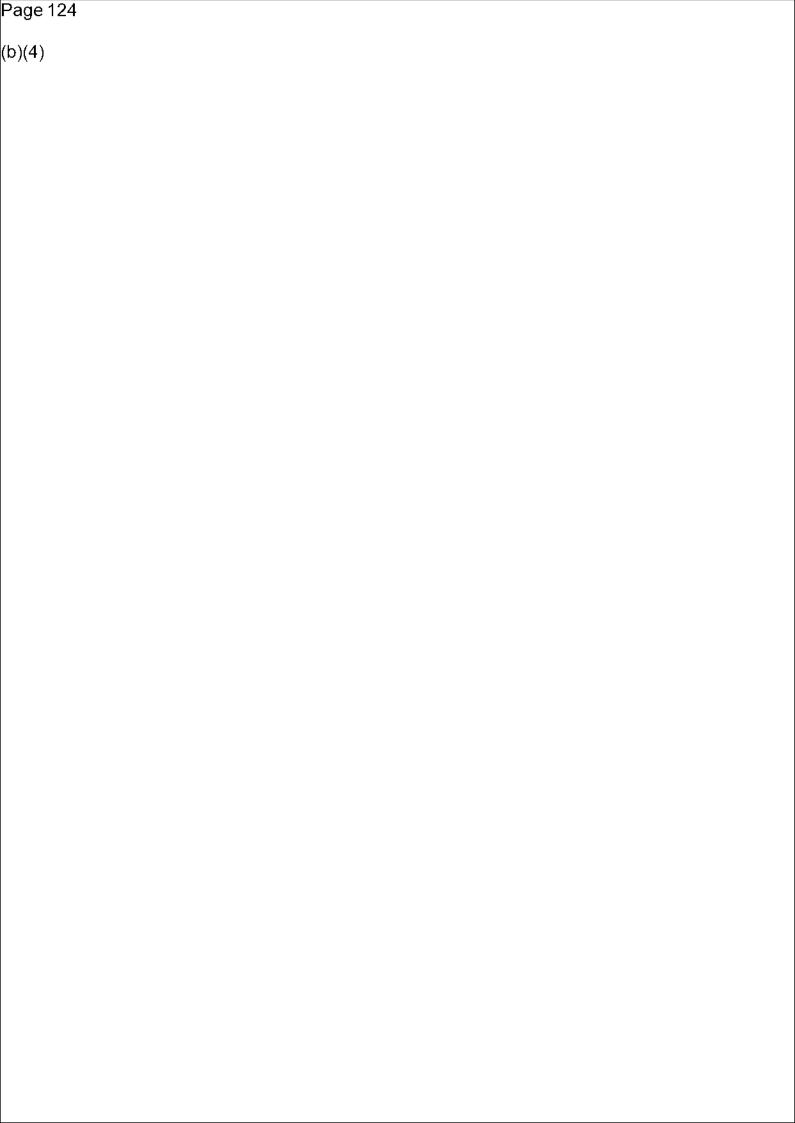


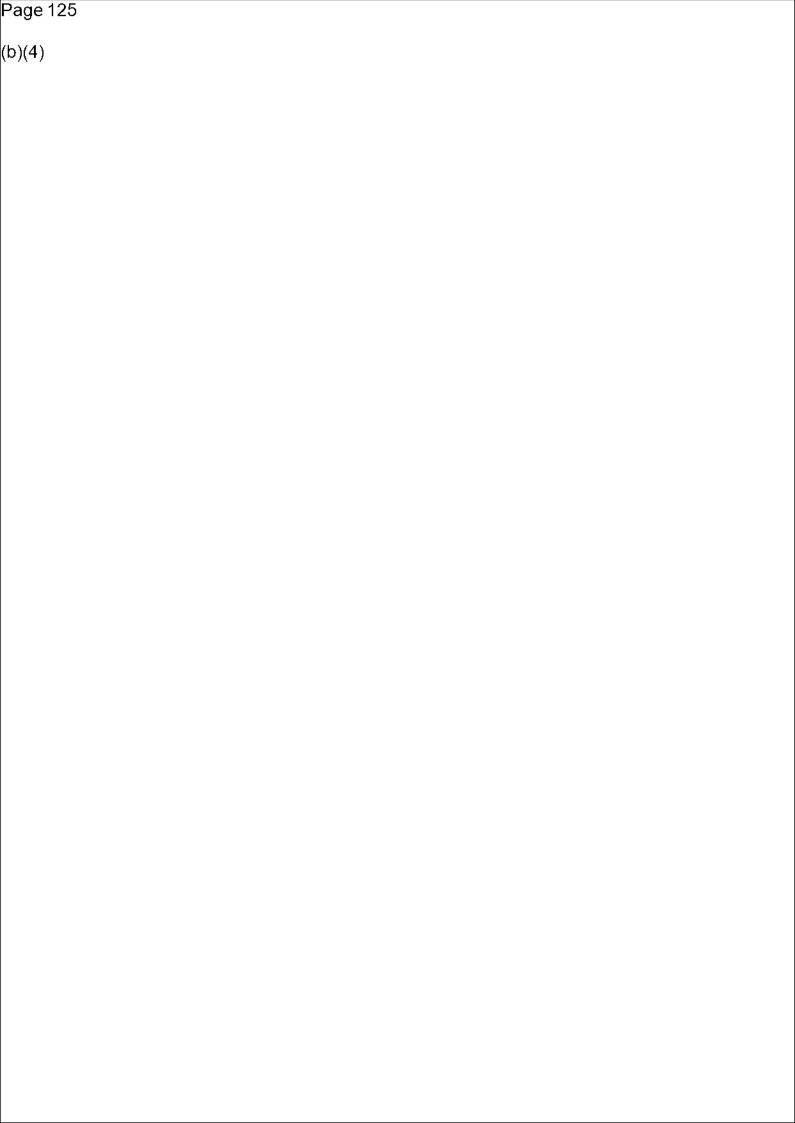


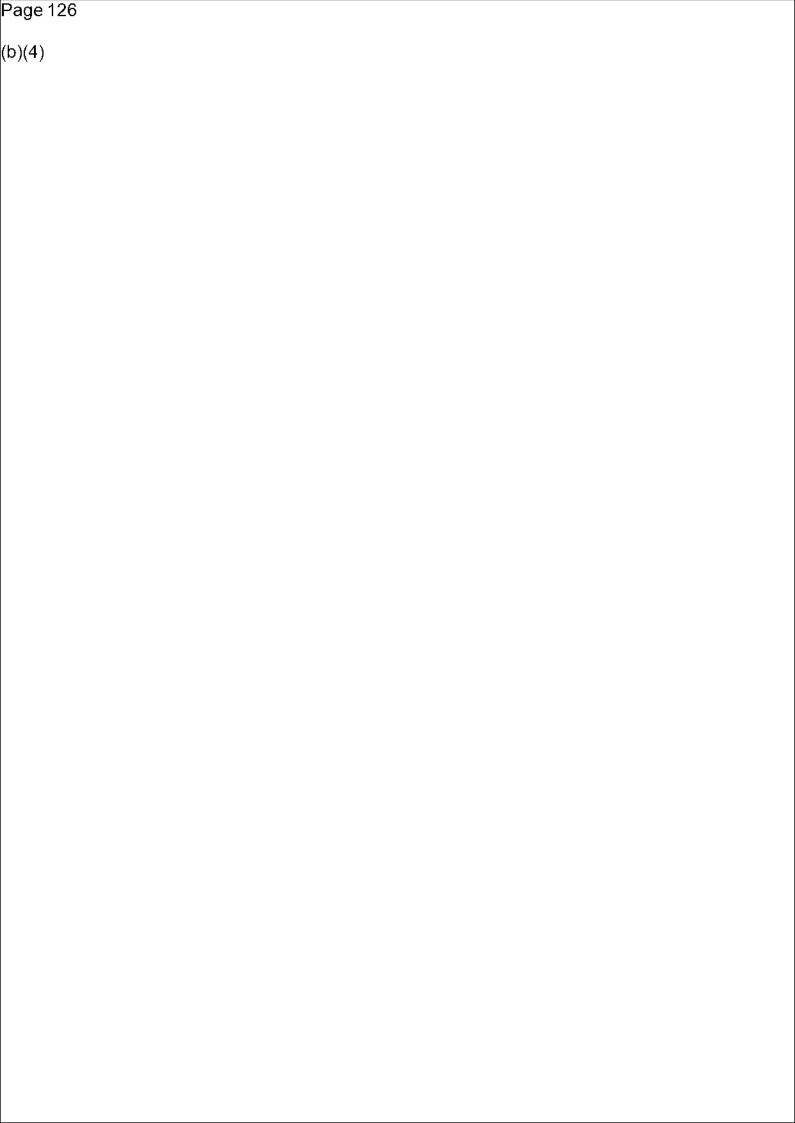


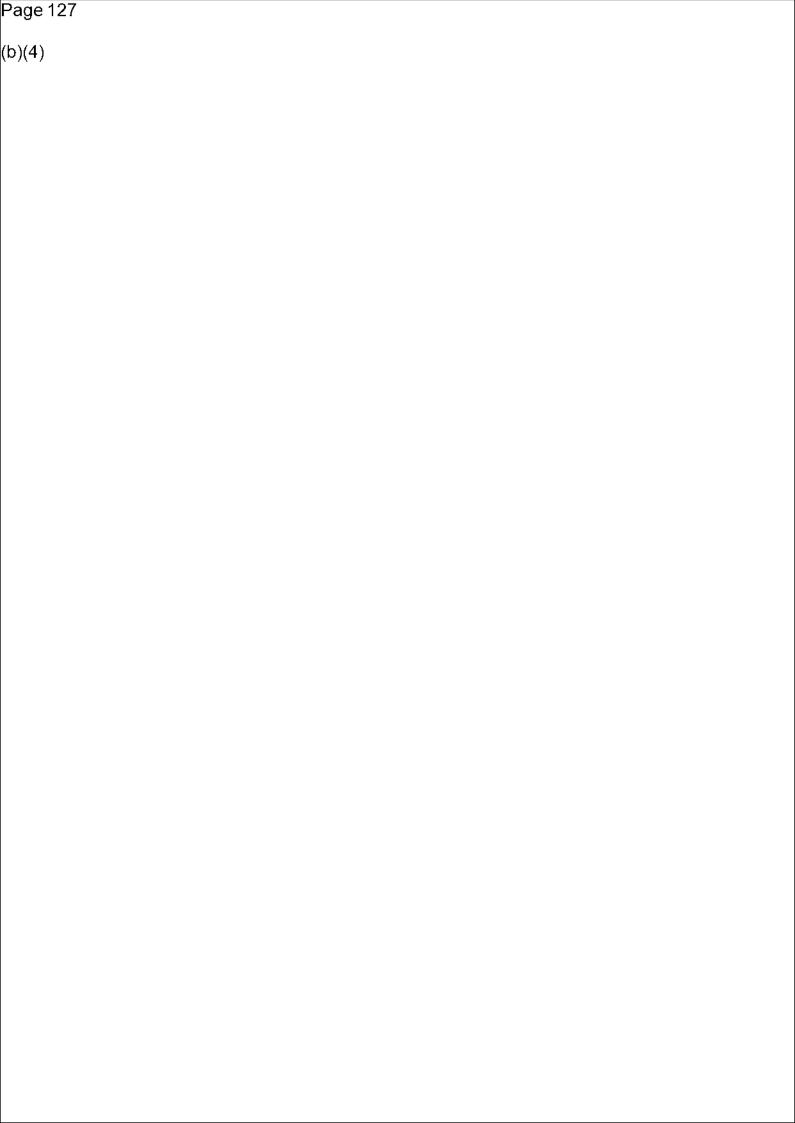


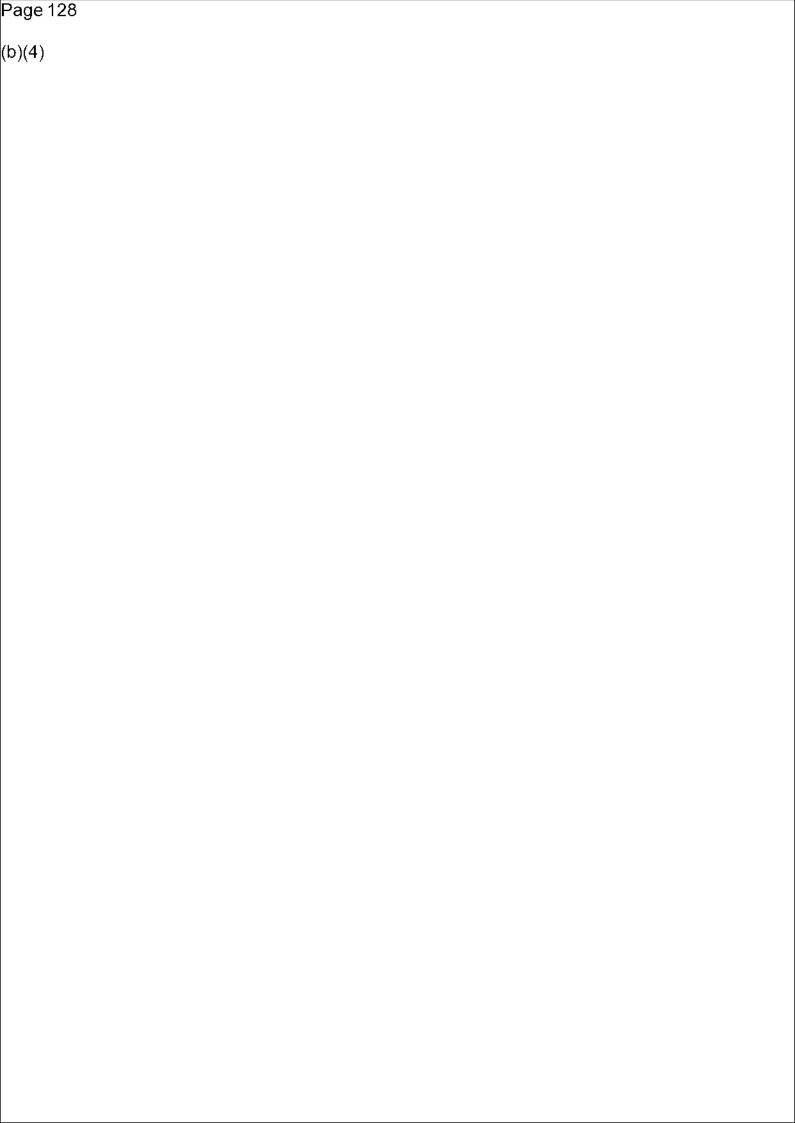


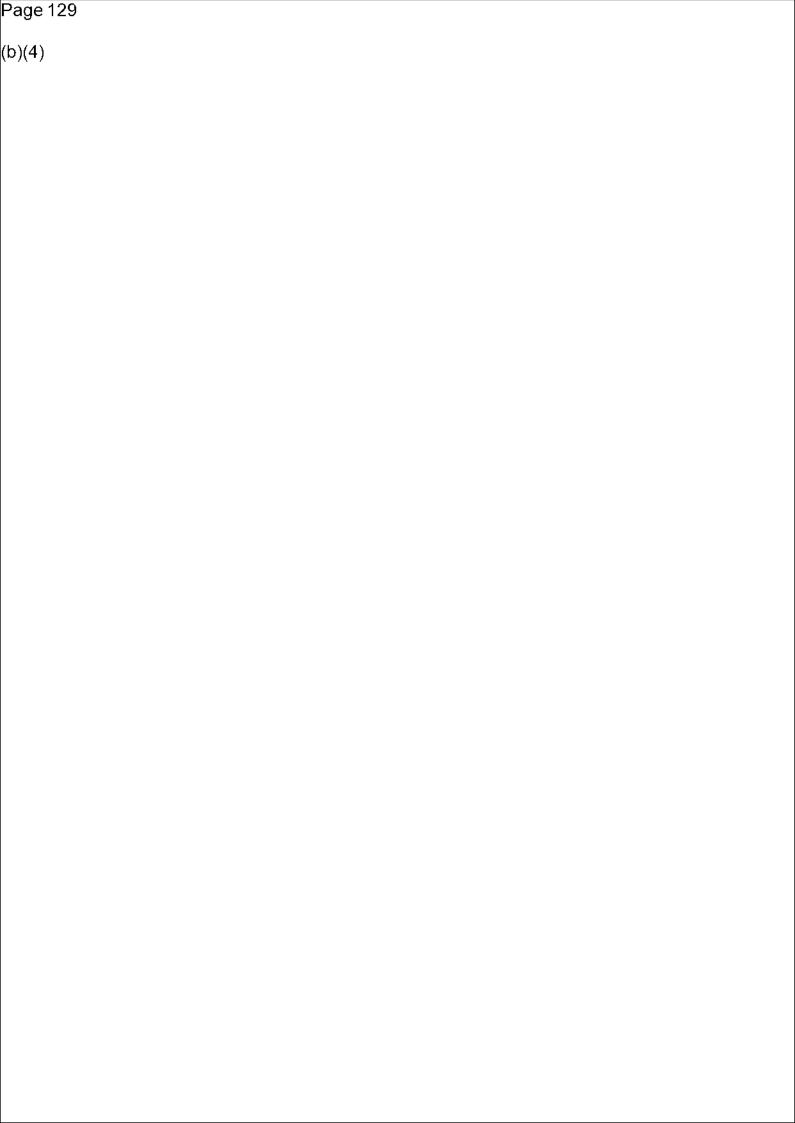


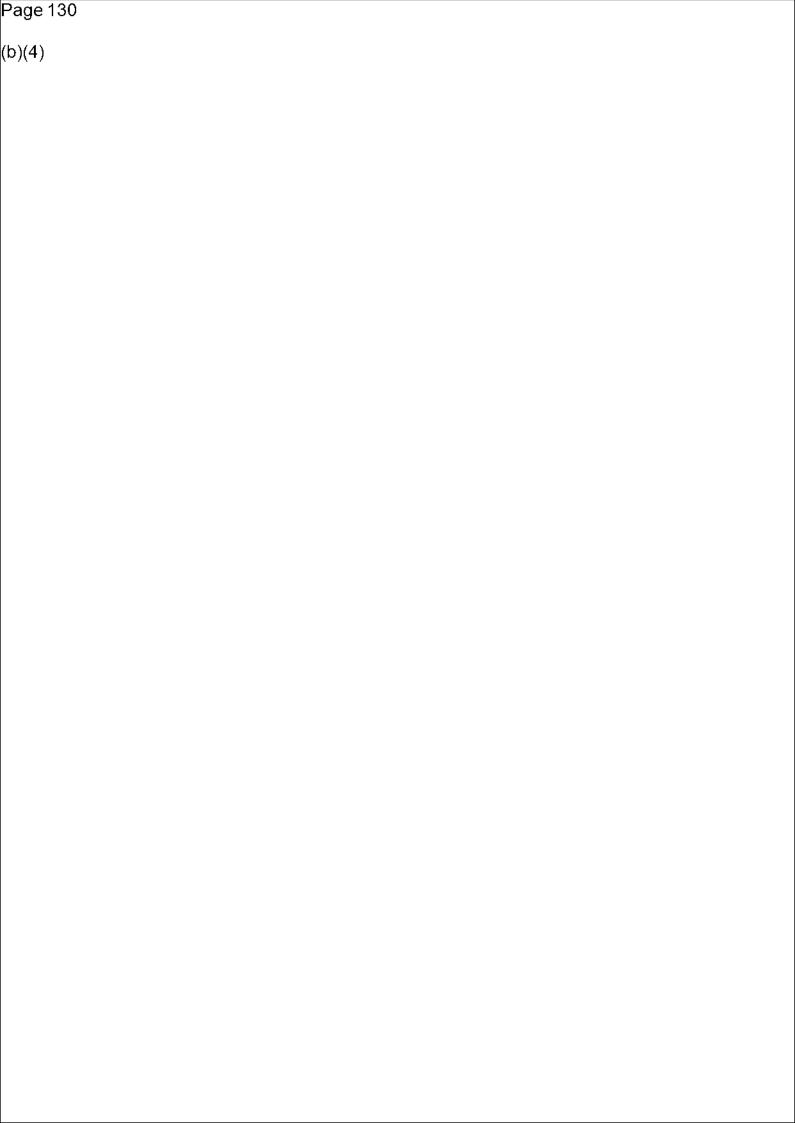


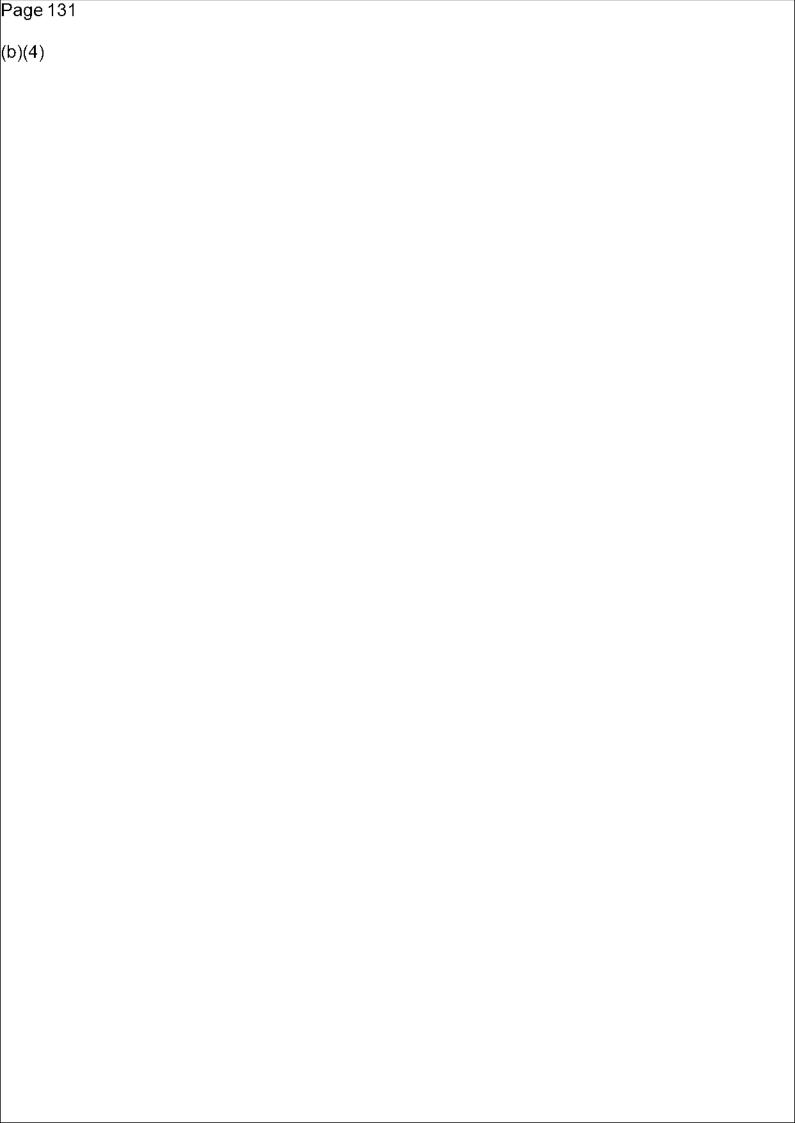


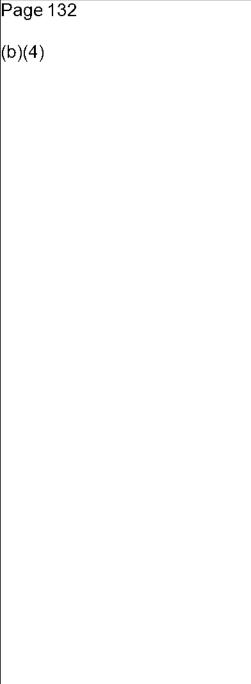


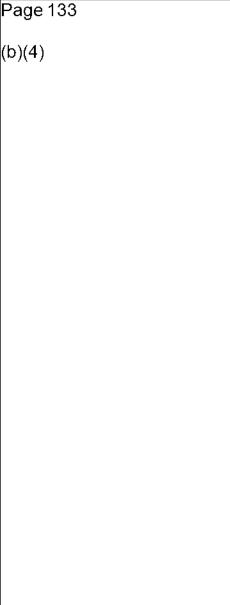


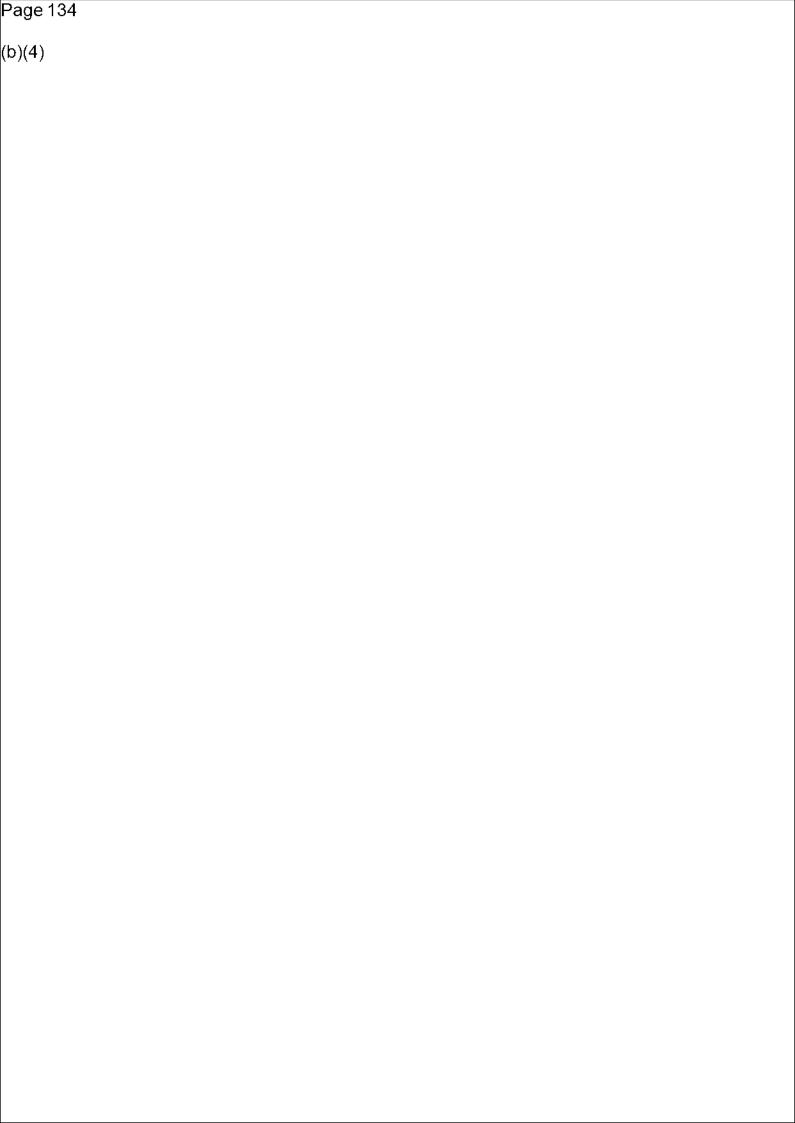


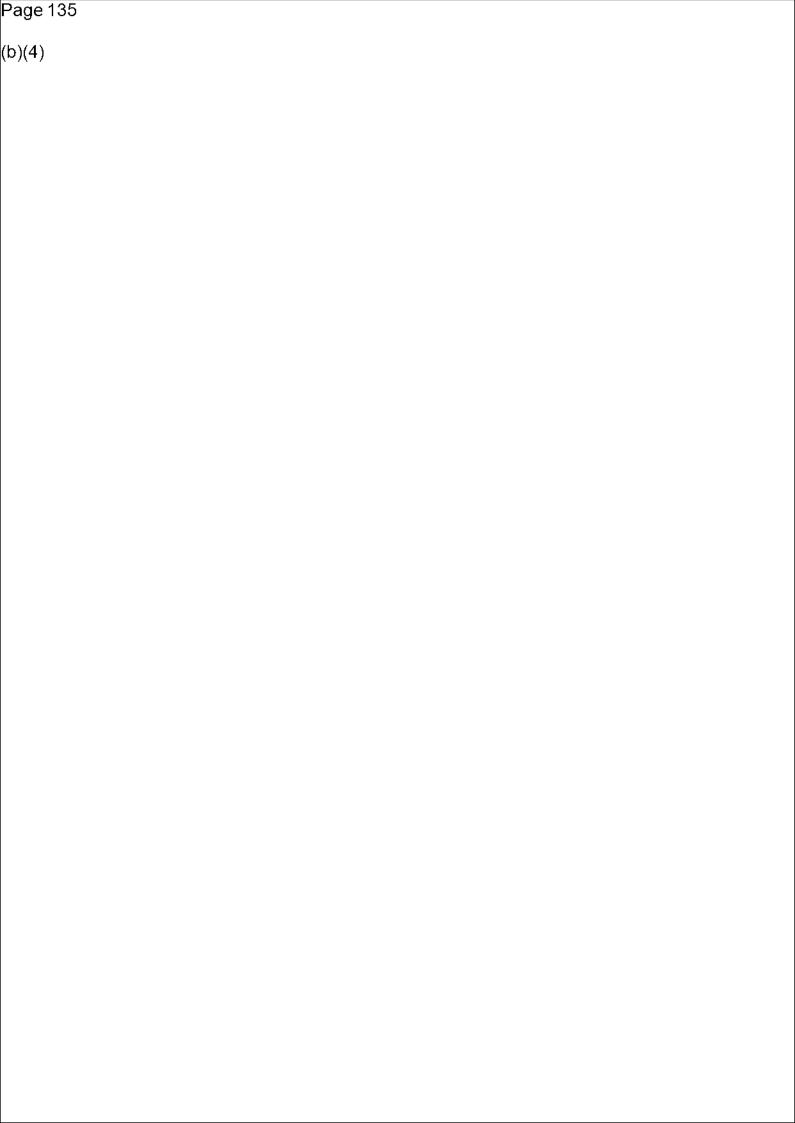


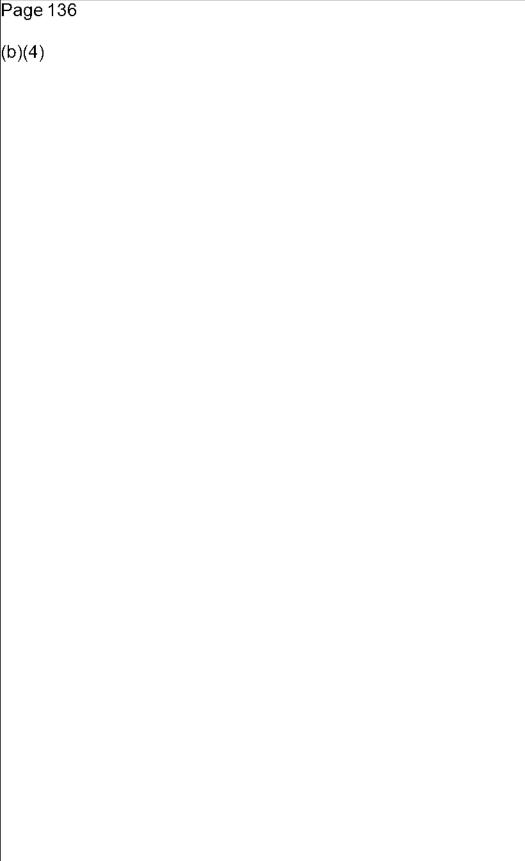


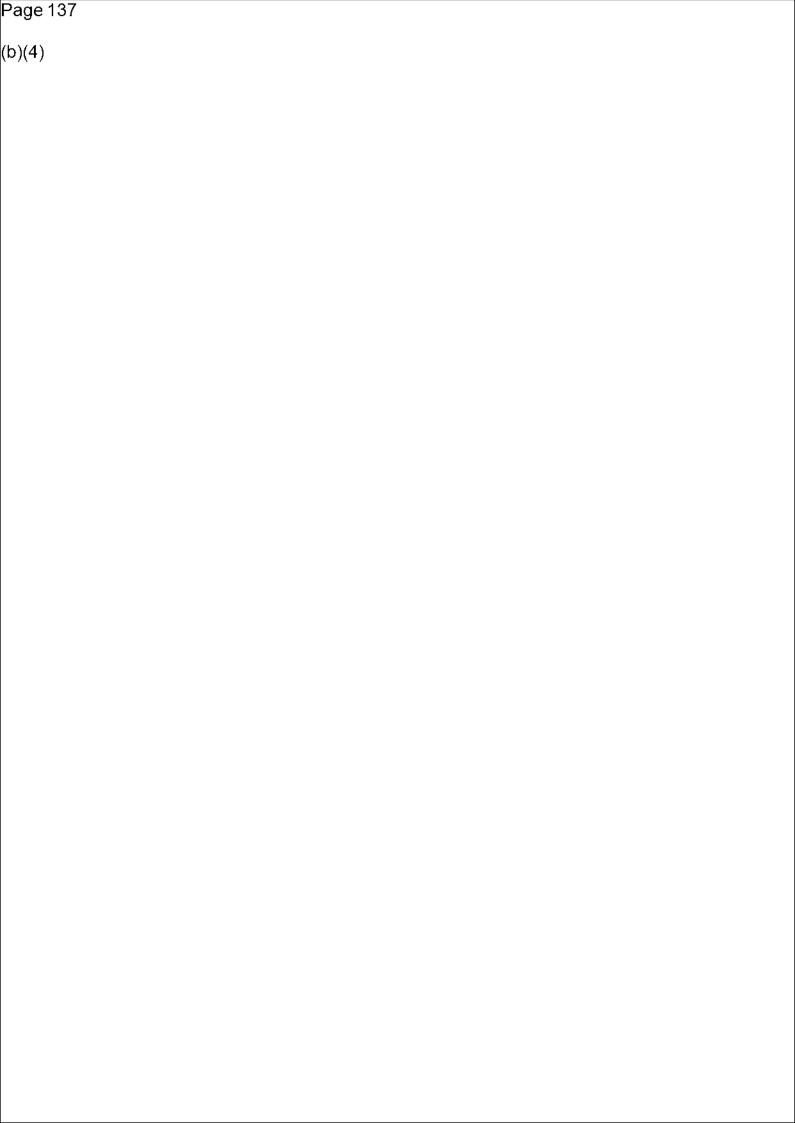


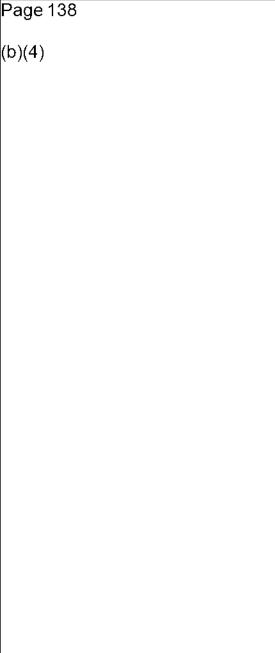


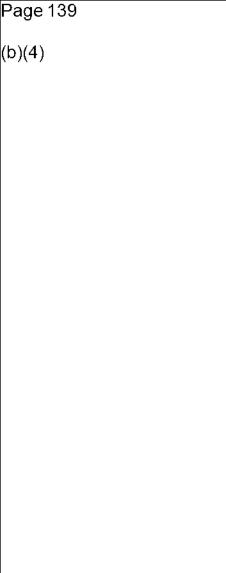


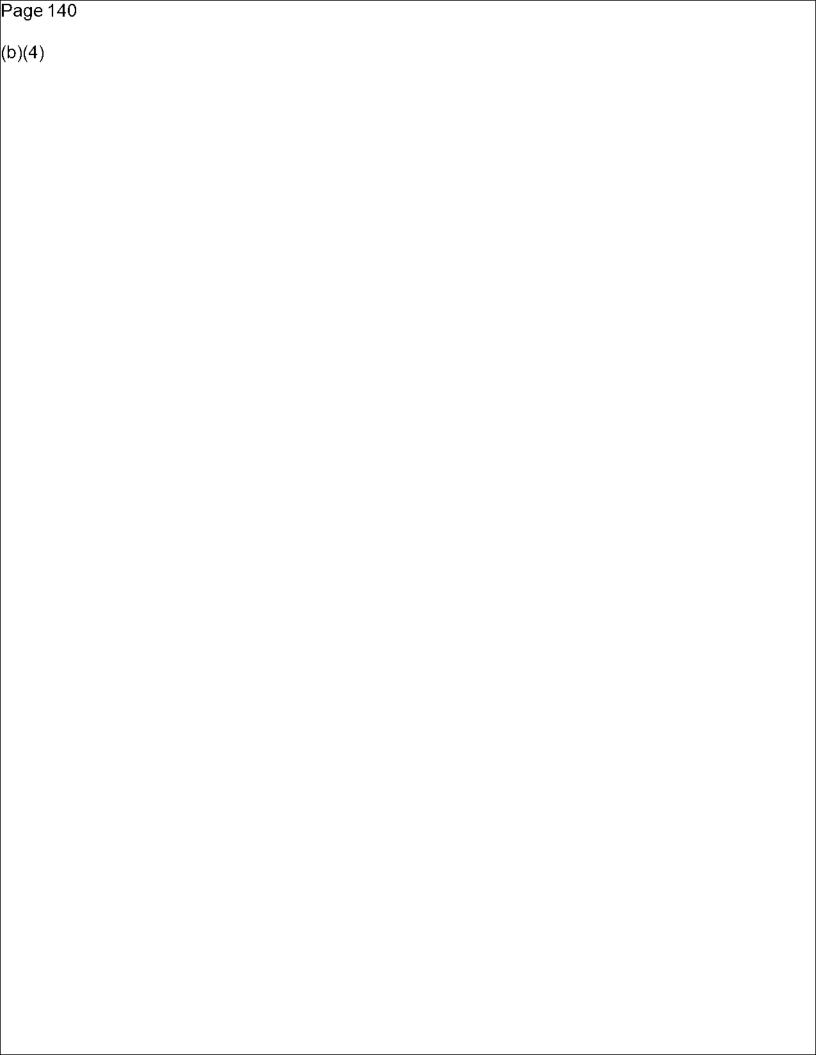


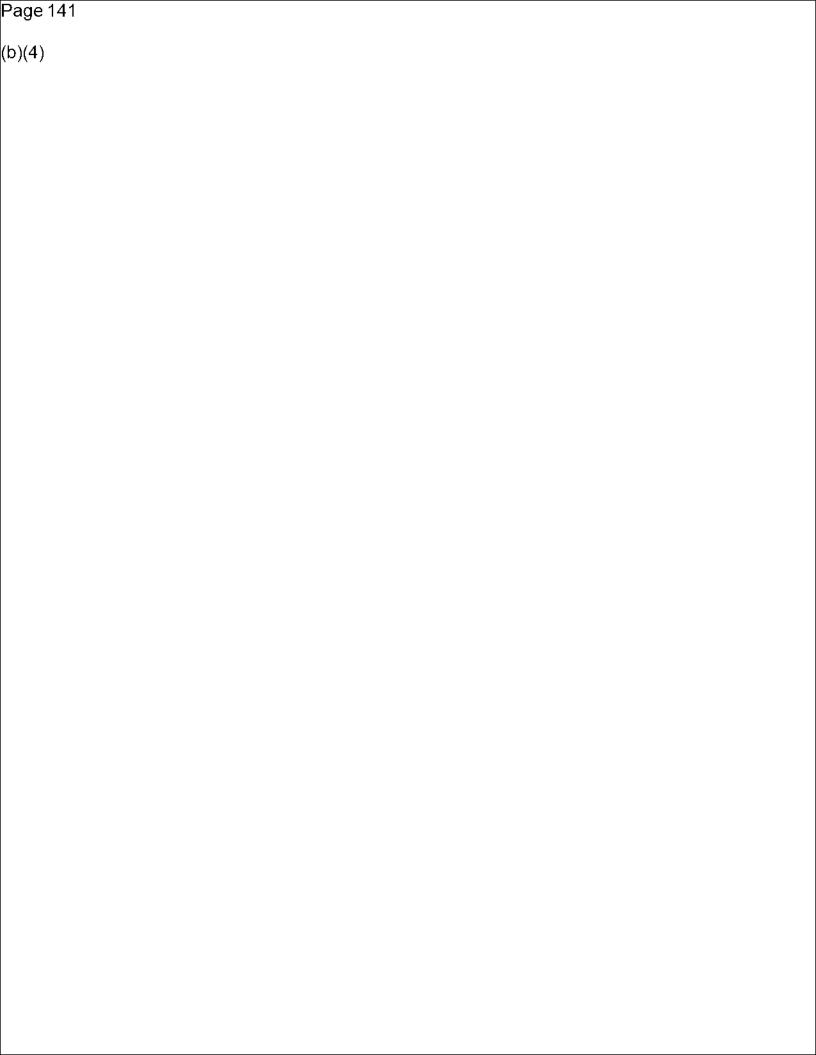


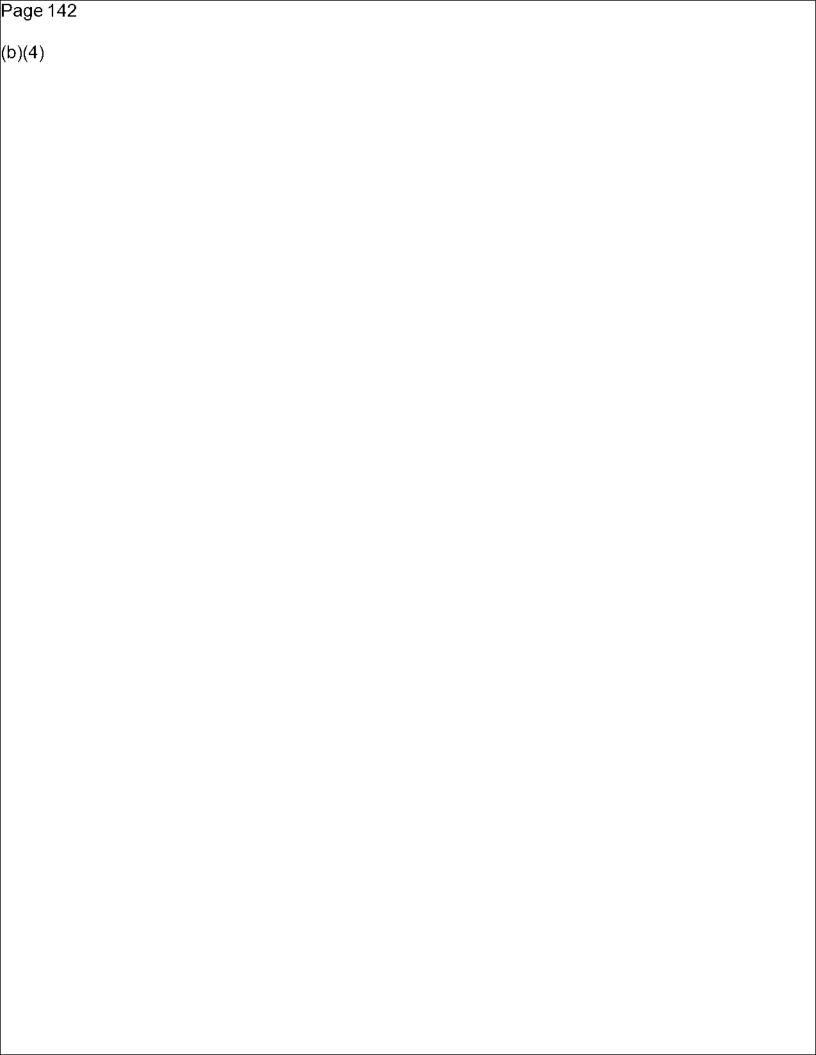


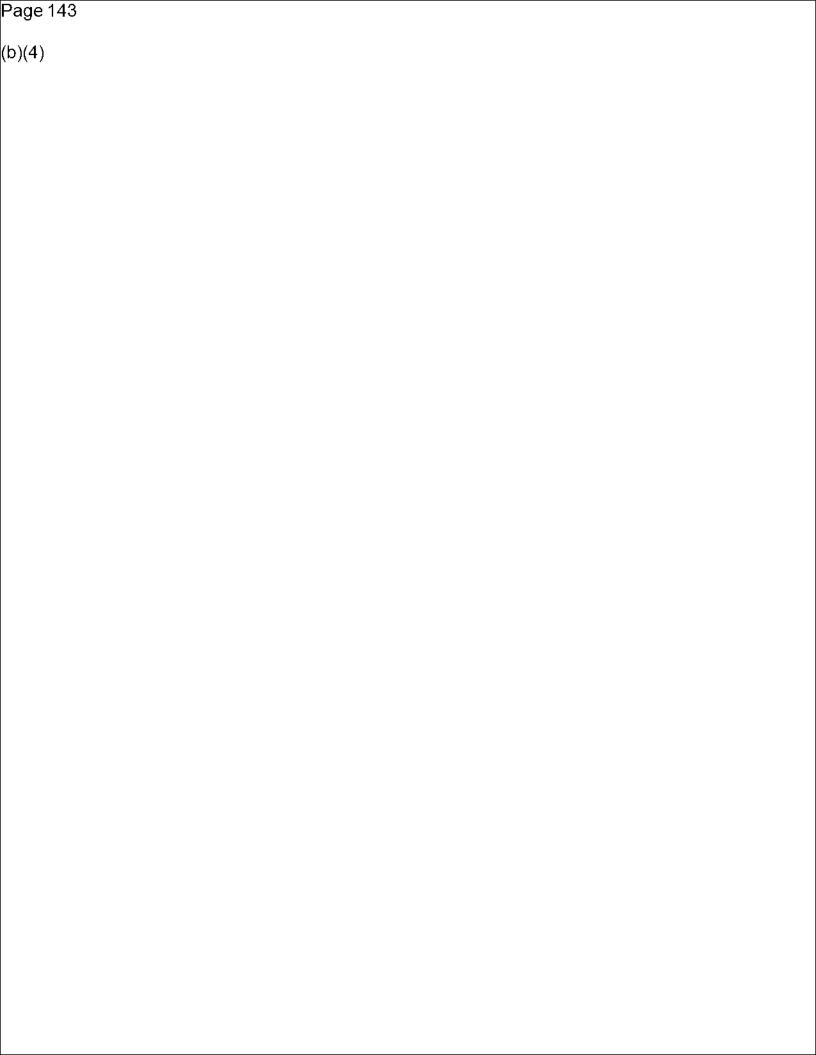


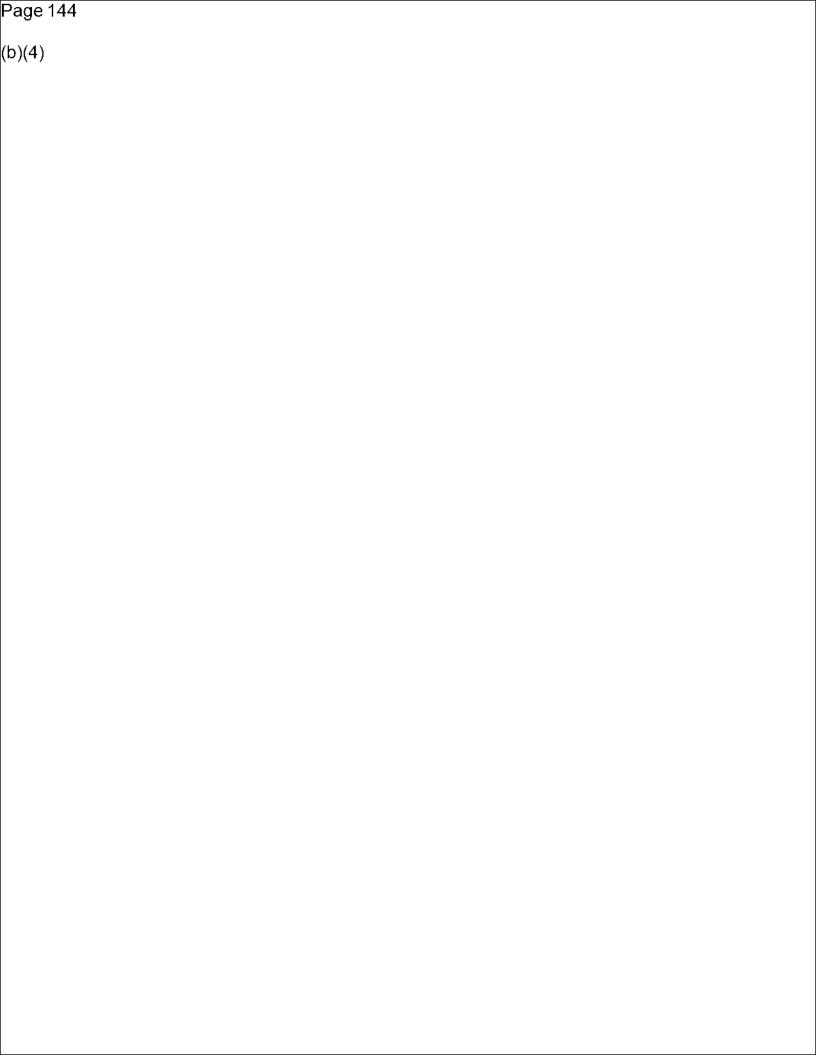


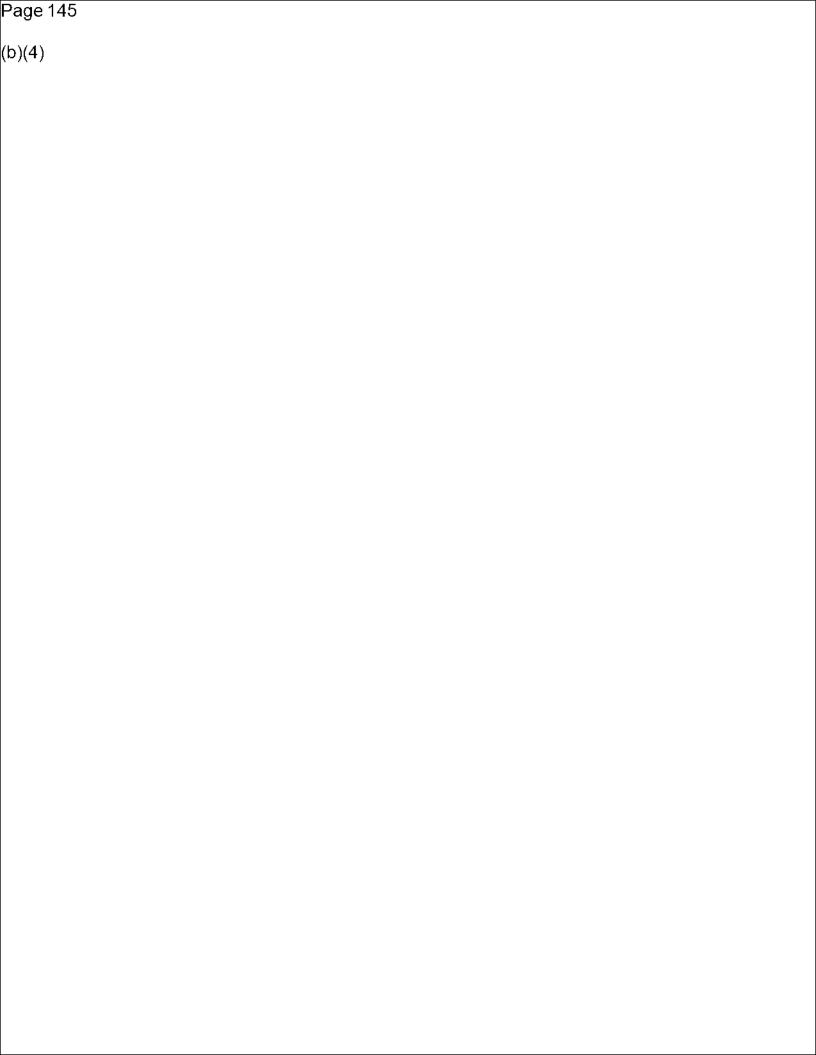


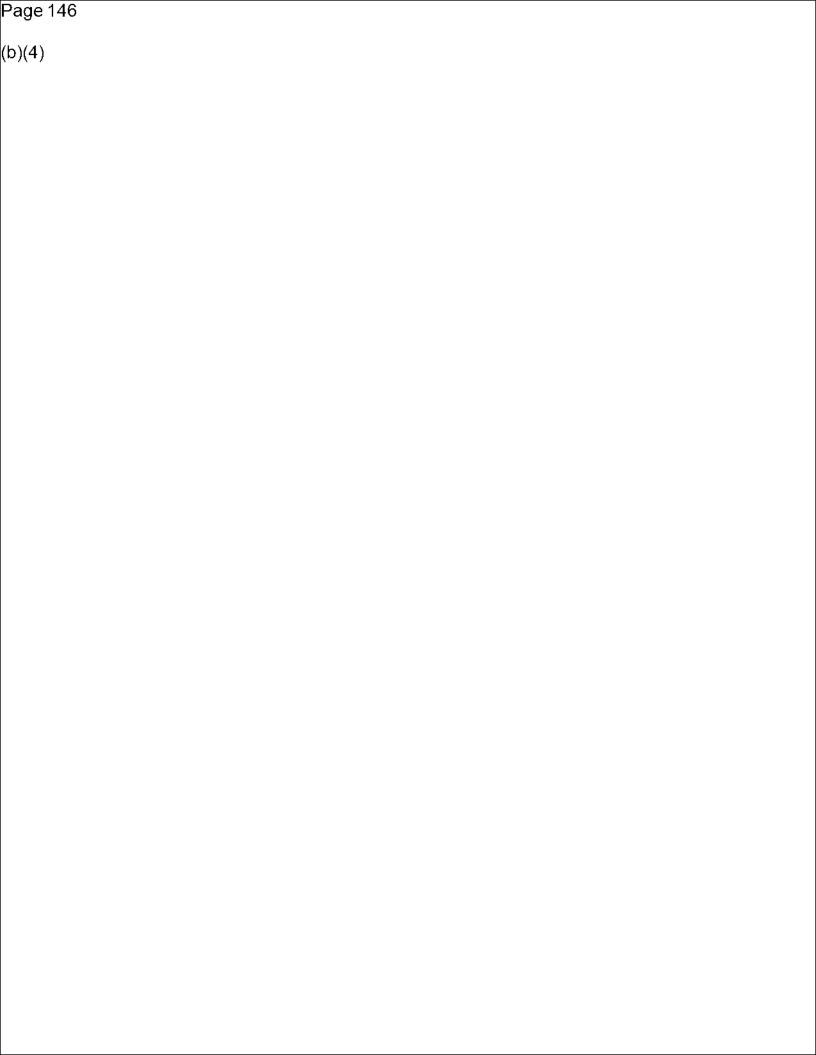


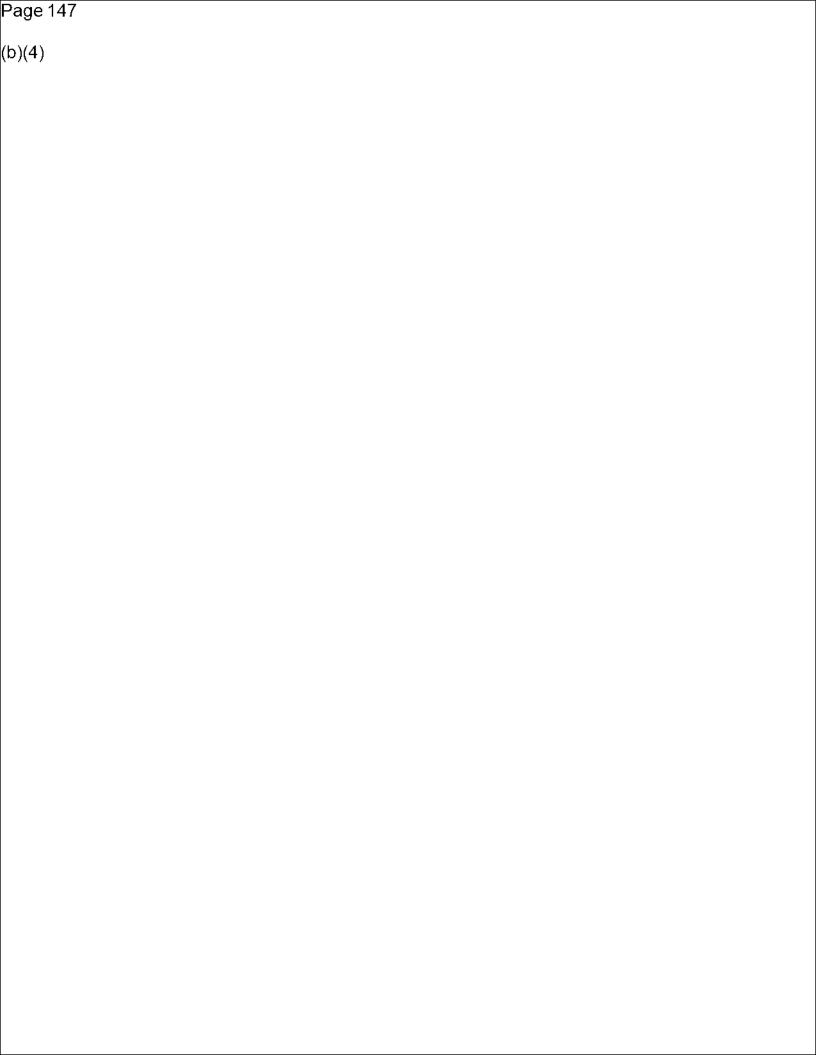


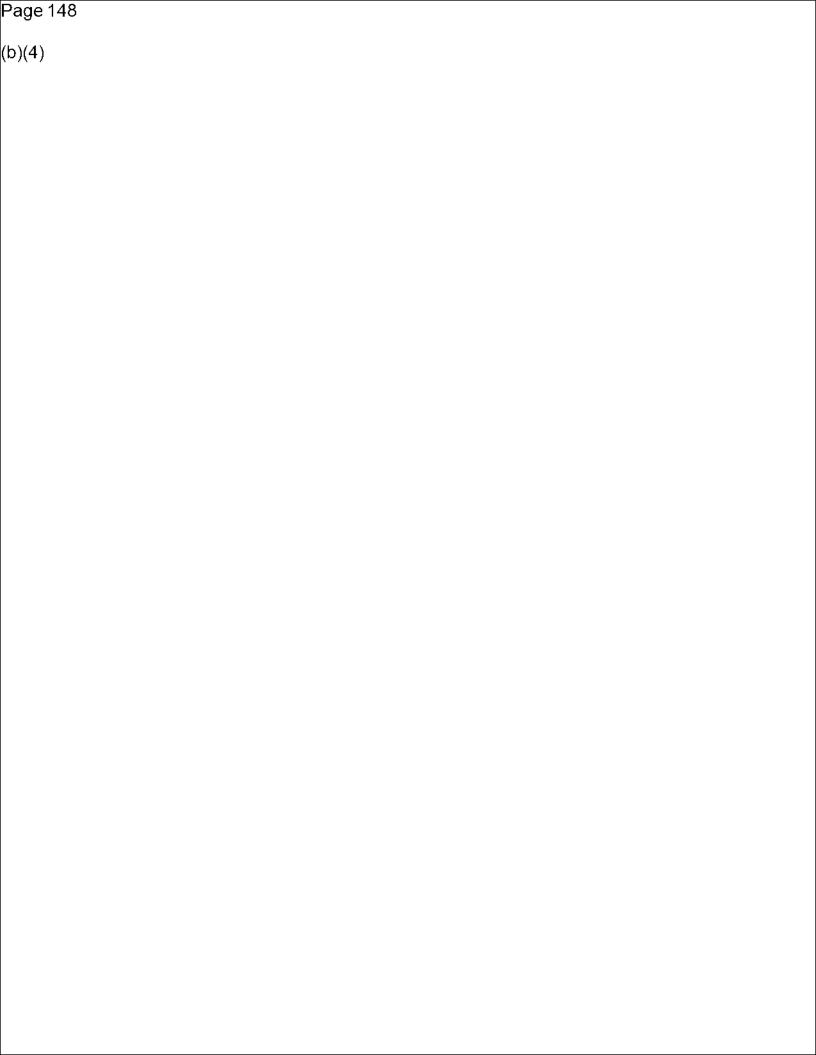


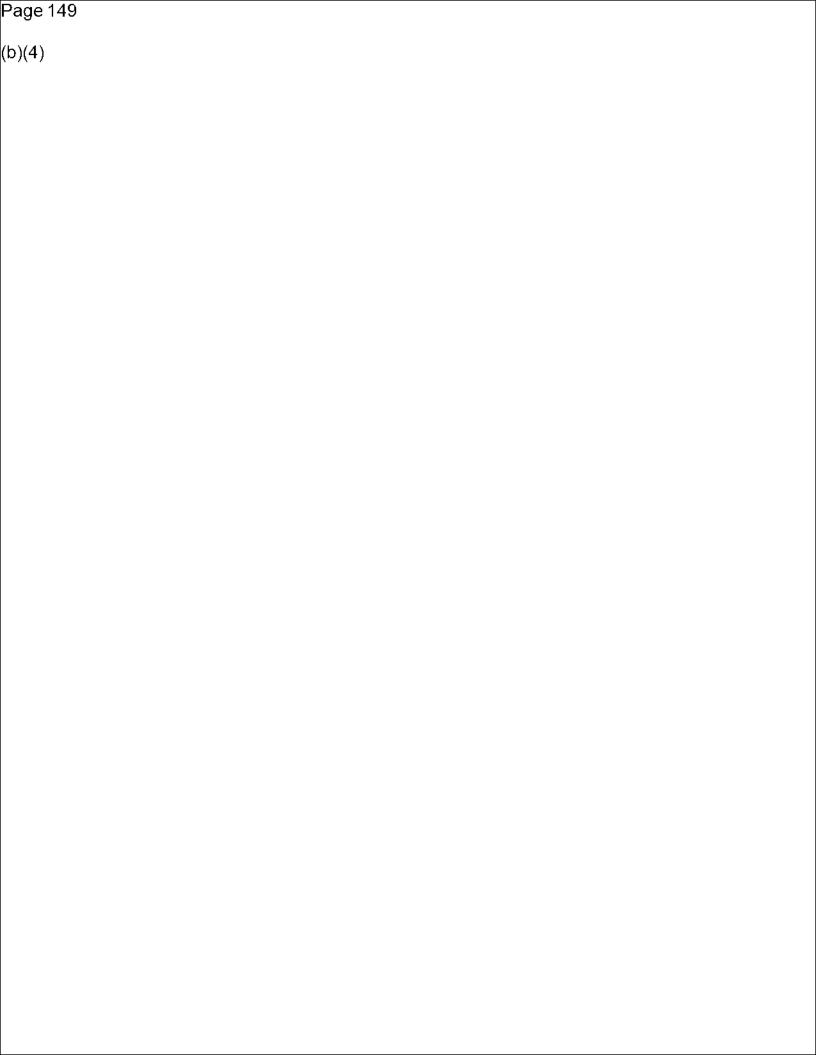


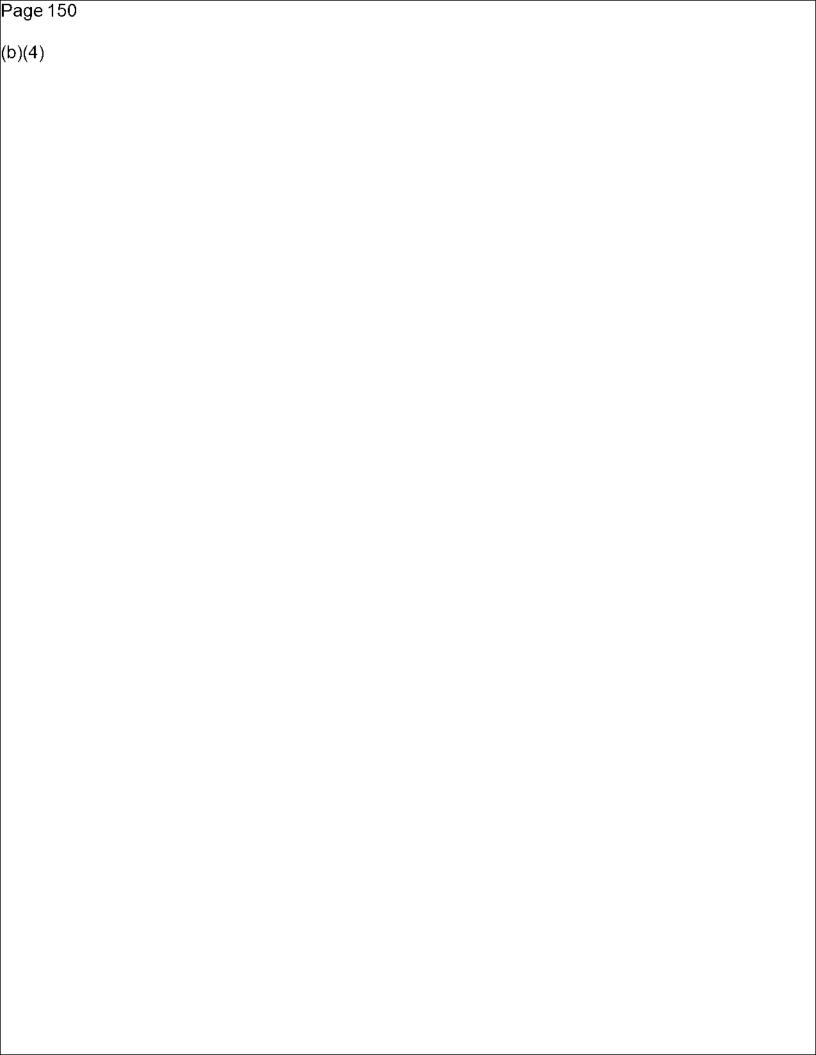


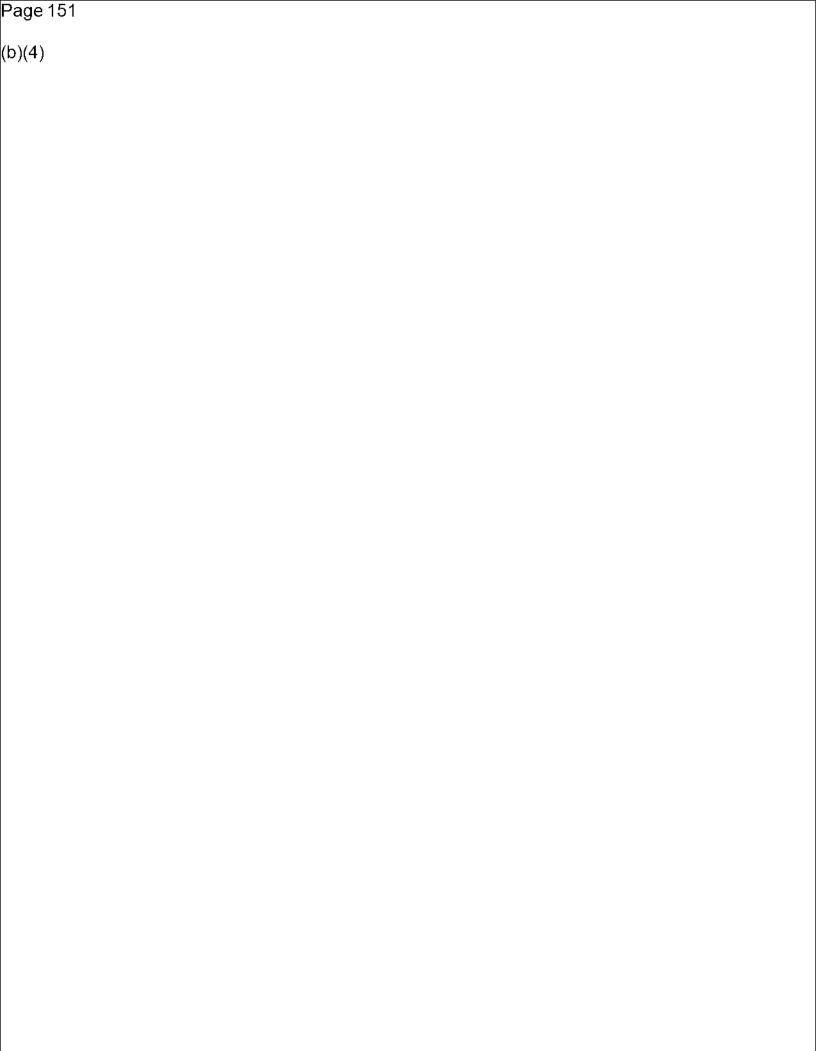


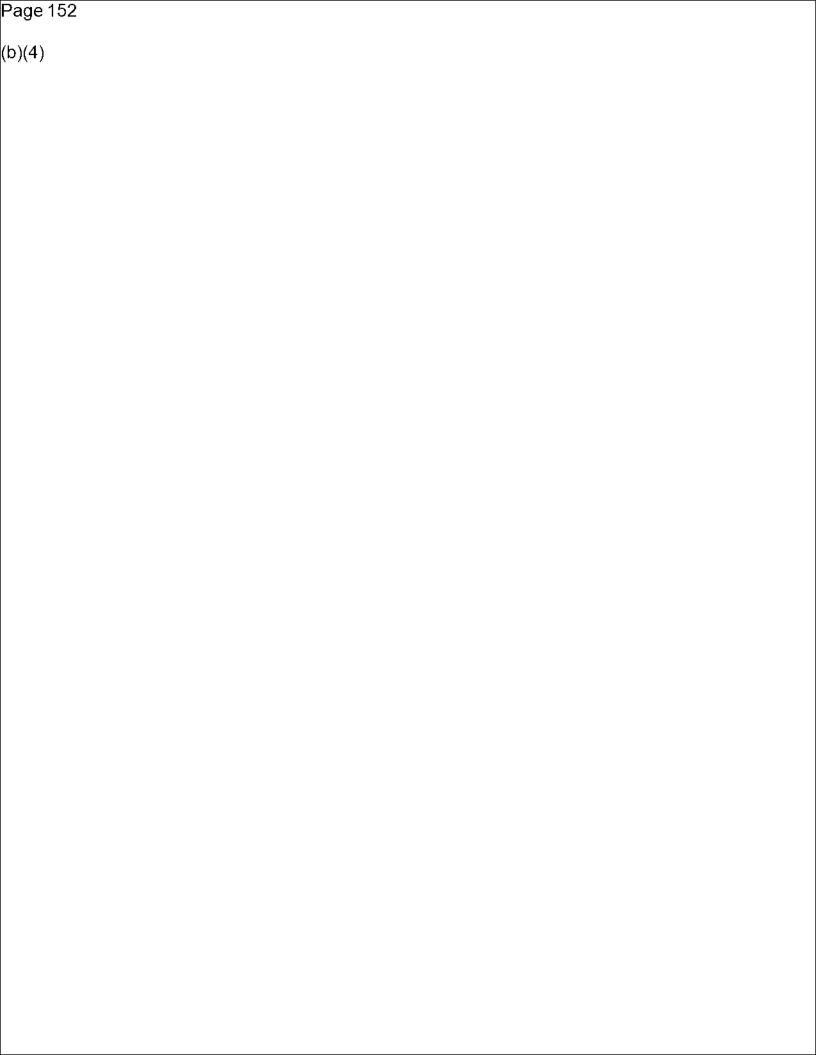


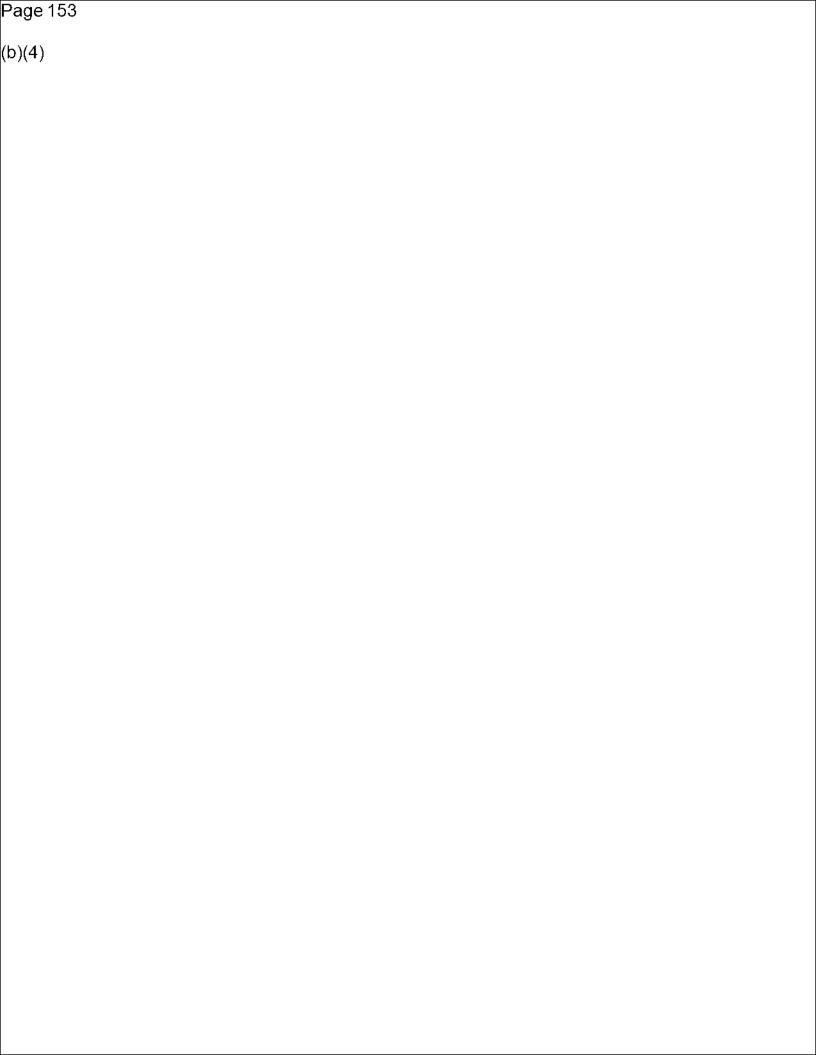


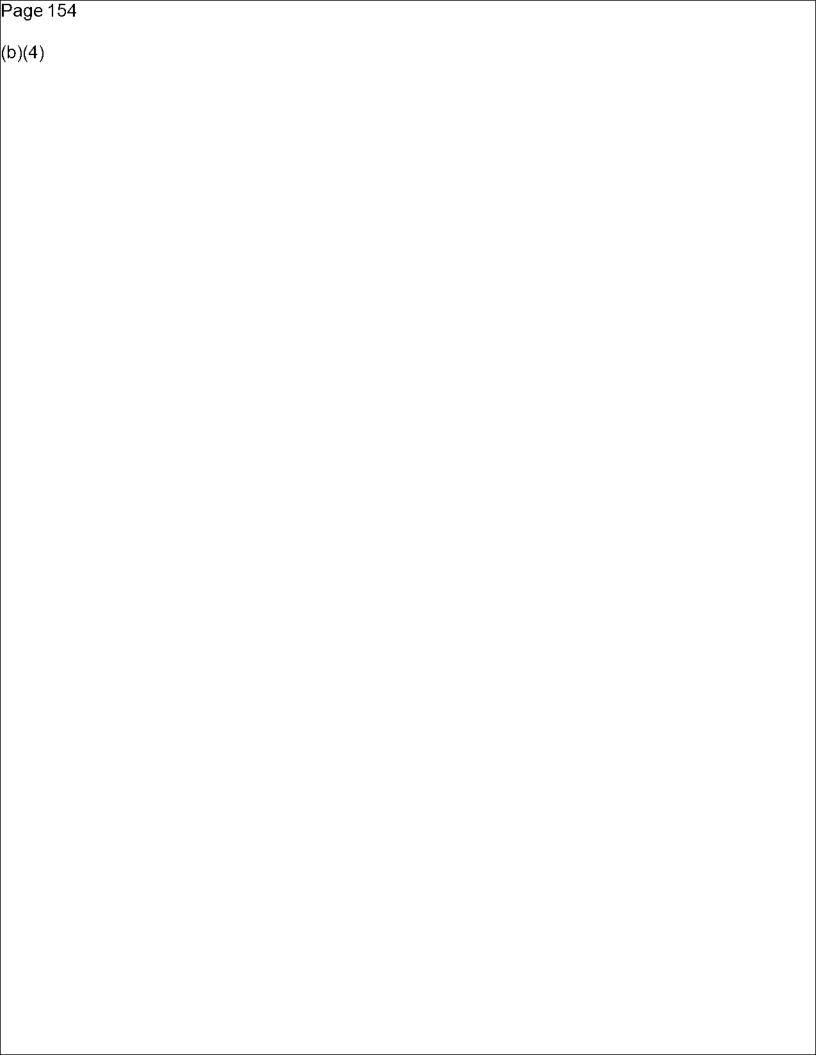


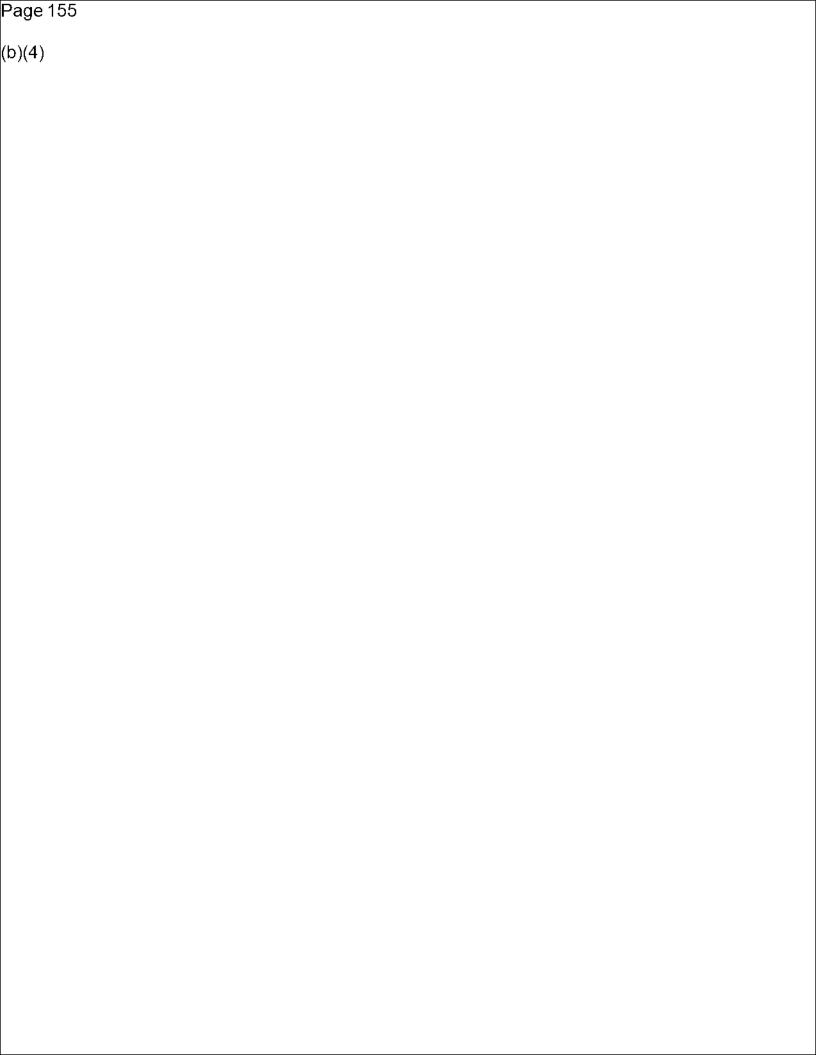


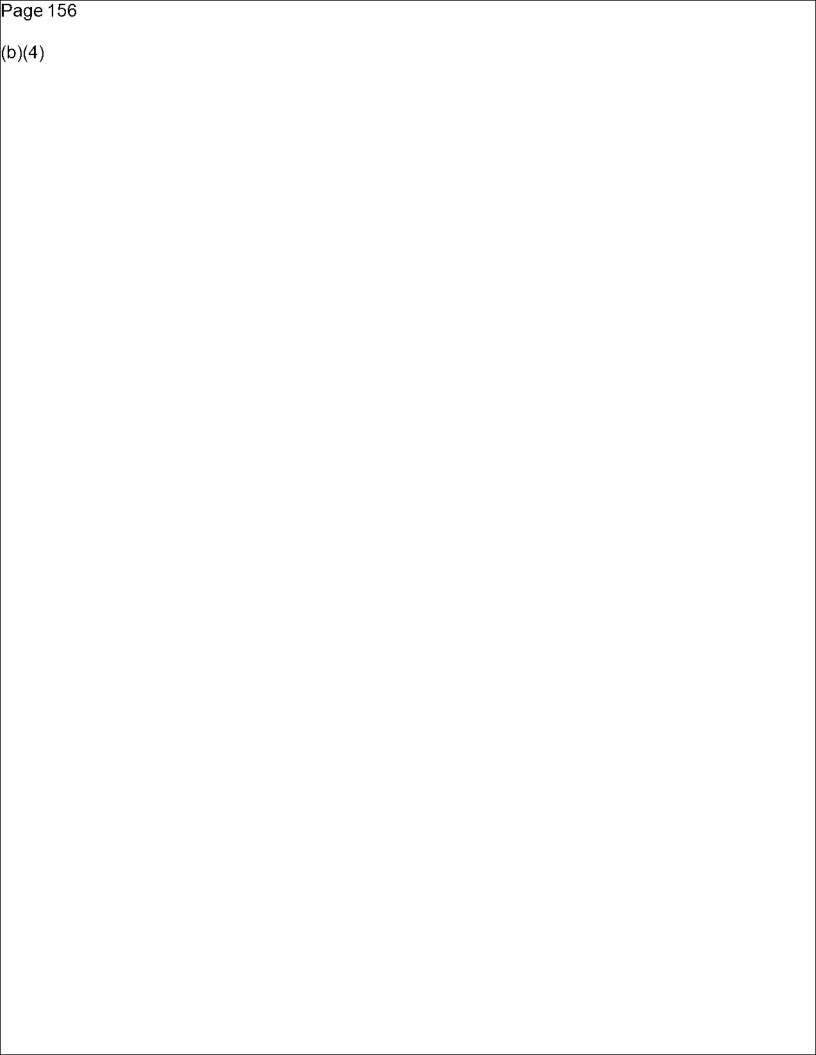


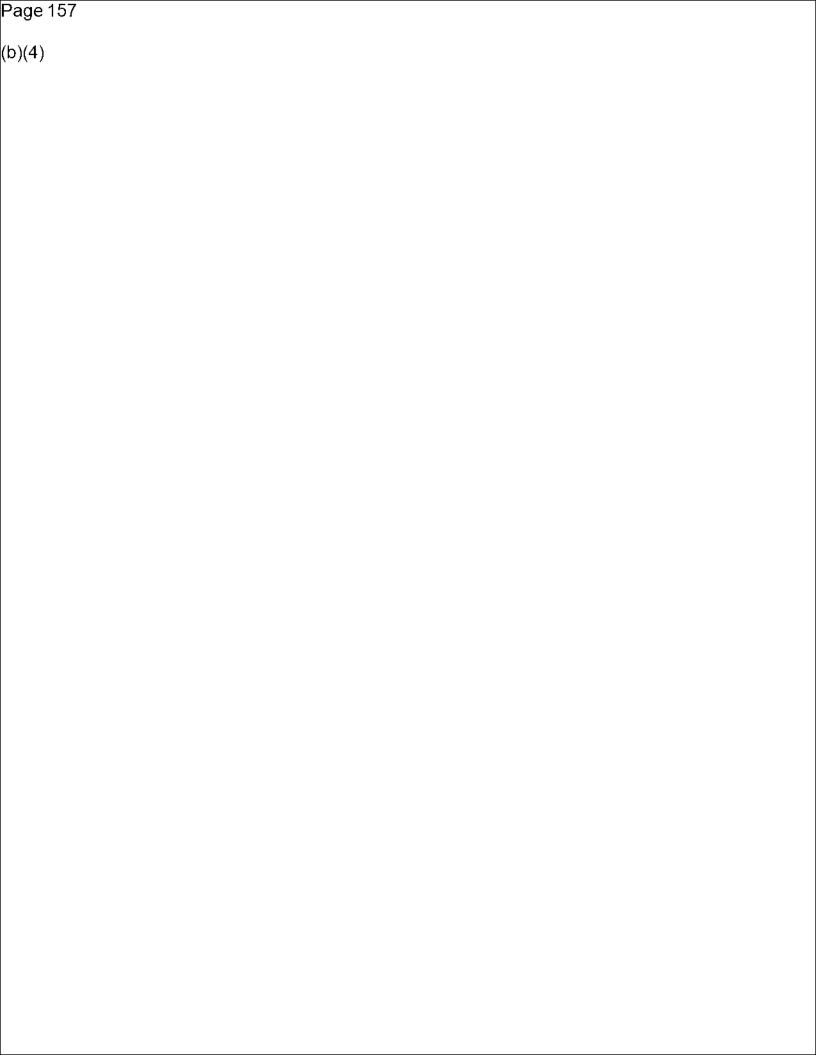












 From:
 Smith, Jessica (CDC/DDID/NCIRD/DBD)

 Sent:
 Wed, 16 Oct 2019 14:13:48 +0000

To: Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR)

**Subject:** FW: Hot Springs - Culture results

Attachments: 2019-10-04 - Arkansas Department Of Health - Summary.pdf

#### Jessica C. Smith, MPH

Epidemio ogist | Centers for Disease Control and Prevention NC RD/DBD/Respiratory Diseases Branch 404.718.5205 | lyd7@cdc.gov

From: Said, Maria <maria\_said@nps.gov> Sent: Tuesday, October 15, 2019 10:21 PM

To: Smith, Jessica (CDC/DDID/NCIRD/DBD) < lyd7@cdc.gov>; Lucas, Claressa (CDC/DDID/NCIRD/DBD)

<chl9@cdc.gov>; Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP) <izk0@cdc.gov>; Lee, Sooji

(CDC/DDID/NCIRD/DBD) (CTR) <npf3@cdc.gov>; Ritter, Troy (CDC/DDNID/NCEH/DEHSP) <tir4@cdc.gov> Cc: Laura Miller <laura\_a\_miller@nps.gov>; Kesteloot, Kurt <kurt\_kesteloot@nps.gov>; Sara Newman

<sara\_newman@nps.gov>

**Subject:** Hot Springs - Culture results

Hi everyone,

We have received results of the Legionella testing at Hot Springs (attached).

Would you all have availability tomorrow to discuss?

We are not sure what to make of the detection in the hot samples (and can see if they have temperature readings from those water samples to see what the temperature actually was). We also are not sure what to make of the TimeZero vs. Standard ISO results.

Thank you as always for your help sorting through this. It is very much appreciated.

Maria



PHIGENICS ANALYTICAL SERVICES LABORATORY Phone: 844-850-4087 www.phigenics.com CDC ELITE Certified Facility Tested: Arkansas Department Of Health

Date of Testing: 2019/10/04

Contact Email: dostrand@phigenics.com

#### Validation Criteria:

Potable Water - typically in well managed systems, the total viable heterotrophic aerobic bacterial concentration should be less than or equal to 10° CPU/mL. Per the OSHA Legionel/a Technical Manual, the viable Legionel/a concentration should be less than 10 CPU/mL unless the water system serves immunocompromised or higher risk users which require a more stringent level of Legionel/a control (less than 10°C [10].

Utility Water (such as cooling water) - typically in well managed systems, the total viable heterotrophic aerobic bacterial concentration should be less than or equal to 10° CFUrmL. For closed recirculating utility water, the total viable heterotrophic aerobic bacterial concentration should be less than or equal to 10° CFU/mL. Per the OSHA Legionella Technical Manual, the viable Legionella concentration should be less than 10 CFU/mL.

Standard ISO

The faculity Water Management Team should review all options for Validation Criteria and choose its specific criteria based on the specific systems and users.

## **Phigenics Validation Test PREMIUM Report Summary**

Method Used: Next Day Legionella PCR™, TimeZero™, and Standard ISO 11731 Spread Plate

.egionella Caution		Indicates Legionella was detected.	
THAB Caution		Indicates total heterotrophic bacteria count exceeds the validation criteria (102 for polable, 104 for utility, 102 for closed recircula	ting utility).
NO Concern	No Shading	Indicates results are better than the validation criteria.	
	ND	Indicates Legionella was not detected.	
	Р	Indicates results are pending.	TimeZero™

						rimezero			Standard 150				
PASL Number	Date Inoculated	Date Analyzed	Collector	Location Identification	Category (Potable/Utility)	Molecular Marker Negative Screen	Total Bacteria	Lpn S1	Lpn 52-14	Legionella Spo CFU/mL	(pn 51	(pn 52-14	Legionelia Spo
349637	2019/10/04	2019/10/15	D. Ostrand	AR Dept. Of Health Admin Display Fountain	Potable	Detected	103	ND	ND	ND	<1	<1	<1
349638	2019/10/04	2019/10/15	D. Ostrand	AR Dept. Of Health Nobel Fountain	Potable	Not Detected	<100	ND	ND	ND .	<1	<1	<1
349639	2019/10/04	2019/10/15	D. Ostrand	AR Dept. Of Health Lamar Hot	Potable	Not Detected	<100		ND	ND ]	<1	<1	<1
349640	2019/10/04	2019/10/15	D. Ostrand	AR Dept. Of Health Buckstaff 4th Tub On The Right Hot	Potable	Not Detected	<100	ND	ND	ND	< 1	· <1	<1
349641	2019/10/04	2019/10/15	D. Ostrand	AR Dept. Of Health Buckstaff 4th Tub On The Right Cold	Potable	Not Detected	<100	ND	ND	ND	< 1	< 1	<1
349642	2019/10/04	2019/10/15	D. Ostrand	AR Dept. Of Health Quapaw Hot	Potable	Detected	<100	ND	ND	ND	<1	1	<1
349643	2019/10/04	2019/10/15	D. Ostrand	AR Dept. Of Health Quapaw Cold	Potable	Not Detected	<100	ND	ND	ND	<1	<1	≺1
349644	2019/10/04	2019/10/15	D. Ostrand	AR Dept. Of Health QE Ind. Tub Hot	Potable	Not Detected	<100	ND	ND	ND .	<1	. <1	. <1
349645	2019/10/04	2019/10/15	D. Ostrand	AR Dept. Of Health QE Ind. Tub Cold	Potable	Detected	<100		ND	ND .	<1	<1	<1
349646	2019/10/04	2019/10/15	D. Ostrand	AR Dept. Of Health Rm 207 Hale Hot	Potable	Detected	<100	ND	ND	ND	< 1	2	<1
349647R	2019/10/04	2019/10/15	D. Ostrand	AR Dept. Of Health Rm 207 Hale Cold	Potable	Detected	102	20	ND	ND	< 1	<1	1
349648	2019/10/04	2019/10/15	D. Ostrand	AR Dept. Of Health Superior Hot	Potable	Not Detected	102	ND	ND	ND	<1	<1	⊀1
349649	2019/10/04	2019/10/15	D. Ostrand	AR Dept. Of Health Rm 2 Arlington Hot	Potable	Detected	102	ND	ND	ND .	<1	. 1	<1
349650	2019/10/04	2019/10/15	D. Ostrand	AR Dept. Of Health Rm 2 Arlington Cold	Potable	Detected	102	ND	ND	ND .	<1	. <1	. <1
349651	2019/10/04	2019/10/15	D. Ostrand	AR Dept. Of Health Levi Hospital Hot	Potable	Detected	<100	ND	ND	ND	< 1	<1	<1
349652	2019/10/04	2019/10/15	D. Ostrand	AR Dept. Of Health Cooled Water Reservoir Cold	Potable	Not Detected	10 <sup>2</sup>	ND	ND.	ND	< 1	<1	<1
349653	2019/10/04	2019/10/15	D. Ostrand	AR Dept. Of Health Libby Jug Fountain Hot	Potable	Not Detected	<100	ND	ND	ND	< 1	< 1	<1
349654	2019/10/04	2019/10/15	D. Ostrand	AR Dept. Of Health Shell Fountain Hot	Potable	Not Detected	102	ND	ND	ND	<1	<1	⊀1
349655	2019/10/04	2019/10/15	D. Ostrand	AR Dept. Of Health Display Spring Behind Maurice	Utility	Detected	10 <sup>5</sup>	ND	ND	ND	<10	<10	<10
349656	2019/10/04	2019/10/15	D Ostrand	AR Dept. Of Health Cascade	Potable	Detected	105	ND	ND	ND	<1	<1	<1

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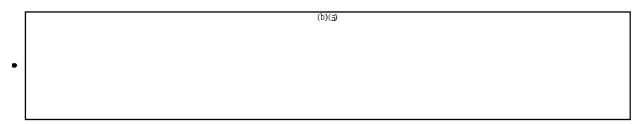
Disclaimer: Results from the PVT, or from any other analytical protocol for that matter, do not necessarily provide enough evidence to ensure that hazards from pathogenic microorganisms have been eliminated or controlled nor that risk of harm from such hazards has been reduced. Results from the PVT should only be interpreted within the context of properly designed and implemented water management programs. No guarantee regarding results is expressed or implied. THE PVT AND THE RESULTS IT PRODUCES ARE PROVIDED ON AN "AS IS" BASIS. YOU ASSUME TOTAL RESPONSIBILITY AND RISK FOR YOUR USE OF THE PVT AND PHIGENICS IS NEITHER RESPONSIBLE NOR LIABLE FOR ANY DAMAGES ARISING OUT OF YOUR USE OF THE PVT. This report shall not be reproduced except in full and with the written approval of the laboratory.

								Т	imeZer	o™	S	andard	ISO
PASL Number	Date Inoculated	Date Analyzed	Collector	Location Identification	Category (Potable/Utility)	Molecular Marker Negative Screen	Total Bacteria	Lpn S1	Lpn 52-14	Legionella Spn CFU/mL	Lpn S1	ipn 52-14	Legionella Spo
349657	2019/10/04	2019/10/15	D. Ostrand	AR Dept. Of Health Cooling Valve Tower 2nd Spicket On Left	Potable	Not Detected	10 <sup>5</sup>	ND	ND	ND	<1	< 1	<1
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### phigenics

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Houston, Marsha (CDC/DDID/NCIRD/DBD) From: Sent: Fri, 12 Jul 2019 17:44:44 +0000 To: Smith, Jessica (CDC/DDID/NCIRD/DBD); Cooley, Laura A. (CDC/DDID/NCIRD/DBD) Cc: Edens, William (Chris) (CDC/DDID/NCIRD/DBD);Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR); Craig, Allen (CDC/DDID/NCIRD/DBD) Subject: RE: Legionella related activities Thanks Jessica. This more than enough info. -Marsha From: Smith, Jessica (CDC/DDID/NCIRD/DBD) < lyd7@cdc.gov> Sent: Friday, July 12, 2019 1:40 PM To: Houston, Marsha (CDC/DDID/NCIRD/DBD) <a kq2@cdc.gov>; Cooley, Laura A. (CDC/DDID/NCIRD/DBD) < whz3@cdc.gov> Cc: Edens, William (Chris) (CDC/DDID/NCIRD/DBD) <iek4@cdc.gov>; Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) <npf3@cdc.gov> **Subject:** RE: Legionella related activities Hi Marsha. Sorry this is coming a little after the deadline provided. We haven't had any Epi-Aids or site visits to the states listed below; all assistance provided was remote. Arkansas: Currently providing assistance to the National Park Service (NPS) and AR state health department regarding a cluster of 3 Legionnaires' disease (LD) cases associated with the Quapaw spa in Hot Springs in 2018 and 2019. Since January 2019 we've provided guidance with environmental investigation, sampling, and guest notifications related to that cluster. The most recent case occurred in June 2019 and our environmental health team members are providing remote assistance with development of a sampling plan to be carried out by NPS and the state next week. Missouri: (b)(<del>3</del>) Ohio:



We have not been contacted by Indiana for technical assistance in the last 12 months.

Please let me know if there are any questions or if you need any additional info.

Thanks, Jessica

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Jessica C. Smith, MPH

Epidemiologist | Centers for Disease Control and Prevention NC RD/DBD/Respiratory Diseases Branch 404.718.5205 | lyd7@cdc.gov

From: Houston, Marsha (CDC/DDID/NCIRD/DBD) <akq2@cdc.gov>

**Sent:** Tuesday, July 9, 2019 1:59 PM

To: Cooley, Laura A. (CDC/DDID/NCIRD/DBD) < whz3@cdc.gov>

Cc: Edens, William (Chris) (CDC/DDID/NCIRD/DBD) < iek4@cdc.gov>; Smith, Jessica

(CDC/DDID/NCIRD/DBD) < lyd7@cdc.gov>; Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) < npf3@cdc.gov>

**Subject:** Legionella related activities

Importance: High

Hello Legionella team.

Can you please tell me if you have engaged in providing technical assistance, EPI-Aid, etc. in any of the following states during the last 12 (twelve) months/ If so, can you provide a 2-3 statement overview of you activity? This information (if appropriate) will be included in state specific briefing documents for the CDC Director.

Arkansas, Missouri, Ohio and Indiana

Information is needed by noon on Friday July 12, 2019.

Thanks—Marsha

From: Said, Maria

**Sent:** Fri, 9 Aug 2019 10:28:46 -0400

To: Lucas, Claressa (CDC/DDID/NCIRD/DBD);Smith, Jessica

(CDC/DDID/NCIRD/DBD);Cooley, Laura A. (CDC/DDID/NCIRD/DBD)

Cc: Everitt, Brent;Kurt Kesteloot;Miller, Laura

Subject: Re: DRAFT Press Release - Final Results at Hot Springs - Quapaw

Hi Claressa,

Can you help us explain this in plain language? I'll write down below my understanding, based on conversation and what I see in the CDC laboratory guidance (<a href="https://www.cdc.gov/legionclla/labs/procedures-manual.html">https://www.cdc.gov/legionclla/labs/procedures-manual.html</a>), but please let me know if I don't have it correct.

What I understand is that in our case, because the suspicious colonies grew on agar without cysteine but not on agar with cysteine, they are presumed to NOT be legionella. True Legionella should grow on agar with cysteine and not grow on agar without cysteine. Only those colonies that follow this pattern should go on to additional testing, using direct fluorescent antibody (DFA) or slide agglutination test (SAT), which can provide information on species type.

However, in an effort to get results to us as quickly as possible, the lab performed the DFA or SAT tests on the suspicious colonies that grew on agar without cysteine, which is not the correct order. They should have looked first at growth in the agar with cysteine and then plated these on agar without cysteine (or blood agar) to ensure that no growth occurred on the agar without cysteine (or blood agar), confirming that the colonies from the agar with cysteine were indeed Legionella.

The report describes the blood agar result as "Negative", but in the cover letter, it states that there was growth on blood agar. My understanding of this is that "Negative" means negative for legionella -- precisely because there was growth - and that growth must be due to a different type of bacteria.

Is this correct?

Thank you! Maria

did not grow on the agar with cysteine, this su

On Fri, Aug 9, 2019 at 9:43 AM Miller, Laura < laura\_a\_miller@nps.gov > wrote: Here is the final report from the lab. If you all can help us with some plain language to interpret this, that would be great.

On Fri, Aug 9, 2019 at 8:39 AM Said, Maria < maria\_said@nps.gov > wrote: Hi Laura,

Was there a written email from the lab? If so, we could see how they worded it.

If not, I think I would say that preliminary cultures were reported to us as consistent with Legionella, and based on this understanding, we closed the Quapaw out of concern for public health. However, follow-up confirmatory testing was all negative.

I don't think I would talk in terms of cycles. And I think talking about different media might get you into the weeds and could get confusing. But this is a tough one -- I may be wrong.

The four samples were only a small minority of the total samples drawn -- I don't have the exact number, but there were many (Kurt do you know?) and included both bulk water samples and swab samples. The four that were reported as preliminarily positive were all swabs.

Maria.

On Fri, Aug 9, 2019 at 9:26 AM Miller, Laura < laura\_a\_miller@nps.gov > wrote: All,

I expect Brent and I both will start receiving calls today about the Quapaw. I want to understand the science of it all better. Is it fair to say that the preliminary results had suspicious cultures in four samples (which were about half of the total samples) and because public health and safety was at issue, we closed the Quapaw until we had final results. Once the cultures completed their cycle (?) they all were negative for Legionella bacteria. I know they used a different medium to grow the final batch of cultures on. How could we best explain that if it comes up?

Thank you, Laura

On Thu, Aug 8, 2019 at 4:31 PM Everitt, Brent < brent\_everitt@nps.gov > wrote: Good Afternoon.

