## **GENERAL MESSAGE (ICS 213)**

1. Incident Name (Optional): Legionella Mitigati	on Phase 2		
2. To (Name and Position): Incident Command			
3. From (Name and Position): Yolanda Williams	s, NAO OEHE-DOHSM		
4. Subject: GIMC campus hot water assessmen	nt	<b>5. Date:</b> 1/15/2025	<b>6. Time</b> 11:14 am
7. Message:		•	
Attached is the hot water assessment that was	conducted on 1/7/2025.		
No. 1 Men.	Digitally signed by Yolanda B.		
8. Approved by: Name: Yolanda Williams	Signature: Yolanda B. Williams -s   Clapturly stoped by Yolanda B.	ition/Title:	
8. Approved by: Name: Yolanda Williams 9. Reply:	Signature: Yolanda B. Williams -S Williams	ition/Title:	
	Signature: Yolanda B. Williams -S   Dighaliy stigned by Yolanda B. Williams -S   Williams -S   Dighaliy stigned by Yolanda B. Williams -S   Dighaliy stigned	ition/Title:	
	Signature: Yolanda B. Williams -S   Digitally signed by Yolanda B. Williams -S   Williams -S   Digitally signed by Yolanda B. Williams -S   Digitally signed	ition/Title:	
	Signature: Yolanda B. Williams -S Departs stored by Yolanda B. Williams -S Deleter 2025 01.15 11.41:34-07'00' Pos	ition/Title:	
	Signature: Yolanda B. Williams -S   Digitally stigned by Yolanda B. Williams -S   Williams -S   Digitally stigned by Yolanda B. Williams -S   Digitally stigned	ition/Title:	
	Signature: Yolanda B. Williams -S   Dighally stigned by Yolanda B. Williams -S   Williams -S   Dighally stigned by Yolanda B. Williams -S   Dighally stigned	ition/Title:	
	Signature: Yolanda B. Williams -S   Digitally stigned by Yolanda B. Williams -S   Williams -S   Digitally stigned by Yolanda B. Williams -S   Digitally stigned by Yolanda B. Williams -S   Digitally stigned by Yolanda B. Williams -S   Williams -S   Digitally stigned by Yolanda B. Williams -S   Williams -S   Digitally stigned by Yolanda B. Williams -S   Williams -S   Digitally stigned by Yolanda B. Williams -S   Williams -S   Digitally stigned by Yolanda B. Williams -S   Digitall	ition/Title:	
	Signature: Yolanda B. Williams -S   Digitally signed by Yolanda B.	ition/Title:	
	Signature: Yolanda B. Williams -S   Digitally signed by Yolanda B.	ition/Title:	
	Signature: Yolanda B. Williams - S Deptahly signed by Yolanda B. Williams - S Date: 2025 01:15 11:41:34-07100 Pos	ition/Title:	
	Signature: Yolanda B. Williams - S Date: 2025 01.15 11.41:34-07100 Pos	ition/Title:	
	Signature: Yolanda B. Williams -S   Digitally signed by Yolanda B.	ition/Title:	
9. Reply:			Williams S Sylvano by Volenda B.
			Williams -S Digitally signed by Volanda B. Williams of Blaz. 2003.01.15 11.28:13-0700'

#### **ICS 213**

#### **General Message**

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4	Subject	Enter the subject of the message.	
5	Date	Enter the date (month/day/year) of the message.	
6	Time	Enter the time (using the 24-hour clock) of the message.	
7	Message	Enter the content of the message. Try to be as concise as possible.	
8	<ul><li>Approved by</li><li>Name</li><li>Signature</li><li>Position/Title</li></ul>	Enter the name, signature, and ICS position/title of the person approving the message.	
9	Reply	The intended recipient will enter a reply to the message and return it to the originator.	
10	Replied by  Name Position/Title Signature Date/Time	Enter the name, ICS position/title, and signature of the person replying to the message. Enter date (month/day/year) and time prepared (24-hour clock).	

Observations and recommendations from the January 7, 2025 hot water holding assessment of the GIMC campus.

Table 1. Observations from January 7, 2025

#	Observations	Recommendations	Photo
1	a) The lining of the two hot water holding tanks was unknown. b) The temperature from the water heat exchange was 126°F before entering the domestic hot water storage tanks. c) The temperature of the hot holding tanks were between 122°F and 123°F.	<ul> <li>a) It is recommended to verify (epoxy-line or cement-line) the lining material and contract a company to conduct the twelve-(12) months inspection and wash out all sediments and inspection of the interior of the tanks for corrosion or other problems per manufacturer's recommendations.</li> <li>b) Preventive routine maintenance include descaling action and prevent a buildup of brittle scale every 3 months to 6 months of the heat heater per the manufacturer O&amp;M (B+II WaterWizard - B+03-B+15 - IOM Manual (OMM-0063) (HE-110)).</li> <li>c) Per ASHRAE 12-2020: Managing the Risk of Legionellosis Associated with Building Water Systems (5.3.1 Temperature Control), stored water heaters and hot-water storage tanks should be adjusted or maintained so they deliver water at or above 140°F and measures should be taken to prevent scalding. Unless other compensating control measures are used to maintained consistently at or above 120°F throughout the hot-water temperature, including the point of use and the hot-water return. Please note the point of use thermometers are not located to capture the temperature of the point of use temperature of the point of use temperature of the hot water.</li> </ul>	AERCO Water Wizard B + II heat exchanger.  Wendland Hot Water Holding Tanks
2	The O&M manual are not readily available.	Ensure the O&M manual are available for all staff. In addition it is recommended to scan or attached a manual in Nuvolo.	No photo
3	The water heaters for Building 2002, 2017, 2003, 2004, 2010, 2009, 2008,	Update the Nuvolo to ensure the water heaters maintenance are conducted such as draining.	No photo

	T	T	
	2007, 5000, and 4010 are not in		
	Nuvolo.		
4	The thermometer for the supply water were not connected to the main supply line. A valve had to be open to get an accurate temperature of the supply hot water. With the valve closed the temperatures were reading between 80°F and 100°F.	Install thermometers for the supply hot water inline to the main supply line to ensure the water is maintain at or above 120°F throughout the distribution system.	F C 240 110 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100 200 1100
5	The 3 <sup>rd</sup> and 4 <sup>th</sup> Floor for the supply water did not have a thermometer.	Install thermometers inline to the supply hot water.	No photo
6	The team could not find the Asset Tag 54GAF-WHDF with the description "Water heater and dead end pipe" in the location "3328-1W27".	Locate the water heater and dead end pipe, evaluate to determine if the pipe should be capped.	No photo
7	The power switch/disconnect switch was in the "OFF" position to the 4 <sup>th</sup> Floor "East" recirculating pump.	Ensure all recirculating pumps are on and working properly.	No photo
8	The team could not enter the vacant 2005/2006 Building or the Hogan Restroom Building. It was unclear if flushing is completed for both buildings.	Incorporate a plan to include flushing of vacant buildings.	No photo

## **GENERAL MESSAGE (ICS 213)**

1. Incident Name (Optional):Legionella Mitigati	on		
2. To (Name and Position): Yolanda Williams In DFME Director	nst Env. Control, CAPT Setwyn, aOEHE	Director, Candao	ce Tsinigine,
3. From (Name and Position): Shannon Tsosie,	Incident Commander/ Emergency Mana	gement Speciali	st
4. Subject: Full Evaluation and Assessment Re	equest from Navajo Area Office	<b>5. Date:</b> 01/24/2025	<b>6. Time</b> 248 pm
7. Message: Infection Prevention & Control recommends to h DOHSM for these areas that are experiencing of experts, their guidance and recommendations a	hallenges with meeting the 10ACH minir	ne Navajo Area E mum. As Subjec	Engineers and t matter
8. Approved by: Name: Shannon Tsosie	Signature: Pos	sition/Title: Incider	nt Commander
9. Reply:			
Good Afternoon,			
Attached are the ACH assessment that was cor	nducted on 2/7/2025.		
10. Replied by: Name: Yolanda Williams	Position/Title: NAO OEHE/DOHSM IH S	ignature: Yolanda B. W	Digitally signed by Yolanda B. Williams -S Date: 2025.03.06 16:48:18 -07:00'
ICS 213	Date/Time:		

#### **ICS 213**

#### **General Message**

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3	From (Name and Position)  Enter the name and position of the individual sending the General Message. For all individuals, use at least the first initial and last nam For Unified Command, include agency names.		
4	Subject	Enter the subject of the message.	
5	Date	Enter the date (month/day/year) of the message.	
6	Time	Enter the time (using the 24-hour clock) of the message.	
7	Message	Enter the content of the message. Try to be as concise as possible.	
8	<ul><li>Approved by</li><li>Name</li><li>Signature</li><li>Position/Title</li></ul>	Enter the name, signature, and ICS position/title of the person approving the message.	
9	Reply	The intended recipient will enter a reply to the message and return it to the originator.	
10	Replied by  Name Position/Title Signature Date/Time	Enter the name, ICS position/title, and signature of the person replying to the message. Enter date (month/day/year) and time prepared (24-hour clock).	

Per request, the NAO DOHSM and NAO DFME conducted air exchange assessment on February 7, 2025. The following were our observations and recommendations:

		Ventilation S	ummary	
Room and Volume	Total	Total	Calculated Air	Pressure Relationship to the
(cubic ft.)	Measured	Measured	Changes per	Adjacent Area
	Supply Air	Exhaust Air	Hour	
	Volume Rate	Volume Rate	(ACH)	
	(CFM)	(CFM)	, ,	
Room 3S 103		-174	25.7	Negative to the Patient Room
(406 ft <sup>3</sup> )			(10 Exhaust	(Negative to the Adjacent Area
			ACH required)	required)
Room 3S 101		-69	9.8	Negative to the Patient Room
(424 ft <sup>3</sup> )			(10 Exhaust	(Negative to the Adjacent Area
			ACH required)	required)
Room 3S 98		-26	<u>3.6</u>	Neutral to the Patient Room
(433 ft <sup>3</sup> )			(10 Exhaust	(Negative to the Adjacent Area
			ACH required)	required)
Janitor Closet Room		-32	19.2	Negative to the Hallway
3S 88			(10 Exhaust	(Negative to the Adjacent Area
(100 ft <sup>3</sup> )			ACH required)	required)
Medication Room	+21.57	-47.43	<u>2.9</u>	Both Doors Neutral to the
(450 ft <sup>3</sup> )			(4 ACH	Hallway
			required)	(Not required)
Closet Storage		-10.69	2.8	Negative to the hallway
Rm 3SW 87				(Not required)
(233 ft <sup>3</sup> )				
Janitor Closet		-21	<u>5.9</u>	Slightly Negative to the hallway
Rm 3SE 76 (214 ft <sup>3</sup> )			(10 Exhaust	(Negative to the Adjacent Area
			ACH required)	required)
Room 3SE 71	+132	-51	<u>6.0</u>	Positive to the Patient Room
(506 ft <sup>3</sup> )			(10 Exhaust	(Negative to the Adjacent Area
			ACH required)	required)
Room 3SE 69	+352	-91	<u>9.8</u>	Positive to the Patient Room
(558 ft <sup>3</sup> )			(10 Exhaust	(Negative to the Adjacent Area
			ACH required)	required)
Soil Utility	+190	-165	18.5	Negative to the Hallway
Room 3SE 80			(10 Exhaust	(Negative to the Adjacent Area
(536 ft <sup>3</sup> )			ACH required)	required)
Storage		-25	6.3	Slightly Negative to the Hallway
Room 3SW 86 (238				
ft <sup>3</sup> )				
Building F		0	<u>o</u>	Neutral to the Hallway
Restroom 5A (290 ft <sup>3</sup> )			(10 Exhaust	(Negative to the Adjacent Area
			ACH required)	required)
Building 4010		-21	<u>3.1</u>	Slightly Negative to the Patient
Restroom 4			(10 Exhaust	Waiting Area
(405 ft <sup>3</sup> )			ACH required)	

			(Negative to the Adjacent Area
			required)
Building 4010	 -28	<u>4.4</u>	Negative to the Patient Waiting
Restroom 3		(10 Exhaust	Area
(382 ft <sup>3</sup> )		ACH required)	(Negative to the Adjacent Area
			required)

Rooms 3S 71, 3S 72, 3S 73, 3S 96, 3S 99 and 3S 100 were not available at the time of the survey as they were occupied by patients.

#### **Observations and Recommendations:**

- 1. The following rooms **did not** meet the required ACH:
  - a. Main hospital: Room 3S 101, Room 3S 98, Medication Room, Room 3SE 76, Room 3SE 71, and Room 3SE 69,
  - b. Building F Room 5A,
  - c. Building 4010 Room 3 and Room 4.

#### Recommendations:

- Replace and/or trouble shoot the exhaust system in the Building F 5A restroom, it was not turning on during the site visit. In addition, ensure the exhaust is venting directly outside.
- Re-evaluate the residential-style exhaust system Building F Room 3 and Room 4 restrooms.
   Ensure the exhaust system can pull at minimum of 64 CFM (Room 3) and 68 CFM (room 4) respectfully, to meet the 10 exhaust ACH.
- 2. The following rooms *did not* meet the required pressure relationship to the adjacent area:
  - a. Main hospital Room 3S 98, Room 3SE 71, and 3SE 69,
  - b. Building F Room 5A

<u>Recommendation:</u> Evaluate and adjust ventilation system to ensure the rooms meet the required pressure relationship to adjacent areas.

3. The vent covers in the patient restrooms 3S 103 and 3S 101 had an accumulation of lint.

Recommendation: Routinely clean the vent covers.

4. The exhaust vent in the Office Supply Room 3SW 87 was covered by tape. The tape was removed, at the time of survey.

<u>Recommendation:</u> If this is a re-purposed room and a permanent supply storage room, the exhaust ductwork near the main ductwork should be capped.

5. A manual exhaust switch was used to "turn on" the patient restroom exhaust fans in Building 4010

<u>Recommendation:</u> Conduct a risk assessment to determine if the exhaust system needs to run continuously, as opposed to manually switching "on" by the user (i.e. patient & staff).

6. During the above-the-ceiling inspection, only one damper was located on the east section of the exhaust system, the original mechanical drawings showed two dampers. Additional the exhaust duct runs were added to the exhaust system this created lower flows downstream of the exhaust system. This decreases the exhaust CFMs and ACH required for the patient restrooms. The current exhaust fan did not include the calculation of the bigger bathrooms.

<u>Recommendations:</u> The airflow cannot be controlled or balanced due the lack of dampers. The insufficient ACH in the patient restroom is a result from an exhaust system issue. A new exhaust CFM calculation is required to design a new exhaust fan.

## **GENERAL MESSAGE (ICS 213)**

1. Incident Name (Optional): Legionella Mitigati	ion Phase 2		
<b>2. To</b> (Name and Position): Shannon Tsosie-IM Adrienne Livingston	T Commander, Natasha Sellers- Depu -Planning Chief	uty Commander/Op	erations,
3. From (Name and Position): Yolanda Williams	s, NAO OEHE-DOHSM, Merriam Abei	ta-IP, Fleurette Bro	wn-Safety,
4. Subject: Legionella Test Results for East Ani	nex Assessment	<b>5. Date:</b> 3/4/2025	<b>6. Time</b> 0857
7. Message:			
In response to the Legionella tests results dated 2025 to inspect and investigate test sites with e NAO OEHE Deputy Director, Fleurette Brown, Control Nurse Specialist, Yolanda Williams, NA Mechanic Lead and Hoskie Becenti, GIMC Boile observations and recommendations are attached.	levated levels of detection for the Eas GSU Safety Manager, Merriam Abeita O DOHSM Industrial Hygienist, Phillip er Plant Operator Supervisor, conduct	t Annex. CDR Hele , GSU Infection Pre Lee, GIMC FM Ma	ena Shannon, evention and iintenance
8. Approved by: Name: Yolanda Williams	Signature: F	Position/Title:	
9. Reply:			
10. Replied by: Name:	Position/Title:	Signature: Yolanda B. W.	Filliams -S Digitally spowed by Yolanda B. Williams -S Date: 2025 03.04 09.91.01.0700'

#### **ICS 213**

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In response to the Legionella tests results dated February 19, 2025, an onsite visit was conducted on February 24, 2025 to inspect and investigate test sites with elevated levels of detection. (Onsite inspection members: CDR Helena Shannon, NAO OEHE Deputy Director, Fleurette Brown, GSU Safety Manager, Merriam Abeita, GSU Infection Prevention and Control Nurse Specialist, Yolanda Williams, NAO DOHSM Industrial Hygienist, Phillip Lee, GIMC FM Maintenance Mechanic Lead and Hoskie Becenti, GIMC Boiler Plant Operator Supervisor, conducted the assessment.)