Please see the attached draft. Let me know your thoughts and comments. Pleas also share with additional people who should look at the release prior to issuing.

Best Regards,

\_\_\_

Brent Everitt, MBA Acting Special Assistant to the Regional Director Midwest Regional Office 402-661-1720

### Regular Assignment:

Chief of Communications
Gulf Islands National Seashore

"I can't offer you rank or fame or salary - only the chance to do some great public service" - Secretary of the Interior Franklin Lane to Stephen Mather

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Laura A. Miller Superintendent Hot Springs National Park 101 Reserve Street Hot Springs, AR 71901 501.623.2824 870.302.9250 (cell) 501.624.1037 (fax) www.nps.gov/hosp

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Maria Said, MD, MHS | CDR, U.S. Public Health Service
Epidemiology Branch Chief | Office of Public Health | National Park Service
Address: 1849 C. Street, NW, Room 2543, Mailstop 2560 | Washington, DC 20240
Office Tel: 202-513-7151 | Email: maria\_said@nps.gov
Website (public): https://www.nps.gov/orgs/1878/index.htm
Website (internal): https://sites.google.com/a/nps.gov/in2-protect-and-promote-health/home/disease-surveillance-response

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Laura A. Miller Superintendent Hot Springs National Park 101 Reserve Street Hot Springs, AR 71901 501.623.2824 870.302.9250 (cell) 501.624.1037 (fax) www.nps.gov/hosp

Maria Said, MD, MHS | CDR, U.S. Public Health Service

Epidemiology Branch Chief | Office of Public Health | National Park Service Address: 1849 C. Street, NW, Room 2543, Mailstop 2560 | Washington, DC 20240 Office Tel: 202-513-7151 | Email: maria\_said@nps.gov
Website (public): https://www.nps.gov/orgs/1878/index.htm

Website (internal): https://sitcs.google.com/a/nps.gov/in2-protect-and-promote-

health/home/disease-surveillance-response

From: Said, Maria

**Sent:** Thu, 11 Jul 2019 15:04:31 -0400

To: Haselow, Dirk (CDC arkansas.gov); Cooley, Laura A.

(CDC/DDID/NCIRD/DBD);Smith, Jessica (CDC/DDID/NCIRD/DBD);Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR)

Cc:Kesteloot, Kurt;Sara NewmanSubject:Supplemental Questionnaire

Attachments: Legionella\_HOSP\_Quapaw\_Supplemental questionnaire.V3.docx

Hi Dirk, Jessica, Laura, and Sooji,

Attached is the supplemental questionnaire we used for the last patients. Jessica, as you suggested, it does have a question about showers. Thank you very much for your help with this.

Best, Maria

# Legionellosis Supplemental Questionnaire — Hot Springs National Park, AR Patient Name: \_\_\_\_\_ Sex: M/F Zip Code: \_\_\_\_\_\_\_\_ Onset Date: \_\_\_\_/\_\_\_/\_\_\_\_ County, State: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_ In the 10 days prior to the onset of your illness: 1. Did you visit the Quapaw Baths & Spa at 413 Central Avenue, Hot Springs National Park, AR 71901? [] Yes [] No 2. If you were at the spa, did you (please check all that apply): [] Take a shower in the spa [] Sit in a thermal pool in the spa-[] Use a private bath in the spa [] Sit in the steam cave in the spa [] Spend time next to or walk past a fountain in the basement massage area 3. While you were in Hot Springs, AR, did you walk next to or spend time around any decorative fountains? [] Yes [] No If so, where? 4. While you were in Hot Springs, AR, and Hot Springs National Park did you take part in any other activity that may have exposed you to aerosolized water? [ ] Yes [] No 5. If you did take part in another activity that may have exposed you to aerosolized water, please describe the activities:

6. Do you have any additional concerns regarding Legionella exposure that you would like to share?	
	_

From: Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR)

**Sent:** Fri, 4 Jan 2019 10:41:52 -0500

To: Cooley, Laura A. (CDC/DDID/NCIRD/DBD)

Subject: RE: [EXTERNAL] CONFIDENTIAL: travel-associated legionellosis

(b)(6)

Hope you are having a great time in NYC! Things are going well here (relatively quiet). See you soon!!

Sooji

From: Cooley, Laura A. (CDC/DDID/NCIRD/DBD) <whz3@cdc.gov>

Sent: Friday, January 4, 2019 10:40 AM

To: Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) <npf3@cdc.gov>

Subject: RE: [EXTERNAL] CONFIDENTIAL: travel-associated legionellosis

(b)(6)

Thank you, Sooji! Hope things are going well. Looking forward to seeing you guys Monday!

From: Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) <npf3@cdc.gov>

Sent: Friday, January 4, 2019 9:38 AM

To: Cooley, Laura A. (CDC/DDID/NCIRD/DBD) <whz3@cdc.gov>

Subject: RE: [EXTERNAL] CONFIDENTIAL: travel-associated legionellosis

(b)(6)

Thanks Laura!! We will schedule a call with Maria! Sooji

From: Cooley, Laura A. (CDC/DDID/NCIRD/DBD) <whz3@cdc.gov>

Sent: Thursday, January 3, 2019 5:54 PM

To: Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) < npf3@cdc.gov>

Subject: Fwd: [EXTERNAL] CONFIDENTIAL: travel-associated legionellosis

(b)(6)

Hey Sooji! Happy new year! Looks like Maria wants to schedule a call Friday. I hope things haven't been too busy this week!!! ©Could you or Jess or Chris maybe help Maria out?

Many thanks, as always!

From: Said, Maria < maria\_said@nps.gov > Date: January 3, 2019 at 5:42:29 PM EST

To: Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) <npf3@cdc.gov>

 $\textbf{Cc:} \ \underline{CATHERINE.WATERS@arkansas.gov}{>},$ 

<u>Debbie.Pledger@arkansas.gov</u> < <u>Debbie.Pledger@arkansas.gov</u>>, NCID DBMD Travel-Legionella (CDC) < travellegionella@cdc.gov>, David Kostamo < david kostamo@nps.gov>,

Cooley, Laura A. (CDC/DDID/NCIRD/DBD) < whz3@cdc.gov>, Lauren Miller

<lauren miller@partner.nps.gov>

Subject: Re: [EXTERNAL] CONFIDENTIAL: travel-associated legionellosis CDC45011

Hi all,

I phoned the spa, and the voice message states that they are closed for annual maintenance January 1 through January 10.

I also posted an Epi-X, to see if there have been any additional cases.

I'm working on contacting the Superintendent of the park to make her aware.

This investigation/response will be complicated by the government shutdown.

Laura, would it be possible to talk tomorrow about appropriate next steps? An environmental assessment was done back in July. I'd be interested to hear your thoughts on environmental testing.

Thank you!

Maria

On Thu, Jan 3, 2019 at 5:00 PM Said, Maria < <u>maria\_said@nps.gov</u>> wrote: Hi Sooji,

Thanks for letting us know about this. From Google maps, it looks like the address the first case base (a) gave is a building outside the park. However, if they named the Quapaw Baths & Spa specifically, I assume that is where they visited. It is concerning that this is the second case linked to the spa in the last 6 months.

The National Park Service is closed with the government shutdown, although some parks are continuing to operate. I will look into the situation at Hot Springs National Park to see if they are running, and if so, at what capacity.

Cat, have you had any clusters linked with any hotels in non-park land? It looks like these two patients stayed at different hotels.

Thanks.

Maria

On Thu, Jan 3, 2019 at 4:01 PM Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) < npf3@cdc.gov> wrote:

Dear Colleague(s):

Please see the attached notification regarding a case of Legionnaires' disease that may be travel-associated.

This case, (b)(6), used the l	hot tub at Quapaw Ba	aths & Spa in Hot Springs National Park,
with the address "413 Central A	Ave." There was anoth	ner case in the past year, (b)(6)
		rings National Park as well. However,
for (b)(6) the address is w	ritten as	I was wondering if updated
information may be available fo	or <sup>(b)(6)</sup> related	to the patient's hot tub use?

Thanks.

—

Sooji Lee, MS, MSPH

Epidemiologist (IHRC, Inc.)

Legionella Team (NCRD/DBD/RDB)

Centers for Discase Controlland Prevention

1600 Clifton Road, MS H24-6 | Atlanta, GA 30329

Phone: 404-718-3192 | ...: slee7@cdc.gov

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health/home/disease-surveillance-response

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Website (internal): https://sites.google.com/a/nps.gov/in2-protect-and-promote-

health/home/disease-surveillance-response

From: Said, Maria

**Sent:** Thu, 8 Aug 2019 18:18:43 -0400

To: Smith, Jessica (CDC/DDID/NCIRD/DBD);Lucas, Claressa (CDC/DDID/NCIRD/DBD)

Cc: Brent Everitt;Alexandra Picavet;Laura Miller;Kesteloot, Kurt

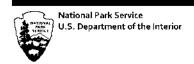
Subject:Press release - language around testing and labsAttachments:080819\_HotSpringsPublicHealth\_Release\_v1.MS.docx

Hi Jessica and Claressa,

Here is a draft press release. Does this look okay to you, especially with regard to the language around laboratory testing?

Thank you!

Maria



Hot Springs National Park 101 Reserve Street Hot Springs, AR 71901

Phone: (501) 620-6715 www.nps.gov/HotSprings

# Hot Springs News Release

Release Date: August 8, 2019

Contacts: Brent Everitt, Brent\_Everitt@nps.gov, 850-393-7952

#### Finalized Testing Returns Negative Final Legionella Results at Park

Water-related services at Quapaw Bath and Spa will resume

Hot Springs, Ark. – Hot Springs National Park has received finalized <u>negative</u> results of *Legionella* bacteria testing at the Quapaw Baths and Spa which have returned negative results.

results an an

close water services at the spa while the park and public

health official awaited final confirmatory results from the testing.

ublic health officials and the park have cleared the Quapaw to resume all services.

Based on the preliminary results last week, the Quapaw immediately began remediation and disinfection efforts while waiting for finalize test results.

All tests including swap samples inside and outside of the spa, as well as, bulk water testing have returned negative results. Throughout this process, the Quapaw Baths & Spa has fully cooperated with the National Park Service Public Health Officials.

<u>All laboratory testing was performed at an ELITE member lab, which is part of the CDC's Environmental Legionella Isolation Techniques Evaluation Program.</u>

The park <u>continues to</u> worked closely with the National Park Service Office of Public Health (OPH), the Arkansas Health Department, and the Centers for Disease Control and Prevention (CDC) to protect the health of those who visit the park.

**About Hot Springs National Park:** Established as a federal reservation in 1832 to protect the unique geothermal spring water and associated lands for public health, wellness, and enjoyment. In 1921, the area became a national park with the same mission; preservation of the 47 hot springs that come out of the Hot Springs Mountain and the historic resources built for visitor enjoyment of the hot springs.

#### EXPERIENCE YOUR AMERICA™

The National Park Service cares for special places saved by the American people so that all may experience our heritage.

Commented [SMA1]: It wasn't really an abundance of caution it was appropriate action given what was thought to be a public health threat

**Commented [SMA2]:** Would take this out, as we don't really have a plan yet.

Commented [SMA3]: I think this repeats what was stated before – and people may not understand what swab tests or bulk tests are.

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~NPS~

The National Park Service cares for special places saved by the American people so that all may experience our heritage.

From: Lucas, Claressa (CDC/DDID/NCIRD/DBD)
Sent: Mon, 12 Aug 2019 14:38:43 +0000

To: Kesteloot, Kurt; Said, Maria

Cc:Smith, Jessica (CDC/DDID/NCIRD/DBD); Cooley, Laura A. (CDC/DDID/NCIRD/DBD)Subject:RE: [EXTERNAL] RE: DRAFT Press Release - Final Results at Hot Springs - Quapaw

Hi Kurt,
(p)( <del>3</del> )

Hope that makes sense. Happy to chat, if you like.

Best wishes, Claressa

From: Kesteloot, Kurt <kurt\_kesteloot@nps.gov>

Sent: Friday, August 9, 2019 9:08 PM

**To:** Said, Maria <maria\_said@nps.gov>; Lucas, Claressa (CDC/DDID/NCIRD/DBD) <chl9@cdc.gov> **Cc:** Smith, Jessica (CDC/DDID/NCIRD/DBD) <lyd7@cdc.gov>; Cooley, Laura A. (CDC/DDID/NCIRD/DBD)

<whz3@cdc.gov>

Subject: Re: [EXTERNAL] RE: DRAFT Press Release - Final Results at Hot Springs - Quapaw

Hi Maria and Claressa,

Thanks so much.

I'm confused, didn't the lab run with cysteine simultaneously or first and everything was negative? We had all of the with cysteine results last week and were told negative. That is the only way they processed the samples back in January of 2019 (with cysteine) and everything was negative then too.

Sorry, just want to make sure I understand correctly.

Thank You and Very Respectfully,

Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS

Supervisory Public Health Consultant, Midwest Region National Park Service, Office of Public Health (OPH),

601 Riverfront Drive Omaha, NE 68102

Office Phone: 1-402-661-1718 Office Fax: 1-402-661-1719 Cell Phone: 1-202-641-0055 Email: Kurt Kestcloot@nps.gov

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On Fri, Aug 9, 2019 at 3:42 PM Said, Maria <maria said@nps.gov> wrote:

Thanks Claressa - much appreciated. Maria

On Fri, Aug 9, 2019 at 1:57 PM Lucas, Claressa (CDC/DDID/NCIRD/DBD) <a href="chl9@cdc.gov">chl9@cdc.gov</a> wrote:

Hi Maria.

Yes, I think you understand the gist of the problem. I made a couple of suggestions below in strikethrough and red that I hope clarify a bit. Please let me know if there's anything else I can do for you.

Best wishes,

Claressa

From: Said, Maria < maria said@nps.gov> Sent: Friday, August 9, 2019 10:29 AM

To: Lucas, Claressa (CDC/DDID/NCIRD/DBD) < <a href="mailto:chl9@cdc.gov">chl9@cdc.gov</a>; Smith, Jessica

(CDC/DDID/NCIRD/DBD) < lyd7@cdc.gov>; Cooley, Laura A. (CDC/DDID/NCIRD/DBD)

<whz3@cdc.gov>

**Cc:** Everitt, Brent < brent everitt@nps.gov>; Kurt Kesteloot < kurt kesteloot@nps.gov>; Miller,

Laura < laura a miller@nps.gov >

Subject: Re: DRAFT Press Release - Final Results at Hot Springs - Quapaw

Hi Claressa,

Can you help us explain this in plain language? I'll write down below my understanding, based on conversation and what I see in the CDC laboratory guidance

(<a href="https://www.cdc.gov/legionclla/labs/procedures-manual.html">https://www.cdc.gov/legionclla/labs/procedures-manual.html</a>), but please let me know if I don't have it correct.

What I understand is that in our case, because the suspicious colonies grew on agar without cysteine but not on agar with cysteine, they are presumed to NOT be legionella. True Most members of the genus Legionella should grow on agar with cysteine and not grow on agar without cysteine. Only those colonies that follow this pattern should go on to additional testing, using direct fluorescent antibody (DFA) or slide agglutination test (SAT), which can provide information on species type scrogroup.

However, in an effort to get results to us as quickly as possible, the lab performed the DFA or SAT tests on the suspicious colonies that grew on agar without-cysteine before checking to see if the isolates would also grow in the absence of cysteine, which is not the correct order. They should have looked first at growth in the agar with cysteine and then plated these on agar without cysteine (or blood agar) to ensure that no growth occurred on the agar without cysteine (or blood agar), confirming that the colonies from the agar with cysteine were indeed Legionella.

The report describes the blood agar result as "Negative", but in the cover letter, it states that there was growth on blood agar. My understanding of this is that "Negative" means negative for legionella -- precisely <u>because</u> there was growth - and that growth must be due to a different type of bacteria.

Is this correct?

Thank you! Maria

did not grow on the agar with cysteine, this su

On Fri, Aug 9, 2019 at 9:43 AM Miller, Laura < laura a miller@nps.gov > wrote:

Here is the final report from the lab. If you all can help us with some plain language to interpret this, that would be great.

On Fri, Aug 9, 2019 at 8:39 AM Said, Maria < maria\_said@nps.gov > wrote: Hi Laura,

Was there a written email from the lab? If so, we could see how they worded it.

If not, I think I would say that preliminary cultures were reported to us as consistent with Legionella, and based on this understanding, we closed the Quapaw out of concern for public health. However, follow-up confirmatory testing was all negative.

I don't think I would talk in terms of cycles. And I think talking about different media might get you into the weeds and could get confusing. But this is a tough one -- I may be wrong.

The four samples were only a small minority of the total samples drawn -- I don't have the exact number, but there were many (Kurt do you know?) and included both bulk water samples and swab samples. The four that were reported as preliminarily positive were all swabs.

Maria

On Fri, Aug 9, 2019 at 9:26 AM Miller, Laura < laura\_a\_millcr@nps.gov > wrote: All,

I expect Brent and I both will start receiving calls today about the Quapaw. I want to understand the science of it all better. Is it fair to say that the preliminary results had suspicious cultures in four samples (which were about half of the total samples) and because public health and safety was at issue, we closed the Quapaw until we had final results. Once the cultures completed their cycle (?) they all were negative for Legionella bacteria. I know they used a different medium to grow the final batch of cultures on. How could we best explain that if it comes up?

Thank you, Laura

On Thu, Aug 8, 2019 at 4:31 PM Everitt, Brent < brent\_everitt@nps.gov > wrote: Good Afternoon,

Please see the attached draft. Let me know your thoughts and comments. Pleas also share with additional people who should look at the release prior to issuing.

Best Regards,

--

Brent Everitt, MBA
Acting Special Assistant to the Regional Director
Midwest Regional Office
402-661-1720

#### Regular Assignment:

Chief of Communications
Gulf Islands National Seashore

"I can't offer you rank or fame or salary - only the chance to do some great public service" - Secretary of the Interior Franklin Lane to Stephen Mather

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Laura A. Miller Superintendent Hot Springs National Park 101 Reserve Street Hot Springs, AR 71901 501.623.2824 870.302.9250 (cell) 501.624.1037 (fax) www.nps.gov/hosp

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Maria Said, MD, MHS | CDR, U.S. Public Health Service Epidemiology Branch Chief | Office of Public Health | National Park Service

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Office Tel: 202-513-7151 | Email: maria\_said@nps.gov

Website (public): https://www.nps.gov/orgs/1878/index.htm

Website (internal): https://sites.google.com/a/nps.gov/in2-protect-and-promote-

health/home/disease-surveillance-response

--

Laura A. Miller Superintendent Hot Springs National Park 101 Reserve Street Hot Springs, AR 71901 501.623.2824 870.302.9250 (cell) 501.624.1037 (fax) www.nps.gov/hosp

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<u>health/home/disease-surveillance-response</u>

From: Ritter, Troy (CDC/DDNID/NCEH/DEHSP)

**Sent:** 16 Jul 2019 01:49:15 +0000

To: Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP);Cooley, Laura A.

(CDC/DDID/NCIRD/DBD); Smith, Jessica (CDC/DDID/NCIRD/DBD)

Cc: Hubbard, Brian C. (CDC/DDNID/NCEH/DEHSP)

**Subject:** Fwd: HOSP-Legionella-Quapaw Update July 15, 2019

Hey LD Team! I didn't see any of you copied on Kurt's email below.

Troy

# Get Outlook for iOS

From: Patricia Trap <patricia\_trap@nps.gov>

Sent: Monday, July 15, 2019 9:01 PM

To: Kesteloot, Kurt

Cc: Said, Maria; Lauren Miller; Mark Scott; jhenry@atokainc.com; croberts@atokainc.com;

Justin Cully; Terry.Paul@arkansas.gov; Richard.McMullen@arkansas.gov; Sara Newman;

Gwendolyn Ruppert; Ritter, Troy (CDC/DDNID/NCEH/DEHSP); Alexandra Picavet; Robert

Kammel; Clara Wooden

Subject: Re: HOSP-Legionella-Quapaw Update July 15, 2019

Thanks Kurt for this report and diligence in testing. Let me know if you need anything.

Patty

Regional Director (Acting)

Midwest Region, National Park Service

office: 402-661-1520

cell: 402-637-2414

On Jul 15, 2019, at 7:37 PM, Kesteloot, Kurt < <a href="mailto:kurt\_kesteloot@nps.gov">kurt < kurt\_kesteloot@nps.gov</a>> wrote:

Good Evening Everyone,

Thanks for the assistance today! We took several bulk and swab samples in the Quapaw today. We hope to meet tomorrow around 0900 at the Hot Springs Nation Park Headquarters building.

Here is a brief of some of the testing conducted and proposed.

## Testing conducted:

## Quapaw:

#### Main Level:

Single Bath Use Area (Room F and G) likely Person 1 and Person 2 rooms for latest scenario.

Room F: Bulk mixed sample of tempered and thermal water (~104.8F) and swab in the jets.

Room G: Bulk thermal sample (~137F), bulk tempered sample (~94F), swab jets and micro bubbles emitter, and remove jet and swab.

Left Pool: Bulk and Swab

Center Pool: Bulk and Swab

Right Pool:Bulk and Swab

Upper Pool:

Shower Heads: Bulk and Swab

#### **Basement:**

Shower next to the only individual basement tub that has a skylight (~107F) bulk sample and swab.

Hatch area outside of the cave: excesses waste thermal water in large reservoir (~133F). A bulk sample was taken and two swabs were taken.

Basement Water easeade wall fountain. Occasionally disinfected and was

disinfected last week. It uses city water and had a temp of ~74F.

Basement Cave: I was not present but think it was just swabbed.

Please note: the temperatures and samples collected are from memory and

the lab recorded the actual numbers. There were approximately 12 swabs

may have been gathered along with about 9 bulk samples.

# **Proposed Testing:**

Fountains: Approximately 5 or 6 bulk and swabs

Cooling Tower: Bulk of mixed water (from both towers) and swab of both

towers

Tempered (cold) thermal: Cold water at the tank and likely in the Quapaw

(Bulk and Swab)

Thermal Water: HQ tank and upper tank (Bulk and Swab)

Quapaw: Swab duct-work in the main bathing area and possibly individual

baths area.

Estimated samples remaining are: 11 bulk and 14 swabs.

Thank You and Very Respectfully,

Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS

Supervisory Public Health Consultant, Midwest Region

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On Fri, Jul 12, 2019 at 3:22 PM Said, Maria <<u>maria\_said@nps.gov</u>> wrote: Situation

- We know of 3 cases of confirmed or suspect Legionnaires' disease associated with Quapaw Bath and Spa, with dates of onset in July 2018, November 2019, and June 2019. The most recent case was unfortunately a death.
- A collaborative team including HOSP, the NPS OPH, and Arkansas Department of Health, all in consultation with the CDC, is working on the public health response to this cluster/outbreak.
- Environmental sampling is planned for early next week.

Updates for July 12, 2019

- Kurt put together a draft sampling plan, a presentation showing photos of the park, and a detailed map of the park for discussion with Troy of CDC and Terry of Arkansas.
- We had call with Quapaw and communicated that (1) we had a
  third case that was a fatality; (2) we plan additional environmental
  testing; (2) guest notifications are needed going back one month;
  (3) clearly visible notifications of all current spa visitors are
  needed until environmental testing results are back (otherwise the

spa would have to close until we have results); (4) we need documentation of the numbers of guests identified with visits over the last month and how many have been reached with notifications; (5) the spa should not change operations in any way or alert employees, so that when we do testing, we get as representative a sample as possible; (6) Dirk Haselow (state epi for Arkansas) and I will need to see and approve the guest notifications and signage for current visitors.

- The Quapaw expressed understanding and agreement with the plan. Later they phoned and asked if people who only came in for massage should be notified as well, and I confirmed with them that all guests, including for massage, should be notified.
- Dirk Haselow (state epi for Arkansas) and I have reviewed drafts
  of the Guest Notification Letter to previous guests as well as the
  notifications that will go to current visitors. We have also provided
  a link to the CDC fact sheet for distribution. The owners expressed
  that they will can start informing current guests through their signin process as early as today.

Please let me know of any edits or additions to this summary.

Maria

From: Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP) Sent: 15 Jul 2019 14:57:55 +0000 To: Ritter, Troy (CDC/DDNID/NCEH/DEHSP); Hunter, Candis (CDC/DDNID/NCEH/DEHSP) Cooley, Laura A. (CDC/DDID/NCIRD/DBD);Lucas, Claressa Cc: (CDC/DDID/NCIRD/DBD); Hubbard, Brian C. (CDC/DDNID/NCEH/DEHSP) Fwd: Epi-Aid/"Epi-Experience" Subject: Troy, Getting ready to get on the plane for the next 5 hours. Please closely coordinate with Laura on potential ch staffing. Please also link Brian and Adrienne in (Brian copied here as an early head up) as this starts to materialize. Travel will have to go through division/center this late in the year. The pelican case is turn key and ready to go. Two colorimeters, reagent, ph and temp meters. Please work with Brian when it comes to ch staffing. I will check in later today. PS: I would not worry about VIIA call if this conflicts with afternoon call.

Thanks,

Jasen

Sent from iPhone

From: Cooley, Laura A. (CDC/DDID/NCIRD/DBD) < whz3@cdc.gov>

Sent: Monday, July 15, 2019 10:03 AM

To: Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP); Lucas, Claressa (CDC/DDID/NCIRD/DBD)

Cc: Ritter, Troy (CDC/DDNID/NCEH/DEHSP); Smith, Jessica (CDC/DDID/NCIRD/DBD)

Subject: Fw: Epi-Aid/"Epi-Experience"

Hi Jasen and Claressa! Jasen, hope your travels are going smoothly. Just wanted to keep you posted re: the latest in Arkansas. Claressa, wanted to loop you in. There is a cluster of cases associated with some hot springs in Arkansas. We are working with the National Park Service and folks at the HD to help them respond. Maria (from the NPS)

provides a synopsis of the current status below.

(b)(<u>5</u>)

(b)(<u>5</u>)

See below. Will keep y'all posted.

Let us know if you have any questions.

Thanks!

Laura

From: Cooley, Laura A. (CDC/DDID/NCIRD/DBD)

Sent: Monday, July 15, 2019 9:56 AM

To: Said, Maria

Cc: Sara Newman; Smith, Jossica (CDC/DDID/NCIRD/DBD); Ritter, Troy

(CDC/DDNID/NCEH/DEHSP)

**Subject:** Re: Epi-Aid/"Epi-Experience"

Hi, Maria. Glad to hear things have been going smoothly so far!

I don't know much about the "Epi-Experience"—from what I've heard through the grapevine, it sounds more like an opportunity for HQ EISOs to get experience in state HDs (i.e., more like a month-long TDY as opposed to something specifically response-related). That being said, we do have 2 in-person mechanisms for helping HDs respond to outbreaks: Epi-Aids and onsite technical assistance, the latter being an option for getting onsite technical assistance from the Legionella team without involvement of an EISO. Happy to talk through typical reasons for choosing one vs the other.

We are always happy to help when a state HD asks for onsite assistance. The underlying objective is generally to help the state HD ensure that risk for transmission has been minimized, but our specific role can vary from situation to situation—usually some combination of:

- Epi: helping with case finding, questionnaire development, conducting interviews
- EH: guiding the environmental assessment, developing a sampling plan, guiding the actual sampling
- Lab: processing environmental samples
- General: building capacity to investigate clusters, helping develop recommendations based on epi, EH, and lab findings

Since many of these activities are in motion, we would just need to talk about the specific request for us to be there in person vs continuing to provide assistance remotely.

Sounds like there is a call scheduled for this afternoon to discuss the sampling plan?

Perhaps we should set up a separate call to talk through this? It would be important to have folks from Arkansas on that call since they would be the ones requesting onsite assistance.

Just let me know what works for you guys!

Laura

Laura A. Cooley, MD, MPHTM

CDR, U.S. Public Health Service

Respiratory Diseases Branch

National Center for Immunization and Respiratory Diseases

Centers for Disease Control and Prevention

1600 Clifton Road, Mailstop H24-6

Atlanta, GA 30329

phone 404.639.2096

From: Said, Maria <maria said@nps.gov>

**Sent:** Monday, July 15, 2019 9:27:40 AM

To: Cooley, Laura A. (CDC/DDID/NCIRD/DBD)

Cc: Sara Newman

**Subject:** Epi-Aid/"Epi-Experience"

Hi Laura,

The Health Officer from Arkansas is interested in more involvement by CDC through an Epi-Aid, or perhaps through an "Epi-Experience." (I have not heard of this mechanism, but apparently this is a less formal way for CDC to be involved -- do you know about it?).

I have been really grateful for all your involvement (you, Jessica, and Troy) and think that we have a good collaboration that has involved CDC, the state, the park, and the NPS Office of Public Health. We had a very good call with the owners of the spa on Friday, and they agreed to all our requests for guest notification for previous visitors within the last month, notification of current visitors to the spa, and environmental testing. Kurt Kesteloot, an engineer with us in the NPS Office of Public Health, is arriving at Hot Springs today to help with environmental testing -- and has been in close contact with Terry from Arkansas and Troy from CDC as he develops the sampling plan. The independent laboratory in Arkansas is aware of the testing and prepared to accept samples.

I am interested to hear your thoughts on an Epi-Aid/Epi Experience. We have not raised the topic with the park -- and ultimately, as they have jurisdiction, they would need to approve this plan -- but I wanted to raise the possibility with you.

I feel confident that we have a good plan in place but I also want to make sure that we
are doing all we can to protect visitors to and employees in the park.

Thanks.

Maria

--

Maria Said, MD, MHS | CDR, U.S. Public Health Service

Epidemiology Branch Chief | Office of Public Health | National Park Service

Address: 1849 C. Street, NW, Room 2543, Mailstop 2560 Washington, DC 20240

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Website (internal): <a href="https://sites.google.com/a/nps.gov/in2-protect-and-promote-">https://sites.google.com/a/nps.gov/in2-protect-and-promote-</a>

health/home/disease-surveillance-response

Kesteloot, Kurt From:

Sent: 25 Nov 2019 08:11:36 -0600

Lucas, Claressa (CDC/DDID/NCIRD/DBD); Kunz, Jasen M. To: (CDC/DDNID/NCEH/DEHSP); Miller, Laura; Smith, Jessica (CDC/DDID/NCIRD/DBD); Said, Maria; Mark Scott; Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR); Ritter, Troy

(CDC/DDNID/NCEH/DEHSP);Tracy Simmons;Tricia Horn;Alexandra Picavet;Robert Bryson;Peter

Budde

Cc: Sara Newman; Herbert Frost; Patricia Trap

Subject: Call to Discuss The Latest Legionella Test Results from Arkansas?

#### Good Morning Everyone,

Is there a good time to have a call today or tomorrow regarding the latest test results from Hot Springs, AR? Ultimately, there was one positive sample. That sample came from a long waterline that was flushed but has had little to no use over the last several years. So, I believe the flushing has shown to be one effective step in lowering the risk of Legionella in the water. It would be great to talk to other experts from CDC to hear your perspective.

It would also be great to talk about a press release on the latest round of test results.

There are several other questions to ask and discuss.

On the call I would like to discuss the following:

- 1. The latest test results and procedure for sampling prior to sampling
- 2. A list of questions I have
- 3. Press release information
- 4. Any additional questions or public health concerns
- 5. Long-Term plans for drinking water and recreational water
- 6. Planning for a call with the State Health Department

I look forward to connecting with everyone soon and appreciate any collaboration on this important National Park resource and public health matter.

Thank You and Very Respectfully,

#### Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS Supervisory Public Health Consultant, Interior Regions 3, 4, and 5, Great Lakes, Mississippi Basin, and Missouri Basin National Park Service, Office of Public Health (OPH), 601 Riverfront Drive Omaha, NE 68102

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Office Fax: 1-402-661-1719 Cell Phone: 1-202-641-0055 Email: Kurt\_Kesteloot@nps.gov

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From: Smith, Jessica (CDC/DDID/NCIRD/DBD)

**Sent:** 4 Oct 2019 14:32:31 +0000

To: Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR); Kunz, Jasen M.

(CDC/DDNID/NCEH/DEHSP)

**Subject:** FW: 10-4-19 Legionella Sampling Plan

Attachments: HOSP Thermal Water Sampling Plan 10-4-19.pdf

FYI... Jasen, I don't know if Troy already shared this with you, just passing along in case you have time to look and thoughts to share.

From: Kesteloot, Kurt <kurt\_kesteloot@nps.gov>

Sent: Friday, October 4, 2019 7:48 AM

To: Mark Scott <Mark\_Scott@nps.gov>; laura\_a\_miller@nps.gov

Cc: Lucas, Claressa (CDC/DDID/NCIRD/DBD) <chl9@cdc.gov>; Smith, Jessica (CDC/DDID/NCIRD/DBD)

<lyd7@cdc.gov>; Ritter, Troy (CDC/DDNID/NCEH/DEHSP) <tir4@cdc.gov>; Maria Said

<maria\_said@nps.gov>; Robert Kammel <bob\_kammel@nps.gov>

Subject: 10-4-19 Legionella Sampling Plan

Good Morning Everyone,

Mark and I talked yesterday about the attached sampling plan for today. I have attached a drawing that lists the samples and shows a rough overview of the system. If anyone has any additional thoughts, comments, or questions, please let me know.

Currently, I have 23 locations listed. Thus, we have two more available if needed. I have not listed the thermal water system main tank under administration because it has been tested at least three times (once with PCR/new lab) and has been negative all times. I have also excluded the showers in the Quapaw because they were plumbed improperly and will not be used that way ever again. All of the tests focus on the NPS water system, we could talk to the city about testing their fountains and/or test the city water in the Quapaw (showers on main level and one in the basement). Any thoughts?

Thank You and Very Respectfully,

#### Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS
Supervisory Public Health Consultant, Interior Regions 3-5
National Park Service, Office of Public Health (OPH),
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Omaha, NE 68102

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Cell Phone: 1-202-641-0055
Email: Kurt Kesteloot@nps.gov

"The NPS One Health Network: promoting and protecting the health of all species and the parks that we share." GREEN DOT

On Thu, Oct 3, 2019 at 3:50 PM Maria Said <maria said@nps.gov> wrote:

Thanks Claressa. And to take it one step further, positive PCR results will be much less useful, right? My understanding is that they are not accurate for predicting culture results and we would just have to wait for cultures to be finalized, correct?

Thank you again!

Maria Said, MD, MHS CDR, US Public Health Service Epidemiology Branch Chief Office of Public Health National Park Service (O) 202-513-7151 (C) 202-538-5682

```
> On Oct 3, 2019, at 3:52 PM, Lucas, Claressa (CDC/DDID/NCIRD/DBD) < chl9@cdc.gov> wrote:
> Hi Maria,
> Yes, negative PCR results are >99% predictive of a negative culture result.
> Best wishes,
> Claressa
> ----Original Message-----
> From: Maria Said < maria_said@nps.gov>
> Sent: Thursday, October 3, 2019 3:49 PM
> To: James, Allison (CDC arkansas.gov) <allison.james@arkansas.gov>;
jennifer.dillaha@arkansas.gov; Kurt Kesteloot <kurt kesteloot@nps.gov>; laura a miller@nps.gov;
Lucas, Claressa (CDC/DDID/NCIRD/DBD) < chi9@cdc.gov>; Smith, Jessica (CDC/DDID/NCIRD/DBD)
<lyd7@cdc.gov>; Ritter, Troy (CDC/DDNID/NCEH/DEHSP) <<u>tir4@cdc.gov</u>>
> Subject: Re: PCR?
> It looks from the lab that PCR results would be available the next day after testing.
> Claressa, am I correct that negative PCR results are highly predictive that culture results will be
negative as well?
>
```

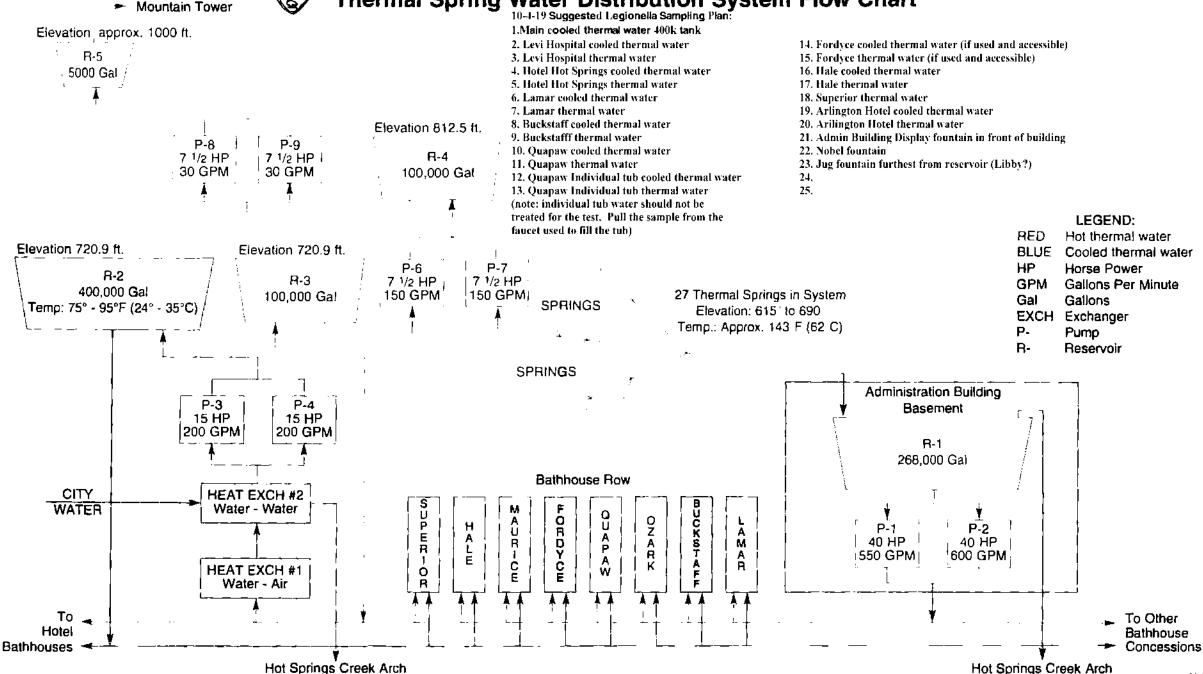
> It seems to me that if we are able to get this information quickly, that will be very helpful to us in determining our modes of notification. > Thank you! Maria > Maria Said, MD, MHS > CDR, US Public Health Service > Epidemiology Branch Chief > Office of Public Health > National Park Service > (O) 202-513-7151 > (C) 202-538-5682 > >> On Oct 3, 2019, at 3:40 PM, Maria Said < maria said@nps.gov > wrote: >> >> Does anyone know how quickly PCR results could be turned around? My >> understanding of PCR is that negative PCR has a high predictive value and could be very useful in this situation if we can get results quickly. Thanks. Maria

>>



# **Hot Springs National Park**

Thermal Spring Water Distribution System Flow Chart 10-4-19 Suggested Legionella Sampling Plan:



03/16/01

# THE THERMAL WATER DISTRIBUTION SYSTEM OF HOT SPRINGS NATIONAL PARK

Systems for distributing thermal spring water at Hot Springs National Park have been around a long time, evolving along with the bathhouses. In the first half of the nineteenth century most "bathhouses" were rough wooden shacks or even tents, built over natural tufa cavities (sometimes enlarged) that held spring water. More elaborate bathhouses began springing up in the 1850s. Some boasted individual bath rooms with wooden tubs, requiring a network of wooden troughs to direct thermal water into flumes on the roofs. Inside the bathhouse, bathers pulled a rope, opening a mechanism that released water from the flume into the tub.

When a disastrous 1878 fire destroyed most of the bathhouses along Hot Springs Creek, the government seized the opportunity to improve both bathhouse construction and thermal water distribution. The Avenue Hotel Bathhouse, built in 1880, was allowed to set up a pump on the reservation. The first reservoir was built in 1880 as well. On June 8, 1891, a pumping station and reservoir were completed on the present site of the administration building in order to enhance thermal water distribution. Unfortunately a law passed that same year required water to be transported by gravity flow, and the pumping equipment was never used.

The government built more reservoirs in the 1890s to impound spring water and increase the flow. In 1897 all but four springs were encased in brick archways and their water piped to bathhouses and reservoirs; the remaining springs were enclosed by 1901. On November 10, 1903, Congress authorized funds for building surface and deep reservoirs on Hot Springs Mountain, adding to the collection of older reservoirs already in use. In 1924 National Park Service engineers drew a plan showing the existing complex of springs, reservoirs, and plumbing in preparation for the first central collection, impounding and distribution system for the thermal water, completed around 1931. Meters installed on bathhouse lines were not fully functional until 1933. The present system allows better control and monitoring of the water flow.

The springs are located on about 2.8 acres along Bathhouse Row and the Grand Promenade. The bulk of the approximately 850,000 gallons of thermal water flowing each day from Hot Springs Mountain is collected from 27 of the 47 presently active springs. Each spring in the collection system has been sealed and covered with a green box about four feet square with a metal cover, chain, and padlock. The green boxes on the lower west slope of Hot Springs Mountain and the heat exchange units at the north end of Bathhouse Row are the most visible components of the thermal water distribution system and represent its source portion. Not all of the boxes indicate a spring; some hold only valves and collection plumbing. The boxes higher up on the mountain allow access to the underground reservoirs and plumbing.

The valve and spring collection boxes are connected with the plumbing system delivering thermal water to reservoir R-1 under the east end and parking lot of the administration building at the south end of Bathhouse Row. This reservoir holds about 268,000 gallons and includes an overflow pipe connected to the Hot Springs Creek arch.

In the administration building basement, two pumps (P-1 and P-2) move the thermal water through a twelve-inch cast-iron pipe in the Hot Springs Creek arch to the bathhouses, the heat exchangers, and a 100,000-gallon underground storage reservoir (R-3) about 120 feet above Bathhouse Row. The elevation of this reservoir ensures an ample supply of water at about 52 pounds per square inch (psi) when pumps P-1 and P-2 are idle. When demand increases, pumps P-6 and P-7 transfer thermal water from reservoir R-3 to another 100,000-gallon reservoir (R4) about 220 feet above Bathhouse Row. The plumbing for a number of bathhouses no longer in operation is still in the distribution system as well.

Surprisingly enough the water within the distribution system stays well above 100°F (37.8°C); the water has been flowing into it for decades, and the terrain around the reservoirs and plumbing is heat saturated. As a result, the water arriving at the bathhouses is far too hot for direct bathing. By the 1890s most of the bathhouses had individual cooling towers to cool down the thermal water. These and similar towers were used until the central thermal water cooling system was completed on February 8, 1950. The system is comprised of two heat exchangers (#1 and #2), two pumps (P-3 and P-4), and a 400,000-gallon reservoir (R-2). The first exchanger is a thermal water-to-air cooling unit that works like a car radiator; it contains a primary and secondary section,

each with a large fan to force air through its radiator cores. When both sections of heat exchanger #1 are unable to cool the water sufficiently, #2 comes on line. This exchanger runs cold city water over the tubes carrying the thermal water but never mixes with it. The city water, which is heated in the process, is discharged into the Hot Springs Creek arch, and pumps P-3 and P-4 move the cooled thermal water (still 100% spring water) into reservoir R-2. This reservoir is next to and at the same elevation as reservoir R-3, so an ample supply of cooled water is also available at about 52 psi. The system for delivering cooled thermal water is similar to the hot spring water distribution system.

By mixing hot and cooled spring water, attendants can administer baths at the temperature (98° to 100°F, 36.7° to 37.8°C) required by regulations. The system was designed to produce thermal water cooled to temperatures ranging from 75° to 90°F (24° to 32.2°C). During most of the year when outdoor temperatures are below 80°F (26.7°C), the system works well, but during the hot summer months the desired temperature range is difficult to achieve. To compensate, heat exchanger #2 has been redesigned, and installation of new equipment began in the first quarter of fiscal year 2001.

The entire system is monitored automatically from the basement of the park administration building. The quantity and temperature of the water coming in from the springs are recorded continuously for 24 hours a day, as are water levels in each reservoir. Meters at each bathhouse transmit readings on the amount of water used to the monitoring center. Analyses of these data alert maintenance workers to the possibility of major leaks or equipment failure.

One source of equipment failure is the buildup of calcium carbonate, or limestone, in the system. Similar to the water found in caves, the spring water contains dissolved limestone that can be deposited in pipes, valves, and other system components, particularly in those handling cooled spring water. Because calcium carbonate is less soluble in cold water, it settles out in greater quantities in cooled water systems. Also called "tufa," the deposit is left wherever the thermal springs flow. In fact, the porous gray tufa formations behind Bathhouse Row are really geological "maps" showing where the springs once flowed freely down the mountainside.

From: Ritter, Troy (CDC/DDNID/NCEH/DEHSP)

**Sent:** 21 Jan 2019 11:35:04 -0500

To: Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP);Smith, Jessica

(CDC/DDID/NCIRD/DBD)

Subject: Fwd: [EXTERNAL] Checking in re: Hot Springs

Hey guys, see note below from Kurt. Do you think

Troy

From: Kesteloot, Kurt <kurt\_kesteloot@nps.gov> Date: January 21, 2019 at 2:31:43 PM GMT-2

**To:** Ritter, Troy (CDC/DDNID/NCEH/DEHSP) < tir4@cdc.gov> **Subject:** Fwd: [EXTERNAL] Checking in re: Hot Springs

Good Morning Troy,

Thanks again for the help with this. The Legionella test results were negative and we have advised that the facility can return to normal operations.

Thank You and Very Respectfully,

Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS Supervisory Public Health Consultant, Midwest Region National Park Service, Office of Public Health (OPH), 601 Riverfront Drive Omaha, NE 68102

Office Phone: 1-402-661-1718 Office Fax: 1-402-661-1719 Cell Phone: 1-202-641-0055 Email: Kurt Kesteloot@nps.gov

×

Attention Federal Employees Only: Please let us know how we are doing by completing a survey found at: <a href="https://www.survcymonkey.com/s/NPS-OPH-CustScrv">https://www.survcymonkey.com/s/NPS-OPH-CustScrv</a>

"The NPS One Health Network: promoting and protecting the health of all species and

the parks that we share." GREEN DOT

----- Forwarded message -----From: Said, Maria < maria said(a)nps.gov> Date: Mon, Jan 21, 2019 at 10:16 AM Subject: Re: [EXTERNAL] Checking in re: Hot Springs To: Smith, Jessica (CDC/DDID/NCIRD/DBD) < lyd7@cdc.gov> Cc: Haselow, Dirk (CDC arkansas.gov) < dirk.haselow@arkansas.gov>, Kurt Kesteloot <kurt kesteloot@nps.gov>, Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) <npf3( $\hat{a}$ )cdc.gov>Hi Jessica, We've received results that are all negative for Legionella. We have told the Quapaw they can resume normal operations. Thanks very much for your help with this - it is much appreciated. And we will be in touch if there are any new developments. Best, Maria On Fri, Jan 18, 2019 at 3:00 PM Said, Maria <maria said@nps.gov> wrote: Hi Jessica, During the assessment, a group collected 6 liter samples (one at the cooling tower, one at the cold water pumping/gravity station, and 4 at the bathhouse) and 9 swabs. Results are still pending. I'm very grateful for your offer to assist and will let you know when we learn more. Best, Maria On Fri, Jan 18, 2019 at 2:54 PM Smith, Jessica (CDC/DDID/NCIRD/DBD) <lyd7@cdc.gov> wrote: Hi Maria, Dirk and Kurt,

I wanted to check in this week about how the on-site assessment went in Hot Springs and whether the environmental results have come back or not. I don't mean to add to anyone's plate... we were just curious to hear if there are any updates. And of course we remain standing by if there's anything we can do to be of assistance.

Thanks and hope you all have a good weekend,

Jessica

\_

Jessica C. Smith, MPH

Epidemiologist | Centers for Disease Control and Prevention

NCIRD/DBD/Respiratory Diseases Branch

404.718.5205 | lyd7@cdc.gov

\_\_

Maria Said, MD, MHS | CDR, U.S. Public Health Service

Epidemiology Branch Chief | Office of Public Health | National Park Service

Address: 1849 C. Street, NW, Room 2543, Mailstop 2560 Washington, DC 20240

Office Tel: 202-513-7151 | Email: maria said@nps.gov

Website (public): https://www.nps.gov/orgs/1878/index.htm

Website (internal): https://sites.google.com/a/nps.gov/in2-protect-and-promote-

health/home/disease-surveillance-response

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health/home/disease-surveillance-response

From: Google Calendar on behalf of maria\_said@nps.gov

**Sent:** 17 Oct 2019 14:55:22 +0000

To: Ritter, Troy (CDC/DDNID/NCEH/DEHSP); Smith, Jessica

(CDC/DDID/NCIRD/DBD);Lucas, Claressa

(CDC/DDID/NCIRD/DBD);mark\_scott@nps.gov;sara\_newman@nps.gov;Lee, Sooji

(CDC/DDID/NCIRD/DBD) (CTR);Kunz, Jasen M.

(CDC/DDNID/NCEH/DEHSP);kurt\_kesteloot@nps.gov;laura\_a\_miller@nps.gov

Subject: Invitation: Hot Springs Legionella - CDC @ Fri Oct 18, 2019 10am - 11am

(EDT) (izk0@cdc.gov)

Attachments: invite.ics

You have been invited to the following event.

#### more details »

# Hot Springs Legionella - CDC

Fri Oct 18, 2019 10am - 11am

Webex to be set up (map)

https://hangouts.google.com/hangouts/\_/doi.gov/maria-said

izk0@cdc.gov

- maria\_said@nps.gov
- tir4@cdc.gov
- lyd7@cdc.gov
- chl9@cdc.gov
- mark\_scott@nps.gov
- sara newman@nps.gov
- npf3@cdc.gov
- izk0@cdc.gov
- kurt\_kesteloot@nps.gov
- laura\_a\_miller@nps.gov

Yes - Maybe - No more options »

Google Calendar

Learn More

From: Said, Maria

**Sent:** 22 Jan 2019 22:31:50 -0500

To: Smith, Jessica (CDC/DDID/NCIRD/DBD)

**Cc:** Haselow, Dirk (CDC arkansas.gov);Kurt Kesteloot;Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR);Ritter, Troy (CDC/DDNID/NCEH/DEHSP);Kunz, Jasen M.

(CDC/DDNID/NCEH/DEHSP);Terry Paul

Subject: Re: [EXTERNAL] Checking in re: Hot Springs

Thanks Jessica.

I'll defer to Kurt and am also including Terry Paul from the Arkansas Dept of Health, as they can speak much better than I about the environmental assessment and how to optimize conditions moving forward.

And from me -- another thank you to Arkansas for all your assistance with the assessment and testing. It is very much appreciated.

Best, Maria

On Tue, Jan 22, 2019 at 5:13 PM Smith, Jessica (CDC/DDID/NCIRD/DBD) < lyd7@cdc.gov> wrote:

Thanks so much for the update, Maria! That is certainly reassuring.

chatted with Jasen and	d Troy about this or	n the EH side, and ডিক্রে	we were wondering in general
	(p)(2)		If so, were there any
recommendations .	(b)( <del>\$</del> )		
Depending		(b)(3)	
		(b)(5)	
Happy to discuss furthe	r anytime if needer	<u> </u>	

Thanks again, Jessica To: Smith, Jessica (CDC/DDID/NCIRD/DBD) < <a href="mailto:lyd7@cdc.gov">lyd7@cdc.gov</a>> Cc: Haselow, Dirk (CDC arkansas.gov) < dirk.haselow@arkansas.gov>; Kurt Kesteloot <<u>kurt\_kesteloot@nps.gov</u>>; Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) <<u>npf3@cdc.gov</u>> Subject: Re: [EXTERNAL] Checking in re: Hot Springs Hi Jessica, We've received results that are all negative for Legionella. We have told the Quapaw they can resume normal operations. Thanks very much for your help with this - it is much appreciated. And we will be in touch if there are any new developments. Best, Maria On Fri, Jan 18, 2019 at 3:00 PM Said, Maria <maria said@nps.gov> wrote: Hi Jessica, During the assessment, a group collected 6 liter samples (one at the cooling tower, one at the cold water pumping/gravity station, and 4 at the bathhouse) and 9 swabs. Results are still pending. I'm very grateful for your offer to assist and will let you know when we learn more. Best, Maria

From: Said, Maria <maria\_said@nps.gov>
Sent: Monday, January 21, 2019 11:16 AM

On Fri, Jan 18, 2019 at 2:54 PM Smith, Jessica (CDC/DDID/NCIRD/DBD) < lyd7@cdc.gov> wrote:

Hi Maria, Dirk and Kurt,

I wanted to check in this week about how the on-site assessment went in Hot Springs and whether the environmental results have come back or not. I don't mean to add to anyone's plate... we were just curious to hear if there are any updates. And of course we remain standing by if there's anything we can do to be of assistance.

Thanks and hope you all have a good weekend,

Jessica

\_

Jessica C. Smith, MPH

Epidemiologist | Centers for Disease Control and Prevention

NCIRD/DBD/Respiratory Diseases Branch

404.718.5205 lyd7@cdc.gov

\_\_

Maria Said, MD, MHS | CDR, U.S. Public Health Service Epidemiology Branch Chief | Office of Public Health | National Park Service Address: 1849 C. Street, NW, Room 2543, Mailstop 2560 | Washington, DC 20240

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\_\_

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Website (internal): https://sites.google.com/a/nps.gov/in2-protect-and-promote-

health/home/disease-surveillance-response

From: Smith, Jessica (CDC/DDID/NCIRD/DBD)

**Sent:** 22 Jan 2019 17:12:55 -0500

To: Said, Maria

**Cc:** Haselow, Dirk (CDC arkansas.gov); Kurt Kesteloot; Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR); Ritter, Troy (CDC/DDNID/NCEH/DEHSP); Kunz, Jasen M.

(CDC/DDNID/NCEH/DEHSP)

Subject: RE: [EXTERNAL] Checking in re: Hot Springs

Thanks so much for the update, Maria! That is certainly reassuring.

I chatted with Jasen and Troy about this on the EH side, and we were wondering					
	(b)( <u>5</u> )				
(b)( <b>3</b> )	If so, were there any recommendations	(p)( <u>3</u> )			
(	p)(3)				
Depending	g (b)(3)				
	(b)( <u>3</u> )				
(b)(s) Happy to discuss further anytime if needed.					

Thanks again,

Jessica

From: Said, Maria <maria\_said@nps.gov>
Sent: Monday, January 21, 2019 11:16 AM

To: Smith, Jessica (CDC/DDID/NCIRD/DBD) < lyd7@cdc.gov>

**Cc:** Haselow, Dirk (CDC arkansas.gov) <dirk.haselow@arkansas.gov>; Kurt Kesteloot <kurt kesteloot@nps.gov>; Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) <npf3@cdc.gov>

Subject: Re: [EXTERNAL] Checking in re: Hot Springs

Hi Jessica,

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Thanks very much for your help with this - it is much appreciated.

And we will be in touch if there are any new developments.

Best,

Maria

On Fri, Jan 18, 2019 at 3:00 PM Said, Maria <maria said@nps.gov> wrote:

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Best, Maria

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Thanks and hope you all have a good weekend, Jessica

—

Jessica C. Smith, MPH

Epidemio ogist — Centers for Disease Control and Prevention NC RD/DBD/Respiratory Diseases Branch 404.718.5205 | lyd7@cdc.gov

--

Maria Said, MD, MHS | CDR, U.S. Public Health Service

Epidemiology Branch Chief | Office of Public Health | National Park Service

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health/home/disease-surveillance-response

Sent:	21 Jan 2019 20:11:17 -0500					
To:	Smith, Jessica (CDC/DDID/NCIRD/DBD); Kunz, Jasen M.					
(CDC/DDNID/NCEH/D	EHSP)					
Subject:	Subject: RE: [EXTERNAL] Checking in re: Hot Springs					
Hi Jess,						
		Г	(p)(2)			
I do think it would b	<u>be a good idea to f</u>	ollow up. Maybe				
		4	I don't need to be involved if			
you want to check v	vith NPS.	(b)( <u>5</u> )	Have a good week!			
Troy						
From: Smith, Jessic Date: January 21, 2 To: Ritter, Troy (CI (CDC/DDNID/NCE Subject: RE: [EXT	019 at 9:24:50 PM DC/DDNID/NCEI EH/DEHSP) <izk0< td=""><td>4 GMT-2 H/DEHSP) <tir4@ 0@cdc.gov&gt;</tir4@ </td><td>cdc.gov&gt;, Kunz, Jasen M.</td></izk0<>	4 GMT-2 H/DEHSP) <tir4@ 0@cdc.gov&gt;</tir4@ 	cdc.gov>, Kunz, Jasen M.			
Davida Visa			(p)( <del>2</del> )			
Hey Troy – yeah, I'm o	curious what the as	sessment revealed ക്ര				
		(D)(D)				
		•	I'll chat with Jasen about it if he has the findings and provide some			
Jess						
From: Ritter, Troy (C Sent: Monday, Janua To: Kunz, Jasen M. (C (CDC/DDID/NCIRD/D Subject: Fwd: [EXTER	iry 21, 2019 11:35 A CDC/DDNID/NCEH/[ BD) <lyd7@cdc.gov< td=""><td>AM DEHSP) <izk0@cdc.g v&gt;</izk0@cdc.g </td><td>ov&gt;; Smith, Jessica</td></lyd7@cdc.gov<>	AM DEHSP) <izk0@cdc.g v&gt;</izk0@cdc.g 	ov>; Smith, Jessica			
Hay one ass mate	aalam fram Viiit	Do von thint	(b)(3)			
Hey guys, see note l	below from Kurt.	DO YOU ININK I				
Troy						

Ritter, Troy (CDC/DDNID/NCEH/DEHSP)

From:

From: Kesteloot, Kurt < <u>kurt\_kesteloot@nps.gov</u>>
Date: January 21, 2019 at 2:31:43 PM GMT-2

To: Ritter, Troy (CDC/DDNID/NCEH/DEHSP) < tir4@cdc.gov >

Subject: Fwd: [EXTERNAL] Checking in re: Hot Springs

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Thank You and Very Respectfully,

#### Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS
Supervisory Public Health Consultant, Midwest Region
National Park Service, Office of Public Health (OPH),
601 Riverfront Drive
Omaha, NE 68102

Office Phone: 1-402-661-1718 Office Fax: 1-402-661-1719 Cell Phone: 1-202-641-0055 Email: Kurt Kesteloot@nps.gov

×

Attention Federal Employees Only: Please let us know how we are doing by completing a survey found at: <a href="https://www.survcymonkey.com/s/NPS-OPH-CustScrv">https://www.survcymonkey.com/s/NPS-OPH-CustScrv</a>

"The NPS One Health Network: promoting and protecting the health of all species and the parks that we share." GREEN DOT

----- Forwarded message ------

From: **Said, Maria** <<u>maria\_said@nps.gov</u>> Date: Mon, Jan 21, 2019 at 10:16 ΛM

Subject: Re: [EXTERNAL] Checking in re: Hot Springs

To: Smith, Jessica (CDC/DDID/NCIRD/DBD) < lyd7@cdc.gov>

Cc: Haselow, Dirk (CDC arkansas.gov) < dirk.haselow@arkansas.gov>, Kurt Kesteloot

<<u>kurt\_kesteloot@nps.gov</u>>, Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR)

<npf3@cdc.gov>

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Thanks and hope you all have a good weekend, Jessica

Jessica C. Smith, MPH

Epidemiologist | Centers for Disease Control and Prevention NCIRD/DBD/Respiratory Diseases Branch 404.718.5203 | <u>lyd7@cdc.gov</u>

--

Maria Said, MD, MHS | CDR, U.S. Public Health Service

Epidemiology Branch Chief | Office of Public Health | National Park Service

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health/home/disease-surveillance-response

From: Smith, Jessica (CDC/DDID/NCIRD/DBD)

**Sent:** 21 Jan 2019 18:24:50 -0500

To: Ritter, Troy (CDC/DDNID/NCEH/DEHSP); Kunz, Jasen M.

(CDC/DDNID/NCEH/DEHSP)

Subject: RE: [EXTERNAL] Checking in re: Hot Springs

Hey Troy – yeah, I'm curious what the assessment revealed.

(b)(3)

I know you're supposed to be on vacation so please enjoy it! I'll chat with Jasen about it if he has time tomorrow... I'm happy to follow up on this to ask about the findings and provide some advice if needed.

Thanks!

Jess

From: Ritter, Troy (CDC/DDNID/NCEH/DEHSP) <tir4@cdc.gov>

Sent: Monday, January 21, 2019 11:35 AM

To: Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP) <izk0@cdc.gov>; Smith, Jessica (CDC/DDID/NCIRD/DBD)

<lyd7@cdc.gov>

Subject: Fwd: [EXTERNAL] Checking in re: Hot Springs

Hey guys, see note below from Kurt. Do you think

Troy

From: Kesteloot, Kurt < <u>kurt\_kesteloot@nps.gov</u>> **Date:** January 21, 2019 at 2:31:43 PM GMT-2

To: Ritter, Troy (CDC/DDNID/NCEH/DEHSP) < tir4@cdc.gov>

Subject: Fwd: [EXTERNAL] Checking in re: Hot Springs

Good Morning Troy,

Thanks again for the help with this. The Legionella test results were negative and we have advised that the facility can return to normal operations.

Thank You and Very Respectfully,

Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS Supervisory Public Health Consultant, Midwest Region National Park Service, Office of Public Health (OPH), 601 Riverfront Drive Omaha, NE 68102

Office Phone: 1-402-661-1718 Office Fax: 1-402-661-1719 Cell Phone: 1-202-641-0055 Email: Kurt Kesteloot@nps.gov

×

Attention Federal Employees Only: Please let us know how we are doing by completing a survey found at: https://www.surveymonkey.com/s/NPS-OPH-CustServ

"The NPS One Health Network: promoting and protecting the health of all species and the parks that we share." GREEN DOT

----- Forwarded message ------

From: Said, Maria < maria said@nps.gov > Date: Mon, Jan 21, 2019 at 10:16 AM

Subject: Re: [EXTERNAL] Checking in re: Hot Springs

To: Smith, Jessica (CDC/DDID/NCIRD/DBD) < lyd7@cdc.gov>

Cc: Haselow, Dirk (CDC <u>arkansas.gov</u>) < <u>dirk.haselow@arkansas.gov</u>>, Kurt Kesteloot < <u>kurt\_kesteloot@nps.gov</u>>, Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) < <u>npf3@edc.gov</u>>

Hi Jessica.

We've received results that are all negative for Legionella. We have told the Quapaw they can resume normal operations.

Thanks very much for your help with this - it is much appreciated.

And we will be in touch if there are any new developments.

Best,

Maria

On Fri, Jan 18, 2019 at 3:00 PM Said, Maria <maria said@nps.gov> wrote:

Hi Jessica.

During the assessment, a group collected 6 liter samples (one at the cooling tower, one at the cold water pumping/gravity station, and 4 at the bathhouse) and 9 swabs. Results are still pending.

I'm very grateful for your offer to assist and will let you know when we learn more.

Best,

On Fri, Jan 18, 2019 at 2:54 PM Smith, Jessica (CDC/DDID/NCIRD/DBD) < <u>lyd7@cdc.gov</u>> wrote:

Hi Maria, Dirk and Kurt,

I wanted to check in this week about how the on-site assessment went in Hot Springs and whether the environmental results have come back or not. I don't mean to add to anyone's plate... we were just curious to hear if there are any updates. And of course we remain standing by if there's anything we can do to be of assistance.

Thanks and hope you all have a good weekend, Jessica

\_

Jessica C. Smith, MPH

Epidemio ogist — Centers for Disease Control and Prevention NC RD/DBD/Respiratory Diseases Branch 404.718.5205 | lyd7@cdc.gov

--

Maria Said, MD, MHS | CDR, U.S. Public Health Service Epidemiology Branch Chief | Office of Public Health | National Park Service Address: 1849 C. Street, NW, Room 2543, Mailstop 2560 Washington, DC 20240

Office Tel: 202-513-7151 | Email: maria said@nps.gov

Website (public): https://www.nps.gov/orgs/1878/index.htm

Website (internal): https://sites.google.com/a/nps.gov/in2-protect-and-promote-

health/home/disease-surveillance-response

--

Maria Said, MD, MHS | CDR, U.S. Public Health Service

Epidemiology Branch Chief | Office of Public Health | National Park Service

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Website (internal): https://sitcs.googlc.com/a/nps.gov/in2-protect-and-promote-

health/home/disease-surveillance-response

From: Kesteloot, Kurt

**Sent:** 23 Jan 2019 10:54:38 -0600

To: Said, Maria

Cc: Smith, Jessica (CDC/DDID/NCIRD/DBD); Haselow, Dirk (CDC

arkansas.gov);Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR);Ritter, Troy

(CDC/DDNID/NCEH/DEHSP); Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP); Terry Paul

Subject: Re: [EXTERNAL] Checking in re: Hot Springs

Good Morning Jessica,

Thanks for sharing ideas. Some initial thoughts are:

- 1. Flush, inspect, and clean the cooled thermal water plumbing and reservoir
- 2. Check air handling system
- 3. Coordinate a trip with the Arkansas Department of Health pool expert and others to evaluate the thermal pools/spas in the Quapaw (Conduct additional testing if deemed necessary)
- 4. Evaluate all fountains in the park and test if needed for Legionella
- 5. Address any other ideas or thoughts regarding the park hot and cooled thermal water.

Thank You and Very Respectfully,

#### Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS Supervisory Public Health Consultant, Midwest Region National Park Service, Office of Public Health (OPH), 601 Riverfront Drive Omaha, NE 68102

Office Phone: 1-402-661-1718 Office Fax: 1-402-661-1719 Cell Phone: 1-202-641-0055 Email: Kurt Kesteloot@nps.gov



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"The NPS One Health Network: promoting and protecting the health of all species and the parks that we share." GREEN DOT

On Tue, Jan 22, 2019 at 9:32 PM Said, Maria <maria said@nps.gov> wrote:

Thanks Jessica.

I'll defer to Kurt and am also including Terry Paul from the Arkansas Dept of Health, as they can speak much better than I about the environmental assessment and how to optimize conditions moving forward.

And from me -- another thank you to Arkansas for all your assistance with the assessment and testing. It is very much appreciated.

Best, Maria

On Tue, Jan 22, 2019 at 5:13 PM Smith, Jessica (CDC/DDID/NCIRD/DBD) < lyd7@cdc.gov> wrote:

Thanks so much for the update, Maria! That is certainly reassuring.

I chatted with Jasen	and Troy about this on the E	H side, and w	e were wondering	(b)( <u>3</u> )
	(p)( <del>3</del> )			
	(p)( <del>2</del> )		If so, were there any	•
recommendations -		(p)(3)		7
(b)(s)				
Depending		(b)(3)		
Depending	(b)(5)			<del></del>
	(2)(3)			
(p)(2)	Happy to discuss further ar	ytime if need	de <b>d</b> .	

Thanks again, Jessica

From: Said, Maria < maria said@nps.gov > Sent: Monday, January 21, 2019 11:16 AM

To: Smith, Jessica (CDC/DDID/NCIRD/DBD) < lyd7@cdc.gov>

**Cc:** Haselow, Dirk (CDC <u>arkansas.gov</u>) < <u>dirk.haselow@arkansas.gov</u>>; Kurt Kesteloot < <u>kurt\_kesteloot@nps.gov</u>>; Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) < <u>npf3@cdc.gov</u>>

Subject: Re: [EXTERNAL] Checking in re: Hot Springs

Hi Jessica,		
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Best,		
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On Fri, Jan 18, 2019 at 3:00 PM Said, Maria < maria_said@nps.gov > wrote:		
Hi Jessica,		
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I'm very grateful for your offer to assist and will let you know when we learn more.		
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Thanks and hope you all have a good weekend,

Jessica

\_

Jessica C. Smith, MPH

Epidemiologist | Centers for Disease Control and Prevention

NCIRD/DBD/Respiratory Diseases Branch

404.718.5205 lyd7@cdc.gov

--

Maria Said, MD, MHS | CDR, U.S. Public Health Service Epidemiology Branch Chief | Office of Public Health | National Park Service Address: 1849 C. Street, NW, Room 2543, Mailstop 2560 | Washington, DC 20240

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health/home/disease-surveillance-response

From: Kesteloot, Kurt

**Sent:** 10 Jul 2019 21:56:49 -0500

To:Ritter, Troy (CDC/DDNID/NCEH/DEHSP)Cc:Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP)

Subject: Re: [EXTERNAL] CONFIDENTIAL: travel-associated legionellosis

CDC49130

Hi Troy,

Thanks, I will try to call you tomorrow morning to share thoughts and we hope to have a call with Laura and others later.

Thank You and Very Respectfully,

#### Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS Supervisory Public Health Consultant, Midwest Region National Park Service, Office of Public Health (OPH), 601 Riverfront Drive Omaha, NE 68102

Office Phone: 1-402-661-1718 Office Fax: 1-402-661-1719 Cell Phone: 1-202-641-0055 Email: Kurt Kesteloot@nps.gov

×

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On Wed, Jul 10, 2019 at 8:32 PM Ritter, Troy (CDC/DDNID/NCEH/DEHSP) < tir4@cdc.gov> wrote:

Hi Kurt,

I'm happy to speak with you in the morning. Feel free to give me a call at your convenience. I have another call from 10-1030 am but otherwise available. My cell is

(b)(6)

It looks like you've also reached out to Laura Cooley, which is good. I need to make sure that I'm coordinating with other members of the CDC team before giving any formal advice. However, I'm happy to talk with you informally and then loop in others as needed.

Troy

## Get Outlook for iOS

From: Kesteloot, Kurt < kurt kesteloot@nps.gov>

Sent: Wednesday, July 10, 2019 7:27 PM

To: Ritter, Troy (CDC/DDNID/NCEH/DEHSP)

Subject: Fwd: [EXTERNAL] CONFIDENTIAL: travel-associated legionellosis CDC49130

Good Evening Troy,

Are you available for a call? Early tomorrow morning is best for me.

Thank You and Very Respectfully,

Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS Supervisory Public Health Consultant, Midwest Region National Park Service, Office of Public Health (OPH), 601 Riverfront Drive Omaha, NE 68102

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×

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----- Forwarded message -----

From: **Said, Maria** < <u>maria</u> <u>said@nps.gov</u>>

Date: Wed, Jul 10, 2019 at 6:03 PM

Subject: Fwd: [EXTERNAL] CONFIDENTIAL: travel-associated legionellosis

CDC49130

To: Cooley, Laura A. (CDC/OID/NCIRD) < whz3@cdc.gov>

Cc: Kesteloot, Kurt < kurt kesteloot@nps.gov>

Hi Laura,

Are you available to discuss this? I'm around tonight and early tomorrow morning - I'll be in clinic from 8:30am-12:30pm tomorrow but free after that.

Thank you! Maria

----- Forwarded message ------

From: Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR)<npf3@cdc.gov>

Date: Wed, Jul 10, 2019 at 5:26 PM

Subject: [EXTERNAL] CONFIDENTIAL: travel-associated legionellosis CDC49130

To: Brandi.Stricklin@arkansas.gov

<Brandi.Stricklin@arkansas.gov>,CATHERINE.WATERS@ARKANSAS.GOV

< <u>CATHERINE.WATERS@arkansas.gov</u>>,<u>Debbie.Pledger@arkansas.gov</u>

< <u>Debbie.Pledger@arkansas.gov</u>>, Haselow, Dirk (CDC<u>arkansas.gov</u>)

<a href="mailto:dirk.haselow@arkansas.gov">dirk.haselow@arkansas.gov</a>>, Wheeler, Gary (CDCarkansas.gov)

<gary.wheeler@arkansas.gov>, Safi, Haytham (CDCarkansas.gov)

<a href="mailto:haytham.safi@arkansas.gov">haytham.safi@arkansas.gov</a>>,Michael.Cima@arkansas.gov

<Michael.Cima@arkansas.gov>

Cc: NCID DBMD Travel-Legionella (CDC)

<travellegionella@cdc.gov>,maria\_said@nps.gov <maria\_said@nps.gov>

# Dear Colleague(s):

Please see the attached notification regarding a case of Legionnaires' disease that may be travel-associated. This patient had exposure to the Quapaw Baths & Spa. We are aware of 2 additional cases with exposure to this location within the past year

[bi6] I have requested MS to obtain the lower respiratory specimen, if available. Please see below for hot tub guidance:

### Hot tub guidance:

- CDC webpage for water system maintenance and operating public hot tubs: <a href="http://www.cdc.gov/legionella/water-system-maintenance.html">http://www.cdc.gov/legionella/water-system-maintenance.html</a>
- CDC fact sheet for disinfecting hot tubs containing *Legionella*: http://www.cdc.gov/legionella/downloads/hot-tub-disinfection.pdf
- Hot tub maintenance fact sheet: <a href="http://www.cdc.gov/healthywater/pdf/swimming/resources/operating-public-hot-tubs-factsheet.pdf">http://www.cdc.gov/healthywater/pdf/swimming/resources/operating-public-hot-tubs-factsheet.pdf</a>

Thanks, Sooji

\_

Sooji Lee, MS, MSPH

Loiderniologist (ITIRC, Inc.).

Legionella Team (NCIRD/DBD/RDB).

Centers for Disease Control and Prevention

1600 Cilifton Road, MS H24-6 | Atlanta, GA 30329

Phone: 404-718-3192 | :slee7@cdc.gov

--

Maria Said, MD, MHS | CDR, U.S. Public Health Service Epidemiology Branch Chief | Office of Public Health | National Park Service Address: 1849 C. Street, NW, Room 2543, Mailstop 2560 Washington, DC 20240

Office Tel: 202-513-7151 | Email: maria\_said@nps.gov

Website (public):https://www.nps.gov/orgs/1878/index.htm

Website (internal): <a href="https://sites.google.com/a/nps.gov/in2-protect-and-promote-">https://sites.google.com/a/nps.gov/in2-protect-and-promote-</a>

health/home/disease-surveillance-response

From: Ritter, Troy (CDC/DDNID/NCEH/DEHSP)

**Sent:** 11 Jul 2019 01:31:28 +0000

To: Kesteloot, Kurt

Cc: Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP)

**Subject:** Re: [EXTERNAL] CONFIDENTIAL: travel-associated legionellosis

CDC49130

Hi Kurt,

I'm happy to speak with you in the morning. Feel free to give me a call at your convenience. I have another call from 10-1030 am but otherwise available. My cell is

(b)(6)

It looks like you've also reached out to Laura Cooley, which is good. I need to make sure that I'm coordinating with other members of the CDC team before giving any formal advice. However, I'm happy to talk with you informally and then loop in others as needed.

Troy

Get Outlook for iOS

From: Kesteloot, Kurt < kurt kesteloot@nps.gov>

**Sent:** Wednesday, July 10, 2019 7:27 PM

To: Ritter, Troy (CDC/DDNID/NCEH/DEHSP)

Subject: Fwd: [EXTERNAL] CONFIDENTIAL: travel-associated legionellosis CDC49130

Good Evening Troy,

Are you available for a call? Early tomorrow morning is best for me.

Thank You and Very Respectfully,

Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS

Supervisory Public Health Consultant, Midwest Region

National Park Service, Office of Public Health (OPH),

601 Riverfront Drive

Omaha, NE 68102

Office Phone: 1-402-661-1718

Office Fax: 1-402-661-1719

Cell Phone: 1-202-641-0055

Email: Kurt\_Kesteloot@nps.gov

×

"The NPS One Health Network: promoting and protecting the health of all species and the parks that we share." GREEN DOT

----- Forwarded message ------

From: Said, Maria < maria said@nps.gov >

Date: Wed, Jul 10, 2019 at 6:03 PM

Subject: Fwd: [EXTERNAL] CONFIDENTIAL: travel-associated legionellosis

CDC49130

To: Cooley, Laura A. (CDC/OID/NCIRD) < whz3@cdc.gov>

Cc: Kesteloot, Kurt < <u>kurt\_kesteloot@nps.gov</u>>

Hi Laura,

Are you available to discuss this? I'm around tonight and early tomorrow morning - I'll be in clinic from 8:30am-12:30pm tomorrow but free after that. Thank you! Maria ----- Forwarded message ------From: Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR)<npf3@cdc.gov> Date: Wed, Jul 10, 2019 at 5:26 PM Subject: [EXTERNAL] CONFIDENTIAL: travel-associated legionellosis CDC49130 To: Brandi.Stricklin@arkansas.gov <Brandi.Stricklin@arkansas.gov>,CATHERINE.WATERS@ARKANSAS.GOV <<u>CATHERINE.WATERS@arkansas.gov</u>>,Debbie.Pledger@arkansas.gov <Debbie.Pledger@arkansas.gov>, Haselow, Dirk (CDCarkansas.gov) <<u>dirk.haselow@arkansas.gov</u>>, Wheeler, Gary (CDCarkansas.gov) <gary.wheeler@arkansas.gov>, Safi, Haytham (CDCarkansas.gov) < haytham.safi@arkansas.gov > , Michael. Cima@arkansas.gov <Michael.Cima@arkansas.gov> Cc: NCID DBMD Travel-Legionella (CDC) <travellegionella@cdc.gov>,maria said@nps.gov <maria said@nps.gov>

Dear Colleague(s):

Please see the attached notification regarding a case of Legionnaires' disease that may be travel-associated. This patient had exposure to the Quapaw Baths & Spa. We are aware of 2 additional cases with exposure to this location within the past year

(b)(6)

have requested MS to obtain the lower respiratory specimen, if available.

Please see below for hot tub guidance:

Hot tub guidance:

- CDC webpage for water system maintenance and operating public hot tubs: <a href="http://www.cdc.gov/legionella/water-system-maintenance.html">http://www.cdc.gov/legionella/water-system-maintenance.html</a>
- CDC fact sheet for disinfecting hot tubs containing *Legionella*: http://www.cdc.gov/legionella/downloads/hot-tub-disinfection.pdf
- Hot tub maintenance fact
   sheet: <a href="http://www.cdc.gov/healthywater/pdf/swimming/resources/operating-public-hot-tubs-factsheet.pdf">http://www.cdc.gov/healthywater/pdf/swimming/resources/operating-public-hot-tubs-factsheet.pdf</a>

Thanks,

Sooji

Sooji Lee, MS, MSPH

Upidemiologist (IHRC, Inc.)

Tagrophila Team (NCIRD/DBD/RDB)

Centers for Disease Controlland Prevention

1600 C. Iton Rosd, MS H24-6 [Atlanta, GA 30329]

Phone: 404-718-3192 [ Silee7@cdc.gov

--

Maria Said, MD, MHS CDR, U.S. Public Health Service

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<u>health/home/disease-surveillance-response</u>

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That sounds good, Kurt. I look forward to talking with you.

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×

"The NPS One Health Network: promoting and protecting the health of all species and the parks that we share." GREEN DOT

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×

"The NPS One Health Network: promoting and protecting the health of all species and the parks that we share." GREEN DOT

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Thank you! Maria
From: Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) <npf3@cdc.gov> Date: Wed, Jul 10, 2019 at 5:26 PM Subject: [EXTERNAL] CONFIDENTIAL: travel-associated legionellosis CDC49130 To: Brandi.Stricklin@arkansas.gov <brandi.stricklin@arkansas.gov>,CATHERINE.WATERS@ARKANSAS.GOV <catherine.waters@arkansas.gov>,Debbic.Pledger@arkansas.gov <debbic.pledger@arkansas.gov>, Haselow, Dirk (CDCarkansas.gov) <dirk.haselow@arkansas.gov>, Wheeler, Gary (CDCarkansas.gov) <a href="mailto:qarkansas.gov">qary.wheeler@arkansas.gov"&gt;qary.wheeler@arkansas.gov</a>&gt;, Safi, Haytham (CDCarkansas.gov) <a href="mailto:haytham.safi@arkansas.gov">haytham.safi@arkansas.gov</a>&gt;, Michael.Cima@arkansas.gov <cc: (cdc)="" <a="" dbmd="" href="mailto:travellegionella@cdc.gov" ncid="" travel-legionella="">travellegionella@cdc.gov, maria_said@nps.gov <maria_said@nps.gov< td=""></maria_said@nps.gov<></cc:></dirk.haselow@arkansas.gov></debbic.pledger@arkansas.gov></catherine.waters@arkansas.gov></brandi.stricklin@arkansas.gov></npf3@cdc.gov>
Dear Colleague(s):  Please see the attached notification regarding a case of Legionnaires' disease that may be travel-associated. This patient had exposure to the Quapaw Baths & Spa. We are aware of 2 additional cases with exposure to this location within the past year  [b)(6)

## Hot tub guidance:

- CDC webpage for water system maintenance and operating public hot tubs: http://www.cdc.gov/legionella/water-system-maintenance.html
- CDC fact sheet for disinfecting hot tubs containing *Legionella*: http://www.cdc.gov/legionella/downloads/hot-tub-disinfection.pdf
- Hot tub maintenance fact sheet: <a href="http://www.cdc.gov/healthywater/pdf/swimming/resources/operating-public-hot-tubs-factsheet.pdf">http://www.cdc.gov/healthywater/pdf/swimming/resources/operating-public-hot-tubs-factsheet.pdf</a>

Thanks,
Sooji

—
Sooji Lee, MS, MSPH

Folicemiologist (IHRC, Inc.)

Legionella Team (NCIRD/DBD/RDB)

Centers for Disease Control and Prevention

1600 C. fton Road, MS II24-6 [At anta, GA 30329]

Phone: 404 718 3192 [ in islee7@cdc.gov

\_\_

Maria Said, MD, MHS | CDR, U.S. Public Health Service Epidemiology Branch Chief | Office of Public Health | National Park Service Address: 1849 C. Street, NW, Room 2543, Mailstop 2560 Washington, DC 20240 Office Tel: 202-513-7151 | Email: maria\_said@nps.gov

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health/home/disease-surveillance-response

Said, Maria From:

Sent: 17 Oct 2019 10:53:52 -0400

Smith, Jessica (CDC/DDID/NCIRD/DBD) To:

Kurt Kesteloot; Scott, Mark; Sara Newman; Miller, Laura; Lee, Sooji Cc: (CDC/DDID/NCIRD/DBD) (CTR);Lucas, Claressa (CDC/DDID/NCIRD/DBD);Kunz, Jasen M.

(CDC/DDNID/NCEH/DEHSP); Ritter, Troy (CDC/DDNID/NCEH/DEHSP)

Re: [EXTERNAL] RE: Hot Springs - Culture results Subject:

Great - I'll send out a calendar invite so folks can block it off and leave the Webex/call-in information blank until we set that up. Maria

On Thu, Oct 17, 2019 at 10:43 AM Smith, Jessica (CDC/DDID/NCIRD/DBD) <lyd7@cdc.gov> wrote:

10:00 am ET still works for the CDC team. I'll block it on our calendars. Thanks!

**From:** Kurt Kesteloot < kurt kesteloot@nps.gov> Sent: Thursday, October 17, 2019 10:34 AM

To: Scott, Mark <mark scott@nps.gov>; Said, Maria <maria said@nps.gov> Cc: Smith, Jessica (CDC/DDID/NCIRD/DBD) < lyd7@cdc.gov>; Sara Newman <sara newman@nps.gov>; Miller, Laura <laura a miller@nps.gov>; Lee, Sooji

(CDC/DDID/NCIRD/DBD) (CTR) <npf3@cdc.gov>; Lucas, Claressa

(CDC/DDID/NCIRD/DBD) <chl9@cdc.gov>; Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP) <izk0@cdc.gov>; Ritter, Troy

(CDC/DDNID/NCEH/DEHSP) <tir4@cdc.gov>

**Subject:** Re: [EXTERNAL] RE: Hot Springs - Culture results

Hi Maria,

The 1000 am Eastern time sounds great for me. If that works for everyone else, I am happy to set a Webex and meeting invite later this evening.

Very Respectfully,

CDR Kurt Kesteloot, PE, BCEE, USPHS

Supervisory Public Health Consultant, Interior Regions 3-5

National Park Service, Office of Public Health 601 Riverfront Drive Omaha, NE 68102 Office Phone: 402-661-1718 Cell Phone: 202-641-0055 Sent from my iPhone On Oct 17, 2019, at 8:10 AM, Scott, Mark < mark scott@nps.gov > wrote: Anytime Friday works for me. Thanks Mark On Thu, Oct 17, 2019 at 8:09 AM Said, Maria <maria said@nps.gov> wrote: Laura, Kurt, and Mark, Is there a time on Friday that works better for you both? Thanks. Maria On Wed, Oct 16, 2019 at 2:02 PM Said, Maria < maria said@nps.gov> wrote: I can be there for any of those times. Thanks Jessica. Maria On Wed, Oct 16, 2019 at 1:34 PM Smith, Jessica (CDC/DDID/NCIRD/DBD) < lyd7@cdc.gov> wrote:

Currently it looks like we're free for a follow-up call on Friday, 10/18 at 10 am and 12 pm ET. We may be able to make 2 pm work as well, I just need to confirm with Claressa when she's back in office tomorrow am. Please let me know if any of those times work for you... if not we can move things around as needed to accommodate.

Thanks, Jessica

Jessica C. Smith, MPH

Epidemiologist | Centers for Disease Control and Prevention

NCIRD/DBD/Respiratory Diseases Branch

404.718.5205 lyd7@cdc.gov

From: Kesteloot, Kurt < kurt kesteloot@nps.gov > Sent: Wednesday, October 16, 2019 10:06 AM

To: Said, Maria < maria said@nps.gov > Cc: Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR)
< npf3@cdc.gov >; Miller, Laura < laura a miller@nps.gov >; Smith, Jessica (CDC/DDID/NCIRD/DBD) < lyd7@cdc.gov >; Lucas, Claressa (CDC/DDID/NCIRD/DBD) < chl9@cdc.gov >; Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP)
< izk0@cdc.gov >; Ritter, Troy (CDC/DDNID/NCEH/DEHSP)
< tir4@cdc.gov >; Sara Newman < sara newman@nps.gov >; Mark Scott < Mark Scott@nps.gov >
Subject: Re: [EXTERNAL] RE: Hot Springs - Culture results

Thanks Maria and Everyone,

I have actually already sent a meeting invite with the following number.

#### 1-877-951-8306 access code 9958772

Thank You and Very Respectfully,

Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS Supervisory Public Health Consultant, Interior Regions 3-5 National Park Service, Office of Public Health (OPH), 601 Riverfront Drive Omaha, NE 68102

Office Phone: 1-402-661-1718 Office Fax: 1-402-661-1719 Cell Phone: 1-202-641-0055 Email: Kurt Kesteloot@nps.gov

×

"The NPS One Health Network: promoting and protecting the health of all species and the parks that we share." GREEN DOT

On Wed, Oct 16, 2019 at 9:03 AM Said, Maria <a href="maria-said@nps.gov">maria-said@nps.gov</a>> wrote:

Great -- thank you all for making the time.

Kurt, Laura, and I can all be on a call at 10am CT/11am ET.

Here is conference line info - 1-866-723-8146 PC 7713400. I'll send out a calendar invite too.

Магіа

On Wed, Oct 16, 2019 at 10:01 AM Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) < npf3@cdc.gov> wrote:

Hello everyone,

I am sorry for the confusion. CDC team is available 10am central today.

Thank you,

Sooji

From: Miller, Laura < laura a miller@nps.gov > Sent: Wednesday, October 16, 2019 9:44 AM
To: Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) < npf3@cdc.gov >

Cc: Kesteloot, Kurt < kurt kesteloot@nps.gov >; Said, Maria < maria said@nps.gov >; Smith, Jessica (CDC/DDID/NCIRD/DBD) < lyd7@cdc.gov >; Lucas, Claressa (CDC/DDID/NCIRD/DBD) < chl9@cdc.gov >; Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP) < izk0@cdc.gov >; Ritter, Troy (CDC/DDNID/NCEH/DEHSP) < tir4@cdc.gov >; Sara Newman < sara newman@nps.gov >; Mark Scott < Mark Scott@nps.gov >

**Subject:** Re: [EXTERNAL] RE: Hot Springs - Culture results

I can make 1:00 pm CDT.

Laura

On Wed, Oct 16, 2019 at 8:36 AM Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) < npf3@cdc.gov wrote:

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It looks like some of our colleagues have a meeting at 10am central. Is there another time that may work for your team today? We have availability 1pm, and 3pm central today.

Best,

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Cc: Laura Miller < laura\_a\_miller@nps.gov >; Sara Newman < sara\_newman@nps.gov >; Mark Scott < Mark Scott@nps.gov >

Subject: Re: Hot Springs - Culture results

Good Morning Everyone,

Are you available around 10 a.m. central time for a call? If so, I can send a meeting invite.

Also, I have attached water use and temperatures for our discussion.

Thank You and Very Respectfully,

### Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS Supervisory Public Health Consultant, Interior Regions 3-5

National Park Service, Office of Public Health (OPH), 601 Riverfront Drive

Omaha, NE 68102

Office Phone: 1-402-661-1718 Office Fax: 1-402-661-1719 Cell Phone: 1-202-641-0055 Email: Kurt Kesteloot@nps.gov

×

"The NPS One Health Network: promoting and protecting the health of all species and the parks that we share." GREEN DOT

On Wed, Oct 16, 2019 at 6:24 AM Kesteloot, Kurt < kurt\_kesteloot@nps.gov> wrote:

Good Morning Everyone,

I emailed the lab last night requesting the temperatures. I know Mark Scott was present when samples were taken. I believe he mentioned that all samples had a temperature except the cooled thermal water reservoir.

I also requested the water meter readings for each facility. The park has water meter readings for both the cooled and hot thermal water at each location. I look forward to talking to everyone soon. I am open up to 1330 eastern time today.

Thank You and Very Respectfully,

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\_**x** 

"The NPS One Health Network: promoting and protecting the health of all species and the parks that we share." GREEN DOT

On Tue, Oct 15, 2019 at 9:21 PM Said, Maria <a href="maria-said@nps.gov">maria-said@nps.gov</a> wrote:

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We have received results of the Legionella testing at Hot Springs (attached).

Would you all have availability tomorrow to discuss?

We are not sure what to make of the detection in the hot samples (and can see if they have temperature readings from those water samples to see what the temperature actually was). We also are not sure what to make of the TimeZero vs. Standard ISO results.

Thank you as always for your help sorting through this. It is very much appreciated.

Maria

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Laura A. Miller

Superintendent

Hot Springs National Park

101 Reserve Street

Hot Springs, AR 71901

501.623.2824 870.302.9250 (cell) 501.624.1037 (fax)

www.nps.gov/hosp



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Mark C. Scott

Facility Manager

Hot Springs National Park

631 Whittington Ave.

Hot Springs, AR 71901

(501)620-6861

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health/home/disease-surveillance-response

From: Kurt Kesteloot

 Sent:
 17 Oct 2019 07:34:02 -0700

 To:
 Scott, Mark;Said, Maria

**Cc:** Smith, Jessica (CDC/DDID/NCIRD/DBD);Sara Newman;Miller, Laura;Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR);Lucas, Claressa (CDC/DDID/NCIRD/DBD);Kunz, Jasen M.

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Epidemiologist - Centers for Disease Control and Prevention

NC RD/DBD/Respiratory Diseases Branch

404.718.5205 | <u>lyd7@cdc.gov</u>

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promote-health/home/disease-surveillance-response

--

Mark C. Scott Facility Manager Hot Springs National Park 631 Whittington Ave. Hot Springs, AR 71901 (501)620-6861 From: Scott, Mark

**Sent:** 17 Oct 2019 08:10:32 -0500

To: Said, Maria

**Cc:** Smith, Jessica (CDC/DDID/NCIRD/DBD); Kesteloot, Kurt; Sara Newman; Miller, Laura; Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR); Lucas, Claressa (CDC/DDID/NCIRD/DBD); Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP); Ritter, Troy (CDC/DDNID/NCEH/DEHSP)

Subject: Re: [EXTERNAL] RE: Hot Springs - Culture results

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On Thu, Oct 17, 2019 at 8:09 AM Said, Maria <maria said@nps.gov> wrote:

Laura, Kurt, and Mark,

Is there a time on Friday that works better for you both?

Thanks.

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Thanks, Jessica

Jessica C. Smith, MPH

Epidemiologist | Centers for Disease Control and Prevention

404.718.5205 lyd7@cdc.gov

From: Kesteloot, Kurt < <u>kurt\_kesteloot@nps.gov</u>>
Sent: Wednesday, October 16, 2019 10:06 AM

To: Said, Maria < maria said@nps.gov>

Cc: Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) < npf3@cdc.gov>; Miller, Laura < laura a miller@nps.gov>; Smith, Jessica (CDC/DDID/NCIRD/DBD) < lyd7@cdc.gov>; Lucas, Claressa (CDC/DDID/NCIRD/DBD) < chl9@cdc.gov>; Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP) < izk0@cdc.gov>; Ritter, Troy (CDC/DDNID/NCEH/DEHSP) < tir4@cdc.gov>; Sara Newman

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Thanks Maria and Everyone,

I have actually already sent a meeting invite with the following number.

1-877-951-8306 access code 9958772

Thank You and Very Respectfully,

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CDR Kurt Kesteloot, PE, BCEE, USPHS Supervisory Public Health Consultant, Interior Regions 3-5 National Park Service, Office of Public Health (OPH), 601 Riverfront Drive Omaha, NE 68102

Office Phone: 1-402-661-1718 Office Fax: 1-402-661-1719 Cell Phone: 1-202-641-0055 Email: Kurt Kesteloot@nps.gov "The NPS One Health Network: promoting and protecting the health of all species and the parks that we share." GREEN DOT

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Email: Kurt\_Kesteloot@nps.gov

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Office Tel: 202-513-7151 | Email: maria said@nps.gov

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health/home/disease-surveillance-response

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Mark C. Scott Facility Manager Hot Springs National Park 631 Whittington Ave. Hot Springs, AR 71901 (501)620-6861

Sent:	17 Oct 2019 09:09:14 -0400
Γο: Cc:	Smith, Jessica (CDC/DDID/NCIRD/DBD)  Kesteloot, Kurt;Sara Newman;Mark Scott;Miller, Laura;Lee, Sooji
	DDID/NCIRD/DBD) (CTR);Lucas, Claressa (CDC/DDID/NCIRD/DBD);Kunz, Jasen M.
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Ē	Epidem ologist   Centers for Disease Control and Prevention
,	NCIRD/DBD/Respiratory Diseases Branch
/	104.718.5205   <u>lyd7@cdc.gov</u>

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**Sent:** 16 Oct 2019 14:02:12 -0400

To: Smith, Jessica (CDC/DDID/NCIRD/DBD)

**Cc:** Kesteloot, Kurt;Sara Newman;Mark Scott;Miller, Laura;Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR);Lucas, Claressa (CDC/DDID/NCIRD/DBD);Kunz, Jasen M.

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501.623.2824 870.302.9250 (cell) 501.624.1037 (fax)

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Maria Said, MD, MHS | CDR, U.S. Public Health Service Epidemiology Branch Chief | Office of Public Health | National Park Service Address: 1849 C. Street, NW, Room 2543, Mailstop 2560 | Washington, DC 20240

Office Tel: 202-513-7151 | Email: maria said@nps.gov

Website (public): https://www.nps.gov/orgs/1878/index.htm

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From: Smith, Jessica (CDC/DDID/NCIRD/DBD)

**Sent:** 16 Oct 2019 17:31:13 +0000

To: Kesteloot, Kurt; Said, Maria; Sara Newman; Mark Scott; Miller, Laura

**Cc:** Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR);Lucas, Claressa (CDC/DDID/NCIRD/DBD);Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP);Ritter, Troy

(CDC/DDNID/NCEH/DEHSP)

**Subject:** RE: [EXTERNAL] RE: Hot Springs - Culture results

Hi NPS colleagues,

Currently it looks like we're free for a follow-up call on Friday, 10/18 at 10 am and 12 pm ET. We may be able to make 2 pm work as well, I just need to confirm with Claressa when she's back in office tomorrow am. Please let me know if any of those times work for you... if not we can move things around as needed to accommodate.

Thanks, Jessica

\_

Jessica C. Smith, MPH

Epidemiologist | Centers for Disease Control and Prevention NC RD/DBD/Respiratory Diseases Branch 404.718.5205 | <u>Iyd7@cdc.gov</u>

From: Kesteloot, Kurt <kurt\_kesteloot@nps.gov>
Sent: Wednesday, October 16, 2019 10:06 AM

To: Said, Maria <maria\_said@nps.gov>

Cc: Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) <npf3@cdc.gov>; Miller, Laura <laura\_a\_miller@nps.gov>; Smith, Jessica (CDC/DDID/NCIRD/DBD) <lyd7@cdc.gov>; Lucas, Claressa (CDC/DDID/NCIRD/DBD) <chl9@cdc.gov>; Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP) <izk0@cdc.gov>; Ritter, Troy (CDC/DDNID/NCEH/DEHSP) <tir4@cdc.gov>; Sara Newman <sara\_newman@nps.gov>; Mark Scott <Mark\_Scott@nps.gov>

**Subject:** Re: [EXTERNAL] RE: Hot Springs - Culture results

Thanks Maria and Everyone,

I have actually already sent a meeting invite with the following number.

1-877-951-8306 access code 9958772

Thank You and Very Respectfully,

Kurt

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National Park Service, Office of Public Health (OPH),

601 Riverfront Drive Omaha, NE 68102

Office Phone: 1-402-661-1718 Office Fax: 1-402-661-1719 Cell Phone: 1-202-641-0055 Email: Kurt Kesteloot@nps.gov

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"The NPS One Health Network: promoting and protecting the health of all species and the parks that we share." GREEN DOT

On Wed, Oct 16, 2019 at 9:03 AM Said, Maria <maria said@nps.gov> wrote:

Great -- thank you all for making the time.

Kurt, Laura, and I can all be on a call at 10am CT/11am ET.

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I can make 1:00 pm CDT.

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From: Kesteloot, Kurt

**Sent:** 16 Oct 2019 09:05:36 -0500

To: Said, Maria

Cc: Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR);Miller, Laura;Smith, Jessica

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Office Phone: 1-402-661-1718 Office Fax: 1-402-661-1719 Cell Phone: 1-202-641-0055 Email: Kurt\_Kesteloot@nps.gov "The NPS One Health Network: promoting and protecting the health of all species and the parks that we share." GREEN DOT

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From: Said, Maria

**Sent:** 16 Oct 2019 10:04:47 -0400

To: Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR)
Cc: Miller, Laura; Kesteloot, Kurt; Smith, Jessica

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**Subject:** Re: [EXTERNAL] RE: Hot Springs - Culture results

Sorry! I see Kurt just sent out a different conference line -- let's use Kurt's line, not the one I sent out.

Maria

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(CDC/DDNID/NCEH/DEHSP) < izk0@cdc.gov >; Ritter, Troy
(CDC/DDNID/NCEH/DEHSP) < tir4@cdc.gov >; Lee, Sooji
(CDC/DDID/NCIRD/DBD) (CTR) < npf3@cdc.gov >
Cc: Laura Miller < laura a miller@nps.gov >; Sara Newman
<sara newman@nps.gov >; Mark Scott < Mark Scott@nps.gov >

**Subject:** Re: Hot Springs - Culture results

Good Morning Everyone,

Are you available around 10 a.m. central time for a call? If so, I can send a meeting invite.

Also, I have attached water use and temperatures for our discussion.

Thank You and Very Respectfully,

Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS Supervisory Public Health Consultant, Interior Regions 3-5 National Park Service, Office of Public Health (OPH), 601 Riverfront Drive Omaha, NE 68102

Office Phone: 1-402-661-1718 Office Fax: 1-402-661-1719 Cell Phone: 1-202-641-0055 Email: Kurt Kesteloot@nps.gov

×

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On Wed, Oct 16, 2019 at 6:24 AM Kesteloot, Kurt < <u>kurt\_kesteloot@nps.gov</u>> wrote:

Good Morning Everyone,

I emailed the lab last night requesting the temperatures. I know Mark Scott was present when samples were taken. I believe he mentioned that all samples had a temperature except the cooled thermal water reservoir.

I also requested the water meter readings for each facility. The park has water meter readings for both the cooled and hot thermal water at each location. I look forward to talking to everyone soon. I am open up to 1330 eastern time today.