#### Legionella mitigation chlorine residual and water temperatures recommendations:

- Ensure the chlorine residual is meeting the GSU WMP criteria. Analyze the chlorine residual results to
  ensure there is consistent chlorine residual for the entire building. Flush both the hot fixture and the
  cold fixture and re-test.
- 2. Water temperature include the following:
  - a) Record the temperatures of the hot water holding tanks or water heaters (need to be above 120°F) <u>ONLY</u> if the hot water is recirculated by a pump.
  - b) Record the temperatures of the supply water and the return water near the recirculation pumps (need to be above 120°F), ensure the thermometers are install in the main water pipe to maintain an accurate temperature reading.
  - c) Record the temperatures of the hot water at the point of use fixtures to ensure there is no scalding injuries.

**Table 1**. Summary of noted observations and recommendations:

#	Observations	Recommendations	Pictures
1	Rm 233, Exam Room 5: Chlorine Residual: 0.81 mg/L Sink Hot Water Temp.: 102 °F Sink Cold Water Temp.: 68.9 °F  • The cold water had a low pressure.  • There was a mixing valve under the sink (Model 170-LF 3/8" Compression ASSE 1070).	<ul> <li>Inspect the mixing valve and the water line for any blockage (debris) to increase the cold-water pressure.</li> <li>Increase the flushing time of the hot water and cold water in the daily flush program.</li> <li>Change the mixing valve in Room 233.</li> </ul>	
2	Rm 239, Exam Room 4: Chlorine Residual: 0.92 mg/L Sink Hot Water Temp.: 103° F Sink Cold Water Temp.: 67.1° F  • There was a mixing valve under the sink.	Increase flushing time of the hot water and cold water in the daily flushing program.	

3	Rm 245, Exam Room 1:
	Rm 245, Exam Room 1: Chlorine Residual: 0.92 mg/L Sink Hot Water Temp.: 103° F Sink Cold Water Temp.: 67.9° F
	Sink Hot Water Temp.: 103° F
	Sink Cold Water Temp.: 67.9° F

 There was a mixing valve under the sink. Increase flushing time of the hot water and cold water in the daily flushing program.

No pictures.

#### 4 Ground Floor Basement Room:

- The temperature control valve had a temperature of 110°F.
- The flushing of the domestic hot water supply line was "muddy".
- The temperature of the domestic hot water supply line was 112°F. *Please note* the hot water holding tank in the boiler room has a temperature of 122°F and 123°F (noted in the hot water holding assessment conducted on 1/7/2025). It is unclear how or why there is a loss of heat from the boiler room to the east ground floor basement room.
- The hot water supply line was had a small loop with two valves closed, these are dead legs, it was unclear the purpose of this loop.
- The return thermometer was reading 90°F.

- Ensure all mixing valves and temperature control valves are inventoried in Nuvolo. Ensure all preventive maintenance are conduct on all the valves.
- Ensure all dead legs are properly flushed or removed.
- Review plumbing drawings and address the dead leg in the Ground Floor Basement Room.
- 4. Evaluate the hot water line to investigate the temperature loss. This may require flushing of the hot holding tank and verify if the tank is adequately sized for the facility.
- Flush and clean the hot water holding tanks in the Boiler Room to decrease the sediment at the bottom of the tanks.
- 6. Replace and relocate the thermometer on the hot water return line.
- 7. Provide photos of isolation ball valves.
- 8. Take the hot water temperature at flowing locations:
- At the re-circulation pumps for the supply and return water temperature.
- ii. At the hot holding tanks in the Boiler Room.
- iii. At the point of use during the chlorine residual sampling.











## **Final Accreditation Report**

Gallup Service Unit 516 East Nizhoni Boulevard Gallup, NM 87301

Organization Identification Number: 9435 Unannounced OQPS Event: 4/25/2024 - 4/25/2024

Program Surveyed Hospital

Final Report: Posted 4/26/2024

# The Joint Commission Table of Contents

Executive Summary	<u>3</u>
<u>Hospital</u>	<u>4</u>
SAFER™ Matrix and Requirements for Improvement	4

# The Joint Commission Executive Summary

F	rogram I	Survey Dates	Event Outcome	Follow-up Activity	Follow-up Time Frame or Submission Due Date
ŀ	.oop.ta.		No Requirements for Improvement	None	None

# The Joint Commission SAFER™ Matrix and Requirements for Improvement

**Program: Hospital** 

As a result of the accreditation activity conducted, there were no Requirements for Improvement identified; therefore, the SAFER™ matrix is not applicable and will not appear within the report



April 26, 2024

Pamela Detsoi-Smiley CEO Gallup Service Unit 516 East Nizhoni Boulevard Gallup, NM 87301 Re: # 9435 CCN: # 320061

CCN: # 320061

Deemed Program: Hospital

Accreditation Expiration Date: May 18, 2025

Dear Cmdr. Detsoi-Smiley:

This letter confirms that your April 25, 2024 unannounced for-cause survey was conducted for the purposes of assessing compliance with the Medicare conditions for hospitals through The Joint Commission's deemed status survey process.

The services at your hospital were found to be in substantial compliance with the Medicare Conditions. The Joint Commission is granting your organization an accreditation decision of Accredited with an effective date of April 26, 2024.

The Joint Commission is also recommending your organization for continued Medicare certification effective April 26, 2024. Please note that the Centers for Medicare and Medicaid Services (CMS) Medicare Administrative Contractor (MAC) makes the final determination regarding your Medicare participation and the effective date of participation in accordance with the regulations at 42 CFR 489.13. Your organization is encouraged to share a copy of this Medicare recommendation letter with your State Survey Agency.

This recommendation applies to the following locations:

Tohatchi Health Center 07 Choosgai Drive, Tohatchi, NM, 87325

Gallup Indian Medical Center 516 East Nizhoni Boulevard, Gallup, NM, 87301

Gallup Indian Medical Center 1911 College Dr., Gallup, NM, 87301

Please be assured that The Joint Commission will keep the report confidential, except as required by law or court order. To ensure that The Joint Commission's information about your organization is always accurate and current, our policy requires that you inform us of any changes in the name or ownership of your organization or the health care services you provide.



Sincerely,

Ken Grubbs, DNP, MBA, RN Executive Vice President and Chief Nursing Officer Division of Accreditation and Certification Operations

cc: CMS/Baltimore Office/Quality, Safety & Oversight Group/Division of Continuing and Acute Care Providers CMS/SOG Location 6 /Survey and Certification Staff

## **DAILY FLUSHING**

## **WHO: All GIMC Departments**

## **WHAT: Daily Flushing**

- Flush Faucets, Showers, and Eye Wash Stations in their areas ONCE DAILY.
- Flush both hot and cold water faucets for a total of 5 minutes each.

#### Depending on the type of faucet fixture:

- Single Handle Faucet flush hot and cold separately for 5 minutes each.
- Double Faucet flush hot and cold at the same time for 5 minutes.
- Foot Pedal Faucet Flush hot and cold at the same time. Please wear an N95 mask while flushing to avoid inhaling aerosols.
- All Eye Wash Stations need to be flushed daily for a minimum of 5
  minutes and documented on the Daily Flushing Log. This is in addition
  to the Emergency Eye Wash Station/Shower Inspections that is
  submitted monthly to Safety.
- REMINDER: Inpatient shower hoses need to be hanging down when not in use and not propped up.
- WARNING: DO NOT LEAVE RUNNING WATER UNATTENDED for long periods to prevent flooding. Report any issues immediately to Facility Management.

WHEN: Flush daily; Submit flushing logs weekly on Fridays to the Dropbox, located on the Water Consumption Limitation page on the GSU Homepage.

WHY: Part of Legionella Mitigation Activities

For more information, contact: GIMC Incident Management Team

Updated: 02/21/2025 AL









## **DAILY FLUSHING**

**WHO: ALL GIMC DEPARTMENTS** 

WHAT: DAILY FLUSHING

FLUSH FAUCETS, SHOWERS AND EYE WASH STATIONS IN THEIR AREAS ONCE DAILY

PLEASE FLUSH BOTH HOT AND COLD WATER FAUCETS FOR A TOTAL OF 5 MINUTES

#### **DEPENDING ON THE TYPE OF FIXTURE:**

- SINGLE HANDLE FAUCET FLUSH HOT AND COLD SEPARATELY FOR 5 MINUTES EACH
- DOUBLE FAUCET FLUSH HOT AND COLD AT THE SAME TIME FOR 5 MINUTES
- FOOT PEDAL FAUCET- FLUSH HOT AND COLD AT THE SAME TIME,
   PLEASE USE AN N95 MASK WHILE FLUSHING A FOOT PEDAL FAUCET
   TO AVOID INHALING AEROSOLS

ALL EYE WASH STATIONS NEED TO BE FLUSHED DAILY FOR A MINIMUM OF 5 MINUTES AND DOCUMENTED ON THE DAILY FLUSHING LOG. IN ADDITION, PLEASE CONTINUE TO COMPLETE THE EMERGENCY EYEWASH STATION/ SHOWER INSPECTIONS AND SUBMIT MONTHLY TO SAFETY

WHEN: DAILY, SUBMIT FLUSHING LOGS WEEKLY BY FRIDAY TO THE DROPBOX LOCATED ON THE HOME PAGE, UNDER WATER CONSUMPTION LIMITATION

## WHY: LEGIONELLA MITIGATION

WARNING: DO NOT LEAVE RUNNING WATER UNATTENDED FOR LONG PERIODS TO PREVENT FLOODING. PLEASE REPORT ANY ISSUES IMMEDIATELY TO FACILITIES MAINTENANCE

FOR MORE INFORMATION CONTACT: GIMC INCIDENT MANAGEMENT TEAM

#### WATER CONSUMPTION LIMITATION ALERT

Building 2000 & NW Modular Buildings , BUILDINGS 2002, 2004, 2008, 2009, 2010, 2017, 2018, 4009, 4010 & F



#### DO NOT USE THE WATER FOR CONSUMPTION

Failure to follow this advisory could result in illness.

Due to positive test results from recent testing, staff and patients are advised to NOT TO USE THE TAP WATER AND ICE (MADE FROM TAP WATER) FOR DRINKING AND PATIENT CARE ACTIVITIES

#### What should I do?

- DO NOT USE THE TAP WATER---USE ONLY BOTTLED WATER. Bottled water should be used for all drinking (including baby formula), brushing teeth, making ice, care until further notice.
   Bottled water will be available for pick up in the Cafeteria. (Delivery is not available)
- Drinking water for both Patients and Staff will be available in the Cafeteria.

IMT will inform you when the water is safe to utilize for consumption.

Please share this information with all GIMC staff and patients who receive this water, especially those who may not have received this notice directly. Thank you for your patience and understanding.

#### **WATER CONSUMPTION LIMITATION ALERT**

Building 2000 & NW Modular Buildings , BUILDINGS 2002, 2004, 2008, 2009, 2010, 2017, 2018, 4009, 4010 & F



#### DO NOT USE TAP WATER FOR CONSUMPTION

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Due to positive test results from recent testing, staff and patients are advised to NOT TO USE THE TAP WATER AND ICE (MADE FROM TAP WATER) FOR DRINKING AND PATIENT CARE ACTIVITIES

#### What should I do?

- <u>DO NOT USE THE TAP WATER---USE ONLY BOTTLED WATER.</u> Bottled water should be used for all drinking (including baby formula), brushing teeth, making ice, wound care **until further notice**. Bottled water will be available for pick up in the Cafeteria for staff and patient use. (Delivery is not available)
- Patients who need drinking water should request water from staff at the areas they are being seen during visits

IMT will inform you when the water is safe to utilize for consumption.

Please share this information with all GIMC staff and patients who receive this water, especially those who may not have received this notice directly. Thank you for your patience and understanding.

### **WATER LIMITATION ALERT**

### Building 2000 and Outside Modular Buildings Mammography, Diabetes Program and Radiology Office



#### DO NOT USE THE WATER FOR CONSUMPTION

Failure to follow this advisory could result in illness.

Due to the recent Water Valve Replacement Project and hospital water shut off event, staff and patients are NOT TO USE THE TAP WATER FOR DRINKING, COOKING, BATHING, and WOUND CARE.

#### What should I do?

- <u>DO NOT USE THE TAP WATER---USE ONLY BOTTLED WATER.</u> Bottled water should be used for all drinking (including baby formula), brushing teeth, washing dishes, making ice, food preparation and bathing **until further notice**. Bottled water will be available for pick up in the Cafeteria. (Delivery is not available)
- Drinking water for both Patients and Staff will be available in the Cafeteria. Potable water will be available to support the limited food service.

ICS will inform you when tests show that the water is safe to utilize for consumption. Test results are expected to be available by 5/18/2024.

Please share this information with all GIMC staff and patients who receive this water, especially those who may not have received this notice directly. Thank you for your patience and understanding.

For questions or further information, please contact Infection Prevention & Control: Merriam Abeita (505) 721-8312 or Sharlene Todicheeney (505) 609-7969

## **WATER LIMITATION ALERT**

### Building 2000 and Outside Modular Buildings Mammography, Diabetes Program and Radiology Office



#### DO NOT USE THE WATER FOR CONSUMPTION

Failure to follow this advisory could result in illness.

Due to the recent Water Valve Replacement Project and hospital water shut off event, staff and patients are NOT TO USE THE TAP WATER FOR DRINKING, COOKING, BATHING, and WOUND CARE.

#### What should I do?

- DO NOT USE THE TAP WATER---USE ONLY BOTTLED WATER. Bottled water should be used for all drinking (including baby formula), brushing teeth, washing dishes, making ice, food preparation and bathing until further notice. Bottled water will be available for pick up in the Cafeteria. (Delivery is not available)
- Drinking water for both Patients and Staff will be available in the Cafeteria. Potable water will be available to support the limited food service.

IMT will inform you when tests show that the water is safe to utilize for consumption. Test results are expected to be available by 5/18/2024.

Please share this information with all GIMC staff and patients who receive this water, especially those who may not have received this notice directly. Thank you for your patience and understanding.

Occupational Safety and Health Administration El Paso Area Office 4849 North Mesa, Suite 200 El Paso, TX 79912



January 13, 2025

Florette Brown Gallup Indian Medical Center 516 E Nizhoni Blvd Gallup, NM 87301

RE: OSHA Complaint No. 2250678

Dear Employer:

On Jan 10, 2025 the Occupational Safety and Health Administration (OSHA) received a notice of alleged workplace hazard(s) at your worksite at:

516 E Nizhoni Blvd Gallup, NM 87301

A representative of your company was notified, by telephone, of alleged hazards on 01/13/2025. The specific nature of the alleged hazards are as follows:

Facility water is contaminated with legionnaire bacteria and employees continue to use water for washing hands; brushing teethes, and shower. Drinking water faucets throughout facility remain open and functional creating a hazard for employees who may forget no to drink water from faucets.

OSHA has not determined whether the hazards, as alleged, exist at your workplace and we do not intend to conduct an inspection at this time. However, since allegations of violations and/or hazards have been made, you are requested to immediately investigate the alleged conditions and make any necessary corrections or modifications. Please advise me in writing, no later than Jan. 21, 2025, of the results of your investigation. You must provide supporting documentation of your findings, including any applicable measurements or monitoring results, and photographs/video which you believe would be helpful, as well as a description of any corrective action you have taken or are in the process of taking, including documentation of the corrected condition. Please submit your documentation electronically to oshaelpaso@dol.gov.

This letter is not a citation or a notification of proposed penalty which, according to the Occupational Safety and Health Act, may be issued only after an inspection or investigation of the workplace. It is our goal to assure that hazards are promptly identified and eliminated. Please take immediate corrective action where needed. If we do not receive a response from you by Jan. 21, 2025 indicating that appropriate action has been taken or that no hazard exists and why, an OSHA inspection will be conducted. An inspection may include a review of the following: injury and illness records, hazard communication, personal protective equipment,

emergency action or response, bloodborne pathogens, confined space entry, lockout, and related safety and health issues.

Please note, however, that OSHA selects for inspection some cases where we have received letters in which employers have indicated satisfactory corrective action. This is to ensure that employers have actually taken the action stated in their letters.

If you need assistance to help resolve the issues of this complaint, the State of New Mexico offers OSHA consultation services, without charge, to assist in resolving all occupational safety and health issues. The variety of services available of the scheduling of those services may be limited by the consultation project's requirement to give priority to small business in high hazard industries and by its backlog. However, you may be able to obtain similar services from your insurance carrier or private consultant in a more timely fashion. To discuss or request their services, call or write your consultation project at the following address:

#### **OSHA** Consultation

New Mexico State Occupational Health and Safety Bureau (OHSB) Consultation Program 525 Camino De Los Marquez Suite 3

Santa Fe, NM 87505 Phone: 505-476-8700 1-877-610-6742

Website: https://www.env.nm.gov/occupational health safety/consultation-program/

You are requested to **post a copy of this letter and your response** where it will be readily accessible for review by all of your employees and return a copy of the signed Certificate of Posting (Attachment A) to this office. In addition, you are requested to provide a copy of this letter and your response to it to a representative of any recognized employee union or safety committee if these are at your facility. Failure to do this may result in an on-site inspection. The complainant has been furnished a copy of this letter and will be advised of your response. Section 11(c) of the Occupational Safety and Health Act provides protection for employees against discrimination because of their involvement in protected safety and health activity.

If you have any questions regarding this matter, please contact the Area Office at the address in the letterhead. Your personal support and interest in the safety and health of your employees is appreciated.

Sincerely,

Diego Alvarado Jr.

Area Director

# CERTIFICATE OF POSTING OSHA NOTIFICATION OF ALLEGED HAZARD(S)

Employer Name: Gallup Indian Medical Center Complaint Number: 2250678
Date of Posting:
Date Copy Given to an Employee Representative:
On behalf of the employer, I certify that a copy of the complaint letter received from the Occupational Safety and Health Administration (OSHA) has been posted in a conspicuous place where all affected employees will have notice, or near such location where the violation occurred and such notice has been given to each authorized representative of affective employees, if any This notice was or will be posted for a minimum of ten (10) days or until any hazardous condition found are corrected.
Name
Signature
Title
If Applicable:
Union Representative/Committee Name, Title, Local #
Union Address

Occupational Safety and Health Administration El Paso Area Office 4849 North Mesa Suite 200 El Paso, TX 79912



June 17, 2024

Jacob Manche
Gallup Indian Medical Center
P. O Box 1337
Gallup, NM 87301
Jacob.Manche@ihs.gov

RE: OSHA Complaint No. 2170741

Dear Jacob Manche:

This is to advise you that based on the information that you have provided to this office, the complaint referenced above will be officially closed unless the information is disputed by the complainant.

Please feel free to contact me at (915) 534-6251 if you have any questions or concerns, or visit <a href="https://www.osha.gov">www.osha.gov</a>, which contains OSHA's standards, letters of interpretation, publications, and other information related to occupational safety and health. Thank you for your cooperation with this inquiry and your continued interest in safety and health.

Sincerely,

Diego Alvarado Jr.

Area Director

Occupational Safety and Health Administration El Paso Area Office 4849 North Mesa Suite 200 El Paso, TX 79912



June 17, 2024

Jacob Manche
Gallup Indian Medical Center
P. O Box 1337
Gallup, NM 87301
Jacob.Manche@ihs.gov

RE: OSHA Complaint No. 2171813

Dear Jacob Manche:

This is to advise you that based on the information that you have provided to this office, the complaint referenced above will be officially closed unless the information is disputed by the complainant.

Please feel free to contact me at (915) 534-6251 if you have any questions or concerns, or visit <a href="https://www.osha.gov">www.osha.gov</a>, which contains OSHA's standards, letters of interpretation, publications, and other information related to occupational safety and health. Thank you for your cooperation with this inquiry and your continued interest in safety and health.

Sincerely,

Diego Alvarado Jr.
Area Director

Occupational Safety and Health Administration El Paso Area Office 4849 North Mesa, Suite 200 El Paso, TX 79912



June 6, 2024

Jacob Manche Gallup Indian Medical Center P. O Box 1337 Gallup, NM 87301

RE: OSHA Complaint No. 2170741

Dear Employer:

On Jun 6, 2024, the Occupational Safety and Health Administration (OSHA) received a notice of alleged workplace hazard(s) at your worksite at:

514 E. Nizhoni Blvd Gallup, NM 87301

A representative of your company was notified, by telephone, of alleged hazards on June 6, 2024. The specific nature of the alleged hazards are as follows:

Legionella found in water; water has not been adequately supplied to staff.

OSHA has not determined whether the hazards, as alleged, exist at your workplace and we do not intend to conduct an inspection at this time. However, since allegations of violations and/or hazards have been made, you are requested to immediately investigate the alleged conditions and make any necessary corrections or modifications. Please advise me in writing, no later than **June 13, 2024**, of the results of your investigation. You must provide supporting documentation of your findings, including any applicable measurements or monitoring results, and photographs/video which you believe would be helpful, as well as a description of any corrective action you have taken or are in the process of taking, including documentation of the corrected condition. Please submit your documentation electronically to oshaelpaso@dol.gov.

This letter is not a citation or a notification of proposed penalty which, according to the Occupational Safety and Health Act, may be issued only after an inspection or investigation of the workplace. It is our goal to assure that hazards are promptly identified and eliminated. Please take immediate corrective action where needed. If we do not receive a response from you by June 13, 2024, indicating that appropriate action has been taken or that no hazard exists and why, an OSHA inspection will be conducted. An inspection may include a review of the following: injury and illness records, hazard communication, personal protective equipment,

emergency action or response, bloodborne pathogens, confined space entry, lockout, and related safety and health issues.

Please note, however, that OSHA selects for inspection some cases where we have received letters in which employers have indicated satisfactory corrective action. This is to ensure that employers have actually taken the action stated in their letters.

If you need assistance to help resolve the issues of this complaint, the State of New Mexico offers OSHA consultation services, without charge, to assist in resolving all occupational safety and health issues. The variety of services available of the scheduling of those services may be limited by the consultation project's requirement to give priority to small business in high hazard industries and by its backlog. However, you may be able to obtain similar services from your insurance carrier or private consultant in a more timely fashion. To discuss or request their services, call or write your consultation project at the following address:

#### **OSHA** Consultation

New Mexico State Occupational Health and Safety Bureau (OHSB) Consultation Program 525 Camino De Los Marquez Suite 3

Santa Fe, NM 87505 Phone: 505-476-8700 1-877-610-6742

Website: https://www.env.nm.gov/occupational health safety/consultation-program/

You are requested to **post a copy of this letter and your response** where it will be readily accessible for review by all of your employees and return a copy of the signed Certificate of Posting (Attachment A) to this office. In addition, you are requested to provide a copy of this letter and your response to it to a representative of any recognized employee union or safety committee if these are at your facility. Failure to do this may result in an on-site inspection. The complainant has been furnished a copy of this letter and will be advised of your response. Section 11(c) of the Occupational Safety and Health Act provides protection for employees against discrimination because of their involvement in protected safety and health activity.

If you have any questions regarding this matter, please contact the Area Office at the address in the letterhead. Your personal support and interest in the safety and health of your employees is appreciated.

Sincerely,

Diego Alvarado Jr.

# CERTIFICATE OF POSTING OSHA NOTIFICATION OF ALLEGED HAZARD(S)

Employer Name: Gallup Indian Medical Center Complaint Number: 2170741
Date of Posting:
Date Copy Given to an Employee Representative:
On behalf of the employer, I certify that a copy of the complaint letter received from the Occupational Safety and Health Administration (OSHA) has been posted in a conspicuous place where all affected employees will have notice, or near such location where the violation occurred and such notice has been given to each authorized representative of affective employees, if any This notice was or will be posted for a minimum of ten (10) days or until any hazardous condition found are corrected.
Name
Signature
Title
If Applicable:
Union Representative/Committee Name, Title, Local #
Union Address

Occupational Safety and Health Administration El Paso Area Office 4849 North Mesa, Suite 200 El Paso, TX 79912



June 10, 2024

Pamela Detsoi-smiley Gallop Indian Medical Center 516 E Nizhoni Blvd Gallup, NM 87301

RE: OSHA Complaint No. 2171813

Dear Employer:

On Jun 10, 2024, the Occupational Safety and Health Administration (OSHA) received a notice of alleged workplace hazard(s) at your worksite at:

516 E Nizhoni Blvd Gallup, NM 87301

A representative of your company was notified, by telephone, of alleged hazards on June 10, 2024. The specific nature of the alleged hazards are as follows:

- 1. Legionella Found in Water, water has not been adequately supplied to patients and staff. Staff are having to buy ice for patients and specimen collection.
- 2. Patients are being bathed upstairs in this water containing the bacteria Hospital Wide This condition exposes employees to health hazards.

OSHA has not determined whether the hazards, as alleged, exist at your workplace and we do not intend to conduct an inspection at this time. However, since allegations of violations and/or hazards have been made, you are requested to immediately investigate the alleged conditions and make any necessary corrections or modifications. Please advise me in writing, no later than **June 17, 2024** of the results of your investigation. You must provide supporting documentation of your findings, including any applicable measurements or monitoring results, and photographs/video which you believe would be helpful, as well as a description of any corrective action you have taken or are in the process of taking, including documentation of the corrected condition. Please submit your documentation electronically to oshaelpaso@dol.gov.

This letter is not a citation or a notification of proposed penalty which, according to the Occupational Safety and Health Act, may be issued only after an inspection or investigation of the workplace. It is our goal to assure that hazards are promptly identified and eliminated. Please take immediate corrective action where needed. If we do not receive a response from you by June 17, 2024, indicating that appropriate action has been taken or that no hazard exists and

why, an OSHA inspection will be conducted. An inspection may include a review of the following: injury and illness records, hazard communication, personal protective equipment, emergency action or response, bloodborne pathogens, confined space entry, lockout, and related safety and health issues.

Please note, however, that OSHA selects for inspection some cases where we have received letters in which employers have indicated satisfactory corrective action. This is to ensure that employers have actually taken the action stated in their letters.

If you need assistance to help resolve the issues of this complaint, the State of New Mexico offers OSHA consultation services, without charge, to assist in resolving all occupational safety and health issues. The variety of services available of the scheduling of those services may be limited by the consultation project's requirement to give priority to small business in high hazard industries and by its backlog. However, you may be able to obtain similar services from your insurance carrier or private consultant in a more timely fashion. To discuss or request their services, call or write your consultation project at the following address:

#### **OSHA** Consultation

New Mexico State Occupational Health and Safety Bureau (OHSB) Consultation Program 525 Camino De Los Marquez Suite 3

Santa Fe, NM 87505 Phone: 505-476-8700 1-877-610-6742

Website: https://www.env.nm.gov/occupational health safety/consultation-program/

You are requested to **post a copy of this letter and your response** where it will be readily accessible for review by all of your employees and return a copy of the signed Certificate of Posting (Attachment A) to this office. In addition, you are requested to provide a copy of this letter and your response to it to a representative of any recognized employee union or safety committee if these are at your facility. Failure to do this may result in an on-site inspection. The complainant has been furnished a copy of this letter and will be advised of your response. Section 11(c) of the Occupational Safety and Health Act provides protection for employees against discrimination because of their involvement in protected safety and health activity.

If you have any questions regarding this matter, please contact the Area Office at the address in the letterhead. Your personal support and interest in the safety and health of your employees is appreciated.

Sincerely,

Jahrul Walisan Diego Alvarado Jr.

## CERTIFICATE OF POSTING OSHA NOTIFICATION OF ALLEGED HAZARD(S)

Employer Name: Gallop Indian Medical Center Complaint Number: 2171813
Date of Posting:
Date Copy Given to an Employee Representative:
On behalf of the employer, I certify that a copy of the complaint letter received from the Occupational Safety and Health Administration (OSHA) has been posted in a conspicuous place, where all affected employees will have notice, or near such location where the violation occurred, and such notice has been given to each authorized representative of affective employees, if any. This notice was or will be posted for a minimum of ten (10) days or until any hazardous conditions found are corrected.
Name .
Signature
Title
If Applicable:
Union Representative/Committee Name, Title, Local #
Union Address

#### U.S. Department of Labor

Occupational Safety and Health Administration El Paso Area Office 4849 North Mesa, Suite 200 El Paso, TX 79912



January 22, 2025

Fleurette Brown Gallup Indian Medical Center 516 E Nizhoni Blvd Gallup, NM 87301

RE: OSHA Complaint No. 2250678

Dear Fleurette Brown:

This is to advise you that based on the information that you have provided to this office, the complaint referenced above will be officially closed unless the information is disputed by the complainant.

Please feel free to contact me at (915) 534-6251 if you have any questions or concerns or visit <a href="https://www.osha.gov">www.osha.gov</a>, which contains OSHA's standards, letters of interpretation, publications, and other information related to occupational safety and health. Thank you for your cooperation with this inquiry and your continued interest in safety and health.

Sincerely,

Diego Álvarado Jr. Area Director

Tsosie, Shannon (IHS/NAV/GIMC) From:

GSU-Staff To:

Galvan, Theresa (IHS/NAV/GIMC); Akum, Anzeribiam (IHS/NAV/GIMC); Livingston, Adrienne F (IHS/NAV) Cc:

Subject: Do Not Use Water for Consumption 5.5.24 Date: Sunday, May 5, 2024 3:41:53 PM DO NOT USE WATER FOR CONSUMPTION.pdf image001.png Attachments:

## From the GSU Incident Management Team:

#### WATER LIMITATION ALERT

#### Building 2000 and Outside Modular Buildings Mammography, Diabetes Program and Radiology Office



#### DO NOT USE THE WATER FOR CONSUMPTION

Failure to follow this advisory could result in illness.

Due to the recent Water Valve Replacement Project and hospital water shut off event, staff and patients are NOT TO USE THE TAP WATER FOR DRINKING, COOKING, BATHING, and WOUND CARE.

#### What should I do?

- DO NOT USE THE TAP WATER----USE ONLY BOTTLED WATER. Bottled water should be used for all drinking (including baby formula), brushing teeth, washing dishes, making ice, food preparation and bathing until further notice. Bottled water will be available for pick up in the Cafeteria. (Delivery is not available)
- Drinking water for both Patients and Staff will be available in the Cafeteria. Potable water will be available to support the limited food service.

IMT will inform you when tests show that the water is safe to utilize for consumption. Test results are expected to be available by 5/18/2024.

Please share this information with all GIMC staff and patients who receive this water, especially those who may not have received this notice directly. Thank you for your patience and understanding.

Shannon Tsosie Emergency Management Specialist Gallup Indian Medical Center

# GIMC Water Interruption Recovery Period Water Valve Replacement Incident (5/3/2024 at 1118)

**Background:** On Friday 5/3/2024 the water supply to GIMC Building 2000 and the Northwest modular buildings will be shut off at 4:30pm. The boiler bypass will be completed to support temperature/ humidity and the protected environments, which include Sterile Processing Department and the Operating Rooms. The water pipes will be drained and then repairs will begin shortly thereafter. The repairs will be completed by a Contractor.