Thank You and Very Respectfully,

Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS Supervisory Public Health Consultant, Interior Regions 3-5 National Park Service, Office of Public Health (OPH), 601 Riverfront Drive Omaha, NE 68102 Office Phone: 1-402-661-1718

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Email: Kurt Kesteloot@nps.gov

\_×

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On Tue, Oct 15, 2019 at 9:21 PM Said, Maria <maria said@nps.gov> wrote:

Hi everyone,

We have received results of the Legionella testing at Hot Springs (attached).

Would you all have availability tomorrow to discuss?

We are not sure what to make of the detection in the hot samples (and can see if they have temperature readings from those water samples to see what the temperature actually was). We also are not sure what to make of the TimeZero vs. Standard ISO results.

Thank you as always for your help sorting through this. It is very much appreciated.

Магіа

--

Laura A. Miller

Superintendent

Hot Springs National Park

101 Reserve Street

Hot Springs, AR 71901

501.623.2824 870.302.9250 (cell) 501.624.1037 (fax)

www.nps.gov/hosp

×

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Maria Said, MD, MHS | CDR, U.S. Public Health Service Epidemiology Branch Chief | Office of Public Health | National Park Service Address: 1849 C. Street, NW, Room 2543, Mailstop 2560 Washington, DC 20240

Office Tel: 202-513-7151 | Email: maria said@nps.gov

Website (public): https://www.nps.gov/orgs/1878/index.htm

Website (internal): <a href="https://sites.google.com/a/nps.gov/in2-protect-and-promote-">https://sites.google.com/a/nps.gov/in2-protect-and-promote-</a>

health/home/disease-surveillance-response

From: Smith, Jessica (CDC/DDID/NCIRD/DBD)

 Sent:
 23 Oct 2019 12:59:26 +0000

 To:
 Scott, Mark; Kesteloot, Kurt

Cc: Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP);Ritter, Troy

(CDC/DDNID/NCEH/DEHSP);Said, Maria

**Subject:** Re: [EXTERNAL] Time to talk

I can do anytime until noon today.

From: Scott, Mark <mark\_scott@nps.gov>
Sent: Wednesday, October 23, 2019 8:17:44 AM
To: Kesteloot, Kurt <kurt kesteloot@nps.gov>

**Cc:** Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP) <izk0@cdc.gov>; Smith, Jessica (CDC/DDID/NCIRD/DBD) <lyd7@cdc.gov>; Ritter, Troy (CDC/DDNID/NCEH/DEHSP)

<tir4@cdc.gov>; Said, Maria <maria said@nps.gov>

Subject: Re: [EXTERNAL] Time to talk

I will make time, just let me know.

Mark

On Wed, Oct 23, 2019 at 7:09 AM Kesteloot, Kurt < <a href="mailto:kurt\_kesteloot@nps.gov">kurt kesteloot@nps.gov</a>> wrote: Hi Jasen,

Great! Does 0930 or 1000 ET work for everyone? If so, I will set up a WebEx so we can talk about additional testing thoughts for the water system at Hot Springs National Park.

Thank You and Very Respectfully,

Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS
Supervisory Public Health Consultant, Interior Regions 3-5
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Omaha, NE 68102

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×

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the parks that we share." GREEN DOT

On Wed, Oct 23, 2019 at 7:01 AM Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP) <izk0@cdc.gov> wrote:

Kurt,

I got your message. I am free starting at 930 AM ET until noon today. I can't see Jessica or Troy's schedule but I imagine something is open during that time for them. Jess or Troy do any of these times work?

Kurt do any of these times work for you? I am starting my commute now.

Jasen

Sent from iPhone

\_\_

Mark C. Scott Facility Manager Hot Springs National Park 631 Whittington Ave. Hot Springs, AR 71901 (501)620-6861 From: Scott, Mark

**Sent:** 23 Oct 2019 07:17:44 -0500

To: Kesteloot, Kurt

**Cc:** Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP);Smith, Jessica (CDC/DDID/NCIRD/DBD);Ritter, Troy (CDC/DDNID/NCEH/DEHSP);Said, Maria

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Jasen

Sent from iPhone

--

Mark C. Scott Facility Manager Hot Springs National Park 631 Whittington Ave. Hot Springs, AR 71901 (501)620-6861 From: Kesteloot, Kurt

**Sent:** 23 Oct 2019 07:09:08 -0500

To: Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP)

Cc: Smith, Jessica (CDC/DDID/NCIRD/DBD);Ritter, Troy

(CDC/DDNID/NCEH/DEHSP);Said, Maria;Mark Scott **Subject:** Re: [EXTERNAL] Time to talk

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Kurt do any of these times work for you? I am starting my commute now.

Jasen

Sent from iPhone

From: Kesteloot, Kurt

**Sent:** 23 Oct 2019 08:26:42 -0500

To: Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP)

Cc: Smith, Jessica (CDC/DDID/NCIRD/DBD);Scott, Mark;Ritter, Troy

(CDC/DDNID/NCEH/DEHSP);Said, Maria

**Subject:** Re: [EXTERNAL] Time to talk

# Good Morning Everyone,

Thank you for agreeing to meet on short notice. I am in the process of sending a WebEx meeting invite now. If you do not receive an invite in the next 15 minutes, please let me know and I can forward the invite directly from me versus the system.

Thank You and Very Respectfully,

#### Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS Supervisory Public Health Consultant, Interior Regions 3-5 National Park Service, Office of Public Health (OPH), 601 Riverfront Drive Omaha, NE 68102

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×

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On Wed, Oct 23, 2019 at 8:20 AM Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP) < izk0@cdc.gov> wrote:

Kurt feel free to send the invite for 10.

Sent from iPhone

From: Smith, Jessica (CDC/DDID/NCIRD/DBD) < lyd7@cdc.gov>

**Sent:** Wednesday, October 23, 2019 8:59:26 AM

**To:** Scott, Mark < <u>mark\_scott@nps.gov</u>>; Kesteloot, Kurt < <u>kurt\_kesteloot@nps.gov</u>> **Cc:** Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP) < <u>izk0@cdc.gov</u>>; Ritter, Troy

(CDC/DDNID/NCEH/DEHSP) < <a href="mailto:tir4@cdc.gov">tir4@cdc.gov</a>>; Said, Maria < <a href="mailto:maria\_said@nps.gov">maria\_said@nps.gov</a>> Subject: Rc: [EXTERNAL] Time to talk

I can do anytime until noon today.

From: Scott, Mark < mark scott@nps.gov > Sent: Wednesday, October 23, 2019 8:17:44 AM To: Kesteloot, Kurt < kurt kesteloot@nps.gov >

Cc: Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP) < <u>izk0@cdc.gov</u>>; Smith, Jessica (CDC/DDID/NCIRD/DBD) < <u>lyd7@cdc.gov</u>>; Ritter, Troy (CDC/DDNID/NCEH/DEHSP)

<<u>tir4@cdc.gov</u>>; Said, Maria <<u>maria\_said@nps.gov</u>>

Subject: Re: [EXTERNAL] Time to talk

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Thank You and Very Respectfully,

Kurt

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Kurt do any of these times work for you? I am starting my commute now.

Jasen

Sent from iPhone

--

Mark C. Scott Facility Manager Hot Springs National Park 631 Whittington Ave. Hot Springs, AR 71901 (501)620-6861 From: Kesteloot, Kurt

**Sent:** 25 Nov 2019 09:56:27 -0600

**To:** Lucas, Claressa (CDC/DDID/NCIRD/DBD);Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP);Miller, Laura;Smith, Jessica (CDC/DDID/NCIRD/DBD);Said,

Maria; Mark Scott; Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR); Ritter, Troy

(CDC/DDNID/NCEH/DEHSP);Tracy Simmons;Tricia Horn;Alexandra Picavet;Robert Bryson;Peter

Budde

Cc: Sara Newman; Herbert Frost; Patricia Trap

Subject: Re: Call to Discuss The Latest Legionella Test Results from Arkansas?

Thank you for the responses everyone. It looks like tomorrow at 3 p.m. Eastern/2 p.m. Central time will be best. I will send a meeting invite for that time. If you cannot make that time, please let me know and I will try to call you to get your thoughts before the call.

Very Respectfully,

Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS Supervisory Public Health Consultant, Interior Regions 3, 4, and 5, Great Lakes, Mississippi Basin, and Missouri Basin National Park Service, Office of Public Health (OPH),

601 Riverfront Drive Omaha, NE 68102

Office Phone: 1-402-661-1718 Office Fax: 1-402-661-1719 Cell Phone: 1-202-641-0055 Email: Kurt Kesteloot@nps.gov

×

"The NPS One Health Network: promoting and protecting the health of all species and the parks that we share." GREEN DOT

On Mon, Nov 25, 2019 at 8:11 AM Kesteloot, Kurt < <a href="mailto:kurt\_kesteloot@nps.gov">kurt\_kesteloot@nps.gov</a>> wrote: Good Morning Everyone,

Is there a good time to have a call today or tomorrow regarding the latest test results from Hot Springs, AR? Ultimately, there was one positive sample. That sample came from a long waterline that was flushed but has had little to no use over the last several years. So, I believe the flushing has shown to be one effective step in lowering the risk

of Legionella in the water. It would be great to talk to other experts from CDC to hear your perspective.

It would also be great to talk about a press release on the latest round of test results.

There are several other questions to ask and discuss.

On the call I would like to discuss the following:

- 1. The latest test results and procedure for sampling prior to sampling
- 2. A list of questions I have
- 3. Press release information
- 4. Any additional questions or public health concerns
- 5. Long-Term plans for drinking water and recreational water
- 6. Planning for a call with the State Health Department

I look forward to connecting with everyone soon and appreciate any collaboration on this important National Park resource and public health matter.

Thank You and Very Respectfully,

## Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS
Supervisory Public Health Consultant, Interior Regions 3, 4, and 5, Great Lakes,
Mississippi Basin, and Missouri Basin
National Park Service, Office of Public Health (OPH),
601 Riverfront Drive
Omaha, NE 68102

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From: Ritter, Troy (CDC/DDNID/NCEH/DEHSP)

**Sent:** 25 Nov 2019 15:24:06 +0000

To:Smith, Jessica (CDC/DDID/NCIRD/DBD); Kesteloot, KurtCc:Lucas, Claressa (CDC/DDID/NCIRD/DBD); Kunz, Jasen M.

(CDC/DDNID/NCEH/DEHSP);Said, Maria;Mark Scott;Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR);Tracy Simmons;Tricia Horn;Robert Bryson;Peter Budde;Sara Newman;Herbert

Frost; Patricia Trap; Picavet, Alexandra; Miller, Laura

**Subject:** Re: Call to Discuss The Latest Legionella Test Results from Arkansas?

Tomorrow between 10-11 am would work best for me.

Troy

## Get Outlook for iOS

From: Smith, Jessica (CDC/DDID/NCIRD/DBD) < lyd7@cdc.gov>

Sent: Monday, November 25, 2019 9:44:15 AM To: Kesteloot, Kurt <kurt\_kesteloot@nps.gov>

Cc: Lucas, Claressa (CDC/DDID/NCIRD/DBD) <chl9@edc.gov>; Kunz, Jasen M.

(CDC/DDNID/NCEH/DEHSP) <izk0@cdc.gov>; Said, Maria <maria\_said@nps.gov>; Mark Scott <mark scott@nps.gov>; Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) <npf3@cdc.gov>;

Ritter, Troy (CDC/DDNID/NCEH/DEHSP) < tir4@cdc.gov>; Tracy Simmons < tracy\_simmons@nps.gov>; Tricia Horn < tricia\_horn@nps.gov>; Robert Bryson < robert\_bryson@nps.gov>; Peter Budde < peter\_budde@nps.gov>; Sara Newman < sara\_newman@nps.gov>; Herbert Frost < bert\_frost@nps.gov>; Patricia Trap

<Patricia\_Trap@nps.gov>; Picavet, Alexandra <alexandra\_picavet@nps.gov>; Miller, Laura <alexandra\_picavet@nps.gov>; Miller, Laura <alexandra\_picavet@nps.gov>

Subject: RE: Call to Discuss The Latest Legionella Test Results from Arkansas?

Good morning Kurt,

From the CDC side, Claressa and I are available this afternoon between 2:00-5:00 pm and tomorrow from either 10:00-11:00 am or between 1:00-5:00 pm (all times ET). I know Jasen is out of office this week but I'm not sure about Troy's availability.

Thanks, Jessica

—

Jessica C. Smith, MPH

Epidemiologist | Centers for Disease Control and Prevention NCIRD/DBD/Respiratory Diseases Branch 404.718.5205 | lyd7@cdc.gov

From: Picavet, Alexandra <alexandra picavet@nps.gov>

**Sent:** Monday, November 25, 2019 9:35 AM **To:** Miller, Laura <a href="mailto:laura\_a\_miller@nps.gov">laura\_a\_miller@nps.gov</a>

Cc: Kesteloot, Kurt <kurt\_kesteloot@nps.gov>; Lucas, Claressa (CDC/DDID/NCIRD/DBD)
<chl9@cdc.gov>; Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP) <izk0@cdc.gov>; Smith, Jessica

(CDC/DDID/NCIRD/DBD) < lyd7@cdc.gov>; Said, Maria < maria\_said@nps.gov>; Mark Scott < mark\_scott@nps.gov>; Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) < npf3@cdc.gov>; Ritter, Troy (CDC/DDNID/NCEH/DEHSP) < tir4@cdc.gov>; Tracy Simmons < tracy\_simmons@nps.gov>; Tricia Horn < tricia\_horn@nps.gov>; Robert Bryson < robert\_bryson@nps.gov>; Peter Budde < peter\_budde@nps.gov>; Sara Newman < sara\_newman@nps.gov>; Herbert Frost < bert\_frost@nps.gov>; Patricia Trap < Patricia\_Trap@nps.gov>
Subject: Re: Call to Discuss The Latest Legionella Test Results from Arkansas?

I am available.

Alexandra Picavet
Chief of Communications, Legislative Affairs and Partnerships
DOI Regions 3, 4, 5
National Park Service
402-661-1840 (office)
alexandra\_picavet@nps.gov
www.nps.gov/

On Mon, Nov 25, 2019 at 8:17 AM Miller, Laura < a miller@nps.gov > wrote:

Hey Kurt,

Mark is out this week, but I'm here and can be available today or tomorrow. I do have two calls scheduled for today - at 10:15 am CST and at 1:00 pm CST - otherwise I'm free. Tomorrow is completely free.

Thanks! Laura

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Thank You and Very Respectfully,

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National Park Service, Office of Public Health (OPH),
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Office Fax: 1-402-661-1719
Cell Phone: 1-202-641-0055
Email: <u>Kurt\_Kesteloot@nps.gov</u>

×

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Laura A. Miller
Superintendent
Hot Springs National Park
101 Reserve Street
Hot Springs, AR 71901
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870.302.9250 (cell)
501.624.1037 (fax)
www.nps.gov/hosp

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From: Smith, Jessica (CDC/DDID/NCIRD/DBD)

**Sent:** 25 Nov 2019 14:44:15 +0000

To: Kesteloot, Kurt

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Newman; Herbert Frost; Patricia Trap; Picavet, Alexandra; Miller, Laura

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Thanks, Jessica

\_

#### Jessica C. Smith, MPH

Epidemiologist | Centers for Disease Control and Prevention NC RD/D3D/Respiratory Diseases Branch 404.718.5205 | lyd7@cdc.gov

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Cc: Kesteloot, Kurt <kurt\_kesteloot@nps.gov>; Lucas, Claressa (CDC/DDID/NCIRD/DBD) <chl9@cdc.gov>; Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP) <izk0@cdc.gov>; Smith, Jessica (CDC/DDID/NCIRD/DBD) <lyd7@cdc.gov>; Said, Maria <maria\_said@nps.gov>; Mark Scott <mark\_scott@nps.gov>; Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) <npf3@cdc.gov>; Ritter, Troy (CDC/DDNID/NCEH/DEHSP) <tir4@cdc.gov>; Tracy Simmons <tracy\_simmons@nps.gov>; Tricia Horn <tricia\_horn@nps.gov>; Robert Bryson <robert\_bryson@nps.gov>; Peter Budde <peter\_budde@nps.gov>; Sara Newman <sara\_newman@nps.gov>; Herbert Frost <br/><br/>
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DOI Regions 3, 4, 5
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Omaha, NE 68102

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Office Fax: 1-402-661-1719
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Email: <u>Kurt\_Kesteloot@nps.gov</u>



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--

Laura A. Miller
Superintendent
Hot Springs National Park
101 Reserve Street
Hot Springs, AR 71901
501.623.2824
870.302.9250 (cell)
501.624.1037 (fax)
www.nps.gov/hosp



From: Frost, Herbert

**Sent:** 25 Nov 2019 08:42:50 -0600

To: Miller, Laura

**Cc:** Kesteloot, Kurt;Lucas, Claressa (CDC/DDID/NCIRD/DBD);Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP);Smith, Jessica (CDC/DDID/NCIRD/DBD);Said, Maria;Mark Scott;Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR);Ritter, Troy (CDC/DDNID/NCEH/DEHSP);Tracy

Simmons; Tricia Horn; Alexandra Picavet; Robert Bryson; Peter Budde; Sara Newman; Patricia Trap **Subject:** Re: Call to Discuss The Latest Legionella Test Results from Arkansas?

I am around through Wed.

Bert

Herbert C. Frost, Ph.D., Regional Director

National Park Service

Interior Region 3 (Great Lakes): Region 4 (Mississippi Basin): Region 5 (Missouri Basin)

602 Riverfront Drive Omaha, NE 68102

402-661-1520 - Office

On Mon, Nov 25, 2019 at 8:17 AM Miller, Laura < laura a miller@nps.gov > wrote: Hey Kurt,

Mark is out this week, but I'm here and can be available today or tomorrow. I do have two calls scheduled for today - at 10:15 am CST and at 1:00 pm CST - otherwise I'm free. Tomorrow is completely free.

Thanks! Laura

On Mon, Nov 25, 2019 at 8:12 AM Kesteloot, Kurt < <u>kurt\_kesteloot@nps.gov</u>> wrote: Good Morning Everyone,

Is there a good time to have a call today or tomorrow regarding the latest test results from Hot Springs, AR? Ultimately, there was one positive sample. That sample came from a long waterline that was flushed but has had little to no use over the last several years. So, I believe the flushing has shown to be one effective step in lowering the risk of Legionella in the water. It would be great to talk to other experts from CDC to hear your perspective.

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- 2. A list of questions I have
- 3. Press release information
- 4. Any additional questions or public health concerns
- 5. Long-Term plans for drinking water and recreational water
- 6. Planning for a call with the State Health Department

I look forward to connecting with everyone soon and appreciate any collaboration on this important National Park resource and public health matter.

Thank You and Very Respectfully,

#### Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS

Supervisory Public Health Consultant, Interior Regions 3, 4, and 5, Great Lakes, Mississippi Basin, and Missouri Basin

National Park Service, Office of Public Health (OPH),

601 Riverfront Drive Omaha, NE 68102

Office Phone: 1-402-661-1718 Office Fax: 1-402-661-1719 Cell Phone: 1-202-641-0055 Email: Kurt Kesteloot@nps.gov

\_×

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Laura A. Miller Superintendent Hot Springs National Park 101 Reserve Street Hot Springs, AR 71901 501.623.2824 870.302.9250 (cell) 501.624.1037 (fax) www.nps.gov/hosp From: Picavet, Alexandra

**Sent:** 25 Nov 2019 08:35:16 -0600

To: Miller, Laura

**Cc:** Kesteloot, Kurt;Lucas, Claressa (CDC/DDID/NCIRD/DBD);Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP);Smith, Jessica (CDC/DDID/NCIRD/DBD);Said, Maria;Mark Scott;Lee,

Sooji (CDC/DDID/NCIRD/DBD) (CTR);Ritter, Troy (CDC/DDNID/NCEH/DEHSP);Tracy

Simmons; Tricia Horn; Robert Bryson; Peter Budde; Sara Newman; Herbert Frost; Patricia Trap **Subject:** Re: Call to Discuss The Latest Legionella Test Results from Arkansas?

I am available.

Alexandra Picavet
Chief of Communications, Legislative Affairs and Partnerships
DOI Regions 3, 4, 5
National Park Service
402-661-1840 (office)
alexandra\_picavet@nps.gov
www.nps.gov/

On Mon, Nov 25, 2019 at 8:17 AM Miller, Laura < laura\_a\_miller@nps.gov > wrote: Hey Kurt,

Mark is out this week, but I'm here and can be available today or tomorrow. I do have two calls scheduled for today - at 10:15 am CST and at 1:00 pm CST - otherwise I'm free. Tomorrow is completely free.

Thanks! Laura

On Mon, Nov 25, 2019 at 8:12 AM Kesteloot, Kurt < <a href="kurt\_kesteloot@nps.gov">kurt <a href="kurt\_kestel

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CDR Kurt Kesteloot, PE, BCEE, USPHS
Supervisory Public Health Consultant, Interior Regions 3, 4, and 5, Great Lakes,
Mississippi Basin, and Missouri Basin
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Laura A. Miller Superintendent Hot Springs National Park 101 Reserve Street Hot Springs, AR 71901 501.623.2824 870.302.9250 (cell) 501.624.1037 (fax) www.nps.gov/hosp

×

From: Miller, Laura

**Sent:** 25 Nov 2019 08:17:02 -0600

To: Kesteloot, Kurt

Cc: Lucas, Claressa (CDC/DDID/NCIRD/DBD);Kunz, Jasen M.

(CDC/DDNID/NCEH/DEHSP);Smith, Jessica (CDC/DDID/NCIRD/DBD);Said, Maria;Mark Scott;Lee,

Sooji (CDC/DDID/NCIRD/DBD) (CTR);Ritter, Troy (CDC/DDNID/NCEH/DEHSP);Tracy

Simmons;Tricia Horn;Alexandra Picavet;Robert Bryson;Peter Budde;Sara Newman;Herbert

Frost; Patricia Trap

**Subject:** Re: Call to Discuss The Latest Legionella Test Results from Arkansas?

## Hey Kurt,

Mark is out this week, but I'm here and can be available today or tomorrow. I do have two calls scheduled for today - at 10:15 am CST and at 1:00 pm CST - otherwise I'm free. Tomorrow is completely free.

Thanks!

Laura

On Mon, Nov 25, 2019 at 8:12 AM Kesteloot, Kurt < <a href="mailto:kurt\_kesteloot@nps.gov">kurt kesteloot@nps.gov</a>> wrote: Good Morning Everyone,

Is there a good time to have a call today or tomorrow regarding the latest test results from Hot Springs, AR? Ultimately, there was one positive sample. That sample came from a long waterline that was flushed but has had little to no use over the last several years. So, I believe the flushing has shown to be one effective step in lowering the risk of Legionella in the water. It would be great to talk to other experts from CDC to hear your perspective.

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#### Thank You and Very Respectfully,

#### Kurt

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Laura A. Miller Superintendent Hot Springs National Park 101 Reserve Street Hot Springs, AR 71901 501.623.2824 870.302.9250 (cell) 501.624.1037 (fax) www.nps.gov/hosp

×

From: Said, Maria

**Sent:** 26 Nov 2019 10:00:25 -0500

To: Kesteloot, Kurt

Cc: Lucas, Claressa (CDC/DDID/NCIRD/DBD);Kunz, Jasen M.

(CDC/DDNID/NCEH/DEHSP); Miller, Laura; Smith, Jessica (CDC/DDID/NCIRD/DBD); Mark Scott; Lee,

Sooji (CDC/DDID/NCIRD/DBD) (CTR);Ritter, Troy (CDC/DDNID/NCEH/DEHSP);Tracy

Simmons; Tricia Horn; Alexandra Picavet; Robert Bryson; Peter Budde; Sara Newman; Herbert

Frost;Patricia Trap;Gwendolyn Ruppert

**Subject:** Re: Call to Discuss The Latest Legionella Test Results from Arkansas?

Hi all,

I won't be able to join the call this afternoon but will stay informed about what you all talk about.

Kurt, I think your agenda for the meeting looks really good. A couple of additional questions I have are:

- 1) What should water management plans look like? Should they include legionella testing and if so, how frequently? And what, typically, is the appropriate response to positive legionella culture results that might be identified during legionella testing as part of a water management plan? My understanding is that the response is different in terms of public notification than it would be in the context of human cases or an outbreak.
- 2) What are good ways to describe the difference between PCR positivity and culture positivity in a press release without actually talking about PCR and culture? I think we want to relay to the public that this is natural water and that there may be risk/bacteria present, BUT that with good water management that includes flow, high temperature or whatever, the bacteria are not viable and should not present a public health risk.

I am available Wednesday and probably Friday to help with a press release if needed. I'm adding Gwen Ruppert to the chain -- she is a CDC Public Health Associate who is with us in the NPS Office of Public Health for the year and will join the call this afternoon.

Thank you!

Maria

On Mon, Nov 25, 2019 at 10:57 AM Kesteloot, Kurt < kurt kesteloot@nps.gov > wrote: Thank you for the responses everyone. It looks like tomorrow at 3 p.m. Eastern/2 p.m. Central time will be best. I will send a meeting invite for that time. If you cannot make that time, please let me know and I will try to call you to get your thoughts before the call.

Very Respectfully,

Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS

Supervisory Public Health Consultant, Interior Regions 3, 4, and 5, Great Lakes, Mississippi Basin, and Missouri Basin National Park Service, Office of Public Health (OPH),

601 Riverfront Drive Omaha, NE 68102

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On Mon, Nov 25, 2019 at 8:11 AM Kesteloot, Kurt < <a href="mailto:kurt\_kesteloot@nps.gov">kurt kesteloot@nps.gov</a>> wrote: Good Morning Everyone,

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I look forward to connecting with everyone soon and appreciate any collaboration on this important National Park resource and public health matter.

Thank You and Very Respectfully,

Kurt

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Maria Said, MD, MHS | CDR, U.S. Public Health Service Epidemiology Branch Chief | Office of Public Health | National Park Service

Address: 1849 C. Street, NW, Room 2543, Mailstop 2560 Washington, DC 20240

Office Tel: 202-513-7151 | Email: maria said@nps.gov

Website (public): https://www.nps.gov/orgs/1878/index.htm

Website (internal): https://sites.google.com/a/nps.gov/in2-protect-and-promote-

health/home/disease-surveillance-response

	1 Oct 2019 16:51:29 +0000				
o: Kozak-Muiznieks, Natalia A. (CDC/DDID/NCIRD/DBD);Kunz, Jasen M.					
	H/DEHSP);Ritter, Troy (CDC/DDNID/NCEH/DEHSP);Lucas, Claressa				
(CDC/DDID/NCIRE					
Subject:	RE: Hot Springs and Water management plans				
Yeah, and	(b)( <del>3</del> )				
	(b)(3)				
Sent: Tuesday, O To: Kunz, Jasen M <lyd7@cdc.gov>; (CDC/DDID/NCIR</lyd7@cdc.gov>	znieks, Natalia A. (CDC/DDID/NCIRD/DBD) <a href="https://doi.org/10.2019/12:49">https://docs.gov&gt;ctober 1, 2019 12:49 PM</a> <a href="https://docs.gov/nceh/DEHSP">https://docs.gov/nceh/DEHSP</a> ) <a h<="" td=""></a>				
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I think	(p)(2)				
From: Kunz, Jase	n M. (CDC/DDNID/NCEH/DEHSP) < <u>izk0@cdc.gov</u> >				
<b>Sent:</b> Tuesday, O <b>To:</b> Kozak-Muizni (CDC/DDID/NCIR Lucas, Claressa (G	n M. (CDC/DDNID/NCEH/DEHSP) < izk0@cdc.gov> ctober 1, 2019 12:29 PM eks, Natalia A. (CDC/DDID/NCIRD/DBD) < http2@cdc.gov>; Smith, Jessica D/DBD) < iyd7@cdc.gov>; Ritter, Troy (CDC/DDNID/NCEH/DEHSP) < tir4@cdc.gov>; CDC/DDID/NCIRD/DBD) < chl9@cdc.gov> Springs and Water management plans				
Sent: Tuesday, O To: Kozak-Muizni (CDC/DDID/NCIR Lucas, Claressa (G Subject: RE: Hot	ctober 1, 2019 12:29 PM eks, Natalia A. (CDC/DDID/NCIRD/DBD) < <u>htv2@cdc.gov</u> >; Smith, Jessica D/DBD) < <u>lyd7@cdc.gov</u> >; Ritter, Troy (CDC/DDNID/NCEH/DEHSP) < <u>tir4@cdc.gov</u> >; CDC/DDID/NCIRD/DBD) < <u>chl9@cdc.gov</u> >				
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Smith, Jessica (CDC/DDID/NCIRD/DBD)

From:

(b)(3)
From: Kozak-Muiznieks, Natalia A. (CDC/DDID/NCIRD/DBD) <

Thank you, Natalia

From: Smith, Jessica (CDC/DDID/NCIRD/DBD) < lyd7@cdc.gov>

Sent: Tuesday, October 1, 2019 10:27 AM

**To:** Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP) < <u>izk0@cdc.gov</u>>; Ritter, Troy (CDC/DDNID/NCEH/DEHSP) < <u>tir4@cdc.gov</u>>; Lucas, Claressa (CDC/DDID/NCIRD/DBD) < <u>chl9@cdc.gov</u>>; Kozak-Muiznieks, Natalia A. (CDC/DDID/NCIRD/DBD) < <u>htv2@cdc.gov</u>>

Subject: RE: Hot Springs and Water management plans

Hi all — Before this call at 2 pm to relevant:	oday, I thought I'd pass along this guidance from	m Japan that seems
	(p)( <del>2</del> )	
	(p)(2)	

----Original Appointment----

**From:** Smith, Jessica (CDC/DDID/NCIRD/DBD) **Sent:** Wednesday, September 18, 2019 5:05 PM

To: Smith, Jessica (CDC/DDID/NCIRD/DBD); Said, Maria; Kesteloot, Kurt; Ritter, Troy

(CDC/DDNID/NCEH/DEHSP); Edens, William (Chris) (CDC/DDID/NCIRD/DBD)

**Cc:** Cooley, Laura A. (CDC/DDID/NCIRD/DBD); James, Allison (CDC arkansas.gov); Lucas, Claressa (CDC/DDID/NCIRD/DBD); Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP); Kozak-Muiznieks, Natalia A.

(CDC/DDID/NCIRD/DBD)

Subject: Hot Springs and Water management plans

When: Tuesday, October 1, 2019 2:00 PM-3:00 PM (UTC-05:00) Eastern Time (US & Canada).

Where: Skype Meeting

Thanks Maria and Kurt. Let's shoot for 10/1 at 2:00 pm ET, but we can move it if needed.

And please feel free to forward the invitation to Laura Miller or any other folks that you think may be interested in joining (same for the AR DOH side, Allison).

Jessica	
Join Skype Meeting Trouble Joining? Try Skype Web App	
Join by phone	
(404) 553-8912, (Atlanta Dial-in Conference Region)	English (United States)
(855) 348-8390,, (b)(6) Atlanta Dial-in Conference Region)	English (United States)
Find a local number	
Conference ID: (b)(6)	
Forgot your dial-in PIN?   Help	

**From:** Said, Maria <<u>maria\_said@nps.gov</u>>

**Sent:** Wednesday, September 18, 2019 3:01 PM **To:** Kesteloot, Kurt <<u>kurt\_kesteloot@nps.gov</u>>

**Cc:** Smith, Jessica (CDC/DDID/NCIRD/DBD) < <a href="mailto:liver-nc-arises-

Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP) < izk0@cdc.gov>

Subject: Re: [EXTERNAL] RE: Hot Springs and Water management plans

Hi Kurt,

I think the call will focus on water management plans -- if you think the park would be interested in being part of that discussion, I think it would be fine. We can add Laura Miller and whoever else might be interested in the calendar invite once we have a day/time.

Maria

On Wed, Sep 18, 2019 at 1:49 PM Kesteloot, Kurt < <a href="mailto:kurt\_kesteloot@nps.gov">kurt <a href="mailto:

I'm fairly open that week and look forward to talking more. Should we invite a couple people from the Park?

Thank You and Very Respectfully,

Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS
Supervisory Public Health Consultant, Interior Regions 3-5
National Park Service, Office of Public Health (OPH),
601 Riverfront Drive
Omaha, NE 68102
Office Phone: 1-402-661-1718

Office Fax: 1-402-661-1719
Cell Phone: 1-202-641-0055
Email: <u>Kurt\_Kesteloot@nps.gov</u>

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"The NPS One Health Network: promoting and protecting the health of all species and the parks that we share." GREEN DOT

On Wed, Sep 18, 2019 at 11:45 AM Said, Maria < maria said@nps.gov > wrote:

Fantastic.

Tuesday 10/1 is wide open for me too.

The rest of that week I'll be at the IDSA conference and could step out if need be, but it would be less ideal.

Thank you!

Maria

On Wed, Sep 18, 2019 at 11:23 AM Smith, Jessica (CDC/DDID/NCIRD/DBD) < <a href="https://lyd7@cdc.gov">lyd7@cdc.gov</a> wrote:

Hi Maria,

We're happy to reconvene to discuss WMPs at Hot Springs. Starting tomorrow Troy is going to be traveling internationally, but he's back in the office on the 30<sup>th</sup> if we could shoot for a time that week? I'm also looping in Jasen and Claressa in case they can join too, since they bring the

ASHRAE perspective and Claressa may be able to speak to the ecology of *Legionella* in this setting.

Right now it looks like Tuesday, 10/1 is wide open for us. Thurs, 10/3 we're free at 3:00 pm and then Friday, 10/4 at 1:00 pm and 3:00 pm ET.

Also, I was hoping we would have heard back from colleagues in Japan by now about any public health recommendations they have for similar settings, but unfortunately we haven't. I do think by the week of the 30<sup>th</sup> I should be able to do a quick lit review about cases and clusters associated with hot springs and can share any pertinent findings during the call.

Thanks, Jessica

—

#### Jessica C. Smith, MPH

Epidemiologist | Centers for Disease Control and Prevention NCIRD/DBD/Respiratory Diseases Branch 404.718.5205 | lyd7@cdc.gov

From: Said, Maria <maria said@nps.gov>

Sent: Wednesday, September 18, 2019 9:22 AM

**To:** Cooley, Laura A. (CDC/DDID/NCIRD/DBD) < whz3@cdc.gov>; Smith, Jessica (CDC/DDID/NCIRD/DBD) < lyd7@cdc.gov>; Ritter, Troy (CDC/DDNID/NCEH/DEHSP) < tir4@cdc.gov>; James, Allison (CDC arkansas.gov) < allison.james@arkansas.gov>; Kesteloot,

Kurt <kurt\_kesteloot@nps.gov>

Subject: Hot Springs and Water management plans

Hi Laura, Jessica, and Troy,

We (NPS and Arkansas) are trying to figure out the best path forward with the Hot Springs legionella cases. As you know, all the environmental testing has been negative. However, we have had a number of travel-related cases, and, based on Arkansas state data, it looks like there might be increased cases in the Hot Springs area generally compared to the rest of the state -- although these data are still being analyzed, and I would leave it to Arkansas to confirm this.

We also have considered more where the hot spring water is going -- apparently, it does not just go to the Quapaw, but it goes to a number of other concession operated businesses (including another spa) as well businesses outside park property (including a hospital therapeutic pool and at least one other hotel). One action we are considering is sending a letter to those who receive spa water and basically recommending that although we have never identified legionella in the water and don't know of any increased risk, we do know that untreated water does pose a risk for legionella growth, and businesses might want to consider a water management plan. My feeling is that it would be beneficial to them, if we have an additional case, to then be able to clearly describe their water system and the results of some pre-determined parameters (such as temperatures) over time.

If you all are available at any time, I would love to get your thoughts. Some questions I have are:

- Is a water management plan appropriate even for those buildings that don't meet ASHRAE building guidance criteria?
- Is a water management plan needed for only places that don't disinfect? I know that water management plans are used by many systems in which chlorine is used, but in this case, in which we don't have any evidence of Legionella growth in the hot spring water, I don't think we can or should point to hot spring water as a particular Legionella risk -- the risk in my mind is just from the fact that it is not disinfected.
- Should any of the water management plans include legionella testing? I think the Quapaw might consider this -- but then what would be the guidance if they get positive results?

I am including Allison, the new EIS officer for Arkansas on the thread. Dirk Haselow is no longer with the state health department.

Thanks for any thoughts on this. Hope you guys are well. Maria

--

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Sent:	1 Oct 2019 16:49:11 +0000				
To:	Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP);Smith, Jessica				
(CDC/DDID/NCIRD/	/DBD);Ritter, Troy (CDC/DDNID/NCEH/DEHSP);Lucas, Claressa				
(CDC/DDID/NCIRD/	/DBD)				
Subject:	RE: Hot Springs and Water management plans				
Attachments: FrenchHotSprings2001.pdf					
<u>I think</u>	(b)( <del>3</del> )				
	(p)( <del>2</del> )				
From: Kunz Jacon	M. (CDC/DDNID/NCEH/DEHSP) <izk0@cdc.gov></izk0@cdc.gov>				
	the state of the s				
•	tober 1, 2019 12:29 PM				
	cks, Natalia A. (CDC/DDID/NCIRD/DBD)				

Kozak-Muiznieks, Natalia A. (CDC/DDID/NCIRD/DBD)

From:

(p)(3)
From: Kozak-Muiznieks, Natalia A. (CDC/DDID/NCIRD/DBD) < <a href="https://documents.nih.gov/htv2@cdc.gov">htv2@cdc.gov</a> Sent: Tuesday, October 1, 2019 11:45 AM
To: Smith, Jessica (CDC/DDID/NCIRD/DBD) < lyd7@cdc.gov >; Kunz, Jasen M.
(CDC/DDNID/NCEH/DEHSP) < izk0@cdc.gov >; Ritter, Troy (CDC/DDNID/NCEH/DEHSP) < tir4@cdc.gov >;
Lucas, Claressa (CDC/DDID/NCIRD/DBD) < chi9@cdc.gov>
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(b)( <b>3</b> )

Natalia

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Sent: Tuesday, October 1, 2019 10:27 AM

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	(p)( <b>2</b> )		

To: Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP) < izk0@cdc.gov >; Ritter, Troy

----Original Appointment----

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To: Smith, Jessica (CDC/DDID/NCIRD/DBD); Said, Maria; Kesteloot, Kurt; Ritter, Troy

(CDC/DDNID/NCEH/DEHSP); Edens, William (Chris) (CDC/DDID/NCIRD/DBD)

**Cc:** Cooley, Laura A. (CDC/DDID/NCIRD/DBD); James, Allison (CDC arkansas.gov); Lucas, Claressa (CDC/DDID/NCIRD/DBD); Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP); Kozak-Muiznieks, Natalia A.

(CDC/DDID/NCIRD/DBD)

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Where: Skype Meeting

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From: Said, Maria < maria said@nps.gov>

Sent: Wednesday, September 18, 2019 3:01 PM To: Kesteloot, Kurt < kurt kesteloot@nps.gov>

**Cc:** Smith, Jessica (CDC/DDID/NCIRD/DBD) < <a href="mailto:liver-nc-edge-nc-e

Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP) < izk0@cdc.gov>

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CDR Kurt Kesteloot, PE, BCEE, USPHS
Supervisory Public Health Consultant, Interior Regions 3-5
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601 Riverfront Drive
Omaha, NE 68102
Office Phone: 1-402-661-1718

Office Fax: 1-402-661-1719
Cell Phone: 1-202-641-0055
Email: <u>Kurt\_Kesteloot@nps.gov</u>

×

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#### Jessica C. Smith, MPH

Epidemiologist | Centers for Disease Control and Prevention NCIRD/DBD/Respiratory Diseases Branch 404.718.5205 | lyd7@cdc.gov

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Sent: Wednesday, September 18, 2019 9:22 AM

**To:** Cooley, Laura A. (CDC/DDID/NCIRD/DBD) < whz3@cdc.gov >; Smith, Jessica (CDC/DDID/NCIRD/DBD) < lyd7@cdc.gov >; Ritter, Troy (CDC/DDNID/NCEH/DEHSP) < tir4@cdc.gov >; James, Allison (CDC arkansas.gov) < allison.james@arkansas.gov >; Kesteloot,

Kurt <kurt\_kesteloot@nps.gov>

Subject: Hot Springs and Water management plans

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From:	Kozak-Muiznieks, Natalia A. (CDC/DDID/NCIRD/DBD)
Sent:	1 Oct 2019 15:45:09 +0000
То:	Smith, Jessica (CDC/DDID/NCIRD/DBD);Kunz, Jasen M.
	HSP);Ritter, Troy (CDC/DDNID/NCEH/DEHSP);Lucas, Claressa
(CDC/DDID/NCIRD/DBD	
Subject:	RE: Hot Springs and Water management plans
Attachments:	HotSprings2009Kurosawa.pdf, LargestHotSpringOutbreak2004.pdf,
Legionella_RecWaters2	018.pdf
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•	C/DDNID/NCEH/DEHSP) <izk0@cdc.gov>; Ritter, Troy</izk0@cdc.gov>
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#### Laboratory and Epidemiology Communications

### A Case of *Legionella* Pneumonia Linked to a Hot Spring Facility in Gunma Prefecture, Japan

Hajime Kurosawa\*, Masahiro Fujita, Satoshi Kobatake, Hirokazu Kimura¹, Mitsuko Ohshima², Akira Nagai², Shingaku Kaneko³, Yasuki Iwasaki³, and Kunihisa Kozawa

Gunma Prefectural Institute of Public Health and Environmental Sciences, Gunma 371-0052; <sup>1</sup>Infectious Disease Surveillance Center, National Institute of Infectious Diseases, Tokyo 208-0011; <sup>2</sup>Gunma Prefectural Government, Gunma 371-8570; and <sup>3</sup>Maebashi Red Cross Hospital, Gunma 371-0014, Japan

Communicated by Masahiko Makino

(Accepted December 18, 2009)

Legionnaires' disease, which manifests as pneumonia or the less severe Pontiac fever, has been associated with hot spring facilities and public bath houses in Japan (1). Recent studies suggest the incidence of *Legionella* pneumonia in Japan is increasing (2). Here, we describe a case of *Legionella* pneumonia and identify the probable source of infection as the water from a hot spring facility in Macbashi-shi, Gunma Prefecture, Japan.

The case involves a 64-year-old Japanese male with diabetes mellitus. In February 2008, he often used the same hot spring facility near his home. On February 20, he developed symptoms including a low-grade fever (37.0°C) and a cough. He presented at Maebashi Red Cross Hospital with a high

fever (39.6°C) on February 26 (hospital day 1), with the following clinical data: leukocyte count,  $11.3 \times 10^3/\mu L$  (normal range, 4.0–9.0  $\times$   $10^3/\mu L$ ); platelet count,  $1.36 \times 10^3/\mu L$  (1.8–3.5  $\times$   $10^3/\mu L$ ); and C-reactive protein level, 24.3 mg/dL (<0.5 mg/dL). Aspartate aminotransferase (AST) and alanine aminotransferase (ALT) were 635 U/L (normal range, 13–33 U/L) and 150 U/L (8–42 U/L), respectively. Renal function was slightly deteriorated (blood urea nitrogen [BUN] value, 28 mg/dL; normal range, 0–20 mg/dL). In addition, chest radiography showed consolidation with an air bronchogram on the bilateral lung. Collectively, the clinical data suggested bacterial pneumonia, complicated by abnormal liver function and low-grade renal failure.

He was given the standard treatment for bacterial pneumonia, including the provision of oxygen (5 L/min) and the administration of the antibiotics ciprofloxacin (600 mg/day, days 1 to 24) and sulfamethoxazole/trimethoprim (800 mg/day, days 2 to 12). The lung lesion showed improvement from hospital day 4 onwards. Aspirated sputum samples were

<sup>\*</sup>Corresponding author: Mailing address: Gunma Prefectural Institute of Public Health and Environmental Sciences, 378 Kamiokimachi, Macbashi-shi, Gunma 371-0052, Japan. Tel: +81-27-232-4881, Fax: -81-27-234-8438, E-mail: kurosawa-ha@pref.gunma.ip

collected and examined by bacterial culture using WYO $\alpha$  agar (Eiken Chemical Co., Ltd, Tokyo, Japan). Legionella pneumophila antigen was detected in a urine sample using an immunochromatographic assay (Duopath Legionella; Merck KGaA, Darmstadt, Germany) and the bacterium was isolated from the patient's sputum. A diagnosis of Legionella pneumonia was therefore confirmed.

Epidemiological data regarding the patient's visit to the hot spring and the subsequent detection and isolation of *L. pneumophila* led the patient's physician to suspect the site of the infection was contaminated water at the hot spring facility. The physician filed with Gunma Prefectural Maebashi Health Center a surveillance report of *L. pneumophila* infection possibly linked to a hot spring.

To confirm the source of L. pneumophila, we collected water samples from the relevant hot spring and examined the sample using GVPC agar (bioMérieux, Marcy l'Etoile, France). L. pneumophila was detected in the water sample. The isolates of L. pneumophila from the patient and hot spring water were identified as serogroup (SG) 1. Using polymerase chain reaction (PCR), we genotyped these isolates as previously described (3,4). In addition, the PCR products, or amplicons, were examined by agarose gel electrophoresis and the isolates from the patient and hot spring water were genotyped as L. pneumophila (Fig. 1). We then performed pulsed-field gel electrophoresis (PFGE) with endonuclease Sfil, as previously described (5). PFGE band patterns between isolates taken from the patient and the hot spring water were conclusively matched (Fig. 2), and the isolates were genotyped as L. pneumophila (SG1). On the basis of these data, the hot spring operators were deemed in violation of the Public Bath House Law (Issue 7, Item 1) and the Director of the Gunma Prefectural Maebashi Health Center ordered the bath house to close for 2 weeks.

L. pneumophila is the causative agent of Legionella pneumonia and Pontiac fever. This pathogen parasitizes amoeba

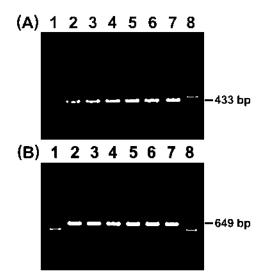


Fig. 1. Agarose gel electrophoresis of the PCR products. (A) Genus Legionella 16S rRNA gene 433 bp. (B) L. pneumophila macrophage infectivity potentiator gene 649 bp. Amplicons were electrophoresed on a 1.5% agarose gel. Lanes 1 and 8. Marker (100-bp DNA Ladder): Lanes 2, 3, and 4, amplicons derived from isolates of hot spring water; Lanes 5 and 6, amplicons derived from the patient; Lane 7, amplicons derived from ATCC 33152 strain used as a standard.

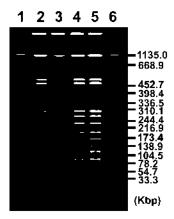


Fig. 2. Photographs of PEGE band patterns of isolates using an endonuelease Sfil eleaved genomic DNAs. Lanes 1 and 6, Molecular size marker; Lanes 2 and 3, PEGE band patterns of isolates derived from hot spring water; Lanes 4 and 5, PEGE band patters of isolates derived from the patient.

(Acanthamoeba castellanii), and it is thought that hot spring water and cooling-tower water provide favorable conditions for the propagation of the amoeba and the pathogen (6). Legionella pneumonia may, therefore, be caused by the inhalation of water aerosols contaminated with L. pneumophila (7). In Japan, the majority of Legionella pneumonia cases are caused by hot spring water contaminated with L. pneumophila. Consequently, most Japanese hot spring facilities are now equipped with an engineered closed-water circulation system. When the disinfection of the circulating hot spring water is inadequate, carrier amoebas and L. pneumophila may propagate and disseminate.

The case reported here should serve as an important reminder of the risk posed by public water systems as well as of the need for hot spring water facilities to disinfect against *L. pneumophila* and to operate closed water circulation systems to guard against this life-threatening pathogen.

This article appeared in the Infectious Agents Surveillance Report (IASR), vol. 29, 193–194, 2008 in Japanese.

#### REFERENCES

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# [An outbreak of legionellosis in a new facility of hot spring bath in Hiuga City].

[Article in Japanese] Yabuuchi E<sup>1</sup>, Agata K.

#### Author information

#### **Abstract**

Following cerebrating ceremony in 20 June 2002, for the completion of Hiuga Sun-Park Hot Spring Bath "Ofunade-no-Yu" facilities, Miyazaki Prefecture, Kyushu Island, 200 neighbors were invited each day to experience bathing on 20 and 21 June. The Bath "Ofunade-no-Yu" officially opened on 1 July 2002. On 18 July, Hiuga Health Center was informed that 3 suspected Legionella pneumonia patients in a hospital and all of them have bathing history of "Ofunade-no-Yu". Health Center officers notified Hiuga City, the main proprietor of the Bath business, that on-site inspection on sanitary managements will be done next day and requested the City to keep the bath facilities as they are. On 19 July, Health Center officers collected bath water from seven places and recommended voluntary-closing of "Ofunadeno-Yu" business. Because of various reasons, Hiuga City did not accept the recommendation and continued business up to 23 July. Because Legionella pneumophila serogroup 1 strains from 4 patients' sputa and several bath water specimens were determined genetically similar by Pulsed Field Gel Electrophoresis of Sfi I-cut DNA. "Ofunede-no-Yu" was regarded as the source of infection of this outbreak. On 24 July, "Ofunade-no-Yu" accepted the Command to prohibit the business. Among 19,773 persons who took the bath during the period from 20 June to 23 July, 295 became ill, and 7 died. Among them, 34 were definitely diagnosed as Legionella pneumonia due to L. pneumophila SG 1, by either one or two tests of positive sputum culture, Legionella-specific urinary antigen, and significant rise of serum antibody titer against L. pneumophila SG 1. In addition to the 8 items shown by Miyazaki-Prefecture Investigation Committee as the cause of infection. Hiuga City Investigation Committee pointed out following 3 items: 1) Insufficient knowledge and understanding of stuffs on Legionella and legionellosis; 2) Residual water in tubing system after trial runs might lead multiplication of legionellae in it; and 3) Inadequate disinfection and washing for whole circulation system prior the experience bathing. The Hiuga City Committee directed 24 measures to improve the sanitary condition of the facility

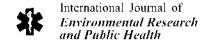
including following 5 items. 1) Fix the manual for maintenance and management of the bath. 2) Keep sufficient overflow of bath water. 3) Put disinfection of filters into practice. 4) Precise measurement and control of the residual chlorine concentration in bath water. 5) Replacement of filtrating material from crushed porous ceramic into natural sand.

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Article

### Legionellosis Associated with Recreational Waters: A Systematic Review of Cases and Outbreaks in Swimming Pools, Spa Pools, and Similar Environments

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Abstract: Legionella spp. is widespread in many natural and artificial water systems, such as hot water distribution networks, cooling towers, and spas. A particular risk factor has been identified in the use of whirlpools and hot tubs in spa facilities and public baths. However, there has been no systematic synthesis of the published literature reporting legionellosis cases or outbreaks related to swimming/spa pools or similar environments used for recreational purposes (hot springs, hot tubs, whirlpools, natural spas). This study presents the results of a systematic review of the literature on cases and outbreaks associated with these environments. Data were extracted from 47 articles, including 42 events (17 sporadic cases and 25 outbreaks) and 1079 cases, 57.5% of which were diagnosed as Pontiac fever, without any deaths, and 42.5% were of Legionnaires' disease, with a fatality rate of 6.3%. The results are presented in relation to the distribution of Legionella species involved in the events, clinical manifestations and diagnosis, predisposing conditions in the patients, favourable environmental factors, and quality of the epidemiological investigation, as well as in relation to the different types of recreational water sources involved. Based on the epidemiological and microbiological criteria, the strength of evidence linking a case/outbreak of legionellosis with a recreational water system was classified as strong, probable, and possible; in more than half of the events the resulting association was strong.

**Keywords:** *Legionella* spp.; Legionnaires' disease; Pontiac fever; recreational water; hot tubs; whirlpools; spa pools; swimming pools

#### 1. Introduction

Legionellosis is a disease transmitted through the inhalation of particles of aerosolized water contaminated by the opportunistic waterborne pathogen, *Legionella* spp. [1]. After the first recognition of legionellosis in 1976, when 221 participants of the annual convention of the American Legion contracted pneumonia and 34 of them died, surveillance systems were developed and implemented in several countries [2]. Legionellosis surveillance is a current public objective: In 2015, according to the European Centre for Disease Prevention and Control surveillance, 7034 cases were reported in Europe, concerning 1.4 cases per 100,000 inhabitants [3].

The majority of outbreaks described in the literature are correlated to *Legionella pneumophila*, in particular serogroup 1, but other serogroups and species were also associated to human disease, such as *L. micdadei* (now classified as *Tatlockia micdadei*), *L. dumoffii*, and *L. longbeachae* [4]. The two fundamental clinical pictures determined by these infective agents are Legionnaires' disease (LD) and Pontiac fever (PF): The former is generally characterized by an acute pneumonia and, rarely, by an extrapulmonary disease; Pontiac fever is a mild, self-limiting, flu-like illness, which resolves in a few days.

Legionella spp. are widely distributed in both natural (i.e., lakes, rivers, groundwater, thermal water) and man-made aquatic environments, such as the water systems of hospitals, hotels, private houses [5,6], cooling towers [7], dental units [8,9], and recreational [10,11] or therapeutic [12,13] facilities. Any system or equipment which contains, stores, or re-circulates non-sterile water that can be aerosolized is a source of legionellosis [14,15]. Considering these elements, the recreational use of water is an important potential way of exposure to Legionella spp., especially in hot water pools equipped with hydromassage systems. A recent review on outbreaks of LD and PF highlights that 14% of the reported outbreaks from 2006 to 2017 recognized pools or spas as an attributed or suspected source [16]. The role of these recreational facilities appears even more significant if one considers the growing popularity of private hot tubs and the increasing number of people frequenting public spa pools and similar environments.

Generally, the outbreak analysis and control measures, specific for each exposure setting, are essential tasks of Public Health Authorities, including outbreak surveillance and analysis specifically dedicated to the recreational water context. Epidemiological knowledge about these themes must be constantly updated. To our knowledge, no systematic synthesis or critical appraisal exists of the published literature reporting sporadic cases or outbreaks of LD and/or PF associated with recreational water. In the present study, we performed a systematic review and analysis of investigations on legionellosis cases or outbreaks related to treated and untreated recreational water, including natural waters, swimming pools, spa pools, and similar environments (hot tubs, whirlpools, hot spring baths, etc.), in accordance with the definitions given for these environments by World Health Organization (WHO) guidelines [17].

#### 2. Materials and Methods

In line with the objective of the study, we set out to perform a systematic review of cases and outbreaks of LD and PF associated with recreational aquatic environments, such as swimming and spa pools or natural spas. The literature search was conducted in Medline, including publications from 1 January 1977 (since the disease was first described in 1976) to 31 May 2018, using the following search terms: (Legionella OR legionellosis OR "Pontiac fever" OR "Legionnaires" disease") AND (case\* OR cluster\* OR outbreak\* OR infection\* OR investigation OR surveillance) AND ("recreational water" OR spa OR pool OR "swimming pool" OR "hot tub" OR whirlpool OR bath OR "swim spa" OR "turkish bath" OR sauna OR Jacuzzi OR "natural spa" OR "hot spring" OR "thermal spring" OR "warm spring" OR spring OR thermal). The literature search was conducted without language restrictions, on the condition that the articles had an exhaustive abstract in English reporting the information of interest. A further selection of relevant publications was performed using the inclusion and exclusion criteria listed below.

Inclusion criteria:

- Primary studies describing cases/outbreaks of LD or PF originating from recreational water.
  - Exclusion criteria:
- Not recreational water (hot water system, cooling tower, fountain, network water, therapeutic water, water births);
- environmental studies without cases;
- not primary studies;

- articles focused only on clinical and laboratory aspects;
- abstract not available/ not complete or not exhaustive;
- articles focused on pools used for display only (retail premises, fairs, exhibitions, shows);
- articles evaluating only microbiological risk assessment; and
- hot tubs or pools on cruise ships (due to a recently published systematic review) [18].

Two researchers independently screened titles and abstracts to identify potentially relevant articles and to exclude articles incompatible with the first five exclusion criteria; any disagreements were resolved by discussion with a third author. After the application of the first five exclusion criteria, the full texts of the remaining articles were examined, and any publications exclusively focused on display spas were then excluded, since this type of exposure in environments used for retail premises, fairs, exhibitions, and shows is not directly linked to recreational use. The remaining articles were assigned to three categories related to three different recreational facilities or sources of infection:

- (a) Private hot tub and similar facilities;
- (b) public pools and spas and similar facilities, generally supplied by municipal network water; and
- (c) spa facilities supplied by natural water, or hot spring/thermal water. Subsequently, we applied the last two exclusion criteria to each category.

Data extracted from these publications included: Year, country, case definition, clinical form, type of event (sporadic case or outbreak), number of cases, attack rate, number of hospitalizations and/or deaths, risk factors, laboratory diagnosis, *Legionella* spp. involved, environmental isolates and concentrations (cfu/L), type of recreational water, water supply, and the type of epidemiological study carried out (descriptive, analytical, presence/absence of environmental investigation). An event with multiple cases (at least two) linked in space and time, with a suspected common source, was defined as an outbreak. For each event (both sporadic cases and outbreaks), epidemiological and microbiological criteria were adopted to characterize the strength of evidence linking the legionellosis event with the suspected recreational water system. Table 1 summarizes these criteria.

Table 1. Strength of evidence linking a case/outbreak of legionellosis with a recreational water system.

Strength of Evidence Strong	Epidemiological and Microbiological Criteria			
	<ul> <li>An analytical epidemiological study demonstrates a significant association between case/outbreak of legionellosis and exposure to the recreational water; and</li> <li>the same species and serogroups of <i>Legionella</i> spp. are isolated from the water system at any concentration.</li> </ul>			
	<ul> <li>Descriptive epidemiology suggests that the case/outbreak is related to the recreational water and excludes obvious alternative explanations; and</li> <li>Legionella spp. are isolated from the water system at any concentration and environmental isolates show identical genotype profiles of clinical isolates.</li> </ul>			
Probable	<ul> <li>An analytical epidemiological study demonstrates a significant association between case/outbreak of legionellosis and exposure to the recreational water; and</li> <li>Legionella spp. are not isolated from the recreational water.</li> </ul> Or			
	<ul> <li>Descriptive epidemiology suggests that the case/outbreak is related to the recreational water and excludes obvious alternative explanations; and</li> <li>the same species and serogroups of <i>Legionella</i> spp. are isolated from the water system at any concentration.</li> </ul>			
Possible	<ul> <li>Descriptive epidemiology suggests that the case/outbreak is related to exposure to the recreational water and excludes obvious alternative explanations; and</li> <li>Legionella spp. are not isolated from the recreational water.</li> </ul>			

Data were analysed as the frequency distribution of the different variables included.

#### 3. Results

Of the 326 articles retrieved from Medline, 259 were excluded for the following reasons: 99 investigations did not refer to recreational water, 82 were environmental studies without cases, 4 were not primary studies, 68 articles were focused only on clinical and laboratory aspects, and 6 publications were in a language other than English and did not have an exhaustive English abstract, as shown in Figure 1.

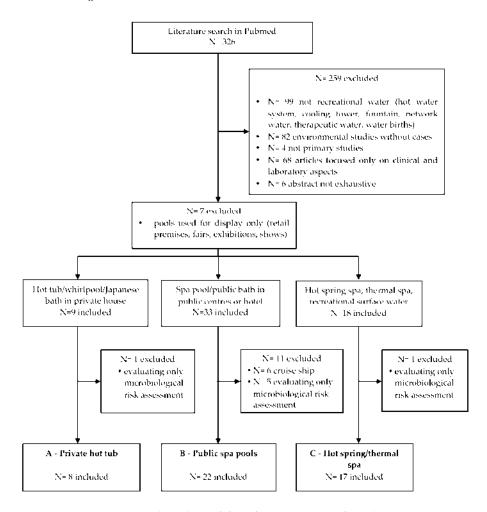


Figure 1. Flow chart of the selection process of articles.

At the end of the selection process, 47 articles were considered eligible for inclusion in the present review, corresponding to 42 events. In four cases, different articles described varying aspects of the same event, while two articles reported two and three different events, respectively. Among the 42 events of legionellosis, eight were linked to a hot tub/whirlpool/Japanese bath used in private houses (Category A in Figure 1, in brief "private hot tub"), 22 were related to whirlpool spa/baths in public centres and hotels (Category B in Figure 2, in brief "public spa pools"), and 12 to hot spring/thermal spa pools (Category C in Figure 1, in brief "hot spring/thermal spa").

The selected articles were published: Four in the 1980s, 16 in the 1990s, 19 in the 2000s, and three from 2010 to 2018. In 11 articles, the authors did not report the date of onset. The events occurred in different countries across the world, with the highest frequency of hot spring related events in Japan (83.3%) and an overall highest frequency in Japan (18 events: 42.9%), followed by the USA (11 events: 26.2%), and the United Kingdom (4 events: 9.5%).

#### 3.1. Legionellosis in Relation to Recreational Water Source

Table 2 shows all events and cases of legionellosis associated with recreational water systems, distinguished per facility category. Of the 1079 total cases included in the 42 events, 57.5% were diagnosed as PF, without any deaths, and 42.5% were of LD, with a fatality rate of 6.3%.

Table 2. Events of Pontiac fever (PF) and Legionnaires' disease (LD) associated with recreational water.

Characteristics of the Events	Hot Tub/Whirlpnol/Japanese Bath in Private House (8 Events)	Spa Pools/Public Baths in Public Centres or Hotels (22 Events)	Hot Spring Spa, Thermal Spa, Recreational Surface Water (12 Events)	Total Recreational Waters (42 Events)
Number of events with single cases	5	2	10	17
Number of outbreaks or events with repeated cases a	3	20	2	25
Number of total cases	28	741	307	1079
Median number of cases per outbreak (range)	6 (4–13)	23.5 (3–170)	148.5 (2-295)	23 (2-295)
Total number of PF cases (fatal cases)	22 (0)	598 (0)	0	620 (0)
Total number of LD cases (fatal cases)	6 (1)	146 (16)	307 (12)	459 (29)
Fatality rate on total cases (on LD cases)	3.6% (16.7%)	2.2% (11.4%)	3.9% (3.9%)	2.7% (6.3%)
Analytical epidemiology in outbreak investigation (% of total outbreaks)	0 (0%)	8 (40.0%)	1 (50.0%)	9 (36.0%)
Events with environmental investigation (% of total events)	6 (75.0%a)	20 (90.9%)	9 (75.0%)	35 (83.3%)
Legionella spp. detected in environmental water samples (% of total events)	4 (50.0%)	20 (90.9%)	8 (66.7%)	32 (76.2%)
Identical Legionella genotype in clinical and environmental isolates (% of total events)	1 (12.5%)	6 (27.3%)	7 (58.3%)	14 (33.3%)
Strength of evidence				
Strong (%)	1 (12.5%)	15 (68.2°b)	7 (58.3%)	23 (52.4%)
Probable (%)	3 (37.5%)	5 (22.7%)	1 (8.3%)	9 (21.4%)
Possible (%)	4 (50.0%)	2 (9.1%)	4 (33.3%)	10 (23.9%)

<sup>&</sup>lt;sup>a</sup> 22 outbreaks and three events with repeated cases or cluster.

The private hot tubs were all supplied by municipal network water and were subjected to a supplementary disinfection system only in two of the eight facilities involved in the legionellosis events. Single cases occurred in five events (62.5%) corresponding to 17.9% of cases, while the remaining three events were outbreaks with a low number of persons involved (from four to 13). LD represented 21.4% of the cases, with a fatality rate of 16.7%.

Public spa pools were generally supplied by municipal network water and only three out of 22 facilities had their own supply system from groundwater (two spa pools) and mountain spring water (one spa pool). In 54.5% of the facilities, water treatment included recycling, filtering, and chemical disinfection with bromine (seven spa pools) or chlorine (five spa pools). In the remaining public spa pools, water disinfection was not mentioned. Public spa pools were responsible for the highest number of events (22), cases (744), and deaths (16). A sporadic case only occurred in 9.1% of the events, while the remaining events were outbreaks often involving a high number of cases of up to 170 [19]. The LD cases formed 19.6% of the total cases, with a fatality rate of 11.0%.

Hot spring/thermal spas were supplied by natural waters, i.e., hot springs and thermal waters. This group also includes the only LD case associated with bathing in surface water. This was a fatal case in a 27-year-old woman who had nearly drowned in estuarine water [20]. Water treatment and chlorine disinfection were reported in only three out of the 11 hot spring/thermal water facilities (27.3%), while, in one case, the authors specified that national regulations (France) precluded the addition of chemicals to thermal spas to preserve the characteristics of the mineral water [21]. All cases linked to this recreational water category were diagnosed as LD, with a fatality rate of 3.9%. Single cases occurred in 83.3% of the events and only two outbreaks were reported. However, one of these was the largest outbreak of LD associated with a hot spring bathhouse in Japan, with 295 cases, including confirmed and probable cases [22].

#### 3.2. Epidemiological Investigations

All the events with sporadic cases were studied by descriptive epidemiology. The epidemiological investigations included an analytical study in 36.0% of outbreaks, with higher percentages in events linked to public spa pools (40.0%) and hot spring/thermal water (50%), compared to private hot tubs (no events with an analytical study). An environmental investigation was carried out in 83.3% of events (private hot tubs and hot spring/thermal water: 75%; public spa pools: 90.9%) and allowed the detection of *Legionella* spp. in 76.2% of the incriminated water sources and to evidence identical molecular profiles of both clinical and environmental isolates in 33.3% of the events. Based on the epidemiological and microbiological criteria specified in Table 1, the strength of evidence linking the case/outbreak of legionellosis with the recreational water system was strong in 23 events (52.4%), with percentages higher for public spa pools (68.2%) and hot spring/thermal water (58.3%) compared to private hot tubs (12.5%). This was a consequence of the previously mentioned differences regarding both the implementation of analytic epidemiology and the detection of environmental *Legionella* spp., which were carried out less frequently in private hot tub related events.

#### 3.3. Events with Sporadic Cases of Legionellosis

Sporadic cases of legionellosis occurred in 17 distinct events, only one of PF [23] and 16 of LD (Table 3), with a fatality rate of 29.4% (31.2% for LD cases). Most cases occurred in Japan (70.6%) [24–35], and hot spring/thermal waters (56.2%) were the facilities most involved, followed by private hot tubs (25%). Only two cases occurred in spa centres/public baths [35,36]. Four cases, three of which fatal, were consequent to near drowning [20,32,35,37] and one case involved a 10-year-old girl, subjected to immunosuppressive therapy for hemosiderosis after being exposed several times to the hot tub in her maternal home [38].

Etiological diagnosis was confirmed by culture of clinical specimens in 75.0% of LD cases and *L. pneumophila* was the species most frequently involved, in particular *L. pneumophila* SG 6 (31.2% of LD cases). No differences were observed on the onset of cases in relation to the different concentrations of legionellae detected from the suspected water sources. Genotyping of clinical and environmental isolates was performed in seven out of 17 events. In accordance with the microbiological criteria specified in Table 1, the strength of evidence linking the cases with the recreational water system was strong in all the cases confirmed by molecular typing (43.7% of LD cases).

**Table 3.** Events with sporadic cases of Pontiac fever (PF) and Legionnaires' disease (LD) associated with recreational water.

	Pontiac Fever (1 Event) <sup>a</sup>	Legionnaires' Disease (16 Events) <sup>b</sup>	
Number of cases (fatal cases)	1 (0)	16 (5)	
Gender			
Males		9	
Females		6	
Not reported	1	1	
Median age (range)	37	56.5 (10-88)	
Confirmation by culture in clinical specimen	0	12 (75.0%)	
Legionella species and serogroup			
L. pneumophila SG 1	0	3 (18.7%)	
L. pneumophila SG 2	0	1 (6.2%)	
L. pneumophila SG 3	0	2 (12.5%)	
L. pneumophila SG 4	0	1 (6.2%)	
L. pneumophila SG 6	0	5 (31.2%)	
L. pneumophila SG 13	0	2 (12.5%)	
L. pneumophila (SG not reported)	1 (100%)	1 (6.2%)	
L. rubriluceus	0	1 (6.2%)	

Table 3. Cont.

	Pontiac Fever (1 Event) <sup>a</sup>	Legionnaires' Disease (16 Events) <sup>b</sup>
Environmental source		
Private hot tub	1	4 (25.0%)
Public and hotel spa	0	2 (12.5%)
Hot spring/thermal spa	0	9 (56.2%)
Estuarine water	0	1 (6.2%)
Legionella colonization		
<1000 cfu/L	0	2 (12.5%)
1000-10,000 cfu/L	0	2 (12.5%)
>10,000 cfu/L	0	2 (12.5%)
Not reported	1 (100%)	11 (68.7%)
Identical Legionella genotype in clinical and environmental isolates	0	7 (43.7%)
Strength of evidence		
Strong (%)	0	7 (43.7%)
Probable (%)	1 (100%)	2 (12.5%)
Possible (%)	0	7 (43.7%)

[23]; b [20,24-38].

#### 3.4. Outbreaks of Legionellosis

A total of 25 outbreaks of legionellosis were found: 7 outbreaks of PF (Table 4), 11 outbreaks of LD (Table 5), and 7 mixed events of PF and LD (Table 6). Among the LD events, two were repeated cases on the same site, which occurred in different time periods (No. 2, 3 in Table 6), and one was a long-lasting outbreak with three consecutive clusters (No. 10 in Table 6).

The total number of outbreak cases was 1062, of which 619 were PF cases (58.3%) and 443 were LD cases (41.7%), with 24 deaths (total fatality rate: 2.3%, for LD: 5.4%). Most events occurred in public spas (20/25 outbreaks, 80%), particularly in whirlpool spas of hotels or similar residential facilities, such as inns and holiday resorts (11 of 25 outbreaks, 44%). The attack rate varied from 29.8% to 86.7% for PF outbreaks and from 0.13% to 1.9% for LD outbreaks.

Etiological diagnosis was confirmed by culture of clinical specimens in 10 out of 11 outbreaks of LD and in one out of seven mixed events of PF and LD (61.1% of total events with LD cases), while it was never performed in PF outbreaks. *L. pneumophila* was the species most frequently involved, in particular *L. pneumophila* SG 1 in 68% of total outbreaks (83.3% of outbreaks with LD cases) and SG 6 in 24% of total outbreaks (27.8% of outbreaks with LD cases). In three events, various species or serogroups were identified as responsible for the disease by culture and/or serological assay.

Environmental isolates of *Legionella* spp. were obtained in 22 outbreaks (88%), in seven of which various species or serogroups were detected (28%). Genotyping of clinical and environmental isolates was performed in 10 events (40% of total outbreaks, 55.5% of outbreaks with LD cases). In accordance with the epidemiological and microbiological criteria specified in Table 1, the strength of evidence linking the outbreak with the recreational water system was strong in 16 events (64%).

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Table 4. Outbreaks of Pontiac fever (PF) associated with recreational water.

Event No. Country, Ycar (Reference)	Water System	Legionella spp. (Confirmed Diagnosis Based on)	No. of Cases (Fatal Cases)	Attack Rate	Proportion of Males	Median Age (Range)	Environmental Isolates (cfu/L)	Strength of Evidence
1 Vermont, US, 1981 [39]	Inn whirlpool spa	L. pneumophila SG 6 (antibody titre)	34 (0)	45,9%	53.0%	27.9	L. pneumophila SG 1,6 L. dumoffii	Strong
2 Michigan, US, 1982 [40]	Public whirlpool spa (women's pool)	L. pneumophila SG 6 (antibody fitre)	14 (0)	29.8%	0	32 (25–39)	L. pneumophila SG 6	Strong
3 Colorado, US, 1992 [44]	Resort indoor whirlpool	L. pneumophila SG 6 (antibody titre)	13 (0)	38.0%	na	na	L. pneumophila SG 6 (>1,000,000)	Strong
4 Denmark, 1995 [42]	Private summerhouse whirlpool	L. pneumophila SG 1 (culture, antibody titre) L. micdadei (antibody titre)	13 (0)	86.7%	na	na	negative samples (after whirlpool cleaning)	Possible
5 Wisconsin, US, 1998 [33]	Hotel whirlpool spa	L. micdadei (antibody titre)	45 (0)	whirlpool area: 66.0% whirlpool users: 71.0%	na	na	l micdadei (90,000/L)	Strong
6 Sweden, 1999 [ <del>+</del> +]	Hotel whirlpool spa	L. micdadei (antibody titre)	29 (0)	whirlpool area: 71.0% whirlpool users: 88.9%	37.9%	41 (21–57)	negative samples	Probable
7 England, 2008 [45]	Resort whirlpool spa	L. pueumophila SG 1 (antibody titre, urinary antigen)	6 (0)	86.0%	0	(24–37)	Legionella non pneumophila (100/L)	Probable

na: Not available; clinical and environmental isolates were never compared by molecular typing.

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Table 5. Outbreaks of Legionnaires' disease (LD) associated with recreational water.

9 of 19

Event No. Country, Year (Reference)	Water System	Legionella spp. (Diagnosis Based on)	Number of Cases (Fatal Cases)	Attack Rate	Proportion of Males	Median Age (Range)	Environmental Isolates (cfu/L)	Strength of Evidence
1 Vermont, US, 1987 [4a]	Inn whirlpool spa	L. pneumophila SG 1 (culture, antibody titre)	3 (0)	na	na	na	L. pneumophila SG 1,4	Strong
2 Netherlands 1992–96 [17]	Public spa sauna's footbath	l., pneumophila SG 1 (culture)	6 repeated cases (2)	na	83.3°6	males: 50 females: 28	L. pneumophila SG 1	Strong
3 France 1994–97 [21]	Thermal spa	L. pneumoplula SG 1 (culture)	2 repeated cases (1)	na	50%	54.5 (40-69)	L. pneumophila SG 1,2,3,6,9,13 L. dumoffii	Strong
4 Japan, 1996 [48]	Public Japanese spa	L. pneumophila SG 1 (antibody titre)	3 (0)	na	na	па	L. pneumophila SG 1	Probable
5 Japan, 2000 [27]	Public bath house	L. pneumophila SG 1,6 (culture, antibody titre, urinary antigen)	23 (2)	0.13%	91.3%	67 (50–86)	L. pneumophila SG 1 (880,000)	Strong
6 Japan, 2000 [≙9,5.1]	Public bath house	L. pneumophila SG 1 (culture, antibody titre, urinary antigen)	34 (20 confirmed) (3)	0.20°6	65.0% (only confirmed)	62.2 (27–85)	L. pneumophila SG 1.3.5,6 (11400–84200)	Strong
7 Japan, 2002 [23,31–35]	Hot spring bath	L. pneumophila SG 1 (culture, antibody titre, urinary antigen)	295 including suspected cases (7)	1.5°°	64.5% (of 76 examined)	65 (9-95)	L. pneumophila SC 1,8 (1,600,000) L. dumoffii (5,200,000) L. londiniensis (15,000,000)	Strong
8 Japan, 2003 [27]	Public bath house	L. pneumophila SG 1 (culture)	9 (1)	0.13%	na	65 (52–82)	L. pneumophila SG 1 (1,300,000)	Probable
9 France, 2010 [55]	Public whirlpool spa	L. pneumophila SG 1 (culture, urinary antigen)	3 (1)	na	33.3%	50 (30-70)	1 pucamophila SG 1 (150,000)	Strong
10 Spain, 2011–12 [37]	Hutel spa pool	L. pneumophila SG 1 (culture)	Total: 44 (6) Cluster1: 21 Cluster2: 2 Cluster3: 3 Cluster4: 18	na	na	tourists: 71.5 hotel workers: 49.5	L. pucamophila SG 1 L. micdadei	Strong
11 Japan, 2015 [58]	Spa house (men's pool)	t., pneumophila SG 1,13 (culture)	7 (0)	na	100%	66.3	L. pneumophila SG 1,13	Strong

na: Not available; clinical and environmental isolates showed correlated molecular profiles in events No. 1, 2, 3, 5, 6, 7, 9, 10, and 11.

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Table 6. Outbreaks of Pontiac fever (PF)/Legionnaires' disease (LD) associated with recreational water.

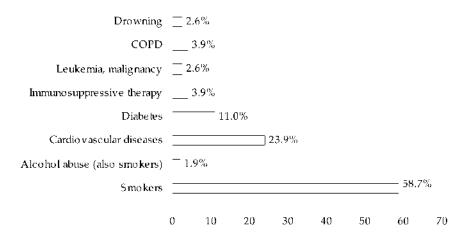
Event No. Country, Year (Reference)	Water System	Legionella spp. (Diagnosis Based on)	Number of Cases PF + LD (Fatal Cases)	Attack Rate	Proportion of Males	Median Age (Range)	Environmental Isolates (cfu/L)	Strength of Evidence
1 Scotland, 1987–88 [19,59]	Hotel whirlpool spa	L. micdadei (antibody titre)	169 + 1 (0)	90.9% (LD: 0.5%)	48.8%	32 (2–72)	L. micdadei	Probable
2 Vermont US, 1991 [60]	Private hot tub in holiday home	L. pnenmophila SG 1 (antibody fitre)	5 + 1 (0)	na	na	na	not investigated	Possible
3 Georgia US, 1999 [△1]	Hotel whirlpool spa	L. pneumophila SG 6 (culture, antibody titre, urinary antigen)	22 + 2 (0)	22.0% (LD: 1.8%)	na	PF: 12 (5-31) LD: 66 (61-71)	L. pneumophila SG 6	Strong
4 Illinois US, 2002 [62]	Hotel spa area	L. micdadei L. maceachernii (antibody tit <b>re</b> )	49 + 1 (0)	62.7% (LD: 1.2%)	46%	20 (2-58)	L. micdadei I maceachernii L. dumoffii	Strong
5 Oklaoma US, 2004 [⊖]	Hotel pool and hot tub area	L. pneumophila SG 1 (antibody titre, urinary antigen)	101 + 6 (0)	33.7% (LD: 1.9%)	PF: 43.6% LD: 100%	PF: 15 (2-65) LD: 6.5 (2-44)	L. pneumophila SG 1	Strong
6 England, 2006 [51]	Leisure club spa pool	I., pneumophila SG 1 (antibody titre, urinary antigen)	116 + 2 (0)	па	PF: 41.4% LD: 100%	(18–85)	L. pneumophila SG 1	Probable
7 Netherlands, 2009 [↔]	Frivate outdoor whirlpool spa	L. pneumophila SG 1 (antibody titre, urinary antigen)	3 + 1 (1 LD)	na	PF: 66.7% LD: 0%)	PF: 54 (52–83) LD: 78	L. pneumophila SG 1	Probable

na: Not available; clinical and environmental isolates showed correlated molecular profiles in the event No. 3.

### 3.5. Patient Contributing Factors

PF cases showed no evidence of underlying risk factors. The median age of the PF patients, when reported, varied from 12 to 54 years and, overall, males and females were affected with a similar frequency.

LD patients were males in 60% of sporadic cases (Table 3) and in 71.9% of outbreaks, considering only the events reporting gender distribution. The median age was 56.5 years (range: 10–88) in sporadic cases and over 60 years in nine of the 13 LD outbreaks in which the age data was reported. Patient risk factors and underlying medical conditions were specified in 24 of the 34 LD events (71.3%), for a total of 155 cases. Figure 2 shows the occurrence of contributing factors and underlying medical conditions in these patients. Heavy smoking was the most frequent risk factor (58.7% of patients) and, among the underlying medical conditions, cardiovascular diseases (23.9%) and diabetes (11.0%) had the highest prevalence. Four cases of *Legionella* pneumonia occurred after near drowning, one in estuarine water and three in hot spring spas and public baths.

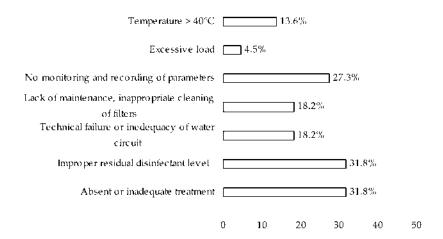


**Figure 2.** Distribution of underlying medical conditions and risk factors in 155 cases of Legionnaires' disease.

### 3.6. Environmental Contributing Factors

Excluding the only sporadic case related to estuarine water, environmental contributing factors were investigated in 22 out of 41 events. In only one of these, no contributing environmental conditions were found. In the other 21 events, inadequate water treatment and residual disinfectant below the recommended levels were the most frequent factors that could have favoured the onset of cases or outbreaks. The water temperature was reported in only four events and in three of these the temperature was above 40 °C (Figure 3). In PF events, the most frequent environmental contributing factors were those related to plant maintenance and chemical treatment management (i.e., inappropriate residual disinfectant concentration), while the inadequacy or absence of the treatment system was observed only for LD cases or outbreaks. This could be explained by the fact that many LD events occurred in private hot tubs not subjected to a supplementary disinfection system.

*Legionella* spp. were isolated from the environmental samples of 32 facilities, at concentrations higher than  $10^3$  cfu/L in water samples obtained from 11 of them (34.4%).



**Figure 3.** Distribution of environmental contributing factors in 22 recreational facilities associated with legionellosis events.

#### 4. Discussion

This review aimed to evaluate the cases and outbreaks of legionellosis associated with exposure to recreational water since the disease was first described in 1976. Both sporadic cases and outbreaks of LD and PF, described in the scientific literature, were included. Relevant findings from 47 articles were synthesized, including 42 legionellosis events (17 sporadic cases and 25 outbreaks).

### 4.1. Temporal and Geographical Distribution

The events of legionellosis correlated with exposure to recreational water showed a non-homogeneous distribution over time. In the 1980s, only four events were reported, probably because, in these first years, there was a lower awareness of the problem and many cases were not identified or associated with exposure to recreational water. In the 1990s and 2000s, the number increased (16 and 19 events, respectively) and then declined in the years from 2010 until today (only three reported in the literature). It could be hypothesized that the increase in knowledge and awareness of risks associated with recreational water led to an improvement in the management and maintenance and control measures, also after the issuing of international guidelines on the control of legionellosis in recreational facilities. In 2006, the WHO Guidelines for safe recreational water environments recommended the implementation of safety plans and adequate control measures in pools and hot tubs [17]. Moreover, from 2005, the European Legionnaires' Disease Surveillance Network (ELDSNet, previously EWGLI), with respect to Legionella risk reduction in whirlpool spas, recommended continuous treatment with 2–3 mg/L of chlorine or bromine, the checking of these levels almost three times a day, the replacement of at least half of the water each day, sand filters backwashed daily, and cleaning and disinfection of the whole system every day [66]. The implementation of these measures could explain the reduction in the number of events in the most recent period.

The reported events of legionellosis involved 10 countries, with the highest number of events (18) and cases (385) in Japan, where the habit of frequenting hot spring spas and public baths is very widespread, following a long-established tradition in Japanese culture. Moreover, the average water temperature in hot tubs in Japan usually ranges from 40 °C to 43 °C, which is higher than in Europe (30–40 °C) [27].

### 4.2. Clinical Features and Laboratory Evidence

This review includes both PF and LD events. PF cases totalled 620, only one of which was sporadic, the others being included in 14 outbreaks. The number of PF cases related to recreational water is probably underestimated: The benign nature of the disease, which often presents as an influenza-like

illness, means that the cases, especially when sporadic, are not identified as legionellosis and are, therefore, not subjected to laboratory diagnosis. In the selected PF events, laboratory diagnosis was performed only in outbreaks, and *Legionella* spp. were never culturally isolated. On the contrary, in the events involving LD cases, cultural isolation from patients' specimens allowed the species to be identified in 75% of the sporadic cases and in 11 of the 18 outbreaks with LD cases (61.1%).

Among the different species and serogroups, *L. pneumophila* SG 1 (three sporadic cases and 15 outbreaks of LD) and SG 6 (five sporadic cases and two outbreaks of LD) were the agents most frequently responsible, while, among the other species, *L. micdadei* was implicated in three outbreaks of PF and two outbreaks of mixed PF and LD. In five events, various species or serogroups were involved [27,30,42,58,62], one of which was the first case where the same genotype of *L. rubrilucens* was isolated from the LD patient's sputum and the hot spring water [30].

This review confirms certain known characteristics of the epidemiology of legionellosis. PF cases showed no evidence of underlying risk factors and PF outbreaks had a high attack rate, with no difference between males and females. On the contrary, LD cases prevalently involved males and individuals presenting risk factors, such as smoking and all the underlying medical conditions that reduce immune defenses. In LD outbreaks, the attack rate is low and the fatality rate is high (on average, 6.3%, but up to 31.2% in events related to private hot tubs).

### 4.3. Recreational Water Facilities and Risk Assessment

Most events occurred in public spa pools (22 events, 744 cases). Of these, 10 were associated with hotels or similar residential facilities and, therefore, fall within the surveillance system for legionellosis linked to travel, which in Europe is carried out by the ELDSNet and coordinated by ECDC. The recreational facilities supplied by natural water (hot spring, thermal water) were the setting for 12 events, 10 of which with a single case. Most studies referring to hot spring/thermal spas (seven out of 11) did not specify if the water was treated or untreated and how the facility was managed; this is a limitation that makes it difficult to draw conclusions about the environmental conditions contributing to these infections.

The recommended standards for *Legionella* spp. in hot tub water range from  $0/100 \, \text{mL}$  to 1000/L in different countries [67]. In the selected studies, the environmental isolates of *Legionella* spp. are reported in 32 events, but only 13 specify the level of contamination, which ranges between  $100 \, \text{cfu/L}$  and  $>10^6 \, \text{cfu/L}$ . However, it should be noted that the isolation of *Legionella* spp. from environmental samples was carried out after the legionellosis event had occurred and so the environmental conditions may have changed. The lack of data on the *Legionella* concentrations in the water, and on the frequency and duration of exposure, makes it difficult to perform a risk assessment. Various studies tried to estimate the risk for *Legionella* infection due to spa pool use. Bouwknegt et al., (2013) estimated that the infection risk for sitting in an active whirlpool for 15 min ranged from around 3% for a concentration of  $10 \, \text{L.}$  *pneumophila* cfu/L to up to 95% for  $>1000 \, \text{cfu/L}$  [68]. These findings suggest that a risk cannot be excluded even in the presence of very low concentrations, and stricter requirements may be needed to ensure adequate protection for users. Azima et al. (2013) suggested a reference value of  $<1 \, \text{cfu/L}$ , which is less than the current detection limit [69].

### 4.4. Epidemiological Investigation and Strength of Evidence

The epidemiological investigation included an analytical study in nine outbreaks, four with a case-control study and five with a retrospective cohort study. In all the events related to private hot tubs, only descriptive epidemiology was carried out. This is justified by the difficulty in such events to find a control group not exposed to the private hot tub. Also, sporadic cases were studied only through descriptive epidemiology (case reports).

The environmental investigation was often delayed with respect to the event onset and, in some cases, was made after control measures had already been adopted. These measures are specified only in a limited number of articles and information is lacking on the follow-up procedures in almost

all the articles. Many studies do not report the environmental conditions that could have favoured such infections. In 19 events, no information is available on the type of water treatment, the level of residual disinfectant, or the state of maintenance of the facility. Only in three events is the water temperature specified, a factor that, in these types of recreational facilities, plays a fundamental role in the development of *Legionella* spp. and was probably co-responsible for three LD cases associated with near drowning in hot spring spas and public baths [32,35,37]. Lying in or sitting up to the neck in hot water (above 40 °C), especially in combination with alcohol consumption, may cause drowsiness, which may then lead to unconsciousness and, consequently, drowning [70].

Based on the selected criteria, the strength of evidence linking the cases/outbreaks to the recreational water facilities was strong in 52.4% of events, probable in 21.4%, and possible in 23.9%. Strong evidence was principally attributable to the results of analytical study in nine events, and to the match of environmental and clinical isolates in 17 events. The comparison between strains of environmental and clinical origin using molecular biology techniques was carried out at a very high level of frequency, especially in cases concerning LD (43.7% of sporadic cases and 81.8% of LD outbreaks).

#### 4.5. Limitations

The present study was limited to articles published in English or with an exhaustive abstract in English, and only peer-reviewed literature was considered. Furthermore, the legionellosis events that are published represent only part of the overall number of cases: Larger LD outbreaks are more likely to be published than sporadic cases and smaller events, especially of Pontiac fever. Also, the review does not include cruise ship cases [18] and cases associated with display spa pools in retail premises, fairs, exhibitions, and shows [71,72], which represent another important source of infection. Therefore, the role of the recreational facilities as a source of infection is underestimated, also considering that in many LD and PF cases the source of *Legionella* remains unknown [3,16].

The heterogeneity of epidemiological investigations, in terms of study design, sample size, and information about the duration of exposure and environmental contributing factors, limited the comparison of results. In particular, the lack of information about the treatment and management of recreational facilities makes it difficult to exhaustively evaluate the role of environmental conditions.

### 5. Conclusions

Data extracted from the articles in this systematic review show that hot tubs, whirlpools, and spa pools represent an important source of infection of *Legionella* spp., given the number of cases involved (1079 from 1981 to 2015), the number of deaths (29), and the high percentage of events with strong evidence of an association. On the contrary, the risk related to the natural recreational water of rivers and lakes appears negligible: The only sporadic case reported is a case consequent to a near-drowning in estuarine water [20].

Among the cases included in this review, PF cases were the most numerous and were caused by a variety of species and serogroups: *L. pneumophila* SG 6 and *L. micdadei* were the most often responsible agents, while *L. pneumophila* SG 1 was responsible for most LD cases. Unlike PF cases, LD cases prevalently involved individuals presenting risk factors, such as smoking, and underlying medical conditions that reduce immune defenses.

Certain operating conditions that facilitate the formation of aerosol, such as the high temperature of the water and the presence of hydromassage systems, are risk factors inherent to this kind of recreational water. In hot tubs and similar facilities, it is impractical to maintain a water temperature outside the range considered at risk. Therefore, other management strategies need to be implemented, which may include appropriate design and adequate disinfection residual and proper maintenance and cleaning of equipment as well as adequate ventilation. Features, such as water sprays, should be periodically cleaned and flushed with a level of disinfectant adequate to eliminate *Legionella* spp. [3,17,67]. In this review, the environmental conditions were described for

22 events, and in 21 of these (95.5%) at least one of the preventive measures recommended by the various guidelines was not respected. Therefore, it seems important to increase collaboration between the different professionals involved (public health experts, policy makers, facility managers, technical staff, equipment manufacturers) to improve the knowledge of the operators and their awareness of the risk and to favour compliance with control measures.

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### **Abbreviations**

The following abbreviations are used in this manuscript:

- LD Legionnaires' Disease
- PF Pontiac Fever
- cfu colony forming unit

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From:	Smith, Jessica (CDC/DDID/NCIRD/DBD)				
Sent:	1 Oct 2019 14:26:55 +0000				
To:	Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP);Ritter, Troy				
(CDC/DDNID/NCEH/DEHSP);Lucas, Claressa (CDC/DDID/NCIRD/DBD);Kozak-Muiznieks, Natalia A. (CDC/DDID/NCIRD/DBD)					
Subject:	RE: Hot Springs and Water management plans				
<b>555</b> ,556.	The top may are the management plans				
Hi all — Before this call	at 2 pm today, I thought I'd pass along this guidance from Japan that seems				
relevant:					
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and ammonia each solution of A must be mixed with tap water and generated on-site. Acid hot spring quality cannot be used because of bad odor substances such as trichloramine.

-----Original Appointment-----

From: Smith, Jessica (CDC/DDID/NCIRD/DBD)
Sent: Wednesday, September 18, 2019 5:05 PM

To: Smith, Jessica (CDC/DDID/NCIRD/DBD); Said, Maria; Kesteloot, Kurt; Ritter, Troy

(CDC/DDNID/NCEH/DEHSP); Edens, William (Chris) (CDC/DDID/NCIRD/DBD)

**Cc:** Cooley, Laura A. (CDC/DDID/NCIRD/DBD); James, Allison (CDC arkansas.gov); Lucas, Claressa (CDC/DDID/NCIRD/DBD); Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP); Kozak-Muiznieks, Natalia A.

(CDC/DDID/NCIRD/DBD)

Subject: Hot Springs and Water management plans

When: Tuesday, October 1, 2019 2:00 PM-3:00 PM (UTC-05:00) Eastern Time (US & Canada).

Where: Skype Meeting

Thanks Maria and Kurt. Let's shoot for 10/1 at 2:00 pm ET, but we can move it if needed.

And please feel free to forward the invitation to Laura Miller or any other folks that you think may be interested in joining (same for the AR DOH side, Allison).

Best regards, Jessica	
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(855) 348-8390 (Atlanta Dial-in Conference Region)	English (United States)
Find a local number	
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Forgot your dial-in PIN?   Help	

From: Said, Maria < maria\_said@nps.gov>

Sent: Wednesday, September 18, 2019 3:01 PM To: Kesteloot, Kurt < kurt kesteloot@nps.gov >

**Cc:** Smith, Jessica (CDC/DDID/NCIRD/DBD) < <a href="https://linear.com/linear.com/linear.com/"><a href="https://linear.com/linear.com/"><a href="https://linear.com/linear.com/"><a href="https://linear.com/linear.com/"><a href="https://linear.com/linear.com/"><a href="https://linear.com/"><a href="https://linear.com/">https://linear.com/</a><a href="https://linear.com/">https://linear.com/</a><a href="https://linear.com/">https://linear.com/</a><a href="https://linear.com/">https://linear.com/</a><a href="https://linear.com/">https://linear.com/</a><a href="https://linear.com/">https://linear.com/</a><a href="https://linear.com/">https://linear.com/</a><a href="https://linear.com/">https://linear.com/</a><a href="htt

Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP) < izk0@cdc.gov>

Subject: Re: [EXTERNAL] RE: Hot Springs and Water management plans

Hi Kurt,

I think the call will focus on water management plans -- if you think the park would be interested in being part of that discussion, I think it would be fine. We can add Laura Miller and whoever else might be interested in the calendar invite once we have a day/time.

Maria

On Wed, Sep 18, 2019 at 1:49 PM Kesteloot, Kurt < <a href="mailto:kurt\_kesteloot@nps.gov">kurt < kurt\_kesteloot@nps.gov</a> wrote:

I'm fairly open that week and look forward to talking more. Should we invite a couple people from the Park?

Thank You and Very Respectfully,

Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS
Supervisory Public Health Consultant, Interior Regions 3-5
National Park Service, Office of Public Health (OPH),
601 Riverfront Drive
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"The NPS One Health Network: promoting and protecting the health of all species and the parks that we share." GREEN DOT

On Wed, Sep 18, 2019 at 11:45 AM Said, Maria < maria said@nps.gov > wrote:

Fantastic.

Tuesday 10/1 is wide open for me too.

The rest of that week I'll be at the IDSA conference and could step out if need be, but it would be less ideal.

Thank you!

Maria

On Wed, Sep 18, 2019 at 11:23 AM Smith, Jessica (CDC/DDID/NCIRD/DBD) < <a href="https://lyd7@cdc.gov">lyd7@cdc.gov</a> wrote:

Hi Maria,

We're happy to reconvene to discuss WMPs at Hot Springs. Starting tomorrow Troy is going to be traveling internationally, but he's back in the office on the 30<sup>th</sup> if we could shoot for a time

that week? I'm also looping in Jasen and Claressa in case they can join too, since they bring the ASHRAE perspective and Claressa may be able to speak to the ecology of *Legionella* in this setting.

Right now it looks like Tuesday, 10/1 is wide open for us. Thurs, 10/3 we're free at 3:00 pm and then Friday, 10/4 at 1:00 pm and 3:00 pm ET.

Also, I was hoping we would have heard back from colleagues in Japan by now about any public health recommendations they have for similar settings, but unfortunately we haven't. I do think by the week of the 30<sup>th</sup> I should be able to do a quick lit review about cases and clusters associated with hot springs and can share any pertinent findings during the call.

Thanks, Jessica

\_

### Jessica C. Smith, MPH

Epidemiologist | Centers for Disease Control and Prevention NCIRD/DBD/Respiratory Diseases Branch 404.718.5205 | lyd7@cdc.gov

From: Said, Maria < maria said@nps.gov >

Sent: Wednesday, September 18, 2019 9:22 AM

**To:** Cooley, Laura A. (CDC/DDID/NCIRD/DBD) < whz3@cdc.gov>; Smith, Jessica (CDC/DDID/NCIRD/DBD) < lyd7@cdc.gov>; Ritter, Troy (CDC/DDNID/NCEH/DEHSP) < tir4@cdc.gov>; James, Allison (CDC arkansas.gov) < allison.james@arkansas.gov>; Kesteloot,

Kurt < kurt\_kesteloot@nps.gov>

Subject: Hot Springs and Water management plans

Hi Laura, Jessica, and Troy,

We (NPS and Arkansas) are trying to figure out the best path forward with the Hot Springs legionella cases. As you know, all the environmental testing has been negative. However, we have had a number of travel-related cases, and, based on Arkansas state data, it looks like there might be increased cases in the Hot Springs area generally compared to the rest of the state -- although these data are still being analyzed, and I would leave it to Arkansas to confirm this.

We also have considered more where the hot spring water is going -- apparently, it does not just go to the Quapaw, but it goes to a number of other concession operated businesses (including another spa) as well businesses outside park property (including a hospital therapeutic pool and at least one other hotel). One action we are considering is sending a letter to those who receive spa water and basically recommending that although we have never identified legionella in the water and don't know of any increased risk, we do know that untreated water does pose a risk for legionella growth, and businesses might want to consider a water management plan. My feeling is that it would be beneficial to them, if we have an additional case, to then be able to clearly describe their water system and the results of some pre-determined parameters (such as temperatures) over time.

If you all are available at any time, I would love to get your thoughts. Some questions I have are:

- Is a water management plan appropriate even for those buildings that don't meet ASHRAE building guidance criteria?
- Is a water management plan needed for only places that don't disinfect? I know that water management plans are used by many systems in which chlorine is used, but in this case, in which we don't have any evidence of Legionella growth in the hot spring water, I don't think we can or should point to hot spring water as a particular Legionella risk -- the risk in my mind is just from the fact that it is not disinfected.
- Should any of the water management plans include legionella testing? I think the Quapaw might consider this -- but then what would be the guidance if they get positive results?

I am including Allison, the new EIS officer for Arkansas on the thread. Dirk Haselow is no longer with the state health department.