<u>Inpatient Care:</u> Inpatient services will be closed during this time. Current inpatients are in the process of being transferred to other hospitals for continuation of care. GIMC East (RMCH) has been established to take inpatients at this time.

Emergency/Trauma Care, WIPCC, Outpatient Pharmacy, Labor & Delivery: These services will be available with limited water use. Indoor restrooms will be available in buildings 2017, 3000 and 4010 for the staff. Porta pottys and handwashing stations are also available for staff and patient use.

Prior to flushing, Facilities Maintenance will notify the Laboratory and Information Technology (IT) departments and confirm that sensitive equipment is covered as a preventive measure.

Upon completion of the water system, flushing and water testing will be conducted.

#### I. Utilities (Water Operation)

- a. Thorough flushing of all floors will be completed with a focus on all critical patient care areas including Sterile Processing Department and the Operating Room areas. Flush all sinks, showers, eyewash stations, water fountains, bottle filler stations, cold and hot water systems. Flush thoroughly to assure free chlorine parameters are within range. EPA water standards parameters of 0.2-2.0 ppm.
- b. Water testing will be conducted after thorough flushing.
  - Chlorine Testing will be conducted after the work project repairs are completed.
     <u>Contractor:</u> will collect a Chlorine sample for send out (results return in 24 hours) and an on the spot (rapid) testing will be taken for immediate preliminary results.
     <u>GIMC Facilities Maintenance:</u> will conduct Chlorine residual testing for immediate preliminary results as well.
  - 2. Opportunistic Waterborne Pathogen testing will be collected and those samples will be sent out (culture) and the results will be available in approximately 10 days. When the results are made available, they will be reviewed by IPC, Safety and Facility Maintenance. If the results pass, clearance can be determined by IPC, Safety, Facility Maintenance and ICS. If the results do not pass, then water limitation mitigation measures will continue with action plans to address the results.
- II. **Environmental Services:** Terminal Cleaning will be required to be completed to all areas of the hospital prior to patient movement back to GIMC.

#### Mitigation Measures: Limited Water Use

- Provide staff education
- No consumption of tap water, use of bottled water for drinking (patients and staff)
- <u>Food Services:</u> limited menu with special dietary needs for patients, use of disposable plates, utensils, pans and other items for dietary needs
- <u>Patient Care:</u> Do not use tap water for consumption or patient care related activities such as water use for infant formula, wound care activities (incisions, open wounds), showering and

# GIMC Water Interruption Recovery Period Water Valve Replacement Incident (5/3/2024 at 1118)

- bathing. When bathing use bottled water for infants, young children and anyone with a weakened immune system.
- <u>Humidifiers:</u> Check the Manufacturer's instructions for use for type of water to be used, typically sterile, distilled or demineralized bottled water for humidifiers. Use sterile water for ventilators, isolettes, CPAP machines etc.
- <u>Surveillance:</u> Daily Chlorine testing will be completed by GIMC Facility Maintenance during the water limited use period (5 test points per day at varying sites), documented and communicated to ICS, Infection Control and Safety.

#### III. Equipment

#### 1. Facility Maintenance:

- a. Ice Machines will be disconnected prior to the work project as a preventive measure. The ice machines will not be in use pending the test results (2 weeks). Ice will be available in the cafeteria during this period. When the results of the testing meet requirements, then key stakeholders and ICS will inform Facilities Maintenance to place the ice machines back in order. Facilities Maintenance will provide routine preventive maintenance and focus on thoroughly cleaning and disinfecting the ice machines and change the filters prior to placing back in service.
- b. Water heaters will need cleaning and disinfection and thorough flushing. Expansion tanks and cooling towers will not be affected.
- c. Daily flushing will need to take place from the furthest inlet point and midrange point on each floor every day for the water limitation period, while awaiting for the opportunistic pathogen report to return (approximately 10 days).
- 2. <u>Biomed:</u> Address water dependent equipment such as sterilizers, washers, ultrasonic unit, endoscopy unit and reverse osmosis unit (s). Follow Manufacturer's Instruction for Use (MFU).
- 3. <u>Laboratory:</u> Address reverse osmosis unit and other laboratory equipment. Follow Manufacturer's Instruction for Use (MFU).

#### IV. Resources

- a. Potable water supply will be available to support Food Services. Bulk storage containers will be located in the designated area in the Food Services department.
- b. Food Services will provide a limited menu, including special dietary needs for patients.
- c. Drinking water (bottled) will be available for staff and patients at the designated staging area in the Cafeteria. A log for dispensing will be in place.
- d. Ice will be available upon request to the Food Services Department. A log for dispensing will be in place.

#### V. Measures for compliance with the GIMC Water Management Plan (WMP)

- a. Water testing requirements are met.
- b. Inventory of sample collection sites and water fixtures are documented.
- c. Identify emergency water contingencies.
- d. Inventory water dependent equipment and maintenance.
- e. Maintain updated schematics of the water system.
- f. Identify dead legs in the water system and plan for removal.
- g. Confirm that a quarterly water testing process is in place to maintain compliance with the GIMC WMP.

Cc: Tsosie, Shannon (IHS/NAV/GIMC); Galvan, Theresa (IHS/NAV/GIMC); Livingston, Adrienne F (IHS/NAV)

**Subject:** GSU Incident Management Team update 05.03.2024

**Date:** Friday, May 3, 2024 2:17:48 PM

Attachments: GIMC Water Interruption Recovery Period.pdf

## From the GSU Incident Management Team:

#### Staff:

The IMT continues to operate the IMT Command Post from Building 2002. The IMT will have periodic updates provided on the GIMC Intranet webpage to provide pertinent information to keep staff informed.

#### The IMT objectives Include:

- 1. Minimize impact on patient care services in Building 2000 due to planned water shut off for a duration of 24 hours.
- 2. Ensure all operational departments in Building 2000 develop and implement contingency plans and water usage for continued processes during the planned 24 hour water outage.
- 3. Utilize available resources to include possible contract services to expedite professional assessments to the potable water supply lines, specifically focused on the broken shutoff valves located in Building 2000, 1st floor and piping system component replacements on ground floor boiler room.

#### **IMT Updates**

#### **LABOR POOL:**

- Point-of-Contacts: Anne Spencer (505) 721-8380 and Vernon Francisco (505) 721-0232
- Staging Area is in Building 2002, 78896 (x-78896)

#### I-STAR:

- Please continue entering I-STAR events through the I-STAR system. If you are unable to access I-STAR while assigned to GIMC East (at RMCH), back-up forms can be found on the GIMC homepage, Incident Command page for easier access.
- If you used the back-up forms, please forward all copies to GIMC Safety, Deanna Barber or Fleurette Brown.
- Link to back-up forms: <u>Incident Command I-STAR Back-up Forms All</u> Documents

#### **GIMC Water Interruption Recovery Period**

See attachment

There are a number of ICS forms for those who wish to provide updates to the IMT, these forms can

be located on the link provide or through the GIMC Intranet Sub sites: <a href="http://navgimcvsp19/sites/Home/IncidentCommand/SitePages/Home.aspx">http://navgimcvsp19/sites/Home/IncidentCommand/SitePages/Home.aspx</a>

Further questions may be addressed to Incident Command, at (505) 726-8896.

Thank you,

Cc: Tsosie, Shannon (IHS/NAV/GIMC); Galvan, Theresa (IHS/NAV/GIMC); Akum, Anzeribiam (IHS/NAV/GIMC)

**Subject:** Incident Management Team update 05.10.2024

**Date:** Friday, May 10, 2024 2:46:18 PM

## From the Incident Management Team:

#### Staff:

As of May 9, 2024, the IMT team is on level 3 –partial activation. We are currently in the recovery phase of this incident and all section chiefs, along with Infection Prevention & Control, will continue with duties as needed until we receive final results of the testing.

- The facility is still operating under the GIMC Water Interruption Recovery Plan
  and limited water use continues to be in effect. Please be advised: <u>DO NOT</u>
  <u>USE TAP WATER FOR CONSUMPTION or FOR PATIENT CARE</u>
  <u>ACTIVITIES</u> such as for infant formula, wound care activities (incisions, open
  wounds) and showering. For bathing, use bottled water for infants, young
  children and anyone with a weakened immune system.
- Due to the water limitation, bottled water and ice are available for patients and staff located in Building 2000 and Outside Modular Buildings (Mammography, Diabetes Program, and Radiology Office).

Requests for bottled water and/or ice will need a completed <u>213RR</u> (see sample attached). Please take the completed 213RR to the Cafeteria to pick-up (dietary is unable to deliver).

Further questions may be addressed to Anzeribiam Akum, Incident Management Team - Public information Officer at (505) 409-8016.

Thank you,

From: Brown, Melissa (IHS/NAV/GIMC)
To: GSU-Staff; NAV/THC Staff

Cc: Akum, Anzeribiam (IHS/NAV/GIMC); Galvan, Theresa (IHS/NAV/GIMC); Tsosie, Shannon (IHS/NAV/GIMC)

**Subject:** GSU Incident Management Team Update 05.23.24

**Date:** Thursday, May 23, 2024 4:02:08 PM

Attachments: PSAall staff 5.23.24.docx

## From the GSU Incident Management Team:



Indian Health Service

May 23, 2024

**Public Service Announcement** 

FOR IMMEDIATE RELEASE

Update to Water Repair- IMT Level 3 Activation

Staff:

As of May 9, 2024, the IMT team is on level 3 – standby. We are currently in the recovery phase of this incident and all section chiefs, along with Infection Prevention & Control, will continue with duties as needed until we receive final results of the testing.

- As of today, we have received two tests results and are still waiting on the rest of the tests to be returned. Therefore, the facility will continue operating under the GIMC Water Interruption Recovery Plan.
- Limited water use continues to be in effect. Please be advised: <u>DO NOT USE</u>
   <u>TAP WATER FOR CONSUMPTION or FOR PATIENT CARE ACTIVITIES</u> such as for infant formula, wound care activities (incisions, open wounds) and showering. For bathing, use bottled water for infants, young children and anyone with a weakened immune system.
- Due to the water limitation, bottled water and ice are available for patients and staff located in Building 2000 and Outside Modular Buildings (Mammography, Diabetes Program, and Radiology Office).

Requests for bottled water and/or ice will need a completed <u>213RR</u> (see sample attached). Please take the completed 213RR to the Cafeteria to pick-up (dietary is unable to deliver).

Further questions may be addressed to Anzeribiam Akum, Public information Officer, at (505) 409-8016

Thank you,

Cc: Tsosie, Shannon (IHS/NAV/GIMC); Galvan, Theresa (IHS/NAV/GIMC); Akum, Anzeribiam (IHS/NAV/GIMC)

**Subject:** Post Repair Water Test Results **Date:** Tuesday, June 11, 2024 3:43:19 PM

## From the Incident Management Team:

#### All GSU Staff:

Post repair water test results were received as of May 31, 2024. Based on the report there are some areas that have tested positive for legionella, therefore, **LIMITED WATER USE CONTINUES TO BE IN EFFECT.** 

- Facilities management is currently working on mitigation measures including daily chlorine testing in building 2000.
- Please be advised: <u>DO NOT USE TAP WATER FOR CONSUMPTION or</u>
   FOR PATIENT CARE ACTIVITIES such as for infant formula, wound care activities (incisions, open wounds) and showering. For bathing, use bottled water for infants, young children and anyone with a weakened immune system.
- Bottled water and ice for patient use and specimen collection continues to be available through the dietary department. Requests for bottled water and/or ice will need a completed <u>213RR</u> (see sample attached). Please take the completed 213RR to the Cafeteria to pick-up (dietary is unable to deliver).
- All GSU staff have been assigned a course on HealthStream, GSU 2024
   Background on Legionella. <u>This training is due this Friday, June 14, 2024</u>.

   Please make time to complete it.
- Please contact the Incident Management Team with any questions or concerns concerning this incident.

The Incident Management Team will notify staff when it is safe to return to normal use of water.

Further questions may be addressed to Anzeribiam Akum, Incident Management Team - Public information Officer at (505) 409-8016.

Thank you,

From: <u>Jimm, Pamela (IHS/NAV)</u>

To: Akum, Anzeribiam (IHS/NAV/GIMC); Tsosie, Shannon (IHS/NAV/GIMC); Livingston, Adrienne F (IHS/NAV)
Cc: Akum, Anzeribiam (IHS/NAV/GIMC); Tsosie, Shannon (IHS/NAV/GIMC); Begay, Jordon (IHS/NAV/GIMC)

Subject: Incident Management Team update

Date: Wednesday, July 10, 2024 12:45:41 PM

## From the Incident Management Team:

#### Staff:

Retest results for the water valve replacement were received on 6/20/2024 with fewer positive legionella sites. Safety, Infection Prevention and Facilities Management are working diligently on mitigation measures to continue to reduce legionella load at all sites. They are also working on plans to allow for a safe return to normal services.

The plan is to reopen in phases to allow for a smooth transition back to normal water use, the first phase will involve Dietary/Kitchen and EVS department.

As of today July 9, 2024, water restrictions have been lifted for Dietary/Kitchen and EVS department. Only these departments have been approved to return to normal water use.

All other departments will continue with limited water use with current restrictions in place until further notice.

Dietary will continue to provide bottled water and ice until we are fully opened. Please continue to use 213RRs for all water and ice requests to dietary.

Incident command will continue to be on standby until this incident is completed, please contact the IMT with any questions or concerns.

Further questions may be addressed to Anzeribiam Akum, Incident Management Team Public information Officer, at (505) 409-8016.

Thank you,

Cc: Tsosie, Shannon (IHS/NAV/GIMC); Sellers, Natasha (IHS/NAV); Akum, Anzeribiam (IHS/NAV/GIMC); Murphy

Allison, Tami (IHS/NAV/GIMC); Begay, Jordon (IHS/NAV/GIMC)

Subject: GSU Incident Management Team update

Date: Friday, July 19, 2024 4:35:14 PM

## From the GSU Incident Management Team:

#### Staff:

Facilities Management has been working diligently with Safety, IP and other key stakeholders to ensure a safe return to normal water use. We are pleased to announce that <a href="effective IMMEDIATELY">effective IMMEDIATELY</a>, all water restrictions have been lifted and all departments in building 2000 can safely return to normal water use.

Dietary will continue to provide bottled water and ice throughout the weekend. Please continue to use 213RRs for all water and ice requests to dietary.

The Incident Management Team will continue to be on standby until this incident is completed, please contact the IMT with any questions or concerns. Thank you all for your patience, contributions and support throughout this period.

Further questions may be addressed to Anzeribiam Akum, Incident Management Team Public information Officer, at (505) 409-8016.

Thank you,

Cc: Tsosie, Shannon (IHS/NAV/GIMC); Akum, Anzeribiam (IHS/NAV/GIMC); Livingston, Adrienne F (IHS/NAV)

Subject: GSU Incident Management Team Update

Date: Wednesday, July 24, 2024 12:50:07 PM

## From the GSU Incident Management Team:

#### Staff:

With the conclusion of the water valve replacement incident, **the Incident**Management Team is now on stand down effective, July 23-2024.

All water restrictions have been removed, the water is safe to use and we are cleared to resume normal operations as of July 19 2024.

Thank you once again for all of your contributions and support throughout this incident.

Further questions may be addressed to Anzeribiam Akum, Incident Management Team Public Information Officer, at (505) 409-8016.

Thank you,

Cc: Anagal, Antonio (IHS/NAV/GIMC); Spencer, Anne (IHS/NAV); Tolino, Valarie (IHS/NAV/GIMC); Begay, Jordon

(IHS/NAV/GIMC)

**Subject:** GIMC Legionella Water Mitigation **Date:** Monday, July 1, 2024 10:23:46 AM

# From the desk of Antonio Anagal, Supervisory General Engineer:

GSU Staff.