Thanks for any thoughts on this. Hope you guys are well. Maria

--

Maria Said, MD, MHS | CDR, U.S. Public Health Service Epidemiology Branch Chief | Office of Public Health | National Park Service Address: 1849 C. Street, NW, Room 2543, Mailstop 2560 | Washington, DC 20240 Office Tel: 202-513-7151 | Email: maria\_said@nps.gov Website (public): https://www.nps.gov/orgs/1878/index.htm

Website (internal): <a href="https://sites.google.com/a/nps.gov/in2-protect-and-promote-type-algorithm">https://sites.google.com/a/nps.gov/in2-protect-and-promote-type-algorithm</a>

health/home/disease-surveillance-response

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Maria Said, MD, MHS | CDR, U.S. Public Health Service Epidemiology Branch Chief | Office of Public Health | National Park Service Address: 1849 C. Street, NW, Room 2543, Mailstop 2560 | Washington, DC 20240 Office Tel: 202-513-7151 | Email: maria\_said@nps.gov

Office Tel: 202-513-/151 | Email: <u>maria\_said@nps.gov</u> Website (public): <u>https://www.nps.gov/orgs/1878/index.htm</u>

Website (internal): https://sites.google.com/a/nps.gov/in2-protect-and-promote-health/home/disease-

surveillance-response

Sent:	1 Oct 2019 17:01:28 +0000				
To:	Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP);Smith, Jessica				
(CDC/DDID/NCIRD/DBD);Kozak-Muiznieks, Natalia A. (CDC/DDID/NCIRD/DBD);Ritter, Troy					
(CDC/DDNID/NCEH/DE	HSP)				
Subject:	RE: Hot Springs and Water management plans				
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•	(CDC/DDNID/NCEH/DEHSP) <izk0@cdc.gov></izk0@cdc.gov>				
Sent: Tuesday, Octobe					
	C/DDID/NCIRD/DBD) <lyd7@cdc.gov>; Kozak-Muiznieks, Natalia A.</lyd7@cdc.gov>				
	D) <htv2@cdc.gov>; Ritter, Troy (CDC/DDNID/NCEH/DEHSP) <tir4@cdc.gov>;</tir4@cdc.gov></htv2@cdc.gov>				
	DDID/NCIRD/DBD) <chl9@cdc.gov></chl9@cdc.gov>				
Subject: RE: Hot Sprin	gs and Water management plans				
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Jasen					
From: Smith, Jessica (	CDC/DDID/NCIRD/DBD) <lyd7@cdc.gov></lyd7@cdc.gov>				
Sent: Tuesday, Octobe	·				
<u>-</u>	Natalia A. (CDC/DDID/NCIRD/DBD) < htv2@cdc.gov>; Kunz, Jasen M.				
	EHSP) < izk0@cdc.gov>; Ritter, Troy (CDC/DDNID/NCEH/DEHSP) < tir4@cdc.gov>;				
	DDID/NCIRD/DBD) <chl9@cdc.gov></chl9@cdc.gov>				
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	ss, Natalia A. (CDC/DDID/NCIRD/DBD) < htv2@cdc.gov>				
Sent: Tuesday, Octobe					
To: Kunz, Jasen M. (CD	DC/DDNID/NCEH/DEHSP) < <a href="mailto:rizk0@cdc.gov">"&gt; restricted (CDC/DDID/NCIRD/DBD)</a>				
< <u>lyd7@cdc.gov</u> >; Ritte	er, Troy (CDC/DDNID/NCEH/DEHSP) < <a href="mailto:tir4@cdc.gov">tucas, Claressa</a>				
(CDC/DDID/NCIRD/DB	D) < <u>chl9@cdc.gov</u> >				
Subject: RE: Hot Sprin	gs and Water management plans				
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Lucas, Claressa (CDC/DDID/NCIRD/DBD)

From:

	(b)( <del>3</del> )
From: Kunz, Jasen M.	(CDC/DDNID/NCEH/DEHSP) < izk0@cdc.gov>
Sent: Tuesday, Octobe	· · · · · · · · · · · · · · · · · · ·
To: Kozak-Muiznieks,	Natalia A. (CDC/DDID/NCIRD/DBD) <

(b)(3)
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From: Kozak-Muiznieks, Natalia A. (CDC/DDID/NCIRD/DBD) <

Thank you, Natalia

From: Smith, Jessica (CDC/DDID/NCIRD/DBD) < lyd7@cdc.gov>

Sent: Tuesday, October 1, 2019 10:27 AM

**To:** Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP) < <u>izk0@cdc.gov</u>>; Ritter, Troy (CDC/DDNID/NCEH/DEHSP) < tir4@cdc.gov >; Lucas, Claressa (CDC/DDID/NCIRD/DBD) < chl9@cdc.gov >; Kozak-Muiznieks, Natalia A. (CDC/DDID/NCIRD/DBD) < htv2@cdc.gov> Subject: RE: Hot Springs and Water management plans Hi all — Before this call at 2 pm today, I thought I'd pass along this guidance from Japan that seems relevant: (b)(<u>5</u>) (b)(3) (b)(<u>5</u>)

----Original Appointment-----

From: Smith, Jessica (CDC/DDID/NCIRD/DBD)
Sent: Wednesday, September 18, 2019 5:05 PM

To: Smith, Jessica (CDC/DDID/NCIRD/DBD); Said, Maria; Kesteloot, Kurt; Ritter, Troy

(CDC/DDNID/NCEH/DEHSP); Edens, William (Chris) (CDC/DDID/NCIRD/DBD)

**Cc:** Cooley, Laura A. (CDC/DDID/NCIRD/DBD); James, Allison (CDC arkansas.gov); Lucas, Claressa (CDC/DDID/NCIRD/DBD); Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP); Kozak-Muiznieks, Natalia A.

(CDC/DDID/NCIRD/DBD)

Subject: Hot Springs and Water management plans

When: Tuesday, October 1, 2019 2:00 PM-3:00 PM (UTC-05:00) Eastern Time (US & Canada).

Where: Skype Meeting

Thanks Maria and Kurt. Let's shoot for 10/1 at 2:00 pm ET, but we can move it if needed.

And please feel free to forward the invitation to Laura Miller or any other folks that you think may be interested in joining (same for the AR DOH side, Allison).

Jessica	
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Conference ID: (b)(6)  Forgot your dial-in PIN?   Help	

From: Said, Maria < maria said@nps.gov>

**Sent:** Wednesday, September 18, 2019 3:01 PM **To:** Kesteloot, Kurt <<u>kurt\_kesteloot@nps.gov</u>>

**Cc:** Smith, Jessica (CDC/DDID/NCIRD/DBD) < <a href="mailto:liver-nc-edge-nc-e

Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP) < izk0@cdc.gov>

Subject: Re: [EXTERNAL] RE: Hot Springs and Water management plans

Hi Kurt,

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Maria

On Wed, Sep 18, 2019 at 1:49 PM Kesteloot, Kurt < <a href="mailto:kurt\_kesteloot@nps.gov">kurt <a href="mailto:

I'm fairly open that week and look forward to talking more. Should we invite a couple people from the Park?

Thank You and Very Respectfully,

Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS
Supervisory Public Health Consultant, Interior Regions 3-5
National Park Service, Office of Public Health (OPH),
601 Riverfront Drive
Omaha, NE 68102
Office Phone: 1-402-661-1718

Office Fax: 1-402-661-1719
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Email: <u>Kurt\_Kesteloot@nps.gov</u>

×

"The NPS One Health Network: promoting and protecting the health of all species and the parks that we share." GREEN DOT

On Wed, Sep 18, 2019 at 11:45 AM Said, Maria <maria said@nps.gov> wrote:

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The rest of that week I'll be at the IDSA conference and could step out if need be, but it would be less ideal.

Thank you!

Maria

On Wed, Sep 18, 2019 at 11:23 AM Smith, Jessica (CDC/DDID/NCIRD/DBD) < <a href="https://lyd7@cdc.gov">lyd7@cdc.gov</a> wrote:

Hi Maria,

We're happy to reconvene to discuss WMPs at Hot Springs. Starting tomorrow Troy is going to be traveling internationally, but he's back in the office on the 30<sup>th</sup> if we could shoot for a time that week? I'm also looping in Jasen and Claressa in case they can join too, since they bring the

ASHRAE perspective and Claressa may be able to speak to the ecology of *Legionella* in this setting.

Right now it looks like Tuesday, 10/1 is wide open for us. Thurs, 10/3 we're free at 3:00 pm and then Friday, 10/4 at 1:00 pm and 3:00 pm ET.

Also, I was hoping we would have heard back from colleagues in Japan by now about any public health recommendations they have for similar settings, but unfortunately we haven't. I do think by the week of the 30<sup>th</sup> I should be able to do a quick lit review about cases and clusters associated with hot springs and can share any pertinent findings during the call.

Thanks, Jessica

—

### Jessica C. Smith, MPH

Epidemiologist | Centers for Disease Control and Prevention NCIRD/DBD/Respiratory Diseases Branch 404.718.5205 | lyd7@cdc.gov

From: Said, Maria <maria said@nps.gov>

Sent: Wednesday, September 18, 2019 9:22 AM

**To:** Cooley, Laura A. (CDC/DDID/NCIRD/DBD) < whz3@cdc.gov>; Smith, Jessica (CDC/DDID/NCIRD/DBD) < lyd7@cdc.gov>; Ritter, Troy (CDC/DDNID/NCEH/DEHSP) < tir4@cdc.gov>; James, Allison (CDC arkansas.gov) < allison.james@arkansas.gov>; Kesteloot,

Kurt <kurt\_kesteloot@nps.gov>

Subject: Hot Springs and Water management plans

Hi Laura, Jessica, and Troy,

We (NPS and Arkansas) are trying to figure out the best path forward with the Hot Springs legionella cases. As you know, all the environmental testing has been negative. However, we have had a number of travel-related cases, and, based on Arkansas state data, it looks like there might be increased cases in the Hot Springs area generally compared to the rest of the state -- although these data are still being analyzed, and I would leave it to Arkansas to confirm this.

We also have considered more where the hot spring water is going -- apparently, it does not just go to the Quapaw, but it goes to a number of other concession operated businesses (including another spa) as well businesses outside park property (including a hospital therapeutic pool and at least one other hotel). One action we are considering is sending a letter to those who receive spa water and basically recommending that although we have never identified legionella in the water and don't know of any increased risk, we do know that untreated water does pose a risk for legionella growth, and businesses might want to consider a water management plan. My feeling is that it would be beneficial to them, if we have an additional case, to then be able to clearly describe their water system and the results of some pre-determined parameters (such as temperatures) over time.

If you all are available at any time, I would love to get your thoughts. Some questions I have are:

- Is a water management plan appropriate even for those buildings that don't meet ASHRAE building guidance criteria?
- Is a water management plan needed for only places that don't disinfect? I know that water management plans are used by many systems in which chlorine is used, but in this case, in which we don't have any evidence of Legionella growth in the hot spring water, I don't think we can or should point to hot spring water as a particular Legionella risk -- the risk in my mind is just from the fact that it is not disinfected.
- Should any of the water management plans include legionella testing? I think the Quapaw might consider this -- but then what would be the guidance if they get positive results?

I am including Allison, the new EIS officer for Arkansas on the thread. Dirk Haselow is no longer with the state health department.

Thanks for any thoughts on this. Hope you guys are well. Maria

--

Maria Said, MD, MHS | CDR, U.S. Public Health Service Epidemiology Branch Chief | Office of Public Health | National Park Service Address: 1849 C. Street, NW, Room 2543, Mailstop 2560 | Washington, DC 20240 Office Tel: 202-513-7151 | Email: maria\_said@nps.gov

Office Tel: 202-513-7151 | Email: maria\_said(a:nps.gr Website (public): https://www.nps.gov/orgs/1878/index.htm

Website (internal): https://sites.google.com/a/nps.gov/in2-protect-and-promote-

<u>health/home/disease-surveillance-response</u>

--

Maria Said, MD, MHS | CDR, U.S. Public Health Service

Epidemiology Branch Chief | Office of Public Health | National Park Service Address: 1849 C. Street, NW, Room 2543, Mailstop 2560 | Washington, DC 20240

Office Tel: 202-513-7151 | Email: <u>maria\_said@nps.gov</u> Website (public): <u>https://www.nps.gov/orgs/1878/index.htm</u>

Website (internal): https://sites.google.com/a/nps.gov/in2-protect-and-promote-health/home/disease-

surveillance-response

From: Kesteloot, Kurt

**Sent:** 4 Oct 2019 06:47:44 -0500

To: Mark Scott;laura\_a\_miller@nps.gov

Cc: Lucas, Claressa (CDC/DDID/NCIRD/DBD);Smith, Jessica

(CDC/DDID/NCIRD/DBD);Ritter, Troy (CDC/DDNID/NCEH/DEHSP);Maria Said;Robert Kammel

Subject: 10-4-19 Legionella Sampling Plan

Attachments: HOSP Thermal Water Sampling Plan 10-4-19.pdf

### Good Morning Everyone,

Mark and I talked yesterday about the attached sampling plan for today. I have attached a drawing that lists the samples and shows a rough overview of the system. If anyone has any additional thoughts, comments, or questions, please let me know.

Currently, I have 23 locations listed. Thus, we have two more available if needed. I have not listed the thermal water system main tank under administration because it has been tested at least three times (once with PCR/new lab) and has been negative all times. I have also excluded the showers in the Quapaw because they were plumbed improperly and will not be used that way ever again. All of the tests focus on the NPS water system, we could talk to the city about testing their fountains and/or test the city water in the Quapaw (showers on main level and one in the basement). Any thoughts?

Thank You and Very Respectfully,

### Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS Supervisory Public Health Consultant, Interior Regions 3-5 National Park Service, Office of Public Health (OPH), 601 Riverfront Drive Omaha, NE 68102

Office Phone: 1-402-661-1718 Office Fax: 1-402-661-1719 Cell Phone: 1-202-641-0055 Email: Kurt\_Kesteloot@nps.gov

×

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On Thu, Oct 3, 2019 at 3:50 PM Maria Said \( \sigma \) maria said \( \hat{a} \) mps.gov \( \sigma \) wrote:

Thanks Claressa. And to take it one step further, positive PCR results will be much less useful, right? My understanding is that they are not accurate for predicting culture results and we would just have to wait for cultures to be finalized, correct?

Thank you again!

Maria Said, MD, MHS CDR, US Public Health Service Epidemiology Branch Chief Office of Public Health National Park Service (O) 202-513-7151 (C) 202-538-5682

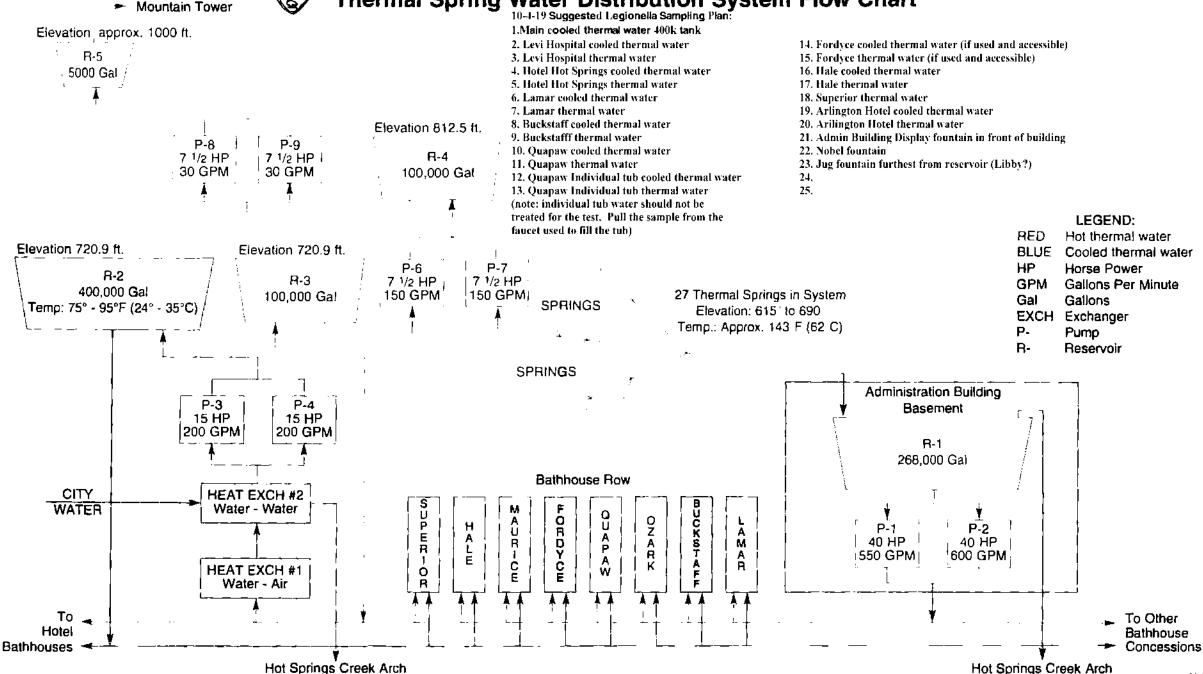
```
(C) 202-538-5682
> On Oct 3, 2019, at 3:52 PM, Lucas, Claressa (CDC/DDID/NCIRD/DBD)
<chl9@cdc.gov> wrote:
> Hi Maria,
> Yes, negative PCR results are >99% predictive of a negative culture result.
> Best wishes.
> Claressa
> ----Original Message----
> From: Maria Said <maria said@nps.gov>
> Sent: Thursday, October 3, 2019 3:49 PM
> To: James, Allison (CDC arkansas.gov) <allison.james@arkansas.gov>;
jennifer.dillaha@arkansas.gov; Kurt Kesteloot <kurt kesteloot@nps.gov>;
laura a miller@nps.gov; Lucas, Claressa (CDC/DDID/NCIRD/DBD)
<chl9@cdc.gov>; Smith, Jessica (CDC/DDID/NCIRD/DBD) <lyd7@cdc.gov>; Ritter,
Troy (CDC/DDNID/NCEH/DEHSP) < tir4@cdc.gov>
> Subject: Re: PCR?
> It looks from the lab that PCR results would be available the next day after testing.
> Claressa, am I correct that negative PCR results are highly predictive that culture
results will be negative as well?
>
> It seems to me that if we are able to get this information quickly, that will be very
helpful to us in determining our modes of notification.
> Thank you! Maria
> Maria Said, MD, MHS
```

```
> CDR, US Public Health Service
> Epidemiology Branch Chief
> Office of Public Health
> National Park Service
> (O) 202-513-7151
> (C) 202-538-5682
>
> On Oct 3, 2019, at 3:40 PM, Maria Said <a href="maria_said@nps.gov">maria_said@nps.gov</a> wrote:
>>
>> Does anyone know how quickly PCR results could be turned around? My
>> understanding of PCR is that negative PCR has a high predictive value and could be very useful in this situation if we can get results quickly. Thanks. Maria
>>
```



# **Hot Springs National Park**

Thermal Spring Water Distribution System Flow Chart 10-4-19 Suggested Legionella Sampling Plan:



03/16/01

### THE THERMAL WATER DISTRIBUTION SYSTEM OF HOT SPRINGS NATIONAL PARK

Systems for distributing thermal spring water at Hot Springs National Park have been around a long time, evolving along with the bathhouses. In the first half of the nineteenth century most "bathhouses" were rough wooden shacks or even tents, built over natural tufa cavities (sometimes enlarged) that held spring water. More elaborate bathhouses began springing up in the 1850s. Some boasted individual bath rooms with wooden tubs, requiring a network of wooden troughs to direct thermal water into flumes on the roofs. Inside the bathhouse, bathers pulled a rope, opening a mechanism that released water from the flume into the tub.

When a disastrous 1878 fire destroyed most of the bathhouses along Hot Springs Creek, the government seized the opportunity to improve both bathhouse construction and thermal water distribution. The Avenue Hotel Bathhouse, built in 1880, was allowed to set up a pump on the reservation. The first reservoir was built in 1880 as well. On June 8, 1891, a pumping station and reservoir were completed on the present site of the administration building in order to enhance thermal water distribution. Unfortunately a law passed that same year required water to be transported by gravity flow, and the pumping equipment was never used.

The government built more reservoirs in the 1890s to impound spring water and increase the flow. In 1897 all but four springs were encased in brick archways and their water piped to bathhouses and reservoirs; the remaining springs were enclosed by 1901. On November 10, 1903, Congress authorized funds for building surface and deep reservoirs on Hot Springs Mountain, adding to the collection of older reservoirs already in use. In 1924 National Park Service engineers drew a plan showing the existing complex of springs, reservoirs, and plumbing in preparation for the first central collection, impounding and distribution system for the thermal water, completed around 1931. Meters installed on bathhouse lines were not fully functional until 1933. The present system allows better control and monitoring of the water flow.

The springs are located on about 2.8 acres along Bathhouse Row and the Grand Promenade. The bulk of the approximately 850,000 gallons of thermal water flowing each day from Hot Springs Mountain is collected from 27 of the 47 presently active springs. Each spring in the collection system has been sealed and covered with a green box about four feet square with a metal cover, chain, and padlock. The green boxes on the lower west slope of Hot Springs Mountain and the heat exchange units at the north end of Bathhouse Row are the most visible components of the thermal water distribution system and represent its source portion. Not all of the boxes indicate a spring; some hold only valves and collection plumbing. The boxes higher up on the mountain allow access to the underground reservoirs and plumbing.

The valve and spring collection boxes are connected with the plumbing system delivering thermal water to reservoir R-1 under the east end and parking lot of the administration building at the south end of Bathhouse Row. This reservoir holds about 268,000 gallons and includes an overflow pipe connected to the Hot Springs Creek arch.

In the administration building basement, two pumps (P-1 and P-2) move the thermal water through a twelve-inch cast-iron pipe in the Hot Springs Creek arch to the bathhouses, the heat exchangers, and a 100,000-gallon underground storage reservoir (R-3) about 120 feet above Bathhouse Row. The elevation of this reservoir ensures an ample supply of water at about 52 pounds per square inch (psi) when pumps P-1 and P-2 are idle. When demand increases, pumps P-6 and P-7 transfer thermal water from reservoir R-3 to another 100,000-gallon reservoir (R4) about 220 feet above Bathhouse Row. The plumbing for a number of bathhouses no longer in operation is still in the distribution system as well.

Surprisingly enough the water within the distribution system stays well above 100°F (37.8°C); the water has been flowing into it for decades, and the terrain around the reservoirs and plumbing is heat saturated. As a result, the water arriving at the bathhouses is far too hot for direct bathing. By the 1890s most of the bathhouses had individual cooling towers to cool down the thermal water. These and similar towers were used until the central thermal water cooling system was completed on February 8, 1950. The system is comprised of two heat exchangers (#1 and #2), two pumps (P-3 and P-4), and a 400,000-gallon reservoir (R-2). The first exchanger is a thermal water-to-air cooling unit that works like a car radiator; it contains a primary and secondary section,

each with a large fan to force air through its radiator cores. When both sections of heat exchanger #1 are unable to cool the water sufficiently, #2 comes on line. This exchanger runs cold city water over the tubes carrying the thermal water but never mixes with it. The city water, which is heated in the process, is discharged into the Hot Springs Creek arch, and pumps P-3 and P-4 move the cooled thermal water (still 100% spring water) into reservoir R-2. This reservoir is next to and at the same elevation as reservoir R-3, so an ample supply of cooled water is also available at about 52 psi. The system for delivering cooled thermal water is similar to the hot spring water distribution system.

By mixing hot and cooled spring water, attendants can administer baths at the temperature (98° to 100°F, 36.7° to 37.8°C) required by regulations. The system was designed to produce thermal water cooled to temperatures ranging from 75° to 90°F (24° to 32.2°C). During most of the year when outdoor temperatures are below 80°F (26.7°C), the system works well, but during the hot summer months the desired temperature range is difficult to achieve. To compensate, heat exchanger #2 has been redesigned, and installation of new equipment began in the first quarter of fiscal year 2001.

The entire system is monitored automatically from the basement of the park administration building. The quantity and temperature of the water coming in from the springs are recorded continuously for 24 hours a day, as are water levels in each reservoir. Meters at each bathhouse transmit readings on the amount of water used to the monitoring center. Analyses of these data alert maintenance workers to the possibility of major leaks or equipment failure.

One source of equipment failure is the buildup of calcium carbonate, or limestone, in the system. Similar to the water found in caves, the spring water contains dissolved limestone that can be deposited in pipes, valves, and other system components, particularly in those handling cooled spring water. Because calcium carbonate is less soluble in cold water, it settles out in greater quantities in cooled water systems. Also called "tufa," the deposit is left wherever the thermal springs flow. In fact, the porous gray tufa formations behind Bathhouse Row are really geological "maps" showing where the springs once flowed freely down the mountainside.

From: Kesteloot, Kurt

**Sent:** 11 Jul 2019 23:21:38 -0500

To: Ritter, Troy (CDC/DDNID/NCEH/DEHSP);Terry.Paul@arkansas.gov

Cc: Sara Newman;Said, Maria

Subject: DRAFT Sampling Plan for Tomorrow's Discussion

Attachments: Legionella DRAFT Sampling Plan 7-11-19.docx, HOSP\_Legionella testing

DRAFT.pdf, Presentation2.pdf

### Good Evening Troy and Terry,

I will try to call you both tomorrow morning sometime. Hopefully around 0700 CDT. I have attached a few documents for your review. These are just a draft and need more review as it is late and I wanted to have something to share with you for our discussion. I have attached old system plans with comments, a MS Word document, and photos.

Talk to you tomorrow.

Thank You and Very Respectfully,

### Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS Supervisory Public Health Consultant, Midwest Region National Park Service, Office of Public Health (OPH), 601 Riverfront Drive Omaha, NE 68102

Office Phone: 1-402-661-1718 Office Fax: 1-402-661-1719 Cell Phone: 1-202-641-0055 Email: Kurt Kesteloot@nps.gov



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### Cold Thermal System:

- Sheets two and three of 12 show the location of the cooling tower. Bulk samples are recommended immediately after the cooling towers
- Bulk samples are recommended from the cold thermal line in the Quapaw.
- Any other cooling tower recommendations. Closest a visitor gets to a tower is about 20 ft.

### Decretive fountains:

- Sheet 8 of 12 shows the Display fountain and Nobel fountain. It is recommended that both are bulk tested and swabbed if they are in operation.
- Per sheet 2 of 12 there is another fountain in the Arlington lawn that it is recommended to be swabbed and bulk sampled.
- Per sheet 4 of 12, there are two fountains between the Maurice and Fordyce and it is recommended they are both swabbed and bulk tested.
- Are there other decorative fountains that should be tested that I have not listed?

### Quapaw Water Processes/Facility:

- Aroma therapy: What is it and is there anything we can test? Swab and bulk sample if possible
- Sheet 4 of 12 shows a 37'8" reservoir under the rooms in the basement of the Quapaw. A swab or two are recommended along with a bulk sample. Test the room(s) closest to the two cases if possible with a swab from opening the hatch.
- There are multiple single use spa tubs in the basement. A mixed bulk sample and swab from multiple or all tubs is recommended if we do not know if the two cases used the same tub.
- Swab the area next to the spring box exposed in the cave and the cave wall if possible. Also verify temperature in the cave.
- Basement fountain?
- Anything else they do with water in the basement?
- Fountains in community pools above?

Other areas in the park?

# Hot Springs National Park

Thermal Water Collection and Distribution System

### GENERAL NOTES

- I. LOCATIONS OF THE THERMAL WATER COLLECTION AND DISTRIBUTION SYSTEM AND APPURTENANCES WERE OBTAINED FROM SURFACE FIELD INSPECTIONS AND AS-BUILT DRAWINGS. NO SUB-SURFACE EXPLORATION WAS ATTEMPTED TO AVOID DISTURBANCES OF THE PARK.
- 2. SPRING FLOW RATES AND TEMPERATURES WERE MEASURED IN 1976 PRIOR TO CONSTRUCTION OF THE EXISTING COLLECTION SYSTEM.
- 3. ALL HW PIPE IS 6-INCH OR 10-INCH DIAMETER, 2-INCH FACTORY INSULATED (EXTERIOR), EPOXY LINED DUCTILE IRON PIPE CONVEYING HOT WATER.
- 4. ALL CW PIPE IS 6-INCH OR 8-INCH DIAMETER, EPOXY LINED, DUCTILE IRON PIPE CONVEYING COOLED
- 5. ALL CP PIPE IS 4-INCH, 6-INCH, OR 8-INCH DIAMETER CHLORINATED POLYVINYL CHLORIDE (CPVC) PIPE CONVEYING HOT WATER. THE 4-INCH AND 6-INCH PIPE WAS INSTALLED INSIDE 6-INCH AND 8-INCH DIAMETER POLYVINYL CHLORIDE (PVC) PIPE, RESPECTIVELY.
- 6. ALL FCP PIPE IS 1 1/2-INCH, 2-INCH, 4-INCH, OR 6-INCH DIAMETER "SILVER THREAD" FIBERGLASS PIPE CONVEYING HOT WATER. THE 4-INCH AND 6-INCH PIPE WAS INSTALLED INSIDE 6-INCH OR 8-INCH DIAMETER ASBESTOS-CEMENT PIPE, RESPECTIVELY.
- 7. ALL TEMPERATURES SHOWN ARE DEGREES FAHRENHEIT.

# **ABBREVIATIONS**

AC ASBESTOS CEMENT PIPE BM BENCHMARK CI CAST IRON PIPE CENTER LINE

CONC CONCRETE OP COLLECTION PIPE COPPER PIPE

CW COOLED WATER PIPE

DIA DIAMETER

EL ELEVATION ELEC ELECTRICAL

FCP FIBERGLASS HOT WATER PIPE

GAL GALLON GL GAS PIPELINE

GPD GALLONS PER DAY

GV GATE VALVE

HW HOT WATER INCL INCLUDED

MH MANHOLE PVC POLYVINYL CHLORIDE PIPE

SS SANITARY SEWER

STA STATION

TBM TEMPORARY BENCHMARK

VC VITRIFIED CLAY PIPE

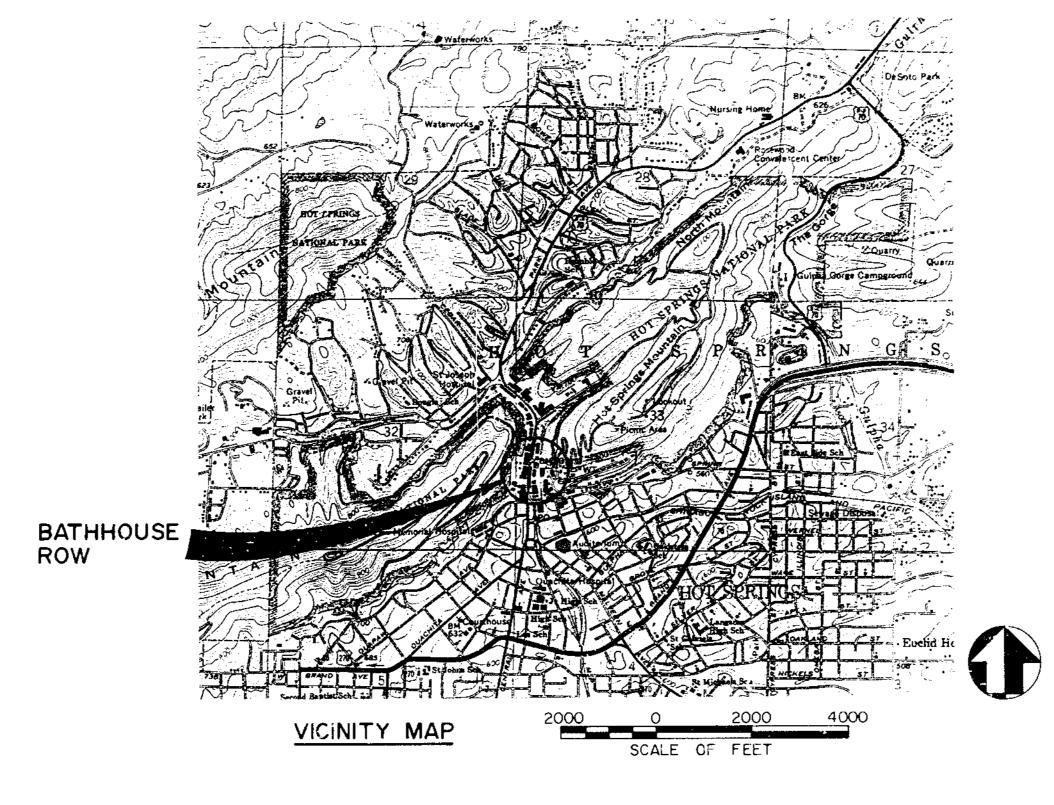
WL CITY WATER LINE

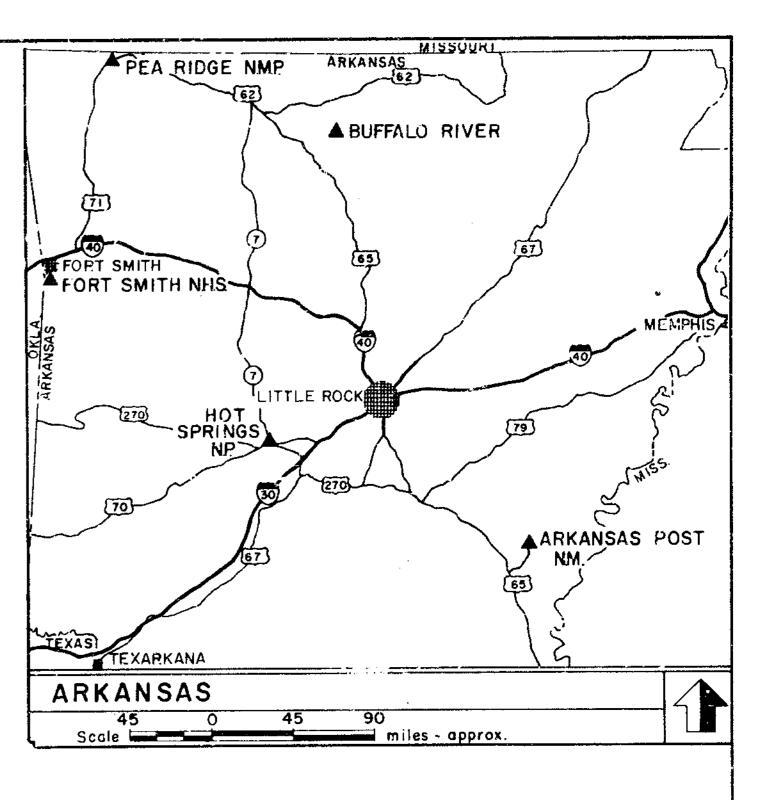
## LEGEND

DESCRIPTION SYMBOL HOT WATER PIPELINES COOLED WATER PIPELINES ELECTRICAL CONDUIT SPRING COLLECTION PIPELINES

GAS PIPELINES

VERTICAL WALL





### INDEX

- I. COVER SHEET
- 2. ARLINGTON LAWN AREA
- 3. BATHHOUSE ROW-PLAN & PROFILE
- 4. BATHHOUSE ROW-PLAN & PROFILE
- 5. BATHHOUSE ROW-PLAN & PROFILE
- 6. UPPER RESERVOIR PIPELINE PLAN & PROFILE
- 7. SPRING COLLECTION GROUP #2
- 8. SPRING COLLECTION GROUP #2
- 9. DETAILS
- IO. PROCESS AND INSTRUMENTATION DIAGRAMS
- II. PROCESS AND INSTRUMENTATION DIAGRAMS
- 12. ONE LINE ELECTRICAL

### REFERENCE DRAWINGS

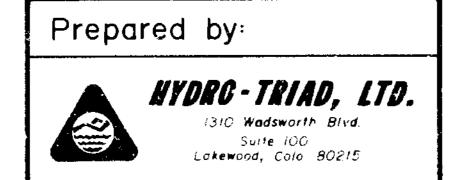
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- 2. NP HS-2043 (1948)
- 3. NP HS-5311C (1948)
- 4. 128 41,015A (1978)
- 5. |28 41,02|A (1985) 6. 128 60,001 (1981)
- 7. 128 41,0233 (1987)
- 8. 128 60,190 (1978)
- 9. 128 41,031A (1987)

# REDUCED SIZE REPRODUCTION

DRAWING NO. 128

41,035

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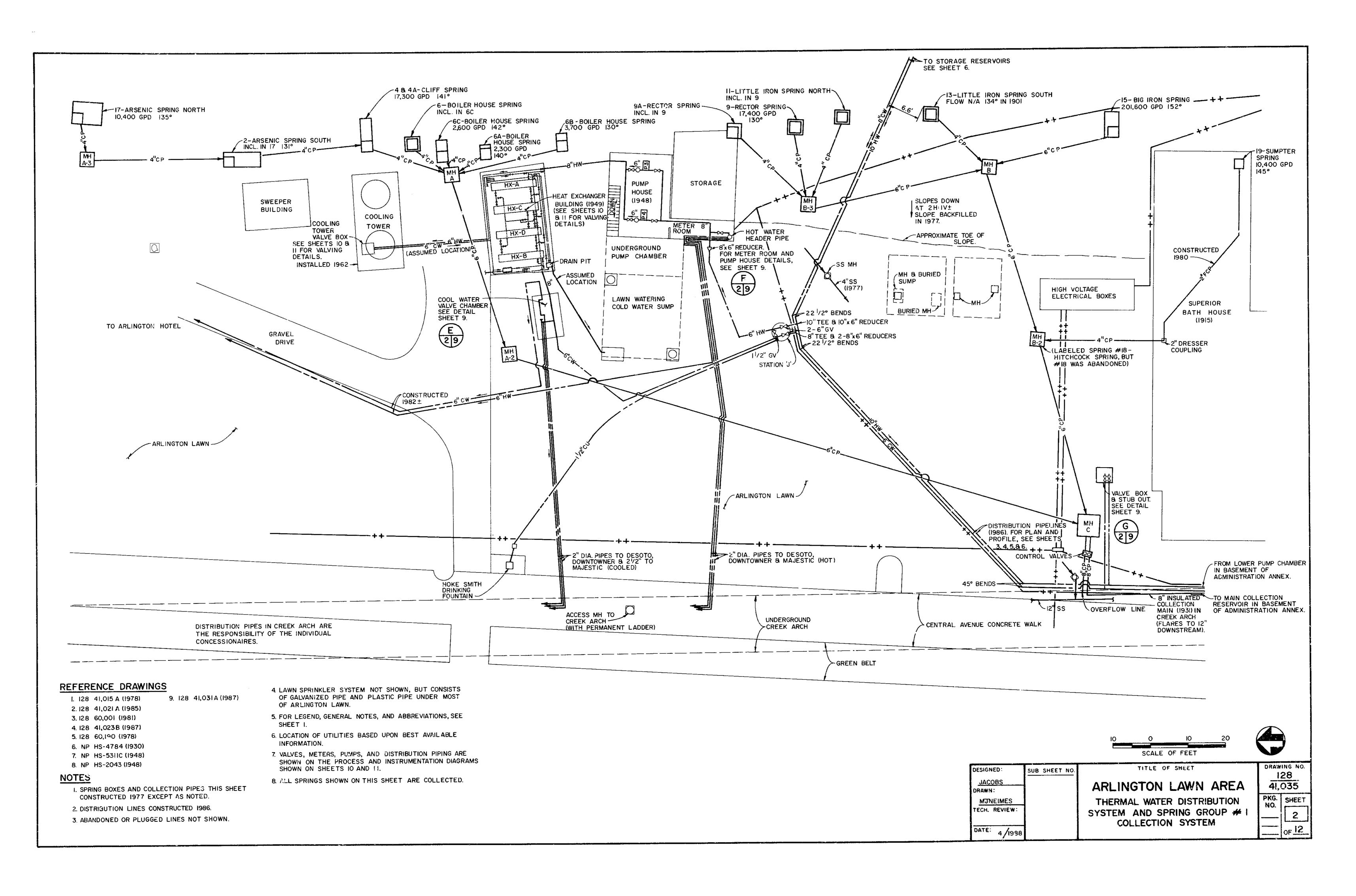


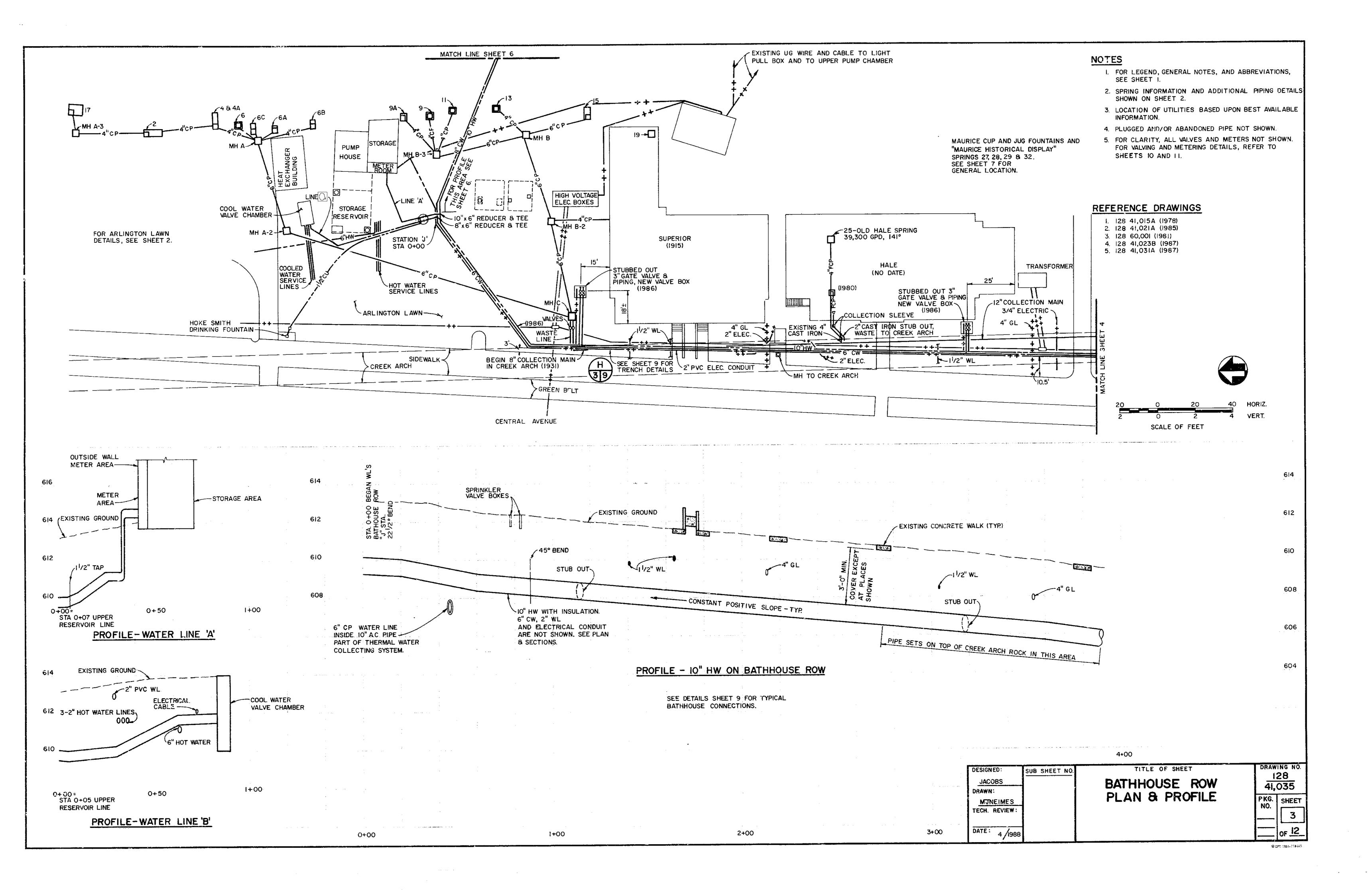
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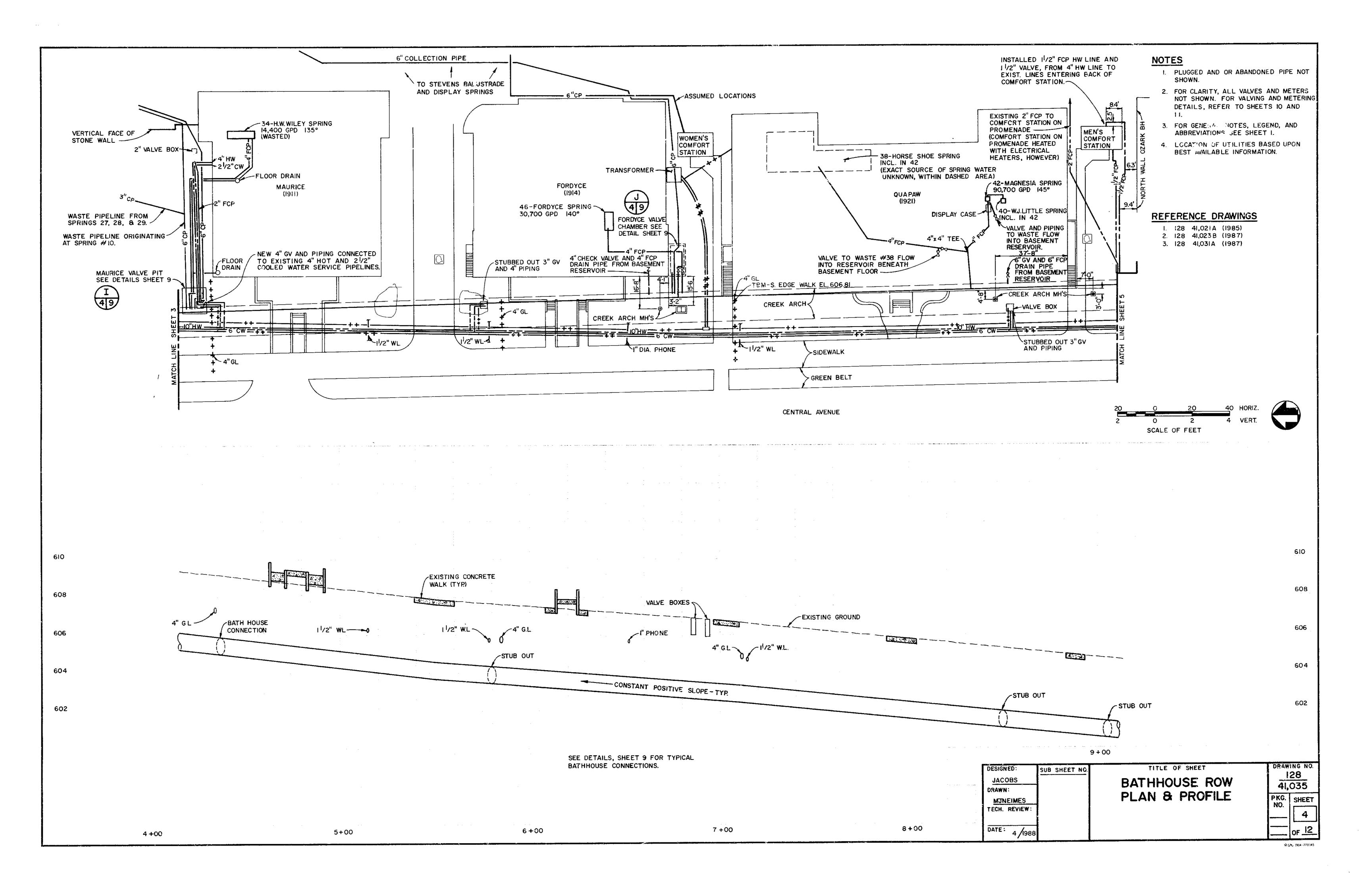
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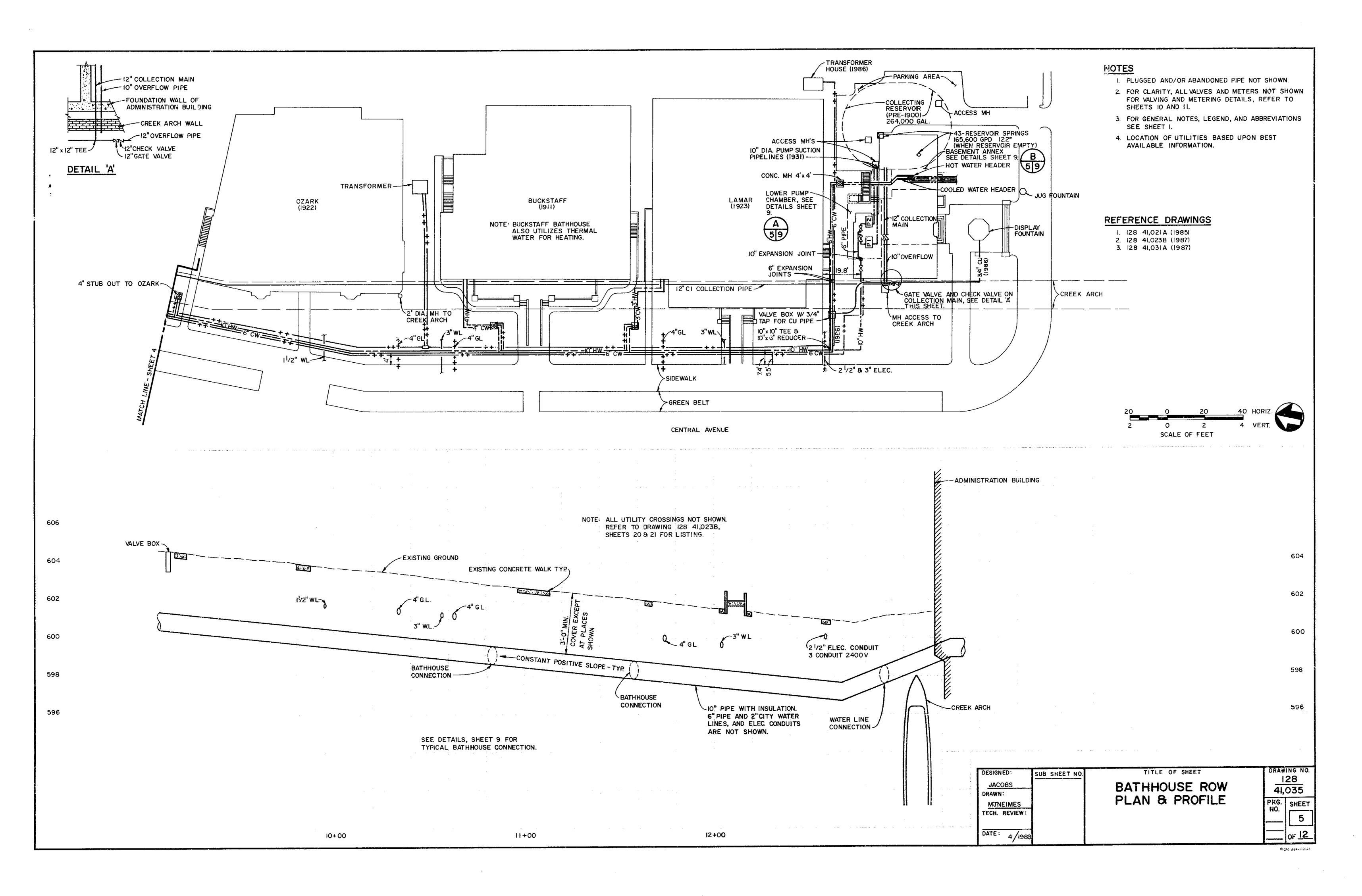
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NATIONAL PARK SERVICE	TECH. REVIEW:
DENVER SERVICE CENTER	DATE: 4/1988

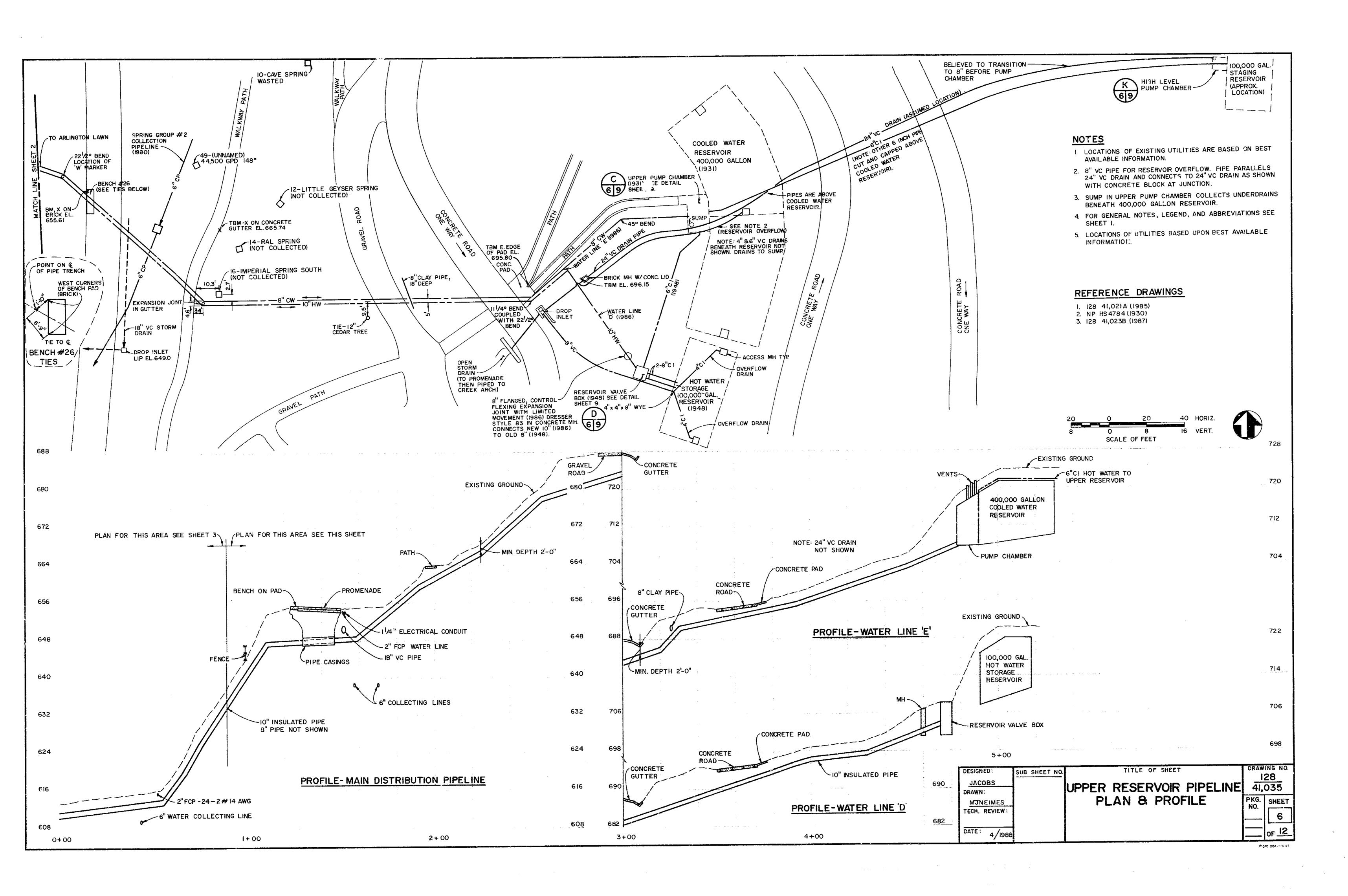
TITLE OF SHEET EXISTING CONDITIONS OF THE THERMAL WATER COLLECTION & DISTRIBUTION SYSTEM LOCATION WITHIN PARK					
BATHHOUSE ROW					
NAME OF PARK					
HOT SPRINGS NATIONAL PARK					
SOUTHWEST	GARLAND COUNTY	ARKANSAS STATE			
REGION	COUNTY	SIMIL			

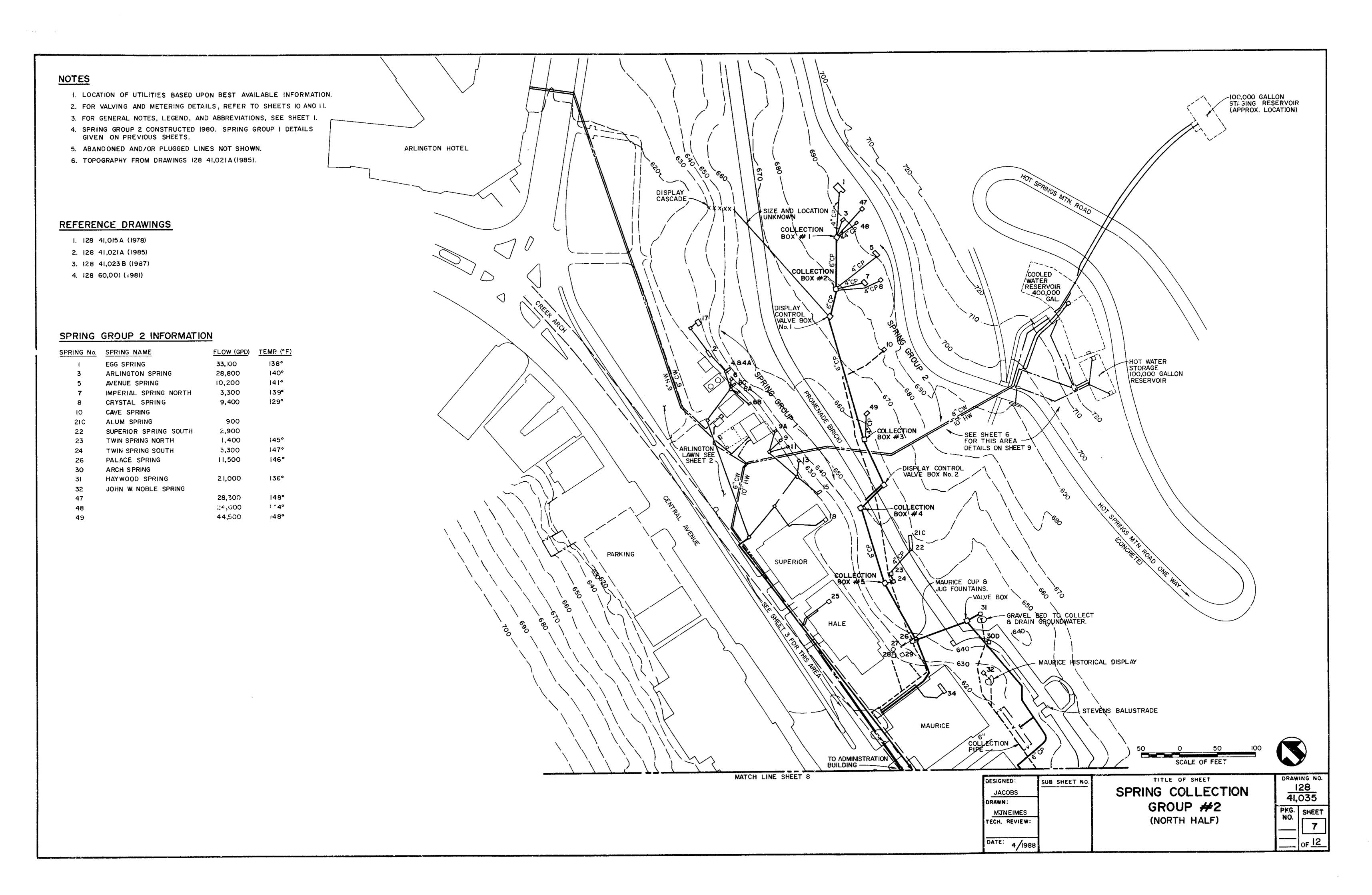


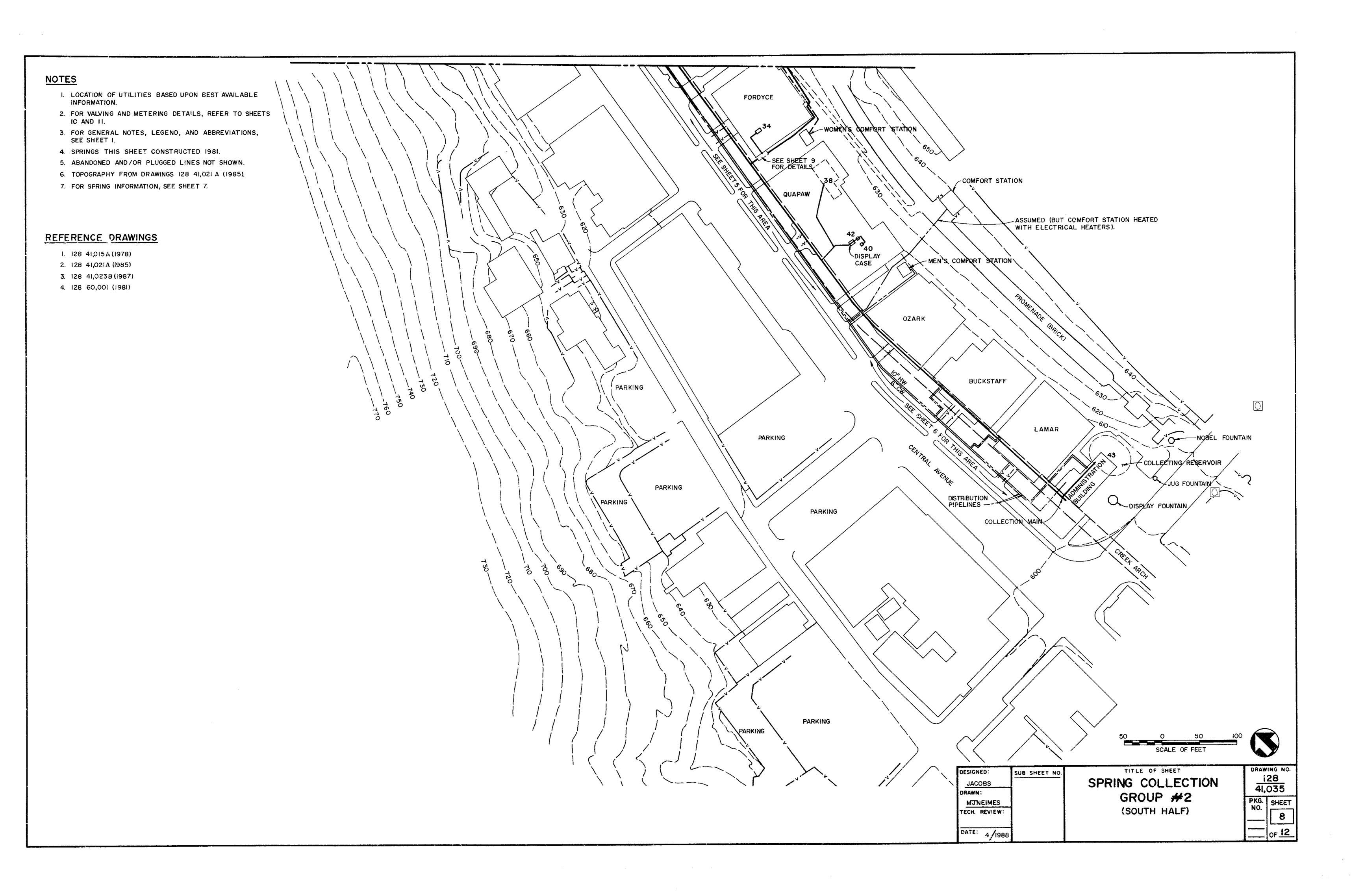


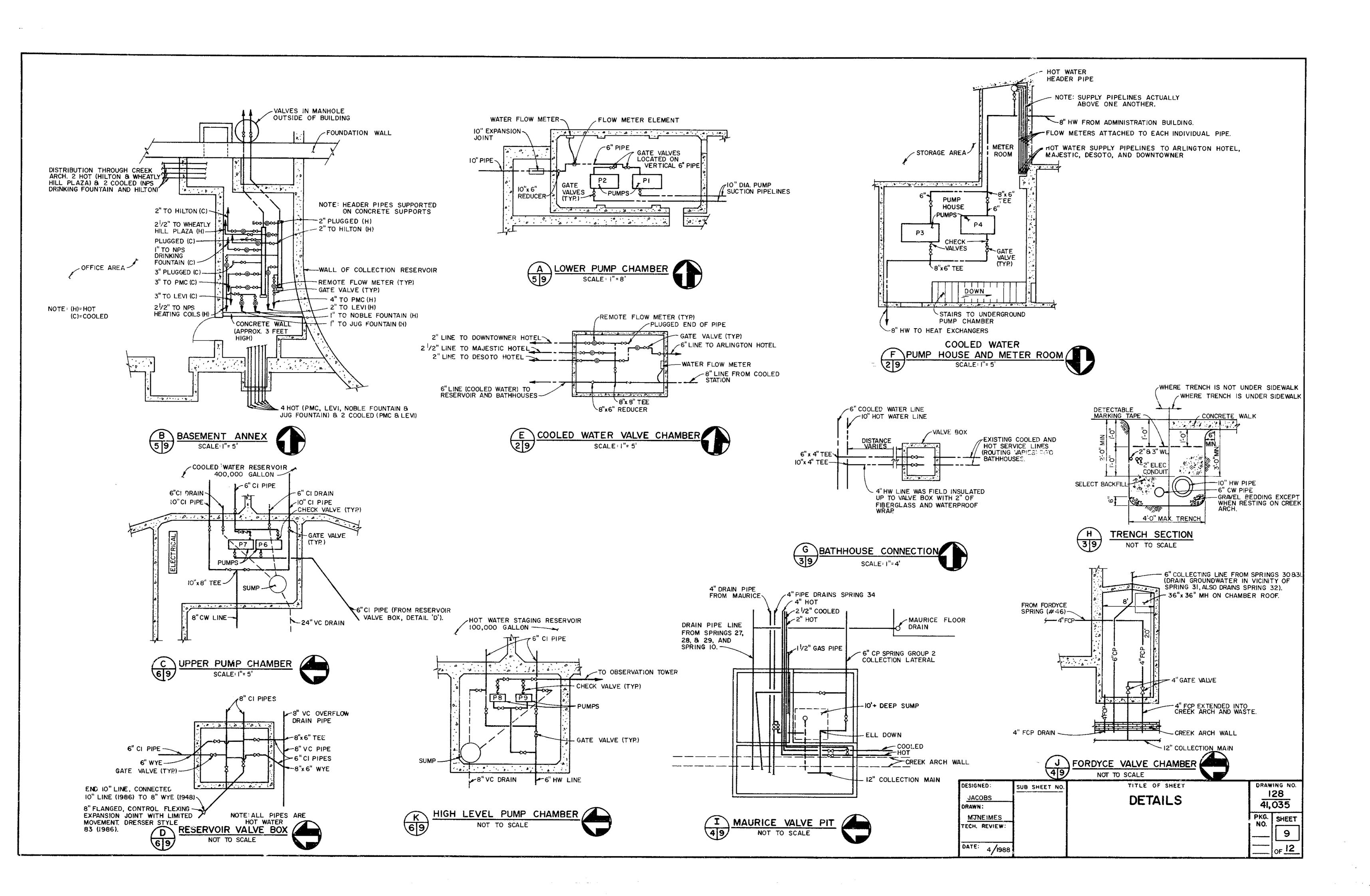






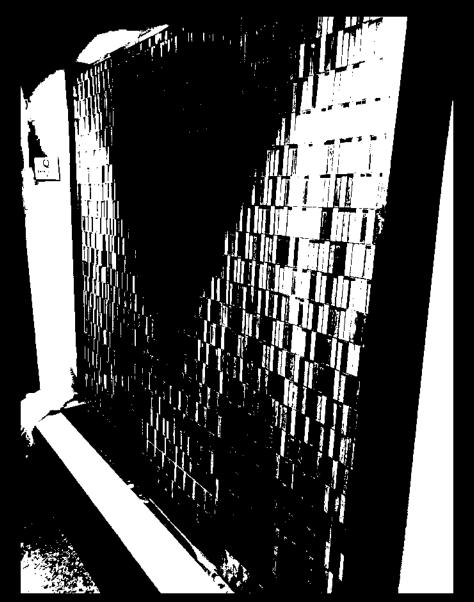








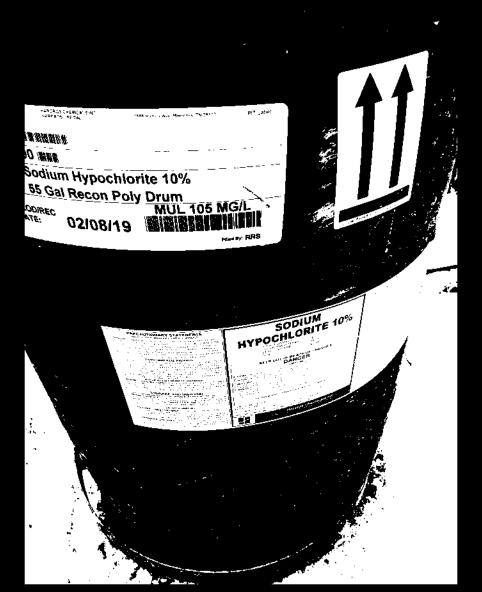
Display Fountain



Quapaw Basement Fountain



Quapaw basement hot tubs



Quapaw pool disinfectant

AT Water ( (Record Bye

Operator Sid & Co.

			R Chlori	esidual ne/Bro PPM	mine	C			pН	·		Chlorine	Acid
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									-+	-+			



Two Fountains Near Maurice

From: Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP)

Sent: 24 Oct 2019 14:01:55 +0000

To: Ritter, Troy (CDC/DDNID/NCEH/DEHSP); Lucas, Claressa (CDC/DDID/NCIRD/DBD)

Cc: Smith, Jessica (CDC/DDID/NCIRD/DBD)

Subject: FW: [EXTERNAL] Study of Legionella and Cl Contact Time

Attachments: HOSP\_Utilities Drawings text.pdf, Legionella Testing Plan 10-23-19.xlsx,

Susceptibility of LP to Cl in Tap Water.pdf

Claressa-calling you shortly on this email.

Jasen

From: Kesteloot, Kurt <kurt kesteloot@nps.gov> Sent: Wednesday, October 23, 2019 11:23 PM

To: Ritter, Troy (CDC/DDNID/NCEH/DEHSP) <tir4@cdc.gov>; Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP)

<izk0@cdc.gov>; Smith, Jessica (CDC/DDID/NCIRD/DBD) <lyd7@cdc.gov>; Said, Maria <maria\_said@nps.gov>; Mark Scott <Mark\_Scott@nps.gov>; Terry.Paul@arkansas.gov;

Richard.McMullen@arkansas.gov

Cc: Miller, Laura <a href="mailto:Aura\_a\_miller@nps.gov">a newman <a href="mailto:sara\_newman@nps.gov">sara Newman@nps.gov</a>>

Subject: Re: [EXTERNAL] Study of Legionella and Cl Contact Time

Good Evening Everyone,

Thank you for the assistance today. It was great to talk about the need for additional testing at Hot Spring National Park. It was also good to share the plan to try to reduce water age were possible. The park plans to take a temperature at the top of the cooled water storage tank and at the bottom from the drain and share with everyone.

When time permits, can you please look at the attached legionella testing plan to help understand if the NPS water system has legionella present. I have attached a drawing to help everyone understand the system and locations.

Meanwhile, it would be great to agree upon an appropriate contact time for NaOH chemical disinfection for a residual between 2 and 4 mg/L. CDR Troy Ritter was great and shared the attached study on contact time; however, it is for a lower residual. Currently, we have recommended 20-30 minutes; however, facilities have stated that is problematic.

Thank You and Very Respectfully,

Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS Supervisory Public Health Consultant, Interior Regions 3-5 National Park Service, Office of Public Health (OPH), 601 Riverfront Drive Omaha, NE 68102

Office Phone: 1-402-661-1718

Office Fax: 1-402-661-1719 Cell Phone: 1-202-641-0055 Email: <u>Kurt\_Kesteloot@nps.gov</u>



"The NPS One Health Network: promoting and protecting the health of all species and the parks that we share." GREEN DOT

# Hot Springs National Park

Thermal Water Collection and Distribution System

### GENERAL NOTES

- I. LOCATIONS OF THE THERMAL WATER COLLECTION AND DISTRIBUTION SYSTEM AND APPURTENANCES WERE OBTAINED FROM SURFACE FIELD INSPECTIONS AND AS-BUILT DRAWINGS. NO SUB-SURFACE EXPLORATION WAS ATTEMPTED TO AVOID DISTURBANCES OF THE PARK.
- 2. SPRING FLOW RATES AND TEMPERATURES WERE MEASURED IN 1976 PRIOR TO CONSTRUCTION OF THE EXISTING COLLECTION SYSTEM.
- 3. ALL HW PIPE IS 6-INCH OR IO-INCH DIAMETER, 2-INCH FACTORY INSULATED (EXTERIOR), EPOXY LINED DUCTILE IRON PIPE CONVEYING HOT WATER.
- 4. ALL CW PIPE IS 6-INCH OR 8-INCH DIAMETER, EPOXY LINED, DUCTILE IRON PIPE CONVEYING COOLED WATER.
- 5. ALL CP PIPE IS 4-INCH, 6-INCH, OR 8-INCH DIAMETER CHLORINATED POLYVINYL CHLORIDE (CPVC) PIPE CONVEYING HOT WATER. THE 4-INCH AND 6-INCH PIPE WAS INSTALLED INSIDE 6-INCH AND 8-INCH DIAMETER POLYVINYL CHLORIDE (PVC) PIPE, RESPECTIVELY.
- 6. ALL FCP PIPE IS 11/2-INCH, 2-INCH, 4-INCH, OR 6-INCH DIAMETER "SILVER THREAD" FIBERGLASS PIPE CONVEYING HOT WATER. THE 4-INCH AND 6-INCH PIPE WAS INSTALLED INSIDE 6-INCH OR 8-INCH DIAMETER ASBESTOS-CEMENT PIPE, RESPECTIVELY.
- 7. ALL TEMPERATURES SHOWN ARE DEGREES FAHRENHEIT.

## ABBREVIATIONS

AC ASBESTOS CEMENT PIPE BM BENCHMARK

© CENTER LINE CONC CONCRETE

CI CAST IRON PIPE

JP COLLECTION PIPE

COPPER PIPE

CW COOLED WATER PIPE

DIA DIAMETER

EL ELEVATION

ELEC ELECTRICAL

FCP FIBERGLASS HOT WATER PIPE

GAL GALLON GL GAS PIPELINE

GPD GALLONS PER DAY

GV GATE VALVE HW HOT WATER

INCL INCLUDED

MH MANHOLE

PVC POLYVINYL CHLORIDE PIPE

SS SANITARY SEWER

STA STATION
TBM TEMPORARY BENCHMARK

VC VITRIFIED CLAY PIPE WL CITY WATER LINE

**LEGEND** 

SYMBOL DESCRIPTION

HOT WATER PIPELINES

COOLED WATER PIPELINES

ELECTRICAL CONDUIT

SPRING COLLECTION PIPELINES

+++++ GAS PIPELINES

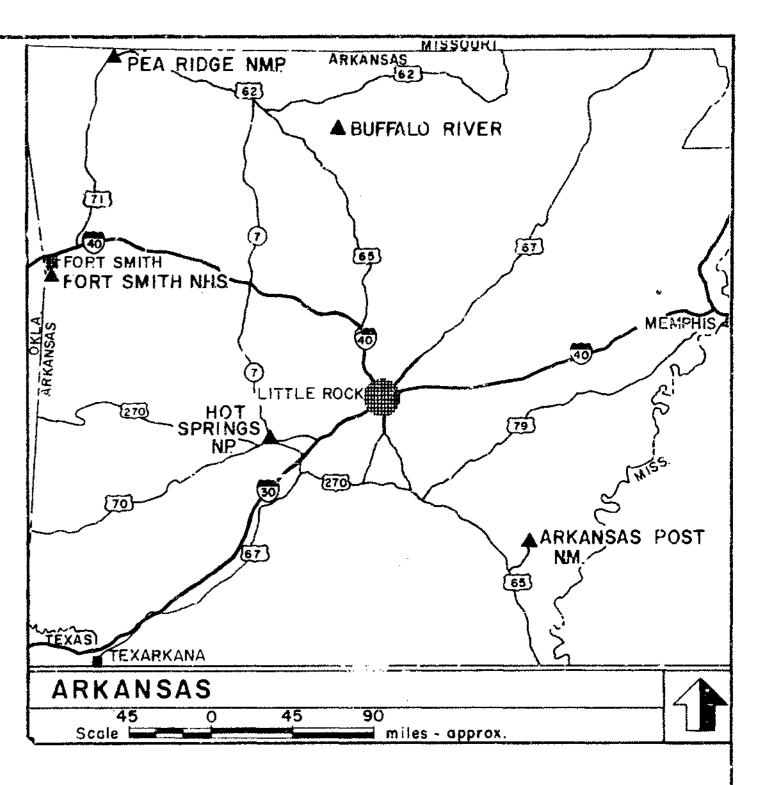
---- VERTICAL WALL

BATHHOUSE ROW

VICINITY MAP

2000 0 2000 4000

SCALE OF FEET



### INDEX

- I. COVER SHEET
- 2. ARLINGTON LAWN AREA
- 3. BATHHOUSE ROW-PLAN & PROFILE
- 4. BATHHOUSE ROW-PLAN & PROFILE
- 5. BATHHOUSE ROW-PLAN & PROFILE
- 6. UPPER RESERVOIR PIPELINE PLAN & PROFILE
- 7. SPRING COLLECTION GROUP #2
- 8. SPRING COLLECTION GROUP #2
- 9. DETAILS
- 10. PROCESS AND INSTRUMENTATION DIAGRAMS
- II. PROCESS AND INSTRUMENTATION DIAGRAMS
- 12. ONE LINE ELECTRICAL

### REFERENCE DRAWINGS

- I. NP HS-4784 (1930)
- 2. NP HS-2043 (1948)
- 3. NP HS-5311C (1948)
- 4. 128 41,015A (1978) 5. 128 41,021A (1985)
- 6. 128 60,001 (1981)
- 7. 128 41,0233 (1987)
- 8. 128 60,190 (1978)
- 9. 128 41,031A (1987)

## REDUCED SIZE REPRODUCTION

Prepared by:

##DRG-TRIAD, LTD.

## 1310 Wadsworth Blvd.

Suite 100

Eakewood, Colo. 80215

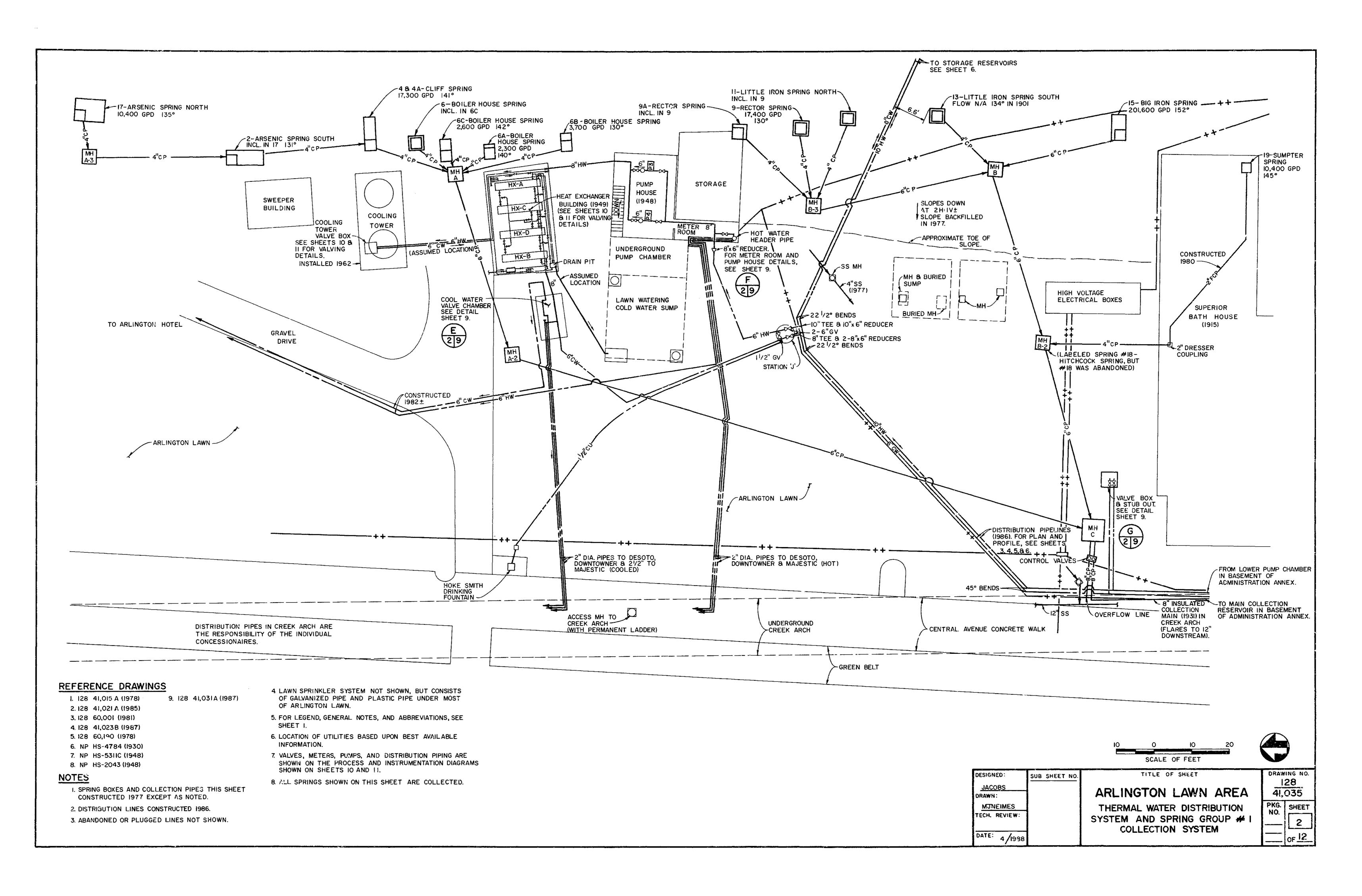
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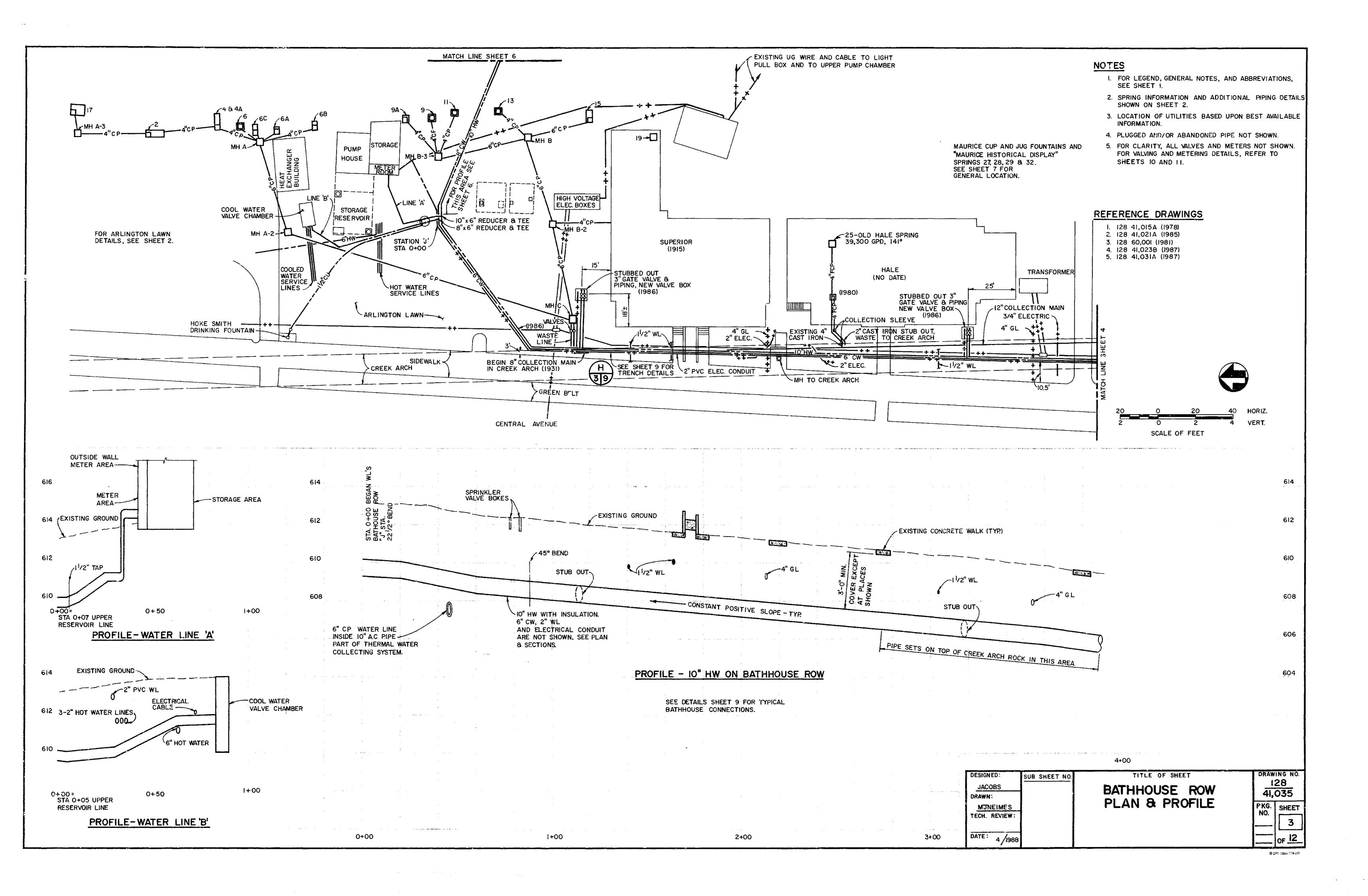
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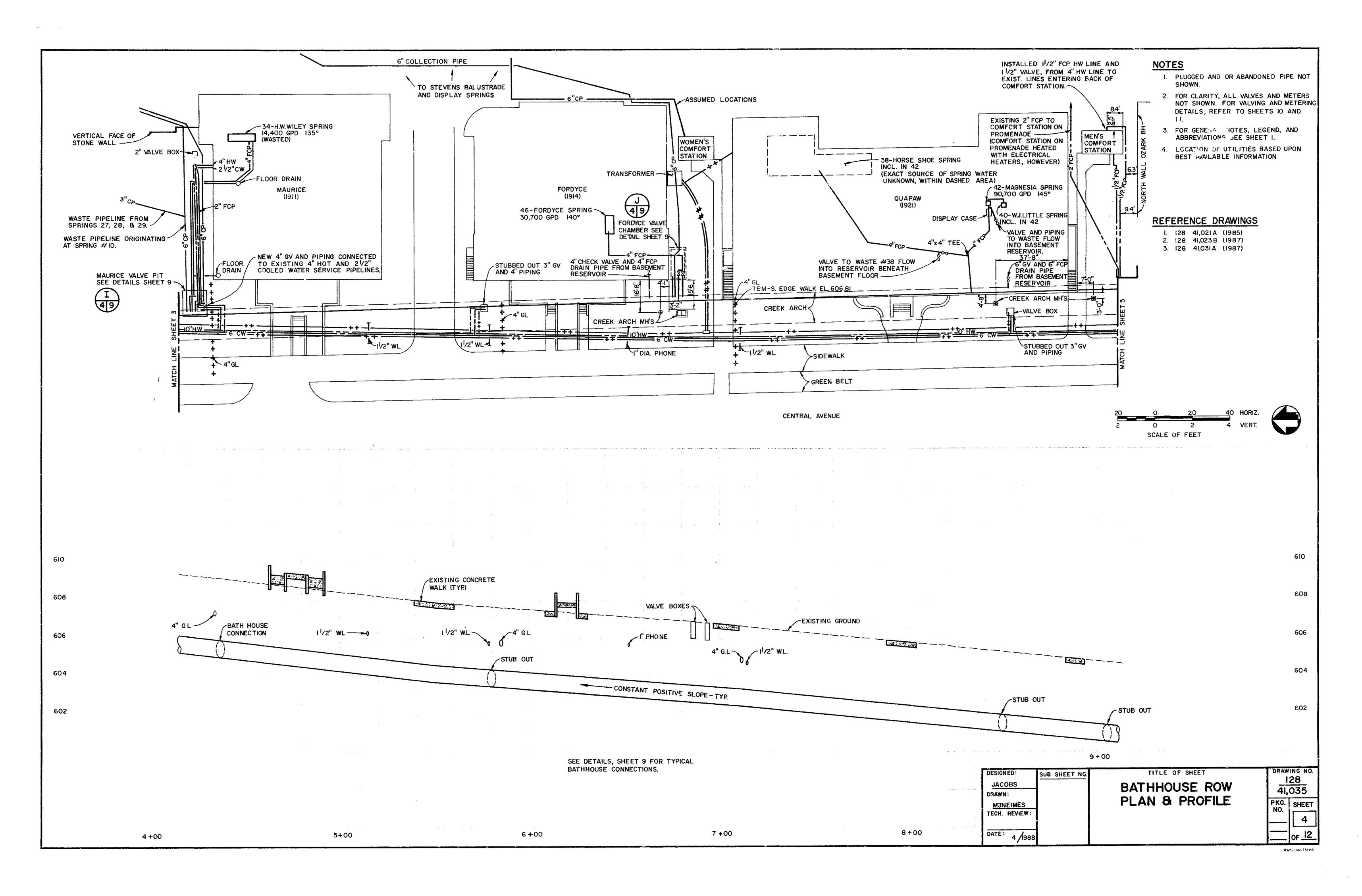
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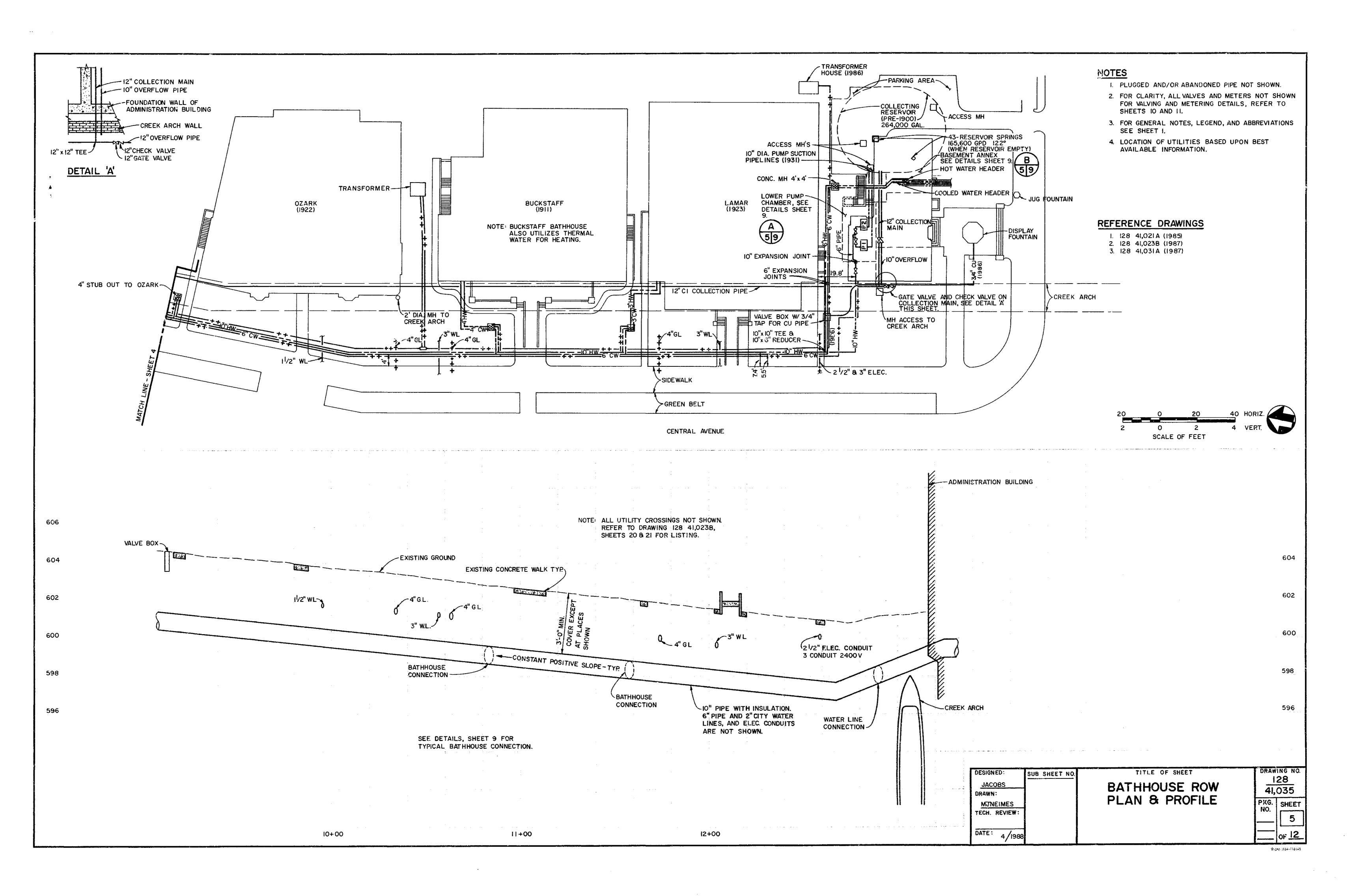
TITLE OF SHEET
EXISTING CONDITIONS OF THE THERMAL
WATER COLLECTION & DISTRIBUTION SYSTEM
LOCATION WITHIN PARK
BATHHOUSE ROW
NAME OF PARK
HOT SPRINGS NATIONAL PARK
OUTHWEST GARLAND ARKANSAS
REGION COUNTY STATE

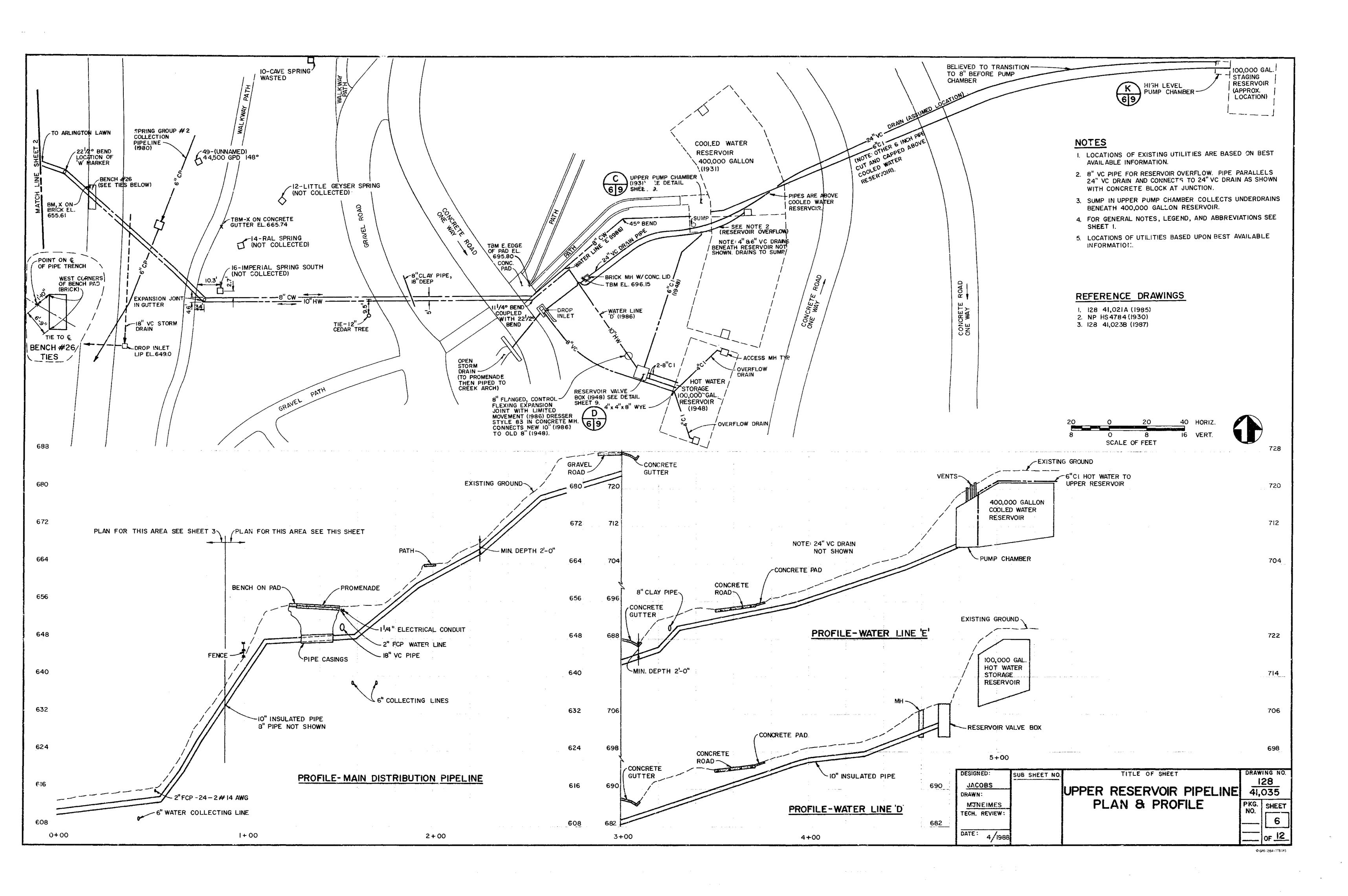
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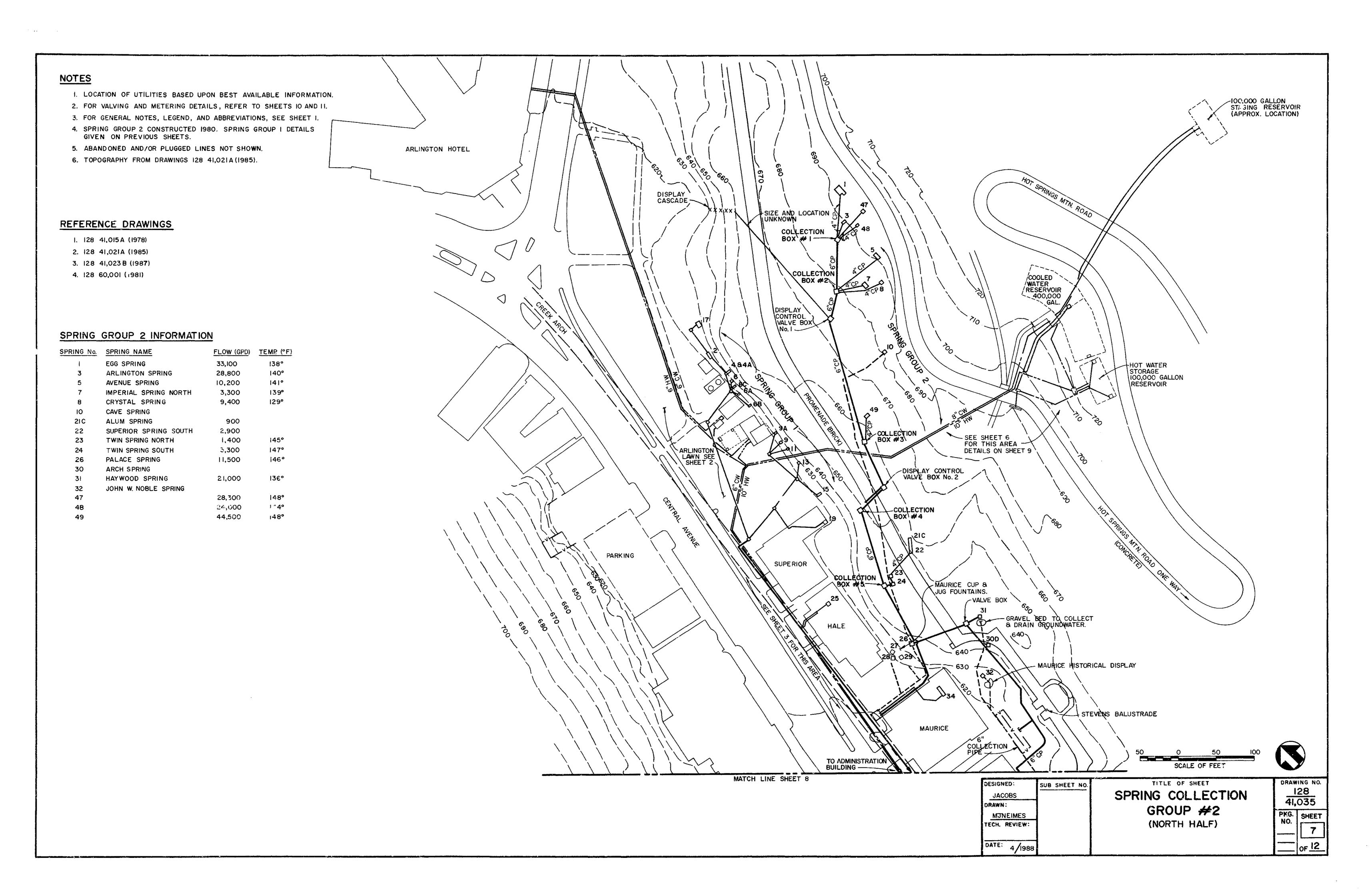


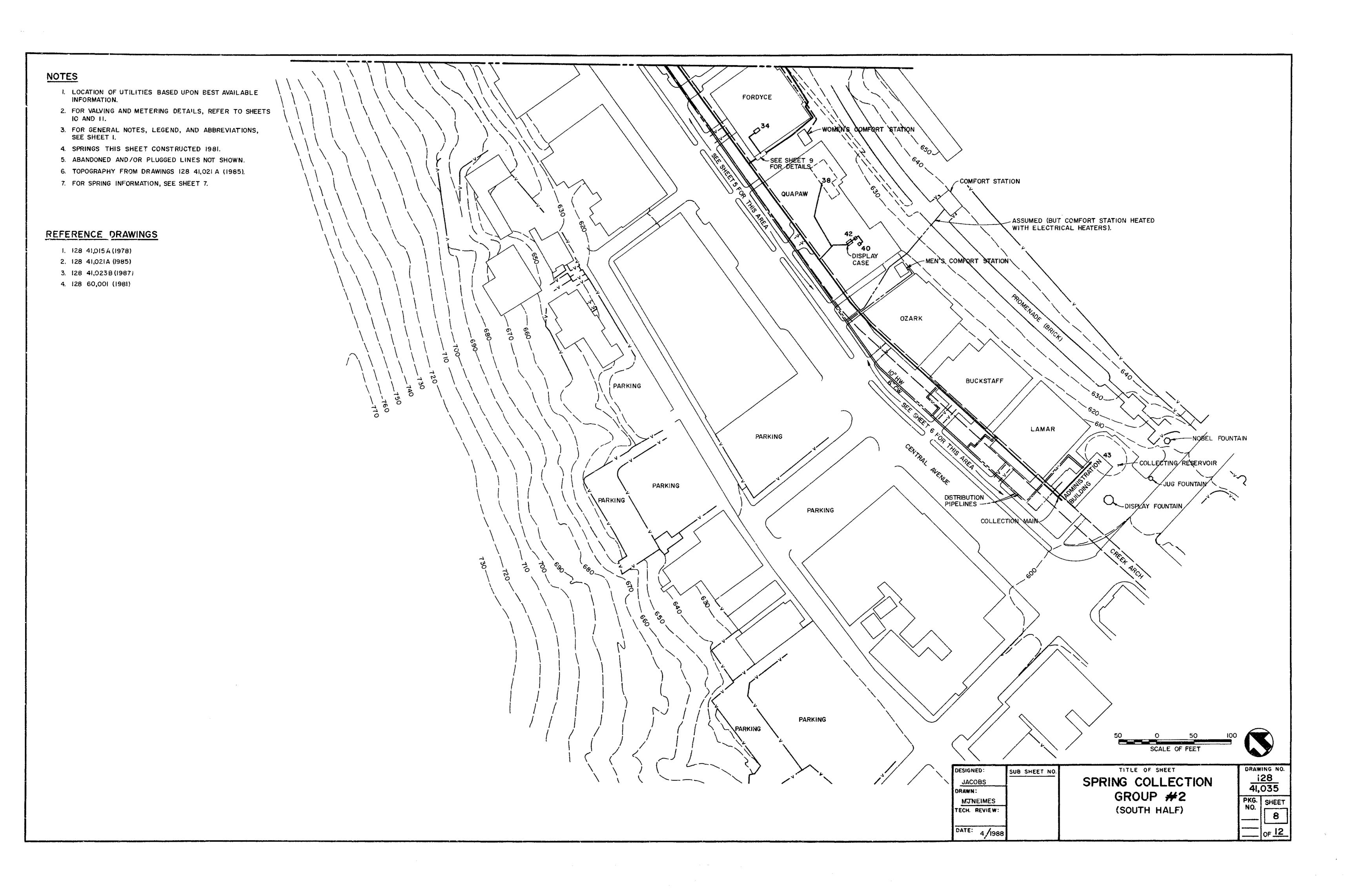


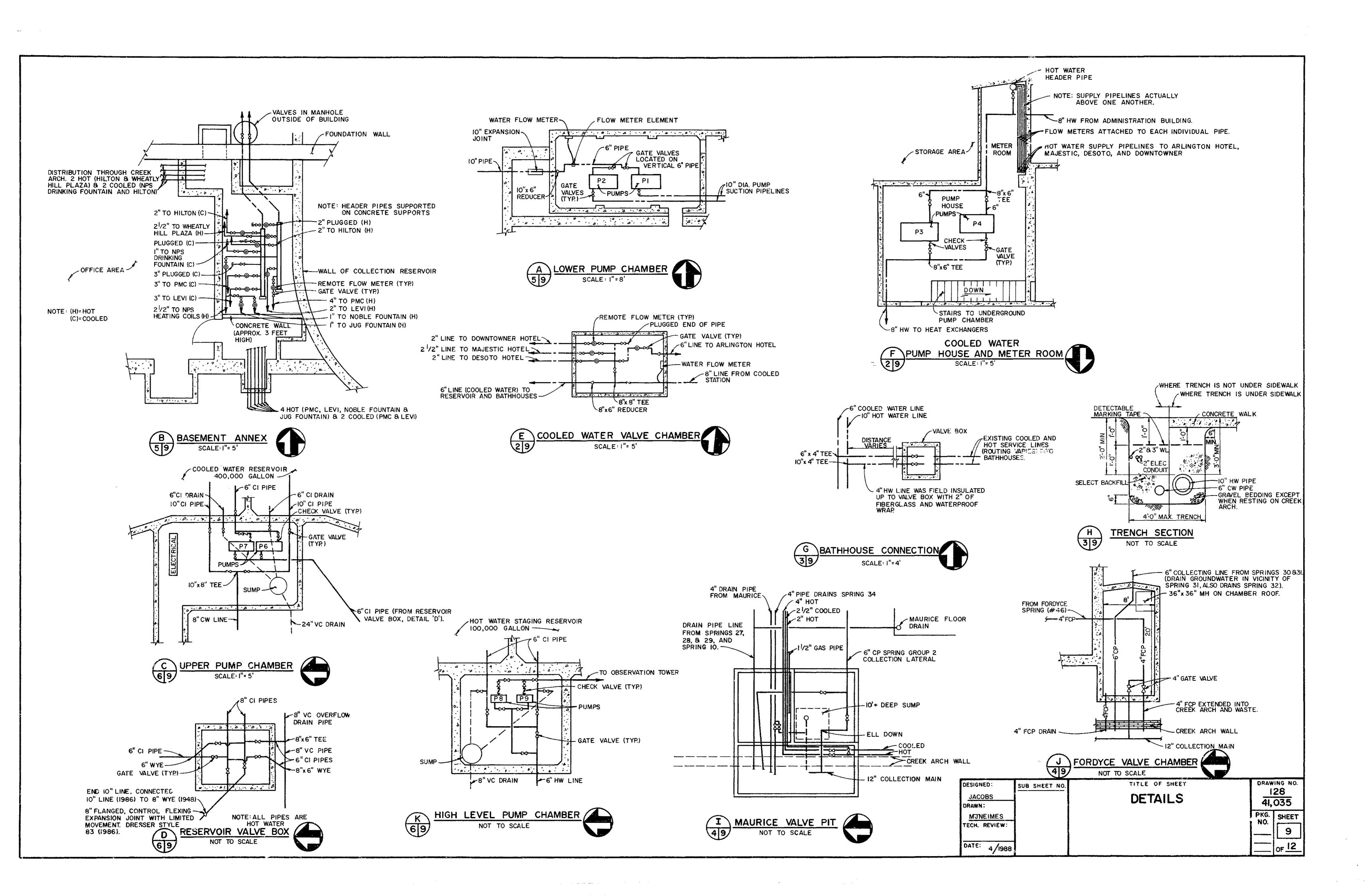


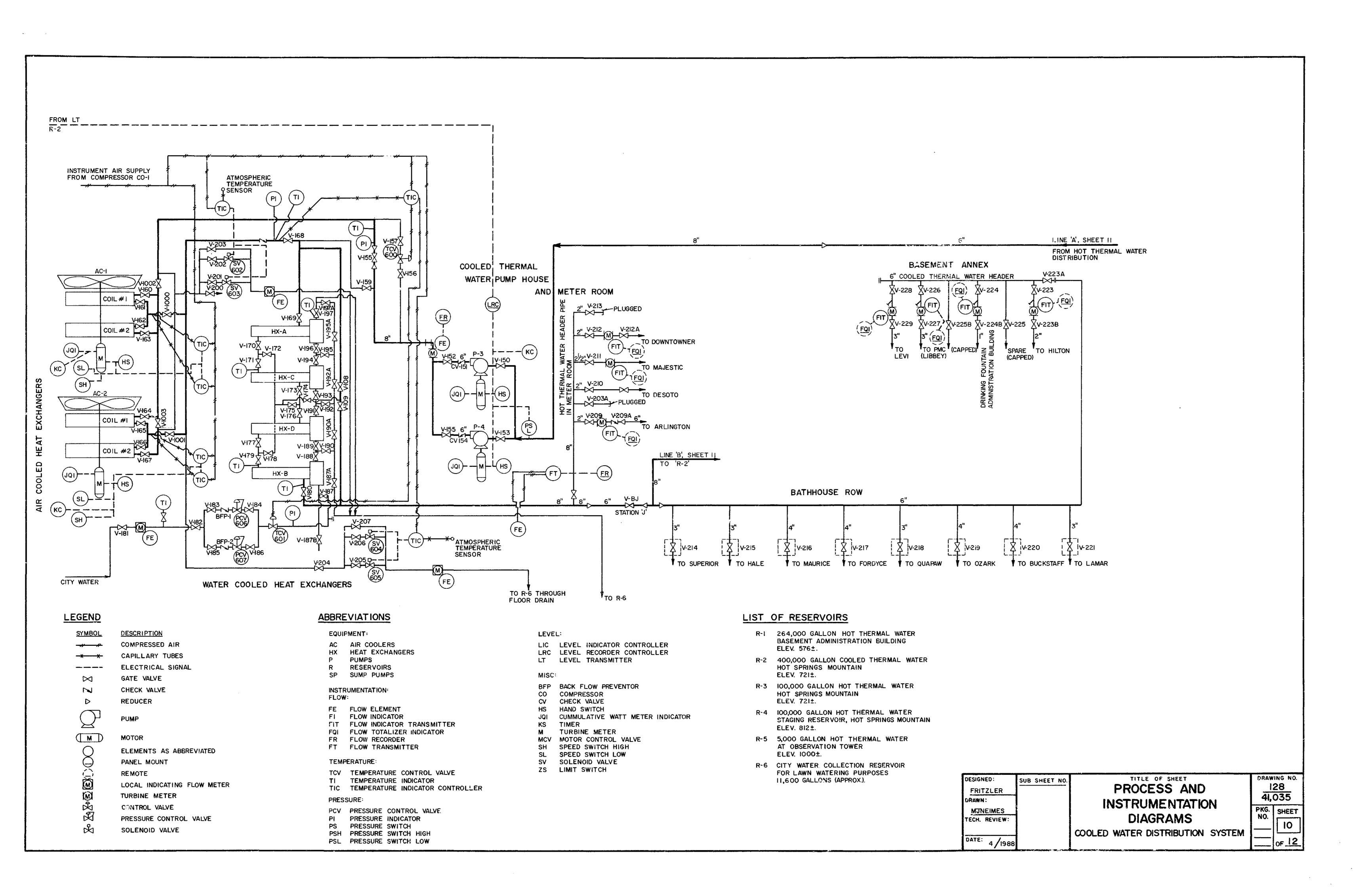


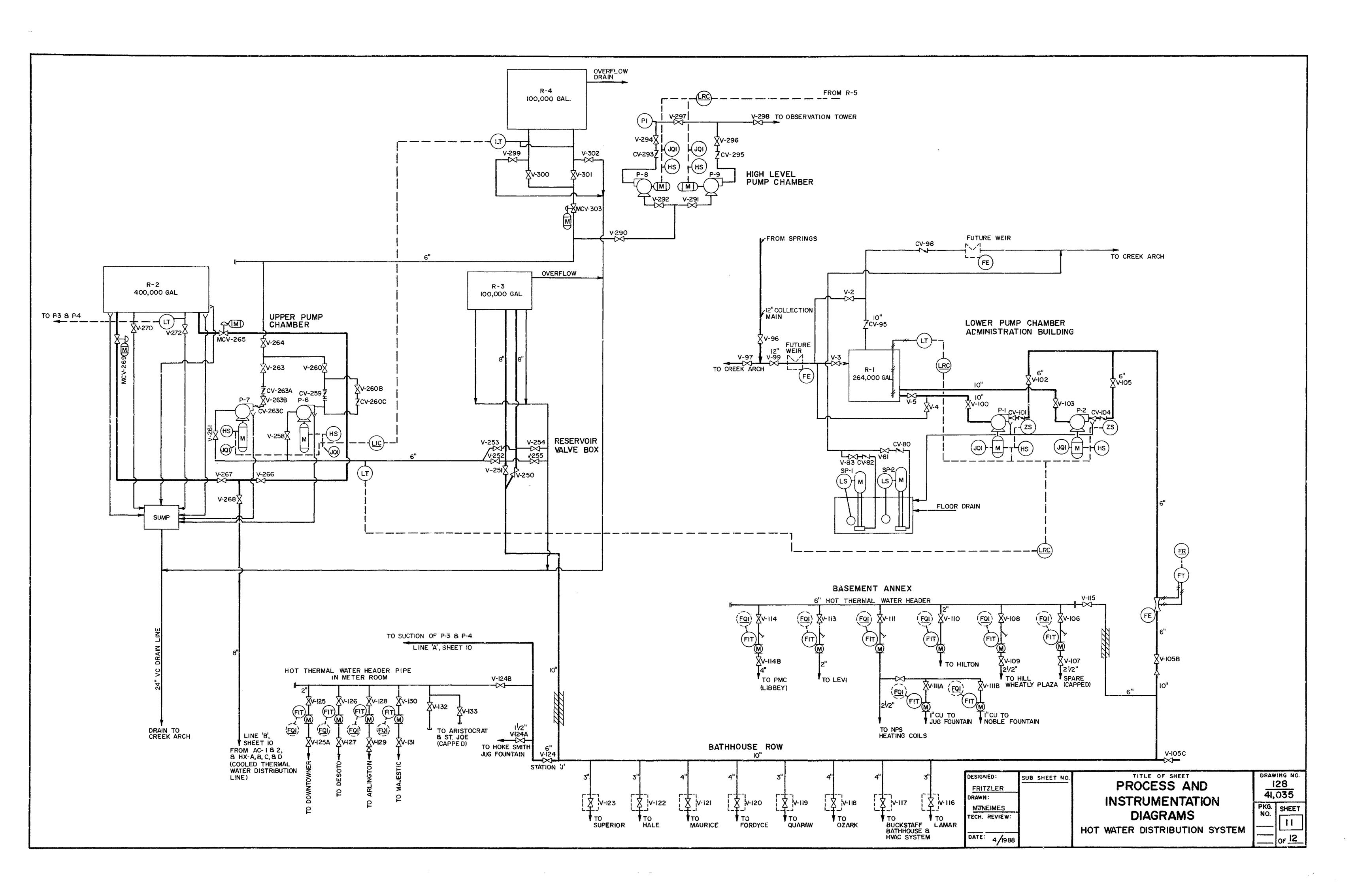


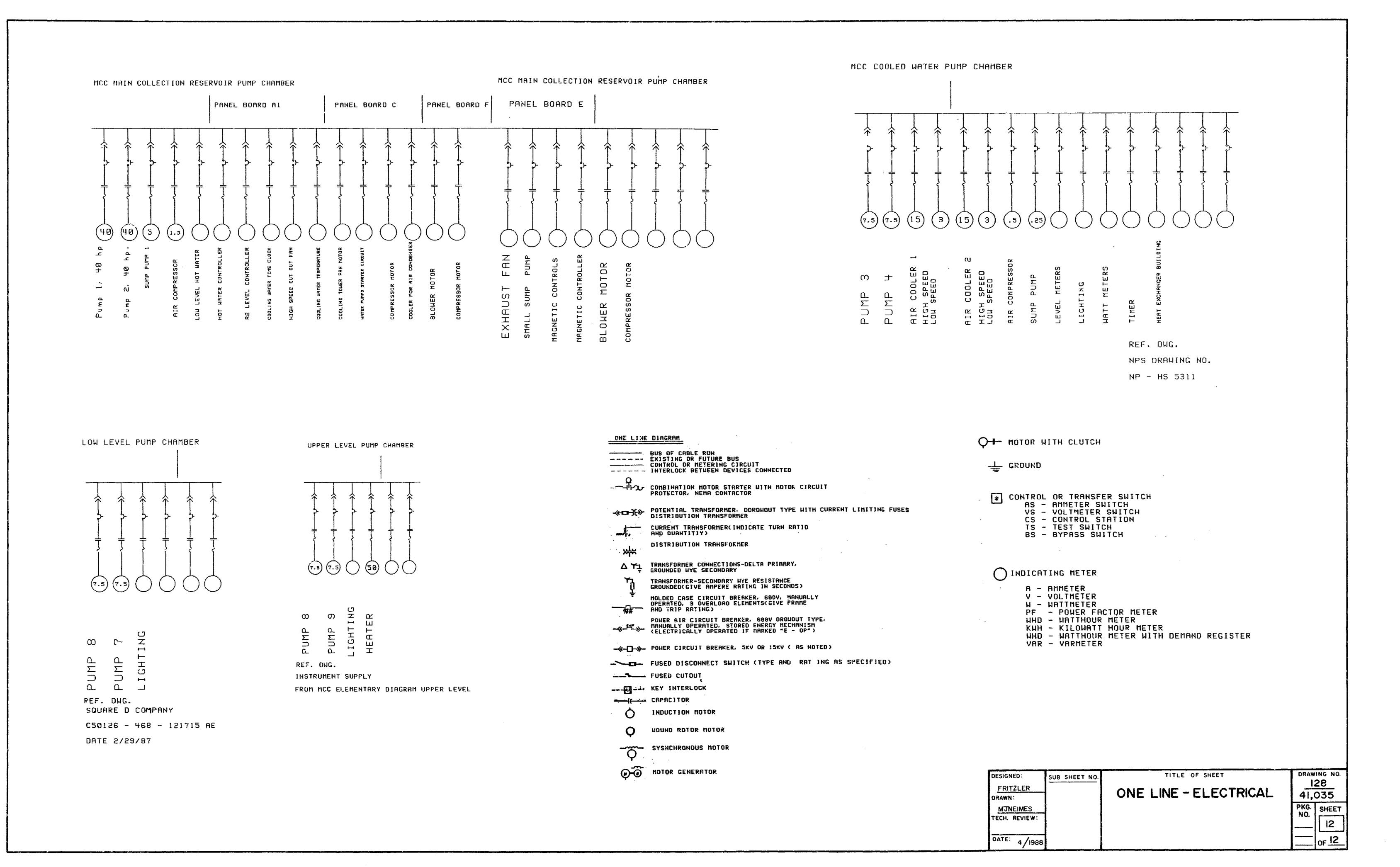












### Chlorinating Waterlines or Wells

Pipe Section or Well Information	Pipe or Tank Dia. (in)	Pipc Length or Tank Height (ft)	Area (in^2)	Gallons in Tub	Disinfectant Chlorine Sol % decimal	Desired Chlorine Residual (mg/L)	Gallons of Chlorine needed	Ounces of Chlorine Solution	Table Spoons
Tub Scenario A	2	800	3.14	130.551	10.00%	1.5	0.002	0.25	0.50
Tub Scenario B	2	900	3.14	146.9	10.00%	1.5	0.002	0.28	0.56
Tub Scenario C	6	700	28.27	1028.1	10.00%	1.5	0.015	1.97	3.94
Tub Scenario D	2	650	3.14	106.1	10.00%	1.5	0.002	0.20	0.41
Tub Scenario E	2	613	3.14	100.0	10.00%	1.5	0.001	0.19	0.38

**Notes:** Changing the numbers in red will modify the amount of chlorine needed in gallons and ounces. If a well is disinfected, type in the diameter and **Caution:** Highly chlorinated well water can damage grass and plants (under no circumstances should the water be discharged to the environment). Do not If you have questions, please contact your local public health consultant or 402-661-1718 or the NPS OPH water committee chair

## **Basics for Small Water Systems in Oregon: Storage Tank Chlorination**

Disinfection concentrations and times are based on AWWA Standard C652 for storage tanks cited in: OAR 333-061-0050 "Construction Standards" (10)(d) dated 19 Apr 2010, page 297

## Question: How much chlorine is added to a tank?

Volume to be disinfected =

Options for Disinfection by Chlorination:

**Method A**. Filling the tank or reservoir with a **10** mg/L chlorine solution and allowing it to remain for **6**<sup>a</sup> or **24** hours (see Table).

**Method B**. Filling the reservoir with a **50** mg/L chlorine solution and allowing it to stand for **6** hours (see Table).

**Method C**. Spraying or brushing on a 200 mg/L chlorine solution and allowing it to remain for 3 hours (calculation not provided).

= 500 gallons

(input tank volume above in yellow shaded cell)

Chlorination Dose for Storage Tank of Volume Specified Above	Metho d A <sup>b</sup>	Metho d B <sup>c</sup>	Units
Chlorine Concentration	10	50	mg/L
Method Exposure Time	6ª or 24	6	hours
Chlorine Source Material			
Bleach 5% Solution	0.10	0.50	gallons <sup>d</sup>
Bleach 12.5% Solution	0.04	0.20	gallons
Dry Chlorine (65% by	0.06	0.32	pounds
wt)		٠	

(Chlorine Concentration values [yellow, or grey, cells] can be changed for custom calculations)

Note that to achieve Method concentration add more chlorine than specified here.

Important: The chlorine concentration should be measured to confirm Method's target concentration is reached. May need to dilute sample to test kit range.

Gallons	Cups
1.6	25.6

Weight of dry chlorine with a lower percentage than 65% can be calculated by dividing 65% by the product's % chlorine (e.g., 65%/47%) times result in table.

<sup>&</sup>lt;sup>a</sup> Six (6) hours for addition by continuous feed during tank filling.

<sup>&</sup>lt;sup>b</sup> For **Pipes**, Method A using **24 hours** is applicable (shorter time at higher dose may be allowed, see Guidance).

<sup>&</sup>lt;sup>e</sup> For <u>Wells</u>, Method B using <u>24 hours</u> is applicable (shorter time at higher dose may be allowed, see Guidance).

<sup>&</sup>lt;sup>d</sup> Gallons to Cups conversion: (gal x 16 = cups)

DATA FOR SLOPE CALCULATIONS

(Data from FACT SHEET 3.7 in UNIT 3 - Operations of Staff Training Reference)

	Gallons			
Reservoir	5%	Reservoir	Pounds 65%	
(Gal)	Bleach	(Gal)	Dry Chlorine	
1000		10000	3.5	
2000	1.0	20000	6.5	
3000	1.5	30000	10	
4000	2.0	40000	13	
5000	2.5	50000	16	
10000	5.0	100000	32	
20000	10	200000	64	
30000	15	300000	100	
40000	20	400000	130	
50000	25	500000	160	
Slope 5% S	0.0005 gal/gal	Slope Dry Wt =	0.000323071 lb/ga	l Conversion factors 2.204623 lb/kg 3.785412 L/gal
D. C	0.000005 //		0.540045.05 //	*

Reference C 0.000025 mg/L

2.51631E-05 mg/L

25 mg/L reference concentration (from tables in training manual)

Cover The two files according that is finite

Cover The two files ac

From: Smith, Jessica (CDC/DDID/NCIRD/DBD)

**Sent:** 18 Sep 2019 14:07:03 +0000

**To:** Ritter, Troy (CDC/DDNID/NCEH/DEHSP)

**Subject:** FW: Hot Springs and Water management plans

Hey Troy... what do you think about this call? Do you want to shoot for the week of the 30<sup>th</sup> when you'll be back in the office? Given the ASHRAE angle I think we should invite Jasen and Claressa, too... plus she may be able to speak to some of the ecological questions.

From: Said, Maria <maria said@nps.gov>

Sent: Wednesday, September 18, 2019 9:22 AM

To: Cooley, Laura A. (CDC/DDID/NCIRD/DBD) < whz3@cdc.gov>; Smith, Jessica (CDC/DDID/NCIRD/DBD)

<lyd7@cdc.gov>; Ritter, Troy (CDC/DDNID/NCEH/DEHSP) <tir4@cdc.gov>; James, Allison (CDC arkansas.gov) <allison.james@arkansas.gov>; Kesteloot, Kurt <kurt kesteloot@nps.gov>

Subject: Hot Springs and Water management plans

Hi Laura, Jessica, and Troy,

We (NPS and Arkansas) are trying to figure out the best path forward with the Hot Springs legionella cases. As you know, all the environmental testing has been negative. However, we have had a number of travel-related cases, and, based on Arkansas state data, it looks like there might be increased cases in the Hot Springs area generally compared to the rest of the state -- although these data are still being analyzed, and I would leave it to Arkansas to confirm this.

We also have considered more where the hot spring water is going -- apparently, it does not just go to the Quapaw, but it goes to a number of other concession operated businesses (including another spa) as well businesses outside park property (including a hospital therapeutic pool and at least one other hotel). One action we are considering is sending a letter to those who receive spa water and basically recommending that although we have never identified legionella in the water and don't know of any increased risk, we do know that untreated water does pose a risk for legionella growth, and businesses might want to consider a water management plan. My feeling is that it would be beneficial to them, if we have an additional case, to then be able to clearly describe their water system and the results of some pre-determined parameters (such as temperatures) over time.

If you all are available at any time, I would love to get your thoughts. Some questions I have are:

- Is a water management plan appropriate even for those buildings that don't meet ASHRAE building guidance criteria?
- Is a water management plan needed for only places that don't disinfect? I know that water management plans are used by many systems in which chlorine is used, but in this case, in which we don't have any evidence of Legionella growth in the hot spring water, I don't think we can or should point to hot spring water as a particular Legionella risk -- the risk in my mind is just from the fact that it is not disinfected.
- Should any of the water management plans include legionella testing? I think the Quapaw might consider this -- but then what would be the guidance if they get positive results?

I am including Allison, the new EIS officer for Arkansas on the thread. Dirk Haselow is no longer with the state health department.

Thanks for any thoughts on this. Hope you guys are well. Maria

Kesteloot, Kurt From:

Sent: 10 Jul 2019 19:25:41 -0500

Ritter, Troy (CDC/DDNID/NCEH/DEHSP) To:

Fwd: [EXTERNAL] CONFIDENTIAL: travel-associated legionellosis Subject:

CDC49130

Attachments: AR2019Jul10\_49130.pdf

Good Evening Troy,

Are you available for a call? Early tomorrow morning is best for me.

Thank You and Very Respectfully,

Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS Supervisory Public Health Consultant, Midwest Region National Park Service, Office of Public Health (OPH), 601 Riverfront Drive Omaha, NE 68102

Office Phone: 1-402-661-1718 Office Fax: 1-402-661-1719 Cell Phone: 1-202-641-0055

Email: Kurt Kesteloot@nps.gov

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"The NPS One Health Network: promoting and protecting the health of all species and the parks that we share." GREEN DOT

----- Forwarded message ------

From: **Said**, **Maria** <maria said@nps.gov>

Date: Wed, Jul 10, 2019 at 6:03 PM

Subject: Fwd: [EXTERNAL] CONFIDENTIAL: travel-associated legionellosis

CDC49130

To: Cooley, Laura A. (CDC/OID/NCIRD) < whz3@cdc.gov>

Cc: Kesteloot, Kurt < kurt kesteloot@nps.gov>

Hi Laura,

Are you available to discuss this? I'm around tonight and early tomorrow morning - I'll be in clinic from 8:30am-12:30pm tomorrow but free after that.

Thank you! Maria

Forwarded message
From: Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) <npf3@cdc.gov></npf3@cdc.gov>
Date: Wed, Jul 10, 2019 at 5:26 PM
Subject: [EXTERNAL] CONFIDENTIAL: travel-associated legionellosis CDC49130
To: Brandi.Stricklin@arkansas.gov < Brandi.Stricklin@arkansas.gov >,
<u>CATHERINE.WATERS@ARKANSAS.GOV</u>
< CATHERINE.WATERS@arkansas.gov >, Debbie.Pledger@arkansas.gov
< <u>Debbie.Pledger@arkansas.gov</u> >, Haselow, Dirk (CDC <u>arkansas.gov</u> )
<a href="mailto:&lt;/a&gt; &lt;a href=" mailto:dirk.haselow@arkansas.gov"="">dirk.haselow@arkansas.gov</a> <a href="mailto:wheeler">Wheeler</a> , Gary (CDC

### Dear Colleague(s):

Please see the attached notification regarding a case of Legionnaires' disease that may be travel-associated. This patient had exposure to the Quapaw Baths & Spa. We are aware of 2 additional cases with exposure to this location within the past year (b)(6)

1 have requested MS to obtain the lower respiratory specimen, if available.

Please see below for hot tub guidance:

### Hot tub guidance:

- CDC webpage for water system maintenance and operating public hot tubs: http://www.cdc.gov/legionella/water-system-maintenance.html
- CDC fact sheet for disinfecting hot tubs containing *Legionella*: http://www.cdc.gov/legionella/downloads/hot-tub-disinfection.pdf
- Hot tub maintenance fact sheet: <a href="http://www.cdc.gov/healthywater/pdf/swimming/resources/operating-public-hot-tubs-factsheet.pdf">http://www.cdc.gov/healthywater/pdf/swimming/resources/operating-public-hot-tubs-factsheet.pdf</a>

Thanks, Sooji \_

Sooji Lee, MS, MSPH

Epidemiologist (IHRC, Inc.)

regionella Team (NCIRD/DBD/RDB).

Centers for Disease Control and Prevention

1600 C. Iten Rose, MS H24-6 [Atlanta, GA 30329]

Prione: 404-718-3192 | . . .: <u>slee7@cdc.gov</u>

--

Maria Said, MD, MHS | CDR, U.S. Public Health Service Epidemiology Branch Chief | Office of Public Health | National Park Service

Address: 1849 C. Street, NW, Room 2543, Mailstop 2560 Washington, DC 20240

Office Tel: 202-513-7151 | Email: maria\_said@nps.gov

Website (public): https://www.nps.gov/orgs/1878/index.htm

Website (internal): https://sites.google.com/a/nps.gov/in2-protect-and-promote-

health/home/disease-surveillance-response

### CONFIDENTIAL

To: ARKANSAS DEPARTMENT OF HEALTH, Brandi Stricklin, Brandi.Stricklin@arkansas.gov
ARKANSAS DEPARTMENT OF HEALTH, CATHERINE WATERS, CATHERINE.WATERS@ARKANSAS.GOV
ARKANSAS DEPARTMENT OF HEALTH, DEBBIE PLEDGER, Debbie.Pledger@arkansas.gov
ARKANSAS DEPARTMENT OF HEALTH, DIRK HASELOW, Dirk.Haselow@arkansas.gov
ARKANSAS DEPARTMENT OF HEALTH, GARY WHEELER, gary.wheeler@arkansas.gov
ARKANSAS DEPARTMENT OF HEALTH, HAYTHAM SAFI, haytham.safi@arkansas.gov
ARKANSAS DEPARTMENT OF HEALTH, MIKE CIMA, Michael.Cima@arkansas.gov

From: Sooji Lee, MPH, Centers for Disease Control and Prevention, Atlanta, Georgia, USA

Re: Travel-associated legionellosis CDC49130

#### Dear Colleague(s):

The Centers for Disease Control and Prevention has been informed of a suspect case of Legionnaires' disease in a female resident of MS (CDC49130) whose illness may be associated with travel away from home. The reported date of onset was 6/22/2019 and the patient has died. Legionnaires' disease was diagnosed by nucleic acid assay.

Hotel: AIRBNB RENTAL, Room: ---

Address: 112 CATALINA CIRCLE, HOT SPRINGS NATIONAL PARK, AR 71913 USA

Check-in: 6/12/2019 Check-out: 6/15/2019

Comments: STAYED AT CATALINA COVE BUILDING C, UNIT 1. PATIENT WENT TO QUAPAW BATH AND SPA AND HAD

AN AROMA THERAPY HOT BATH ON 6/12/2019.

The patient reported spending time in or near a whirlpool spa during the 10 days before disease onset. Location: QUAPAW BATH & SPA, Dates: 6/12/2019

This case may be associated with the following known outbreak or possible cluster: QUAPAW SPA (2018-059).

This case was reported to CDC on 7/10/2019 by the MS DOH. More information may be available from:

Sooji Lee, MPH Respiratory Diseases Branch Centers for Disease Control and Prevention

Phone: 404-718-3192 Email: npf3@cdc.gov

This notification does not imply that the accommodation named is the source of the infection.

From: Kramer, Adam (CDC/ONDIEH/NCEH)

**Sent:** 24 Aug 2018 09:15:24 -0400

To:Kunz, Jasen M. (CDC/ONDIEH/NCEH); Ritter, Troy (CDC/ONDIEH/NCEH)Subject:Fwd: [EXTERNAL] Fwd: Important: Call for Cases: Legionnaires' Disease

Associated with Hot Springs National Park — Arkansas, 2018

Hi Jasen and Troy,

Would one of you be able to give Kurt a call? He'd like to discuss with you their plan and the rationale for the water system. Kurt, is the team lead over water/wastewater issues (if they still have it broken up that way) and used to cover Hot Springs so he is familiar with the water distribution system.

He was also a former IHS engineer before coming to NPS.

Thank you,

Adam

From: "Kesteloot, Kurt" <kurt\_kesteloot@nps.gov>

Sent: Thursday, August 23, 2018 4:00 PM

To: "Kramer, Adam (CDC/ONDIEH/NCEH)" <ank5@cdc.gov>

Subject: Re: [EXTERNAL] Fwd: Important: Call for Cases: Legionnaires' Disease

Associated with Hot Springs National Park — Arkansas, 2018

Hi Adam,

Great to hear from you. Thanks for thinking of me. We just found out from the park yesterday.

Here is where we are at...

Good Afternoon.

We had a great discussion at noon today with Dr. Said, HOSP Management, and etc. Thank you to LCDR Kostamo for on the ground work and CDR Maria Said for further research.

We cannot confirm that Legionella was transmitted at HOSP Quawpaw. We cannot confirm if or where it happened at HOSP. There are many potential locations where a legionella environment could occur in the Park and nearby. With research from Dr. Said, it is advised that we do not do environmental testing until we have a cluster of cases. If we find out about another case, we will be able to ask more questions to determine if they are linked and where it may have happened.

Meanwhile, the NPS OPH will continue to work with HOSP on minimizing risk for Legionella and other recreational water concerns. I recommended testing for the Quapaw in May of this year and they were given 60

days to comply. We are now at 90 days and the Park is assisting them to help conduct recommended pool/spa water quality testing.

OPH will also be talking to the Park more about disinfecting the thermal water at HOSP. Currently the water temperature ranges from 143 degrees Fahrenheit to 146 degrees Fahrenheit (F). The food code requires food to be held at 135F. Thus, the park has been operating under the requirement that all thermal water that is potable must leave the spigots at 135F. There are several other areas where visitors can be exposed to acrosolized water that is non potable. We are talking about providing disinfection for those waters to help reduce risk of Legionella. It is also important to note this is the only confirmed case of Legionnaire that we have heard about for HOSP since 2010.

I will update as we find out more information and welcome any questions, comments, or concerns.

Thank You and Very Respectfully,

Thank You and Very Respectfully,

#### Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS Supervisory Public Health Consultant, Midwest Region National Park Service, Office of Public Health (OPH), 601 Riverfront Drive Omaha, NE 68102 Office Phone: 1-402-661-1718

Office Fax: 1-402-661-1719
Cell Phone: 1-202-641-0055
Email: Kurt\_Kesteloot@nps.gov

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Attention Federal Employees Only: Please let us know how we are doing by completing a survey found at: <a href="https://www.survcymonkey.com/s/NPS-OPH-CustServ">https://www.survcymonkey.com/s/NPS-OPH-CustServ</a>

"The NPS One Health Network: promoting and protecting the health of all species and the parks that we share."

On Thu, Aug 23, 2018 at 3:14 PM, Kramer, Adam (CDC/ONDIEH/NCEH) <ank5@cdc.gov> wrote:
FYI

From: "EPIX Update (CDC)" <epixupdate@cdc.gov>

Sent: Thursday, August 23, 2018 2:52 PM

To:

Subject: Important: Call for Cases: Legionnaires' Disease Associated with Hot Springs

# **EpiX** The Epidemic Information Exchange

Check Epi-X for an Important Report

Call for Cases: Legionnaires' Disease Associated with Hot Springs National Park — Arkansas, 2018

The National Park Service (NPS) Office of Public Health is aware of a case of Legionnaires' disease associated with a visit to Hot Springs National Park in July 2018.

https://epix2.cdc.gov/v2/Reports/Display.aspx?id=66780

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+1-770-488-7100 (If you cannot use the toll free number above, please call the CDC Emergency Operations Center and ask to speak to the *Epi-X* editor on call.)

### IMPORTANT REMINDERS

Update your contact information: <a href="https://epix2.cdc.gov/v2/Profile.aspx">https://epix2.cdc.gov/v2/Profile.aspx</a>

Learn about Epi-X training opportunities:

https://epix2.cdc.gov/v2/help/Training Opportunities.htm

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From: Ritter, Troy (CDC/DDNID/NCEH/DEHSP)

**Sent:** 16 Jul 2019 01:49:15 +0000

To: Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP);Cooley, Laura A.

(CDC/DDID/NCIRD/DBD); Smith, Jessica (CDC/DDID/NCIRD/DBD)

Cc: Hubbard, Brian C. (CDC/DDNID/NCEH/DEHSP)

**Subject:** Fwd: HOSP-Legionella-Quapaw Update July 15, 2019

Hey LD Team! I didn't see any of you copied on Kurt's email below.

Troy

### Get Outlook for iOS

From: Patricia Trap <patricia\_trap@nps.gov>

Sent: Monday, July 15, 2019 9:01 PM

To: Kesteloot, Kurt

Cc: Said, Maria; Lauren Miller; Mark Scott; jhenry@atokainc.com; croberts@atokainc.com;

Justin Cully; Terry.Paul@arkansas.gov; Richard.McMullen@arkansas.gov; Sara Newman;

Gwendolyn Ruppert; Ritter, Troy (CDC/DDNID/NCEH/DEHSP); Alexandra Picavet; Robert

Kammel; Clara Wooden

Subject: Re: HOSP-Legionella-Quapaw Update July 15, 2019

Thanks Kurt for this report and diligence in testing. Let me know if you need anything.

Patty

Regional Director (Acting)

Midwest Region, National Park Service

office: 402-661-1520

cell: 402-637-2414

On Jul 15, 2019, at 7:37 PM, Kesteloot, Kurt < <a href="mailto:kurt\_kesteloot@nps.gov">kurt < kurt\_kesteloot@nps.gov</a>> wrote:

Good Evening Everyone,

Thanks for the assistance today! We took several bulk and swab samples in the Quapaw today. We hope to meet tomorrow around 0900 at the Hot Springs Nation Park Headquarters building.

Here is a brief of some of the testing conducted and proposed.

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disinfected last week. It uses city water and had a temp of ~74F.

Basement Cave: I was not present but think it was just swabbed.

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may have been gathered along with about 9 bulk samples.

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Fountains: Approximately 5 or 6 bulk and swabs

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(Bulk and Swab)

Thermal Water: HQ tank and upper tank (Bulk and Swab)

Quapaw: Swab duct-work in the main bathing area and possibly individual

baths area.

Estimated samples remaining are: 11 bulk and 14 swabs.

Thank You and Very Respectfully,

Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS

Supervisory Public Health Consultant, Midwest Region

National Park Service, Office of Public Health (OPH),

601 Riverfront Drive

Omaha, NE 68102

Office Phone: 1-402-661-1718

Office Fax: 1-402-661-1719

Cell Phone: 1-202-641-0055

Email: Kurt\_Kesteloot@nps.gov

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"The NPS One Health Network: promoting and protecting the health of all species and the parks that we share." GREEN DOT

On Fri, Jul 12, 2019 at 3:22 PM Said, Maria <<u>maria\_said@nps.gov</u>> wrote: Situation

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  third case that was a fatality; (2) we plan additional environmental
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  (3) clearly visible notifications of all current spa visitors are
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  notifications that will go to current visitors. We have also provided
  a link to the CDC fact sheet for distribution. The owners expressed
  that they will can start informing current guests through their signin process as early as today.

Please let me know of any edits or additions to this summary.

Maria

From: Ritter, Troy (CDC/DDNID/NCEH/DEHSP)

**Sent:** 17 Jul 2019 12:41:01 +0000

To: Smith, Jessica (CDC/DDID/NCIRD/DBD);Cooley, Laura A.

(CDC/DDID/NCIRD/DBD)

Cc: Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP)

**Subject:** Fwd: Quapaw Operation Recommendations for the Next 10-14 Days

and Environmental Testing Conducted

Morning Laura and Jess,

I'm forwarding Kurt's remediation suggestions. Looking forward to this morning's calls.

Troy

Get Outlook for iOS

From: Kesteloot, Kurt < kurt kesteloot@nps.gov>

Sent: Wednesday, July 17, 2019 2:44 AM

To: Miller, Laura; Mark Scott

Cc: Sara Newman; Said, Maria; Robert Kammel; Terry.Paul@arkansas.gov;

Richard.McMullen@arkansas.gov; Ritter, Troy (CDC/DDNID/NCEH/DEHSP)

Subject: Quapaw Operation Recommendations for the Next 10-14 Days and Environmental

Testing Conducted

Good Evening Mark and Laura,

Sorry this is so late. I was trying to work on some reports from last week and lost track of time. After further investigation, the Quapaw has approximately 8 individual baths. Seven (rooms A-G?) of those baths are on the main floor in a separate room adjacent to the four large bathing pools. The eighth bath is in the basement.

The following are recommendations for operations at the Quapaw for the next 10-14 days (until we receive lab results). After we have more data there may be other recommended changes.

- 1. Cease use of the "new" MicroSilk® hydrotherapy. The process results in water droplets.
- 2. Ensure the entire bath, jets, plumbing and Microsilk system is disinfected between each use. One option would be to add 8 ounces of bleach (6.25% NaOH solution) to a tub that is full above the jets and Microsilk port. The 8 ounces of bleach (NSF approved recommended) can be add to the water from the previous user. This should result in a superchlorinate solution of about 40 ppm of chlorine if there are about 100 gallons of water in the tub. At this concentration it is recommended that the superchlorinated water be circulated through the bath, jets, Microsilk system, and plumbing for approximately 5 minutes. Attendants should not be near the pool during this time and it would be best to leave the room and shut the door. After the time has passed the attendant could carefully enter the room turn off any pumps or circulation devices in the tub and leave the room for another few minutes. After that, the attendant could return and drain the tub and then fill for the next use. That said, it is not recommended that the tubs be filled more than ~30 minutes before each use or a time where the customer is not in water that is more that 2 hours old when they leave the tub. If the facility has a process that they belief is effective or has questions about this, please do not hesitate to call.
- 3. Work with Arkansas Department of Health (ADH) and the NPS Office of Public Health (OPH) on adjusting the pH in the four main bathing pools to help reduce chlorine usage and help ensure free chlorine residuals stay above 1.0 mg/L during high bather loading times. It is recommended that the chlorine residuals continue to be take three times a day. However, they should be take from the pools above versus the filter below. A couple of testing devices were recommended in the March report emailed in April of this year. The ADH had a BioGuard 1200-V multi-test kit that is fairly accurate and easy to operated. It is recommended that the facility purchase a similarly accurate device that

tests a minimum of free chlorine, total chlorine, and pH as soon as possible. Please

contact the ADH and OPH if there are questions and provide daily emails of pH and

chlorine residuals.

4. Follow the link below and commence work on a Water Management Plan. The ADH

and OPH would be happy to answer any questions. Please email both of us with any and

all questions. Also, if any major risks come up while completing this Water Management

Plan, please notify OPH at ounce.

Water Management Plan Link; https://www.cdc.gov/legionella/wmp/toolkit/index.html

If I missed something, we can discuss tomorrow.

The following samples were collected over the last two days.

Samples Collected:

Quapaw:

Main Level:

Single Bath Use Area (Room F and G) likely Person 1 and Person 2 rooms for latest

scenario.

Room F: Bulk mixed sample of tempered and thermal water (~104.8F) and swab in the

jets.

Room G: Bulk thermal sample ( $\sim$ 137F), bulk tempered sample ( $\sim$ 94F), swab jets and

micro bubbles emitter, and remove jet and swab.

Left Pool: Bulk and Swab

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Basement:

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A bulk sample was taken and two swabs were taken.

Basement Water cascade wall fountain. Occasionally disinfected and was disinfected last week. It uses city water and had a temp of  $\sim$ 74F.

Basement Cave: I was not present but think it was just swabbed.

Please note: the temperatures and samples collected are from memory and the lab recorded the actual numbers. There were approximately 12 swabs may have been gathered along with about 9 bulk samples.

### Fountains:

Display, Nobel, Cascade, and Two on bathouse row. The state is going to talk to the City about testing a fountain immediately adjacent to the parking garage and possibly others.

### Cooling Tower:

Bulk water from both towers. There are no condensation basins and no condensation was present. Since the water is only tempered down to ~90 degrees Fahrenheit moisture has not been visible.

### Tempered (cold) thermal:

Bulk cold water at the Quapaw

### Thermal Water:

Bulk hot water at the HQ collection box and the Quapaw

### Quapaw:

Swabbed basement floor where there was standing water close to basement air intake and some building duct-work. Swabbed duct-work in the main bathing area and took bacteriological samples of the four pools. Chlorine and pH were also tested onsite for the four pools.

I think that covers most of the tests taken. I was not present for all and may have missed one or two.

Thank you to everyone who assisted and please share this message as needed. I hope to make the meeting tomorrow but will be in the field at BUFF with limited cell phone

service at times. There is much more to talk about, such as plans for different scenarios, etc. However, I think we should all talk about that on the phone first.

Thank You and Very Respectfully,

Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS
Supervisory Public Health Consultant, Midwest Region
National Park Service, Office of Public Health (OPH),
601 Riverfront Drive

Omaha, NE 68102

Office Phone: 1-402-661-1718

Office Fax: 1-402-661-1719

Cell Phone: 1-202-641-0055

Email: Kurt\_Kesteloot@nps.gov

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"The NPS One Health Network: promoting and protecting the health of all species and the parks that we share." GREEN DOT

From: Kesteloot, Kurt

Sent: 15 Jul 2019 19:37:18 -0500

To: Said, Maria;Lauren Miller;Mark

Scott;jhenry@atokainc.com;croberts@atokainc.com;Justin

Cully;Terry.Paul@arkansas.gov;Richard.McMullen@arkansas.gov

Cc: Sara Newman;Gwendolyn Ruppert;Ritter, Troy

(CDC/DDNID/NCEH/DEHSP);Alexandra Picavet;Patricia Trap;Robert Kammel;Clara Wooden

Subject: HOSP-Legionella-Quapaw Update July 15, 2019

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Estimated samples remaining are: 11 bulk and 14 swabs.

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### Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS Supervisory Public Health Consultant, Midwest Region National Park Service, Office of Public Health (OPH), 601 Riverfront Drive Omaha, NE 68102 Office Phone: 1-402-661-1718

Office Fax: 1-402-661-1719
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Email: Kurt\_Kesteloot@nps.gov

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Please let me know of any edits or additions to this summary. Maria

From: Said, Maria

**Sent:** 7 Oct 2019 10:43:16 -0400

**To:** Smith, Jessica (CDC/DDID/NCIRD/DBD);Lucas, Claressa (CDC/DDID/NCIRD/DBD);Ritter, Troy (CDC/DDNID/NCEH/DEHSP);Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR);Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP)

Cc: Laura Miller; Kesteloot, Kurt; Sara Newman

Subject: Hot Springs - PCR results

Attachments: 2019-10-04 - Arkansas Dept. Of Health - Summary.pdf, HOSP Thermal

Water Sampling Plan 10-4-19.pdf

Hi all,

We have received PCR results from the most recent environmental sampling at Hot Springs National Park. I am attaching the results, as well as a schematic of the water system and where samples were drawn.

Would you all be available today to help us understand these results? I do have some specific questions as well.

- I understand that PCR positivity indicates only Legionella genetic material, that it may be viable or not, and that we need to wait for culture results -- but can it also just be a false positive (i.e. identify genetic material from a different organism)?
- Should PCR positivity in the absence of positive culture push us toward any public health action or is it really just culture information that we would act on? Our understanding is that we a relatively PPV, we just need to wait for culture results but would love to hear your perspective as well.
- What are we to make of the positives in the HOT system (marked as red on the sampling plan), particularly if they are also culture positive? Are there data from Japan on the survival/presence of Legionella at temperatures higher than one would expect?
- Assuming that all these PCR positives are culture positive also, how do we view the overall risk of the water system? My understanding is that these positives are in relatively isolated areas in which amplification might not be a surprise.
- Any other overall thoughts they have on directions we should take, based on the information we have at this time?

Thanks very much - as always. Maria



PHIGENICS ANALYTICAL SERVICES LABORATORY Phone: 844-850-4087 www.phigenics.com CDC ELITE Certified

Legionella Caution

**THAB Caution** 

Facility Tested: Arkansas Department Of Health

Date of Testing: 2019/10/04

Contact Email: dostrand@phgienics.com

#### Validation Criteria:

Potable Water - typically in well managed systems, the total viable heterotrophic aerobic bacterial concentration should be less than or equal to 10° CFU/mL. Per the OSHA Legionetia Technical Manual, the viable Legionetia concentration should be less than 10 CFU/mL unless the water system serves immunocompromised or higher risk users which require a more stringent level of Legionetia control (less than 1 CFU/mL).

Utility Water (such as cooling water) - typically in well managed systems, the total viable heterotrophic aerobic bacterial concentration should be less than or equal to 10° GFU/mL. For closed recirculating utility water, the total viable heterotrophic aerobic bacterial concentration should be less than or equal to 10° GFU/mL. Per the OSHA Legionella Technical Manual, the viable Legionella concentration should be less than 10° GFU/mL.

The faculity Water Management Team should review all options for Validation Criteria and choose its specific criteria based on the specific systems and users.

### **Phigenics Validation Test PREMIUM Report Summary**

Method Used: Next Day Legionella PCR™, TimeZero™, and Standard ISO 11731 Spread Plate

Indicates total heterotrophic bacteria count exceeds the validation criteria (10° for polable, 10° for utility, 10° for closed recirculating utility).

Indicates Legionella was detected.

D. Ostrand AR Dept. Of Health Display Spring Behind Maurice

		NO Concern	No Shading	Indicates results are better than the validation criteria.									
			ND	Indicates Legionella was not detected.									
			Р	Indicates results are pending.			ſ	Т	imeZero	o™ [	51	andard	ISO
PASL Number	Date Inoculated	Date Analyzed	Collector	Location Identification	Category (Potable/Utility)	Molecular Marker Negative Screen	Total Bacteria	Lpn S1	52-14	Legioneila Spo CFU/mL	(pa 51	Lpn 52-14	Legionelia Spo
349637	2019/10/04	2019/10/05	D. Ostrand	AR Dept. Of Health Admin Display Fountain	Potable	Detected	Ρ.	Р	. Р	Р	Р	Р	Р
349638	2019/10/04	2019/10/05	D. Ostrand	AR Dept. Of Health Nobel Fountain	Potable	Not Detected	Р.	Р	. Р	Ρ.	Р	. Р	, Р
349639	2019/10/04	2019/10/05	D. Ostrand	AR Dept. Of Health Lamar Hot	, Potable ,	Not Detected	Р,	Р	, Р	Ρ,	Р	, Р	, Р
349640	2019/10/04	2019/10/05	D. Ostrand	AR Dept. Of Health Buckstaff 4th Tub On The Right Hot	Potable	Not Detected	P.	þ	þ	Þ	þ	þ	P
349641	2019/10/04	2019/10/05	D. Ostrand	AR Dept. Of Health Buckstaff 4th Tub On The Right Cold	Potable	Not Detected	Р	Р	Р	Р	Р	Р	P
349642	2019/10/04	2019/10/05	D. Ostrand	AR Dept. Of Health Quapaw Hot	Potable	Not Detected	Р	Р	Р	Р	Р	Р	P
349643	2019/10/04	2019/10/05	D. Ostrand	AR Dept. Of Health Quapaw Cold	Potable	Not Detected	Ρ.	Р	. Р	Р	P	Р	P
349644	2019/10/04	2019/10/05	D. Ostrand	AR Dept. Of Health QE Ind. Tub Hot	Potable	Not Detected	Р.	Р	, Р	Ρ.	Р	. Р	. Р
349645	2019/10/04	2019/10/05	D. Ostrand	AR Dept. Of Health QE Ind. Tub Cold	, Potable	Detected	Р,	Р	, Р	Ρ.	Р	. Р	. Р
349646	2019/10/04	2019/10/05	D. Ostrand	AR Dept. Of Health Rm 207 Hale Hot	Potable	Detected	Р	þ	Þ	Þ	þ	þ	P
349647	2019/10/04	2019/10/05	D. Ostrand	AR Dept. Of Health Rm 207 Hale Cold	Potable	Detected	Р	Р	Р	Р	Р	Р	P
349648	2019/10/04	2019/10/05	D. Ostrand	AR Dept. Of Health Superior Hot	Potable	Not Detected	Р	Р	P	P	P	Р	P
349649	2019/10/04	2019/10/05	D. Ostrand	AR Dept. Of Health Rm 2 Arlington Hot	Potable	Detected	Ρ.	Р	. Р	Р	P	Р	P
349650	2019/10/04	2019/10/05	D. Ostrand	AR Dept. Of Health Rm 2 Arlington Cold	Potable	Detected	Р.	Р	. Р	Ρ.	Р	. Р	. Р
349651	2019/10/04	2019/10/05	D. Ostrand	AR Dept. Of Health Levi Hospital Hot	Potable	Detected	Р	þ	þ	þ	Þ	þ	P
349652	2019/10/04	2019/10/05	D. Ostrand	AR Dept. Of Health Cooled Water Reservoir Cold	Potable	Not Detected	Р	þ	þ	þ	þ	þ	P
349653	2019/10/04	2019/10/05	D. Ostrand	AR Dept. Of Health Libby Jug Fountain Hot	Potable	Not Detected	Р	Р	Р	Р	Р	Р	P
349654	2019/10/04	2019/10/05	D. Ostrand	AR Dept. Of Health Shell Fountain Hot	Potable	Not Detected	Ρ.	Р	. Р	P	Р	Р	P

### phigenics

2019/10/04

2019/10/05

2019/10/04 | 2019/10/05 | D. Ostrand | AR Dept. Of Health Cascade

349655

349656

Disclaimer: Results from the PVT, or from any other analytical protocol for that matter, do not necessarily provide enough evidence to ensure that hazards from pathogenic microorganisms have been eliminated or controlled nor that risk of harm from such hazards has been reduced. Results from the PVT should only be interpreted within the context of properly designed and implemented water management programs. No guarantee regarding results is expressed or implied. THE PVT AND THE RESULTS IT PRODUCES ARE PROVIDED ON AN "AS IS" BASIS. YOU ASSUME TOTAL RESPONSIBILITY AND RISK FOR YOUR USE OF THE PVT AND PHIGENICS IS NEITHER RESPONSIBLE NOR LIABLE FOR ANY DAMAGES ARISING OUT OF YOUR USE OF THE PVT. This report shall not be reproduced except in full and with the written approval of the laboratory.

Utility

Potable

Detected

Detected

Р

								TimeZero		Time		o™	SI	andard	iso
PASL Number	Date Inoculated	Date Analyzed	Collector	Location Identification	Category (Potable/Utility)	Molecular Marker Negative Screen	Total Bacteria	Lpn S1	Lpn 52-14	Legionella Spn CFU/mL	Lpn S1	Lpn 52-14	Legionella Spo		
349657	2019/10/04	2019/10/05	D. Ostrand	AR Dept. Of Health Cooling Valve Tower 2nd Spicket On Left	Potable	Not Detected	Р	Р	P	Р	Р	Р	ρ		
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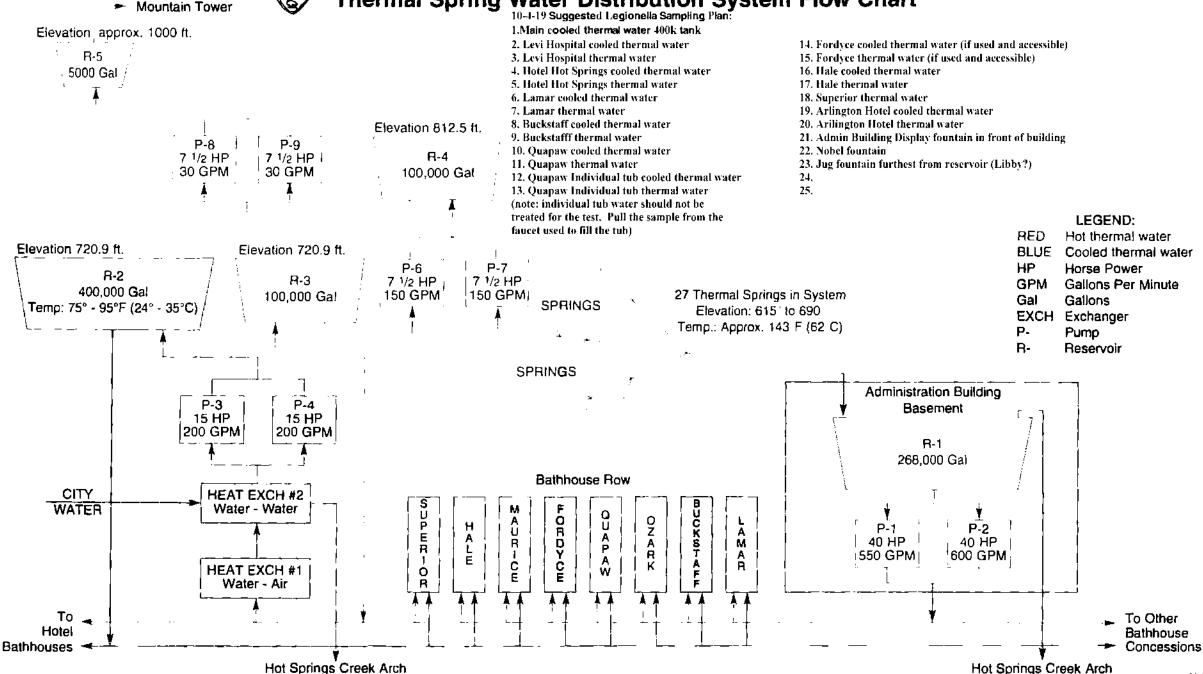
### phigenics phics

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# **Hot Springs National Park**

Thermal Spring Water Distribution System Flow Chart 10-4-19 Suggested Legionella Sampling Plan:



03/16/01

### THE THERMAL WATER DISTRIBUTION SYSTEM OF HOT SPRINGS NATIONAL PARK

Systems for distributing thermal spring water at Hot Springs National Park have been around a long time, evolving along with the bathhouses. In the first half of the nineteenth century most "bathhouses" were rough wooden shacks or even tents, built over natural tufa cavities (sometimes enlarged) that held spring water. More elaborate bathhouses began springing up in the 1850s. Some boasted individual bath rooms with wooden tubs, requiring a network of wooden troughs to direct thermal water into flumes on the roofs. Inside the bathhouse, bathers pulled a rope, opening a mechanism that released water from the flume into the tub.

When a disastrous 1878 fire destroyed most of the bathhouses along Hot Springs Creek, the government seized the opportunity to improve both bathhouse construction and thermal water distribution. The Avenue Hotel Bathhouse, built in 1880, was allowed to set up a pump on the reservation. The first reservoir was built in 1880 as well. On June 8, 1891, a pumping station and reservoir were completed on the present site of the administration building in order to enhance thermal water distribution. Unfortunately a law passed that same year required water to be transported by gravity flow, and the pumping equipment was never used.

The government built more reservoirs in the 1890s to impound spring water and increase the flow. In 1897 all but four springs were encased in brick archways and their water piped to bathhouses and reservoirs; the remaining springs were enclosed by 1901. On November 10, 1903, Congress authorized funds for building surface and deep reservoirs on Hot Springs Mountain, adding to the collection of older reservoirs already in use. In 1924 National Park Service engineers drew a plan showing the existing complex of springs, reservoirs, and plumbing in preparation for the first central collection, impounding and distribution system for the thermal water, completed around 1931. Meters installed on bathhouse lines were not fully functional until 1933. The present system allows better control and monitoring of the water flow.

The springs are located on about 2.8 acres along Bathhouse Row and the Grand Promenade. The bulk of the approximately 850,000 gallons of thermal water flowing each day from Hot Springs Mountain is collected from 27 of the 47 presently active springs. Each spring in the collection system has been sealed and covered with a green box about four feet square with a metal cover, chain, and padlock. The green boxes on the lower west slope of Hot Springs Mountain and the heat exchange units at the north end of Bathhouse Row are the most visible components of the thermal water distribution system and represent its source portion. Not all of the boxes indicate a spring; some hold only valves and collection plumbing. The boxes higher up on the mountain allow access to the underground reservoirs and plumbing.

The valve and spring collection boxes are connected with the plumbing system delivering thermal water to reservoir R-1 under the east end and parking lot of the administration building at the south end of Bathhouse Row. This reservoir holds about 268,000 gallons and includes an overflow pipe connected to the Hot Springs Creek arch.

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Surprisingly enough the water within the distribution system stays well above 100°F (37.8°C); the water has been flowing into it for decades, and the terrain around the reservoirs and plumbing is heat saturated. As a result, the water arriving at the bathhouses is far too hot for direct bathing. By the 1890s most of the bathhouses had individual cooling towers to cool down the thermal water. These and similar towers were used until the central thermal water cooling system was completed on February 8, 1950. The system is comprised of two heat exchangers (#1 and #2), two pumps (P-3 and P-4), and a 400,000-gallon reservoir (R-2). The first exchanger is a thermal water-to-air cooling unit that works like a car radiator; it contains a primary and secondary section,

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The entire system is monitored automatically from the basement of the park administration building. The quantity and temperature of the water coming in from the springs are recorded continuously for 24 hours a day, as are water levels in each reservoir. Meters at each bathhouse transmit readings on the amount of water used to the monitoring center. Analyses of these data alert maintenance workers to the possibility of major leaks or equipment failure.

One source of equipment failure is the buildup of calcium carbonate, or limestone, in the system. Similar to the water found in caves, the spring water contains dissolved limestone that can be deposited in pipes, valves, and other system components, particularly in those handling cooled spring water. Because calcium carbonate is less soluble in cold water, it settles out in greater quantities in cooled water systems. Also called "tufa," the deposit is left wherever the thermal springs flow. In fact, the porous gray tufa formations behind Bathhouse Row are really geological "maps" showing where the springs once flowed freely down the mountainside.

From: Said, Maria

**Sent:** 18 Sep 2019 09:22:04 -0400

**To:** Cooley, Laura A. (CDC/DDID/NCIRD/DBD);Smith, Jessica (CDC/DDID/NCIRD/DBD);Ritter, Troy (CDC/DDNID/NCEH/DEHSP);James, Allison (CDC

arkansas.gov);Kesteloot, Kurt

**Subject:** Hot Springs and Water management plans

Hi Laura, Jessica, and Troy,

We (NPS and Arkansas) are trying to figure out the best path forward with the Hot Springs legionella cases. As you know, all the environmental testing has been negative. However, we have had a number of travel-related cases, and, based on Arkansas state data, it looks like there might be increased cases in the Hot Springs area generally compared to the rest of the state -- although these data are still being analyzed, and I would leave it to Arkansas to confirm this.

We also have considered more where the hot spring water is going -- apparently, it does not just go to the Quapaw, but it goes to a number of other concession operated businesses (including another spa) as well businesses outside park property (including a hospital therapeutic pool and at least one other hotel). One action we are considering is sending a letter to those who receive spa water and basically recommending that although we have never identified legionella in the water and don't know of any increased risk, we do know that untreated water does pose a risk for legionella growth, and businesses might want to consider a water management plan. My feeling is that it would be beneficial to them, if we have an additional case, to then be able to clearly describe their water system and the results of some pre-determined parameters (such as temperatures) over time.

If you all are available at any time, I would love to get your thoughts. Some questions I have are:

- Is a water management plan appropriate even for those buildings that don't meet ASHRAE building guidance criteria?
- Is a water management plan needed for only places that don't disinfect? I know that water management plans are used by many systems in which chlorine is used, but in this case, in which we don't have any evidence of Legionella growth in the hot spring water, I don't think we can or should point to hot spring water as a particular Legionella risk -- the risk in my mind is just from the fact that it is not disinfected.
- Should any of the water management plans include legionella testing? I think the Quapaw might consider this -- but then what would be the guidance if they get positive results?

I am including Allison, the new EIS officer for Arkansas on the thread. Dirk Haselow is no longer with the state health department.

Thanks for any thoughts on this. Hope you guys are well. Maria

From: Google Calendar on behalf of maria\_said@nps.gov

**Sent:** 17 Jul 2019 16:06:54 +0000

To: Ritter, Troy (CDC/DDNID/NCEH/DEHSP);terry.paul@arkansas.gov;Smith,

Jessica (CDC/DDID/NCIRD/DBD); Haselow, Dirk (CDC

arkansas.gov);kurt\_kesteloot@nps.gov;catherine.waters@arkansas.gov;laura\_a\_miller@nps.go

٧

Subject: Invitation: Quapaw Legionella Discussion @ Fri Jul 19, 2019 11am -

12pm (EDT) (tir4@cdc.gov)

Attachments: invite.ics

You have been invited to the following event.

### more details »

### **Quapaw Legionella Discussion**

Fri Jul 19, 2019 11am – 12pm

Tel 1-866-723-8146 PC7713400 (map)

https://hangouts.google.com/hangouts/\_/doi.gov/maria-said

tir4@cdc.gov

- · maria said@nps.gov
- tir4@cdc.gov
- terry.paul@arkansas.gov
- lyd7@cdc.gov
- dirk.haselow@arkansas.gov
- kurt kesteloot@nps.gov
- · catherine.waters@arkansas.gov
- laura\_a\_miller@nps.gov

Yes - Maybe - No more options »

Google Calendar

Learn More

From: Said, Maria

**Sent:** 1 Oct 2019 11:50:48 -0400

**To:** Lucas, Claressa (CDC/DDID/NCIRD/DBD);Ritter, Troy (CDC/DDNID/NCEH/DEHSP);Smith, Jessica (CDC/DDID/NCIRD/DBD);Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP)

Cc: Kesteloot, Kurt;Laura Miller;Terry Paul;James, Allison (CDC

arkansas.gov);Richard McMullen, Ph.D. **Subject:** Legionella - Quapaw

Attachments: HOSP Thermal Water Disinfect Tempered Water.pdf

Hi Claressa, Jasen, Troy, and Jessica,

We look forward to discussing water management plans this afternoon - but we will also received new information that I wanted to give you a heads-up on.

Arkansas recently pulled 4 samples -- one is hot water that feeds the park, two were fountains on city water, and one was a shower in the Quapaw that receives tempered thermal water. By report (although I haven't seen all the official reports), the fountains and the shower were PCR+, but only the shower was also culture positive (L. pneumophila serogroups 2-14 (3 CFU; 30 CFU/mL). A different lab than previous was used. We (the state, the park, and the NPS Office of Public Health) did speak this morning and have some tentative plans in place but would love to talk more with you.

Some questions (although there are likely others) include:

- Reviewing the one positive culture result and understanding more about the result (it was drawn in a way I have not heard of before)
- Understanding the significance of PCR+ and culture negative results

Moving forward, we are interested in additional testing (using this new lab) and developing a water management plan.

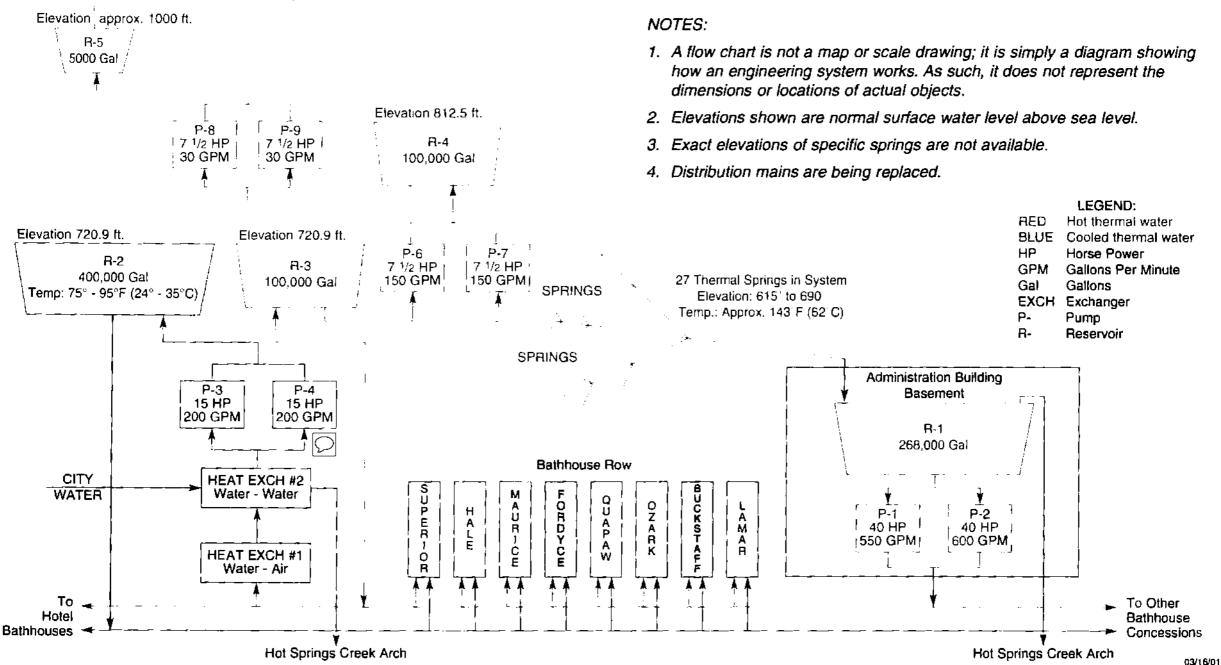
I'm also attaching a schematic of the water system, which is really helpful in understanding the hot vs. thermal water that feeds different buildings in the area.

Thanks. Maria

Mountain Tower

# **Hot Springs National Park**

### **Thermal Spring Water Distribution System Flow Chart**



### THE THERMAL WATER DISTRIBUTION SYSTEM OF HOT SPRINGS NATIONAL PARK

Systems for distributing thermal spring water at Hot Springs National Park have been around a long time, evolving along with the bathhouses. In the first half of the nineteenth century most "bathhouses" were rough wooden shacks or even tents, built over natural tufa cavities (sometimes enlarged) that held spring water. More elaborate bathhouses began springing up in the 1850s. Some boasted individual bath rooms with wooden tubs, requiring a network of wooden troughs to direct thermal water into flumes on the roofs. Inside the bathhouse, bathers pulled a rope, opening a mechanism that released water from the flume into the tub.

When a disastrous 1878 fire destroyed most of the bathhouses along Hot Springs Creek, the government seized the opportunity to improve both bathhouse construction and thermal water distribution. The Avenue Hotel Bathhouse, built in 1880, was allowed to set up a pump on the reservation. The first reservoir was built in 1880 as well. On June 8, 1891, a pumping station and reservoir were completed on the present site of the administration building in order to enhance thermal water distribution. Unfortunately a law passed that same year required water to be transported by gravity flow, and the pumping equipment was never used.

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The springs are located on about 2.8 acres along Bathhouse Row and the Grand Promenade. The bulk of the approximately 850,000 gallons of thermal water flowing each day from Hot Springs Mountain is collected from 27 of the 47 presently active springs. Each spring in the collection system has been sealed and covered with a green box about four feet square with a metal cover, chain, and padlock. The green boxes on the lower west slope of Hot Springs Mountain and the heat exchange units at the north end of Bathhouse Row are the most visible components of the thermal water distribution system and represent its source portion. Not all of the boxes indicate a spring; some hold only valves and collection plumbing. The boxes higher up on the mountain allow access to the underground reservoirs and plumbing.

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From: Said, Maria

**Sent:** 8 Aug 2019 16:28:19 -0400

To: Haselow, Dirk (CDC arkansas.gov);Terry Paul;Richard McMullen,

Ph.D.;Cat Waters;Cooley, Laura A. (CDC/DDID/NCIRD/DBD);Smith, Jessica

(CDC/DDID/NCIRD/DBD);Ritter, Troy (CDC/DDNID/NCEH/DEHSP);Laura Miller;Justin

Cully; Alexandra Picavet; Brent Everitt; Kesteloot, Kurt

**Subject:** Legionella results back - can we meet 4:45pm ET/3:45 CT?

Hi all,

Kurt has the results back. Can we discuss by phone? We can use our conference line 1-866-723-8146 PC 7713400.

I may have missed some folks at CDC, Arkansas HD, HOSP - please feel free to forward to others you think should be present. But would like to discuss internally as a group before notifying the Quapaw - thanks.

Thanks.

Maria

From: Said, Maria

**Sent:** 1 Oct 2019 13:59:58 -0400

To: Lucas, Claressa (CDC/DDID/NCIRD/DBD);Ritter, Troy

(CDC/DDNID/NCEH/DEHSP);Smith, Jessica (CDC/DDID/NCIRD/DBD)

Cc: Kesteloot, Kurt;Laura Miller

Subject: Positive lab report from the Quapaw

Attachments: PASL Report #346755R.pdf

I'm attaching the official lab report from the shower in the Quapaw fyi.

Thanks.

Maria



Location Identification: AR Dept. Of Health QP Shower

Name of Collector: T. Paul

Contact Email: dostrand@phigenics.com

### **Phigenics Validation Test PREMIUM Analytical Report**

Method Used: Next Day Legionella PCR™, TimeZero™, and Standard ISO 11731 Spread Plate

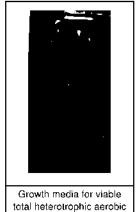
months and a second property and a second pr						
Sample Information						
PASL#	346755R					
Date of Collection/Inoculation	2019/09/18					
Date of Plating	2019/09/19					
Date of Analysis	2019/09/30					

Total Heterotrophic Aerobic Bacteria									
***	103	_CFU/mL							
Score									

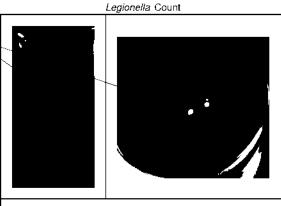
tandaro loo i i i o	, opioas , iaio
Molecular I	Marker Negative Screen
Legionella	Detected

Legionella Results								
0	CFU	ND	CFU/mL					
3	CFU	30	CFU/mL					
0	 CFU	ND	CFU/mL					
	9ionella 0 3 0	0 CFU	0 CFU ND 3 CFU 30					

Total Heterotrophic Aerobic Bacteria

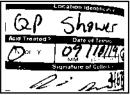


Confirmed Legionella Colonies



Growth media for viable *Legionella* recovery using TimeZero™ and Standard ISO Spread Plate Method.

bacteria. TimeZero™ Labels





Notes:

TimeZero™ received intact, ND indicates Legionella was not detected. Colonies tested positive for Legionella using the TimeZero™ Method (as shown above).

Analyst Signature Anna, Range

Date 2019/09/30

Standard ISO Water Sample Label



Notes:

Colonies tested positive for *Legionella* using the Standard ISO 11731 Spread Plate Method (as shown above).

Reviewer Signature

Date

*(*2019/09/30

Disclaimer: Results from the PVT, or from any other analytical protocol for that matter, do not necessarily provide enough evidence to ensure that hazards from pathogenic microorganisms have been eliminated or controlled nor that risk of harm from such hazards has been reduced. Results from the PVT should only be interpreted within the context of properly designed and implemented water management programs. No guarantee regarding results is expressed or implied. THE PVT AND THE RESULTS IT PRODUCES ARE PROVIDED ON AN "AS IS" BASIS. YOU ASSUME TOTAL RESPONSIBILITY AND RISK FOR YOUR USE OF THE PVT AND PHIGENICS IS NEITHER RESPONSIBLE NOR LIABLE FOR ANY DAMAGES ARISING OUT OF YOUR USE OF THE PVT. This report shall not be reproduced except in full and with the written approval of the laboratory.

Phigenics Analytical Services Laboratory www.phigenics.com Phone: 844-850-4087 CDC ELITE Certified



From: Kesteloot, Kurt

 Sent:
 17 Jul 2019 01:43:21 -0500

 To:
 Miller, Laura; Mark Scott

Cc: Sara Newman;Said, Maria;Robert

 $Kammel; Terry. Paul@arkansas.gov; Richard. McMullen@arkansas.gov; Ritter,\ Troy$ 

(CDC/DDNID/NCEH/DEHSP)

Subject: Quapaw Operation Recommendations for the Next 10-14 Days and

**Environmental Testing Conducted** 

Good Evening Mark and Laura,

Sorry this is so late. I was trying to work on some reports from last week and lost track of time. After further investigation, the Quapaw has approximately 8 individual baths. Seven (rooms  $\Lambda$ -G?) of those baths are on the main floor in a separate room adjacent to the four large bathing pools. The eighth bath is in the basement.

The following are recommendations for operations at the Quapaw for the next 10-14 days (until we receive lab results). After we have more data there may be other recommended changes.

- 1. Cease use of the "new" MicroSilk® hydrotherapy. The process results in water droplets.
- 2. Ensure the entire bath, jets, plumbing and Microsilk system is disinfected between each use. One option would be to add 8 ounces of bleach (6.25% NaOH solution) to a tub that is full above the jets and Microsilk port. The 8 ounces of bleach (NSF approved recommended) can be add to the water from the previous user. This should result in a superchlorinate solution of about 40 ppm of chlorine if there are about 100 gallons of water in the tub. At this concentration it is recommended that the superchlorinated water be circulated through the bath, jets, Microsilk system, and plumbing for approximately 5 minutes. Attendants should not be near the pool during this time and it would be best to leave the room and shut the door. After the time has passed the attendant could carefully enter the room turn off any pumps or circulation devices in the tub and leave the room for another few minutes. After that, the attendant could return and drain the tub and then fill for the next use. That said, it is not recommended that the tubs be filled more than ~30 minutes before each use or a time where the customer is not in water that is more that 2 hours old when they leave the tub. If the facility has a process that they belief is effective or has questions about this, please do not hesitate to call.
- 3. Work with Arkansas Department of Health (ADH) and the NPS Office of Public Health (OPH) on adjusting the pH in the four main bathing pools to help reduce chlorine usage and help ensure free chlorine residuals stay above 1.0 mg/L during high bather loading times. It is recommended that the chlorine residuals continue to be take three times a day. However, they should be take from the pools above versus the filter below. A couple of testing devices were recommended in the March report emailed in April of this year. The ΛDH had a BioGuard 1200-V multi-test kit that is fairly accurate and easy

to operated. It is recommended that the facility purchase a similarly accurate device that tests a minimum of free chlorine, total chlorine, and pH as soon as possible. Please contact the ADH and OPH if there are questions and provide daily emails of pH and chlorine residuals.

4. Follow the link below and commence work on a Water Management Plan. The ADH and OPH would be happy to answer any questions. Please email both of us with any and all questions. Also, if any major risks come up while completing this Water Management Plan, please notify OPH at ounce.

Water Management Plan Link: <a href="https://www.cdc.gov/legionella/wmp/toolkit/index.html">https://www.cdc.gov/legionella/wmp/toolkit/index.html</a>

If I missed something, we can discuss tomorrow.

The following samples were collected over the last two days.

### Samples Collected:

### Quapaw:

### Main Level:

Single Bath Use Area (Room F and G) likely Person 1 and Person 2 rooms for latest scenario.

Room F: Bulk mixed sample of tempered and thermal water (~104.8F) and swab in the jets.

Room G: Bulk thermal sample (~137F), bulk tempered sample (~94F), swab jets and micro bubbles emitter, and remove jet and swab.

Left Pool: Bulk and Swab Center Pool: Bulk and Swab Right Pool:Bulk and Swab

Upper Pool:

Shower Heads: Bulk and Swab

#### **Basement:**

Shower next to the only individual basement tub that has a skylight (~107F) bulk sample and swab.

Hatch area outside of the cave: excesses waste thermal water in large reservoir (~133F). A bulk sample was taken and two swabs were taken.

Basement Water cascade wall fountain. Occasionally disinfected and was disinfected last week. It uses city water and had a temp of ~74F.

Basement Cave: I was not present but think it was just swabbed.

Please note: the temperatures and samples collected are from memory and the lab recorded the actual numbers. There were approximately 12 swabs may have been gathered along with about 9 bulk samples.

### Fountains:

Display, Nobel, Cascade, and Two on bathouse row. The state is going to talk to the City about testing a fountain immediately adjacent to the parking garage and possibly others.

### Cooling Tower:

Bulk water from both towers. There are no condensation basins and no condensation was present. Since the water is only tempered down to  $\sim$ 90 degrees Fahrenheit moisture has not been visible.

### Tempered (cold) thermal:

Bulk cold water at the Quapaw

### Thermal Water:

Bulk hot water at the HQ collection box and the Quapaw

### Quapaw:

Swabbed basement floor where there was standing water close to basement air intake and some building duct-work. Swabbed duct-work in the main bathing area and took bacteriological samples of the four pools. Chlorine and pH were also tested onsite for the four pools.

I think that covers most of the tests taken. I was not present for all and may have missed one or two.

Thank you to everyone who assisted and please share this message as needed. I hope to make the meeting tomorrow but will be in the field at BUFF with limited cell phone service at times. There is much more to talk about, such as plans for different scenarios, etc. However, I think we should all talk about that on the phone first.

Thank You and Very Respectfully,

### Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS Supervisory Public Health Consultant, Midwest Region National Park Service, Office of Public Health (OPH), 601 Riverfront Drive Omaha, NE 68102 Office Phone: 1-402-661-1718

Office Fax: 1-402-661-1719
Cell Phone: 1-202-641-0055
Email: Kurt Kesteloot@nps.gov



"The NPS One Health Network: promoting and protecting the health of all species and the parks that we share." GREEN DOT

From: Kesteloot, Kurt

**Sent:** 7 Jan 2019 11:54:59 -0600

To: Ritter, Troy (CDC/DDNID/NCEH/DEHSP)

Subject: Re: [EXTERNAL] Accepted: Invitation: HOSP Environmental Testing

Discussion @ Mon Jan 7, 2019 11:30am - 12:30pm (CST) (tir4@cdc.gov)

Thank you Troy,

http://quapawbaths.com/

Very Respectfully,

Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS
Supervisory Public Health Consultant, Midwest Region
National Park Service, Office of Public Health (OPH),
601 Riverfront Drive
Omaha, NE 68102

Office Phone: 1-402-661-1718 Office Fax: 1-402-661-1719 Cell Phone: 1-202-641-0055 Email: Kurt Kesteloot@nps.gov

×

Attention Federal Employees Only: Please let us know how we are doing by completing a survey found at: <a href="https://www.surveymonkey.com/s/NPS-OPH-CustServ">https://www.surveymonkey.com/s/NPS-OPH-CustServ</a>

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On Mon, Jan 7, 2019 at 11:28 AM Ritter, Troy (CDC/DDNID/NCEH/DEHSP) < tir4@cdc.gov > wrote:

From: Kesteloot, Kurt

**Sent:** 10 Jul 2019 21:56:49 -0500

To:Ritter, Troy (CDC/DDNID/NCEH/DEHSP)Cc:Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP)

Subject: Re: [EXTERNAL] CONFIDENTIAL: travel-associated legionellosis

CDC49130

Hi Troy,

Thanks, I will try to call you tomorrow morning to share thoughts and we hope to have a call with Laura and others later.

Thank You and Very Respectfully,

### Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS Supervisory Public Health Consultant, Midwest Region National Park Service, Office of Public Health (OPH), 601 Riverfront Drive Omaha, NE 68102

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"The NPS One Health Network: promoting and protecting the health of all species and the parks that we share." GREEN DOT

On Wed, Jul 10, 2019 at 8:32 PM Ritter, Troy (CDC/DDNID/NCEH/DEHSP) < tir4@cdc.gov> wrote:

Hi Kurt,

I'm happy to speak with you in the morning. Feel free to give me a call at your convenience. I have another call from 10-1030 am but otherwise available. My cell is

It looks like you've also reached out to Laura Cooley, which is good. I need to make sure that I'm coordinating with other members of the CDC team before giving any formal advice. However, I'm happy to talk with you informally and then loop in others as needed.

Troy

### Get Outlook for iOS

From: Kesteloot, Kurt < kurt kesteloot@nps.gov >

Sent: Wednesday, July 10, 2019 7:27 PM

To: Ritter, Troy (CDC/DDNID/NCEH/DEHSP)

Subject: Fwd: [EXTERNAL] CONFIDENTIAL: travel-associated legionellosis CDC49130

Good Evening Troy,

Are you available for a call? Early tomorrow morning is best for me.

Thank You and Very Respectfully,

Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS Supervisory Public Health Consultant, Midwest Region National Park Service, Office of Public Health (OPH), 601 Riverfront Drive Omaha, NE 68102

Office Phone: 1-402-661-1718 Office Fax: 1-402-661-1719 Cell Phone: 1-202-641-0055 Email: Kurt Kesteloot@nps.gov

×

"The NPS One Health Network: promoting and protecting the health of all species and the parks that we share." GREEN DOT

----- Forwarded message -----

From: **Said**, **Maria** < <u>maria</u> <u>said@nps.gov</u>>

Date: Wed, Jul 10, 2019 at 6:03 PM

Subject: Fwd: [EXTERNAL] CONFIDENTIAL: travel-associated legionellosis

CDC49130

To: Cooley, Laura A. (CDC/OID/NCIRD) < whz3@cdc.gov>

Cc: Kesteloot, Kurt < kurt kesteloot@nps.gov>

Hi Laura,

Are you available to discuss this? I'm around tonight and early tomorrow morning - I'll be in clinic from 8:30am-12:30pm tomorrow but free after that.

Thank you! Maria

----- Forwarded message ------

From: Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR)<npf3@cdc.gov>

Date: Wed, Jul 10, 2019 at 5:26 PM

Subject: [EXTERNAL] CONFIDENTIAL: travel-associated legionellosis CDC49130

To: Brandi.Stricklin@arkansas.gov

<Brandi.Stricklin@arkansas.gov>,CATHERINE.WATERS@ARKANSAS.GOV

< <u>CATHERINE.WATERS@arkansas.gov</u>>,<u>Debbie.Pledger@arkansas.gov</u>

< <u>Debbie.Plcdger@arkansas.gov</u>>, Haselow, Dirk (CDC<u>arkansas.gov</u>)

<a href="mailto:dirk.haselow@arkansas.gov">dirk.haselow@arkansas.gov</a>>, Wheeler, Gary (CDCarkansas.gov)

<gary.wheeler@arkansas.gov>, Safi, Haytham (CDCarkansas.gov)

<a href="mailto:haytham.safi@arkansas.gov">haytham.safi@arkansas.gov</a>>,Michael.Cima@arkansas.gov

<Michael.Cima@arkansas.gov>

Cc: NCID DBMD Travel-Legionella (CDC)

<travellegionella@cdc.gov>,maria\_said@nps.gov <maria\_said@nps.gov>

### Dear Colleague(s):

Please see the attached notification regarding a case of Legionnaires' disease that may be travel-associated. This patient had exposure to the Quapaw Baths & Spa. We are aware of 2 additional cases with exposure to this location within the past year have requested MS to obtain the lower respiratory specimen, if available. Please see below for hot tub guidance:

### Hot tub guidance:

- CDC webpage for water system maintenance and operating public hot tubs: <a href="http://www.cdc.gov/legionella/water-system-maintenance.html">http://www.cdc.gov/legionella/water-system-maintenance.html</a>
- CDC fact sheet for disinfecting hot tubs containing *Legionella*: http://www.cdc.gov/legionella/downloads/hot-tub-disinfection.pdf
- Hot tub maintenance fact sheet: <a href="http://www.cdc.gov/healthywater/pdf/swimming/resources/operating-public-hot-tubs-factsheet.pdf">http://www.cdc.gov/healthywater/pdf/swimming/resources/operating-public-hot-tubs-factsheet.pdf</a>

Thanks, Sooji

\_

Sooji Lee, MS, MSPH

Loiderniologist (ITIRC, Inc.).

Legionella Team (NCIRD/DBD/RDB).

Centers for Disease Control and Prevention

1600 Cilifton Road, MS H24-6 | Atlanta, GA 30329

Phone: 404-718-3192 | :slee7@cdc.gov

--

Maria Said, MD, MHS | CDR, U.S. Public Health Service Epidemiology Branch Chief | Office of Public Health | National Park Service Address: 1849 C. Street, NW, Room 2543, Mailstop 2560 Washington, DC 20240

Office Tel: 202-513-7151 | Email: maria\_said@nps.gov

Website (public):https://www.nps.gov/orgs/1878/index.htm

Website (internal): <a href="https://sites.google.com/a/nps.gov/in2-protect-and-promote-">https://sites.google.com/a/nps.gov/in2-protect-and-promote-</a>

health/home/disease-surveillance-response

From: Ritter, Troy (CDC/DDNID/NCEH/DEHSP)

**Sent:** 11 Jul 2019 01:31:28 +0000

To: Kesteloot, Kurt

Cc: Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP)

**Subject:** Re: [EXTERNAL] CONFIDENTIAL: travel-associated legionellosis

CDC49130

Hi Kurt,

I'm happy to speak with you in the morning. Feel free to give me a call at your convenience. I have another call from 10-1030 am but otherwise available. My cell is

(b)(6)

It looks like you've also reached out to Laura Cooley, which is good. I need to make sure that I'm coordinating with other members of the CDC team before giving any formal advice. However, I'm happy to talk with you informally and then loop in others as needed.

Troy

Get Outlook for iOS

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Good Evening Troy,

Are you available for a call? Early tomorrow morning is best for me.

Thank You and Very Respectfully,

Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS

Supervisory Public Health Consultant, Midwest Region

National Park Service, Office of Public Health (OPH),

601 Riverfront Drive

Omaha, NE 68102

Office Phone: 1-402-661-1718

Office Fax: 1-402-661-1719

Cell Phone: 1-202-641-0055

Email: Kurt\_Kesteloot@nps.gov

\_×

"The NPS One Health Network: promoting and protecting the health of all species and the parks that we share." GREEN DOT

----- Forwarded message ------

From: Said, Maria < maria said@nps.gov >

Date: Wed, Jul 10, 2019 at 6:03 PM

Subject: Fwd: [EXTERNAL] CONFIDENTIAL: travel-associated legionellosis

CDC49130

To: Cooley, Laura A. (CDC/OID/NCIRD) < whz3@cdc.gov>

Cc: Kesteloot, Kurt < kurt kesteloot@nps.gov>

Hi Laura,

Are you available to discuss this? I'm around tonight and early tomorrow morning - I'll be in clinic from 8:30am-12:30pm tomorrow but free after that.

Thank you!

Maria

----- Forwarded message ------

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Date: Wed, Jul 10, 2019 at 5:26 PM

Subject: [EXTERNAL] CONFIDENTIAL: travel-associated legionellosis CDC49130

To: Brandi.Stricklin@arkansas.gov

< Brandi.Stricklin@arkansas.gov>, CATHERINE.WATERS@ARKANSAS.GOV

<<u>CATHERINE.WATERS@arkansas.gov</u>>,Debbie.Pledger@arkansas.gov

< <u>Debbie.Pledger@arkansas.gov</u>>, Haselow, Dirk (CDCarkansas.gov)

<<u>dirk.haselow@arkansas.gov</u>>, Wheeler, Gary (CDC<u>arkansas.gov</u>)

<gary.wheeler@arkansas.gov>, Safi, Haytham (CDCarkansas.gov)

<a href="mailto:safi@arkansas.gov">,Michael.Cima@arkansas.gov</a>

<<u>Michael.Cima@arkansas.gov</u>>

Cc: NCID DBMD Travel-Legionella (CDC)

<travellegionella@cdc.gov>,maria said@nps.gov <maria said@nps.gov>

Dear Colleague(s):

Please see the attached notification regarding a case of Legionnaires' disease that may be travel-associated. This patient had exposure to the Quapaw Baths & Spa. We are aware of 2 additional cases with exposure to this location within the past year (1)(6)(6)

(b)(6)

I have requested MS to obtain the lower respiratory specimen, if available.

Please see below for hot tub guidance:

Hot tub guidance:

- CDC webpage for water system maintenance and operating public hot tubs: <a href="http://www.cdc.gov/legionella/water-system-maintenance.html">http://www.cdc.gov/legionella/water-system-maintenance.html</a>
- CDC fact sheet for disinfecting hot tubs containing *Legionella*: http://www.cdc.gov/legionella/downloads/hot-tub-disinfection.pdf
- Hot tub maintenance fact
   sheet: <a href="http://www.cdc.gov/healthywater/pdf/swimming/resources/operating-public-hot-tubs-factsheet.pdf">http://www.cdc.gov/healthywater/pdf/swimming/resources/operating-public-hot-tubs-factsheet.pdf</a>

Thanks,
Sooji

—
Sooji Lee, MS, MSPH
Upidemiologist (IHRC, Inc.)

\*\*Tegroperiol Team (NCIRD/DBD/RDB)

Centers for Disease Controlland Prevention

1600 C. Iton Rosd, MS H24-6 [Atlanta, GA 30329]

Phone: 404-718-3192 | :slee7@cdc.gov

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Maria Said, MD, MHS CDR, U.S. Public Health Service

Epidemiology Branch Chief Office of Public Health National Park Service

Address: 1849 C. Street, NW, Room 2543, Mailstop 2560 Washington, DC 20240

Office Tel: 202-513-7151 | Email: maria said@nps.gov

Website (public):https://www.nps.gov/orgs/1878/index.htm

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<u>health/home/disease-surveillance-response</u>

From: Ritter, Troy (CDC/DDNID/NCEH/DEHSP)

**Sent:** 11 Jul 2019 04:03:55 +0000

To: Kesteloot, Kurt

Cc: Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP)

Subject: Re: [EXTERNAL] CONFIDENTIAL: travel-associated legionellosis

CDC49130

That sounds good, Kurt. I look forward to talking with you.

Troy

## Get Outlook for iOS

From: Kesteloot, Kurt <kurt\_kesteloot@nps.gov>
Sent: Wednesday, July 10, 2019 9:56:49 PM
To: Ritter, Troy (CDC/DDNID/NCEH/DEHSP)
Cc: Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP)

Subject: Re: [EXTERNAL] CONFIDENTIAL: travel-associated legionellosis CDC49130

Hi Troy,

Thanks, I will try to call you tomorrow morning to share thoughts and we hope to have a call with Laura and others later.

Thank You and Very Respectfully,

# Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS Supervisory Public Health Consultant, Midwest Region National Park Service, Office of Public Health (OPH), 601 Riverfront Drive Omaha, NE 68102

Office Phone: 1-402-661-1718 Office Fax: 1-402-661-1719 Cell Phone: 1-202-641-0055 Email: Kurt Kesteloot@nps.gov

×

"The NPS One Health Network: promoting and protecting the health of all species and the parks that we share." GREEN DOT

On Wed, Jul 10, 2019 at 8:32 PM Ritter, Troy (CDC/DDNID/NCEH/DEHSP) < <a href="tir4@cdc.gov">tir4@cdc.gov</a>> wrote:

Hi Kurt,

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It looks like you've also reached out to Laura Cooley, which is good. I need to make sure that I'm coordinating with other members of the CDC team before giving any formal advice. However, I'm happy to talk with you informally and then loop in others as needed.

Troy

## Get Outlook for iOS

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Sent: Wednesday, July 10, 2019 7:27 PM

To: Ritter, Troy (CDC/DDNID/NCEH/DEHSP)

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Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS Supervisory Public Health Consultant, Midwest Region National Park Service, Office of Public Health (OPH), 601 Riverfront Drive Omaha, NE 68102

Office Phone: 1-402-661-1718 Office Fax: 1-402-661-1719 Cell Phone: 1-202-641-0055 Email: <u>Kurt\_Kesteloot@nps.gov</u>

[×]

"The NPS One Health Network: promoting and protecting the health of all species and the parks that we share." GREEN DOT

From: Said, Maria <maria_said@nps.gov> Date: Wed, Jul 10, 2019 at 6:03 PM Subject: Fwd: [EXTERNAL] CONFIDENTIAL: travel-associated legionellosis CDC49130 To: Cooley, Laura A. (CDC/OID/NCIRD) <marked and="" color="" said="" th="" th<="" the="" who="" with=""></marked></maria_said@nps.gov>
Cc: Kesteloot, Kurt < kurt_kesteloot@nps.gov>  Hi Laura,
ni Lauia,
Are you available to discuss this? I'm around tonight and early tomorrow morning - I'll be in clinic from 8:30am-12:30pm tomorrow but free after that.
Thank you! Maria
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Dear Colleague(s):
Please see the attached notification regarding a case of Legionnaires' disease that may be travel-associated. This patient had exposure to the Quapaw Baths & Spa. We are aware of 2 additional cases with exposure to this location within the past year  [b)(6)  [c)(6)(6)  [c)(6)(7)  [c)(7)  [c)(8)(7)  [c)(8)(8)  [c)(8)(9)  [c)(8)(9

## Hot tub guidance:

- CDC webpage for water system maintenance and operating public hot tubs: http://www.cdc.gov/legionella/water-system-maintenance.html
- CDC fact sheet for disinfecting hot tubs containing *Legionella*: http://www.cdc.gov/legionella/downloads/hot-tub-disinfection.pdf
- Hot tub maintenance fact sheet: <a href="http://www.cdc.gov/healthywater/pdf/swimming/resources/operating-public-hot-tubs-factsheet.pdf">http://www.cdc.gov/healthywater/pdf/swimming/resources/operating-public-hot-tubs-factsheet.pdf</a>

Thanks,
Sooji

—
Sooji Lee, MS, MSPH

Folicemiolog st (IHRC, Inc.)

Legionella Team (NCIRD/D8D/RDB)

Centers for Disease Control and Prevention

1600 C. Iton Road, MS II24-6 [At anta, GA 30329]

Phone: 404-718-3192 [Telestee7@cdc.gov

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Maria Said, MD, MHS | CDR, U.S. Public Health Service Epidemiology Branch Chief | Office of Public Health | National Park Service Address: 1849 C. Street, NW, Room 2543, Mailstop 2560 Washington, DC 20240 Office Tel: 202-513-7151 | Email: maria\_said@nps.gov

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Website (internal): <a href="https://sites.google.com/a/nps.gov/in2-protect-and-promote-">https://sites.google.com/a/nps.gov/in2-protect-and-promote-</a>

health/home/disease-surveillance-response

From: Ritter, Troy (CDC/DDNID/NCEH/DEHSP)

**Sent:** 26 Nov 2019 13:41:22 +0000

To: Kesteloot, Kurt

**Subject:** Re: [EXTERNAL] Declined: Invitation: HOSP Legionella Update/Discussion @ Tue Nov 26, 2019 2pm - 3pm (CST) (tir4@cdc.gov)

9:15 sounds good. Please call my cell at

(b)(6)

### Get Outlook for iOS

From: Kesteloot, Kurt < kurt\_kesteloot@nps.gov> Sent: Tuesday, November 26, 2019 8:10:25 AM

**To:** Ritter, Troy (CDC/DDNID/NCEH/DEHSP) <tir4@cdc.gov>

Subject: Re: [EXTERNAL] Declined: Invitation: HOSP Legionella Update/Discussion @ Tue

Nov 26, 2019 2pm - 3pm (CST) (tir4@cdc.gov)

# Good Morning Troy,

Thanks for letting me know. Can you talk in about an hour? Maybe 9:15 your time? I would like to share my thoughts with you and see if you have anything to add.

Thank You and Very Respectfully,

#### Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS

Supervisory Public Health Consultant, Interior Regions 3, 4, and 5, Great Lakes,

Mississippi Basin, and Missouri Basin

National Park Service, Office of Public Health (OPH),

601 Riverfront Drive Omaha. NE 68102

Office Phone: 1-402-661-1718 Office Fax: 1-402-661-1719 Cell Phone: 1-202-641-0055 Email: Kurt Kesteloot@nps.gov



"The NPS One Health Network: promoting and protecting the health of all species and the parks that we share." GREEN DOT

On Tue, Nov 26, 2019 at 6:31 AM Ritter, Troy (CDC/DDNID/NCEH/DEHSP) <tir4@cdc.gov> wrote:

Hi Kurt, I'm not available during the scheduled time but able to talk this morning if you want to give me a call.

 From:
 Ritter, Troy (CDC/ONDIEH/NCEH)

 Sent:
 24 Aug 2018 13:49:13 +0000

**To:** Kramer, Adam (CDC/ONDIEH/NCEH)

Subject: RE: [EXTERNAL] Fwd: Important: Call for Cases: Legionnaires' Disease Associated

with Hot Springs National Park — Arkansas, 2018

I got the go-ahead from Sarisky for the informal consult. I'll be in meetings until around 2p today but happy to chat after.