Gallup Indian Medical Center will continue legionella water mitigation efforts. The Facility Maintenance department are to continue water flushing activities, conduct daily chlorine residual testing, logging, tracking and monitoring this data. Facility Management has received the water test results from the contractor (IWE) on 6/20/2024. The mitigation efforts established are showing to be very effective and are working. The multidisciplinary team (Infection Prevention, safety, Facility Management) have been meeting to review the daily water tests being conducted by GIMC Facility Maintenance and the water test results from the laboratory (contracted services).

The goal is to lift the water restriction as soon as possible, while ensuring proper measures are in place, which the multidisciplinary team is working on diligently.

Your understanding and cooperation is greatly appreciated during this time. If you have any questions please feel free to contact me at 505-722-1558.

Thank you,

## **Antonio Anagal**

Supervisory General Engineer Facilities Management Gallup Indian Medical Center 516 E. Nizhoni Boulevard Gallup, NM 87301

Office: (505) 722-1558 X 7-1558 Work Mobile: (505) 609-7298 Email: antonio.anagal@ihs.gov



Tsosie, Shannon (IHS/NAV/GIMC) From:

GSU-Staff; Galvan, Theresa (IHS/NAV/GIMC); Akum, Anzeribiam (IHS/NAV/GIMC) To: GIMC Incident Management Team Update 05.04.24 OPEN With Limited Water Use Subject:

Date: Sunday, May 5, 2024 8:49:12 AM limited water use 5.4.24.pdf image001.png Attachments:

## From the GSU Incident Management Team:



# EFFECTIVE MAY 4, 2024 AT 6:00 PM GALLUP INDIAN MEDICAL CENTER WILL BE OPEN WITH LIMITED WATER USE

Based on the Free Chlorine Residual test results, staff and patients may return to water usage for toileting and hand hygiene, with no consumption (<u>do not drink tap water</u>). The Incident Management Team (IMT) recommends that GIMC facility proceed and initiate the GIMC Water Interruption Recovery Period Plan immediately.

Please be advised: NO CONSUMPTION OF TAP WATER or USE FOR PATIENT CARE ACTIVITIES such as water use for infant formula, wound care activities (incisions, open wounds) and showering. When bathing use bottled water for infants, young children and anyone with a weakened immune system.

- Critical Water Use Equipment will be returned to normal operations
- Environmental Services (EVS) will initiate terminal cleaning based on the following prioritization:
  - a. Sterile Processing Department, 2S Operating Room Department and 3SW WHU Operating Room (C-Section)
  - Inpatient units: 4S Pediatrics, 3W Medical Surgical Unit, 3S Women's Health Unit, 2W Medical Surgical Unit and the Intensive Care Unit.
  - c. Outpatient Units/Departments and Offices
- "GIMC East" Patient Movement will proceed on 5/4/2024 beginning at 1200 hours for return to the GIMC Facility.
- All "GIMC East" Equipment will be staged at 3East and shall be cleaned and disinfected prior to placement in the designated areas.



Further questions may be addressed to Pamela Jimm, GIMC Public Information Officer (505) 722-1401

Shannon Tsosie Emergency Management Specialist Gallup Indian Medical Center

Cc: Tsosie, Shannon (IHS/NAV/GIMC); Galvan, Theresa (IHS/NAV/GIMC); Sellers, Natasha (IHS/NAV); Livingston,

Adrienne F (IHS/NAV)

**Subject:** GIMC Incident Management Team Update 05.03.2024 | Water Limitation Alert

**Date:** Friday, May 3, 2024 3:42:30 PM

Attachments: image001.png

image001.png WATER LIMITATION ALERT 5.3.24.pdf

## From the GSU Incident Management Team:

#### WATER LIMITATION ALERT

#### Building 2000 and Outside Modular Buildings Mammography, Diabetes Program and Radiology Office



#### DO NOT USE THE WATER FOR CONSUMPTION

Failure to follow this advisory could result in illness.

Due to the recent Water Valve Replacement Project and hospital water shut off event, staff and patients are NOT TO USE THE TAP WATER FOR DRINKING, COOKING, BATHING, and WOUND CARE.

#### What should I do?

- DO NOT USE THE TAP WATER---USE ONLY BOTTLED WATER. Bottled water should be used
  for all drinking (including baby formula), brushing teeth, washing dishes, making ice, food preparation
  and bathing until further notice. Bottled water will be available for pick up in the Cafeteria.
  (Delivery is not available)
- Drinking water for both Patients and Staff will be available in the Cafeteria. Potable water will be available to support the limited food service.

ICS will inform you when tests show that the water is safe to utilize for consumption. Test results are expected to be available by 5/18/2024.

Please share this information with all GIMC staff and patients who receive this water, especially those who may not have received this notice directly. Thank you for your patience and understanding.

For questions or further information, please contact Infection Prevention & Control: Merriam Abeita (505) 721-8312 or Sharlene Todicheeney (505) 609-7969 From: <u>Jimm, Pamela (IHS/NAV)</u>

To: GSU-Staff

Cc: Tsosie, Shannon (IHS/NAV/GIMC); Galvan, Theresa (IHS/NAV/GIMC)

**Subject:** Water Restriction Guidelines

Date:Wednesday, June 5, 2024 3:53:08 PMAttachments:WATER LIMITATION ALERT 5.3.24.pdf

Importance: High

## From the GSU Incident Management Team:

#### Attention Staff:

Please be informed GSU Incident Management Team continues to inform GSU staff and patients to follow the original water restriction guidelines sent out May 3, 2024 (attached) and not to use the water for drinking, bathing, brushing of the teeth, and for wound care in Building 2000 and NW modular trailers. Post-water valve repair test results submitted early May 2024 returned with positive findings of Legionella bacteria.

Remediation for this issue is currently underway. GSU priority is to maintain a safe working environment for staff and patients. The objective is to safely return to normal water use as soon as possible. Facility Management is currently working with a third party vendor to conduct hyperchlorination, re-testing of water system, and completing mitigation/maintenance plan.

Dr. Alithea Gabrellas, Infection Prevention Team, and Safety Team are preparing a presentation to be available on Healthstream. All staff are required to view this presentation, once available. It will better inform staff of Legionella bacteria risks. The module will be assigned to GSU staff this week for completion by June 12, 2024.

Providers who are evaluating patients should have a heightened clinical awareness for the possibility of Legionnaires' disease. (*Please see email from Dr. Gabrellas regarding recommendations for testing and treatment.*)

Illnesses caused by Legionella bacteria, when inhaled or aspirated into the lungs, can present as Pontiac fever (fever and flu-like symptoms) in younger people with normal immune systems or as Legionnaire's disease (pneumonia-like symptoms) in people over the age of 50 years old with underlying health conditions.

If individuals had exposure to the water in Building 2000 or NW modular trailers and are experiencing fever and flu, or pneumonia-like symptoms it is advised they should present to their primary care clinic, WIPCC, or ED as appropriate.

If there are any specific questions or concerns, please communicate with your supervisors and/or division leads as needed.

Incident Command Team

Cc: Tsosie, Shannon (IHS/NAV/GIMC); Galvan, Theresa (IHS/NAV/GIMC); Sellers, Natasha (IHS/NAV); Akum,

Anzeribiam (IHS/NAV/GIMC)

Subject: Requests for Bottled Water and Ice Date: Monday, May 6, 2024 2:29:37 PM

Attachments: ICS 213RR ICT Request for Bottled Water 050624 1114.pdf

## From the GSU Incident Management Team:

#### Attention Staff:

Due to the water limitation, bottled water and ice are available for patients and staff located in Building 2000 and Outside Modular Buildings (Mammography, Diabetes Program, and Radiology Office).

Requests for bottled water and/or ice will need a completed <u>213RR</u> (see sample attached). Please take the completed 213RR to the Cafeteria to pick-up (dietary is unable to deliver).

Thank you,

Incident Command Team

Cc: Tsosie, Shannon (IHS/NAV/GIMC); Akum, Anzeribiam (IHS/NAV/GIMC)

Subject: IMT: Water Consumption Limitation

Date: Friday, December 6, 2024 12:57:05 PM

Attachments: <u>image001.png</u>

## From the GSU Incident Management Team:

#### WATER CONSUMPTION LIMITATION

As of December 06, 2024, at 0800, the Gallup Service Unit Incident Management Team (IMT) is on <u>LEVEL 1 FULL OPERATION STAND-UP</u>. The IMT objectives have been established for this operational period to address the positive legionella results received in various sites on campus.

The IMT will have periodic updates provided on the GIMC Intranet webpage to provide pertinent information to keep staff informed.

The current IMT planned objectives include:

- 1. Identify and rapidly respond to any disruptions in water supply, minimize impact to patient and staff, effectively communicate with staff and community. Provide education and situational awareness on Legionella to staff, patients and community.
- 2. Implement corrective measures and mitigation measures to prioritize the safety and quality of water supply and maintain appropriate documentation until the decrease of Legionella detection in the affected areas.

#### **IMT Updates**

- To assure patient and staff safety, a water consumption limitation is in EFFECT IMMEDIATELY until further notice. Please be advised: NO CONSUMPTION OF TAP WATER AND ICE MADE FROM TAP WATER. Bottled water should be used for infant formula, brushing teeth and wound care activities (incisions and wounds)
  - Tap water can be used for hand hygiene
  - Critical Water Use Equipment will continue operations
  - Environmental Services (EVS) will continue normal procedures for cleaning
  - Sterile Processing (SPD) will continue normal procedures of operations
- Bottled water and ice is available for pick up in the cafeteria with a completed <u>213rr</u>, ALL 213RRs need department supervisor signatures prior to pick up (NO DELIVERIES AVAILABLE)

There are a number of ICS forms for those who wish to provide updates to the IMT, these forms can be located on the link provided or through the GIMC Intranet Sub sites:

http://navgimcvsp19/sites/Home/IncidentCommand/SitePages/Home.aspx

Further questions may be addressed to Anzeribiam Akum, Incident Management Team Public information Officer, at (505) 409-8016

Thank you,

#### Anzeribiam



Cc: Akum, Anzeribiam (IHS/NAV/GIMC); Nair, Sneha (IHS/NAV/GIMC)

Subject: GSU Incident Management Team Update

Date: Friday, December 13, 2024 11:11:49 AM

Attachments: <u>image001.png</u>

## From the GSU Incident Management Team:

#### WATER CONSUMPTION LIMITATION

As of December 06, 2024, at 0800, the Gallup Service Unit Incident Management Team (IMT) is on <u>LEVEL 1 FULL OPERATION STAND-UP</u>. The IMT objectives have been established for this operational period to address the positive legionella results received in various sites on campus. The current IMT planned objectives include:

- 1. Identify and rapidly respond to any disruptions in water supply, minimize impact to patient and staff, effectively communicate with staff and community. Provide education and situational awareness on Legionella to staff, patients and community.
- 2. Implement corrective measures and mitigation measures to prioritize the safety and quality of water supply and maintain appropriate documentation until the decrease of Legionella detection in the affected areas.

#### **IMT Updates**

- To assure patient and staff safety, a water consumption limitation is in EFFECT IMMEDIATELY until further notice. Please be advised: NO CONSUMPTION OF TAP WATER AND ICE MADE FROM TAP WATER (Making your own ice). Bottled water should be used for infant formula and brushing teeth.
  - Critical Water Use Equipment will continue operations
  - Environmental Services (EVS) will continue normal procedures for cleaning
  - Sterile Processing (SPD) will continue normal procedures of operations
  - Tap water can be used for hand hygiene
  - Showering is acceptable, follow current wound care activities guidance per policy/protocol (incisions and wounds)
  - The hospital grade ice machines available in the facility have filtration systems and are maintained by Facilities and are safe to use
  - **Bottle fillers** have filtration systems and are maintained by Facilities and are safe to use. **Do not** use water fountains
  - Eyewash stations are safe to use, they are flushed weekly for a minimum of three minutes and documented on the GSU Emergency Eye Wash Station/ Shower Inspection Log
- Bottled water and ice is available for pick up in the cafeteria with a completed <u>213rr</u>, ALL 213RRs need department supervisor signatures prior to pick up (NO DELIVERIES AVAILABLE)
   There are a number of ICS forms for those who wish to provide updates to the IMT, these forms can be located on the link provided or through the GIMC Intranet Sub sites:

# GSU IMT Organization Structure Shannon Tsosie, Incident Commander

Operation Section Chief: Natasha Sellers	Public Information Officer: Anzeribiam Akum/
	Sneha Nair
Logistic Section Chief: Lamour Tulley	Safety Officer: Fleurette Brown
Planning Section Chief: Adriane Livingston	Communication/IT: Clarissa John
Finance Section Chief: Agnes Kee	Subject Matter Experts: Dr Alithea Gabrellas
	/Merriam Abeita

The IMT will have periodic updates provided on the GIMC Intranet webpage to provide pertinent information to keep staff informed.

Further questions may be addressed to Anzeribiam Akum, Incident Management Team Public information Officer at (505) 409-8016

Thank you so much, Anzeribiam.

Anzeribiam Akum, MS, RDN, LDN Lieutenant, U.S. Public Health Service Clinical Dietitian Gallup Indian Medical Center 516 E Nizhoni Blvd Gallup, NM 87301

Office: 505-722-1408 (Ext. 71408)

Work: 505-409-8016



Cc: Akum, Anzeribiam (IHS/NAV/GIMC); Nair, Sneha (IHS/NAV/GIMC)

Subject: GSU Incident Management Team Update

Date: Thursday, December 19, 2024 3:30:25 PM

Attachments: <u>image001.png</u>

## From the GSU Incident Management Team:

#### WATER CONSUMPTION LIMITATION

As of December 06, 2024, at 0800, the Gallup Service Unit Incident Management Team (IMT) is on <u>LEVEL 1 FULL OPERATION STAND-UP</u>. The IMT objectives have been established for this operational period to address the positive Legionella results received in various sites on campus. The current IMT planned objectives include:

- 1. Identify and rapidly respond to any disruptions in water supply, minimize impact to patient and staff, effectively communicate with staff and community. Provide education and situational awareness on Legionella to staff, patients and community.
- 2. Implement corrective measures and mitigation measures to prioritize the safety and quality of water supply and maintain appropriate documentation until the decrease of Legionella detection in the affected areas.

#### **IMT Updates**

To assure patient and staff safety, a water consumption limitation is in EFFECT IMMEDIATELY until further notice. Please be advised: **NO CONSUMPTION OF TAP WATER AND ICE MADE FROM TAP WATER (Making your own ice).** Bottled water should be used for infant formula, wound care activities and brushing teeth.

- All departments are <u>REQUIRED</u> to flush faucets, showers and toilets in their areas <u>DAILY</u> and complete the <u>Water Management Daily Flushing Log</u> located on the home page and will also be provided to all supervisors. Both hot and cold water faucets should be flushed for at least 3 minutes.
- The following will continue normal procedures; environmental services, critical equipment use, sterile processing, showering and hand hygiene. Continue with normal procedures for eyewash stations.
- The hospital grade **ice machines and bottle fillers** in the facility have filtration systems, are maintained by Facilities and are safe to use.
- Bottled water and ice are available for pick up in the cafeteria with a completed <u>213RR</u>, ALL
   213RRs need department supervisor signatures prior to pick up (NO DELIVERIES AVAILABLE).

There are ICS forms for those who wish to provide updates to the IMT, these forms can be located on the link provided or through the GIMC Intranet Sub Sites:

## GSU IMT Organization Structure Shannon Tsosie, Incident Commander

Public Information Officer: Anzeribiam Akum/	Operation Section Chief: Natasha Sellers
Sneha Nair	
Safety Officer: Fleurette Brown/ Deanna Barber	Logistic Section Chief: Lamour Tulley
Communication/IT: Clarissa John	Planning Section Chief: Adriane Livingston
Subject Matter Experts: Dr Alithea Gabrellas	Finance Section Chief: Agnes Kee
/Merriam Abeita	

The IMT will have periodic updates provided on the GIMC Intranet webpage to provide pertinent information to keep staff informed.