From: Kramer, Adam (CDC/ONDIEH/NCEH)
Sent: Friday, August 24, 2018 9:40 AM

To: Ritter, Troy (CDC/ONDIEH/NCEH) <tir4@cdc.gov>; Kunz, Jasen M. (CDC/ONDIEH/NCEH)

<izk0@cdc.gov>

Subject: RE: [EXTERNAL] Fwd: Important: Call for Cases: Legionnaires' Disease Associated with Hot

Springs National Park — Arkansas, 2018

Thanks Troy.

I think at this point,	(b)( <u>5</u> )
	(p)(2)
<u></u>	
(b)( <del>3</del> )	Nothing formal at this point, just wanted to discuss
+l!	=

their approach.

### Adam

From: "Ritter, Troy (CDC/ONDIEH/NCEH)" < tir4@cdc.gov>

Sent: Friday, August 24, 2018 8:32 AM

To: "Kramer, Adam (CDC/ONDIEH/NCEH)" < ank5@cdc.gov > , "Kunz, Jasen M.

(CDC/ONDIEH/NCEH)" <izk0@cdc.gov>

Subject: RE: [EXTERNAL] Fwd: Important: Call for Cases: Legionnaires' Disease Associated with

Hot Springs National Park — Arkansas, 2018

#### Hi Adam,

Jasen is on leave and I'm running point for Legionella response. The issue described below seems to be fairly straightforward but I'd like to run this by Sarisky and possibly our Legionella program partners here at CDC. I'll get back to you ASAP.

Troy

From: Kramer, Adam (CDC/ONDIEH/NCEH) Sent: Friday, August 24, 2018 9:15 AM

To: Kunz, Jasen M. (CDC/ONDIEH/NCEH) < izk0@cdc.gov >; Ritter, Troy (CDC/ONDIEH/NCEH)

#### <tir4@cdc.gov>

**Subject:** Fwd: [EXTERNAL] Fwd: Important: Call for Cases: Legionnaires' Disease Associated with Hot Springs National Park — Arkansas, 2018

Hi Jasen and Troy,

Would one of you be able to give Kurt a call? He'd like to discuss with you their plan and the rationale for the water system. Kurt, is the team lead over water/wastewater issues (if they still have it broken up that way) and used to cover Hot Springs so he is familiar with the water distribution system.

He was also a former IHS engineer before coming to NPS.

Thank you,

Adam

From: "Kesteloot, Kurt" < kurt kesteloot@nps.gov>

Sent: Thursday, August 23, 2018 4:00 PM

To: "Kramer, Adam (CDC/ONDIEH/NCEH)" < ank5@cdc.gov >

Subject: Re: [EXTERNAL] Fwd: Important: Call for Cases: Legionnaires' Disease Associated with

Hot Springs National Park — Arkansas, 2018

Hi Adam,

Great to hear from you. Thanks for thinking of me. We just found out from the park yesterday.

Here is where we are at...

Good Afternoon,

We had a great discussion at noon today with Dr. Said, HOSP Management, and etc. Thank you to LCDR Kostamo for on the ground work and CDR Maria Said for further research.

We cannot confirm that Legionella was transmitted at HOSP Quawpaw. We cannot confirm if or where it happened at HOSP. There are many potential locations where a legionella environment could occur in the Park and nearby. With research from Dr. Said, it is advised that we do not do environmental testing until we have a cluster of cases. If we find out about another case, we will be able to ask more questions to determine if they are linked and where it may have happened.

Meanwhile, the NPS OPH will continue to work with HOSP on minimizing risk for Legionella and other recreational water concerns. I recommended testing for the Quapaw in May of this year and they were given 60 days to comply. We are now at 90 days and the Park is assisting them to help conduct recommended pool/spa water quality testing.

OPH will also be talking to the Park more about disinfecting the thermal water at HOSP. Currently the water temperature ranges from 143 degrees Fahrenheit to 146 degrees Fahrenheit (F). The food code requires food to be held at 135F. Thus, the park has been operating under the requirement that all thermal water that is potable must leave the spigots at 135F. There are several other areas where visitors can be exposed to acrosolized water that is non potable. We are talking about providing disinfection for those waters to help reduce risk of Legionella. It is also important to note this is the only confirmed case of Legionnaire that we have heard about for HOSP since 2010.

I will update as we find out more information and welcome any questions, comments, or concerns.

Thank You and Very Respectfully,

Thank You and Very Respectfully,

Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS Supervisory Public Health Consultant, Midwest Region National Park Service, Office of Public Health (OPH), 601 Riverfront Drive Omaha, NE 68102 Office Phone: 1-402-661-1718

Office Fax: 1-402-661-1719
Cell Phone: 1-202-641-0055
Email: Kurt Kesteloot@nps.gov

×

Attention Federal Employees Only: Please let us know how we are doing by completing a survey found at: https://www.surveymonkey.com/s/NPS-OPH-CustServ

"The NPS One Health Network: promoting and protecting the health of all species and the parks that we share."

On Thu, Aug 23, 2018 at 3:14 PM, Kramer, Adam (CDC/ONDIEH/NCEH) < ank5@cdc.gov> wrote:

FYI

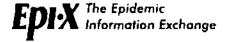
From: "EPIX Update (CDC)" <epixupdate@cdc.gov>

Sent: Thursday, August 23, 2018 2:52 PM

To:

Subject: Important: Call for Cases: Legionnaires' Disease Associated with Hot Springs

National Park — Arkansas, 2018



Check Epi-X for an Important Report

Call for Cases: Legionnaires' Disease Associated with Hot Springs National Park — Arkansas, 2018

The National Park Service (NPS) Office of Public Health is aware of a case of Legionnaires' disease associated with a visit to Hot Springs National Park in July 2018.

https://epix2.cdc.gov/v2/Reports/Display.aspx?id=66780

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#### ABOUT THIS E-MAIL

You have received this message because you are an authorized *Epi-X* user. Information in this message must be used only in accordance with the *Epi-X* User Agreement.

### HOW TO CONTACT Epi-X

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EpiXHelp@cdc.gov (877) 438-3749

For help with preparing or posting a report, contact the Editor on Call:

(877) 862-2392 (toll free within the United States)

+1-770-488-7100 (If you cannot use the toll free number above, please call the CDC

Emergency Operations Center and ask to speak to the Epi-X editor on call.)

### IMPORTANT REMINDERS

Update your contact information: <a href="https://epix2.cdc.gov/v2/Profile.aspx">https://epix2.cdc.gov/v2/Profile.aspx</a>

Learn about Epi-X training opportunities: https://epix2.cdc.gov/v2/help/Training Opportunities.htm

Receive this message in Text format: <a href="https://epix2.cdc.gov/v2/Preferences.aspx#Email">https://epix2.cdc.gov/v2/Preferences.aspx#Email</a>

From: Kramer, Adam (CDC/ONDIEH/NCEH)

**Sent:** 24 Aug 2018 09:40:14 -0400

To:Ritter, Troy (CDC/ONDIEH/NCEH); Kunz, Jasen M. (CDC/ONDIEH/NCEH)Subject:RE: [EXTERNAL] Fwd: Important: Call for Cases: Legionnaires' Disease

Associated with Hot Springs National Park — Arkansas, 2018

Thanks Troy.

I think at this point,		(p)(2)		7
	(b)(	5)		
			_	
	(p)(2)		Nothing formal at this	

point, just wanted to discuss their approach.

Adam

From: "Ritter, Troy (CDC/ONDIEH/NCEH)" <tir4@cdc.gov>

Sent: Friday, August 24, 2018 8:32 AM

To: "Kramer, Adam (CDC/ONDIEH/NCEH)" <ank5@cdc.gov>, "Kunz, Jasen M.

(CDC/ONDIEH/NCEH)" <izk0@cdc.gov>

Subject: RE: [EXTERNAL] Fwd: Important: Call for Cases: Legionnaires' Disease

Associated with Hot Springs National Park — Arkansas, 2018

Hi Adam,

Jasen is on leave and I'm running point for Legionella response. The issue described below seems to be fairly straightforward but I'd like to run this by Sarisky and possibly our Legionella program partners here at CDC. I'll get back to you ASAP.

Troy

From: Kramer, Adam (CDC/ONDIEH/NCEH)
Sent: Friday, August 24, 2018 9:15 AM

To: Kunz, Jasen M. (CDC/ONDIEH/NCEH) <izk0@cdc.gov>; Ritter, Troy (CDC/ONDIEH/NCEH)

<tir4@cdc.gov>

Subject: Fwd: [EXTERNAL] Fwd: Important: Call for Cases: Legionnaires' Disease Associated

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He was also a former IHS engineer before coming to NPS.

Thank you,

Adam

From: "Kesteloot, Kurt" < kurt kesteloot@nps.gov>

Sent: Thursday, August 23, 2018 4:00 PM

To: "Kramer, Adam (CDC/ONDIEH/NCEH)" <ank5@cdc.gov>

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I will update as we find out more information and welcome any questions, comments, or concerns.

Thank You and Very Respectfully,

Thank You and Very Respectfully,

### Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS Supervisory Public Health Consultant, Midwest Region National Park Service, Office of Public Health (OPH), 601 Riverfront Drive Omaha, NE 68102

Office Phone: 1-402-661-1718 Office Fax: 1-402-661-1719 Cell Phone: 1-202-641-0055 Email: Kurt Kesteloot@nps.gov

×

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FYI

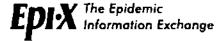
From: "EPIX Update (CDC)" <epixupdate@cdc.gov>

Sent: Thursday, August 23, 2018 2:52 PM

To:

Subject: Important: Call for Cases: Legionnaires' Disease Associated with Hot Springs

National Park — Arkansas, 2018



Check Epi-X for an Important Report

Call for Cases: Legionnaires' Disease Associated with Hot Springs National Park — Arkansas, 2018

The National Park Service (NPS) Office of Public Health is aware of a case of Legionnaires' disease associated with a visit to Hot Springs National Park in July 2018.

https://epix2.cdc.gov/v2/Reports/Display.aspx?id=66780

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 From:
 Ritter, Troy (CDC/ONDIEH/NCEH)

 Sent:
 24 Aug 2018 13:32:25 +0000

To: Kramer, Adam (CDC/ONDIEH/NCEH); Kunz, Jasen M. (CDC/ONDIEH/NCEH)

Subject: RE: [EXTERNAL] Fwd: Important: Call for Cases: Legionnaires' Disease Associated

with Hot Springs National Park — Arkansas, 2018

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**Sent:** Thursday, August 23, 2018 4:00 PM

To: "Kramer, Adam (CDC/ONDIEH/NCEH)" < ank5@cdc.gov>

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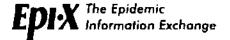
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From: Kunz, Jasen M. (CDC/ONDIEH/NCEH)

**Sent:** 24 Aug 2018 14:04:43 -0400

To: Kramer, Adam (CDC/ONDIEH/NCEH);Ritter, Troy (CDC/ONDIEH/NCEH)

Subject: RE: [EXTERNAL] Fwd: Important: Call for Cases: Legionnaires' Disease

Associated with Hot Springs National Park — Arkansas, 2018

Troy be sure to link in neird on any discussions. Thanks.

Sent from iPhone

From: Kramer, Adam (CDC/ONDIEH/NCEH) <ank5@cdc.gov>

Date: August 24, 2018 at 9:40:15 AM EDT

To: Ritter, Troy (CDC/ONDIEH/NCEH) < tir4@cdc.gov>, Kunz, Jasen M.

(CDC/ONDIEH/NCEH) <izk0@cdc.gov>

Subject: RE: [EXTERNAL] Fwd: Important: Call for Cases: Legionnaires' Disease

Associated with Hot Springs National Park — Arkansas, 2018

Thanks Troy.

I think at this point,		(b)( <b>5</b> )	
		(p)( <del>2</del> )	
			_
]	(p)( <b>2</b> )		Nothing formal at this

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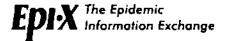
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To:

Subject: Important: Call for Cases: Legionnaires' Disease Associated with Hot Springs

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From: Kurt Kesteloot

**Sent:** 5 Aug 2019 04:33:52 -0700

To: Anthony

Cc: Terry Paul; Haselow, Dirk (CDC arkansas.gov); Bob Kempkes; Maria

Said;Ritter, Troy (CDC/DDNID/NCEH/DEHSP) **Subject:** Re: [EXTERNAL] Quapaw

Good Morning Anthony,

Yes, we can have a call about cleaning. We will try to get a few people together for a call. Does 11 or 1130 central time work?

We can also talk about hypotheticals for additional testing and will need to have a call Friday to discuss actual a after we have all of the results.

Very Respectfully,

CDR Kurt Kesteloot, PE, BCEE, USPHS Supervisory Public Health Consultant, MWR National Park Service, Office of Public Health 601 Riverfront Drive Omaha, NE 68102 Office Phone: 402-661-1718

Office Phone: 402-661-1718 Cell Phone: 202-641-0055

### Sent from my iPhone

- > On Aug 4, 2019, at 8:08 PM, Anthony <anthony@taylorkempkes.com> wrote:
- >
- > All,
- > Could we schedule a call for tomorrow morning to discuss our cleaning procedures and follow up testing?
- > Thanks
- > Anthony
- > Sent from my iPhone

From: anthony@taylorkempkes.com
Sent: 5 Aug 2019 08:31:59 -0500

To: 'Kurt Kesteloot'

Cc: 'Terry Paul'; Haselow, Dirk (CDC arkansas.gov); 'Bob Kempkes'; 'Maria

Said';Ritter, Troy (CDC/DDNID/NCEH/DEHSP)

Subject: RE: [EXTERNAL] Quapaw

#### Kurt,

11 am CDT works best for me, as I have to leave at noon for a meeting in West Arkansas. Thanks for the prompt response.

Anthony Taylor
Taylor/Kempkes Architects, P.A.
210 Central Ave. Suite 3A
Hot Springs National Park, AR 71901
Phone: (501) 624-5679

Fax: (501) 623-3166

----Original Message----

From: Kurt Kesteloot <a href="mailto:kurt\_kesteloot@nps.gov">kurt\_kesteloot@nps.gov</a>

Sent: Monday, August 5, 2019 6:34 AM To: Anthony <anthony@taylorkempkes.com>

Cc: Terry Paul <terry.paul@arkansas.gov>; Dirk Haselow <dirk.haselow@arkansas.gov>; Bob Kempkes

<bob@taylorkempkes.com>; Maria Said <maria\_said@nps.gov>; tir4@cdc.gov

Subject: Re: [EXTERNAL] Quapaw

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- $\geq Thanks$
- > Anthony

> Sent from my iPhone

From: Kesteloot, Kurt

**Sent:** 4 Oct 2019 13:50:15 -0500

To: Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP)

Cc: maria\_said@nps.gov;Lucas, Claressa (CDC/DDID/NCIRD/DBD);Smith,

Jessica (CDC/DDID/NCIRD/DBD);Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR);Ritter, Troy

(CDC/DDNID/NCEH/DEHSP)

Subject: Re: [EXTERNAL] RE: 10-4-19 Legionella Sampling Plan

Hi Jasen,

This does help and I appreciate the feedback. Depending on the results, we may have to look at better plans in the future for each building.

Thank You and Very Respectfully,

## Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS Supervisory Public Health Consultant, Interior Regions 3-5 National Park Service, Office of Public Health (OPH), 601 Riverfront Drive Omaha, NE 68102

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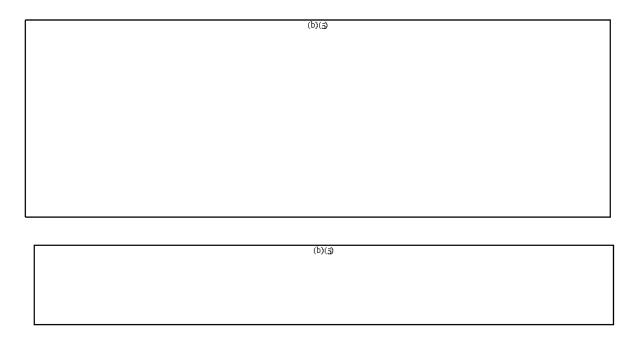
\_×

"The NPS One Health Network: promoting and protecting the health of all species and the parks that we share." GREEN DOT

On Fri, Oct 4, 2019 at 12:42 PM Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP) <izk0@cdc.gov> wrote:

Kurt.

I am writing back to you on behalf the team.



Hope this helps some and we are always available to chat.

Jasen

From: Kesteloot, Kurt < <a href="mailto:kurt\_kesteloot@nps.gov">kurt\_kesteloot@nps.gov</a>>

**Sent:** Friday, October 4, 2019 7:48 AM

**To:** Mark Scott < Mark\_Scott@nps.gov >; laura\_a\_miller@nps.gov

Cc: Lucas, Claressa (CDC/DDID/NCIRD/DBD) <chl9@cdc.gov>; Smith, Jessica

(CDC/DDID/NCIRD/DBD) < <u>lyd7@cdc.gov</u>>; Ritter, Troy

(CDC/DDNID/NCEH/DEHSP) <tir4@cdc.gov>; Maria Said <maria said@nps.gov>;

Robert Kammel < bob kammel@nps.gov > Subject: 10-4-19 Legionella Sampling Plan

Good Morning Everyone,

Mark and I talked yesterday about the attached sampling plan for today. I have attached a drawing that lists the samples and shows a rough overview of the system. If anyone has any additional thoughts, comments, or questions, please let me know.

Currently, I have 23 locations listed. Thus, we have two more available if needed. I have not listed the thermal water system main tank under administration because it has been tested at least three times (once with PCR/new lab) and has been negative all times. I have also excluded the showers in the Quapaw because they were plumbed improperly and will not be used that way ever again. All of the tests focus on the NPS water system, we could talk to the city about testing their fountains and/or test the city water in the Quapaw (showers on main level and one in the basement). Any thoughts?

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Email: <u>Kurt\_Kesteloot@nps.gov</u>

×

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On Thu, Oct 3, 2019 at 3:50 PM Maria Said < maria\_said@nps.gov > wrote:

Thanks Claressa. And to take it one step further, positive PCR results will be much less useful, right? My understanding is that they are not accurate for predicting culture results and we would just have to wait for cultures to be finalized, correct?

Thank you again!

Maria Said, MD, MHS CDR, US Public Health Service

```
Office of Public Health
National Park Service
(O) 202-513-7151
(C) 202-538-5682
> On Oct 3, 2019, at 3:52 PM, Lucas, Claressa (CDC/DDID/NCIRD/DBD)
<chl9@cdc.gov> wrote:
> Hi Maria,
> Yes, negative PCR results are >99% predictive of a negative culture result.
> Best wishes,
> Claressa
> ----Original Message-----
> From: Maria Said <maria said@nps.gov>
> Sent: Thursday, October 3, 2019 3:49 PM
> To: James, Allison (CDC arkansas.gov) <allison.james@arkansas.gov>;
jennifer.dillaha@arkansas.gov; Kurt Kesteloot < kurt kesteloot@nps.gov>;
laura a miller@nps.gov; Lucas, Claressa (CDC/DDID/NCIRD/DBD)
<chl9@cdc.gov>; Smith, Jessica (CDC/DDID/NCIRD/DBD) <lyd7@cdc.gov>;
Ritter, Troy (CDC/DDNID/NCEH/DEHSP) < tir4@cdc.gov>
> Subject: Re: PCR?
> It looks from the lab that PCR results would be available the next day after
testing.
>
> Claressa, am I correct that negative PCR results are highly predictive that culture
results will be negative as well?
> It seems to me that if we are able to get this information quickly, that will be very
helpful to us in determining our modes of notification.
> Thank you! Maria
> Maria Said, MD, MHS
> CDR, US Public Health Service
> Epidemiology Branch Chief
> Office of Public Health
> National Park Service
> (O) 202-513-7151
> (C) 202-538-5682
>
```

Epidemiology Branch Chief

>> On Oct 3, 2019, at 3:40 PM, Maria Said <<u>maria\_said@nps.gov</u>> wrote:

>>

>> Does anyone know how quickly PCR results could be turned around? My >> understanding of PCR is that negative PCR has a high predictive value and could be very useful in this situation if we can get results quickly. Thanks. Maria

From: Ritter, Troy (CDC/DDNID/NCEH/DEHSP)

**Sent:** 15 Jul 2019 13:08:58 +0000

To: Kesteloot, Kurt

**Cc:** Terry Paul;Richard McMullen, Ph.D.

Subject: Re: [EXTERNAL] RE: DRAFT Sampling Plan for Tomorrow's Discussion

Kurt,

If you can take parameters that would be good. I understand it's short notice. Do what you can do! Also, I'm available today if you need anything. Feel free to call.

Troy

## Get Outlook for iOS

From: Kesteloot, Kurt < kurt\_kesteloot@nps.gov>

Sent: Sunday, July 14, 2019 11:16:30 PM

To: Ritter, Troy (CDC/DDNID/NCEH/DEHSP)

Cc: Terry Paul; Richard McMullen, Ph.D.

Subject: Re: [EXTERNAL] RE: DRAFT Sampling Plan for Tomorrow's Discussion

Hi Troy,

Very good question. I can measure temperature and we should be able to measure chlorine. Hopefully the lab will also be able to do pH. Yes, I think we should test all of those as well.

Thank You and Very Respectfully,

Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS Supervisory Public Health Consultant, Midwest Region National Park Service, Office of Public Health (OPH), 601 Riverfront Drive Omaha, NE 68102

Office Phone: 1-402-661-1718 Office Fax: 1-402-661-1719 Cell Phone: 1-202-641-0055 Email: Kurt Kesteloot@nps.gov

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"The NPS One Health Network: promoting and protecting the health of all species and the parks that we share." GREEN DOT

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From: Kesteloot, Kurt

**Sent:** 14 Jul 2019 22:16:30 -0500

To: Ritter, Troy (CDC/DDNID/NCEH/DEHSP)
Cc: Terry Paul;Richard McMullen, Ph.D.

Subject: Re: [EXTERNAL] RE: DRAFT Sampling Plan for Tomorrow's Discussion

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Kurt,

I'm sorry if I missed this piece of information but are you planning to measure other parameters, such as chlorine, pH and temperature?

Troy

Get Outlook for iOS

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To: 'Kesteloot, Kurt'

Cc: Ritter, Troy (CDC/DDNID/NCEH/DEHSP); Richard McMullen, Ph.D.

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Thanks Terry!

501-661-2171

501-786-9144

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**Sent:** Friday, July 12, 2019 8:28 AM

**To:** <u>tir4@cdc.gov</u>; Terry Paul < <u>Terry.Paul@arkansas.gov</u>> **Subject:** Re: DRAFT Sampling Plan for Tomorrow's Discussion

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Email: Kurt\_Kesteloot@nps.gov

From: Kesteloot, Kurt

**Sent:** 13 Jul 2019 21:08:01 -0500

To: Terry Paul

Cc: Ritter, Troy (CDC/DDNID/NCEH/DEHSP);Richard McMullen, Ph.D.

Subject: Re: [EXTERNAL] RE: DRAFT Sampling Plan for Tomorrow's Discussion

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**To:** <u>tir4@cdc.gov</u>; Terry Paul < <u>Terry.Paul@arkansas.gov</u>> **Subject:** Re: DRAFT Sampling Plan for Tomorrow's Discussion

Good Morning,

Here is the latest draft.

Thank You and Very Respectfully,

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"The NPS One Health Network: promoting and protecting the health of all species and the parks that we share." GREEN DOT

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From: Terry Paul

**Sent:** 12 Jul 2019 19:42:18 +0000

To: 'Kesteloot, Kurt'

Cc: Ritter, Troy (CDC/DDNID/NCEH/DEHSP);Richard McMullen, Ph.D.

Subject: RE: [EXTERNAL] RE: DRAFT Sampling Plan for Tomorrow's Discussion

As far as I know right now that should be fine.

Terry

From: Kesteloot, Kurt <kurt kesteloot@nps.gov>

Sent: Friday, July 12, 2019 2:28 PM

To: Terry Paul < Terry. Paul@arkansas.gov>

**Cc:** tir4@cdc.gov; Richard McMullen, Ph.D. <Richard.McMullen@arkansas.gov> **Subject:** Re: [EXTERNAL] RE: DRAFT Sampling Plan for Tomorrow's Discussion

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**Sent:** 12 Jul 2019 14:28:19 -0500

To: Terry Paul

Cc: Ritter, Troy (CDC/DDNID/NCEH/DEHSP); Richard McMullen, Ph.D.

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C	On Fri, Jul 12, 2019 at 9:37 AM Terry Paul < Terry.Paul@arkansas.gov > wrote:
	Gentlemen,
	Let me know as soon as possible about any discussion on the actual taking of the samples. would suggest starting with the Quapaw since that is the focus of concern. Then moving to the other sites. If we need to collect the samples we will need to get with our laboratory today to see if we have the necessary supplies.
	We also suggest at least a look at the ventilation systems and duct work to determine if any moisture is present in those areas.
	Thanks Terry!
	501-661-2171
	501-786-9144
	From: Kesteloot, Kurt < kurt kesteloot@nps.gov > Sent: Friday, July 12, 2019 8:28 AM  To: tir4@cdc.gov; Terry Paul < Terry.Paul@arkansas.gov > Subject: Re: DRAFT Sampling Plan for Tomorrow's Discussion
	Good Morning,
	Here is the latest draft.
	Thank You and Very Respectfully,
	Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS Supervisory Public Health Consultant, Midwest Region National Park Service, Office of Public Health (OPH), 601 Riverfront Drive Omaha, NE 68102

Office Phone: 1-402-661-1718 Office Fax: 1-402-661-1719 Cell Phone: 1-202-641-0055 Email: Kurt Kesteloot@nps.gov

×

"The NPS One Health Network: promoting and protecting the health of all species and the parks that we share." GREEN DOT

On Thu, Jul 11, 2019 at 11:21 PM Kesteloot, Kurt < kurt kesteloot@nps.gov wrote:

Good Evening Troy and Terry,

I will try to call you both tomorrow morning sometime. Hopefully around 0700 CDT. I have attached a few documents for your review. These are just a draft and need more review as it is late and I wanted to have something to share with you for our discussion. I have attached old system plans with comments, a MS Word document, and photos.

Talk to you tomorrow.

Thank You and Very Respectfully,

Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS Supervisory Public Health Consultant, Midwest Region National Park Service, Office of Public Health (OPH), 601 Riverfront Drive Omaha, NE 68102 Office Phone: 1-402-661-1718 Office Fax: 1-402-661-1719 Cell Phone: 1-202-641-0055 Email: <u>Kurt\_Kesteloot@nps.gov</u>

\_×

From: Kesteloot, Kurt

**Sent:** 12 Jul 2019 11:13:16 -0500

To: Terry Paul

Cc: Ritter, Troy (CDC/DDNID/NCEH/DEHSP); Richard McMullen, Ph.D.

Subject: Re: [EXTERNAL] RE: DRAFT Sampling Plan for Tomorrow's Discussion

Hi Terry,

Will you be able to make it Monday too? Justin contacted a lab. I am not sure if it is the lab you are referencing. I think we will need about 30 bulk and 30 swab samples. I like the additional recommendations and agree.

Thank You and Very Respectfully,

#### Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS Supervisory Public Health Consultant, Midwest Region National Park Service, Office of Public Health (OPH), 601 Riverfront Drive Omaha, NE 68102

Office Phone: 1-402-661-1718 Office Fax: 1-402-661-1719 Cell Phone: 1-202-641-0055 Email: Kurt Kesteloot@pps.gov

×

"The NPS One Health Network: promoting and protecting the health of all species and the parks that we share." GREEN DOT

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We also suggest at least a look at the ventilation systems and duct work to determine if any moisture is present in those areas.

Thanks Terry!

501-661-2171

501-786-9144

From: Kesteloot, Kurt < kurt\_kesteloot@nps.gov>

Sent: Friday, July 12, 2019 8:28 AM

**To:** <u>tir4@cdc.gov</u>; Terry Paul < <u>Terry.Paul@arkansas.gov</u>> **Subject:** Re: DRAFT Sampling Plan for Tomorrow's Discussion

Good Morning,

Here is the latest draft.

Thank You and Very Respectfully,

Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS Supervisory Public Health Consultant, Midwest Region National Park Service, Office of Public Health (OPH), 601 Riverfront Drive Omaha, NE 68102

Office Phone: 1-402-661-1718 Office Fax: 1-402-661-1719 Cell Phone: 1-202-641-0055 Email: Kurt Kesteloot@nps.gov "The NPS One Health Network: promoting and protecting the health of all species and the parks that we share." GREEN DOT

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Talk to you tomorrow.

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Kurt

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Office Fax: 1-402-661-1719 Cell Phone: 1-202-641-0055 Email: Kurt\_Kestcloot@nps.gov

×

From: Kesteloot, Kurt

**Sent:** 15 Jul 2019 08:44:37 -0500

To: Ritter, Troy (CDC/DDNID/NCEH/DEHSP)

Subject: Re: [EXTERNAL] RE: DRAFT Sampling Plan for Tomorrow's Discussion

Hi Troy,

Thanks, sounds good. Will Do.

Thank You and Very Respectfully,

Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS Supervisory Public Health Consultant, Midwest Region National Park Service, Office of Public Health (OPH), 601 Riverfront Drive Omaha, NE 68102

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×

"The NPS One Health Network: promoting and protecting the health of all species and the parks that we share." GREEN DOT

On Mon, Jul 15, 2019 at 8:09 ΛM Ritter, Troy (CDC/DDNID/NCEH/DEHSP) < tir4@cdc.gov> wrote:

Kurt,

If you can take parameters that would be good. I understand it's short notice. Do what you can do! Also, I'm available today if you need anything. Feel free to call.

Troy

Get Outlook for iOS

From: Kesteloot, Kurt < <u>kurt\_kesteloot@nps.gov</u>>
Sent: Sunday, July 14, 2019 11:16:30 PM

To: Ritter, Troy (CDC/DDNID/NCEH/DEHSP)

Cc: Terry Paul; Richard McMullen, Ph.D.

Subject: Re: [EXTERNAL] RE: DRAFT Sampling Plan for Tomorrow's Discussion

Hi Troy,

Very good question. I can measure temperature and we should be able to measure chlorine. Hopefully the lab will also be able to do pH. Yes, I think we should test all of those as well.

Thank You and Very Respectfully,

Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS Supervisory Public Health Consultant, Midwest Region National Park Service, Office of Public Health (OPH), 601 Riverfront Drive Omaha, NE 68102

Office Phone: 1-402-661-1718 Office Fax: 1-402-661-1719 Cell Phone: 1-202-641-0055 Email: Kurt Kesteloot@nps.gov

\_**×** 

"The NPS One Health Network: promoting and protecting the health of all species and the parks that we share." GREEN DOT

On Fri, Jul 12, 2019 at 7:52 PM Ritter, Troy (CDC/DDNID/NCEH/DEHSP) < tir4@cdc.gov> wrote:

Kurt,

I'm sorry if I missed this piece of information but are you planning to measure other parameters, such as chlorine, pH and temperature?

Troy

Get Outlook for iOS

From: Terry Paul < Terry.Paul@arkansas.gov > Sent: Friday, July 12, 2019 3:42:18 PM

To: 'Kesteloot, Kurt'

Cc: Ritter, Troy (CDC/DDNID/NCEH/DEHSP); Richard McMullen, Ph.D.

Subject: RE: [EXTERNAL] RE: DRAFT Sampling Plan for Tomorrow's Discussion

As far as I know right now that should be fine.

Terry

From: Kesteloot, Kurt < kurt kesteloot@nps.gov>

Sent: Friday, July 12, 2019 2:28 PM

To: Terry Paul < Terry.Paul@arkansas.gov >

**Cc:** <u>tir4@cdc.gov</u>; Richard McMullen, Ph.D. <<u>Richard.McMullen@arkansas.gov</u>> **Subject:** Re: [EXTERNAL] RE: DRAFT Sampling Plan for Tomorrow's Discussion

Hì Terry,

It will be just me. I hope to arrive in Hot Springs around 1 p.m. Should we meet at the admin building?

Thank You and Very Respectfully,

Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS Supervisory Public Health Consultant, Midwest Region National Park Service, Office of Public Health (OPH), 601 Riverfront Drive Omaha, NE 68102

Office Phone: 1-402-661-1718 Office Fax: 1-402-661-1719 Cell Phone: 1-202-641-0055 Email: <u>Kurt\_Kesteloot@nps.gov</u> "The NPS One Health Network: promoting and protecting the health of all species and the parks that we share." GREEN DOT

On Fri, Jul 12, 2019 at 1:58 PM Terry Paul < Terry. Paul@arkansas.gov > wrote:

What time are you fellows planning to be in hot springs?

Get Outlook for Android

From: Kesteloot, Kurt < kurt kesteloot@nps.gov>

Sent: Friday, July 12, 2019 12:13:15 PM

To: Terry Paul

Cc: tir4@cdc.gov; Richard McMullen, Ph.D.

Subject: Re: [EXTERNAL] RE: DRAFT Sampling Plan for Tomorrow's Discussion

Hi Terry,

Great! This is who Justin emailed.

jhenry@atokainc.com, croberts@atokainc.com

Thank You and Very Respectfully,

Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS
Supervisory Public Health Consultant, Midwest Region
National Park Service, Office of Public Health (OPH),
601 Riverfront Drive
Omaha, NE 68102

Office Phone: 1-402-661-1718

Office Fax: 1-402-661-1719 Cell Phone: 1-202-641-0055 Email: Kurt Kesteloot@nps.gov "The NPS One Health Network: promoting and protecting the health of all species and the parks that we share." GREEN DOT On Fri, Jul 12, 2019 at 11:33 AM Terry Paul < Terry.Paul@arkansas.gov > wrote: The laboratory does not matter to me. Just knowing who will be taking the samples with the supplies would be good for us to know as soon as possible. We can be there at any time Monday and or Tuesday. Thanks TP From: Kesteloot, Kurt <kurt kesteloot@nps.gov> Sent: Friday, July 12, 2019 11:13 AM To: Terry Paul < Terry.Paul@arkansas.gov> Cc: tir4@cdc.gov; Richard McMullen, Ph.D. <Richard.McMullen@arkansas.gov> Subject: Re: [EXTERNAL] RE: DRAFT Sampling Plan for Tomorrow's Discussion

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Thank You and Very Respectfully,

Kurt

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Thanks Terry!

501-661-2171

501-786-9144

From: Kesteloot, Kurt < kurt\_kesteloot@nps.gov>

Sent: Friday, July 12, 2019 8:28 AM

**To:** <u>tir4@cdc.gov</u>; Terry Paul < <u>Terry.Paul@arkansas.gov</u>> **Subject:** Re: DRAFT Sampling Plan for Tomorrow's Discussion

Good Morning,

Here is the latest draft.

Thank You and Very Respectfully,

Kurt

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On Thu, Jul 11, 2019 at 11:21 PM Kesteloot, Kurt <a href="mailto:kurt kesteloot@nps.gov">kurt kesteloot@nps.gov</a>> wrote:

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I will try to call you both tomorrow morning sometime. Hopefully around 0700 CDT. I have attached a few documents for your review. These are just a draft and need more review as it is late and I wanted to have something to share with you for our discussion. I have attached old system plans with comments, a MS Word document, and photos.

Talk to you tomorrow.

Thank You and Very Respectfully,

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Office Phone: 1-402-661-1718

Office Fac: 1-402-661-1719
Cell Phone: 1-202-641-0055
Email: Kurt\_Kesteloot@nps.gov

From: Said, Maria

**Sent:** 18 Oct 2019 09:56:00 -0400

To: Smith, Jessica (CDC/DDID/NCIRD/DBD)

**Cc:** Kurt Kesteloot;Scott, Mark;Sara Newman;Miller, Laura;Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR);Lucas, Claressa (CDC/DDID/NCIRD/DBD);Kunz, Jasen M.

(CDC/DDNID/NCEH/DEHSP);Ritter, Troy (CDC/DDNID/NCEH/DEHSP)

Subject: Re: [EXTERNAL] RE: Hot Springs - Culture results

Hi all,

Here is an agenda that Kurt and I thought could help guide discussion. Looking forward to talking soon.

- 1. Quick epi update (Maria)
- 2. Laboratory results. We are especially interested in the significance of the Legionella in hot water. (Claressa and others at CDC)
- 3. Implications of laboratory results on how we view the hot water and what additional testing, if any, is needed.
- 4. Risk communication
- 5. Immediate remediation steps (Quapaw, Hale, Arlington, and the water system as a whole)
- 6. Plumbing issues (Kurt)

Thanks.

Maria

On Thu, Oct 17, 2019 at 10:53 AM Said, Maria < maria\_said@nps.gov > wrote:

Great - I'll send out a calendar invite so folks can block it off and leave the Webex/call-in information blank until we set that up.

Maria

On Thu, Oct 17, 2019 at 10:43 AM Smith, Jessica (CDC/DDID/NCIRD/DBD) < lyd7@cdc.gov> wrote:

10:00 am ET still works for the CDC team. I'll block it on our calendars. Thanks!

From: Kurt Kesteloot < kurt\_kesteloot@nps.gov >

Sent: Thursday, October 17, 2019 10:34 AM

To: Scott, Mark < mark scott@nps.gov >; Said, Maria < maria said@nps.gov > Co: Smith, Jessica (CDC/DDID/NCIRD/DBD) < lyd7@cdc.gov >; Sara Newman < sara newman@nps.gov >; Miller, Laura < laura a miller@nps.gov >; Lee, Sooji

(CDC/DDID/NCIRD/DBD) (CTR) <npf3@cdc.gov>; Lucas, Claressa

(CDC/DDID/NCIRD/DBD) < chl9@cdc.gov>; Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP) < izk0@cdc.gov>; Ritter, Troy

### (CDC/DDNID/NCEH/DEHSP) < tir4@cdc.gov>

Subject: Re: [EXTERNAL] RE: Hot Springs - Culture results

Hi Maria,

The 1000 am Eastern time sounds great for me. If that works for everyone else, I am happy to set a Webex and meeting invite later this evening.

Very Respectfully,

CDR Kurt Kesteloot, PE, BCEE, USPHS

Supervisory Public Health Consultant, Interior Regions 3-5

National Park Service, Office of Public Health

601 Riverfront Drive

Omaha, NE 68102

Office Phone: 402-661-1718

Cell Phone: 202-641-0055

Sent from my iPhone

On Oct 17, 2019, at 8:10 AM, Scott, Mark < mark scott@nps.gov > wrote:

Anytime Friday works for me. Thanks

Mark

On Thu, Oct 17, 2019 at 8:09 AM Said, Maria <<u>maria\_said@nps.gov</u>> wrote:

Laura, Kurt, and Mark,

Is there a time on Friday that works better for you both?
Thanks.
Maria
On Wed, Oct 16, 2019 at 2:02 PM Said, Maria <a href="maria_said@nps.gov">maria_said@nps.gov</a> > wrote:
I can be there for any of those times. Thanks Jessica.
Maria
On Wed, Oct 16, 2019 at 1:34 PM Smith, Jessica (CDC/DDID/NCIRD/DBD) < <u>lyd7@cdc.gov</u> > wrote:
Hi NPS colleagues,
Currently it looks like we're free for a follow-up call on Friday, 10/18 at 10 am and 12 pm ET. We may be able to make 2 pm work as well, I just need to confirm with Claressa when she's back in office tomorrow am. Please let me know if any of those times work for you if not we can move things around as needed to accommodate.
Thanks, Jessica
_
Jessica C. Smith, MPH
Epidemiologist   Centers for Disease Control and Prevention
NCIRO/DBO/Respiratory Diseases Branch
404.718.5205 <u>lyd7@cdc.gov</u>

From: Kesteloot, Kurt < kurt\_kesteloot@nps.gov > Sent: Wednesday, October 16, 2019 10:06 AM

**To:** Said, Maria < maria said(a)nps.gov>

Cc: Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR)

<<u>npf3@cdc.gov</u>>; Miller, Laura <<u>laura\_a\_miller@nps.gov</u>>; Smith, Jessica (CDC/DDID/NCIRD/DBD) <<u>lyd7@cdc.gov</u>>; Lucas, Claressa (CDC/DDID/NCIRD/DBD) <<u>chl9@cdc.gov</u>>;

Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP)

<<u>izk0@cdc.gov</u>>; Ritter, Troy (CDC/DDNID/NCEH/DEHSP)

<<u>tir4@cdc.gov</u>>; Sara Newman <<u>sara\_newman@nps.gov</u>>;

Mark Scott < Mark\_Scott@nps.gov >

Subject: Re: [EXTERNAL] RE: Hot Springs - Culture results

Thanks Maria and Everyone,

I have actually already sent a meeting invite with the following number.

1-877-951-8306 access code 9958772

Thank You and Very Respectfully,

Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS Supervisory Public Health Consultant, Interior Regions 3-5 National Park Service, Office of Public Health (OPH), 601 Riverfront Drive Omaha, NE 68102

Office Phone: 1-402-661-1718 Office Fax: 1-402-661-1719 Cell Phone: 1-202-641-0055 Email: <u>Kurt\_Kesteloot@nps.gov</u> "The NPS One Health Network: promoting and protecting the health of all species and the parks that we share." GREEN DOT

On Wed, Oct 16, 2019 at 9:03 ΛM Said, Maria < maria said@nps.gov > wrote:

Great -- thank you all for making the time.

Kurt, Laura, and I can all be on a call at 10am CT/11am ET.

Here is conference line info - 1-866-723-8146 PC 7713400. I'll send out a calendar invite too.

Maria

On Wed, Oct 16, 2019 at 10:01 AM Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) < npf3@cdc.gov > wrote:

Hello everyone,

I am sorry for the confusion. CDC team is available 10am central today.

Thank you,

Sooji

From: Miller, Laura < laura\_a\_miller@nps.gov>
Sent: Wednesday, October 16, 2019 9:44 AM
To: Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR)
<npf3@cdc.gov>

Cc: Kesteloot, Kurt < <a href="mailto:kurt\_kestcloot@nps.gov">kurt\_kestcloot@nps.gov</a>; Said, Maria <a href="mailto:said@nps.gov">mailto:said@nps.gov</a>; Smith, Jessica (CDC/DDID/NCIRD/DBD) <a href="mailto:kurt\_kestcloot@nps.gov">kurt.kestcloot@nps.gov</a>; Smith, Jessica (CDC/DDID/NCIRD/DBD) <a href="mailto:kurt\_kestcloot@nps.gov">kurt.kestcloot@nps.gov</a>; Said, Maria <a href="mailto:kestcloot@nps.gov">kurt.kestcloot@nps.gov</a>; Smith, Jessica (CDC/DDID/NCIRD/DBD) <a href="mailto:kestcloot@nps.gov">kurt.kestcloot@nps.gov</a>; Lucas, Claressa (CDC/DDID/NCIRD/DBD) <a href="mailto:kestcloot@nps.gov">kurt.kestcloot@nps.gov</a>; Auc. Research (CDC/DDID/NCI

Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP)
<<u>izk0@cdc.gov</u>>; Ritter, Troy
(CDC/DDNID/NCEH/DEHSP) <<u>tir4@cdc.gov</u>>; Sara
Newman <<u>sara\_ncwman@nps.gov</u>>; Mark Scott
<<u>Mark\_Scott@nps.gov</u>> **Subject:** Re: [EXTERNAL] RE: Hot Springs - Culture

I can make 1:00 pm CDT.

Laura

results

On Wed, Oct 16, 2019 at 8:36 AM Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) < npf3@cdc.gov> wrote:

Hi Kurt.

It looks like some of our colleagues have a meeting at 10am central. Is there another time that may work for your team today? We have availability 1pm, and 3pm central today.

Best.

Sooji

Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) < npf3@cdc.gov>

Cc: Laura Miller < <u>laura a miller@nps.gov</u>>; Sara Newman < <u>sara\_newman@nps.gov</u>>; Mark Scott

<<u>Mark\_Scott@nps.gov</u>>

Subject: Re: Hot Springs - Culture results

Good Morning Everyone,

Are you available around 10 a.m. central time for a call? If so, I can send a meeting invite.

Also, I have attached water use and temperatures for our discussion.

Thank You and Very Respectfully,

Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS Supervisory Public Health Consultant, Interior Regions 3-5 National Park Service, Office of Public Health (OPH), 601 Riverfront Drive Omaha, NE 68102

Office Phone: 1-402-661-1718 Office Fax: 1-402-661-1719 Cell Phone: 1-202-641-0055 Email: <u>Kurt\_Kesteloot@nps.gov</u>

×

On Wed, Oct 16, 2019 at 6:24 AM Kesteloot, Kurt <a href="kurt-kesteloot@nps.gov">kurt-kesteloot@nps.gov</a>> wrote:

Good Morning Everyone,

I emailed the lab last night requesting the temperatures. I know Mark Scott was present when samples were taken. I believe he mentioned that all samples had a temperature except the cooled thermal water reservoir.

I also requested the water meter readings for each facility. The park has water meter readings for both the cooled and hot thermal water at each location. I look forward to talking to everyone soon. I am open up to 1330 eastern time today.

Thank You and Very Respectfully,

### Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS Supervisory Public Health Consultant, Interior Regions 3-5 National Park Service, Office of Public Health (OPII),

601 Riverfront Drive Omaha, NE 68102

Office Phone: 1-402-661-1718 Office Fax: 1-402-661-1719 Cell Phone: 1-202-641-0055 Email: Kurt\_Kesteloot@nps.gov "The NPS One Health Network: promoting and protecting the health of all species and the parks that we share." GREEN DOT

On Tue, Oct 15, 2019 at 9:21 PM Said, Maria <a href="maria-said@nps.gov">maria-said@nps.gov</a> wrote:

Hi everyone,

We have received results of the Legionella testing at Hot Springs (attached).

Would you all have availability tomorrow to discuss?

We are not sure what to make of the detection in the hot samples (and can see if they have temperature readings from those water samples to see what the temperature actually was). We also are not sure what to make of the TimeZero vs. Standard ISO results.

Thank you as always for your help sorting through this. It is very much appreciated.

Maria

--

Laura A. Miller

Superintendent

Hot Springs National Park

101 Reserve Street

Hot Springs, AR 71901

501.623.2824 870.302.9250 (cell) 501.624.1037 (fax)

www.nps.gov/hosp

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Maria Said, MD, MHS | CDR, U.S. Public Health Service Epidemiology Branch Chief | Office of Public Health | National Park Service

Address: 1849 C. Street, NW, Room 2543, Mailstop 2560 Washington, DC 20240

Office Tel: 202-513-7151 | Email: maria said@nps.gov

Website (public): https://www.nps.gov/orgs/1878/index.htm

Website (internal): <a href="https://sites.google.com/a/nps.gov/in2-protect-and-promote-health/home/disease-surveillance-response">https://sites.google.com/a/nps.gov/in2-protect-and-promote-health/home/disease-surveillance-response</a>

--

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--

Mark C. Scott

Facility Manager

Hot Springs National Park

631 Whittington Ave.

Hot Springs, AR 71901

(501)620-6861

\_\_

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health/home/disease-surveillance-response

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Maria Said, MD, MHS | CDR, U.S. Public Health Service

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health/home/disease-surveillance-response

From: Allison James

**Sent:** 18 Sep 2019 18:44:00 +0000

To: Kesteloot, Kurt; Said, Maria; Terry Paul

**Cc:** Smith, Jessica (CDC/DDID/NCIRD/DBD);Cooley, Laura A. (CDC/DDID/NCIRD/DBD);Ritter, Troy (CDC/DDNID/NCEH/DEHSP);Lucas, Claressa

(CDC/DDID/NCIRD/DBD); Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP)

Subject: RE: [EXTERNAL] RE: Hot Springs and Water management plans

That week is pretty open for me, too! I'm looping Terry Paul in on this thread also.

~Allison

Allison E. James, DVM, MPH, PhD CDC Epidemic Intelligence Service Field Officer Arkansas Department of Health Allison.James@Arkansas.gov or hwj7@cdc.gov

Phone: (501) 614-5278 Fax: (501) 661-2300

From: Kesteloot, Kurt <kurt\_kesteloot@nps.gov> Sent: Wednesday, September 18, 2019 12:49 PM

To: Said, Maria <maria\_said@nps.gov>

Cc: Smith, Jessica (CDC/DDID/NCIRD/DBD) < lyd7@cdc.gov>; Cooley, Laura A. (CDC/DDID/NCIRD/DBD)

<whz3@cdc.gov>; Ritter, Troy (CDC/DDNID/NCEH/DEHSP) <tir4@cdc.gov>; Allison James

<Allison.James@arkansas.gov>; Lucas, Claressa (CDC/DDID/NCIRD/DBD) <chl9@cdc.gov>; Kunz, Jasen

M. (CDC/DDNID/NCEH/DEHSP) <izk0@cdc.gov>

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601 Riverfront Drive
Omaha, NE 68102

Office Phone: 1-402-661-1718 Office Fax: 1-402-661-1719 Cell Phone: 1-202-641-0055 Email: Kurt\_Kesteloot@nps.gov ×

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Jessica C. Smith, MPH

Epidemiologist - Centers for Disease Control and Prevention NC RD/DBD/Respiratory Diseases Branch 404.718.5205 | lyd7@cdc.gov

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**To:** Cooley, Laura A. (CDC/DDID/NCIRD/DBD) < whz3@cdc.gov >; Smith, Jessica (CDC/DDID/NCIRD/DBD) < lyd7@cdc.gov >; Ritter, Troy (CDC/DDNID/NCEH/DEHSP)

<<u>tir4@cdc.gov</u>>; James, Allison (CDC <u>arkansas.gov</u>) <<u>allison.james@arkansas.gov</u>>; Kesteloot, Kurt <<u>kurt\_kesteloot@nps.gov</u>>

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From: Kesteloot, Kurt

**Sent:** 18 Sep 2019 12:48:35 -0500

To: Said, Maria

**Cc:** Smith, Jessica (CDC/DDID/NCIRD/DBD);Cooley, Laura A. (CDC/DDID/NCIRD/DBD);Ritter, Troy (CDC/DDNID/NCEH/DEHSP);James, Allison (CDC arkansas.gov);Lucas, Claressa (CDC/DDID/NCIRD/DBD);Kunz, Jasen M.

(CDC/DDNID/NCEH/DEHSP)

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Epidemiologist | Centers for Disease Control and Prevention

NCIRD/DBD/Respiratory Diseases Branch

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arkansas.gov) <allison.james@arkansas.gov>; Kesteloot, Kurt

<kurt kesteloot@nps.gov>

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health/home/disease-surveillance-response

From: Said, Maria

**Sent:** 18 Sep 2019 12:45:26 -0400

**To:** Smith, Jessica (CDC/DDID/NCIRD/DBD)

Cc: Cooley, Laura A. (CDC/DDID/NCIRD/DBD);Ritter, Troy

(CDC/DDNID/NCEH/DEHSP); James, Allison (CDC arkansas.gov); Kesteloot, Kurt; Lucas, Claressa

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Foldem ologist | Centers for Disease Control and Prevention

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From: Said, Maria

**Sent:** 18 Sep 2019 15:00:52 -0400

To: Kesteloot, Kurt

**Cc:** Smith, Jessica (CDC/DDID/NCIRD/DBD);Cooley, Laura A. (CDC/DDID/NCIRD/DBD);Ritter, Troy (CDC/DDNID/NCEH/DEHSP);James, Allison (CDC arkansas.gov);Lucas, Claressa (CDC/DDID/NCIRD/DBD);Kunz, Jasen M.

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Subject: Re: [EXTERNAL] RE: Hot Springs and Water management plans

### Hi Kurt,

I think the call will focus on water management plans -- if you think the park would be interested in being part of that discussion, I think it would be fine. We can add Laura Miller and whoever else might be interested in the calendar invite once we have a day/time.

Maria

On Wed, Sep 18, 2019 at 1:49 PM Kesteloot, Kurt < <u>kurt\_kesteloot@nps.gov</u>> wrote: I'm fairly open that week and look forward to talking more. Should we invite a couple people from the Park?

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From: Kesteloot, Kurt

**Sent:** 23 Oct 2019 22:23:21 -0500

**To:** Ritter, Troy (CDC/DDNID/NCEH/DEHSP);Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP);Smith, Jessica (CDC/DDID/NCIRD/DBD);Said, Maria;Mark

Scott;Terry.Paul@arkansas.gov;Richard.McMullen@arkansas.gov

Cc: Miller, Laura; Sara Newman

Subject: Re: [EXTERNAL] Study of Legionella and Cl Contact Time

Attachments: HOSP\_Utilities Drawings text.pdf, Legionella Testing Plan 10-23-19.xlsx,

Susceptibility of LP to Cl in Tap Water.pdf

### Good Evening Everyone,

Thank you for the assistance today. It was great to talk about the need for additional testing at Hot Spring National Park. It was also good to share the plan to try to reduce water age were possible. The park plans to take a temperature at the top of the cooled water storage tank and at the bottom from the drain and share with everyone.

When time permits, can you please look at the attached legionella testing plan to help understand if the NPS water system has legionella present. I have attached a drawing to help everyone understand the system and locations.

Meanwhile, it would be great to agree upon an appropriate contact time for NaOH chemical disinfection for a residual between 2 and 4 mg/L. CDR Troy Ritter was great and shared the attached study on contact time; however, it is for a lower residual. Currently, we have recommended 20-30 minutes; however, facilities have stated that is problematic.

Thank You and Very Respectfully,

### Kurt

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# Hot Springs National Park

Thermal Water Collection and Distribution System

### GENERAL NOTES

- I. LOCATIONS OF THE THERMAL WATER COLLECTION AND DISTRIBUTION SYSTEM AND APPURTENANCES WERE OBTAINED FROM SURFACE FIELD INSPECTIONS AND AS-BUILT DRAWINGS. NO SUB-SURFACE EXPLORATION WAS ATTEMPTED TO AVOID DISTURBANCES OF THE PARK.
- 2. SPRING FLOW RATES AND TEMPERATURES WERE MEASURED IN 1976 PRIOR TO CONSTRUCTION OF THE EXISTING COLLECTION SYSTEM.
- 3. ALL HW PIPE IS 6-INCH OR IO-INCH DIAMETER, 2-INCH FACTORY INSULATED (EXTERIOR), EPOXY LINED DUCTILE IRON PIPE CONVEYING HOT WATER.
- 4. ALL CW PIPE IS 6-INCH OR 8-INCH DIAMETER, EPOXY LINED, DUCTILE IRON PIPE CONVEYING COOLED WATER.
- 5. ALL CP PIPE IS 4-INCH, 6-INCH, OR 8-INCH DIAMETER CHLORINATED POLYVINYL CHLORIDE (CPVC) PIPE CONVEYING HOT WATER. THE 4-INCH AND 6-INCH PIPE WAS INSTALLED INSIDE 6-INCH AND 8-INCH DIAMETER POLYVINYL CHLORIDE (PVC) PIPE, RESPECTIVELY.
- 6. ALL FCP PIPE IS 11/2-INCH, 2-INCH, 4-INCH, OR 6-INCH DIAMETER "SILVER THREAD" FIBERGLASS PIPE CONVEYING HOT WATER. THE 4-INCH AND 6-INCH PIPE WAS INSTALLED INSIDE 6-INCH OR 8-INCH DIAMETER ASBESTOS-CEMENT PIPE, RESPECTIVELY.
- 7. ALL TEMPERATURES SHOWN ARE DEGREES FAHRENHEIT.

## ABBREVIATIONS

AC ASBESTOS CEMENT PIPE BM BENCHMARK

© CENTER LINE CONC CONCRETE

CI CAST IRON PIPE

JP COLLECTION PIPE

COPPER PIPE

CW COOLED WATER PIPE

DIA DIAMETER

EL ELEVATION

ELEC ELECTRICAL

FCP FIBERGLASS HOT WATER PIPE

GAL GALLON GL GAS PIPELINE

GPD GALLONS PER DAY

GV GATE VALVE HW HOT WATER

INCL INCLUDED

MH MANHOLE

PVC POLYVINYL CHLORIDE PIPE

SS SANITARY SEWER

STA STATION
TBM TEMPORARY BENCHMARK

VC VITRIFIED CLAY PIPE WL CITY WATER LINE

**LEGEND** 

SYMBOL DESCRIPTION

HOT WATER PIPELINES

COOLED WATER PIPELINES

ELECTRICAL CONDUIT

SPRING COLLECTION PIPELINES

+++++ GAS PIPELINES

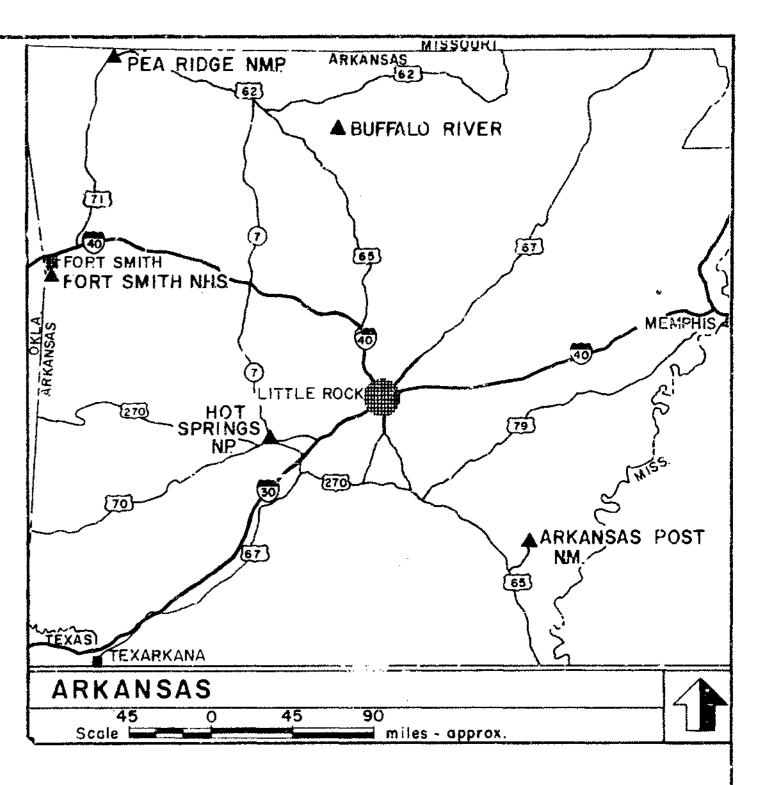
---- VERTICAL WALL

BATHHOUSE ROW

VICINITY MAP

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SCALE OF FEET



### INDEX

- I. COVER SHEET
- 2. ARLINGTON LAWN AREA
- 3. BATHHOUSE ROW-PLAN & PROFILE
- 4. BATHHOUSE ROW-PLAN & PROFILE
- 5. BATHHOUSE ROW-PLAN & PROFILE
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- 8. SPRING COLLECTION GROUP #2
- 9. DETAILS
- 10. PROCESS AND INSTRUMENTATION DIAGRAMS
- II. PROCESS AND INSTRUMENTATION DIAGRAMS
- 12. ONE LINE ELECTRICAL

## REFERENCE DRAWINGS

- I. NP HS-4784 (1930)
- 2. NP HS-2043 (1948)
- 3. NP HS-5311C (1948)
- 4. 128 41,015A (1978) 5. 128 41,021A (1985)
- 6. 128 60,001 (1981)
- 7. 128 41,0233 (1987)
- 8. 128 60,190 (1978)
- 9. 128 41,031A (1987)

## REDUCED SIZE REPRODUCTION

Prepared by:

##DRG-TRIAD, LTD.

## 1310 Wadswarth Blvd.

Suite 100

Lakewood, Colo. 80215

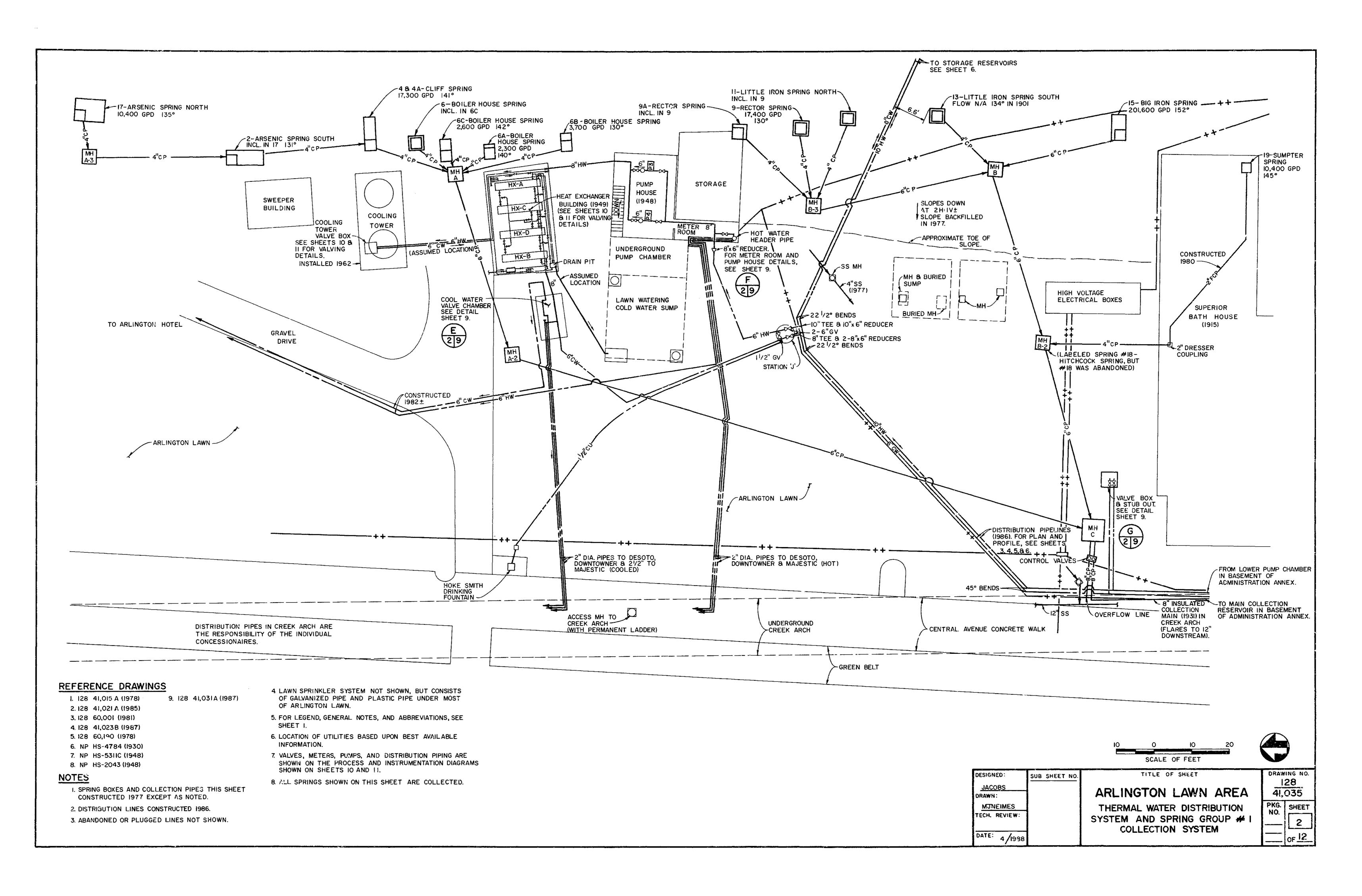
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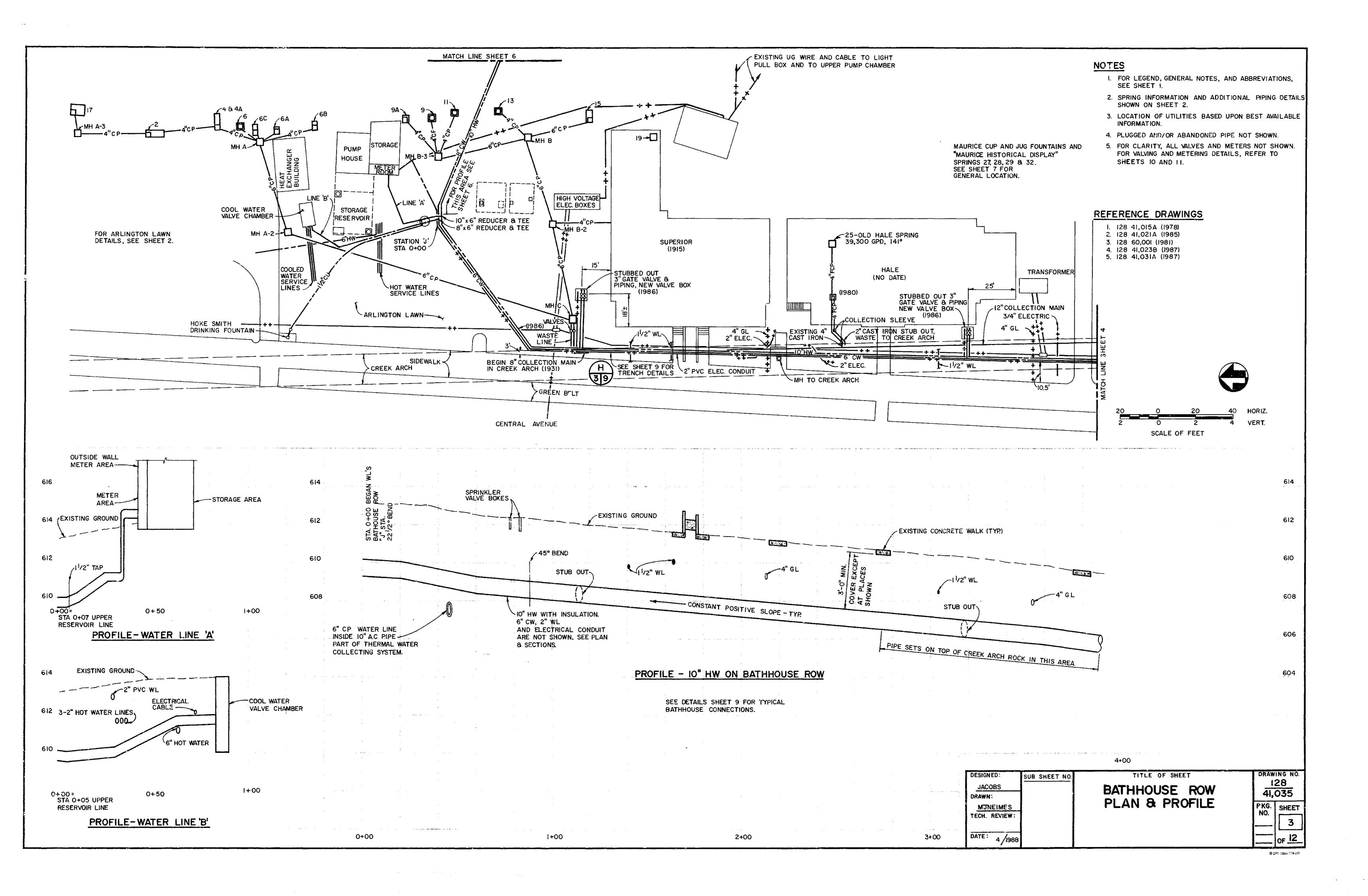
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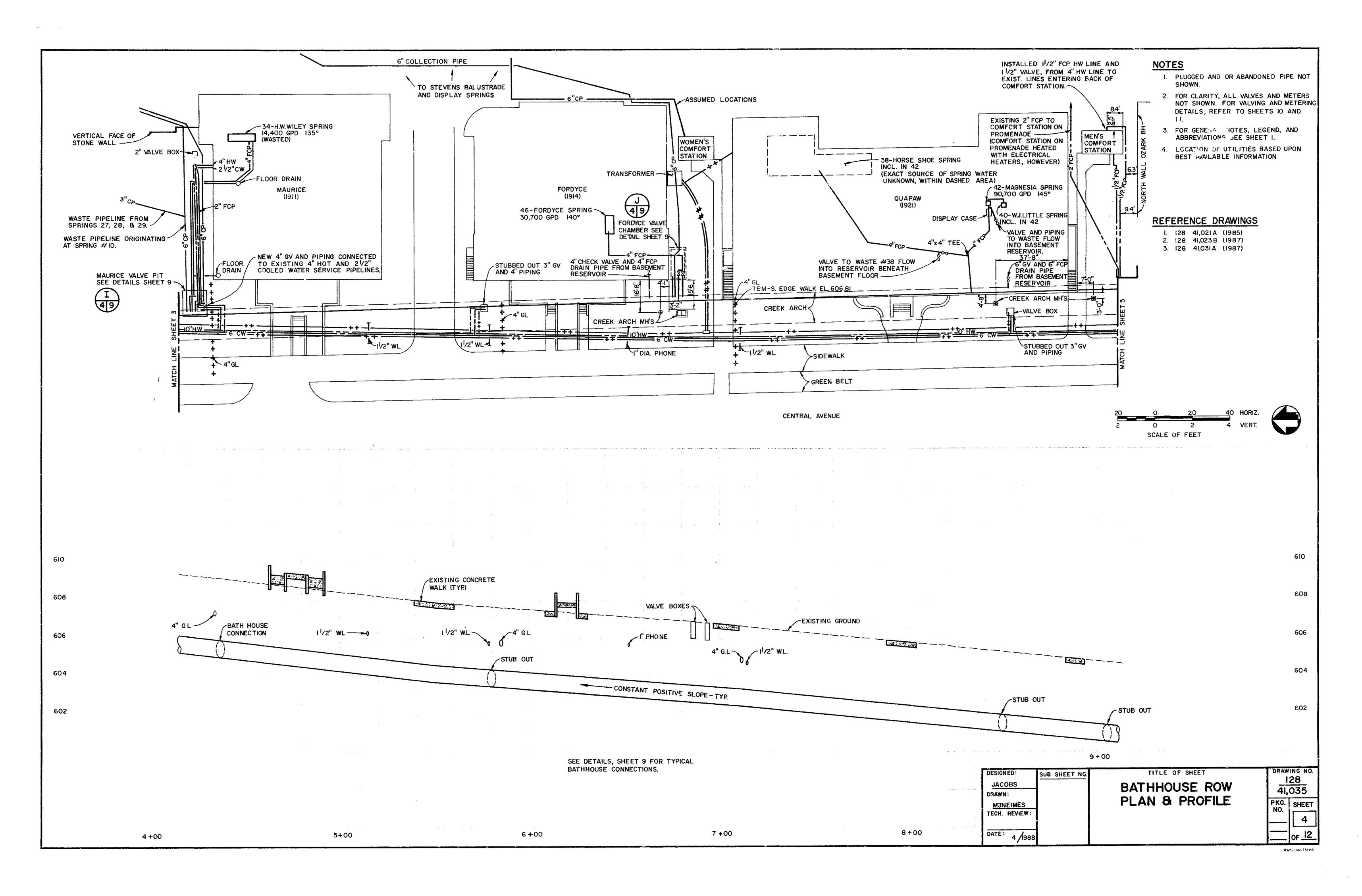
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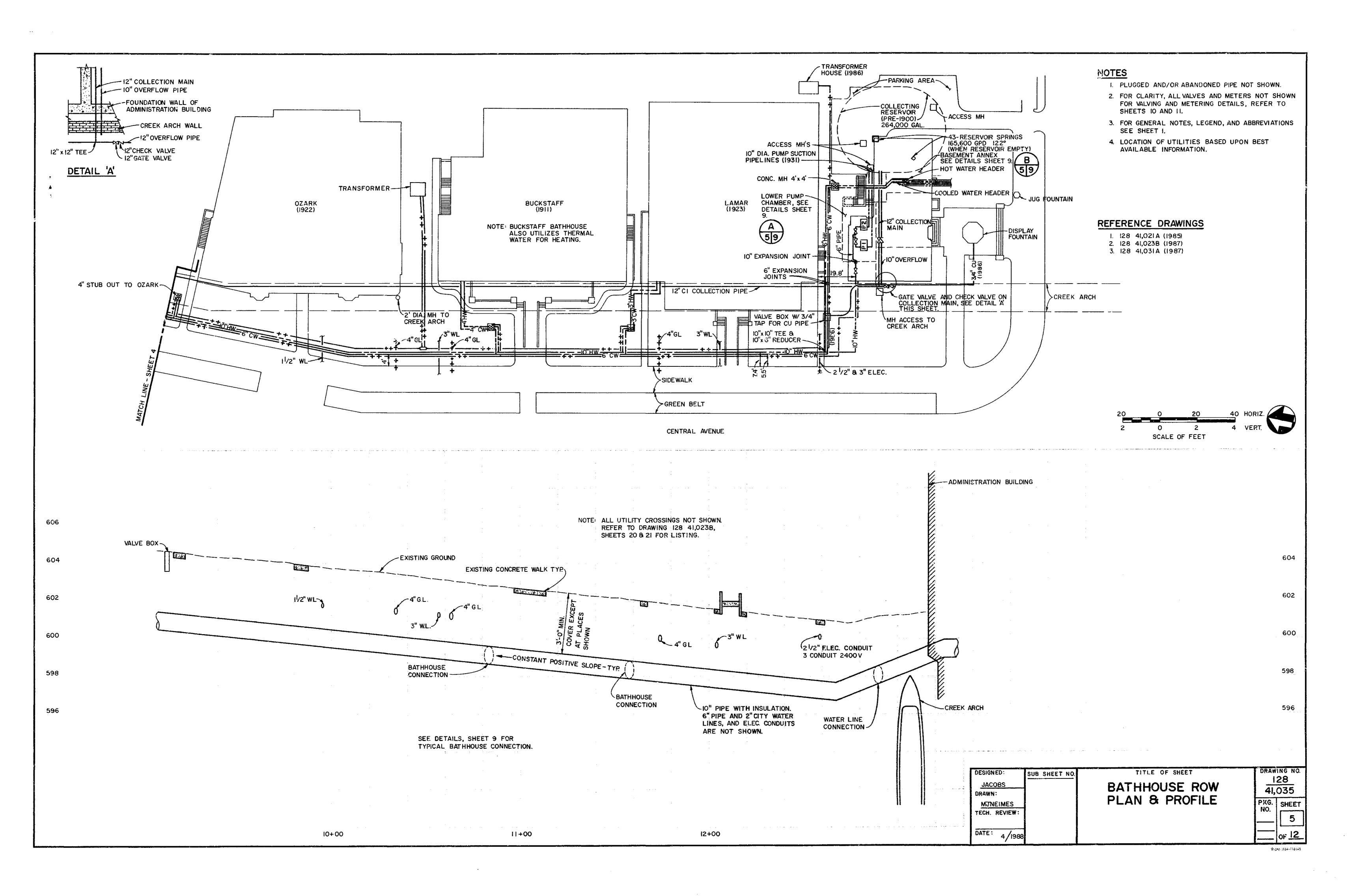
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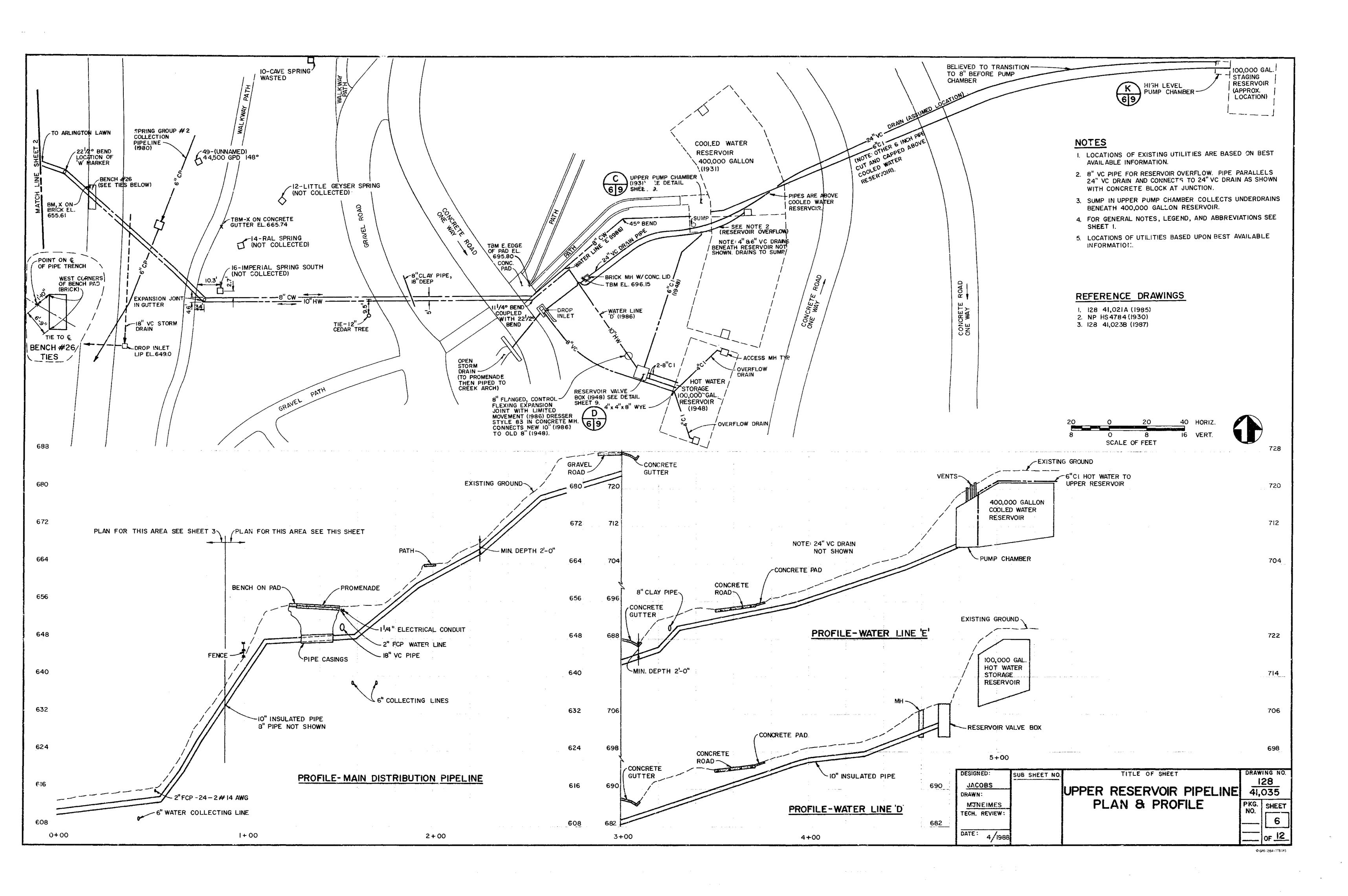
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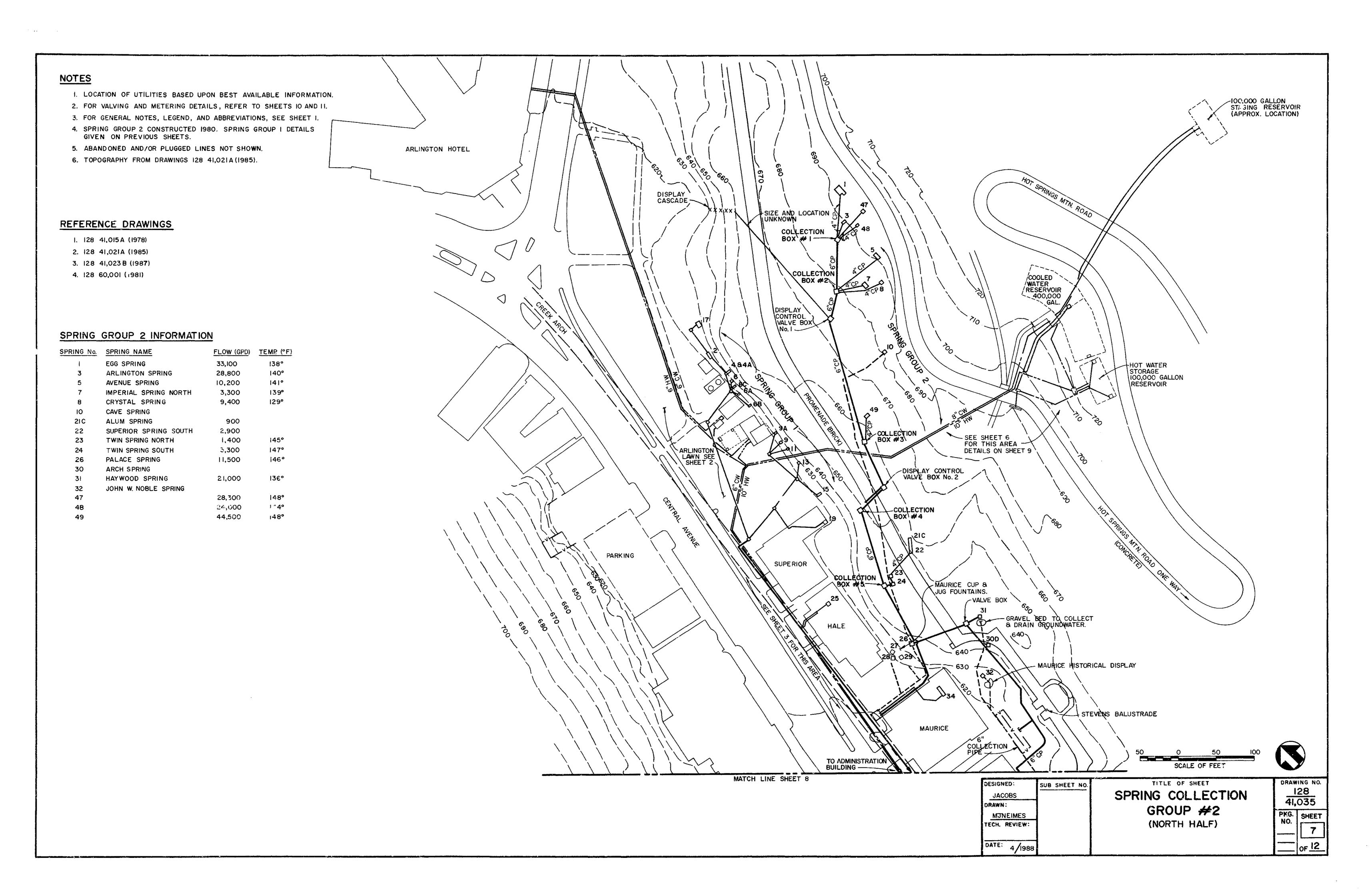


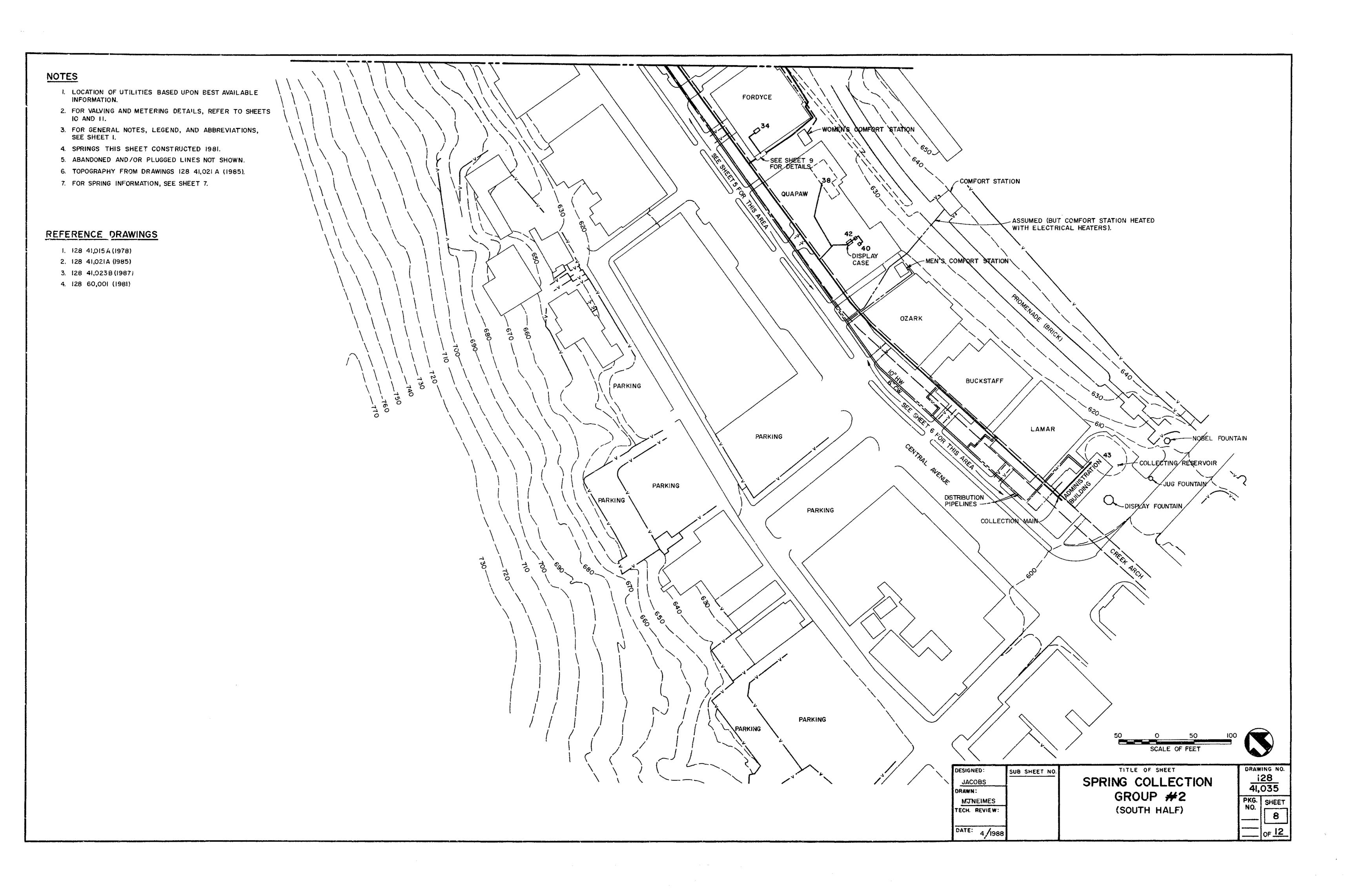


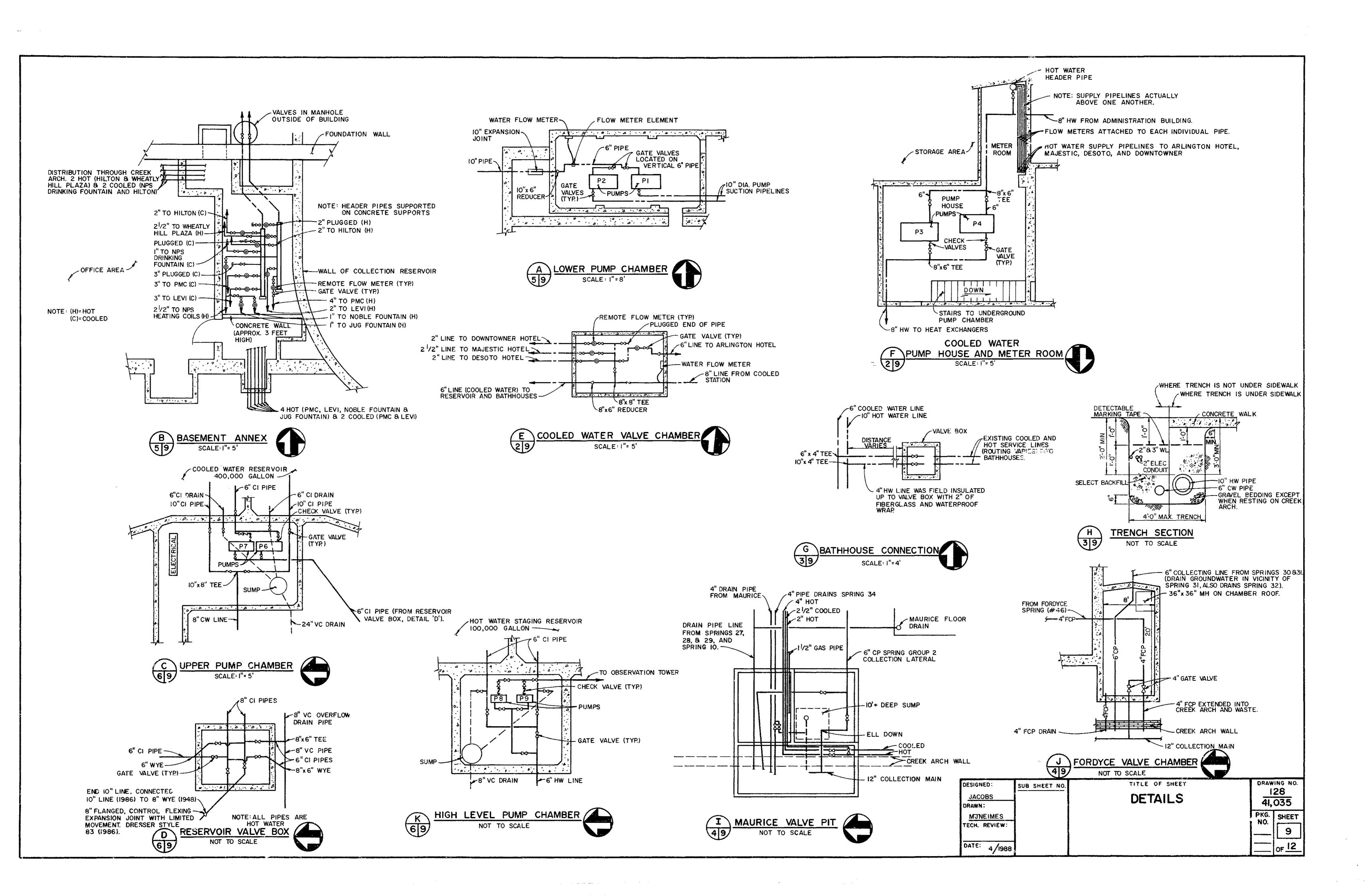


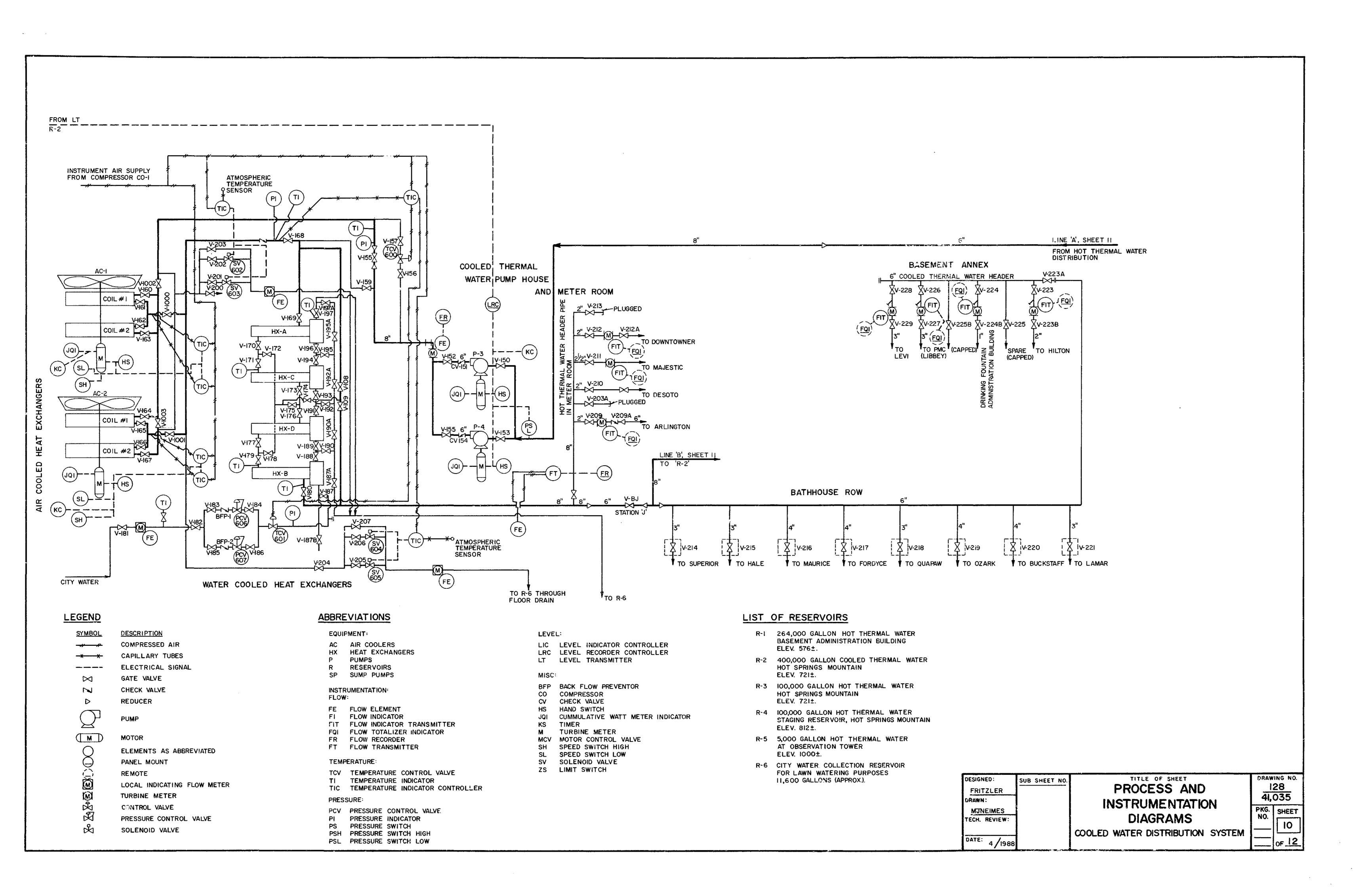


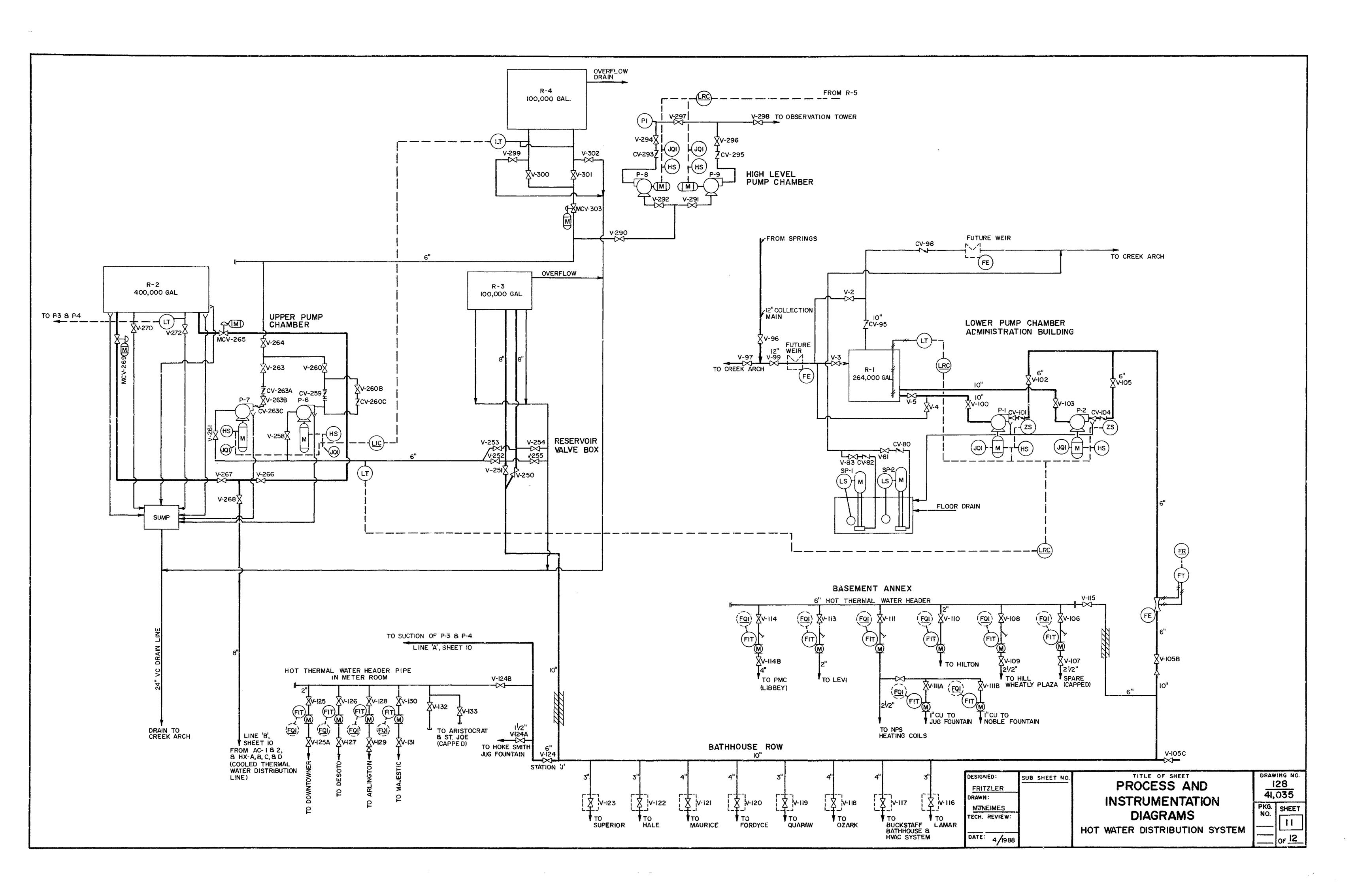


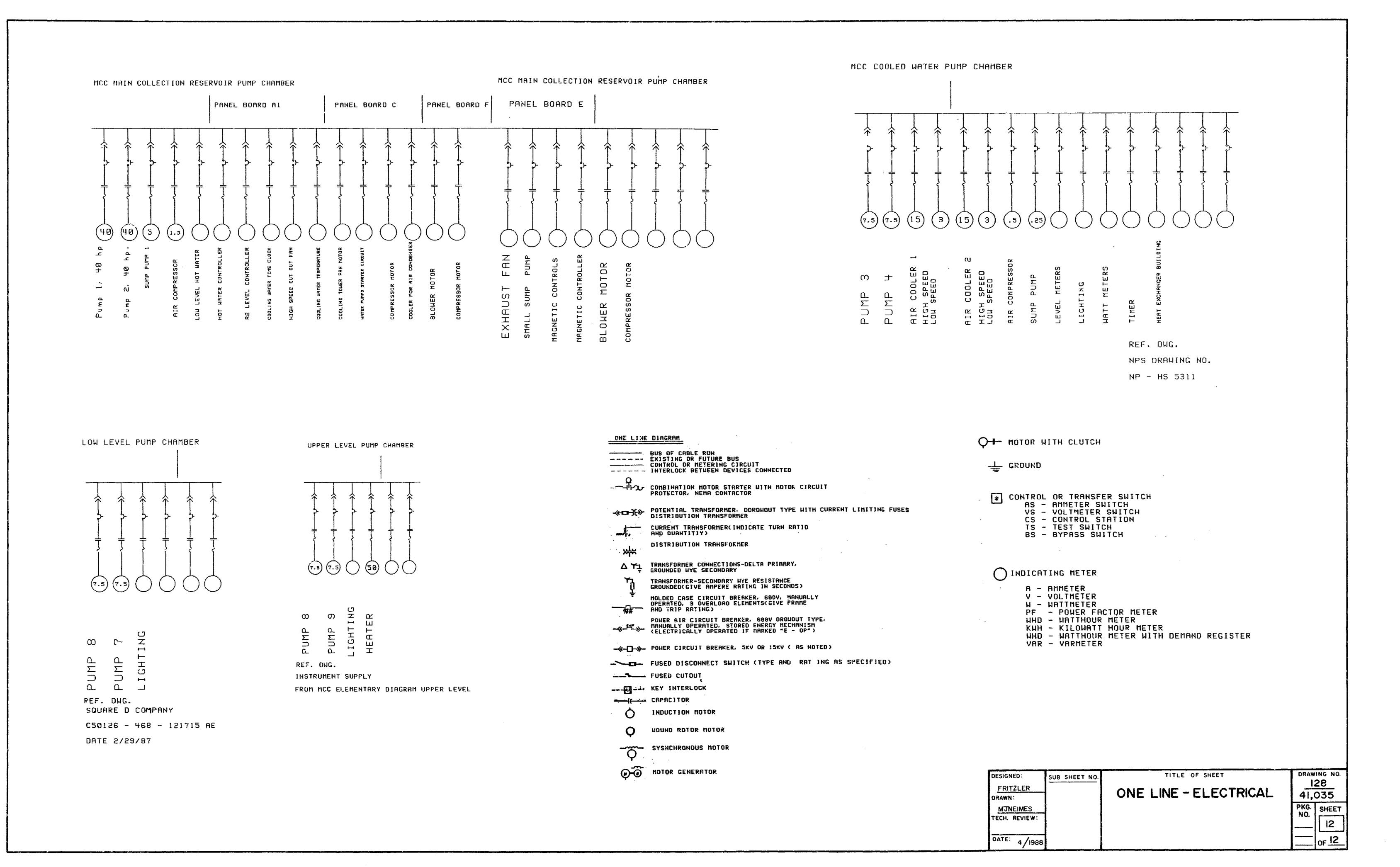












### Chlorinating Waterlines or Wells

Pipe Section or Well Information	Pipe or Tank Dia. (in)	Pipc Length or Tank Height (ft)	Area (in^2)	Gallons in Tub	Disinfectant Chlorine Sol % decimal	Desired Chlorine Residual (mg/L)	Gallons of Chlorine needed	Ounces of Chlorine Solution	Table Spoons
Tub Scenario A	2	800	3.14	130.551	10.00%	1.5	0.002	0.25	0.50
Tub Scenario B	2	900	3.14	146.9	10.00%	1.5	0.002	0.28	0.56
Tub Scenario C	6	700	28.27	1028.1	10.00%	1.5	0.015	1.97	3.94
Tub Scenario D	2	650	3.14	106.1	10.00%	1.5	0.002	0.20	0.41
Tub Scenario E	2	613	3.14	100.0	10.00%	1.5	0.001	0.19	0.38

**Notes:** Changing the numbers in red will modify the amount of chlorine needed in gallons and ounces. If a well is disinfected, type in the diameter and **Caution:** Highly chlorinated well water can damage grass and plants (under no circumstances should the water be discharged to the environment). Do not If you have questions, please contact your local public health consultant or 402-661-1718 or the NPS OPH water committee chair

## **Basics for Small Water Systems in Oregon: Storage Tank Chlorination**

Disinfection concentrations and times are based on AWWA Standard C652 for storage tanks cited in: OAR 333-061-0050 "Construction Standards" (10)(d) dated 19 Apr 2010, page 297

## Question: How much chlorine is added to a tank?

Volume to be disinfected =

### Options for Disinfection by Chlorination:

**Method A**. Filling the tank or reservoir with a **10** mg/L chlorine solution and allowing it to remain for **6**<sup>a</sup> or **24** hours (see Table).