Further questions may be addressed to Anzeribiam Akum, Incident Management Team Public Information Officer at (505) 409-8016

Thank you kindly, Anzeribiam.

Anzeribiam Akum, MS, RDN, LDN Lieutenant, U.S. Public Health Service Clinical Dietitian Gallup Indian Medical Center 516 E Nizhoni Blvd Gallup, NM 87301

Office: 505-722-1408 (Ext. 71408)

Work: 505-409-8016



Cc: Akum, Anzeribiam (IHS/NAV/GIMC); Sehn, Mary (IHS/NAV/GIMC); Livingston, Adrienne F (IHS/NAV)

Subject: Legionella Mitigation updates

Date: Thursday, February 6, 2025 9:55:21 AM

Attachments: image001.png image002.png

image002.png image003.png image004.png

#### From the GSU Incident Management Team:

#### Legionella Mitigation Updates

As of December 06, 2024, the Gallup Service Unit Incident Management Team (IMT) is on <u>LEVEL 1 FULL OPERATION STAND-UP</u>. Legionella water test results received on 01/02/2025 confirmed that 21 of 38 total sites on the GIMC campus tested positive. Two strains of Legionella, L. pneumophila, serogroup 1 and L. anisa (Blue-white Legionella sp.), were found in the affected areas. Next round of testing is scheduled for February 6, 2025.

The current IMT planned objectives include:

- Identify and rapidly respond to any water supply disruption to minimize impact to patients and staff.
- Implement corrective measures and mitigation measures to decrease Legionella detection in the affected areas.
- Continue to utilize labor pool/team to conduct flushing activities in buildings/areas not occupied on weekends and/or holidays.
- Facility Management will continue to document water mitigation completion and continue to
  utilize developed process for the collection and documentation of flushing and testing activities.
  Activities will continue to be documented timely and accurately.
- Identify and enter water management measures into Nuvolo and ensure Facility Management staff are educated on Nuvolo capabilities such as entering measures and developing reports.

#### IMT Accomplishments

- Daily flushing implemented and ongoing, Labor Pool was implemented 1/17 for flushing activities in those buildings/areas not occupied on weekends and/or holidays
- · Facilities continues flushing activities in assigned areas as well as regular chlorine testing
- · Shower head/filter installation completed
- Laminar flow devices are being installed in all sinks throughout the facility to help minimize the growth of legionella
- · OSHA complaint submitted and cleared

#### IMT Updates

- Labor pool needed for February 8<sup>th</sup> and 9<sup>th</sup> from 7am to 12pm noon. Contact Vernon Francisco (505)339-9123 or Natasha Sellers (505) 721-0232 after obtaining supervisor/designee approval.
- Mandatory HealthStream training; Background on Legionella due on 02/21/2025
- NO CONSUMPTION OF TAP WATER AND ICE MADE FROM TAP WATER (Making your own ice) is in effect until further notice. To assure patient and staff safety, bottled water should be used for infant formula, wound care activities and brushing teeth.
- Shower filters have been installed in all showers facility wide. ALL SHOWERS ARE NOW
   CLEARED AND SAFE TO USE. <u>FLUSHING IS STILL REQUIRED FOR ALL</u>
   SHOWERS

#### **DAILY FLUSHING**

- All departments are <u>REQUIRED</u> to flush faucets, showers and toilets in their areas
   ONCE <u>DAILY</u> and complete the <u>Water Management Daily Flushing Log</u> located on
   the home page, under Water Consumption Limitation.
- Flushing logs due every Friday through the <u>Dropbox for Daily Logs</u> also located on the home page under Water Consumption Limitation.

Bottled water and ice are available for pick up in the cafeteria with a completed <u>213RR</u>, ALL 213RRs need department supervisor signatures prior to pick up (NO DELIVERIES AVAILABLE). **Please do not send patients to dietary for water. Water should be provided by staff to ALL patients (inpatient, ED and ambulatory) upon request.** 

There are ICS forms for those who wish to provide updates to the IMT, these forms can be located on the link provided or through the GIMC Intranet Sub Sites: http://navgimcvsp19/sites/Home/IncidentCommand/SitePages/Home.aspx\_

## GSU IMT Organization Structure Shannon Tsosie, Incident Commander

Operation Section Chief: Natasha Sellers
Logistic Section Chief: Lamour Tulley
Planning Section Chief: Adrienne Livingston
Finance Section Chief: Agnes Kee
Facility Management: Ben Williams

The IMT will have periodic updates provided on the GIMC Intranet webpage to provide pertinent information to keep staff informed.

Further questions may be addressed to Anzeribiam Akum, Incident Management Team Public Information Officer at (505) 409-8016

Thank you, Shannon Tsosie, Incident Commander GSU Incident Management Team

Thank you kindly, Anzeribiam and Sneha.

Anzeribiam Akum, MS, RDN, LDN
Lieutenant, U.S. Public Health Service
Clinical Dietitian
Gallup Indian Medical Center
516 E Nizhoni Blvd
Gallup, NM 87301

Office: 505-722-1408 (Ext. 71408)

Work: 505-409-8016



Cc: Akum, Anzeribiam (IHS/NAV/GIMC); Nair, Sneha (IHS/NAV/GIMC)

Subject: Incident Management Team Update

Date: Tuesday, February 18, 2025 12:32:25 PM

Attachments: <u>image001.png</u>

image002.png image003.png

## From the GSU Incident Management Team:

#### Legionella Mitigation Updates

As of December 06, 2024, the Gallup Service Unit Incident Management Team (IMT) is on <u>LEVEL 1 FULL OPERATION STAND-UP</u>. Legionella water test results received on 01/02/2025 confirmed that 21 of 38 total sites on the GIMC campus tested positive. Two strains of Legionella, L. pneumophila, serogroup 1 and L. anisa (Blue-white Legionella sp.), were found in the affected areas. Next round of testing is scheduled for February 6, 2025.

The current IMT planned objectives include:

- Identify and rapidly respond to any water supply disruption to minimize impact to patients and staff.
- Implement corrective measures and mitigation measures to decrease Legionella detection in the affected areas.
- Continue to utilize labor pool/team to conduct flushing activities in buildings/areas not occupied on weekends and/or holidays.
- Facility Management will continue to document water mitigation completion and continue to
  utilize developed process for the collection and documentation of flushing and testing activities.
  Activities will continue to be documented timely and accurately.
- Identify and enter water management measures into Nuvolo and ensure Facility Management staff are educated on Nuvolo capabilities such as entering measures and developing reports.

#### **IMT Accomplishments**

- Daily flushing implemented and ongoing, Labor Pool was implemented 1/17 for flushing activities in those buildings/areas not occupied on weekends and/or holidays
- Facilities continues flushing activities in assigned areas as well as regular chlorine testing
- Shower head/filter installation completed
- Laminar flow devices are being installed in all sinks throughout the facility to help minimize the growth of legionella
- OSHA complaint submitted and cleared

#### **IMT Updates**

- Labor pool needed for February 15<sup>th</sup>, 16<sup>th</sup> and 17<sup>th</sup> from 7am to 12pm noon. Contact Vernon Francisco (505)339-9123 or Natasha Sellers (505) 721-0232 after obtaining supervisor/designee approval.
- Mandatory HealthStream training; Background on Legionella due on 02/21/2025
- NO CONSUMPTION OF TAP WATER AND ICE MADE FROM TAP WATER (Making your own ice) is in effect until further notice. To assure patient and staff safety, bottled water should be used for infant formula, wound care activities and brushing teeth.
- Shower filters have been installed in all showers facility wide. ALL SHOWERS ARE NOW
  CLEARED AND SAFE TO USE. FLUSHING IS STILL REQUIRED FOR ALL
  SHOWERS

#### DAILY FLUSHING

- All departments are <u>REQUIRED</u> to flush faucets, showers and toilets in their areas
   ONCE <u>DAILY</u> and complete the <u>Water Management Daily Flushing Log</u> located on
   the home page, under Water Consumption Limitation.
- Flushing logs due every Friday through the <u>Dropbox for Daily Logs</u> also located on the home page under Water Consumption Limitation.

Bottled water and ice are available for pick up in the cafeteria with a completed <u>213RR</u>, ALL 213RRs need department supervisor signatures prior to pick up (NO DELIVERIES AVAILABLE). **Please do not send patients to dietary for water. Water should be provided by staff to ALL patients (inpatient, ED and ambulatory) upon request.** 

There are ICS forms for those who wish to provide updates to the IMT, these forms can be located on the link provided or through the GIMC Intranet Sub Sites:

http://navgimcvsp19/sites/Home/IncidentCommand/SitePages/Home.aspx

## GSU IMT Organization Structure Shannon Tsosie, Incident Commander

Public Information Officer: Anzeribiam Akum/ Sneha Nair	Operation Section Chief: Natasha Sellers
Safety Officer: Deanna Barber	Logistic Section Chief: Lamour Tulley
Communication/IT: Clarissa John	Planning Section Chief: Adrienne Livingston
Liaison Officer: Dr. Jerome Alford, NAO	Finance Section Chief: Agnes Kee
Medical Technical Specialist: Dr. Alithea Gabrellas /Merriam Abeita / Yolanda Wiliams	Facility Management: Ben Williams

The IMT will have periodic updates provided on the GIMC Intranet webpage to provide pertinent information to keep staff informed.

Further questions may be addressed to Anzeribiam Akum, Incident Management Team Public Information Officer at (505) 409-8016

Thank you, Shannon Tsosie, Incident Commander GSU Incident Management Team

Thank you kindly.
Anzeribiam.

Anzeribiam Akum, MS, RDN, LDN Lieutenant, U.S. Public Health Service Clinical Dietitian Gallup Indian Medical Center 516 E Nizhoni Blvd Gallup, NM 87301

Office: 505-722-1408 (Ext. 71408)

Work: 505-409-8016



From: Jimm, Pamela (IHS/NAV) GSU-Staff; NAV/THC Staff To: Livingston, Adrienne F (IHS/NAV) Cc: Subject: Incident Management Team Update Date: Friday, February 21, 2025 5:15:07 PM Attachments:

Daily Flushing Instructions Updated 022125.pdf

image001.png image002.png

## From the Incident Management Team:

## Legionella Mitigation Updates

As of December 06, 2024, the Gallup Service Unit Incident Management Team (IMT) is on LEVEL 1 FULL OPERATION STAND-UP. Legionella water test results received on 01/02/2025 confirmed that 21 of 38 total sites on the GIMC campus tested positive. Two strains of Legionella, L. pneumophila, serogroup 1 and L. anisa (Blue-white Legionella sp.), were found in the affected areas. Next round of testing was completed on February 11, 2025.

The current IMT planned objectives include:

- 1. Identify and rapidly respond to any water supply disruption to minimize impact to patients and
- Implement corrective measures and mitigation measures to decrease Legionella detection in the affected areas.
- 3. Continue to utilize labor pool/team to conduct flushing activities in buildings/areas not occupied on weekends and/or holidays.
- 4. Facility Management will continue to document water mitigation completion and continue to utilize developed process for the collection and documentation of flushing and testing activities. Activities will continue to be documented timely and accurately.
- 5. Identify and enter water management measures into Nuvolo and ensure Facility Management staff are educated on Nuvolo capabilities such as entering measures and developing reports.

#### IMT Accomplishments

- Daily flushing implemented and ongoing; Labor Pool was implemented 1/17 for flushing activities in those buildings/areas not occupied on weekends and/or holidays.
- Facilities continues flushing activities in assigned areas as well as regular chlorine testing.
- Shower head/filter installation completed.
- Laminar flow devices are being installed in all sinks throughout the facility to help minimize the growth of legionella.
- OSHA complaint submitted and cleared.

#### IMT Updates

- The Daily Flushing handout was updated (see attached). REMINDER: Inpatient shower hoses need to be hanging down when not in use and not propped up.
- Mandatory HealthStream training Background on Legionella due on 02/21/2025.
- Labor Pool needed for February 22 and 23 from 7am to 10am. Contact Adrienne Livingston (505) 979-2509 after obtaining supervisor/designee approval.
- NO CONSUMPTION OF TAP WATER AND ICE MADE FROM TAP WATER (making your own ice) is in effect until further notice. To assure patient and staff safety, bottled water should be used for infant formula, wound care activities, and brushing teeth.

Shower filters have been installed in all showers facility wide. ALL SHOWERS ARE NOW
CLEARED AND SAFE TO USE. <u>FLUSHING IS STILL REQUIRED FOR ALL</u>
SHOWERS.

#### DAILY FLUSHING

- All departments are <u>REQUIRED</u> to flush faucets, showers, and toilets in their areas
   ONCE <u>DAILY</u> and complete the <u>Water Management Daily Flushing Log</u> located on
   the home page, under Water Consumption Limitation.
- Flushing logs due every Friday through the <u>Dropbox for Daily Logs</u> also located on the home page under Water Consumption Limitation.

Bottled water and ice are available for pick up in the cafeteria with a completed 213RR. All 213RRs need department supervisor signatures prior to pick up (NO DELIVERIES AVAILABLE). Please do not send patients to dietary for water. Water should be provided by staff to ALL patients (inpatient, ED, and ambulatory) upon request.

There are ICS forms for those who wish to provide updates to the IMT. These forms are located via the link below or through the GIMC Intranet Sub-Sites: http://navgimcvsp19/sites/Home/IncidentCommand/SitePages/Home.aspx

## GSU IMT Organization Structure Shannon Tsosie, Incident Commander

Public Information Officer: Anzeribiam Akum/ Sneha Nair	Operation Section Chief: Natasha Sellers	
Safety Officer: Deanna Barber	Logistic Section Chief: Lamour Tulley	
Communication/IT: Clarissa John	Planning Section Chief: Adrienne Livingston	
Liaison Officer: Dr. Jerome Alford, NAO	Finance Section Chief: Agnes Kee	
Medical Technical Specialist: Dr. Alithea Gabrellas /Merriam Abeita / Yolanda Wiliams	Facility Management: Ben Williams	

The IMT will provide periodic updates on the GIMC Intranet webpage to provide pertinent information to keep staff informed.

Further questions may be addressed to Anzeribiam Akum, Incident Management Team Public Information Officer at (505) 409-8016

Thank you, Shannon Tsosie, Incident Commander GSU Incident Management Team

## Thank you,

Adrienne Livingston
GIMC Quality Management
Policy Coordinator / IC Planning Section Chief
Adrienne.Livingston@ihs.gov
505-979-2509

From: Jimm, Pamela (IHS/NAV)

To: GSU-Staff; NAV/THC Staff

Cc: Sehn, Mary (IHS/NAV/GIMC); Akum, Anzeribiam (IHS/NAV/GIMC); Tsosie, Shannon (IHS/NAV/GIMC)

Subject: Incident Management Team Update

Date: Thursday, February 27, 2025 4:22:23 PM

Attachments: image002.png image003.png

# From the GSU Incident Management Team:

## Legionella Mitigation Updates

As of December 06, 2024, the Gallup Service Unit Incident Management Team (IMT) is on <u>LEVEL 1 FULL OPERATION STAND-UP</u>. Legionella water test results received on 01/02/2025 confirmed that 21 of 38 total sites on the GIMC campus tested positive. Two strains of Legionella, L. pneumophila, serogroup 1 and L. anisa (Blue-white Legionella sp.), were found in the affected areas. Next round of testing is scheduled for February 11, 2025.

The current IMT planned objectives include:

- Identify and rapidly respond to any water supply disruption to minimize impact to patients and staff.
- Implement corrective measures and mitigation measures to decrease Legionella detection in the affected areas.
- Continue to utilize labor pool/team to conduct flushing activities in buildings/areas not occupied on weekends and/or holidays.
- Facility Management will continue to document water mitigation completion and continue to
  utilize developed process for the collection and documentation of flushing and testing activities.
  Activities will continue to be documented timely and accurately.
- Identify and enter water management measures into Nuvolo and ensure Facility Management staff are educated on Nuvolo capabilities such as entering measures and developing reports.

#### IMT Accomplishments

- Daily flushing implemented and ongoing, Labor Pool was implemented 1/17 for flushing activities in those buildings/areas not occupied on weekends and/or holidays
- Facilities continue flushing activities in assigned areas as well as regular chlorine testing
- Shower head/filter installation completed
- Laminar flow devices are being installed in all sinks throughout the facility to help minimize the growth of legionella
- OSHA complaint submitted and cleared

#### IMT Updates

- The follow up test completed on 02/11/2025 yielded the following results: 57 sites were tested, of which 23 resulted as positive with an increase in levels at 8 sites. 34 sites had no detected levels of Legionella, and 8 sites had a decrease in legionella levels.
- REMINDER: Inpatient shower hoses need to be hung down when not in use and NOT propped up. See Daily Flushing Instructions Updated 022125.pdf
- Mandatory HealthStream training; Background on Legionella is currently overdue, please complete ASAP if you have not yet done so.
- Labor pool needed for March 1<sup>st</sup> and 2<sup>nd</sup> from 7am to 10am. Contact Adrienne Livingston (505) 979-2509 or Natasha Sellers (505) 339-9123 after obtaining supervisor/designee approval.
- NO CONSUMPTION OF TAP WATER AND ICE MADE FROM TAP WATER (Making your own ice) is
  in effect until further notice. To assure patient and staff safety, bottled water should be used for
  infant formula, wound care activities and brushing teeth.

## ALL SHOWERS ARE NOW CLEARED AND SAFE TO USE. <u>FLUSHING IS STILL</u> REQUIRED FOR ALL SHOWERS

#### DAILY FLUSHING

- All departments are <u>REQUIRED</u> to flush faucets, showers and toilets in their areas
   ONCE <u>DAILY</u> and complete the <u>Water Management Daily Flushing Log</u> located on
   the home page, under Water Consumption Limitation.
- Flushing logs due every Friday through the <u>Dropbox for Daily Logs</u> also located on the home page under Water Consumption Limitation.

Bottled water and ice are available for pick up in the cafeteria with a completed <u>213RR</u>, ALL 213RRs need department supervisor signatures prior to pick up (NO DELIVERIES AVAILABLE). **Please do not send patients to dietary for water. Water should be provided by staff to ALL patients (inpatient, ED and ambulatory) upon request.** 

There are ICS forms for those who wish to provide updates to the IMT, these forms can be located on the link provided or through the GIMC Intranet Sub Sites:

http://navgimcvsp19/sites/Home/IncidentCommand/SitePages/Home.aspx\_

#### **GSU IMT Organization Structure**

#### Shannon Tsosie, Incident Commander

Public Information Officer: Anzeribiam Akum/ Sneha Nair	Operation Section Chief: Natasha Sellers	
Safety Officer: Deanna Barber	Logistic Section Chief: Lamour Tulley	
Communication/IT: Clarissa John	Planning Section Chief: Adrienne Livingston	
Liaison Officer: Dr. Jerome Alford, NAO	Finance Section Chief: Agnes Kee	
Medical Technical Specialist: Dr. Alithea Gabrellas /Merriam Abeita / Yolanda Wiliams	Facility Management: Ben Williams	

The IMT will have periodic updates provided on the GIMC Intranet webpage to provide pertinent information to keep staff informed.

Further questions may be addressed to Anzeribiam Akum, Incident Management Team Public Information Officer at (505) 409-8016

Thank you, Shannon Tsosie, Incident Commander GSU Incident Management Team

Very respectfully,

LT Sneha Nair, PT, DPT, MPT.

Lieutenant, US Public Health Service,

Gallup Indian Medical Center,

516 E Nizhoni Blvd,

Gallup, NM 87301.

(505)726-8780.

sneha.nair@ihs.gov.

From: Jimm, Pamela (IHS/NAV)

To: GSU-Staff; NAV/THC Staff

Cc: Tsosie, Shannon (IHS/NAV/GIMC); Sellers, Natasha (IHS/NAV); Nair, Sneha (IHS/NAV/GIMC)

Subject: Incident Management Team Update

Date: Friday, January 3, 2025 2;27:05 PM

## From the GSU Incident Management Team:

#### WATER CONSUMPTION LIMITATION

As of December 06, 2024, at 0800, the Gallup Service Unit Incident Management Team (IMT) is on <u>LEVEL 1 FULL OPERATION STAND-UP</u>. The IMT objectives have been established for this operational period to address the positive Legionella results received in various sites on campus.

The current IMT planned objectives include:

- 1. Identify and rapidly respond to any disruptions in water supply, minimize impact to patient and staff, effectively communicate with staff and community. Provide education and situational awareness on Legionella to staff, patients and community.
- 2. Implement corrective measures and mitigation measures to prioritize the safety and quality of water supply and maintain appropriate documentation until the decrease of Legionella detection in the affected areas.

#### **IMT Updates**

To assure patient and staff safety, a water consumption limitation is in EFFECT IMMEDIATELY until further notice. Please be advised: **NO CONSUMPTION OF TAP WATER AND ICE MADE FROM TAP WATER (Making your own ice).** Bottled water should be used for infant formula, wound care activities and brushing teeth.

- Legionella water test results received on 01/02/2025 confirmed that 21 of 38 sites tested positive. The sites which tested positive included 9 eye wash stations, 7 showers, 3 sinks, 1 bottle filler (ED Expansion area) and 1 soiled utility room.
- Showers should NOT be used by patients and staff until further notice.
- All departments are <u>REQUIRED</u> to flush faucets, showers and toilets in their areas <u>DAILY</u> and complete the <u>Water Management</u>
   Daily Flushing Log located on the home page and provided to all supervisors. Both <u>hot and cold water faucets</u> should be flushed for at least 5 minutes.
- All eye wash stations need to be flushed atleast twice a week for a minimum of 5 minutes per Safety's recommendations.
- Bottled water and ice are available for pick up in the cafeteria with a completed <u>213RR</u>, ALL 213RRs need department supervisor signatures prior to pick up (NO DELIVERIES AVAILABLE).

There are ICS forms for those who wish to provide updates to the IMT, these forms can be located on the link provided or through the GIMC Intranet Sub Sites: <a href="http://navgimcvsp19/sites/Home/IncidentCommand/SitePages/Home.aspx">http://navgimcvsp19/sites/Home/IncidentCommand/SitePages/Home.aspx</a>

#### <u>GSU IMT Organization Structure</u> Shannon Tsosie, Incident Commander

<b>Public Information Officer</b> : Anzeribiam Akum/ Sneha Nair	Operation Section Chief: Natasha Sellers
Safety Officer: Fleurette Brown/ Deanna Barber	Logistic Section Chief: Lamour Tulley
Communication/IT: Clarissa John	Planning Section Chief: Adrienne Livingston
Subject Matter Experts: Dr. Alithea	Finance Section Chief: Agnes Kee
Gabrellas/Merriam Abeita	

The IMT will have periodic updates provided on the GIMC Intranet webpage to provide pertinent information to keep staff informed. Further questions may be addressed to Sneha Nair, Incident Management Team Public Information Officer at 917-861-8226.

Thank you, Shannon Tsosie, Incident Commander GSU Incident Management Team. From: Jimm, Pamela (IHS/NAV)

To: GSU-Staff; NAV/THC Staff

Cc: Tsosie, Shannon (IHS/NAV/GIMC); Sellers, Natasha (IHS/NAV); Nair, Sneha (IHS/NAV/GIMC); Akum, Anzeribiam

(IHS/NAV/GIMC)

Subject: Incident Management Team Update

Date: Wednesday, January 8, 2025 3:41:58 PM

Attachments: <u>image001.png</u>

## From the GSU Incident Management Team:

Staff,

As of December 06, 2024, at 0800, the Gallup Service Unit Incident Management Team (IMT) is on <u>LEVEL 1 FULL OPERATION STAND-UP</u>. The IMT objectives have been established for this operational period to address the positive Legionella results received in various sites on campus. The current IMT planned objectives include:

- 1. Identify and rapidly respond to any disruptions in water supply, minimize impact to patient and staff, effectively communicate with staff and community. Provide education and situational awareness on Legionella to staff, patients and community.
- 2. Implement corrective measures and mitigation measures to prioritize the safety and quality of water supply and maintain appropriate documentation until the decrease of Legionella detection in the affected areas.

#### **IMT Updates**

To assure patient and staff safety, a water consumption limitation is STILL IN EFFECT until further notice. Please be advised: **NO CONSUMPTION OF TAP WATER AND ICE MADE FROM TAP WATER** (**Making your own ice**). Bottled water should be used for infant formula, wound care activities and brushing teeth.

- Legionella water test results received on 01/02/2025 confirmed that 21 of 38 total sites on the GIMC campus tested positive. Two strains of Legionella, L. pneumophila, serogroup 1 and L. anisa (Blue-white Legionella sp.), were found in the affected areas.
  - **L. pneumophila, serogroup 1** is the most pathogenic strain of the Legionella bacteria responsible for the majority of Legionnaires' disease cases. Legionnaires' disease is a severe form of pneumonia that often requires hospitalization and is fatal in about 10% of cases overall, and in 25% of healthcare associated cases. While other Legionella types exist, they are less common and may cause milder infections compared to L. pneumophila, serogroup 1.
- Facility Maintenance completed the installation/flushing of Nephros Shower Filters (which are point of use filters designed to remove Legionella from water) in the 10 sites noted below:
  - 4S Inpatient Pediatric Shower (1)
  - 3West Med Surg Unit Showers (2)
  - West Med Surg Unit Showers (2)
  - WHU: Post-Partum 3SW96, 98 and 99, L&D 3SE71 and 72 Showers (5)

These showers are cleared for use effective immediately. **ALL other showers continue to remain** restricted (NO USE) until further notice.

- All departments are <u>REQUIRED</u> to flush faucets, showers and toilets in their areas <u>DAILY</u> and complete the <u>Water Management Daily Flushing Log</u> located on the home page and provided to all supervisors. Both <u>hot and cold water faucets</u> should be flushed <u>for at least 5</u> minutes.
- All eye wash stations need to be flushed at least twice a week for a minimum of 5 minutes
- Bottled water and ice are available for pick up in the cafeteria with a completed <u>213RR</u>, ALL 213RRs need department supervisor signatures prior to pick up (NO DELIVERIES AVAILABLE).
   Please do not send patients to dietary for water. Water should be provided by staff to ALL patients (inpatient, ED and ambulatory) upon request

There are ICS forms for those who wish to provide updates to the IMT, these forms can be located on the link provided or through the GIMC Intranet Sub Sites:

http://navgimcvsp19/sites/Home/IncidentCommand/SitePages/Home.aspx\_

# **GSU IMT Organization Structure**Shannon Tsosie, Incident Commander

Public Information Officer: Anzeribiam Akum/	Operation Section Chief: Natasha Sellers
Sneha Nair	
Safety Officer: Fleurette Brown/ Deanna Barber	Logistic Section Chief: Lamour Tulley
Communication/IT: Clarissa John	Planning Section Chief: Adriane Livingston
Subject Matter Experts: Dr Alithea Gabrellas	Finance Section Chief: Agnes Kee
/Merriam Abeita	

The IMT will have periodic updates provided on the GIMC Intranet webpage to provide pertinent information to keep staff informed.

Further questions may be addressed to Anzeribiam Akum, Incident Management Team Public Information Officer at (505) 409-8016.

Thank you kindly, Anzeribiam.

Anzeribiam Akum, MS, RDN, LDN Lieutenant, U.S. Public Health Service Clinical Dietitian Gallup Indian Medical Center 516 E Nizhoni Blvd Gallup, NM 87301

Office: 505-722-1408 (Ext. 71408)

Work: 505-409-8016



From: Jimm, Pamela (IHS/NAV)

To: GSU-Staff; NAV/THC Staff

Cc: Akum, Anzeribiam (IHS/NAV/GIMC); Tsosie, Shannon (IHS/NAV/GIMC); Nair, Sneha (IHS/NAV/GIMC);

<u>Livingston, Adrienne F (IHS/NAV)</u>

Subject:Incident Management Team UpdateDate:Friday, January 17, 2025 2:06:31 PM

Attachments: FLUSHING FLYER.pdf

How to Upload into the Dropbox 011425.docx

image001.png

## From the GSU Incident Management Team:

As of December 06, 2024, at 0800, the Gallup Service Unit Incident Management Team (IMT) is on <u>LEVEL 1 FULL OPERATION STAND-UP</u>. The IMT objectives have been established for this operational period to address the positive Legionella results received in various sites on campus. The current IMT planned objectives include:

- 1. Identify and rapidly respond to any water supply disruption to minimize impact to patients and staff.
- 2. Implement corrective measures and mitigation measures to decrease Legionella detection in the affected areas.
- **3.** Establish and implement labor pool/team to conduct flushing activities throughout GIMC campus.
- **4.** Facility Management will develop and implement a process for the collection and documentation of flushing and testing activities. Activities need to be documented timely and accurately.
- **5.** IMT to develop a reporting/communication schedule for relaying pertinent information and status on Legionella mitigation efforts.
- **6.** Safety will address received OSHA complaint by January 21, 2025.

#### **IMT Updates**

To assure patient and staff safety, a water consumption limitation is STILL IN EFFECT until further notice. Please be advised: **NO CONSUMPTION OF TAP WATER AND ICE MADE FROM TAP WATER** (**Making your own ice**). Bottled water should be used for infant formula, wound care activities and brushing teeth.

• Legionella water test results received on 01/02/2025 confirmed that 21 of 38 total sites on the GIMC campus tested positive. Two strains of Legionella, L. pneumophila, serogroup 1 and L. anisa (Blue-white Legionella sp.), were found in the affected areas.

**L. pneumophila, serogroup 1** is the most pathogenic strain of the Legionella bacteria responsible for the majority of Legionnaires' disease cases. Legionnaires' disease is a severe form of pneumonia that often requires hospitalization and is fatal in about 10% of cases overall, and in 25% of healthcare associated cases. While other Legionella types exist, they are less common and may cause milder infections compared to L. pneumophila, serogroup 1.

• The following showers continue to be safe and are cleared for use:

- 4S Inpatient Pediatric Shower (1)
- 3West Med Surg Unit Showers (2)
- 2West Med Surg Unit Showers (2)
- WHU: Post-Partum 3SW96, 99 and 100, L&D 3SE71 and 72 Showers (5)

ALL other showers continue to remain restricted (NO USE) until further notice.

## **DAILY FLUSHING (see attached flyer)**

- All departments are <u>REQUIRED</u> to flush faucets, showers and toilets in their areas <u>ONCE DAILY</u> and complete the <u>Water Management Daily Flushing Log</u> located on the home page, under Water Consumption Limitation.
- Please flush both HOT AND COLD WATER FAUCETS FOR A TOTAL OF 5
   MINUTES- Depending on the type of fixture:
  - Single-handle faucet flush hot and cold separately for 5 minutes each
  - Double-handle faucet flush hot and cold at the same time for 5 minutes
  - Foot pedal faucet- flush hot and cold at the same time, please use an N95 mask while flushing a foot pedal faucet to avoid inhaling aerosols
- Please monitor water faucets while flushing and DO NOT LEAVE RUNNING WATER
   UNATTENDED for long periods to prevent flooding.
- All eye wash stations need to be flushed <u>DAILY</u> FOR A MINIMUM OF 5 MINUTES and documented on the daily flushing log. In addition, please continue to complete weekly flushes and inspections log and submit to Safety monthly.
- Submit flushing logs <u>WEEKLY BY FRIDAY</u> through the <u>Dropbox for Daily Logs</u> also located on the home page under Water Consumption Limitation. Instructions attached.
- Bottled water and ice are available for pick up in the cafeteria with a completed <u>213RR</u>, ALL 213RRs need department supervisor signatures prior to pick up (NO DELIVERIES AVAILABLE).
   Please do not send patients to dietary for water. Water should be provided by staff to ALL patients (inpatient, ED and ambulatory) upon request.