**Method B**. Filling the reservoir with a **50** mg/L chlorine solution and allowing it to stand for **6** hours (see Table).

**Method C**. Spraying or brushing on a 200 mg/L chlorine solution and allowing it to remain for 3 hours (calculation not provided).

500|gallons

(input tank volume above in yellow shaded cell)

Chlorination Dose for Storage Tank of Volume Specified Above	Metho d A <sup>b</sup>	Metho d B <sup>c</sup>	Units
Chlorine Concentration	10	50	mg/L
Method Exposure Time	6ª or 24	6	hours
Chlorine Source Material			
Bleach 5% Solution	0.10	0.50	gallons <sup>d</sup>
Bleach 12.5% Solution	0.04	0.20	gallons
Dry Chlorine (65% by	0.06	0.32	pounds
wt)		٠.,	

(Chlorine Concentration values [yellow, or grey, cells] can be changed for custom calculations)

Note that to achieve Method concentration add more chlorine than specified here.

Important: The chlorine concentration should be measured to confirm Method's target concentration is reached. May need to dilute sample to test kit range.

Gallons	Cups
1.6	25.6

Weight of dry chlorine with a lower percentage than 65% can be calculated by dividing 65% by the product's % chlorine (e.g., 65%/47%) times result in table.

Six (6) hours for addition by continuous feed during tank filling.

<sup>&</sup>lt;sup>b</sup> For **Pipes**, Method A using **24 hours** is applicable (shorter time at higher dose may be allowed, see Guidance).

<sup>&</sup>lt;sup>e</sup> For **Wells**, Method B using **24 hours** is applicable (shorter time at higher dose may be allowed, see Guidance).

<sup>&</sup>lt;sup>d</sup> Gallons to Cups conversion: (gal x 16 = cups)

DATA FOR SLOPE CALCULATIONS

(Data from FACT SHEET 3.7 in UNIT 3 - Operations of Staff Training Reference)

	Gallons			
Reservoir	5%	Reservoir	Pounds 65%	
(Gal)	Bleach	(Gal)	Dry Chlorine	
1000		10000	3.5	
2000	1.0	20000	6.5	
3000	1.5	30000	10	
4000	2.0	40000	13	
5000	2.5	50000	16	
10000	5.0	100000	32	
20000	10	200000	64	
30000	15	300000	100	
40000	20	400000	130	
50000	25	500000	160	
Slope 5% S	0.0005 gal/gal	Slope Dry Wt =	0.000323071 lb/ga	l Conversion factors 2.204623 lb/kg 3.785412 L/gal
D. C	0.000005 //		0.540045.05 //	*

Reference C 0.000025 mg/L

2.51631E-05 mg/L

25 mg/L reference concentration (from tables in training manual)

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# Susceptibility of Legionella pneumophila to Chlorine in Tap Water

JOHN M. KUCHTA, 1\* STANLEY J. STATES, 1 ANN M. McNAMARA, 2 ROBERT M. WADOWSKY, 2
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Received 24 March 1983/Accepted 9 August 1983

A study was conducted to compare the susceptibility of legionellae and coliforms to disinfection by chlorine. The chlorine residuals used were similar to concentrations that might be found in the distribution systems of large public potable water supplies. The effects of various chlorine concentrations, temperatures, and pH levels were considered. A number of different Legionella strains, both environmental and clinical, were tested. The results indicate that legionellae are much more resistant to chlorine than are coliform bacteria. At 21°C, pH 7.6, and 0.1 mg of free chlorine residual per liter, a 99% kill of L. pneumophila was achieved within 40 min, compared with less than 1 min for Escherichia coli. The observed resistance is enhanced as conditions for disinfection become less optimal. The required contact time for the removal of L. pneumophilia was twice as long at 4°C than it was at 21°C. These data suggest that legionellae can survive low levels of chlorine for relatively long periods of time.

During the past several years, Legionella pneumophila has been isolated from shower heads, taps, mixing valves, and hot water tanks of hospitals, hotels, and homes (7, 8, 25-27, 29). In a number of cases, the occurrence of legionellae in the plumbing systems was associated with disease; in other cases, it was not.

These bacteria have been found primarily in hot water systems. In particular, large numbers of legionellae have been detected in the sediment that accumulates at the bottom of institutional hot water tanks. Typically, the temperature at the bottom of the tanks, especially in hospital tanks intentionally maintained at relatively low temperatures (e.g., 43 to 55°C), falls within the optimal range for the growth of these organisms (19, 29). It has been shown experimentally that L. pneumophila grows in unsterilized tap water within the range of the temperatures found at the bottom of institutional tanks (31). This observation led to the hypothesis that hot water tanks act as breeding sites for the contamination of plumbing systems (29),

A question arises concerning the initial introduction of L. pneumophila into the hot water tanks. It has been suggested that plumbing systems may be seeded by small numbers of legionellae from public water supply reservoirs (25, 29). However, attempts to actually isolate these bacteria from the mains of water supplies have not been successful (12). Such evidence would

be difficult to obtain since the legionellae may occur sporadically and in low numbers.

Legionellae in a public water supply would be exposed to chlorine concentrations that had been adjusted to control the presence of the indicator coliform bacteria. A number of studies have been conducted to determine the bactericidal effectiveness of a variety of disinfectants against L. pneumophila (11, 13, 15). Most of this work has been directed toward problem areas such as cooling towers and evaporative condensers of air conditioning systems. Skaliy et al. (24) found that free chlorine at concentrations of 3.3 and 6.6 mg/liter rapidly inactivated L. pneumophila. These relatively high chlorine concentrations were typical of those utilized in cooling towers. Wang et al. (30) examined the effectiveness of disinfectants at concentrations normally used in hospitals for the decontamination of tissues and surfaces. The investigation included the effect of relatively high concentrations of hypochlorite on both L. pneumophila and Escherichia coli. Their data suggested that legionellae might be somewhat more resistant to these high chlorine concentrations than are the coliform bacteria. They also raised the suspicion that the amount of residual chlorine recommended for standard water purification might not be sufficient for killing L. pneumophila when the bacteria are present in high numbers.

Our study pursued the question of Legionella

susceptibility to chlorine by examining the bactericidal effectiveness of chlorine at levels which might be found in public water distribution systems. A number of Legionella strains from several sources, both environmental and clinical, were examined for susceptibility to chlorine. A comparison was made with E. coli, Klebsiella pneumonioe, and Enterobacter aerogenes since these bacteria are members of the coliform group which is the commonly accepted microbial indicator for disinfection. Consideration was also given to measuring changes in susceptibility of L. pneumophilia to variations in chlorine concentration, temperature, and pH level that might be found in different water systems.

#### MATERIALS AND METHODS

Bacteria. A number of bacterial strains from various sources were used in this study (Table 1). Several environmental strains of L. pneumophila were isolated from samples collected from the Allegheny River in Pittsburgh, Pa. This river is the source of water for the municipal water supply system. To obtain these isolates, 20 liters of river water were concentrated to 10 ml by centrifugation on a Sorvall model RC-2B centrifuge that was equipped with a continuous-flow attachment. Due to the biological complexity of the river water, acid and heat enrichment procedures were used to exclude competing microorganisms. The concentrate was heated for 30 min at 50°C and then treated with 2 parts of a 0.2 M HCl-0.2 M KCl buffer solution (pH 2.2) (3, 31). The sample was then plated on a selective medium, differential glycine-vancomycinpolymyxin B agar (28). L. pneumophilia was identified on the basis of colonial morphology, the inability to grow on unsupplemented buffered charcoal-yeast extract agar, and the direct immunofluorescence test (6, 28). The environmental isolates used in this study had been subcultured three times on artificial medium before this experiment.

Environmental strains of L. pneumophila serogroups 1 and 6 and Legionella micdadei were also isolated from water and sediment which had been collected from the bottom of hospital hot water tauks by direct plating of the samples on differential glycinevancomycin-polymyxin B agar.

The Centers for Disease Control-derived strain of L. pneumophila (Philadelphia 1), the clinical isolate of L. micdadei (EK), and the American Type Culture Collection-derived strains of E. coli (ATCC 25922) and Staphylococcus aureus (ATCC 25923) were kindly supplied by A. W. Pasculle of the Presbyterian-University Hospital, Pittsburgh, Pa.

Experimental procedure. The bactericidal effectiveness of chlorine was examined by inoculating tap water with known quantities of legionellae and treating these aquatic test systems with chlorine. The action of chlorine was stopped by the addition of 0.1 ml of a 10% (wt/vol) solution of sodium thiosulfate to a 10-ml sample. Viable counts of legionellae were obtained by plating both 0.1 and 0.5 ml of a test system on buffered charcoal-yeast extract agar (21). Colony counts were performed after incubation of the plates at 37°C for 7 days. Appropriate chlorine, bacteria, and thiosulfate controls were included in each experiment. The inhibi-

TABLE 1. Bacteria tested for chlorine resistance

Bacteria	Origin (strain) <sup>a</sup>			
L. pneumophila				
Serogroup 1	Allegheny River			
Serogroup 1	CDC (Philadelphia 1)			
Serogroup 1	Hospital hot water tank			
Serogroup 6	Hospital hot water tank			
L. micdadei	Hospital hot water tank Clinical specimen (EK)			
E. coli	ATCC (ATCC 25922) Allegheny River			
S. aureus	ATCC (ATCC 25923)			
К. рпеитопіае	Allegheny River			
E. aerogenes	Clinical specimen			

<sup>a</sup> CDC, Centers for Disease Control; ATCC, American Type Culture Collection.

tion of *L. pneumophila* and the other bacteria by sodium thiosulfate was tested by the addition of the thiosulfate solution to test systems in the presence and absence of chlorine. The exposure of the bacteria in these test systems to the thiosulfate for up to 2 h did not affect their viability compared with control samples which did not contain sodium thiosulfate.

The basic experiments involved a comparison of an environmental isolate of L. pneumophila serogroup 1 from the Allegheny River with an American Type Culture Collection-derived strain of E. coli. Both bacteria were exposed to identical chlorine concentrations under the same environmental conditions. A free chlorine residual of 0.1 mg/liter was used as the "standard" chlorine concentration. The standard environmental conditions for the basic experiments consisted of pH 7.6 at 21°C. After the addition of chlorine, the sample was rapidly stirred for 30 s at 200 rpm with a Teffon-coated magnetic stirring bar and then slowly stirred (60 rpm) for the remainder of the experiment. The above chlorine concentration and environmental conditious were chosen to simulate conditions that might be found in the distribution of a large public water supply.

In addition to performing experiments under standard conditions, the comparison between L. pneumophila and E. coli was extended to other chlorine residuals and environmental conditious. In studying the effects of different chlorine concentrations, the same experiment was repeated under standard conditions of pH and temperature but at free chlorine residuals of 0.2 and 0.5 mg/liter. Temperature variations, 4 and 32°C, were tested with a standard chlorine residual of 0.1 mg/liter and pH 7.6. Similarly, the effect of pH 6.0, 7.0, and 7.6 was determined under standard conditions of 0.1 mg of total chlorine per liter at 21°C.

Test system and chlorine determination. The aquatic test system consisted of sterile 1-liter Erlenmeyer flasks containing 600 ml of tap water. The water was obtained from a tap in the municipal water distribution system. Tap water was used because the purpose of

TABLE 2. Comparison of chlorine demand of boiled tap water with demand of deionized, distilled water"

Boiled t	ap water	Deionized distilled water			
Total chlorine <sup>b</sup>	Free chlorine	Total chlorine <sup>b</sup>	Free chlorine*		
0.05	0.05	0.05			
0.10	0.10	0.10	0.10		
0.25	0.25	0.25	0.20		
0.35	0.35	0.35	0.30		
0.50	0.50	0.50	0.45		
0.60	0.60	0.60	0.55		

<sup>&</sup>quot; Essentially chlorine demand-free.

this study was to investigate the survival of legionellae in a municipal water system. Dechlorination of the tap water was accomplished by boiling it before use. The water was then buffered with a phosphate buffer. KH<sub>2</sub>PO<sub>4</sub> (0.5 M) and K<sub>2</sub>HPO<sub>4</sub> (0.5 M) were mixed and diluted to a final pH of 6.0, 7.0, or 7.6 (standard) and a final concentration of 10 mM. A 100-mg/liter stock chlorine solution was prepared by dissolving calcium hypochlorite in sterile, distilled, deionized water. A Milli-Q system (Millipore Corp., Bedford, Mass.) was used to deionize the water. Chlorination of the test system was achieved by adding precalculated volumes of this stock to the buffered tap water. Free and total chlorine concentrations were measured at the beginning and end of each experiment by the amperometric method (2) to ensure that no unexpected chlorine demand had appeared in the test system water. Free and total chlorine measurements were also performed at the end of each experiment to determine the degree of chlorine depletion. Chlorine loss never exceeded 10% during any of the experiments.

Initially, the chlorine demand of boiled tap water was compared with that of essentially demand-free, distilled, deionized water. Various amounts of hypochlorite were added to portions of each type of water, and the total and free chlorine concentrations were measured. Boiled tap water was found to be essentially demand-free (Table 2).

To prepare inocula for the test system, Legionella and non-Legionella bacteria were cultured on buffered charcoal-yeast extract agar at 37°C. Legionellae were incubated for 76 h, and the non-Legionella bacteria were incubated for 24 h. The bacteria were scraped from the plate, washed twice with 30 ml of distilled water, and then suspended in 5 ml of distilled water. This inoculum was added to the aquatic test system to achieve a bacterial density of ca. 3,000 CFU/ml. This density of L. pneumophila is within the range reported in contaminated hot water tanks (29).

#### RESULTS

The effect of chlorine on L. pneumophila at various concentrations of chlorine, contact times, pH levels, and temperatures is summarized in Fig. 1 to 3. The results are expressed in terms of percent survival at progressively longer

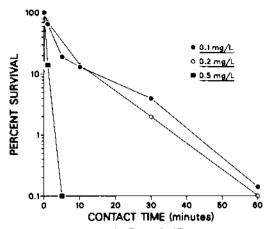


FIG. 1. Bactericidal effect of different concentrations of chlorine on *L. pneumophila* in tap water at pH 7.6 and 21°C.

times of exposure under each of the sets of conditions. E. coli was not detected in the samples within min 1 of treatment with chlorine. Identical results were obtained with S. aureus as well as with a strain of K. pneumoniae that had been isolated from a sample of river water. A river water sample containing a natural population of coliforms was also tested. These coliform bacteria were likewise killed within min 1 of treatment. Because the earliest sampling period after the addition of chlorine was 1 min, bacteria other than L. pneumophilia are not represented in the figures.

Under the standard conditions of pH 7.6, a temperature of 21°C, and a free chlorine residual of 0.1 mg/liter, a 99% kill of the legionellae did not occur until a contact time of between 30 and

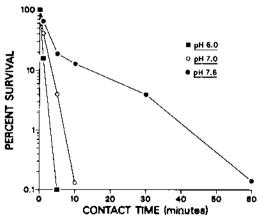


FIG. 2. Effect of pH on bactericidal activity of 0.1 mg of chlorine per liter on *L. pneumophila* in tap water at 21°C.

b Milligrams per liter as determined by the amperometric method.

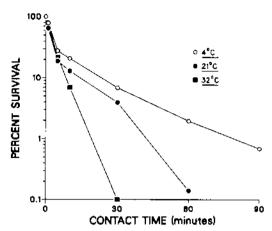


FIG. 3. Effect of temperature on bactericidal activity of 0.1 mg of chlorine per liter on L, pneumophila in tap water at pH 7.6.

60 min had elapsed. In addition to the standard bacterial concentration of 3,000 CFU/ml, a 10-fold increase and a 10-fold decrease in the number of bacteria were also tested. The kill rate was not affected by these changes. This latter finding is consistent with the observations of Butterfield et al. on other bacterial species (5). Increasing the total chlorine concentration (Fig. 1) predictably enhanced the bactericidal effect, resulting in a 99% kill within the first 5 min at a concentration of 0.5 mg/liter.

Decreasing the pH exerted an effect similar to that of increasing the chlorine concentration (Fig. 2). A contact time of ca. 40 min was required to eliminate 99% of the Legionella population at pH 7.6. In contrast, less than 10 min was required at pH 7.0 and less than 5 min was required at pH 6.0.

Temperature also exerted a dramatic influence on the chlorine disinfection of *L. pneumo-philia* (Fig. 3). The time required for a 99% kill at 0.1 mg of chlorine per liter decreased from 40

min at room temperature to less than 30 min at the higher temperature of 32°C. At 4°C, between 60 and 90 min was required for a 99% kill.

In addition to examining the bactericidal effectiveness of chlorine on a strain of L. pneumophila that had been isolated from a river water sample, a number of other environmental and clinical isolates of legionellae were tested (Table 3). All of these isolates were studied under the standard conditions of 0.1 mg chlorine per ml. pH 7.6, and a temperature of 21°C. The contact times necessary to eliminate 99% of these populations were as long or longer than those required for the river isolate of L. pneumophila that had been used as the primary test organism. Long contact times were required for the clinical and environmental isolates of L. pneumophila. regardless of serogroup or origin, as well as for L. micdadei. These results indicate that legionellae can survive for relatively long periods of time at low concentrations of chlorine under a variety of temperatures and levels of pH.

#### DISCUSSION

Hypochlorites have been employed for the disinfection of water for potable use since 1894 (22). The basis for the establishment of effective levels of chlorine is the susceptibility of E. coli and other coliform bacteria. These bacteria have served as indicators of the bacteriological quality of water supplies since the publication of the first edition of Standard Methods of Water Analysis in 1905 (1). Some waterborne pathogens have been shown to be more resistant than the coliform bacteria to chlorine (4, 10, 16, 18, 20, 23). These reports and the incidence of diseases, such as hepatitis, giardiasis, and gastroenteritis, have periodically prompted reconsideration of the coliform bacteria as microbial indicators of water sanitary quality (17).

Levels of L. pneumophila ranging from  $9 \times 10^3$  to  $3.3 \times 10^7$  organisms per ml have been detected by direct immunofluorescence in sur-

TABLE 3. Survival of environmental and clinical Legionella isolates under standard conditionsa

	Source	% Legionellae surviving after following min of chlorine treatment:							
Bacteria		1	5	10	30	60	90	120	150
L. pneumophila									
Serogroup 1	Allegheny River	65*	19	13	4	<1	<1	<1	<1
Seгоргоир 1	Hot water tank	56	19	20	17	6	<1	<1	<1
Serogroup 1	CDC <sup>c</sup> (Philadelphia 1)	85	20	11	10	5	3	<1	<1
Serogroup 6	Hot water tank	47	15	6	6	4	4	2	<1
L. micdadei	Hot water tank	31	9	6	4	3	2	<1	<1
	Clinical specimen	55	20	ğ	6	3	2	<1	<1

<sup>&</sup>lt;sup>a</sup> Free residual chlorine, 0.1 mg/liter; temperature, 21°C; pH, 7.6.

Oompared with the concentration of legionellae before the addition of chlorine.

<sup>&</sup>lt;sup>c</sup> CDC, Centers for Disease Control.

1138 KUCHTA ET AL. APPL, ENVIRON, MICROBIOL.

face waters (14). The recent detection of L. pneumophila in the plumbing systems of institutions has raised the suspicion that municipal drinking water systems serve as pathways for this contamination (9, 25). Our study directly involved a measurement of the effectiveness of chloring in killing L. pneumophila and indirectly involved an assessment of the coliform bacteria as indicators of this process. Our results with E. coli are consistent with those of earlier workers: a 99% kill of these bacteria is achieved within a very short period of time. In contrast to these results, L. pneumophila may survive for periods of longer than 1 h under the same conditions. The bactericidal action of the chlorine is enhanced at higher temperatures and at lower pH levels. These findings are consistent with studies which were done with other bacteria (4, 5). Thus, the survival of L. pneumophilia in chlorinated waters may vary with the season and geographic area.

As stated previously, the criterion for a sanitary quality of water supplies is elimination of coliform bacteria. Our observation that legionellae are more resistant than coliform bacteria suggests the possibility that small numbers of legionellae may occasionally survive in waters that have been judged to be microbiologically acceptable. This difference in susceptibility to chlorine tends to increase as conditions become less optimal, e.g., higher pH, lower temperature, and lower chlorine concentration. These findings support the hypothesis that small numbers of legionellae may pass through public water supplies and subsequently contaminate internal plumbing systems. It should be noted that, to date, L. pneumophilia has not been isolated from water in reservoirs or in the water supply mains. Currently available methodology does not appear to be sufficiently sensitive to detect very low numbers of legionellae. Even if these bacteria are present in potable water, the extent of the hazard posed is not entirely clear. Plumbing systems and potable water have been shown to contain legionellae in some institutions in which outbreaks of Legionnaires disease were occurring (12, 25, 27). However, these bacteria have also been found in natural waters in the absence of any association with disease and in the plumbing systems of institutions in which no or only infrequent sporadic disease had been detected (14, 26, 29).

#### ACKNOWLEDGMENTS

This work was supported in part by Public Health Service grant AI 17047 from the National Institute of Allergy and Infectious Diseases and sponsored by the Environmental Epidemiology Center of the Graduate School of Public Health of the University of Pittsburgh under the support of cooperative agreement CR80681-01-2 with the U.S. Environmental Protection Agency.

We thank Lorraine Mezmar, Ronald Speranza, and Randy Wolford for their technical assistance, Monto Ho for his encouragement, advice, and critical review of this manuscript, and Richard Cosentino for his encouragement.

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From: Ritter, Troy (CDC/DDNID/NCEH/DEHSP)

Sent: 4 Oct 2019 15:38:06 +0000

To: Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP);Smith, Jessica

(CDC/DDID/NCIRD/DBD)

Cc:Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR)Subject:Re: 10-4-19 Legionella Sampling Plan

(b)(3)
(D)(3)
(D)(3)
(D)(3)

## Get Outlook for iOS

From: Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP) <izk0@cdc.gov>

Sent: Friday, October 4, 2019 11:23:31 AM

To: Smith, Jessica (CDC/DDID/NCIRD/DBD) < lyd7@cdc.gov>; Ritter, Troy

(CDC/DDNID/NCEH/DEHSP) <tir4@edc.gov>

Cc: Lcc, Sooji (CDC/DDID/NCIRD/DBD) (CTR) <npf3@edc.gov>

Subject: RE: 10-4-19 Legionella Sampling Plan

Jess and Troy,

(p)(3)

I need to work on something for NC right now and will come back to this shortly.

Jasen

From: Smith, Jessica (CDC/DDID/NCIRD/DBD) < lyd7@cdc.gov>

Sent: Friday, October 4, 2019 10:33 AM

To: Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) <npf3@cdc.gov>; Kunz, Jasen M.

(CDC/DDNID/NCEH/DEHSP) <izk0@cdc.gov> **Subject:** FW: 10-4-19 Legionella Sampling Plan

FYI... Jasen, I don't know if Troy already shared this with you, just passing along in case you have time to look and thoughts to share.

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Sent: Friday, October 4, 2019 7:48 AM

To: Mark Scott < Mark Scott@nps.gov>; laura a miller@nps.gov

Cc: Lucas, Claressa (CDC/DDID/NCIRD/DBD) <chl9@cdc.gov>; Smith, Jessica (CDC/DDID/NCIRD/DBD)

<lyd7@cdc.gov>; Ritter, Troy (CDC/DDNID/NCEH/DEHSP) <tir4@cdc.gov>; Maria Said

<maria said@nps.gov>; Robert Kammel <bob kammel@nps.gov>

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Office Fax: 1-402-661-1719
Cell Phone: 1-202-641-0055
Email: Kurt Kesteloot@nps.gov

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"The NPS One Health Network: promoting and protecting the health of all species and the parks that we share." GREEN DOT

On Thu, Oct 3, 2019 at 3:50 PM Maria Said <maria said@nps.gov> wrote:

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Thank you again!

Maria Said, MD, MHS
CDR, US Public Health Service
Epidemiology Branch Chief
Office of Public Health

```
(C) 202-538-5682
> On Oct 3, 2019, at 3:52 PM, Lucas, Claressa (CDC/DDID/NCIRD/DBD) <chl9@cdc.gov> wrote:
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> Sent: Thursday, October 3, 2019 3:49 PM
> To: James, Allison (CDC arkansas.gov) <allison.james@arkansas.gov>;
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**Sent:** 4 Oct 2019 15:04:36 +0000

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(CDC/DDNID/NCEH/DEHSP)

Cc: Lucas, Claressa (CDC/DDID/NCIRD/DBD);Lee, Sooji (CDC/DDID/NCIRD/DBD)

(CTR)

**Subject:** RE: 10-4-19 Legionella Sampling Plan

Attachments: HOSP Thermal Water Sampling Plan 10-4-19.pdf

Hi Troy — I just re-read this email and realized Kurt says they're sampling today. Did you have any thoughts for him? Looping in Jasen and Sooji bc they weren't included below but were on the previous calls.

Thanks (and welcome back)!

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Sent: Friday, October 4, 2019 7:48 AM

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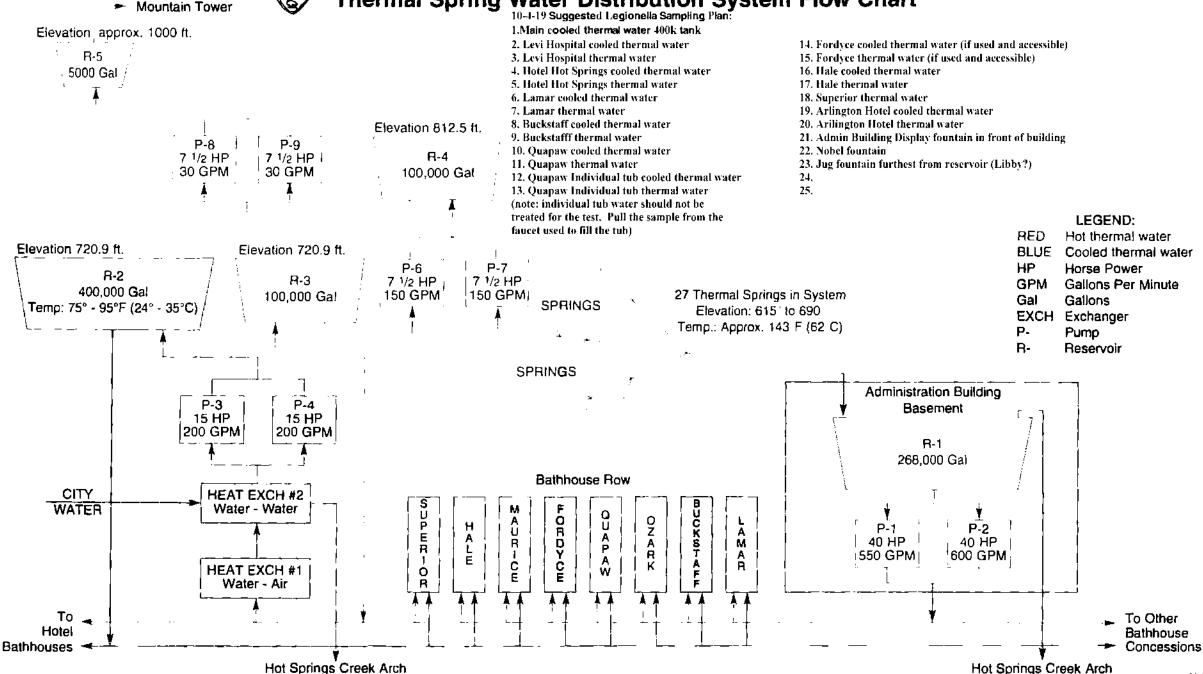
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# **Hot Springs National Park**

Thermal Spring Water Distribution System Flow Chart 10-4-19 Suggested Legionella Sampling Plan:



03/16/01

# THE THERMAL WATER DISTRIBUTION SYSTEM OF HOT SPRINGS NATIONAL PARK

Systems for distributing thermal spring water at Hot Springs National Park have been around a long time, evolving along with the bathhouses. In the first half of the nineteenth century most "bathhouses" were rough wooden shacks or even tents, built over natural tufa cavities (sometimes enlarged) that held spring water. More elaborate bathhouses began springing up in the 1850s. Some boasted individual bath rooms with wooden tubs, requiring a network of wooden troughs to direct thermal water into flumes on the roofs. Inside the bathhouse, bathers pulled a rope, opening a mechanism that released water from the flume into the tub.

When a disastrous 1878 fire destroyed most of the bathhouses along Hot Springs Creek, the government seized the opportunity to improve both bathhouse construction and thermal water distribution. The Avenue Hotel Bathhouse, built in 1880, was allowed to set up a pump on the reservation. The first reservoir was built in 1880 as well. On June 8, 1891, a pumping station and reservoir were completed on the present site of the administration building in order to enhance thermal water distribution. Unfortunately a law passed that same year required water to be transported by gravity flow, and the pumping equipment was never used.

The government built more reservoirs in the 1890s to impound spring water and increase the flow. In 1897 all but four springs were encased in brick archways and their water piped to bathhouses and reservoirs; the remaining springs were enclosed by 1901. On November 10, 1903, Congress authorized funds for building surface and deep reservoirs on Hot Springs Mountain, adding to the collection of older reservoirs already in use. In 1924 National Park Service engineers drew a plan showing the existing complex of springs, reservoirs, and plumbing in preparation for the first central collection, impounding and distribution system for the thermal water, completed around 1931. Meters installed on bathhouse lines were not fully functional until 1933. The present system allows better control and monitoring of the water flow.

The springs are located on about 2.8 acres along Bathhouse Row and the Grand Promenade. The bulk of the approximately 850,000 gallons of thermal water flowing each day from Hot Springs Mountain is collected from 27 of the 47 presently active springs. Each spring in the collection system has been sealed and covered with a green box about four feet square with a metal cover, chain, and padlock. The green boxes on the lower west slope of Hot Springs Mountain and the heat exchange units at the north end of Bathhouse Row are the most visible components of the thermal water distribution system and represent its source portion. Not all of the boxes indicate a spring; some hold only valves and collection plumbing. The boxes higher up on the mountain allow access to the underground reservoirs and plumbing.

The valve and spring collection boxes are connected with the plumbing system delivering thermal water to reservoir R-1 under the east end and parking lot of the administration building at the south end of Bathhouse Row. This reservoir holds about 268,000 gallons and includes an overflow pipe connected to the Hot Springs Creek arch.

In the administration building basement, two pumps (P-1 and P-2) move the thermal water through a twelve-inch cast-iron pipe in the Hot Springs Creek arch to the bathhouses, the heat exchangers, and a 100,000-gallon underground storage reservoir (R-3) about 120 feet above Bathhouse Row. The elevation of this reservoir ensures an ample supply of water at about 52 pounds per square inch (psi) when pumps P-1 and P-2 are idle. When demand increases, pumps P-6 and P-7 transfer thermal water from reservoir R-3 to another 100,000-gallon reservoir (R4) about 220 feet above Bathhouse Row. The plumbing for a number of bathhouses no longer in operation is still in the distribution system as well.

Surprisingly enough the water within the distribution system stays well above 100°F (37.8°C); the water has been flowing into it for decades, and the terrain around the reservoirs and plumbing is heat saturated. As a result, the water arriving at the bathhouses is far too hot for direct bathing. By the 1890s most of the bathhouses had individual cooling towers to cool down the thermal water. These and similar towers were used until the central thermal water cooling system was completed on February 8, 1950. The system is comprised of two heat exchangers (#1 and #2), two pumps (P-3 and P-4), and a 400,000-gallon reservoir (R-2). The first exchanger is a thermal water-to-air cooling unit that works like a car radiator; it contains a primary and secondary section,

each with a large fan to force air through its radiator cores. When both sections of heat exchanger #1 are unable to cool the water sufficiently, #2 comes on line. This exchanger runs cold city water over the tubes carrying the thermal water but never mixes with it. The city water, which is heated in the process, is discharged into the Hot Springs Creek arch, and pumps P-3 and P-4 move the cooled thermal water (still 100% spring water) into reservoir R-2. This reservoir is next to and at the same elevation as reservoir R-3, so an ample supply of cooled water is also available at about 52 psi. The system for delivering cooled thermal water is similar to the hot spring water distribution system.

By mixing hot and cooled spring water, attendants can administer baths at the temperature (98° to 100°F, 36.7° to 37.8°C) required by regulations. The system was designed to produce thermal water cooled to temperatures ranging from 75° to 90°F (24° to 32.2°C). During most of the year when outdoor temperatures are below 80°F (26.7°C), the system works well, but during the hot summer months the desired temperature range is difficult to achieve. To compensate, heat exchanger #2 has been redesigned, and installation of new equipment began in the first quarter of fiscal year 2001.

The entire system is monitored automatically from the basement of the park administration building. The quantity and temperature of the water coming in from the springs are recorded continuously for 24 hours a day, as are water levels in each reservoir. Meters at each bathhouse transmit readings on the amount of water used to the monitoring center. Analyses of these data alert maintenance workers to the possibility of major leaks or equipment failure.

One source of equipment failure is the buildup of calcium carbonate, or limestone, in the system. Similar to the water found in caves, the spring water contains dissolved limestone that can be deposited in pipes, valves, and other system components, particularly in those handling cooled spring water. Because calcium carbonate is less soluble in cold water, it settles out in greater quantities in cooled water systems. Also called "tufa," the deposit is left wherever the thermal springs flow. In fact, the porous gray tufa formations behind Bathhouse Row are really geological "maps" showing where the springs once flowed freely down the mountainside.

From: Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP)

**Sent:** 4 Oct 2019 17:42:33 +0000

To: Kesteloot, Kurt;maria\_said@nps.gov;bob\_kammel@nps.org
Cc: Lucas, Claressa (CDC/DDID/NCIRD/DBD);Smith, Jessica
(CDC/DDID/NCIRD/DBD);Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR);Ritter, Troy

(CDC/DDNID/NCEH/DEHSP)

Subject: RE: 10-4-19 Legionella Sampling Plan

Kurt,

I am writing back to you on behalf the team.

I think	(p)( <del>\$</del> )
	(p)( <del>3</del> )

Hope this helps some and we are always available to chat.

Jasen

From: Kesteloot, Kurt < kurt\_kesteloot@nps.gov>

Sent: Friday, October 4, 2019 7:48 AM

To: Mark Scott < Mark\_Scott@nps.gov>; laura\_a\_miller@nps.gov

Cc: Lucas, Claressa (CDC/DDID/NCIRD/DBD) <chl9@cdc.gov>; Smith, Jessica (CDC/DDID/NCIRD/DBD)

<lyd7@cdc.gov>; Ritter, Troy (CDC/DDNID/NCEH/DEHSP) <tir4@cdc.gov>; Maria Said

<maria\_said@nps.gov>; Robert Kammel <bob\_kammel@nps.gov>

Subject: 10-4-19 Legionella Sampling Plan

Good Morning Everyone,

Mark and I talked yesterday about the attached sampling plan for today. I have attached a drawing that lists the samples and shows a rough overview of the system. If anyone has any additional thoughts, comments, or questions, please let me know.

Currently, I have 23 locations listed. Thus, we have two more available if needed. I have not listed the thermal water system main tank under administration because it has been tested at least three times (once with PCR/new lab) and has been negative all times. I have also excluded the showers in the Quapaw because they were plumbed improperly and will not be used that way ever again. All of the

tests focus on the NPS water system, we could talk to the city about testing their fountains and/or test the city water in the Quapaw (showers on main level and one in the basement). Any thoughts?

Thank You and Very Respectfully,

Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS
Supervisory Public Health Consultant, Interior Regions 3-5
National Park Service, Office of Public Health (OPH),
601 Riverfront Drive
Omaha, NE 68102
Office Phone: 1-402-661-1718

Office Fax: 1-402-661-1719 Cell Phone: 1-202-641-0055 Email: Kurt Kesteloot@nps.gov

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On Thu, Oct 3, 2019 at 3:50 PM Maria Said < maria said@nps.gov> wrote:

Thanks Claressa. And to take it one step further, positive PCR results will be much less useful, right? My understanding is that they are not accurate for predicting culture results and we would just have to wait for cultures to be finalized, correct?

Thank you again!

Maria Said, MD, MHS CDR, US Public Health Service Epidemiology Branch Chief Office of Public Health National Park Service (O) 202-513-7151 (C) 202-538-5682

> On Oct 3, 2019, at 3:52 PM, Lucas, Claressa (CDC/DDID/NCIRD/DBD) <chl9@cdc.gov> wrote:

-- 11: N

> Hi Maria,

> Yes, negative PCR results are >99% predictive of a negative culture result.

>

```
> Best wishes,
> Claressa
> ----Original Message-----
> From: Maria Said <maria_said@nps.gov>
> Sent: Thursday, October 3, 2019 3:49 PM
> To: James, Allison (CDC arkansas.gov) <a href="mailto:allison.james@arkansas.gov">allison.james@arkansas.gov</a>;
jennifer.dillaha@arkansas.gov; Kurt Kesteloot <kurt kesteloot@nps.gov>; laura a miller@nps.gov;
Lucas, Claressa (CDC/DDID/NCIRD/DBD) <a href="mailto:chi9@cdc.gov">chi9@cdc.gov</a>; Smith, Jessica (CDC/DDID/NCIRD/DBD)
<<u>lyd7@cdc.gov</u>>; Ritter, Troy (CDC/DDNID/NCEH/DEHSP) <<u>tir4@cdc.gov</u>>
> Subject: Re: PCR?
> It looks from the lab that PCR results would be available the next day after testing.
> Claressa, am I correct that negative PCR results are highly predictive that culture results will be
negative as well?
> It seems to me that if we are able to get this information quickly, that will be very helpful to us in
determining our modes of notification.
> Thank you! Maria
> Maria Said, MD, MHS
> CDR, US Public Health Service
> Epidemiology Branch Chief
> Office of Public Health
> National Park Service
> (O) 202-513-7151
> (C) 202-538-5682
>
>> On Oct 3, 2019, at 3:40 PM, Maria Said <maria_said@nps.gov> wrote:
>>
>> Does anyone know how quickly PCR results could be turned around? My
>> understanding of PCR is that negative PCR has a high predictive value and could be very useful in
this situation if we can get results quickly. Thanks. Maria
```

>>

From: Ritter, Troy (CDC/DDNID/NCEH/DEHSP)

**Sent:** 25 Nov 2019 15:24:06 +0000

To:Smith, Jessica (CDC/DDID/NCIRD/DBD); Kesteloot, KurtCc:Lucas, Claressa (CDC/DDID/NCIRD/DBD); Kunz, Jasen M.

(CDC/DDNID/NCEH/DEHSP);Said, Maria;Mark Scott;Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR);Tracy Simmons;Tricia Horn;Robert Bryson;Peter Budde;Sara Newman;Herbert

Frost; Patricia Trap; Picavet, Alexandra; Miller, Laura

Subject: Re: Call to Discuss The Latest Legionella Test Results from Arkansas?

Tomorrow between 10-11 am would work best for me.

Troy

## Get Outlook for iOS

From: Smith, Jessica (CDC/DDID/NCIRD/DBD) < lyd7@cdc.gov>

**Sent:** Monday, November 25, 2019 9:44:15 AM **To:** Kesteloot, Kurt <kurt\_kesteloot@nps.gov>

Ce: Lucas, Claressa (CDC/DDID/NCIRD/DBD) <chl9@edc.gov>; Kunz, Jasen M.

(CDC/DDNID/NCEH/DEHSP) <izk0@cdc.gov>; Said, Maria <maria\_said@nps.gov>; Mark Scott <mark scott@nps.gov>; Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) <npf3@cdc.gov>;

Ritter, Troy (CDC/DDNID/NCEII/DEHSP) <tir4@cdc.gov>; Tracy Simmons

<tracy\_simmons@nps.gov>; Tricia Horn <tricia\_horn@nps.gov>; Robert Bryson

<robert\_bryson@nps.gov>; Peter Budde <peter\_budde@nps.gov>; Sara Newman

<sara newman@nps.gov>; Herbert Frost <bert frost@nps.gov>; Patricia Trap

<Patricia\_Trap@nps.gov>; Picavet, Alexandra <alexandra\_picavet@nps.gov>; Miller, Laura <laura a miller@nps.gov>

Subject: RE: Call to Discuss The Latest Legionella Test Results from Arkansas?

Good morning Kurt,

From the CDC side, Claressa and I are available this afternoon between 2:00-5:00 pm and tomorrow from either 10:00-11:00 am or between 1:00-5:00 pm (all times ET). I know Jasen is out of office this week but I'm not sure about Troy's availability.

Thanks, Jessica

\_

Jessica C. Smith, MPH

Epidemiologist | Centers for Disease Control and Prevention NCIRD/DBD/Respiratory Diseases Branch 404.718.5205 | lyd7@cdc.gov

From: Picavet, Alexandra <alexandra picavet@nps.gov>

**Sent:** Monday, November 25, 2019 9:35 AM **To:** Miller, Laura <a href="mailto:laura\_a\_miller@nps.gov">laura\_a\_miller@nps.gov</a>

**Cc:** Kesteloot, Kurt <kurt\_kesteloot@nps.gov>; Lucas, Claressa (CDC/DDID/NCIRD/DBD) <chl9@cdc.gov>; Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP) <izk0@cdc.gov>; Smith, Jessica

(CDC/DDID/NCIRD/DBD) < lyd7@cdc.gov>; Said, Maria < maria\_said@nps.gov>; Mark Scott < mark\_scott@nps.gov>; Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR) < npf3@cdc.gov>; Ritter, Troy (CDC/DDNID/NCEH/DEHSP) < tir4@cdc.gov>; Tracy Simmons < tracy\_simmons@nps.gov>; Tricia Horn < tricia\_horn@nps.gov>; Robert Bryson < robert\_bryson@nps.gov>; Peter Budde < peter\_budde@nps.gov>; Sara Newman < sara\_newman@nps.gov>; Herbert Frost < bert\_frost@nps.gov>; Patricia Trap < Patricia\_Trap@nps.gov>
Subject: Re: Call to Discuss The Latest Legionella Test Results from Arkansas?

I am available.

Alexandra Picavet
Chief of Communications, Legislative Affairs and Partnerships
DOI Regions 3, 4, 5
National Park Service
402-661-1840 (office)
alexandra\_picavet@nps.gov
www.nps.gov/

On Mon, Nov 25, 2019 at 8:17 AM Miller, Laura < a miller@nps.gov > wrote:

Hey Kurt,

Mark is out this week, but I'm here and can be available today or tomorrow. I do have two calls scheduled for today - at 10:15 am CST and at 1:00 pm CST - otherwise I'm free. Tomorrow is completely free.

Thanks! Laura

On Mon, Nov 25, 2019 at 8:12 AM Kesteloot, Kurt < kurt kesteloot@nps.gov > wrote:

Good Morning Everyone,

Is there a good time to have a call today or tomorrow regarding the latest test results from Hot Springs, AR? Ultimately, there was one positive sample. That sample came from a long waterline that was flushed but has had little to no use over the last several years. So, I believe the flushing has shown to be one effective step in lowering the risk of Legionella in the water. It would be great to talk to other experts from CDC to hear your perspective.

It would also be great to talk about a press release on the latest round of test results.

There are several other questions to ask and discuss.

On the call I would like to discuss the following:

- 1. The latest test results and procedure for sampling prior to sampling
- 2. A list of questions I have
- 3. Press release information
- 4. Any additional questions or public health concerns
- 5. Long-Term plans for drinking water and recreational water
- 6. Planning for a call with the State Health Department

I look forward to connecting with everyone soon and appreciate any collaboration on this important National Park resource and public health matter.

Thank You and Very Respectfully,

Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS
Supervisory Public Health Consultant, Interior Regions 3, 4, and 5, Great Lakes, Mississippi Basin, and Missouri Basin
National Park Service, Office of Public Health (OPH),
601 Riverfront Drive
Omaha, NE 68102
Office Phone: 1-402-661-1718

Office Fax: 1-402-661-1719
Cell Phone: 1-202-641-0055
Email: Kurt Kesteloot@nps.gov

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Laura A. Miller
Superintendent
Hot Springs National Park
101 Reserve Street
Hot Springs, AR 71901
501.623.2824
870.302.9250 (cell)
501.624.1037 (fax)
www.nps.gov/hosp

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From: Kesteloot, Kurt

**Sent:** 12 Jul 2019 08:27:53 -0500

To: Ritter, Troy (CDC/DDNID/NCEH/DEHSP);Terry.Paul@arkansas.gov

**Subject:** Re: DRAFT Sampling Plan for Tomorrow's Discussion **Attachments:** Legionella DRAFT Sampling Plan 7-11-19.docx

Good Morning,

Here is the latest draft.

Thank You and Very Respectfully,

Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS
Supervisory Public Health Consultant, Midwest Region
National Park Service, Office of Public Health (OPH),
601 Riverfront Drive
Omaha, NE 68102

Office Phone: 1-402-661-1718 Office Fax: 1-402-661-1719 Cell Phone: 1-202-641-0055 Email: Kurt Kesteloot@nps.gov

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On Thu, Jul 11, 2019 at 11:21 PM Kesteloot, Kurt < <a href="mailto:kurt\_kesteloot@nps.gov">kurt < kurt\_kesteloot@nps.gov</a>> wrote: Good Evening Troy and Terry,

I will try to call you both tomorrow morning sometime. Hopefully around 0700 CDT. I have attached a few documents for your review. These are just a draft and need more review as it is late and I wanted to have something to share with you for our discussion. I have attached old system plans with comments, a MS Word document, and photos.

Talk to you tomorrow.

Thank You and Very Respectfully,

Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS Supervisory Public Health Consultant, Midwest Region National Park Service, Office of Public Health (OPH), 601 Riverfront Drive Omaha, NE 68102

Office Phone: 1-402-661-1718 Office Fax: 1-402-661-1719 Cell Phone: 1-202-641-0055 Email: <u>Kurt\_Kesteloot@nps.gov</u>



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#### Hot Thermal System:

Bulk sample and swab admin tank.

### Cold Thermal System:

- Sheets two and three of 12 show the location of the cooling tower. Bulk samples are recommended immediately after the cooling towers (equalization). One sample from each if possible and then swab as possible.
- Bulk samples are recommended from the cold thermal line in the Quapaw.
- Any other cooling tower recommendations. Closest a visitor gets to a tower is about 20 ft.

## Decretive fountains:

- Sheet 8 of 12 shows the Display fountain and Nobel fountain. It is recommended that both are bulk tested and swabbed if they are in operation.
- Per sheet 2 of 12 there is another fountain in the Arlington lawn that it is recommended to be swabbed and bulk sampled.
- Per sheet 4 of 12, there are two fountains between the Maurice and Fordyce and it is recommended they are both swabbed and bulk tested.
- Are there other decorative fountains that should be tested that I have not listed?

### Quapaw Water Processes/Facility:

- Aroma therapy: What is it and is there anything we can test? Swab and bulk sample if possible
- Sheet 4 of 12 shows a 37'8" reservoir under the rooms in the basement of the Quapaw. A swab or two are recommended along with a bulk sample. Test the room(s) closest to the two cases if possible with a swab from opening the hatch.
- There are multiple single use spa tubs in the basement. A mixed bulk sample and swab from multiple or all tubs is recommended if we do not know if the two cases used the same tub.
- Swab the area next to the spring box exposed in the cave and the cave wall if possible. Also verify temperature in the cave.
- Basement fountain swab.
- Anything else they do with water in the basement?
- Fountains in community pools above (yes, swab and possible bulk)
- Showers by pool and basement (swab all shower heads and one bulk downstairs and upstairs at a minimum).

Probably 30 samples.

Other areas in the park?

From: Terry Paul

**Sent:** 12 Jul 2019 14:37:09 +0000

To: 'Kesteloot, Kurt'; Ritter, Troy (CDC/DDNID/NCEH/DEHSP)

Cc: Richard McMullen, Ph.D.

Subject: RE: DRAFT Sampling Plan for Tomorrow's Discussion

#### Gentlemen,

Let me know as soon as possible about any discussion on the actual taking of the samples. I would suggest starting with the Quapaw since that is the focus of concern. Then moving to the other sites. If we need to collect the samples we will need to get with our laboratory today to see if we have the necessary supplies.

We also suggest at least a look at the ventilation systems and duct work to determine if any moisture is present in those areas.

Thanks Terry! 501-661-2171 501-786-9144

From: Kesteloot, Kurt <kurt\_kesteloot@nps.gov>

Sent: Friday, July 12, 2019 8:28 AM

**To:** tir4@cdc.gov; Terry Paul < Terry.Paul@arkansas.gov > **Subject:** Re: DRAFT Sampling Plan for Tomorrow's Discussion

Good Morning,

Here is the latest draft.

Thank You and Very Respectfully,

## Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS Supervisory Public Health Consultant, Midwest Region National Park Service, Office of Public Health (OPH), 601 Riverfront Drive Omaha, NE 68102

Office Phone: 1-402-661-1718 Office Fax: 1-402-661-1719 Cell Phone: 1-202-641-0055 Email: Kurt Kesteloot@nps.gov "The NPS One Health Network: promoting and protecting the health of all species and the parks that we share." GREEN DOT

On Thu, Jul 11, 2019 at 11:21 PM Kesteloot, Kurt < kurt kesteloot@nps.gov > wrote:

Good Evening Troy and Terry,

I will try to call you both tomorrow morning sometime. Hopefully around 0700 CDT. I have attached a few documents for your review. These are just a draft and need more review as it is late and I wanted to have something to share with you for our discussion. I have attached old system plans with comments, a MS Word document, and photos.

Talk to you tomorrow.

Thank You and Very Respectfully,

Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS Supervisory Public Health Consultant, Midwest Region National Park Service, Office of Public Health (OPH), 601 Riverfront Drive Omaha, NE 68102 Office Phone: 1-402-661-1718

Office Fax: 1-402-661-1719 Cell Phone: 1-202-641-0055 Email: Kurt Kesteloot@nps.gov

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From: Patricia Trap

**Sent:** 15 Jul 2019 18:00:41 -0700

To: Kesteloot, Kurt

**Cc:** Said, Maria; Lauren Miller; Mark Scott; jhenry@atokainc.com; croberts@atokainc.com; Justin

Cully;Terry.Paul@arkansas.gov;Richard.McMullen@arkansas.gov;Sara Newman;Gwendolyn Ruppert;Ritter, Troy (CDC/DDNID/NCEH/DEHSP);Alexandra Picavet;Robert Kammel;Clara

Wooden

Subject: Re: HOSP-Legionella-Quapaw Update July 15, 2019

Thanks Kurt for this report and diligence in testing. Let me know if you need anything.

Patty

Regional Director (Acting)
Midwest Region, National Park Service

office: 402-661-1520 cell: 402-637-2414

On Jul 15, 2019, at 7:37 PM, Kesteloot, Kurt < <u>kurt\_kesteloot@nps.gov</u>> wrote:

Good Evening Everyone,

Thanks for the assistance today! We took several bulk and swab samples in the Quapaw today. We hope to meet tomorrow around 0900 at the Hot Springs Nation Park Headquarters building.

Here is a brief of some of the testing conducted and proposed.

#### **Testing conducted:**

## Quapaw:

## Main Level:

Single Bath Use Area (Room F and G) likely Person 1 and Person 2 rooms for latest scenario.

Room F: Bulk mixed sample of tempered and thermal water ( $\sim$ 104.8F) and swab in the jets.

Room G: Bulk thermal sample (~137F), bulk tempered sample (~94F), swab jets and micro bubbles emitter, and remove jet and swab.

Left Pool: Bulk and Swab Center Pool: Bulk and Swab Right Pool:Bulk and Swab

Upper Pool:

Shower Heads: Bulk and Swab

#### Basement:

Shower next to the only individual basement tub that has a skylight (~107F) bulk sample and swab.

Hatch area outside of the cave: excesses waste thermal water in large reservoir (~133F). A bulk sample was taken and two swabs were taken. Basement Water cascade wall fountain. Occasionally disinfected and was disinfected last week. It uses city water and had a temp of ~74F. Basement Cave: I was not present but think it was just swabbed. Please note: the temperatures and samples collected are from memory and the lab recorded the actual numbers. There were approximately 12 swabs may have been gathered along with about 9 bulk samples.

# **Proposed Testing:**

Fountains: Approximately 5 or 6 bulk and swabs

Cooling Tower: Bulk of mixed water (from both towers) and swab of both

towers

Tempered (cold) thermal: Cold water at the tank and likely in the Quapaw (Bulk and Swab)

Thermal Water: HQ tank and upper tank (Bulk and Swab)

Quapaw: Swab duct-work in the main bathing area and possibly individual baths area.

Estimated samples remaining are: 11 bulk and 14 swabs.

Thank You and Very Respectfully,

Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS Supervisory Public Health Consultant, Midwest Region National Park Service, Office of Public Health (OPH), 601 Riverfront Drive

Omaha, NE 68102

Office Phone: 1-402-661-1718 Office Fax: 1-402-661-1719 Cell Phone: 1-202-641-0055 Email: Kurt Kesteloot@nps.gov

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On Fri, Jul 12, 2019 at 3:22 PM Said, Maria <<u>maria\_said@nps.gov</u>> wrote: Situation

- We know of 3 cases of confirmed or suspect Legionnaires' disease associated with Quapaw Bath and Spa, with dates of onset in July 2018, November 2019, and June 2019. The most recent case was unfortunately a death.
- A collaborative team including HOSP, the NPS OPH, and Arkansas Department of Health, all in consultation with the CDC, is working on the public health response to this cluster/outbreak.
- Environmental sampling is planned for early next week.

# Updates for July 12, 2019

- Kurt put together a draft sampling plan, a presentation showing photos of the park, and a detailed map of the park for discussion with Troy of CDC and Terry of Arkansas.
- We had call with Quapaw and communicated that (1) we had a third case that was a fatality; (2) we plan additional environmental testing; (2) guest notifications are needed going back one month; (3) clearly visible notifications of all current spa visitors are needed until environmental testing results are back (otherwise the spa would have to close until we have results); (4) we need documentation of the numbers of guests identified with visits over the last month and how many have been reached with notifications; (5) the spa should not change operations in any way or alert employees, so that when we do testing, we get as representative a sample as possible; (6) Dirk Haselow (state epi for Arkansas) and I will need to see and approve the guest notifications and signage for current visitors.
- The Quapaw expressed understanding and agreement with the plan. Later they phoned and asked if people who only came in for massage should be notified as well, and I confirmed with them that all guests, including for massage, should be notified.
- Dirk Haselow (state epi for Arkansas) and I have reviewed drafts
  of the Guest Notification Letter to previous guests as well as the
  notifications that will go to current visitors. We have also provided
  a link to the CDC fact sheet for distribution. The owners expressed
  that they will can start informing current guests through their signin process as early as today.

Please let me know of any edits or additions to this summary. Maria

From: Hubbard, Brian C. (CDC/DDNID/NCEH/DEHSP)

**Sent:** 16 Jul 2019 12:23:35 +0000

To: Ritter, Troy (CDC/DDNID/NCEH/DEHSP)

Subject: RE: HOSP-Legionella-Quapaw Update July 15, 2019

Thanks Troy.

From: Ritter, Troy (CDC/DDNID/NCEH/DEHSP) <tir4@cdc.gov>

Sent: Monday, July 15, 2019 9:49 PM

To: Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP) <izk0@cdc.gov>; Cooley, Laura A.

(CDC/DDID/NCIRD/DBD) <whz3@cdc.gov>; Smith, Jessica (CDC/DDID/NCIRD/DBD) <lyd7@cdc.gov>

**Cc**: Hubbard, Brian C. (CDC/DDNID/NCEH/DEHSP) <br/> **Subject**: Fwd: HOSP-Legionella-Quapaw Update July 15, 2019

Hey LD Team! I didn't see any of you copied on Kurt's email below.

Troy

## Get Outlook for iOS

From: Patricia Trap < patricia\_trap@nps.gov>

Sent: Monday, July 15, 2019 9:01 PM

To: Kesteloot, Kurt

Cc: Said, Maria; Lauren Miller; Mark Scott; jhenry@atokainc.com; croberts@atokainc.com; Justin Cully;

Terry.Paul@arkansas.gov; Richard.McMullen@arkansas.gov; Sara Newman; Gwendolyn Ruppert; Ritter,

Troy (CDC/DDNID/NCEH/DEHSP); Alexandra Picavet; Robert Kammel; Clara Wooden

Subject: Re: HOSP-Legionella-Quapaw Update July 15, 2019

Thanks Kurt for this report and diligence in testing. Let me know if you need anything.

Patty

Regional Director (Acting)

Midwest Region, National Park Service

office: 402-661-1520

cell: 402-637-2414

On Jul 15, 2019, at 7:37 PM, Kesteloot, Kurt < <u>kurt\_kesteloot@nps.gov</u>> wrote:

Good Evening Everyone,

Thanks for the assistance today! We took several bulk and swab samples in the Quapaw today. We hope to meet tomorrow around 0900 at the Hot Springs Nation Park Headquarters building.

Here is a brief of some of the testing conducted and proposed.

# Testing conducted:

## Quapaw:

#### Main Level:

Single Bath Use Area (Room F and G) likely Person 1 and Person 2 rooms for latest scenario.

Room F: Bulk mixed sample of tempered and thermal water (~104.8F) and swab in the jets.

Room G: Bulk thermal sample (~137F), bulk tempered sample (~94F), swab jets and micro bubbles emitter, and remove jet and swab.

Left Pool: Bulk and Swab

Center Pool: Bulk and Swab

Right Pool:Bulk and Swab

Upper Pool:

Shower Heads: Bulk and Swab

#### Basement:

Shower next to the only individual basement tub that has a skylight (~107F) bulk sample and swab.

Hatch area outside of the cave: excesses waste thermal water in large reservoir (~133F). A bulk sample was taken and two swabs were taken.

Basement Water cascade wall fountain. Occasionally disinfected and was disinfected last week. It uses city water and had a temp of ~74F.

Basement Cave: I was not present but think it was just swabbed.

Please note: the temperatures and samples collected are from memory and the lab recorded the actual numbers. There were approximately 12 swabs may have been gathered along with about 9 bulk samples.

# Proposed Testing:

Fountains: Approximately 5 or 6 bulk and swabs

Cooling Tower: Bulk of mixed water (from both towers) and swab of both towers

Tempered (cold) thermal: Cold water at the tank and likely in the Quapaw (Bulk

and Swab)

Thermal Water: HQ tank and upper tank (Bulk and Swab)

Quapaw: Swab duct-work in the main bathing area and possibly individual baths

area.

Estimated samples remaining are: 11 bulk and 14 swabs.

Thank You and Very Respectfully,

Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS

Supervisory Public Health Consultant, Midwest Region

National Park Service, Office of Public Health (OPH),

601 Riverfront Drive

Omaha, NE 68102

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Cell Phone: 1-202-641-0055

Email: Kurt Kesteloot@nps.gov

"The NPS One Health Network: promoting and protecting the health of all species and the parks that we share." GREEN DOT

On Fri, Jul 12, 2019 at 3:22 PM Said, Maria < maria said@nps.gov > wrote:

### Situation

- We know of 3 cases of confirmed or suspect Legionnaires' disease associated with Quapaw Bath and Spa, with dates of onset in July 2018, November 2019, and June 2019. The most recent case was unfortunately a death.
- A collaborative team including HOSP, the NPS OPH, and Arkansas
   Department of Health, all in consultation with the CDC, is working on the public health response to this cluster/outbreak.
- Environmental sampling is planned for early next week.

Updates for July 12, 2019

- Kurt put together a draft sampling plan, a presentation showing photos of the park, and a detailed map of the park for discussion with Troy of CDC and Terry of Arkansas.
- We had call with Quapaw and communicated that (1) we had a third case that was a fatality; (2) we plan additional environmental testing; (2) guest notifications are needed going back one month; (3) clearly visible notifications of all current spa visitors are needed until environmental testing results are back (otherwise the spa would have to close until we have results); (4) we need documentation of the numbers of guests identified with visits over the last month and how many have been

reached with notifications; (5) the spa should not change operations in any way or alert employees, so that when we do testing, we get as representative a sample as possible; (6) Dirk Haselow (state epi for Arkansas) and I will need to see and approve the guest notifications and signage for current visitors.

- The Quapaw expressed understanding and agreement with the plan. Later
  they phoned and asked if people who only came in for massage should be
  notified as well, and I confirmed with them that all guests, including for
  massage, should be notified.
- Dirk Haselow (state epi for Arkansas) and I have reviewed drafts of the Guest Notification Letter to previous guests as well as the notifications that will go to current visitors. We have also provided a link to the CDC fact sheet for distribution. The owners expressed that they will can start informing current guests through their sign-in process as early as today.

Please let me know of any edits or additions to this summary.

Maria

From: Kesteloot, Kurt

**Sent:** 16 Oct 2019 07:47:42 -0500

To: Said, Maria; Smith, Jessica (CDC/DDID/NCIRD/DBD); Lucas, Claressa

(CDC/DDID/NCIRD/DBD); Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP); Ritter, Troy

(CDC/DDNID/NCEH/DEHSP);Lee, Sooji (CDC/DDID/NCIRD/DBD) (CTR)

Cc: Laura Miller;Sara Newman;Mark Scott
Subject: Re: Hot Springs - Culture results

Attachments: Hot Springs NPS Testing Event 10.4.2019.xlsx, 2019 Water Usage

HOSP.xlsx

Good Morning Everyone,

Are you available around 10 a.m. central time for a call? If so, I can send a meeting invite.

Also, I have attached water use and temperatures for our discussion.

Thank You and Very Respectfully,

### Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS Supervisory Public Health Consultant, Interior Regions 3-5 National Park Service, Office of Public Health (OPH), 601 Riverfront Drive Omaha, NE 68102

Office Phone: 1-402-661-1718 Office Fax: 1-402-661-1719 Cell Phone: 1-202-641-0055 Email: Kurt Kesteloot@nps.gov

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On Wed, Oct 16, 2019 at 6:24 AM Kesteloot, Kurt < <a href="kurt\_kesteloot@nps.gov">kurt <a href="kurt\_kestel

I emailed the lab last night requesting the temperatures. I know Mark Scott was present when samples were taken. I believe he mentioned that all samples had a temperature except the cooled thermal water reservoir.

I also requested the water meter readings for each facility. The park has water meter readings for both the cooled and hot thermal water at each location. I look forward to talking to everyone soon. I am open up to 1330 eastern time today.

Thank You and Very Respectfully,

### Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS Supervisory Public Health Consultant, Interior Regions 3-5 National Park Service, Office of Public Health (OPH), 601 Riverfront Drive Omaha, NE 68102 Office Phone: 1-402-661-1718

Office Fac: 1-402-661-1719
Cell Phone: 1-202-641-0055
Email: Kurt\_Kesteloot@nps.gov

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"The NPS One Health Network: promoting and protecting the health of all species and the parks that we share." GREEN DOT

On Tue, Oct 15, 2019 at 9:21 PM Said, Maria < maria\_said@nps.gov > wrote: Hi everyone,

We have received results of the Legionella testing at Hot Springs (attached). Would you all have availability tomorrow to discuss?

We are not sure what to make of the detection in the hot samples (and can see if they have temperature readings from those water samples to see what the temperature actually was). We also are not sure what to make of the TimeZero vs. Standard ISO results.

Thank you as always for your help sorting through this. It is very much appreciated. Maria



## PHIGENICS ANALYTICAL SERVICES LABORATORY

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CDC ELITE Certified

## **CHAIN OF CUSTODY FORM**

Facility Name :	NPS		
Sample Date :	10/04/19	Flush Time :	ТО ТЕМР
Sample Size (in ml) :	250	Number of Samples :	21
Reason for Sample :	Investigative	Method Requested :	PVT Premium

Contact Name(s) : Daniel Ostrand

Contact Email(s): dostrand@phigenics.com

Field ID#	Collector's Name or Initials	Campus	Bldg	Floor #	Rm#	Description	Fixture Type (ex. Sink, Shower, Valve, Dental)	Potable/ Utility	Hot / Cold	TEMP	FRO (Free Residual Oxidant)	TRO (Total Residual Oxidant)	рН	PASL#	Notes
1	DO					Admin Display Fountain				103					
2	DO					Nobel Fountain				125					
3	DO		Lamar							137					
1	DO		Buckstaff			4th Tub on Right			Hot	131					
5	DO		Buckstaff			4th Tub on Right			Cold	93					
i	DO		Quapaw			Basement	Valve		Hot	134					
7	DO		Quapaw			Basement	Valve		Cold	79		_			
3	DO		Quapaw		QE	Individual Tub			Hot	139					
1	DO		Quapaw		QE	Individual Tub			Cold	99					
0	DO		Hale		207				Hot	128					
1	DO		Hale		207				Cold	96					
2	DO		Superior							124					
3	DO		Arlington		2	Tub Room				119					
1	DO		Arlington		2	Tub Room				93					
5	DO		Levi Hospital							122					
7	DO					Cooled Water Reservoir									No Temp Taken
3	DO					Libby Jug Fountain	•			129					
9	DO					Shell Fountain				126					
נ	DO					Display Spring	- 			128		·	<u> </u>		Behind Maurice
1	DO					Cascade Fountain	Pool			124					
2	DO					Cooling Tower	Valve			108					2nd Spicket from left
		Reling Received a	uished By (I	Name):	Daniel Os	strand		•			Sampl	e Ship Date: ceived Date:	10/04/	19	

## WATER USAGE BILL OF COLLECTIONS REPORT

BATHHOUSE: ARLINGTON HOTEL 501-623-7771

**CALENDAR YEAR 2019** 

		HOT WATER			COOL WATER		TOTAL
MONTH	PREVIOUS MONTH	CURRENT MONTH	TOTAL	PREVIOUS MONTH	CURRENT MONTH	TOTAL	GALLONS
JAN	9556000	10380000	824,000	5823000	6070000	247,000	1,071,000
FEB	10380000	10781000	401,000	6070000	6216000	146,000	547000
MAR	10781000	11325000	544,000	6216000	6417000	201,000	745000
APR	11325000	11788000	463,000	6417000	6593000	176,000	639000
MAY	11788000	12289000	501,000	6593000	6888000	295,000	796000
JUN	12289000	12768000	479,000	6888000	7196000	308,000	787000
JUL	12768000	13293000	525,000	7196000	7582000	386,000	911000
AUG	13293000	13673000	380,000	7582000	7883000	301,000	681000
SEP	0	0	-	0	0	-	0
ОСТ	0	0	-	0	0	-	0
NOV	0	0	-	0	0	-	0
DEC	0	0	-	0	0	-	0

TOTAL 4117000.00 - 2,060,000 6,177,000

WATER USAGE BILL OF COLLECTIONS REPORT BATHHOUSE: BUCKSTAFF BATHHOUSE 501-623-2308

CALENDAR YEAR 2019

		HOT WATER			COOL WATER		TOTAL
MONTH	PREVIOUS MONTH	CURRENT MONTH	TOTAL	PREVIOUS MONTH	CURRENT MONTH	TOTAL	GALLONS
JAN	8590000	9100000	510000	13579000	13787000	208,000	718000
FEB	9100000	9315000	215000	13787000	13874000	87,000	302000
MAR	9315000	9746000	431000	13874000	14092000	218,000	649000
APR	9746000	10129000	383000	14092000	14257000	165,000	548000
MAY	10129000	10544000	415000	14257000	14461000	204,000	619000
JUN	10544000	10938000	394000	14461000	14672000	211,000	605000
JUL	10938000	11379000	441000	14672000	14983000	311,000	752000
AUG	11379000	11723000	344000	14983000	15197000	214,000	558000
SEP	0	0	0	0	0	0	0
ОСТ	0	0	0	0	0	0	0
NOV	0	0	0	0	0	0	0
DEC	0	0	0	0	0	0	0

TOTAL 3,133,000 1,618,000 4,751,000

WATER USAGE BILL OF COLLECTIONS REPORT BATHHOUSE: BUCKSTAFF BATHHOUSE GEOTHERMAL HEAT

**CALENDAR YEAR 2019** 

монтн	PREVIOUS MONTH	CURRENT MONTH	TOTAL	DIVISOR	GALLONS CHARGED
JAN	15963000	18872000	2,909,000	1,000	2,909
FEB	18872000	20416000	1,544,000	1,000	1,544
MAR	20416000	21747000	1,331,000	1,000	1,331
APR	21747000	22129000	382,000	1,000	382
MAY	22129000	22286000	157,000	1,000	157
JUN	22286000	22351000	65,000	1,000	65
JUL	22351000	22450000	99,000	1,000	99
AUG	22450000	22516000	66,000	1,000	66
SEP	0	0	0	1,000	0
ОСТ	0	0	0	1,000	0
NOV	0	0	0	1,000	0
DEC	0	0	0	1,000	0

TOTAL 6,553,000 6,553

WATER USAGE BILL OF COLLECTIONS REPORT BATHHOUSE: THE HOTEL HOT SPRINGS (501) 623-6600

CALENDAR YEAR 2019

		HOT WATER		(	COOL WATER		TOTAL
MONTH	PREVIOUS MONTH	CURRENT MONTH	TOTAL	PREVIOUS MONTH	CURRENT MONTH	TOTAL	GALLONS
JAN	-	-	0	-	-	0	0.00
FEB	0	0	0	0	0	0	0.00
MAR	0	0	0	0	0	0	0.00
APR	0	0	0	0	0	0	0.00
MAY	0	0	0	0	0	0	0.00
JUN	0	0	0	0	0	0	0.00
JUL	0	0	0	0	0	0	0.00
AUG	0	0	0	0	0	0	0.00
SEP	0	0	0	0	0	0	0.00
ОСТ	0	0	0	0	0	0	0.00
NOV	0	0	0	0	0	0	0.00
DEC	0	0	0	0.00	0.00	0	0.00

TOTAL

WATER USAGE BILL OF COLLECTIONS REPORT 501-622-3334

CALENDAR YEAR 2019

		HOT WATER		,	COOL WATER		TOTAL
MONTH	PREVIOUS MONTH	CURRENT MONTH	TOTAL	PREVIOUS MONTH	CURRENT MONTH	TOTAL	GALLONS
JAN	16300000	16978000	678,000	74303000	74311000	8000	686000
FEB	16978000	17275000	297,000	74311000	74392000	81000	378000
MAR	17275000	17583000	308,000	74392000	74392000	0	308000
APR	17583000	17816000	233,000	74392000	74392000	0	233000
MAY	17816000	18037000	221,000	74392000	74393000	1000	222000
JUN	18037000	18193000	156,000	74393000	74393000	0	156000
JUL	18193000	18474000	281,000	74393000	74393000	0	281000
AUG	18474000	18682000	208,000	74393000	74393000	0	208000
SEP	0	0	0	0	0	0	0
ОСТ	0	0	0	0	0	0	0
NOV	0	0	0	0	0	0	0
DEC	0	0	0	0.00	0.00	0.00	0.00

TOTAL 2,382,000 90,000 2,472,000

BATHHOUSE: WATER USAGE BILL OF COLLECTIONS REPORT HOT SPRINGS MOUNTAIN TOWER 501-623-6035

CALENDAR YEAR 2019

монтн	PREVIOUS MONTH	CURRENT MONTH	TOTAL GALLONS	COST FOR FIRST GAL	COST FOR ADD. GAL	NUMBER OF ADD GAL
JAN	0	0	0	\$3.52	\$3.52	0
FEB	0	0	0	\$3.59	\$3.52	0
MAR	0	0	0	\$3.59	\$3.52	0
APR	0	0	0	\$3.59	\$3.52	0
MAY	0	0	0	\$3.59	\$3.52	0
JUN	0	0	0	\$3.59	\$3.52	0
JUL	0	0	0	\$3.59	\$3.52	0
AUG	0	0	0	\$3.59	\$3.52	0
SEP	0	0	0	\$3.59	\$3.52	0
ОСТ	0	0	0	\$3.59	\$3.52	0
NOV	0	0	0	\$3.59	\$3.52	0
DEC	0	0	0	\$3.59	\$3.52	0

TOTAL 0 0 0 0

ng per park management.

# WATER USAGE BILL OF COLLECTIONS REPORT BATHHOUSE: QUAPAW BATHHOUSE

CALENDAR YEAR 2019

		HOT WATER			COOL WATER	
MONTH	PREVIOUS MONTH	CURRENT MONTH	TOTAL	PREVIOUS MONTH	CURRENT MONTH	TOTAL
JAN	10659000	11303000	644,000	2914000	3038000	124,000
FEB	11303000	11886000	583,000	3038000	3144000	106,000
MAR	11886000	12522000	636,000	3144000	3304000	160,000
APR	12522000	12863000	341,000	3304000	3396000	92,000
MAY	12863000	13417000	554,000	3396000	3577000	181,000
JUN	13417000	13927000	510,000	3577000	3733000	156,000
JUL	13927000	14463000	536,000	3733000	3928000	195,000
AUG	14463000	14847000	384,000	3928000	4047000	119,000
SEP	0	0	0	0	0	0
ОСТ	0	0	0	0	0	0
NOV	0	0	0	0	0	0
DEC	0	0	0	0	0	0

TOTAL 4,188,000 1,133,000

BATHHOUSE: WATER USAGE BILL OF COLLECTIONS REPORT 501-624-5521

CALENDAR YEAR 2019

								-
		HOT WATER			COOL WATER		TOTAL	
MONTH	PREVIOUS MONTH	CURRENT MONTH	TOTAL	PREVIOUS MONTH	CURRENT MONTH	TOTAL	GALLONS	
JAN	0	0	0	0	0	0	0	not billed
FEB	0	0	0	0	0	0	0	
MAR	0	0	0	0	0	0	0	]
APR	0	0	0	0	0	0	0	not billed
MAY	0	0	0	0	0	0	0	]
JUN	2124000	2229000	105,000	26000	26000	0	105000	]
JUL	2229000	2373000	144,000	26000	26000	0	144000	]
AUG	2373000	2495000	122,000	26000	26000	0	122000	
SEP	0	0	0	0	0	0	0	]
ост	0	0	0	0	0	0	0	]
NOV	0	0	0	0	0	0	0	
DEC	0	0	0	0	0	0	0	

TOTAL 371,000 371,000

The water was turned off and not bills were issued prior to June 2019.

# R USAGE BILL OF COLLECTIONS RI BATHHOUSE: SUPERIOR BATHHOUSE

CALENDAR YEAR 2019

07 100110		2013	
монтн	PREVIOUS	CURRENT	TOTAL
NIONIA	MONTH	MONTH	GALLONS
JAN	585,682	609,402	23,720
FEB	609,402	610,589	1,187
MAR	610,589	621,824	11,235
APR	621,824	632,960	11,136
MAY	632,960	646,220	13,260
JUN	646,220	655,151	8,931
JUL	655,151	669,528	14,377
AUG	669,528	680,447	10,919
SEP	0	0	0
ОСТ	0	0	0
NOV	0	0	0
DEC	0	0	0

TOTAL 5,031,356 5,126,121 94,765

# WATER USAGE BILL OF COLLECTIONS REPORT BATHHOUSE: HILL WHEATLEY JUG

CALENDER YEAR 2019

монтн	PREVIOUS MONTH	CURRENT MONTH	TOTAL
JAN	-	-	0
FEB	0.00	0.00	0
MAR	0.00	0.00	0
APR	0.00	0.00	0
MAY	0.00	0.00	0
JUN	0.00	0.00	0
JUL	0.00	0.00	0
AUG	0.00	0.00	0
SEP			0
ОСТ			0
NOV			0
DEC			0

TOTAL

# WATER USAGE BILL OF COLLECTIONS REPORT BATHHOUSE: Administration/Noble JUG

CALENDER YEAR 2018

монтн	PREVIOUS MONTH	CURRENT MONTH	TOTAL	
JAN	0.00	59761.00	59,761	
FEB	0.00	35073.00	35,073	
MAR	35073.00	70229.00	35,156	
APR	70229.00	91356.00	21,127	meter reset
MAY			0	
JUN	0.00	76533.00	76,533	
JUL			0	
AUG			0	
SEP			0	
ОСТ			0	
NOV			0	
DEC			0	

TOTAL 105,302 332,952 227,650

# WATER USAGE BILL OF COLLECTIONS REPORT BATHHOUSE: PMC JUG FOUNTAIN

**CALENDER YEAR 2018** 

монтн	PREVIOUS MONTH	CURRENT MONTH	TOTAL
JAN	0.00	0.00	0
FEB			0
MAR			0
APR			0
MAY			0
JUN			0
JUL			0
AUG			0
SEP			0
ОСТ			0
NOV			0
DEC			0

TOTAL

Sent: 1 C	Oct 2019 16:55:38 +0000
To: Sm	nith, Jessica (CDC/DDID/NCIRD/DBD);Kozak-Muiznieks, Natalia A.
(CDC/DDID/NCIRD/DBD);Ri	itter, Troy (CDC/DDNID/NCEH/DEHSP);Lucas, Claressa
(CDC/DDID/NCIRD/DBD)	
Subject: RE	: Hot Springs and Water management plans
Thanks again.	
	(b)( <del>3</del> )
I think	(b)( <b>3</b> )
(b)(5)	
(-)(@	All things to consider.
lacan	
Jasen	
Fram. Smith Tossica /CDC:	/DDID/NCIRD/DBD) <lyd7@cdc.gov></lyd7@cdc.gov>
Sent: Tuesday, October 1,	• •
	alia A. (CDC/DDID/NCIRD/DBD) <htv2@cdc.gov>; Kunz, Jasen M.</htv2@cdc.gov>
-	P) <izk0@cdc.gov>; Ritter, Troy (CDC/DDNID/NCEH/DEHSP) <tir4@cdc.gov>;</tir4@cdc.gov></izk0@cdc.gov>
	D/NCIRD/DBD) <chl9@cdc.gov></chl9@cdc.gov>
Subject: RE: Hot springs an	nd Water management plans
Yeah, and there are severa	more sections   didn't copy and paste that
reall, and there are severa	(b)(a)
From: Kozak-Muiznieks N	atalia A. (CDC/DDID/NCIRD/DBD) < htv2@cdc.gov>
Sent: Tuesday, October 1,	· —
· ·	DDNID/NCEH/DEHSP) < <u>izk0@cdc.gov</u> >; Smith, Jessica (CDC/DDID/NCIRD/DBD)
	roy (CDC/DDNID/NCEH/DEHSP) <tir4@cdc.gov>; Lucas, Claressa</tir4@cdc.gov>
(CDC/DDID/NCIRD/DBD) <	· · · · · · · · · · · · · · · · · · ·
	nd Water management plans
	The first war and a first to the first to th
Ithink	(b)(3)
	(b)( <u>s</u> )
From: Kunz, Jasen M. (CDC	C/DDNID/NCEH/DEHSP) < <u>izk0@cdc.gov</u> >
Sent: Tuesday, October 1,	2019 12:29 PM

Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP)

From:

**To:** Kozak-Muiznieks, Natalia A. (CDC/DDID/NCIRD/DBD) < <a href="https://documents.com/ncird/bbd/">http2@cdc.gov</a>; Smith, Jessica (CDC/DDID/NCIRD/DBD) < <a href="https://documents.com/ncird/bbd/">http2@cdc.gov</a>; Smith, Jessica (CDC/DDID/NCIRD/DBD) < <a href="https://documents.com/ncird/bbd/">http2@cdc.gov</a>; Smith, Jessica (CDC/DDID/NCIRD/DBD) < <a href="https://documents.com/ncird/bbd/">http2@cdc.gov</a>; Ritter, Troy (CDC/DDNID/NCEH/DEHSP) < <a href="https://documents.com/ncird/bbd/">http://documents.com/ncird/bbd/</a>; Ritter, Troy (CDC/DDNID/NCEH/DEHSP) < <a href="https://documents.com/ncird/bbd/">https://documents.com/ncird/bbd/</a>; Ritter, Troy (CDC/DDNID/NCEH/DEHSP) <a href="https://documents.com/ncird/bbd/">https://documents.com/ncird/bbd/</a>; Ritter, Troy (CDC/DDNID/NCEH/DEHSP) <a href="https://documents.com/ncird/bbd/">http

Lucas, Claressa (CDC/DDID/NCIRD/DBD) < chl9@cdc.gov> **Subject:** RE: Hot Springs and Water management plans

Super helpful.	(b)( <del>\$</del> )	
	(p)(2)	
	(p)(3)	

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From: Kozak-Muiznieks, Natalia A. (CDC/DDID/NCIRD/DBD) <a href="https://documents.com/bbs/">httv2@cdc.gov</a> Sent: Tuesday, October 1, 2019 11:45 AM  To: Smith, Jessica (CDC/DDID/NCIRD/DBD) <a href="https://documents.com/bbs/">lyd7@cdc.gov</a> ; Kunz, Jasen M.  (CDC/DDNID/NCEH/DEHSP) <a href="https://documents.com/bbs/">izk0@cdc.gov</a> ; Ritter, Troy (CDC/DDNID/NCEH/DEHSP) <a href="https://documents.com/bbs/">tir4@cdc.gov</a> ; Lucas, Claressa (CDC/DDID/NCIRD/DBD) <a href="https://documents.com/bbs/">chl9@cdc.gov</a> > Subject: RE: Hot Springs and Water management plans  Thank you Jess!  Just in case you haven't seen these papers/abstracts, I am forwarding what it seems the most relevant (please see attached).
(p)( <del>2</del> )
Thank you,

Thank you, Natalia

From: Smith, Jessica (CDC/DDID/NCIRD/DBD) < lyd7@cdc.gov>

Sent: Tuesday, October 1, 2019 10:27 AM

<b>To:</b> Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP) < <u>izk0@cdc.gov</u> >; Ritter, Troy (CDC/DDNID/NCEH/DEHSP) < <u>tir4@cdc.gov</u> >; Lucas, Claressa (CDC/DDID/NCIRD/DBD) < <u>chl9@cdc.gov</u> >
Kozak-Muiznieks, Natalia A. (CDC/DDID/NCIRD/DBD) < htv2@cdc.gov>
Subject: RE: Hot Springs and Water management plans
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----Original Appointment-----

**From:** Smith, Jessica (CDC/DDID/NCIRD/DBD) **Sent:** Wednesday, September 18, 2019 5:05 PM

To: Smith, Jessica (CDC/DDID/NCIRD/DBD); Said, Maria; Kesteloot, Kurt; Ritter, Troy

(CDC/DDNID/NCEH/DEHSP); Edens, William (Chris) (CDC/DDID/NCIRD/DBD)

**Cc:** Cooley, Laura A. (CDC/DDID/NCIRD/DBD); James, Allison (CDC arkansas.gov); Lucas, Claressa (CDC/DDID/NCIRD/DBD); Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP); Kozak-Muiznieks, Natalia A.

(CDC/DDID/NCIRD/DBD)

Subject: Hot Springs and Water management plans

When: Tuesday, October 1, 2019 2:00 PM-3:00 PM (UTC-05:00) Eastern Time (US & Canada).

Where: Skype Meeting

Thanks Maria and Kurt. Let's shoot for 10/1 at 2:00 pm ET, but we can move it if needed.

And please feel free to forward the invitation to Laura Miller or any other folks that you think may be interested in joining (same for the AR DOH side, Allison).

Jessica	
Join Skype Meeting Trouble Joining? Try Skype Web App	
Join by phone	
(404) 553-8912,, (Atlanta Dial-in Conference Region)	English (United States)
(855) 348-8390,, (b)(6) Atlanta Dial-in Conference Region)	English (United States)
Find a local number	
Conference ID: (b)(6)	
Forgot your dial-in PIN?   Help	

**From:** Said, Maria <<u>maria\_said@nps.gov</u>>

**Sent:** Wednesday, September 18, 2019 3:01 PM **To:** Kesteloot, Kurt <<u>kurt\_kesteloot@nps.gov</u>>

**Cc:** Smith, Jessica (CDC/DDID/NCIRD/DBD) < <a href="mailto:liver-nc-edge-nc-e

Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP) < izk0@cdc.gov>

Subject: Re: [EXTERNAL] RE: Hot Springs and Water management plans

Hi Kurt,

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Thank You and Very Respectfully,

Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS
Supervisory Public Health Consultant, Interior Regions 3-5
National Park Service, Office of Public Health (OPH),
601 Riverfront Drive
Omaha, NE 68102
Office Phone: 1-402-661-1718

Office Fax: 1-402-661-1719
Cell Phone: 1-202-641-0055
Email: <u>Kurt\_Kesteloot@nps.gov</u>

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Thanks, Jessica

—

### Jessica C. Smith, MPH

Epidemiologist | Centers for Disease Control and Prevention NCIRD/DBD/Respiratory Diseases Branch 404.718.5205 | lyd7@cdc.gov

From: Said, Maria <maria said@nps.gov>

Sent: Wednesday, September 18, 2019 9:22 AM

**To:** Cooley, Laura A. (CDC/DDID/NCIRD/DBD) < whz3@cdc.gov >; Smith, Jessica (CDC/DDID/NCIRD/DBD) < lyd7@cdc.gov >; Ritter, Troy (CDC/DDNID/NCEH/DEHSP) < tir4@cdc.gov >; James, Allison (CDC arkansas.gov) < allison.james@arkansas.gov >; Kesteloot,

Kurt <kurt\_kesteloot@nps.gov>

Subject: Hot Springs and Water management plans

Hi Laura, Jessica, and Troy,

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I am including Allison, the new EIS officer for Arkansas on the thread. Dirk Haselow is no longer with the state health department.

Thanks for any thoughts on this. Hope you guys are well. Maria

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Maria Said, MD, MHS | CDR, U.S. Public Health Service Epidemiology Branch Chief | Office of Public Health | National Park Service Address: 1849 C. Street, NW, Room 2543, Mailstop 2560 | Washington, DC 20240 Office Tel: 202-513-7151 | Email: maria\_said@nps.gov

Office Tel: 202-513-7151 | Email: maria\_said(@nps.gr Website (public): https://www.nps.gov/orgs/1878/index.htm

Website (internal): https://sites.google.com/a/nps.gov/in2-protect-and-promote-

health/home/disease-surveillance-response

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Maria Said, MD, MHS | CDR, U.S. Public Health Service

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From:	Smith, Jessica (CDC/DDID/NCIRD/DBD)
Sent:	1 Oct 2019 16:51:29 +0000
To:	Kozak-Muiznieks, Natalia A. (CDC/DDID/NCIRD/DBD);Kunz, Jasen M. :HSP);Ritter, Troy (CDC/DDNID/NCEH/DEHSP);Lucas, Claressa
(CDC/DDID/NCIRD/DBI	
Subject:	RE: Hot Springs and Water management plans
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Sent: Tuesday, Octobe	
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(CDC/DDID/NCIRD/DB	er, Troy (CDC/DDNID/NCEH/DEHSP) <tir4@cdc.gov>; Lucas, Claressa</tir4@cdc.gov>
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	(CDC/DDNID/NCEH/DEHSP) < izk0@cdc.gov>
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	JD) < <u>lyd7@cdc.gov</u> >; Ritter, Troγ (CDC/DDNID/NCEH/DEHSP) < <u>tir4@cdc.gov</u> >; DDID/NCIRD/DBD) < <u>chl9@cdc.gov</u> >
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(CDC/DDNID/NCEH/DEHSP) < tir4@cdc.gov >; Lucas, Claressa (CDC/DDID/NCIRD/DBD) < chl9@cdc.gov >; Kozak-Muiznieks, Natalia A. (CDC/DDID/NCIRD/DBD) < htv2@cdc.gov> Subject: RE: Hot Springs and Water management plans Hi all — Before this call at 2 pm today, I thought I'd pass along this guidance from Japan that seems relevant: (b)(<u>5</u>) (b)(<u>5</u>) (b)(<u>5</u>)

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----Original Appointment-----

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CDR Kurt Kesteloot, PE, BCEE, USPHS
Supervisory Public Health Consultant, Interior Regions 3-5
National Park Service, Office of Public Health (OPH),
601 Riverfront Drive
Omaha, NE 68102
Office Phone: 1-402-661-1718

Office Fax: 1-402-661-1719
Cell Phone: 1-202-641-0055
Email: <u>Kurt\_Kesteloot@nps.gov</u>

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Maria Said, MD, MHS | CDR, U.S. Public Health Service

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Sent:	1 Oct 2019 16:49:11 +0000	
To:	Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP);Smith, Jessica	
(CDC/DDID/NCIRD/DBD	));Ritter, Troy (CDC/DDNID/NCEH/DEHSP);Lucas, Claressa	
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Subject:	RE: Hot Springs and Water management plans	
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Subject: RE: Hot Spring	gs and Water management plans	
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(CDC/DDNID/NCEH/DEHSP) < izk0@cdc.gov >; Ritter, Troy (CDC/DDNID/NCEH/DEHSP) < tir4@cdc.gov >;
Lucas, Claressa (CDC/DDID/NCIRD/DBD) < <a href="mailto:chi9@cdc.gov">chi9@cdc.gov</a> >
Subject: RE: Hot Springs and Water management plans
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(b)( <u>5</u> )

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Where: Skype Meeting

Thanks Maria and Kurt. Let's shoot for 10/1 at 2:00 pm ET, but we can move it if needed.

And please feel free to forward the invitation to Laura Miller or any other folks that you think may be interested in joining (same for the AR DOH side, Allison).

Jessica	
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From: Said, Maria < maria said@nps.gov>

Sent: Wednesday, September 18, 2019 3:01 PM To: Kesteloot, Kurt < kurt kesteloot@nps.gov>

**Cc:** Smith, Jessica (CDC/DDID/NCIRD/DBD) < <a href="mailto:liver-nc-edge-nc-e

Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP) < izk0@cdc.gov>

**Subject:** Re: [EXTERNAL] RE: Hot Springs and Water management plans

Hi Kurt,

I think the call will focus on water management plans -- if you think the park would be interested in being part of that discussion, I think it would be fine. We can add Laura Miller and whoever else might be interested in the calendar invite once we have a day/time.

Maria

On Wed, Sep 18, 2019 at 1:49 PM Kesteloot, Kurt < <a href="mailto:kurt\_kesteloot@nps.gov">kurt <a href="mailto:

I'm fairly open that week and look forward to talking more. Should we invite a couple people from the Park?

Thank You and Very Respectfully,

Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS
Supervisory Public Health Consultant, Interior Regions 3-5
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Cell Phone: 1-202-641-0055
Email: <u>Kurt\_Kesteloot@nps.gov</u>

×

"The NPS One Health Network: promoting and protecting the health of all species and the parks that we share." GREEN DOT

On Wed, Sep 18, 2019 at 11:45 AM Said, Maria < maria said@nps.gov > wrote:

Fantastic.

Tuesday 10/1 is wide open for me too.

The rest of that week I'll be at the IDSA conference and could step out if need be, but it would be less ideal.

Thank you!

Maria

On Wed, Sep 18, 2019 at 11:23 AM Smith, Jessica (CDC/DDID/NCIRD/DBD) < <a href="https://lyd7@cdc.gov">lyd7@cdc.gov</a> wrote:

Hi Maria,

We're happy to reconvene to discuss WMPs at Hot Springs. Starting tomorrow Troy is going to be traveling internationally, but he's back in the office on the 30<sup>th</sup> if we could shoot for a time that week? I'm also looping in Jasen and Claressa in case they can join too, since they bring the

ASHRAE perspective and Claressa may be able to speak to the ecology of *Legionella* in this setting.

Right now it looks like Tuesday, 10/1 is wide open for us. Thurs, 10/3 we're free at 3:00 pm and then Friday, 10/4 at 1:00 pm and 3:00 pm ET.

Also, I was hoping we would have heard back from colleagues in Japan by now about any public health recommendations they have for similar settings, but unfortunately we haven't. I do think by the week of the 30<sup>th</sup> I should be able to do a quick lit review about cases and clusters associated with hot springs and can share any pertinent findings during the call.

Thanks, Jessica

—

#### Jessica C. Smith, MPH

Epidemiologist | Centers for Disease Control and Prevention NCIRD/DBD/Respiratory Diseases Branch 404.718.5205 | lyd7@cdc.gov

From: Said, Maria <maria said@nps.gov>

Sent: Wednesday, September 18, 2019 9:22 AM

**To:** Cooley, Laura A. (CDC/DDID/NCIRD/DBD) < whz3@cdc.gov>; Smith, Jessica (CDC/DDID/NCIRD/DBD) < lyd7@cdc.gov>; Ritter, Troy (CDC/DDNID/NCEH/DEHSP) < tir4@cdc.gov>; James, Allison (CDC arkansas.gov) < allison.james@arkansas.gov>; Kesteloot,

Kurt <kurt\_kesteloot@nps.gov>

Subject: Hot Springs and Water management plans

Hi Laura, Jessica, and Troy,

We (NPS and Arkansas) are trying to figure out the best path forward with the Hot Springs legionella cases. As you know, all the environmental testing has been negative. However, we have had a number of travel-related cases, and, based on Arkansas state data, it looks like there might be increased cases in the Hot Springs area generally compared to the rest of the state -- although these data are still being analyzed, and I would leave it to Arkansas to confirm this.

We also have considered more where the hot spring water is going -- apparently, it does not just go to the Quapaw, but it goes to a number of other concession operated businesses (including another spa) as well businesses outside park property (including a hospital therapeutic pool and at least one other hotel). One action we are considering is sending a letter to those who receive spa water and basically recommending that although we have never identified legionella in the water and don't know of any increased risk, we do know that untreated water does pose a risk for legionella growth, and businesses might want to consider a water management plan. My feeling is that it would be beneficial to them, if we have an additional case, to then be able to clearly describe their water system and the results of some pre-determined parameters (such as temperatures) over time.

If you all are available at any time, I would love to get your thoughts. Some questions I have are:

- Is a water management plan appropriate even for those buildings that don't meet ASHRAE building guidance criteria?
- Is a water management plan needed for only places that don't disinfect? I know that water management plans are used by many systems in which chlorine is used, but in this case, in which we don't have any evidence of Legionella growth in the hot spring water, I don't think we can or should point to hot spring water as a particular Legionella risk -- the risk in my mind is just from the fact that it is not disinfected.
- Should any of the water management plans include legionella testing? I think the Quapaw might consider this -- but then what would be the guidance if they get positive results?

I am including Allison, the new EIS officer for Arkansas on the thread. Dirk Haselow is no longer with the state health department.

Thanks for any thoughts on this. Hope you guys are well. Maria

--

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Office Tel: 202-513-7151 | Email: maria\_said(@nps.gr Website (public): https://www.nps.gov/orgs/1878/index.htm

Website (internal): https://sites.google.com/a/nps.gov/in2-protect-and-promote-

health/home/disease-surveillance-response

\_\_

Maria Said, MD, MHS | CDR, U.S. Public Health Service

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Office Tel: 202-513-7151 | Email: <u>maria\_said@nps.gov</u> Website (public): <u>https://www.nps.gov/orgs/1878/index.htm</u>

Website (internal): https://sites.google.com/a/nps.gov/in2-protect-and-promote-health/home/disease-

surveillance-response

# Different growth rates in amoeba of genotypically related environmental and clinical *Legionella pneumophila* strains isolated from a thermal spa

M. MOLMERET<sup>1</sup>, S. JARRAUD<sup>1</sup>, J. PIERRE MORIN<sup>3</sup>, P. PERNIN<sup>2</sup>, F. FOREY<sup>1</sup>, M. REYROLLE<sup>1</sup>, F. VANDENESCH<sup>1</sup>, J. ETIENNE<sup>1</sup> and P. FARGE<sup>1\*</sup>

(Accepted 14 November 2000)

#### SUMMARY

Two cases of legionellosis occurring 3 years apart were acquired in the same French thermal spa and were apparently due to the same strain of Legionella pneumophila serogroup 1, as shown by genomic macrorestriction analysis. Minor differences between the two isolates were found by random amplification PCR profiling which showed an additional band with one of the isolates. Analysis of 107 L. pneumophila strains isolated from the spa waters by genome macrorestriction failed to identify the infective strain, but a closely related L. pneumophila serogroup 3 strain differing from the clinical isolates by only one band was found. To determine if the clinical L. pneumophila serogroup 1 isolates was better adapted for intracellular multiplication than related serogroup 3 environmental isolates, the growth kinetics of six isolates were determined in co-culture with Acanthamocha lenticulata. One clinical isolate failed to grow within amoeba, while the other clinical isolate yielded the highest increase in bacterial cell count per amoeba (1200%) and the environmental isolates gave intermediate values. Genetic analysis of L. pneumophila isolates by DNA macrorestriction does not therefore appear to reflect their growth kinetics within amoeba, and is not sufficiently discriminatory to identify potentially virulent strains.

#### INTRODUCTION

Legionella pneumophila [1] belongs to the Legionellaceae family, which comprises at least 43 species [2]. L. pneumophila serogroup I is most frequently associated with legionellosis. Legionellac are inhaled in aerosols created mainly by hot water distribution systems, cooling towers and thermal spa water [3–7]. L. pneumophila is a facultative intracellular pathogen that infects human macrophages, monocytes and epithelial cells [8–10], and in the

\* Author for correspondence.

aquatic environment, it can survive and multiply within amoebae, which act as natural hosts. Uptake by amoeba and survival of *L. pneumophila* is influenced by environmental conditions such as temperature [11]. Bacteria growing within amoeba are changed phenotypically and exhibit an increased resistance to antibiotics and biocides when compared with cells grown in conventional media [12–14].

In vitro co-culture models have been developed to study the interaction between amoebae and legionella, and the effects of external conditions (temperature, sunlight, etc.) on the growth of the two organisms

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[5, 15, 16], as well as to identify several legionella genes involved in virulence. The growth kinetics of L. pneumophila within amoeba such as Acanthamoeba spp. [17, 18] and Hartmannella spp. [19] vary according to the bacterial strain and extrinsic factors such as the number of subcultures of the strain [20]. Strains lacking *mip* (macrophage infectivity potentiator gene) [21], dot (defect in organelle trafficking gene) [22], iem (intracellular multiplication gene) [23]. eml (early stage macrophage-induced locus) [24], and pmi (protozoan and macrophage infectivity loci) [25, 26] grow more slowly than the parent strains in coculture. A study of the general stress response of L. pneumophila to a modified cellular environment identified the role of rpoS gene [27], which regulates genes that enable its survival within the protozoa [28]. Other genes are also required for intracellular survival during the early stages of infection and include pil BCD, eml-early macrophage induced locus or intracellular replication (asd-aspartate semialdehyde deshydrogenase) [29]. A relationship between growth kinetics and virulence is suspected, as L. pneumophila strains with the highest growth rate in co-culture also display enhanced entry into mouse or human cells [17, 18, 30, 31].

In 1994 and 1997, L. pneumophila type 1 isolates were recovered from two patients who had developed legionellosis at the same French Alpine thermal spa. In order to determine the precise source of infection, legionella isolates from the spa waters were compared to the two clinical isolates by means of pulsed-field gel electrophoresis (PFGE) and random amplified polymorphic DNA (RAPD). The growth kinetics of the clinical and environmental legionella isolates within Acanthamoeba sp. were compared to determine whether this parameter reflected virulence in vivo.

#### MATERIALS AND METHODS

#### Patient and environmental isolates

The clinical isolates were obtained by bronchoalveolar lavage (BAL) from two patients infected during stays at the same thermal spa. Patient 1 (B.P.) was a 40-year-old man with Still's disease, who was receiving 21 mg of prednisone daily and 40 mg of methotrexate weekly. Against medical advice, he attended the thermal spa in July 1994 for a routine 21-day thermal cure. In August 1994, 5 days after returning home, he developed severe acute pneumonia involving both lungs on the chest X-ray film. He was admitted to an

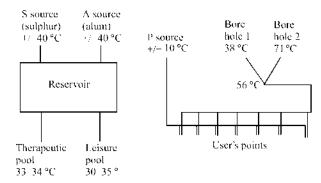


Fig. 1. Schematic diagram of the thermal spa water distribution system.

intensive care unit (ICU), where a BAL fluid sample grew L, pneumophila serogroup 1 (>  $10^{\circ}$  c.f.u./ml). His condition deteriorated rapidly despite appropriate antibiotic therapy and he became neutropenic (500 G/L). He died on the fourth day in ICU. The clinical strain (SC94) was stored at -80 °C.

Patient 2 (F. J.) was a 69-year-old man with chronic obstructive bronchopneumonia who attended the spa in August 1997. Fifteen days after his arrival he developed fever, cough and dyspnoea. Crackles were present and the chest X-ray film showed signs of pneumonia. He received an oral β-lactam antibiotic but his clinical status worsened and he was admitted to an ICU where he was given ofloxacin and cefotaxime, which was replaced with rovamycin when BAL fluid culture yielded *L. pneumophila* serogroup 1 (10 c.f.u./ml). He was cured after 20 days of antibiotic treatment. The clinical strain (SC97) was stored at -80 °C.

To determine the source of infection, 11 water samples were collected throughout the spa's distribution system. The thermal spa receives water from three natural springs (S, sulphur; A, alum and P, cold water) and two bore holes (Bh1 and Bh2). Water from these sources are then mixed as shown schematically in Fig. 1, and distributed throughout the buildings at temperatures optimal for the various uses. The 11 samples yielded 107 legionella strains. The environmental isolates were collected over a 2-year period following the second case of legionellosis at the thermal spa. Eighty-one strains were identified as L. pneumophila (27 scrogroup 1, 1 scrogroup 2, 62 serogroup 3, 3 serogroup 6 and 9 serogroup 13), and 26 as L. dumoffii (Table 1). Seven isolates came from source A, 6 from source S, and 3 from source P; 44 isolates came from the thermal water distribution network, 13 from pools and 5 from internal reservoirs (Table 1). All strains were identified by a combination

Table 1. PFGE types of the L. pneumophila isolates from patients and thermal spa water

Strain designation	Origin	Serogroup	PFGE type
Clinical strains			
SC94	Patient 1	1	U
SC97	Patient 2	1	U
Environmental strains			
AX1-13	User's point	3	A
AX15-26	User's point	3	Α
AX28-29	User's point	3	A
AX32	User's point	3	Α
AX61	User's point	13	Α
AX14	Pool PMI	3	Α
Λ <b>X</b> 27	Pool PMI	3	Λ
AX30 31	Pool PMI	3	Λ
$\Lambda X34$	User's point	3	В
AX33	User's point	3	C
AX35	User's point	3	D
AX36 37	Reservoir	3	E
AX38	Source A	3	F
AX42	Source A	3	F
AX40	Source S	3	F
AX39	Pool PMI	3	F
AX41	Pool PMI	3	F
AX43	Source S	3	G
ΛΧ44	User's point	3	H
AX45 46	Source A	3	I
AX75 77	User's point	6	J
AX72 74	Source A	1	ĸ
AX60	Reservoir	3	L.
AX78	Reservoir	2	М
AX55-56	Source S	3	N.
AX57	User's point	3	Ö
AX58-59	Pool PMI	3	P
AX62-68	User's point	13	Q
AX62-06 AX69	User's point	13	R
AX70	Source S	1	S
ΛX47	Source S	3	T
			Ü
AX80 81	Source P	1	
AX71	User's point	1	Ľ
AX48 49	Pool PMI	3	U
AX51	Pool PMI	3	U
AX52	User's point	3	U
AX54	User's point	3	U
AX82	Cold water	3	U
AX50	Reservoir	3	U
AX53	Reservoir	3	U

of biochemical activity [32] and direct fluorescent assay with adsorbed and unadsorbed sera [33]. The reference *L. pneumophila* strain ATCC 33152 was used as a control.

## Pulsed field gel electrophoresis (PFGE)

Genomic DNA was prepared as previously described

with some modifications [34, 35]. Briefly, legionellae were treated with proteinase K (50 µg/ml) in TE buffer (10 mm Tris–HCl and 1 mm EDTA, pH 8) for 24 h at 55 °C, and DNA was digested with 20 IU of S/il restriction enzyme (Boehringer–Mannheim, Meylan, France) for 16 h at 50 °C. Fragments of DNA were separated in 0.8% agarose gel (Fast-Lane, FMC) prepared and run in 0.5 mm Tris-borate-EDTA

buffer (pH 8·3) in a contour-clamped homogeneous field apparatus (CHEF DRII system; Bio-Rad, Ivry sur Seine, France) with a constant voltage of 150 V. Runs were carried out with constant pulse times (25 s) at 10 °C for 11 h and increasing pulse times (35–60 s) at 10 °C for 11 h. The agarose gels were stained with ethidium bromide and photographed under UV light. Band patterns were interpreted with the aid of Taxotron software (Institut Pasteur, Paris, France). based on the unweighted pair grouped with mathematical average (UPGMA) method to construct dendrograms. Isolates with patterns which differed by no more than three restriction fragments were considered to have the same pulsotype, while organisms differing by more than three restriction fragments were considered sufficiently divergent to warrant a separate pulsotype designation [36].

#### RAPD technique

DNA was extracted from legionellae by a thermal lysis procedure [37] followed by phenol/chloroform/ isoamyl alcohol purification and precipitation in absolute ethanol. Random amplification was performed using previously described random primers [24] (Eurogentec, Seraing, Belgium): AP8 (5'-TT-GCTGGCCTAGTTAAACGTA-3') and AP9 (5'-ATGCGTAACCGTAACGTGCTGACT-3'). The reaction mixture consisted of 5 µg of DNA template, 4 mm MgCl<sub>2</sub>, 0.2 mm of each dNTP (Pharmacia Biotech, Uppsala, Sweden), 2.5 U of Taq DNA polymerase (Amplitag; Perkin-Elmer Branchburg, N.J.), and 50 pmol of each primer in PCR buffer (10 mm Tris-HCl pH 8·3, 50 mm KCl, 0.001 % gelatin; Perkin-Elmer Cetus). PCR cycles comprised a 1-min denaturation step at 94 °C, followed by hybridization for 2 min at 30 °C and extension at 72 °C for 1 min (40 cycles) and for 3 min at 72 °C (one final extension cycle). PCR products were run on standard 1.5% agarose gel (SeaKem GTG; FMC BioProducts, Rockland, Maine). stained with ethidium bromide, and photographed under UV light.

#### Co-culture of legionella with amoebae

Acanthamoeba lenticulata PD2, an axenized reference strain, was cultured in a 10% X-ray-inactivated fetal calf serum casein glucose yeast extract medium

(SCGYEM) at 30 °C. Amoebae were inoculated into 25 cm² tissue culture flasks (Greiner laboratories, Frickenhausen, Germany) containing 14 ml of SCGYEM liquid medium and incubated for 72 h at 30 °C. SCGYEM medium was then replaced by the same volume of saline solution, as previously described [26]. Bacterial strains were grown on buffered charcoal yeast extract (BCYE) agar supplemented with 0·1% α-ketoglutarate, glycine, vancomycin and colistin (GVPC) for 72 h. Co-culture was conducted at 30 °C in saline solution at pH 7 in tissue culture flasks with a ratio of one bacterium per 100 amoebae. Controls included the saline solution alone, with either legionellae or amoebae. Amoebae and legionellae were both quantified after 1, 2 and 3 days. Amoebae were counted directly in the tissue culture flask, using an inverted microscope, and the whole content of a tissue culture flask was removed. Amoebae were lysed by drawing the suspension 3-5 times through a 27gauge needle [16]. Legionellae (extra- and intracellular) were counted by dilution plating in triplicate on GVPC agar with incubation at 35 °C in 2.5 % CO<sub>3</sub>-air for 5-7 days. The ratio of bacterial increase versus the number of amoeba was calculated for each co-culture. Each experiment was repeated three times and standard errors were calculated from the repeated measurements.

### RESULTS

# PFGE patterns of the clinical and environmental isolates

Macrorestriction profiles of the 107 environmental and 2 clinical isolates contained 5-15 fragments ranging in size from 50 to 1000 kb. A total of 21 pulsotypes were identified (Fig. 2), strains within a given pulsotype differing by no more than three bands [38]. Pulsotype A was the most frequent, comprising 32 environmental L, pneumophila serogroup 3 isolates. The two clinical isolates. SC94 and SC97, both belonged to pulsotype U, as did 11 environmental isolates (3 scrogroup 1 and 8 scrogroup 3) originating from pools, reservoirs, the thermal water sources, and the cold water source. No profile identical to that of the clinical isolates was identified among the environmental isolates but the profile of the two clinical isolates differed by only a single band from that of five serogroup 3 environmental isolates, and were thus regarded as highly related to the latter.

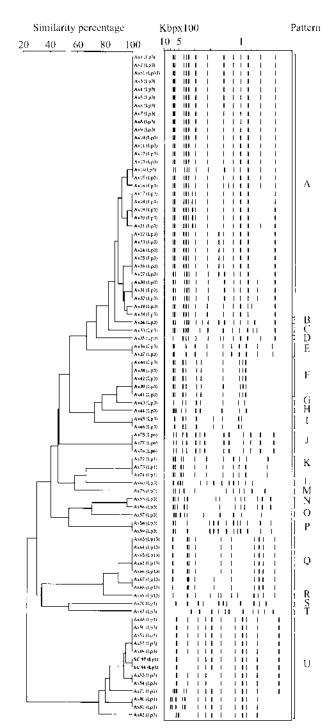


Fig. 2. Dendrogram and schematic representation of the pulsotypes of two clinical and 81 environmental isolates of *Legionella pneumophila*; the error threshold is 4%.

## RAPD patterns

To confirm the genetic relatedness of the pulsotype U isolates, the two clinical isolates and four representative pulsotype U environmental isolates were tested by RAPD. The six isolates differed from one another

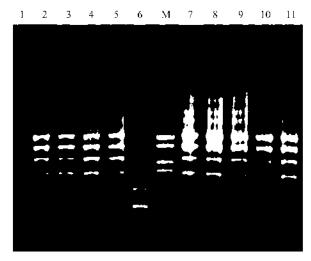


Fig. 3. RAPD patterns of clinical and selected environmental isolates from the thermal spa. Lane 1. negative control (no DNA); lanes 2 and 3. clinical isolates (SC94 and SC97); lanes 4, 8, 9 and 10, environmental isolates of serogroup 1 (A  $\times$  71, A  $\times$  80, A  $\times$  81 and A  $\times$  2); lanes 5, 6 and 7, environmental isolates of serogroup 3 (A  $\times$  52, A  $\times$  54 and A  $\times$  82); lane 11, L. pneumophila Philadelphia 1; lane M, size markers.

by a maximum of one band, whereas control isolates (one pulsotype A isolate and the reference strain ATCC 33152) differed from the six strains by 3 or 4 bands (Fig. 2). The RAPD profiles of the two clinical isolates differed from each other by one band, while clinical isolate SC97 had a RAPD profile identical to that of environmental isolate  $\Lambda \times 71$  (Fig. 3, Table 2).

#### Intra-amoebic growth rates

The six isolates tested above by RAPD were studied for their growth kinetics in culture with Acanthamoeba lenticulata. Values differed considerably among the isolates (Fig. 4, Table 2). Interestingly, clinical isolate SC94 showed a 1200% increase in cell count per amoeba, whereas clinical isolate SC97 failed to replicate. Values for the environmental and control isolates were intermediate between those of the two clinical isolates (Table 2). None of the legionella isolates grew in saline alone. Ranking of the isolates according to their intra-amoebic multiplication rate did not reveal the ascendancy of one of the two serogroups and did not correlate with the RAPD patterns (Table 2). For a selected number of cases, coculture experiments were also performed in the presence of gentamicin to remove extracellular

Strain designation	Bacterial increase per amoeba (%)	PFGE type	RAPD type
Clinical strains	<u> </u>	• •	
L. pneumophila serogroup 1 SC94	1200.84	U	Α
L. pneumophila serogroup 1 SC97	-1.10	$\mathbf{U}$	В
Environmental strains			
L. pneumophila serogroup 3 AX54	357-16	$\mathbf{C}$	C
L. pneumophila serogroup 3 AX82	103-18	U	E
L. pneumophila serogroup 1 AX71	80-23	U	В
L. pneumophila serogroup 3 AX2	21.90	Α	D
L. pneumophila scrogroup 3 AX52	17.82	U	C
Reference strain			
L. pneumophila scrogroup 1	11.26		Е
reference strain ATCC 33152			

Table 2. Characteristics of clinical strains and closely related environmental strains of L. pneumophila

legionellae. The absolute number of countable bacteria was always lower but the kinetics of growth were similar to those obtained without antibiotics (not shown).

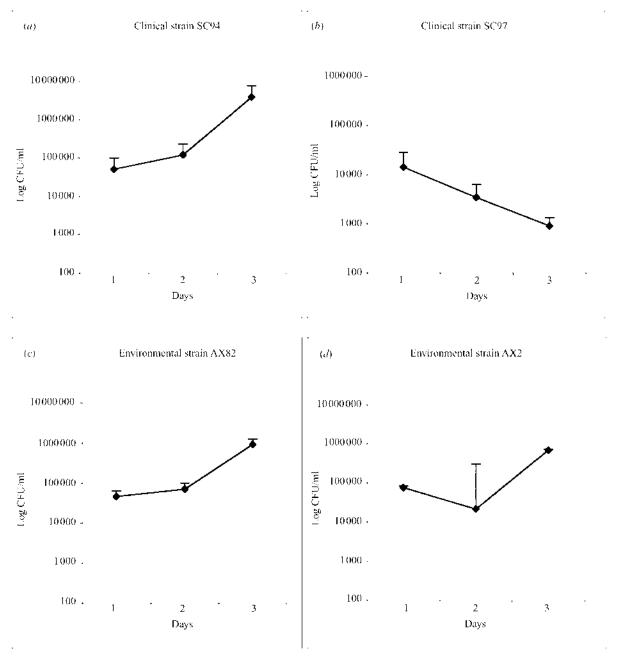
#### DISCUSSION

Despite the broad range of legionella strains recovered from the water system of this thermal spa, in terms of the number of species and pulsotypes, molecular methods (PFGE and RAPD) suggested that a single strain of L. pneumophila serogroup 1 (i.e. a clone) caused two cases of legionellosis that occurred 3 years apart. However, none of the environmental isolates had a pulsotype identical to that of the clinical isolates, and the most closely related profiles were those of several serogroup 3 environmental isolates. This suggested that the serogroup 1 clinical strain may have been derived from a serogroup 3 environmental isolate with a related pulsotype. Indeed, Harrisson et al. reported that genotypically related strains of L. pneumophila could express different serogroup-specific antigens [39, 40]. Other legionella attributes, such as expression of the flagellum, are also modulated by environmental factors [41].

The presence of *L. pneumophila* scrogroup 3 along with *L. pneumophila* scrogroup 1 and *L. dumoffii* in this thermal spa had been reported in 1988 [6]; unfortunately, these environmental strains were no longer available for this study. More than 10 years later, and despite cleaning programmes and renovation of the water distribution system, the present study shows a very similar species and serogroup

distribution. It should be noted that the use of chlorine is not allowed in French thermal spas in order to preserve the characteristics of the mineral water. Long-term persistence (for up to 10 years) of the same *L. pneumophila* serogroup 6 strain in a hospital water distribution system, and its association with sporadic cases of infection, has been reported [42, 43].

The predominance of serogroup 3 in the water distribution system of this thermal spa. and the involvement of a serogroup I strain in the only two cases of legionellosis reported, suggest that the serogroup I antigen is better adapted to human infection, while the scrogroup 3 antigen may be better adapted to the aquatic environment. Acanthamoeba, which is an appropriate model for intracellular multiplication of legionella in mammalian cells [17], was thus used to study the growth of the clinical isolates and closely related environmental isolates of L. pneumophila, and its relationship with human virulence. We observed considerable variations in growth rates, even between isolates from the same serogroup (Table 2). Furthermore, the isolate recovered from the patient who died grew rapidly in amoebae, although a differential uptake capacity could play a role, while the other, isolated from the patient who survived, failed to grow at all. Co-culture with macrophages might have given different results. Although patient 1 and 2 had different underlying health problems, our results show that macrorestriction analysis is unable to distinguish between strains with high and low virulence in humans. RAPD, which is an additional discriminatory method to PFGE [42-45], showed that the two clinical strains



**Fig. 4.** Growth kinetics of clinical and selected environmental isolates in acanthamoeba. Panel (a), clinical strain SC94; Panel (b), clinical strain SC97; Panel (c), environmental isolate of serogroup 1 (AX82); Panel (d), environmental isolate of serogroup 1 (AX2). Results are given in log c.f.u./ml. with mean type errors.

differed by only one band, possibly corresponding to a genomic domain involved in virulence. Cloning and sequencing of this 0·6 kb RAPD fragment revealed at least one significant 124-amino-acid open reading frame with homology with *Thiosphaera pantotropha* nitrite reductase [identities = 12/49 (24%), positives = 25/49 (50%)] (http://www.ncbi.nlm.nih.gov/BLAST/) (data not shown). This potential gene will now be expressed in legionella hosts to test its effect in the amoebic co-culture model.

## ACKNOWLEDGEMENTS

This work was supported by an INSERM grant (EN98-12, programme Evironnement et Santé).

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- geneous Legionella pneumophila serogroup 1 isolates: implications for the investigation of outbreaks of Legionnaires' disease. Epidemiol Infect 1990; 104: 171–80.
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From: Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP)

**Sent:** 1 Oct 2019 16:28:48 +0000

To: Kozak-Muiznieks, Natalia A. (CDC/DDID/NCIRD/DBD);Smith, Jessica

(CDC/DDID/NCIRD/DBD);Ritter, Troy (CDC/DDNID/NCEH/DEHSP);Lucas, Claressa

(CDC/DDID/NCIRD/DBD)

**Subject:** RE: Hot Springs and Water management plans

Super helpful.	(p)(2)	
	(b)(3)	•
(p)( <del>3</del> )	Are others interpreting this the same?	
	(p)(3)	
	(p)(3)	

(b)( <del>5</del> )
From: Kozak-Muiznieks, Natalia A. (CDC/DDID/NCIRD/DBD) <a href="https://docs.ps/">http2@cdc.gov&gt;</a> Sent: Tuesday, October 1, 2019 11:45 AM To: Smith, Jessica (CDC/DDID/NCIRD/DBD) <lyd7@cdc.gov>; Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP) <izk0@cdc.gov>; Ritter, Troy (CDC/DDNID/NCEH/DEHSP) <tir4@cdc.gov>; Lucas, Claressa (CDC/DDID/NCIRD/DBD) <chl9@cdc.gov> Subject: RE: Hot Springs and Water management plans</chl9@cdc.gov></tir4@cdc.gov></izk0@cdc.gov></lyd7@cdc.gov>
Thank you Jess!
Just in case you haven't seen these papers/abstracts, I am forwarding what it seems the most relevant (please see attached).
(b)( <del>5</del> )
(p)( <del>3</del> )

Thank you, Natalia

From: Smith, Jessica (CDC/DDID/NCIRD/DBD) < lyd7@cdc.gov>

Sent: Tuesday, October 1, 2019 10:27 AM

**To:** Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP) < <u>izk0@cdc.gov</u>>; Ritter, Troy (CDC/DDNID/NCEH/DEHSP) < <u>tir4@cdc.gov</u>>; Lucas, Claressa (CDC/DDID/NCIRD/DBD) < <u>chl9@cdc.gov</u>>; Kozak-Muiznieks, Natalia A. (CDC/DDID/NCIRD/DBD) < <u>htv2@cdc.gov</u>>

levant:	·····	(b)( <u>5</u> )	 
		(1)(3)	
		(p)(2)	

----Original Appointment-----

**From:** Smith, Jessica (CDC/DDID/NCIRD/DBD) **Sent:** Wednesday, September 18, 2019 5:05 PM

To: Smith, Jessica (CDC/DDID/NCIRD/DBD); Said, Maria; Kesteloot, Kurt; Ritter, Troy

(CDC/DDNID/NCEH/DEHSP); Edens, William (Chris) (CDC/DDID/NCIRD/DBD)

**Cc:** Cooley, Laura A. (CDC/DDID/NCIRD/DBD); James, Allison (CDC arkansas.gov); Lucas, Claressa (CDC/DDID/NCIRD/DBD); Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP); Kozak-Muiznieks, Natalia A.

(CDC/DDID/NCIRD/DBD)

Subject: Hot Springs and Water management plans

When: Tuesday, October 1, 2019 2:00 PM-3:00 PM (UTC-05:00) Eastern Time (US & Canada).

Where: Skype Meeting

Thanks Maria and Kurt. Let's shoot for 10/1 at 2:00 pm ET, but we can move it if needed.

And please feel free to forward the invitation to Laura Miller or any other folks that you think may be interested in joining (same for the AR DOH side, Allison).

Best regards, Jessica		
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**From:** Said, Maria <<u>maria\_said@nps.gov</u>>

**Sent:** Wednesday, September 18, 2019 3:01 PM **To:** Kesteloot, Kurt <<u>kurt\_kesteloot@nps.gov</u>>

**Cc:** Smith, Jessica (CDC/DDID/NCIRD/DBD) < <a href="mailto:liver-nc-edge-nc-e

Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP) < izk0@cdc.gov>

Subject: Re: [EXTERNAL] RE: Hot Springs and Water management plans

Hi Kurt,

I think the call will focus on water management plans -- if you think the park would be interested in being part of that discussion, I think it would be fine. We can add Laura Miller and whoever else might be interested in the calendar invite once we have a day/time.

Maria

On Wed, Sep 18, 2019 at 1:49 PM Kesteloot, Kurt < <a href="mailto:kurt\_kesteloot@nps.gov">kurt <a href="mailto:

I'm fairly open that week and look forward to talking more. Should we invite a couple people from the Park?

Thank You and Very Respectfully,

Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS
Supervisory Public Health Consultant, Interior Regions 3-5
National Park Service, Office of Public Health (OPH),
601 Riverfront Drive
Omaha, NE 68102
Office Phone: 1-402-661-1718

Office Fax: 1-402-661-1719
Cell Phone: 1-202-641-0055
Email: <u>Kurt\_Kesteloot@nps.gov</u>

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"The NPS One Health Network: promoting and protecting the health of all species and the parks that we share." GREEN DOT

On Wed, Sep 18, 2019 at 11:45 AM Said, Maria < maria said@nps.gov > wrote:

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The rest of that week I'll be at the IDSA conference and could step out if need be, but it would be less ideal.

Thank you!

Maria

On Wed, Sep 18, 2019 at 11:23 AM Smith, Jessica (CDC/DDID/NCIRD/DBD) < <a href="https://lyd7@cdc.gov">lyd7@cdc.gov</a> wrote:

Hi Maria,

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Thanks, Jessica

—

#### Jessica C. Smith, MPH

Epidemiologist | Centers for Disease Control and Prevention NCIRD/DBD/Respiratory Diseases Branch 404.718.5205 | lyd7@cdc.gov

From: Said, Maria <maria said@nps.gov>

Sent: Wednesday, September 18, 2019 9:22 AM

**To:** Cooley, Laura A. (CDC/DDID/NCIRD/DBD) < whz3@cdc.gov >; Smith, Jessica (CDC/DDID/NCIRD/DBD) < lyd7@cdc.gov >; Ritter, Troy (CDC/DDNID/NCEH/DEHSP) < tir4@cdc.gov >; James, Allison (CDC arkansas.gov) < allison.james@arkansas.gov >; Kesteloot,

Kurt <kurt\_kesteloot@nps.gov>

Subject: Hot Springs and Water management plans

Hi Laura, Jessica, and Troy,

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I am including Allison, the new EIS officer for Arkansas on the thread. Dirk Haselow is no longer with the state health department.

Thanks for any thoughts on this. Hope you guys are well. Maria

--

Maria Said, MD, MHS | CDR, U.S. Public Health Service Epidemiology Branch Chief | Office of Public Health | National Park Service Address: 1849 C. Street, NW, Room 2543, Mailstop 2560 | Washington, DC 20240 Office Tel: 202-513-7151 | Email: maria\_said@nps.gov

Office Tel: 202-513-7151 | Email: maria\_said(@nps.gr Website (public): https://www.nps.gov/orgs/1878/index.htm

Website (internal): https://sites.google.com/a/nps.gov/in2-protect-and-promote-

health/home/disease-surveillance-response

\_\_

Maria Said, MD, MHS | CDR, U.S. Public Health Service

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surveillance-response

From: Kozak-Muiznieks, Natalia A. (CDC/DDID/NCIRD/DBD)  Sent: 1 Oct 2019 15:45:09 +0000  To: Smith, Jessica (CDC/DDID/NCIRD/DBD); Kunz, Jasen M.	
(CDC/DDNID/NCEH/DEHSP);Ritter, Troy (CDC/DDNID/NCEH/DEHSP);Lucas, Claressa (CDC/DDID/NCIRD/DBD)	
Subject: RE: Hot Springs and Water management plans Attachments: HotSprings2009Kurosawa.pdf, LargestHotSpringOutbreak2004.pdf, Legionella_RecWaters2018.pdf	
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(b)(a)	
(p)(2)	
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Hi all — Before this call at 2 pm today, I thought I'd pass along this guidance from Japan that seems relevant:	
(b)( <del>3</del> )	

(t	p)(3)

-----Original Appointment-----

**From:** Smith, Jessica (CDC/DDID/NCIRD/DBD) **Sent:** Wednesday, September 18, 2019 5:05 PM

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Cc: Cooley, Laura A. (CDC/DDID/NCIRD/DBD); James, Allison (CDC arkansas.gov); Lucas, Claressa (CDC/DDID/NCIRD/DBD); Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP); Kozak-Muiznieks, Natalia A.

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Sent: Wednesday, September 18, 2019 3:01 PM To: Kesteloot, Kurt < kurt\_kesteloot@nps.gov>

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arkansas.gov) <a href="mailto:allison.james@arkansas.gov">; Lucas, Claressa (CDC/DDID/NCIRD/DBD) < <a href="mailto:chi9@cdc.gov">chi9@cdc.gov</a>;

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Office Phone: 1-402-661-1718

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# Laboratory and Epidemiology Communications

# A Case of *Legionella* Pneumonia Linked to a Hot Spring Facility in Gunma Prefecture, Japan

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Legionnaires' disease, which manifests as pneumonia or the less severe Pontiac fever, has been associated with hot spring facilities and public bath houses in Japan (1). Recent studies suggest the incidence of *Legionella* pneumonia in Japan is increasing (2). Here, we describe a case of *Legionella* pneumonia and identify the probable source of infection as the water from a hot spring facility in Macbashi-shi, Gunma Prefecture, Japan.

The case involves a 64-year-old Japanese male with diabetes mellitus. In February 2008, he often used the same hot spring facility near his home. On February 20, he developed symptoms including a low-grade fever (37.0°C) and a cough. He presented at Maebashi Red Cross Hospital with a high

fever (39.6°C) on February 26 (hospital day 1), with the following clinical data: leukocyte count,  $11.3 \times 10^3/\mu L$  (normal range, 4.0–9.0  $\times$   $10^3/\mu L$ ); platelet count,  $1.36 \times 10^3/\mu L$  (1.8–3.5  $\times$   $10^3/\mu L$ ); and C-reactive protein level, 24.3 mg/dL (<0.5 mg/dL). Aspartate aminotransferase (AST) and alanine aminotransferase (ALT) were 635 U/L (normal range, 13–33 U/L) and 150 U/L (8–42 U/L), respectively. Renal function was slightly deteriorated (blood urea nitrogen [BUN] value, 28 mg/dL; normal range, 0–20 mg/dL). In addition, chest radiography showed consolidation with an air bronchogram on the bilateral lung. Collectively, the clinical data suggested bacterial pneumonia, complicated by abnormal liver function and low-grade renal failure.

He was given the standard treatment for bacterial pneumonia, including the provision of oxygen (5 L/min) and the administration of the antibiotics ciprofloxacin (600 mg/day, days 1 to 24) and sulfamethoxazole/trimethoprim (800 mg/day, days 2 to 12). The lung lesion showed improvement from hospital day 4 onwards. Aspirated sputum samples were

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collected and examined by bacterial culture using WYO $\alpha$  agar (Eiken Chemical Co., Ltd, Tokyo, Japan). Legionella pneumophila antigen was detected in a urine sample using an immunochromatographic assay (Duopath Legionella; Merck KGaA, Darmstadt, Germany) and the bacterium was isolated from the patient's sputum. A diagnosis of Legionella pneumonia was therefore confirmed.

Epidemiological data regarding the patient's visit to the hot spring and the subsequent detection and isolation of *L. pneumophila* led the patient's physician to suspect the site of the infection was contaminated water at the hot spring facility. The physician filed with Gunma Prefectural Maebashi Health Center a surveillance report of *L. pneumophila* infection possibly linked to a hot spring.

To confirm the source of L. pneumophila, we collected water samples from the relevant hot spring and examined the sample using GVPC agar (bioMérieux, Marcy l'Etoile, France). L. pneumophila was detected in the water sample. The isolates of L. pneumophila from the patient and hot spring water were identified as serogroup (SG) 1. Using polymerase chain reaction (PCR), we genotyped these isolates as previously described (3,4). In addition, the PCR products, or amplicons, were examined by agarose gel electrophoresis and the isolates from the patient and hot spring water were genotyped as L. pneumophila (Fig. 1). We then performed pulsed-field gel electrophoresis (PFGE) with endonuclease Sfil, as previously described (5). PFGE band patterns between isolates taken from the patient and the hot spring water were conclusively matched (Fig. 2), and the isolates were genotyped as L. pneumophila (SG1). On the basis of these data, the hot spring operators were deemed in violation of the Public Bath House Law (Issue 7, Item 1) and the Director of the Gunma Prefectural Maebashi Health Center ordered the bath house to close for 2 weeks.

L. pneumophila is the causative agent of Legionella pneumonia and Pontiac fever. This pathogen parasitizes amoeba

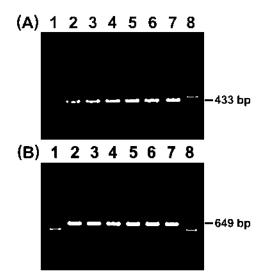


Fig. 1. Agarose gel electrophoresis of the PCR products. (A) Genus Legionella 16S rRNA gene 433 bp. (B) L. pneumophila macrophage infectivity potentiator gene 649 bp. Amplicons were electrophoresed on a 1.5% agarose gel. Lanes 1 and 8. Marker (100-bp DNA Ladder): Lanes 2, 3, and 4, amplicons derived from isolates of hot spring water; Lanes 5 and 6, amplicons derived from the patient; Lane 7, amplicons derived from ATCC 33152 strain used as a standard.

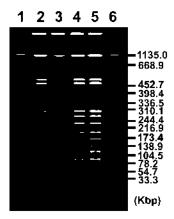


Fig. 2. Photographs of PEGE band patterns of isolates using an endonuelease Sfil eleaved genomic DNAs. Lanes 1 and 6, Molecular size marker; Lanes 2 and 3, PEGE band patterns of isolates derived from hot spring water; Lanes 4 and 5, PEGE band patters of isolates derived from the patient.

(Acanthamoeba castellanii), and it is thought that hot spring water and cooling-tower water provide favorable conditions for the propagation of the amoeba and the pathogen (6). Legionella pneumonia may, therefore, be caused by the inhalation of water aerosols contaminated with L. pneumophila (7). In Japan, the majority of Legionella pneumonia cases are caused by hot spring water contaminated with L. pneumophila. Consequently, most Japanese hot spring facilities are now equipped with an engineered closed-water circulation system. When the disinfection of the circulating hot spring water is inadequate, carrier amoebas and L. pneumophila may propagate and disseminate.

The case reported here should serve as an important reminder of the risk posed by public water systems as well as of the need for hot spring water facilities to disinfect against *L. pneumophila* and to operate closed water circulation systems to guard against this life-threatening pathogen.

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# [An outbreak of legionellosis in a new facility of hot spring bath in Hiuga City].

[Article in Japanese] Yabuuchi E<sup>1</sup>, Agata K.

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# **Abstract**

Following cerebrating ceremony in 20 June 2002, for the completion of Hiuga Sun-Park Hot Spring Bath "Ofunade-no-Yu" facilities, Miyazaki Prefecture, Kyushu Island, 200 neighbors were invited each day to experience bathing on 20 and 21 June. The Bath "Ofunade-no-Yu" officially opened on 1 July 2002. On 18 July, Hiuga Health Center was informed that 3 suspected Legionella pneumonia patients in a hospital and all of them have bathing history of "Ofunade-no-Yu". Health Center officers notified Hiuga City, the main proprietor of the Bath business, that on-site inspection on sanitary managements will be done next day and requested the City to keep the bath facilities as they are. On 19 July, Health Center officers collected bath water from seven places and recommended voluntary-closing of "Ofunadeno-Yu" business. Because of various reasons, Hiuga City did not accept the recommendation and continued business up to 23 July. Because Legionella pneumophila serogroup 1 strains from 4 patients' sputa and several bath water specimens were determined genetically similar by Pulsed Field Gel Electrophoresis of Sfi I-cut DNA. "Ofunede-no-Yu" was regarded as the source of infection of this outbreak. On 24 July, "Ofunade-no-Yu" accepted the Command to prohibit the business. Among 19,773 persons who took the bath during the period from 20 June to 23 July, 295 became ill, and 7 died. Among them, 34 were definitely diagnosed as Legionella pneumonia due to L. pneumophila SG 1, by either one or two tests of positive sputum culture, Legionella-specific urinary antigen, and significant rise of serum antibody titer against L. pneumophila SG 1. In addition to the 8 items shown by Miyazaki-Prefecture Investigation Committee as the cause of infection. Hiuga City Investigation Committee pointed out following 3 items: 1) Insufficient knowledge and understanding of stuffs on Legionella and legionellosis; 2) Residual water in tubing system after trial runs might lead multiplication of legionellae in it; and 3) Inadequate disinfection and washing for whole circulation system prior the experience bathing. The Hiuga City Committee directed 24 measures to improve the sanitary condition of the facility

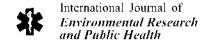
including following 5 items. 1) Fix the manual for maintenance and management of the bath. 2) Keep sufficient overflow of bath water. 3) Put disinfection of filters into practice. 4) Precise measurement and control of the residual chlorine concentration in bath water. 5) Replacement of filtrating material from crushed porous ceramic into natural sand.

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Article

# Legionellosis Associated with Recreational Waters: A Systematic Review of Cases and Outbreaks in Swimming Pools, Spa Pools, and Similar Environments

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Abstract: Legionella spp. is widespread in many natural and artificial water systems, such as hot water distribution networks, cooling towers, and spas. A particular risk factor has been identified in the use of whirlpools and hot tubs in spa facilities and public baths. However, there has been no systematic synthesis of the published literature reporting legionellosis cases or outbreaks related to swimming/spa pools or similar environments used for recreational purposes (hot springs, hot tubs, whirlpools, natural spas). This study presents the results of a systematic review of the literature on cases and outbreaks associated with these environments. Data were extracted from 47 articles, including 42 events (17 sporadic cases and 25 outbreaks) and 1079 cases, 57.5% of which were diagnosed as Pontiac fever, without any deaths, and 42.5% were of Legionnaires' disease, with a fatality rate of 6.3%. The results are presented in relation to the distribution of Legionella species involved in the events, clinical manifestations and diagnosis, predisposing conditions in the patients, favourable environmental factors, and quality of the epidemiological investigation, as well as in relation to the different types of recreational water sources involved. Based on the epidemiological and microbiological criteria, the strength of evidence linking a case/outbreak of legionellosis with a recreational water system was classified as strong, probable, and possible; in more than half of the events the resulting association was strong.

**Keywords:** *Legionella* spp.; Legionnaires' disease; Pontiac fever; recreational water; hot tubs; whirlpools; spa pools; swimming pools

# 1. Introduction

Legionellosis is a disease transmitted through the inhalation of particles of aerosolized water contaminated by the opportunistic waterborne pathogen, *Legionella* spp. [1]. After the first recognition of legionellosis in 1976, when 221 participants of the annual convention of the American Legion contracted pneumonia and 34 of them died, surveillance systems were developed and implemented in several countries [2]. Legionellosis surveillance is a current public objective: In 2015, according to the European Centre for Disease Prevention and Control surveillance, 7034 cases were reported in Europe, concerning 1.4 cases per 100,000 inhabitants [3].

The majority of outbreaks described in the literature are correlated to *Legionella pneumophila*, in particular serogroup 1, but other serogroups and species were also associated to human disease, such as *L. micdadei* (now classified as *Tatlockia micdadei*), *L. dumoffii*, and *L. longbeachae* [4]. The two fundamental clinical pictures determined by these infective agents are Legionnaires' disease (LD) and Pontiac fever (PF): The former is generally characterized by an acute pneumonia and, rarely, by an extrapulmonary disease; Pontiac fever is a mild, self-limiting, flu-like illness, which resolves in a few days.

Legionella spp. are widely distributed in both natural (i.e., lakes, rivers, groundwater, thermal water) and man-made aquatic environments, such as the water systems of hospitals, hotels, private houses [5,6], cooling towers [7], dental units [8,9], and recreational [10,11] or therapeutic [12,13] facilities. Any system or equipment which contains, stores, or re-circulates non-sterile water that can be aerosolized is a source of legionellosis [14,15]. Considering these elements, the recreational use of water is an important potential way of exposure to Legionella spp., especially in hot water pools equipped with hydromassage systems. A recent review on outbreaks of LD and PF highlights that 14% of the reported outbreaks from 2006 to 2017 recognized pools or spas as an attributed or suspected source [16]. The role of these recreational facilities appears even more significant if one considers the growing popularity of private hot tubs and the increasing number of people frequenting public spa pools and similar environments.

Generally, the outbreak analysis and control measures, specific for each exposure setting, are essential tasks of Public Health Authorities, including outbreak surveillance and analysis specifically dedicated to the recreational water context. Epidemiological knowledge about these themes must be constantly updated. To our knowledge, no systematic synthesis or critical appraisal exists of the published literature reporting sporadic cases or outbreaks of LD and/or PF associated with recreational water. In the present study, we performed a systematic review and analysis of investigations on legionellosis cases or outbreaks related to treated and untreated recreational water, including natural waters, swimming pools, spa pools, and similar environments (hot tubs, whirlpools, hot spring baths, etc.), in accordance with the definitions given for these environments by World Health Organization (WHO) guidelines [17].

# 2. Materials and Methods

In line with the objective of the study, we set out to perform a systematic review of cases and outbreaks of LD and PF associated with recreational aquatic environments, such as swimming and spa pools or natural spas. The literature search was conducted in Medline, including publications from 1 January 1977 (since the disease was first described in 1976) to 31 May 2018, using the following search terms: (Legionella OR legionellosis OR "Pontiac fever" OR "Legionnaires" disease") AND (case\* OR cluster\* OR outbreak\* OR infection\* OR investigation OR surveillance) AND ("recreational water" OR spa OR pool OR "swimming pool" OR "hot tub" OR whirlpool OR bath OR "swim spa" OR "turkish bath" OR sauna OR Jacuzzi OR "natural spa" OR "hot spring" OR "thermal spring" OR "warm spring" OR spring OR thermal). The literature search was conducted without language restrictions, on the condition that the articles had an exhaustive abstract in English reporting the information of interest. A further selection of relevant publications was performed using the inclusion and exclusion criteria listed below.

Inclusion criteria:

- Primary studies describing cases/outbreaks of LD or PF originating from recreational water.
  - Exclusion criteria:
- Not recreational water (hot water system, cooling tower, fountain, network water, therapeutic water, water births);
- environmental studies without cases;
- not primary studies;

- articles focused only on clinical and laboratory aspects;
- abstract not available/ not complete or not exhaustive;
- articles focused on pools used for display only (retail premises, fairs, exhibitions, shows);
- articles evaluating only microbiological risk assessment; and
- hot tubs or pools on cruise ships (due to a recently published systematic review) [18].

Two researchers independently screened titles and abstracts to identify potentially relevant articles and to exclude articles incompatible with the first five exclusion criteria; any disagreements were resolved by discussion with a third author. After the application of the first five exclusion criteria, the full texts of the remaining articles were examined, and any publications exclusively focused on display spas were then excluded, since this type of exposure in environments used for retail premises, fairs, exhibitions, and shows is not directly linked to recreational use. The remaining articles were assigned to three categories related to three different recreational facilities or sources of infection:

- (a) Private hot tub and similar facilities;
- (b) public pools and spas and similar facilities, generally supplied by municipal network water; and
- (c) spa facilities supplied by natural water, or hot spring/thermal water. Subsequently, we applied the last two exclusion criteria to each category.

Data extracted from these publications included: Year, country, case definition, clinical form, type of event (sporadic case or outbreak), number of cases, attack rate, number of hospitalizations and/or deaths, risk factors, laboratory diagnosis, *Legionella* spp. involved, environmental isolates and concentrations (cfu/L), type of recreational water, water supply, and the type of epidemiological study carried out (descriptive, analytical, presence/absence of environmental investigation). An event with multiple cases (at least two) linked in space and time, with a suspected common source, was defined as an outbreak. For each event (both sporadic cases and outbreaks), epidemiological and microbiological criteria were adopted to characterize the strength of evidence linking the legionellosis event with the suspected recreational water system. Table 1 summarizes these criteria.

Table 1. Strength of evidence linking a case/outbreak of legionellosis with a recreational water system.

Strength of Evidence	Epidemiological and Microbiological Criteria		
Strong	<ul> <li>An analytical epidemiological study demonstrates a significant association between case/outbreak of legionellosis and exposure to the recreational water; and</li> <li>the same species and serogroups of <i>Legionella</i> spp. are isolated from the water system at any concentration.</li> </ul>		
	<ul> <li>Descriptive epidemiology suggests that the case/outbreak is related to the recreational water and excludes obvious alternative explanations; and</li> <li>Legionella spp. are isolated from the water system at any concentration and environmental isolates show identical genotype profiles of clinical isolates.</li> </ul>		
Probable	<ul> <li>An analytical epidemiological study demonstrates a significant association between case/outbreak of legionellosis and exposure to the recreational water; and</li> <li>Legionella spp. are not isolated from the recreational water.</li> </ul> Or		
	<ul> <li>Descriptive epidemiology suggests that the case/outbreak is related to the recreational water and excludes obvious alternative explanations; and</li> <li>the same species and serogroups of <i>Legionella</i> spp. are isolated from the water system at any concentration.</li> </ul>		
Possible	<ul> <li>Descriptive epidemiology suggests that the case/outbreak is related to exposure to the recreational water and excludes obvious alternative explanations; and</li> <li>Legionella spp. are not isolated from the recreational water.</li> </ul>		

Data were analysed as the frequency distribution of the different variables included.

#### 3. Results

Of the 326 articles retrieved from Medline, 259 were excluded for the following reasons: 99 investigations did not refer to recreational water, 82 were environmental studies without cases, 4 were not primary studies, 68 articles were focused only on clinical and laboratory aspects, and 6 publications were in a language other than English and did not have an exhaustive English abstract, as shown in Figure 1.

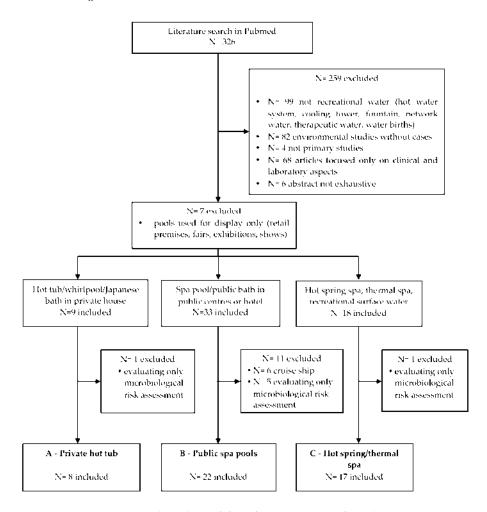


Figure 1. Flow chart of the selection process of articles.

At the end of the selection process, 47 articles were considered eligible for inclusion in the present review, corresponding to 42 events. In four cases, different articles described varying aspects of the same event, while two articles reported two and three different events, respectively. Among the 42 events of legionellosis, eight were linked to a hot tub/whirlpool/Japanese bath used in private houses (Category A in Figure 1, in brief "private hot tub"), 22 were related to whirlpool spa/baths in public centres and hotels (Category B in Figure 2, in brief "public spa pools"), and 12 to hot spring/thermal spa pools (Category C in Figure 1, in brief "hot spring/thermal spa").

The selected articles were published: Four in the 1980s, 16 in the 1990s, 19 in the 2000s, and three from 2010 to 2018. In 11 articles, the authors did not report the date of onset. The events occurred in different countries across the world, with the highest frequency of hot spring related events in Japan (83.3%) and an overall highest frequency in Japan (18 events: 42.9%), followed by the USA (11 events: 26.2%), and the United Kingdom (4 events: 9.5%).

### 3.1. Legionellosis in Relation to Recreational Water Source

Table 2 shows all events and cases of legionellosis associated with recreational water systems, distinguished per facility category. Of the 1079 total cases included in the 42 events, 57.5% were diagnosed as PF, without any deaths, and 42.5% were of LD, with a fatality rate of 6.3%.

Table 2. Events of Pontiac fever (PF) and Legionnaires' disease (LD) associated with recreational water.

Characteristics of the Events	Hot Tub/Whirlpnol/Japanese Bath in Private House (8 Events)	Spa Pools/Public Baths in Public Centres or Hotels (22 Events)	Hot Spring Spa, Thermal Spa, Recreational Surface Water (12 Events)	Total Recreational Waters (42 Events)
Number of events with single cases	5	2	10	17
Number of outbreaks or events with repeated cases a	3	20	2	25
Number of total cases	28	741	307	1079
Median number of cases per outbreak (range)	6 (4–13)	23.5 (3–170)	148.5 (2-295)	23 (2-295)
Total number of PF cases (fatal cases)	22 (0)	598 (0)	0	620 (0)
Total number of LD cases (fatal cases)	6 (1)	146 (16)	307 (12)	459 (29)
Fatality rate on total cases (on LD cases)	3.6% (16.7%)	2.2% (11.4%)	3.9% (3.9%)	2.7% (6.3%)
Analytical epidemiology in outbreak investigation (% of total outbreaks)	0 (0%)	8 (40.0%)	1 (50.0%)	9 (36.0%)
Events with environmental investigation (% of total events)	6 (75.0%a)	20 (90.9%)	9 (75.0%)	35 (83.3%)
Legionella spp. detected in environmental water samples (% of total events)	4 (50.0%)	20 (90.9%)	8 (66.7%)	32 (76.2%)
Identical Legionella genotype in clinical and environmental isolates (% of total events)	1 (12.5%)	6 (27.3%)	7 (58.3%)	14 (33.3%)
Strength of evidence				
Strong (%)	1 (12.5%)	15 (68.2°b)	7 (58.3%)	23 (52.4%)
Probable (%)	3 (37.5%)	5 (22.7%)	1 (8.3%)	9 (21.4%)
Possible (%)	4 (50.0%)	2 (9.1%)	4 (33.3%)	10 (23.9%)

<sup>&</sup>lt;sup>a</sup> 22 outbreaks and three events with repeated cases or cluster.

The private hot tubs were all supplied by municipal network water and were subjected to a supplementary disinfection system only in two of the eight facilities involved in the legionellosis events. Single cases occurred in five events (62.5%) corresponding to 17.9% of cases, while the remaining three events were outbreaks with a low number of persons involved (from four to 13). LD represented 21.4% of the cases, with a fatality rate of 16.7%.

Public spa pools were generally supplied by municipal network water and only three out of 22 facilities had their own supply system from groundwater (two spa pools) and mountain spring water (one spa pool). In 54.5% of the facilities, water treatment included recycling, filtering, and chemical disinfection with bromine (seven spa pools) or chlorine (five spa pools). In the remaining public spa pools, water disinfection was not mentioned. Public spa pools were responsible for the highest number of events (22), cases (744), and deaths (16). A sporadic case only occurred in 9.1% of the events, while the remaining events were outbreaks often involving a high number of cases of up to 170 [19]. The LD cases formed 19.6% of the total cases, with a fatality rate of 11.0%.

Hot spring/thermal spas were supplied by natural waters, i.e., hot springs and thermal waters. This group also includes the only LD case associated with bathing in surface water. This was a fatal case in a 27-year-old woman who had nearly drowned in estuarine water [20]. Water treatment and chlorine disinfection were reported in only three out of the 11 hot spring/thermal water facilities (27.3%), while, in one case, the authors specified that national regulations (France) precluded the addition of chemicals to thermal spas to preserve the characteristics of the mineral water [21]. All cases linked to this recreational water category were diagnosed as LD, with a fatality rate of 3.9%. Single cases occurred in 83.3% of the events and only two outbreaks were reported. However, one of these was the largest outbreak of LD associated with a hot spring bathhouse in Japan, with 295 cases, including confirmed and probable cases [22].

#### 3.2. Epidemiological Investigations

All the events with sporadic cases were studied by descriptive epidemiology. The epidemiological investigations included an analytical study in 36.0% of outbreaks, with higher percentages in events linked to public spa pools (40.0%) and hot spring/thermal water (50%), compared to private hot tubs (no events with an analytical study). An environmental investigation was carried out in 83.3% of events (private hot tubs and hot spring/thermal water: 75%; public spa pools: 90.9%) and allowed the detection of *Legionella* spp. in 76.2% of the incriminated water sources and to evidence identical molecular profiles of both clinical and environmental isolates in 33.3% of the events. Based on the epidemiological and microbiological criteria specified in Table 1, the strength of evidence linking the case/outbreak of legionellosis with the recreational water system was strong in 23 events (52.4%), with percentages higher for public spa pools (68.2%) and hot spring/thermal water (58.3%) compared to private hot tubs (12.5%). This was a consequence of the previously mentioned differences regarding both the implementation of analytic epidemiology and the detection of environmental *Legionella* spp., which were carried out less frequently in private hot tub related events.

## 3.3. Events with Sporadic Cases of Legionellosis

Sporadic cases of legionellosis occurred in 17 distinct events, only one of PF [23] and 16 of LD (Table 3), with a fatality rate of 29.4% (31.2% for LD cases). Most cases occurred in Japan (70.6%) [24–35], and hot spring/thermal waters (56.2%) were the facilities most involved, followed by private hot tubs (25%). Only two cases occurred in spa centres/public baths [35,36]. Four cases, three of which fatal, were consequent to near drowning [20,32,35,37] and one case involved a 10-year-old girl, subjected to immunosuppressive therapy for hemosiderosis after being exposed several times to the hot tub in her maternal home [38].

Etiological diagnosis was confirmed by culture of clinical specimens in 75.0% of LD cases and *L. pneumophila* was the species most frequently involved, in particular *L. pneumophila* SG 6 (31.2% of LD cases). No differences were observed on the onset of cases in relation to the different concentrations of legionellae detected from the suspected water sources. Genotyping of clinical and environmental isolates was performed in seven out of 17 events. In accordance with the microbiological criteria specified in Table 1, the strength of evidence linking the cases with the recreational water system was strong in all the cases confirmed by molecular typing (43.7% of LD cases).

**Table 3.** Events with sporadic cases of Pontiac fever (PF) and Legionnaires' disease (LD) associated with recreational water.

	Pontiac Fever (1 Event) <sup>a</sup>	Legionnaires' Disease (16 Events) <sup>b</sup>
Number of cases (fatal cases)	1 (0)	16 (5)
Gender		
Males		9
Females		6
Not reported	1	1
Median age (range)	37	56.5 (10-88)
Confirmation by culture in clinical specimen	0	12 (75.0%)
Legionella species and serogroup		
L. pneumophila SG 1	0	3 (18.7%)
L. pneumophila SG 2	0	1 (6.2%)
L. pneumophila SG 3	0	2 (12.5%)
L. pneumophila SG 4	0	1 (6.2%)
L. pneumophila SG 6	0	5 (31.2%)
L. pneumophila SG 13	0	2 (12.5%)
L. pneumophila (SG not reported)	1 (100%)	1 (6.2%)
L. rubriluceus	0	1 (6.2%)

Table 3. Cont.

	Pontiac Fever (1 Event) <sup>a</sup>	Legionnaires' Disease (16 Events) <sup>b</sup>
Environmental source		
Private hot tub	1	4 (25.0%)
Public and hotel spa	0	2 (12.5%)
Hot spring/thermal spa	0	9 (56.2%)
Estuarine water	0	1 (6.2%)
Legionella colonization		
<1000 cfu/L	0	2 (12.5%)
1000-10,000 cfu/L	0	2 (12.5%)
>10,000 cfu/L	0	2 (12.5%)
Not reported	1 (100%)	11 (68.7%)
Identical Legionella genotype in clinical and environmental isolates	0	7 (43.7%)
Strength of evidence		
Strong (%)	0	7 (43.7%)
Probable (%)	1 (100%)	2 (12.5%)
Possible (%)	0	7 (43.7%)

[23]; b [20,24-38].

# 3.4. Outbreaks of Legionellosis

A total of 25 outbreaks of legionellosis were found: 7 outbreaks of PF (Table 4), 11 outbreaks of LD (Table 5), and 7 mixed events of PF and LD (Table 6). Among the LD events, two were repeated cases on the same site, which occurred in different time periods (No. 2, 3 in Table 6), and one was a long-lasting outbreak with three consecutive clusters (No. 10 in Table 6).

The total number of outbreak cases was 1062, of which 619 were PF cases (58.3%) and 443 were LD cases (41.7%), with 24 deaths (total fatality rate: 2.3%, for LD: 5.4%). Most events occurred in public spas (20/25 outbreaks, 80%), particularly in whirlpool spas of hotels or similar residential facilities, such as inns and holiday resorts (11 of 25 outbreaks, 44%). The attack rate varied from 29.8% to 86.7% for PF outbreaks and from 0.13% to 1.9% for LD outbreaks.

Etiological diagnosis was confirmed by culture of clinical specimens in 10 out of 11 outbreaks of LD and in one out of seven mixed events of PF and LD (61.1% of total events with LD cases), while it was never performed in PF outbreaks. *L. pneumophila* was the species most frequently involved, in particular *L. pneumophila* SG 1 in 68% of total outbreaks (83.3% of outbreaks with LD cases) and SG 6 in 24% of total outbreaks (27.8% of outbreaks with LD cases). In three events, various species or serogroups were identified as responsible for the disease by culture and/or serological assay.

Environmental isolates of *Legionella* spp. were obtained in 22 outbreaks (88%), in seven of which various species or serogroups were detected (28%). Genotyping of clinical and environmental isolates was performed in 10 events (40% of total outbreaks, 55.5% of outbreaks with LD cases). In accordance with the epidemiological and microbiological criteria specified in Table 1, the strength of evidence linking the outbreak with the recreational water system was strong in 16 events (64%).

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Table 4. Outbreaks of Pontiac fever (PF) associated with recreational water.

Event No. Country, Ycar (Reference)	Water System	Legionella spp. (Confirmed Diagnosis Based on)	No. of Cases (Fatal Cases)	Attack Rate	Proportion of Males	Median Age (Range)	Environmental Isolates (cfu/L)	Strength of Evidence
1 Vermont, US, 1981 [39]	Inn whirlpool spa	L. pneumophila SG 6 (antibody titre)	34 (0)	45,9%	53.0%	27.9	L. pneumophila SG 1,6 L. dumoffii	Strong
2 Michigan, US, 1982 [40]	Public whirlpool spa (women's pool)	L. pneumophila SG 6 (antibody fitre)	14 (0)	29.8%	0	32 (25–39)	L. pneumophila SG 6	Strong
3 Colorado, US, 1992 [44]	Resort indoor whirlpool	L. pneumophila SG 6 (antibody titre)	13 (0)	38.0%	na	na	L. pneumophila SG 6 (>1,000,000)	Strong
4 Denmark, 1995 [42]	Private summerhouse whirlpool	L. pneumophila SG 1 (culture, antibody titre) L. micdadei (antibody titre)	13 (0)	86.7%	na	na	negative samples (after whirlpool cleaning)	Possible
5 Wisconsin, US, 1998 [33]	Hotel whirlpool spa	L. micdadei (antibody titre)	45 (0)	whirlpool area: 66.0% whirlpool users: 71.0%	na	na	l micdadei (90,000/L)	Strong
6 Sweden, 1999 [ <del>+</del> +]	Hotel whirlpool spa	L. micdadei (antibody titre)	29 (0)	whirlpool area: 71.0% whirlpool users: 88.9%	37.9%	41 (21–57)	negative samples	Probable
7 England, 2008 [45]	Resort whirlpool spa	L. pueumophila SG 1 (antibody titre, urinary antigen)	6 (0)	86.0%	0	(24–37)	Legionella non pneumophila (100/L)	Probable

na: Not available; clinical and environmental isolates were never compared by molecular typing.

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Table 5. Outbreaks of Legionnaires' disease (LD) associated with recreational water.

9 of 19

Event No. Country, Year (Reference)	Water System	Legionella spp. (Diagnosis Based on)	Number of Cases (Fatal Cases)	Attack Rate	Proportion of Males	Median Age (Range)	Environmental Isolates (cfu/L)	Strength of Evidence
1 Vermont, US, 1987 [≟n]	Inn whirlpool spa	L. pneumophila SG 1 (culture, antibody titre)	3 (0)	na	na	na	L. pneumophila SG 1,4	Strong
2 Netherlands 1992–96 [17]	Public spa sauna's footbath	l., pneumophila SG 1 (culture)	6 repeated cases (2)	na	83.3°6	males: 50 females: 28	L. pueumophila SG 1	Strong
3 France 1994–97 [21]	Thermal spa	L. pneumoplula SG 1 (culture)	2 repeated cases (1)	na	50%	54.5 (40-69)	L. pneumophila SG 1,2,3,6,9,13 L. dumoffii	Strong
4 Japan, 1996 [48]	Public Japanese spa	L. pneumophila SG 1 (antibody titre)	3 (0)	na	na	па	L. pucumophila SG 1	Probable
5 Japan, 2000 [27]	Public bath house	L. pneumophila SG 1,6 (culture, antibody titre, urinary antigen)	23 (2)	0.13%	91.3%	67 (50–86)	L. pnetonophila SG 1 (880,000)	Strong
6 Japan, 2000 [≟9,5.1]	Public bath house	L. pneumophila SG 1 (culture, antibody titre, urinary antigen)	34 (20 confirmed) (3)	0.20°6	65.0% (only confirmed)	62.2 (27–85)	L. pneumophila SG 1,3,5,6 (11400–84200)	Strong
7 Japan, 2002 [23,31–35]	Hot spring bath	L. pneumophila SG 1 (culture, antibody titre, urinary antigen)	295 including suspected cases (7)	1.5°°	64.5% (of 76 examined)	65 (9-95)	L. pneumophilu SC 1,8 (1,600,000) L. dumoffii (5,200,000) L. londiniensis (15,000,000)	Strong
8 Japan, 2003 [27]	Public bath house	L. pneumophila SG 1 (culture)	9 (1)	0.13%	na	65 (52–82)	L. pnetonophila SG 1 (1,300,000)	Probable
9 France, 2010 [56]	Public whirlpool spa	L. pneumophila SG 1 (culture, urinary antigen)	3 (1)	na	33.3%	50 (30-70)	1 pneamophila SG 1 (150,000)	Strong
10 Spain, 2011–12 [37]	Hutel spa pool	L. pneumophila SG 1 (culture)	Total: 44 (6) Cluster1: 21 Cluster2: 2 Cluster3: 3 Cluster4: 18	na	na	tourists: 71.5 hotel workers: 49.5	L. pucumophila SG 1 L. micdadei	Strong
11 Japan, 2015 [38]	Spa house (men's pool)	t., pneumophila SG 1,13 (culture)	7 (0)	na	100%	66.3	L. pneumophila 5G 1,13	Strong

na: Not available; clinical and environmental isolates showed correlated molecular profiles in events No. 1, 2, 3, 5, 6, 7, 9, 10, and 11.

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Table 6. Outbreaks of Pontiac fever (PF)/Legionnaires' disease (LD) associated with recreational water.

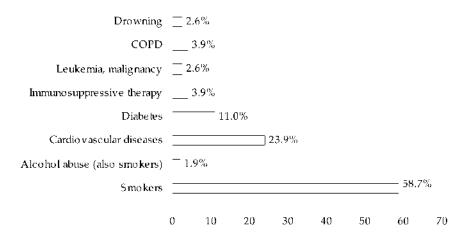
Event No. Country, Year (Reference)	Water System	Legionella spp. (Diagnosis Based on)	Number of Cases PF + LD (Fatal Cases)	Attack Rate	Proportion of Males	Median Age (Range)	Environmental Isolates (cfu/L)	Strength of Evidence
1 Scotland, 1987–88 [19,59]	Hotel whirlpool spa	L. micdadei (antibody titre)	169 + 1 (0)	90.9% (LD: 0.5%)	48.8%	32 (2–72)	L. micdadei	Probable
2 Vermont US, 1991 [60]	Private hot tub in holiday home	L. pnenmophila SG 1 (antibody fitre)	5 + 1 (0)	na	na	na	not investigated	Possible
3 Georgia US, 1999 [△1]	Hotel whirlpool spa	L. pneumophila SG 6 (culture, antibody titre, urinary antigen)	22 + 2 (0)	22.0% (LD: 1.8%)	na	PF: 12 (5-31) LD: 66 (61-71)	L. pneumophila SG 6	Strong
4 Illinois US, 2002 [62]	Hotel spa area	L. micdadei L. maceachernii (antibody tit <b>re</b> )	49 + 1 (0)	62.7% (LD: 1.2%)	46%	20 (2-58)	L. micdadei I maceachernii L. dumoffii	Strong
5 Oklaoma US, 2004 [⇔]	Hotel pool and hot tub area	L. pneumophila SG 1 (antibody titre, urinary antigen)	101 + 6 (0)	33.7% (LD: 1.9%)	PF: 43.6% LD: 100%	PP: 15 (2-65) LD: 6.5 (2-44)	L. pneumophila SG 1	Strong
6 England, 2006 [⊕1]	Leisure club spa pool	I., pneumophila SG 1 (antibody titre, urinary antigen)	116 + 2 (0)	па	PF: 41.4% LD: 100%	(18–85)	L. pneumophila SG 1	Probable
7 Netherlands, 2009 [6::]	Private outdoor whirlpool spa	L. pneumophila SG 1 (antibody titre, urinary antigen)	3 + 1 (1 LD)	na	PF: 66.7% LD: 0%)	PF: 54 (52–83) LD: 78	L. pneumophila SG 1	Probable

na: Not available; clinical and environmental isolates showed correlated molecular profiles in the event No. 3.

# 3.5. Patient Contributing Factors

PF cases showed no evidence of underlying risk factors. The median age of the PF patients, when reported, varied from 12 to 54 years and, overall, males and females were affected with a similar frequency.

LD patients were males in 60% of sporadic cases (Table 3) and in 71.9% of outbreaks, considering only the events reporting gender distribution. The median age was 56.5 years (range: 10–88) in sporadic cases and over 60 years in nine of the 13 LD outbreaks in which the age data was reported. Patient risk factors and underlying medical conditions were specified in 24 of the 34 LD events (71.3%), for a total of 155 cases. Figure 2 shows the occurrence of contributing factors and underlying medical conditions in these patients. Heavy smoking was the most frequent risk factor (58.7% of patients) and, among the underlying medical conditions, cardiovascular diseases (23.9%) and diabetes (11.0%) had the highest prevalence. Four cases of *Legionella* pneumonia occurred after near drowning, one in estuarine water and three in hot spring spas and public baths.

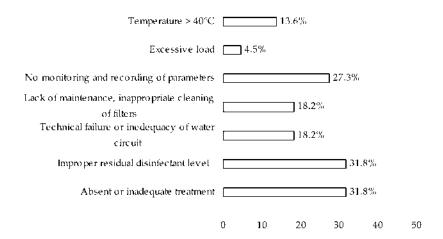


**Figure 2.** Distribution of underlying medical conditions and risk factors in 155 cases of Legionnaires' disease.

# 3.6. Environmental Contributing Factors

Excluding the only sporadic case related to estuarine water, environmental contributing factors were investigated in 22 out of 41 events. In only one of these, no contributing environmental conditions were found. In the other 21 events, inadequate water treatment and residual disinfectant below the recommended levels were the most frequent factors that could have favoured the onset of cases or outbreaks. The water temperature was reported in only four events and in three of these the temperature was above 40 °C (Figure 3). In PF events, the most frequent environmental contributing factors were those related to plant maintenance and chemical treatment management (i.e., inappropriate residual disinfectant concentration), while the inadequacy or absence of the treatment system was observed only for LD cases or outbreaks. This could be explained by the fact that many LD events occurred in private hot tubs not subjected to a supplementary disinfection system.

*Legionella* spp. were isolated from the environmental samples of 32 facilities, at concentrations higher than  $10^3$  cfu/L in water samples obtained from 11 of them (34.4%).



**Figure 3.** Distribution of environmental contributing factors in 22 recreational facilities associated with legionellosis events.

#### 4. Discussion

This review aimed to evaluate the cases and outbreaks of legionellosis associated with exposure to recreational water since the disease was first described in 1976. Both sporadic cases and outbreaks of LD and PF, described in the scientific literature, were included. Relevant findings from 47 articles were synthesized, including 42 legionellosis events (17 sporadic cases and 25 outbreaks).

## 4.1. Temporal and Geographical Distribution

The events of legionellosis correlated with exposure to recreational water showed a non-homogeneous distribution over time. In the 1980s, only four events were reported, probably because, in these first years, there was a lower awareness of the problem and many cases were not identified or associated with exposure to recreational water. In the 1990s and 2000s, the number increased (16 and 19 events, respectively) and then declined in the years from 2010 until today (only three reported in the literature). It could be hypothesized that the increase in knowledge and awareness of risks associated with recreational water led to an improvement in the management and maintenance and control measures, also after the issuing of international guidelines on the control of legionellosis in recreational facilities. In 2006, the WHO Guidelines for safe recreational water environments recommended the implementation of safety plans and adequate control measures in pools and hot tubs [17]. Moreover, from 2005, the European Legionnaires' Disease Surveillance Network (ELDSNet, previously EWGLI), with respect to Legionella risk reduction in whirlpool spas, recommended continuous treatment with 2–3 mg/L of chlorine or bromine, the checking of these levels almost three times a day, the replacement of at least half of the water each day, sand filters backwashed daily, and cleaning and disinfection of the whole system every day [66]. The implementation of these measures could explain the reduction in the number of events in the most recent period.

The reported events of legionellosis involved 10 countries, with the highest number of events (18) and cases (385) in Japan, where the habit of frequenting hot spring spas and public baths is very widespread, following a long-established tradition in Japanese culture. Moreover, the average water temperature in hot tubs in Japan usually ranges from 40 °C to 43 °C, which is higher than in Europe (30–40 °C) [27].

### 4.2. Clinical Features and Laboratory Evidence

This review includes both PF and LD events. PF cases totalled 620, only one of which was sporadic, the others being included in 14 outbreaks. The number of PF cases related to recreational water is probably underestimated: The benign nature of the disease, which often presents as an influenza-like

illness, means that the cases, especially when sporadic, are not identified as legionellosis and are, therefore, not subjected to laboratory diagnosis. In the selected PF events, laboratory diagnosis was performed only in outbreaks, and *Legionella* spp. were never culturally isolated. On the contrary, in the events involving LD cases, cultural isolation from patients' specimens allowed the species to be identified in 75% of the sporadic cases and in 11 of the 18 outbreaks with LD cases (61.1%).

Among the different species and serogroups, *L. pneumophila* SG 1 (three sporadic cases and 15 outbreaks of LD) and SG 6 (five sporadic cases and two outbreaks of LD) were the agents most frequently responsible, while, among the other species, *L. micdadei* was implicated in three outbreaks of PF and two outbreaks of mixed PF and LD. In five events, various species or serogroups were involved [27,30,42,58,62], one of which was the first case where the same genotype of *L. rubrilucens* was isolated from the LD patient's sputum and the hot spring water [30].

This review confirms certain known characteristics of the epidemiology of legionellosis. PF cases showed no evidence of underlying risk factors and PF outbreaks had a high attack rate, with no difference between males and females. On the contrary, LD cases prevalently involved males and individuals presenting risk factors, such as smoking and all the underlying medical conditions that reduce immune defenses. In LD outbreaks, the attack rate is low and the fatality rate is high (on average, 6.3%, but up to 31.2% in events related to private hot tubs).

### 4.3. Recreational Water Facilities and Risk Assessment

Most events occurred in public spa pools (22 events, 744 cases). Of these, 10 were associated with hotels or similar residential facilities and, therefore, fall within the surveillance system for legionellosis linked to travel, which in Europe is carried out by the ELDSNet and coordinated by ECDC. The recreational facilities supplied by natural water (hot spring, thermal water) were the setting for 12 events, 10 of which with a single case. Most studies referring to hot spring/thermal spas (seven out of 11) did not specify if the water was treated or untreated and how the facility was managed; this is a limitation that makes it difficult to draw conclusions about the environmental conditions contributing to these infections.

The recommended standards for *Legionella* spp. in hot tub water range from 0/100 mL to 1000/L in different countries [67]. In the selected studies, the environmental isolates of *Legionella* spp. are reported in 32 events, but only 13 specify the level of contamination, which ranges between 100 cfu/L and >10<sup>6</sup> cfu/L. However, it should be noted that the isolation of *Legionella* spp. from environmental samples was carried out after the legionellosis event had occurred and so the environmental conditions may have changed. The lack of data on the *Legionella* concentrations in the water, and on the frequency and duration of exposure, makes it difficult to perform a risk assessment. Various studies tried to estimate the risk for *Legionella* infection due to spa pool use. Bouwknegt et al., (2013) estimated that the infection risk for sitting in an active whirlpool for 15 min ranged from around 3% for a concentration of 10 *L. pneumophila* cfu/L to up to 95% for >1000 cfu/L [68]. These findings suggest that a risk cannot be excluded even in the presence of very low concentrations, and stricter requirements may be needed to ensure adequate protection for users. Azima et al. (2013) suggested a reference value of <1 cfu/L, which is less than the current detection limit [69].

## 4.4. Epidemiological Investigation and Strength of Evidence

The epidemiological investigation included an analytical study in nine outbreaks, four with a case-control study and five with a retrospective cohort study. In all the events related to private hot tubs, only descriptive epidemiology was carried out. This is justified by the difficulty in such events to find a control group not exposed to the private hot tub. Also, sporadic cases were studied only through descriptive epidemiology (case reports).

The environmental investigation was often delayed with respect to the event onset and, in some cases, was made after control measures had already been adopted. These measures are specified only in a limited number of articles and information is lacking on the follow-up procedures in almost

all the articles. Many studies do not report the environmental conditions that could have favoured such infections. In 19 events, no information is available on the type of water treatment, the level of residual disinfectant, or the state of maintenance of the facility. Only in three events is the water temperature specified, a factor that, in these types of recreational facilities, plays a fundamental role in the development of *Legionella* spp. and was probably co-responsible for three LD cases associated with near drowning in hot spring spas and public baths [32,35,37]. Lying in or sitting up to the neck in hot water (above 40 °C), especially in combination with alcohol consumption, may cause drowsiness, which may then lead to unconsciousness and, consequently, drowning [70].

Based on the selected criteria, the strength of evidence linking the cases/outbreaks to the recreational water facilities was strong in 52.4% of events, probable in 21.4%, and possible in 23.9%. Strong evidence was principally attributable to the results of analytical study in nine events, and to the match of environmental and clinical isolates in 17 events. The comparison between strains of environmental and clinical origin using molecular biology techniques was carried out at a very high level of frequency, especially in cases concerning LD (43.7% of sporadic cases and 81.8% of LD outbreaks).

#### 4.5. Limitations

The present study was limited to articles published in English or with an exhaustive abstract in English, and only peer-reviewed literature was considered. Furthermore, the legionellosis events that are published represent only part of the overall number of cases: Larger LD outbreaks are more likely to be published than sporadic cases and smaller events, especially of Pontiac fever. Also, the review does not include cruise ship cases [18] and cases associated with display spa pools in retail premises, fairs, exhibitions, and shows [71,72], which represent another important source of infection. Therefore, the role of the recreational facilities as a source of infection is underestimated, also considering that in many LD and PF cases the source of *Legionella* remains unknown [3,16].

The heterogeneity of epidemiological investigations, in terms of study design, sample size, and information about the duration of exposure and environmental contributing factors, limited the comparison of results. In particular, the lack of information about the treatment and management of recreational facilities makes it difficult to exhaustively evaluate the role of environmental conditions.

# 5. Conclusions

Data extracted from the articles in this systematic review show that hot tubs, whirlpools, and spa pools represent an important source of infection of *Legionella* spp., given the number of cases involved (1079 from 1981 to 2015), the number of deaths (29), and the high percentage of events with strong evidence of an association. On the contrary, the risk related to the natural recreational water of rivers and lakes appears negligible: The only sporadic case reported is a case consequent to a near-drowning in estuarine water [20].

Among the cases included in this review, PF cases were the most numerous and were caused by a variety of species and serogroups: *L. pneumophila* SG 6 and *L. micdadei* were the most often responsible agents, while *L. pneumophila* SG 1 was responsible for most LD cases. Unlike PF cases, LD cases prevalently involved individuals presenting risk factors, such as smoking, and underlying medical conditions that reduce immune defenses.

Certain operating conditions that facilitate the formation of aerosol, such as the high temperature of the water and the presence of hydromassage systems, are risk factors inherent to this kind of recreational water. In hot tubs and similar facilities, it is impractical to maintain a water temperature outside the range considered at risk. Therefore, other management strategies need to be implemented, which may include appropriate design and adequate disinfection residual and proper maintenance and cleaning of equipment as well as adequate ventilation. Features, such as water sprays, should be periodically cleaned and flushed with a level of disinfectant adequate to eliminate *Legionella* spp. [3,17,67]. In this review, the environmental conditions were described for

22 events, and in 21 of these (95.5%) at least one of the preventive measures recommended by the various guidelines was not respected. Therefore, it seems important to increase collaboration between the different professionals involved (public health experts, policy makers, facility managers, technical staff, equipment manufacturers) to improve the knowledge of the operators and their awareness of the risk and to favour compliance with control measures.

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**Conflicts of Interest:** The authors declare no conflict of interest.

### **Abbreviations**

The following abbreviations are used in this manuscript:

- LD Legionnaires' Disease
- PF Pontiac Fever
- cfu colony forming unit

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From:	Smith, Jessica (CDC/DDID/NCIRD/DBD)				
Sent:	1 Oct 2019 14:26:55 +0000				
To:	Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP);Ritter, Troy				
	HSP);Lucas, Claressa (CDC/DDID/NCIRD/DBD);Kozak-Muiznieks, Natalia A.				
(CDC/DDID/NCIRD/DBC					
Subject:	RE: Hot Springs and Water management plans				
Hi all — Before this call	at 2 pm today, I thought I'd pass along this guidance from Japan that seems				
relevant:	at 2 pm today) i thought i o pass dieng this galasines hell sapari that seems				
	(b)( <u>5</u> )				
	(b)(3)				

(p)(2)	
Original Appointment From: Smith, Jessica (CDC/DDID/NCIRD/DBD) Sent: Wednesday, September 18, 2019 5:05 PM To: Smith, Jessica (CDC/DDID/NCIRD/DBD); Said, Maria; Kesteloot (CDC/DDNID/NCEH/DEHSP); Edens, William (Chris) (CDC/DDID/NCCC: Cooley, Laura A. (CDC/DDID/NCIRD/DBD); James, Allison (CDC (CDC/DDID/NCIRD/DBD); Kunz, Jasen M. (CDC/DDNID/NCEH/DEHS (CDC/DDID/NCIRD/DBD) Subject: Hot Springs and Water management plans When: Tuesday, October 1, 2019 2:00 PM-3:00 PM (UTC-05:00) Ex	CIRD/DBD) arkansas.gov); Lucas, Claressa SP); Kozak-Muiznieks, Natalia A.
Thanks Maria and Kurt. Let's shoot for 10/1 at 2:00 pm ET, but we	e can move it if needed.
And please feel free to forward the invitation to Laura Miller or are interested in joining (same for the AR DOH side, Allison).	ny other folks that you think may be
Best regards, Jessica	
Join Skype Meeting Trouble Joining? Try Skype Web App	
Join by phone	
(404) 553-8912,,12167895# (Atlanta Dial-in Conference Region) (855) 348-8390,,12167895# (Atlanta Dial-in Conference Region)	English (United States) English (United States)
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From: Said, Maria < maria\_said@nps.gov>

Sent: Wednesday, September 18, 2019 3:01 PM

To: Kesteloot Kurt skurt kesteloot@nps govo

To: Kesteloot, Kurt < <a href="mailto:kurt\_kesteloot@nps.gov">kurt < kurt\_kesteloot@nps.gov</a>
Co: Smith Lessica (CDC/DDID/NCIRD/DBD) < lyd7@cdc.gov

**Cc:** Smith, Jessica (CDC/DDID/NCIRD/DBD) < <a href="mailto:lyd7@cdc.gov">!yd7@cdc.gov">!yd7@cdc.gov</a>; Cooley, Laura A. (CDC/DDID/NCIRD/DBD) < <a href="mailto:whz3@cdc.gov">!yd7@cdc.gov</a>; Ritter, Troy (CDC/DDNID/NCEH/DEHSP) < <a href="mailto:tir4@cdc.gov">!tir4@cdc.gov</a>; James, Allison (CDC arkansas.gov) < <a href="mailto:allison.james@arkansas.gov">|tir4@cdc.gov</a>; Lucas, Claressa (CDC/DDID/NCIRD/DBD) < <a href="mailto:chl9@cdc.gov">|chl9@cdc.gov</a>; <a href="mailto:horayaranas.gov">|tir4@cdc.gov</a>; <a href="mailto:ho

Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP) < izk0@cdc.gov>

Subject: Re: [EXTERNAL] RE: Hot Springs and Water management plans

Hi Kurt,

I think the call will focus on water management plans -- if you think the park would be interested in being part of that discussion, I think it would be fine. We can add Laura Miller and whoever else might be interested in the calendar invite once we have a day/time.

Maria

On Wed, Sep 18, 2019 at 1:49 PM Kesteloot, Kurt < kurt\_kesteloot@nps.gov > wrote:

I'm fairly open that week and look forward to talking more. Should we invite a couple people from the Park?

Thank You and Very Respectfully,

Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS
Supervisory Public Health Consultant, Interior Regions 3-5
National Park Service, Office of Public Health (OPH),
601 Riverfront Drive
Omaha, NE 68102
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"The NPS One Health Network: promoting and protecting the health of all species and the parks that we share." GREEN DOT

On Wed, Sep 18, 2019 at 11:45 AM Said, Maria < maria said@nps.gov > wrote:

Fantastic.

Tuesday 10/1 is wide open for me too.

The rest of that week I'll be at the IDSA conference and could step out if need be, but it would be less ideal.

Thank you!

Maria

On Wed, Sep 18, 2019 at 11:23 AM Smith, Jessica (CDC/DDID/NCIRD/DBD) < <a href="https://lyd7@cdc.gov">lyd7@cdc.gov</a> wrote:

Hi Maria,

We're happy to reconvene to discuss WMPs at Hot Springs. Starting tomorrow Troy is going to be traveling internationally, but he's back in the office on the 30<sup>th</sup> if we could shoot for a time

that week? I'm also looping in Jasen and Claressa in case they can join too, since they bring the ASHRAE perspective and Claressa may be able to speak to the ecology of *Legionella* in this setting.

Right now it looks like Tuesday, 10/1 is wide open for us. Thurs, 10/3 we're free at 3:00 pm and then Friday, 10/4 at 1:00 pm and 3:00 pm ET.

Also, I was hoping we would have heard back from colleagues in Japan by now about any public health recommendations they have for similar settings, but unfortunately we haven't. I do think by the week of the 30<sup>th</sup> I should be able to do a quick lit review about cases and clusters associated with hot springs and can share any pertinent findings during the call.

Thanks, Jessica

\_

## Jessica C. Smith, MPH

Epidemiologist | Centers for Disease Control and Prevention NCIRD/DBD/Respiratory Diseases Branch 404.718.5205 | lyd7@cdc.gov

From: Said, Maria < maria said@nps.gov >

Sent: Wednesday, September 18, 2019 9:22 AM

**To:** Cooley, Laura A. (CDC/DDID/NCIRD/DBD) < whz3@cdc.gov>; Smith, Jessica (CDC/DDID/NCIRD/DBD) < lyd7@cdc.gov>; Ritter, Troy (CDC/DDNID/NCEH/DEHSP) < tir4@cdc.gov>; James, Allison (CDC arkansas.gov) < allison.james@arkansas.gov>; Kesteloot,

Kurt <<u>kurt\_kesteloot@nps.gov</u>>

Subject: Hot Springs and Water management plans

Hi Laura, Jessica, and Troy,

We (NPS and Arkansas) are trying to figure out the best path forward with the Hot Springs legionella cases. As you know, all the environmental testing has been negative. However, we have had a number of travel-related cases, and, based on Arkansas state data, it looks like there might be increased cases in the Hot Springs area generally compared to the rest of the state -- although these data are still being analyzed, and I would leave it to Arkansas to confirm this.

We also have considered more where the hot spring water is going -- apparently, it does not just go to the Quapaw, but it goes to a number of other concession operated businesses (including another spa) as well businesses outside park property (including a hospital therapeutic pool and at least one other hotel). One action we are considering is sending a letter to those who receive spa water and basically recommending that although we have never identified legionella in the water and don't know of any increased risk, we do know that untreated water does pose a risk for legionella growth, and businesses might want to consider a water management plan. My feeling is that it would be beneficial to them, if we have an additional case, to then be able to clearly describe their water system and the results of some pre-determined parameters (such as temperatures) over time.

If you all are available at any time, I would love to get your thoughts. Some questions I have are:

- Is a water management plan appropriate even for those buildings that don't meet ASHRAE building guidance criteria?
- Is a water management plan needed for only places that don't disinfect? I know that water management plans are used by many systems in which chlorine is used, but in this case, in which we don't have any evidence of Legionella growth in the hot spring water, I don't think we can or should point to hot spring water as a particular Legionella risk -- the risk in my mind is just from the fact that it is not disinfected.
- Should any of the water management plans include legionella testing? I think the Quapaw might consider this -- but then what would be the guidance if they get positive results?

I am including Allison, the new EIS officer for Arkansas on the thread. Dirk Haselow is no longer with the state health department.

Thanks for any thoughts on this. Hope you guys are well. Maria

--

Maria Said, MD, MHS | CDR, U.S. Public Health Service Epidemiology Branch Chief | Office of Public Health | National Park Service Address: 1849 C. Street, NW, Room 2543, Mailstop 2560 | Washington, DC 20240 Office Tel: 202-513-7151 | Email: maria\_said@nps.gov Website (public): https://www.nps.gov/orgs/1878/index.htm

Website (internal): <a href="https://sites.google.com/a/nps.gov/in2-protect-and-promote-type-algorithm">https://sites.google.com/a/nps.gov/in2-protect-and-promote-type-algorithm</a>

health/home/disease-surveillance-response

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Maria Said, MD, MHS | CDR, U.S. Public Health Service Epidemiology Branch Chief | Office of Public Health | National Park Service Address: 1849 C. Street, NW, Room 2543, Mailstop 2560 | Washington, DC 20240 Office Tel: 202-513-7151 | Email: maria\_said@nps.gov

Website (public): https://www.nps.gov/orgs/1878/index.htm

Website (internal): https://sites.google.com/a/nps.gov/in2-protect-and-promote-health/home/disease-

surveillance-response

From: Smith, Jessica (CDC/DDID/NCIRD/DBD)

**Sent:** 18 Sep 2019 15:22:46 +0000

To: Said, Maria; Cooley, Laura A. (CDC/DDID/NCIRD/DBD); Ritter, Troy

(CDC/DDNID/NCEH/DEHSP);James, Allison (CDC arkansas.gov);Kesteloot, Kurt

Cc: Lucas, Claressa (CDC/DDID/NCIRD/DBD);Kunz, Jasen M.

(CDC/DDNID/NCEH/DEHSP)

**Subject:** RE: Hot Springs and Water management plans

Hi Maria,

We're happy to reconvene to discuss WMPs at Hot Springs. Starting tomorrow Troy is going to be traveling internationally, but he's back in the office on the 30<sup>th</sup> if we could shoot for a time that week? I'm also looping in Jasen and Claressa in case they can join too, since they bring the ASHRAE perspective and Claressa may be able to speak to the ecology of *Legionella* in this setting.

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Thanks, Jessica

Jessica C. Smith, MPH

Epidemiologist | Centers for Disease Control and Prevention NC RD/D3D/Respiratory Diseases Branch 404.718.5205 | lyd7@cdc.gov

From: Said, Maria <maria\_said@nps.gov>

Sent: Wednesday, September 18, 2019 9:22 AM

To: Cooley, Laura A. (CDC/DDID/NCIRD/DBD) <whz3@cdc.gov>; Smith, Jessica (CDC/DDID/NCIRD/DBD)

<lyd7@cdc.gov>; Ritter, Troy (CDC/DDNID/NCEH/DEHSP) <tir4@cdc.gov>; James, Allison (CDC
arkansas.gov) <allison.james@arkansas.gov>; Kesteloot, Kurt <kurt\_kesteloot@nps.gov>

Subject: Hot Springs and Water management plans

Hi Laura, Jessica, and Troy,

We (NPS and Arkansas) are trying to figure out the best path forward with the Hot Springs legionella cases. As you know, all the environmental testing has been negative. However, we have had a number of travel-related cases, and, based on Arkansas state data, it looks like there might be increased cases in the Hot Springs area generally compared to the rest of the state -- although these data are still being analyzed, and I would leave it to Arkansas to confirm this.

We also have considered more where the hot spring water is going -- apparently, it does not just go to the Quapaw, but it goes to a number of other concession operated businesses (including another spa) as well businesses outside park property (including a hospital therapeutic pool and at least one other hotel). One action we are considering is sending a letter to those who receive spa water and basically recommending that although we have never identified legionella in the water and don't know of any increased risk, we do know that untreated water does pose a risk for legionella growth, and businesses might want to consider a water management plan. My feeling is that it would be beneficial to them, if we have an additional case, to then be able to clearly describe their water system and the results of some pre-determined parameters (such as temperatures) over time.

If you all are available at any time, I would love to get your thoughts. Some questions I have are:

- Is a water management plan appropriate even for those buildings that don't meet ASHRAE building guidance criteria?
- Is a water management plan needed for only places that don't disinfect? I know that water management plans are used by many systems in which chlorine is used, but in this case, in which we don't have any evidence of Legionella growth in the hot spring water, I don't think we can or should point to hot spring water as a particular Legionella risk -- the risk in my mind is just from the fact that it is not disinfected.
- Should any of the water management plans include legionella testing? I think the Quapaw might consider this -- but then what would be the guidance if they get positive results?

I am including Allison, the new EIS officer for Arkansas on the thread. Dirk Haselow is no longer with the state health department.

Thanks for any thoughts on this. Hope you guys are well. Maria

From: Ritter, Troy (CDC/DDNID/NCEH/DEHSP)

**Sent:** 18 Sep 2019 14:23:05 +0000

To: Smith, Jessica (CDC/DDID/NCIRD/DBD)

**Subject:** RE: Hot Springs and Water management plans

Hi Jess,

If you think this can wait until the week of the 30<sup>th</sup> that would be good. The questions themselves are easy to answer but this entire situation has me mystified. There's a missing piece of this puzzle.

From: Smith, Jessica (CDC/DDID/NCIRD/DBD) < lyd7@cdc.gov>

Sent: Wednesday, September 18, 2019 10:07 AM

**To:** Ritter, Troy (CDC/DDNID/NCEH/DEHSP) < tir4@cdc.gov> **Subject:** FW: Hot Springs and Water management plans

Hey Troy... what do you think about this call? Do you want to shoot for the week of the 30<sup>th</sup> when you'll be back in the office? Given the ASHRAE angle I think we should invite Jasen and Claressa, too... plus she may be able to speak to some of the ecological questions.

From: Said, Maria < maria said@nps.gov>

Sent: Wednesday, September 18, 2019 9:22 AM

To: Cooley, Laura A. (CDC/DDID/NCIRD/DBD) < whz3@cdc.gov>; Smith, Jessica (CDC/DDID/NCIRD/DBD)

<<u>lvd7@cdc.gov</u>>; Ritter, Troy (CDC/DDNID/NCEH/DEHSP) <<u>tir4@cdc.gov</u>>; James, Allison (CDC arkansas.gov) <<u>allison.james@arkansas.gov</u>>; Kesteloot, Kurt <<u>kurt\_kesteloot@nps.gov</u>>

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Thanks for any thoughts on this. Hope you guys are well. Maria

From:	Lucas, Claressa (CDC/DDID/NCIRD/DBD)				
Sent:	1 Oct 2019 17:01:28 +0000				
To:	Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP);Smith, Jessica				
	D);Kozak-Muiznieks, Natalia A. (CDC/DDID/NCIRD/DBD);Ritter, Troy				
(CDC/DDNID/NCEH/DE	·				
Subject:	RE: Hot Springs and Water management plans				
	(p)(‡)				
From: Kunz, Jasen M. (	(CDC/DDNID/NCEH/DEHSP) <izk0@cdc.gov></izk0@cdc.gov>				
Sent: Tuesday, Octobe	·				
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	D) <htv2@cdc.gov>; Ritter, Troy (CDC/DDNID/NCEH/DEHSP) <tir4@cdc.gov>;</tir4@cdc.gov></htv2@cdc.gov>				
	DDID/NCIRD/DBD) <chl9@cdc.gov></chl9@cdc.gov>				
	gs and Water management plans				
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Thanks again.					
I think you can	(b)( <del>3</del> )				
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(1)(2	All things to consider.				
Jasen					
Jasen					
From: Smith Tessica (	CDC/DDID/NCIRD/DBD) <lyd7@cdc.gov></lyd7@cdc.gov>				
Sent: Tuesday, Octobe	· ————————————————————————————————————				
	Natalia A. (CDC/DDID/NCIRD/DBD) < htv2@cdc.gov>; Kunz, Jasen M.				
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Lucas, Claressa (CDC/E	EHSP) < <u>izk0@cdc.gov</u> >;    Ritter, Troy (CDC/DDNID/NCEH/DEHSP) < <u>tir4@cdc.gov</u> >; DDID/NCIRD/DBD) <chl9@cdc.gov></chl9@cdc.gov>				
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From: Kunz, Jasen M. (CDC/	DDNID/NCEH/DEHSP) < <u>izk0@cdc</u>	.gov>
Sent: Tuesday, October 1, 20	019 12:29 PM	
To: Kozak-Muiznieks, Natalia	a A. (CDC/DDID/NCIRD/DBD) < <u>htv</u>	<u>/2@cdc.gov</u> >; Smith, Jessica
(CDC/DDID/NCIRD/DBD) $<$ $ y $	<u>d7@cdc.gov</u> >; Ritter, Troy (CDC/[	DDNID/NCEH/DEHSP) < <u>tir4@cdc.gov</u> >;
Lucas, Claressa (CDC/DDID/I	NCIRD/DBD) < <u>chl9@cdc.gov</u> >	
Subject: RE: Hot Springs and	Water management plans	
	(b)(3)	
Super helpful.		
(p)( <b>3</b> )	I wonder if the	(p)(2)
(p)( <b>3</b> )	Are others interpreting this the	e same?
	(p)( <del>3</del> )	
	(p)(2)	

(p)(3)
From: Kozak-Muiznieks, Natalia A. (CDC/DDID/NCIRD/DBD) < htv2@cdc.gov>
Sent: Tuesday, October 1, 2019 11:45 AM
<b>To:</b> Smith, Jessica (CDC/DDID/NCIRD/DBD) < <u>lyd7@cdc.gov</u> >; Kunz, Jasen M.
(CDC/DDNID/NCEH/DEHSP) < izk0@cdc.gov>; Ritter, Troy (CDC/DDNID/NCEH/DEHSP) < tir4@cdc.gov>;
Lucas, Claressa (CDC/DDID/NCIRD/DBD) < <a href="mailto:chi9@cdc.gov">chi9@cdc.gov</a> >
Subject: RE: Hot Springs and Water management plans
Thank you Jess!
Hallik you jess:
Just in case you haven't seen these papers/abstracts, I am forwarding what it seems the most relevant
(please see attached).
(preuse see accounting).
(p)(q)
(b)(s)
Thank you,
Natalia

From: Smith, Jessica (CDC/DDID/NCIRD/DBD) < lyd7@cdc.gov>

Sent: Tuesday, October 1, 2019 10:27 AM

**To:** Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP) < <u>izk0@cdc.gov</u>>; Ritter, Troy (CDC/DDNID/NCEH/DEHSP) < <u>tir4@cdc.gov</u>>; Lucas, Claressa (CDC/DDID/NCIRD/DBD) < <u>chl9@cdc.gov</u>>; Kozak-Muiznieks, Natalia A. (CDC/DDID/NCIRD/DBD) < <u>htv2@cdc.gov</u>>

Subject: RE: Hot Springs and Water management plans

levant:	(þ)(ʒ)	
	(b)( <u>5</u> )	

----Original Appointment-----

**From:** Smith, Jessica (CDC/DDID/NCIRD/DBD) **Sent:** Wednesday, September 18, 2019 5:05 PM

To: Smith, Jessica (CDC/DDID/NCIRD/DBD); Said, Maria; Kesteloot, Kurt; Ritter, Troy

(CDC/DDNID/NCEH/DEHSP); Edens, William (Chris) (CDC/DDID/NCIRD/DBD)

**Cc:** Cooley, Laura A. (CDC/DDID/NCIRD/DBD); James, Allison (CDC arkansas.gov); Lucas, Claressa (CDC/DDID/NCIRD/DBD); Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP); Kozak-Muiznieks, Natalia A.

(CDC/DDID/NCIRD/DBD)

Subject: Hot Springs and Water management plans

When: Tuesday, October 1, 2019 2:00 PM-3:00 PM (UTC-05:00) Eastern Time (US & Canada).

Where: Skype Meeting

Thanks Maria and Kurt. Let's shoot for 10/1 at 2:00 pm ET, but we can move it if needed.

And please feel free to forward the invitation to Laura Miller or any other folks that you think may be interested in joining (same for the AR DOH side, Allison).

Best regards, Jessica	
Join Skype Meeting Trouble Joining? Try Skype Web App	
Join by phone	
(404) 553-8912, (Atlanta Dial-in Conference Region)	English (United States)
(855) 348-8390,, (b)(6) (Atlanta Dial-in Conference Region)	English (United States)
Find a local number	
Conference ID: (b)(6)	
Forgot your dial-in PIN? [Help	
Forgot your dial-in PIN?   Help	

From: Said, Maria < maria\_said@nps.gov>

**Sent:** Wednesday, September 18, 2019 3:01 PM **To:** Kesteloot, Kurt <<u>kurt\_kesteloot@nps.gov</u>>

**Cc:** Smith, Jessica (CDC/DDID/NCIRD/DBD) < <a href="mailto:liver-nc-arises-

Kunz, Jasen M. (CDC/DDNID/NCEH/DEHSP) < izk0@cdc.gov>

Subject: Re: [EXTERNAL] RE: Hot Springs and Water management plans

Hi Kurt,

I think the call will focus on water management plans -- if you think the park would be interested in being part of that discussion, I think it would be fine. We can add Laura Miller and whoever else might be interested in the calendar invite once we have a day/time.

Maria

On Wed, Sep 18, 2019 at 1:49 PM Kesteloot, Kurt < <a href="mailto:kurt\_kesteloot@nps.gov">kurt <a href="mailto:

I'm fairly open that week and look forward to talking more. Should we invite a couple people from the Park?

Thank You and Very Respectfully,

Kurt

CDR Kurt Kesteloot, PE, BCEE, USPHS
Supervisory Public Health Consultant, Interior Regions 3-5
National Park Service, Office of Public Health (OPH),
601 Riverfront Drive
Omaha, NE 68102
Office Phone: 1-402-661-1718

Office Fax: 1-402-661-1719
Cell Phone: 1-202-641-0055
Email: <u>Kurt\_Kesteloot@nps.gov</u>

×

"The NPS One Health Network: promoting and protecting the health of all species and the parks that we share." GREEN DOT

On Wed, Sep 18, 2019 at 11:45 AM Said, Maria < maria said@nps.gov > wrote:

Fantastic.

Tuesday 10/1 is wide open for me too.

The rest of that week I'll be at the IDSA conference and could step out if need be, but it would be less ideal.

Thank you!

Maria

On Wed, Sep 18, 2019 at 11:23 AM Smith, Jessica (CDC/DDID/NCIRD/DBD) < <a href="https://lyd7@cdc.gov">lyd7@cdc.gov</a> wrote:

Hi Maria,

We're happy to reconvene to discuss WMPs at Hot Springs. Starting tomorrow Troy is going to be traveling internationally, but he's back in the office on the 30<sup>th</sup> if we could shoot for a time that week? I'm also looping in Jasen and Claressa in case they can join too, since they bring the

ASHRAE perspective and Claressa may be able to speak to the ecology of *Legionella* in this setting.

Right now it looks like Tuesday, 10/1 is wide open for us. Thurs, 10/3 we're free at 3:00 pm and then Friday, 10/4 at 1:00 pm and 3:00 pm ET.

Also, I was hoping we would have heard back from colleagues in Japan by now about any public health recommendations they have for similar settings, but unfortunately we haven't. I do think by the week of the 30<sup>th</sup> I should be able to do a quick lit review about cases and clusters associated with hot springs and can share any pertinent findings during the call.

Thanks, Jessica

—

### Jessica C. Smith, MPH

Epidemiologist | Centers for Disease Control and Prevention NCIRD/DBD/Respiratory Diseases Branch 404.718.5205 | lyd7@cdc.gov

From: Said, Maria <maria said@nps.gov>

Sent: Wednesday, September 18, 2019 9:22 AM

**To:** Cooley, Laura A. (CDC/DDID/NCIRD/DBD) < whz3@cdc.gov >; Smith, Jessica (CDC/DDID/NCIRD/DBD) < lyd7@cdc.gov >; Ritter, Troy (CDC/DDNID/NCEH/DEHSP) < tir4@cdc.gov >; James, Allison (CDC arkansas.gov) < allison.james@arkansas.gov >; Kesteloot,

Kurt <kurt\_kesteloot@nps.gov>

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