There are ICS forms for those who wish to provide updates to the IMT, these forms can be located on the link provided or through the GIMC Intranet Sub Sites: <a href="http://navgimcvsp19/sites/Home/IncidentCommand/SitePages/Home.aspx">http://navgimcvsp19/sites/Home/IncidentCommand/SitePages/Home.aspx</a>

# **GSU IMT Organization Structure Shannon Tsosie, Incident Commander**

Public Information Officer: Anzeribiam Akum/	Operation Section Chief: Natasha Sellers
Sneha Nair	
Safety Officer: Deanna Barber	Logistic Section Chief: Lamour Tulley

Communication/IT: Clarissa John	Planning Section Chief: Adrienne Livingston
Subject Matter Experts: Dr Alithea Gabrellas	Finance Section Chief: Agnes Kee
/Merriam Abeita/ Fleurette Brown/Ben Williams/	
Yolonda Williams	

The IMT will have periodic updates provided on the GIMC Intranet webpage to provide pertinent information to keep staff informed.

Further questions may be addressed to Anzeribiam Akum, Incident Management Team Public Information Officer at (505) 409-8016

Thank you kindly, Anzeribiam and Sneha.

Anzeribiam Akum, MS, RDN, LDN Lieutenant, U.S. Public Health Service Clinical Dietitian Gallup Indian Medical Center 516 E Nizhoni Blvd Gallup, NM 87301

Office: 505-722-1408 (Ext. 71408)

Work: 505-409-8016



From: Jimm, Pamela (IHS/NAV)

To: GSU-Staff; NAV/THC Staff

Cc: Tsosie, Tanya (IHS/NAV/GIMC); Akum, Anzeribiam (IHS/NAV/GIMC); Nair, Sneha (IHS/NAV/GIMC)

Subject:Incident Management Team UpdateDate:Friday, January 24, 2025 4:04:51 PM

Attachments: image001.png

image002.png image003.png image004.png

image004.png All staff update 01.24.25 ICedits.pdf

# From the Incident Management Team:

As of December 06, 2024, at 0800, the Gallup Service Unit Incident Management Team (IMT) is on <u>LEVEL 1 FULL OPERATION STAND-UP</u>. The IMT objectives have been established for this operational period to address the positive Legionella results received in various sites on campus.

The current IMT planned objectives include:

- Identify and rapidly respond to any water supply disruption to minimize impact to patients and staff.
- Implement corrective measures and mitigation measures to decrease Legionella detection in the affected areas.
- Establish and implement labor pool/team to conduct flushing activities throughout GIMC campus.
- Facility Management will develop and implement a process for the collection and documentation of flushing and testing activities. Activities need to be documented timely and accurately.
- IMT to develop a reporting/communication schedule for relaying pertinent information and status on Legionella mitigation efforts.
- Safety will address received OSHA complaint by January 21, 2025: OSHA reply was accepted and case is now closed

#### IMT Updates

#### Request Labor Pool

IMT is requesting volunteers for a labor pool to assist with flushing activities this weekend
(01/25/2025 and 01/26/2025) and next weekend (02/01/2025 and 01/02/2025) from 7am to
12pm each day. If you can assist, please notify your immediate supervisor/designee for approval
then notify Natasha Sellers at Natasha.Sellers@ihs.gov or 505-339-9123

## Background on Legionella Training on HealthStream

 Mandatory training for <u>ALL STAFF</u> is now available on HealthStream. All staff are required to complete this training due on 02/21/2025

To assure patient and staff safety, a water consumption limitation is STILL IN EFFECT until further notice. Please be advised: NO CONSUMPTION OF TAP WATER AND ICE MADE FROM TAP WATER (Making your own ice). Bottled water should be used for infant formula, wound care activities and brushing teeth.

 Legionella water test results received on 01/02/2025 confirmed that 21 of 38 total sites on the GIMC campus tested positive. Two strains of Legionella, L. pneumophila, serogroup 1 and L. anisa (Blue-white Legionella sp.), were found in the affected areas.

L. pneumophila, serogroup 1 is the most pathogenic strain of the Legionella bacteria responsible for the majority of Legionnaires' disease cases. Legionnaires' disease is a severe form of pneumonia that often requires hospitalization and is fatal in about 10% of cases overall, and in 25% of healthcare associated cases. While other Legionella types exist, they are less common and may cause milder infections compared to L. pneumophila, serogroup 1.

- The following showers continue to be safe and are cleared for use:
  - 4S Inpatient Pediatric Shower (1)
  - 3West Med Surg Unit Showers (2)

- 2West Med Surg Unit Showers (2)
- WHU: Post-Partum 3SW96, 99 and 100, L&D 3SE71 and 72 Showers (5)

ALL other showers continue to remain restricted (NO USE) until further notice.

#### DAILY FLUSHING

- All departments are <u>REQUIRED</u> to flush faucets, showers and toilets in their areas
   ONCE <u>DAILY</u> and complete the <u>Water Management Daily Flushing Log</u> located on
   the home page, under Water Consumption Limitation.
- Please flush both HOT AND COLD WATER FAUCETS FOR A TOTAL OF 5
   MINUTES- Depending on the type of fixture:
  - Single-handle faucet flush hot and cold separately for 5 minutes each
  - Double-handle faucet flush hot and cold at the same time for 5 minutes
  - Foot pedal faucet- flush hot and cold at the same time, please use an N95 mask while flushing a foot pedal faucet to avoid inhaling aerosols
- Please monitor water faucets while flushing and DO NOT LEAVE RUNNING WATER
   UNATTENDED for long periods to prevent flooding.
- All eye wash stations need to be flushed <u>DAILY</u> FOR A MINIMUM OF 5
   MINUTES and documented on the daily flushing log. In addition, please continue to complete weekly flushes and inspections log and submit to Safety monthly.
- Submit flushing logs <u>WEEKLY BY FRIDAY</u> through the <u>Dropbox for Daily</u> <u>Logs</u> also located on the home page under Water Consumption Limitation. Instructions attached.
- Bottled water and ice are available for pick up in the cafeteria with a completed <u>213RR</u>, ALL 213RRs need department supervisor signatures prior to pick up (NO DELIVERIES AVAILABLE). Please do not send patients to dietary for water. Water should be provided by staff to ALL patients (inpatient, ED and ambulatory) upon request.

There are ICS forms for those who wish to provide updates to the IMT, these forms can be located on the link provided or through the GIMC Intranet Sub Sites:

http://navgimcvsp19/sites/Home/IncidentCommand/SitePages/Home.aspx

# GSU IMT Organization Structure Shannon Tsosie, Incident Commander

Public Information Officer: Anzeribiam Akum/ Sneha Nair	Operation Section Chief: Natasha Sellers
Safety Officer: Deanna Barber	Logistic Section Chief: Lamour Tulley
Communication/IT: Clarissa John	Planning Section Chief: Adrienne Livingston
Liaison Officer: Dr. Jerome Alford, NAO	Finance Section Chief: Agnes Kee
Medical Technical Specialist: Dr. Alithea Gabrellas /Merriam Abeita / Yolanda Wiliams	Facility Management: Ben Williams

The IMT will have periodic updates provided on the GIMC Intranet webpage to provide pertinent information to keep staff informed.

Further questions may be addressed to Anzeribiam Akum, Incident Management Team Public Information Officer at (505) 409-8016

Thank you, Shannon Tsosie, Incident Commander GSU Incident Management Team

Anzeribiam Akum, MS, RDN, LDN Lieutenant, U.S. Public Health Service Clinical Dietitian Gallup Indian Medical Center 516 E Nizhoni Blvd Gallup, NM 87301

Office: 505-722-1408 (Ext. 71408)

Work: 505-409-8016



From: Jimm, Pamela (IHS/NAV) GSU-Staff; NAV/THC Staff To:

Akum, Anzeribiam (IHS/NAV/GIMC); Nair, Sneha (IHS/NAV/GIMC); Livingston, Adrienne F (IHS/NAV); Tsosie, Shannon (IHS/NAV/GIMC); Sellers, Natasha (IHS/NAV) Cc:

Subject: Incident Management Team update Date: Friday, January 31, 2025 11:37:16 AM

Attachments: image001.png

image002.png image003.png

# From the GSU Incident Management Team:

Staff,

As of December 06, 2024, the Gallup Service Unit Incident Management Team (IMT) is on <u>LEVEL 1 FULL OPERATION STAND-UP</u>. Legionella water test results received on 01/02/2025 confirmed that 21 of 38 total sites on the GIMC campus tested positive. Two strains of Legionella, L. pneumophila, serogroup 1 and L. anisa (Blue-white Legionella sp.), were found in the affected areas. Next round of testing is scheduled for February 6, 2025.

The current IMT planned objectives include:

- Identify and rapidly respond to any water supply disruption to minimize impact to patients and staff
- Implement corrective measures and mitigation measures to decrease Legionella detection in the affected areas.
- Continue to utilize labor pool/team to conduct flushing activities in buildings/areas not occupied on weekends and/or holidays.
- Facility Management will develop and implement a process for the collection and documentation of flushing and testing activities. Activities need to be documented timely and accurately.
- Identify and enter water management measures into Nuvolo and ensure Facility Management staff are educated on Nuvolo capabilities such as entering measures and developing reports.

#### IMT Accomplishments

- Daily flushing implemented and ongoing, labor Pool was implemented 1/17 for flushing activities in those buildings/areas not occupied on weekends and/or holidays
- Facilities continue flushing activities in assigned areas as well as regular chlorine testing
- Shower head/filter installation completed
- Laminar flow devices are being installed in all sinks throughout the facility to help minimize the growth of legionella
- OSHA complaint submitted and cleared

### **IMT Updates**

- Mandatory HealthStream training; Background on Legionella due on 02/21/2025
- NO CONSUMPTION OF TAP WATER AND ICE MADE FROM TAP WATER (Making your own ice) is in effect until further notice. To assure patient and staff safety, bottled water should be used for infant formula, wound care activities and brushing teeth.
- Shower filters have been installed in all showers facility wide. ALL SHOWERS ARE NOW
  CLEARED AND SAFE TO USE. FLUSHING IS STILL REQUIRED FOR ALL
  SHOWERS

#### DAILY FLUSHING

- All departments are <u>REQUIRED</u> to flush faucets, showers and toilets in their areas
   ONCE <u>DAILY</u> and complete the <u>Water Management Daily Flushing Log</u> located on
   the home page, under Water Consumption Limitation.
- Flushing logs due every Friday through the <u>Dropbox for Daily Logs</u> also located on the home page under Water Consumption Limitation.

Bottled water and ice are available for pick up in the cafeteria with a completed <u>213RR</u>, ALL 213RRs need department supervisor signatures prior to pick up (NO DELIVERIES AVAILABLE). **Please do not** 

# send patients to dietary for water. Water should be provided by staff to ALL patients (inpatient, ED and ambulatory) upon request.

There are ICS forms for those who wish to provide updates to the IMT, these forms can be located on the link provided or through the GIMC Intranet Sub Sites:

http://navgimcvsp19/sites/Home/IncidentCommand/SitePages/Home.aspx

#### GSU IMT Organization Structure

#### Shannon Tsosie, Incident Commander

Public Information Officer: Anzeribiam Akum/ Sneha Nair	Operation Section Chief: Natasha Sellers
Safety Officer: Deanna Barber	Logistic Section Chief: Lamour Tulley
Communication/IT: Clarissa John	Planning Section Chief: Adrienne Livingston
Liaison Officer: Dr. Jerome Alford, NAO	Finance Section Chief: Agnes Kee
Medical Technical Specialist: Dr. Alithea Gabrellas /Merriam Abeita / Yolanda Wiliams	Facility Management: Ben Williams

The IMT will have periodic updates provided on the GIMC Intranet webpage to provide pertinent information to keep staff informed.

Further questions may be addressed to Anzeribiam Akum, Incident Management Team Public Information Officer at (505) 409-8016

Thank you, Shannon Tsosie, Incident Commander GSU Incident Management Team

Thank you kindly, Anzeribiam.

Anzeribiam Akum, MS, RDN, LDN Lieutenant, U.S. Public Health Service Clinical Dietitian Gallup Indian Medical Center 516 E Nizhoni Blvd Gallup, NM 87301

Office: 505-722-1408 (Ext. 71408)

Work: 505-409-8016



From: Jimm, Pamela (IHS/NAV)

To: GSU-Staff; NAV/THC Staff

Cc: Abeita, Merriam (IHS/NAV); Begay, Jordon (IHS/NAV/GIMC); Gabrellas, Alithea (IHS/NAV)

**Subject:** GIMC Campus Water and ICE Consumption Limitation Alert

Date: Wednesday, December 4, 2024 4:42:26 PM

Attachments: ICS 213RR Water Ice Request Updated120424.pdf

Importance: High

## From the desk of Merriam Abeita and Dr. Alithea Gabrellas:

**Effective immediately**, the following buildings on the Gallup Indian Medical Center Campus will be on a water consumption limitation:

- Building 2000 (GIMC Main Hospital) and Northwest Modular Buildings
- Building 4010 WIPCC
- Building 2008 HIM
- Building 2009 Information Technology
- Building 2010 Information Technology
- Building 2004 Security/Audiology
- Building 2017 Pediatric Clinic
- Building 2002 Emergency Department/Trauma
- Building 2018 Pharmacy, Internal Medicine, Family Medicine, Physical Therapy, Dental and all Patient Registration/Patient Benefit Coordinators
- Building F Occupational Health, Public Health Nursing, Patient Referred Care, Navajo Health Education etc.
- Building 4009 Office of Environmental Health (OEH)

The most recent Legionella water testing indicated some positive results in the potable water supply in several buildings on the GIMC Campus.

To ensure patient and staff safety, the water consumption limitation will be in effect until further notice. Please be advised: NO CONSUMPTION OF TAP WATER/ICE or USE FOR PATIENT CARE ACTIVITIES (such as tap water use for infant formula or wound care activities). Inpatients should avoid using tap water for tooth brushing and instead, use bottled water.

- Continue current water use for hand hygiene
- Critical Water Use Equipment will continue operations
- Environmental Services (EVS) will continue normal procedures for cleaning
- Sterile Processing will continue normal procedures of operations

Bottled drinking water for patients and staff will be made available for pick up in the cafeteria.

Respectfully,

Merriam Abeita, IP Infection Prevention and Control Nurse Specialist GIMC, Gallup, NM 87301 Bldg 2007, Room 14

Phone: 505-722-1311 Work Cell: 505-721-8312

Email: merriam.abeita@ihs.gov

### And,

Alithea Gabrellas, MD Infectious Diseases Physician Gallup Indian Medical Center Desk phone: 505-722-1487 Cell phone: 505-399-0219

# **GENERAL MESSAGE (ICS 213)**

1. Incident Name (Optional): Legionella Mitigati				
2. To (Name and Position): ICS - Shannon Tsos Adrienne Livin	sie gston		+	
3. From (Name and Position): Benjamin Williams, Hoskie Becenti, KiAllen Gibson				
4. Subject: IWE Legionella Test Results		<b>5. Date:</b> 02/19/2025	<b>6. Time</b> 09:34am	
7. Message:  Facility Management have received the 9 legior collection that was taken on February 6, 2025.  Facility Management is awaiting the results from	The results will be on the next pages.	ngineering (IWE)	from the	
8. Approved by: Name: KiAllen Gibson	Signature: Kiallen Gibson -S Digitally signed by Kiallen Gibson -S Digitally signed by Kiallen Gibson -S Post	sition/Title: FM Ad	min Assistant	
9. Reply:	Orginatore			
10. Replied by: Name:	1	Signature:		
ICS 213	Date/Time:			



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## **FINAL REPORT**

Account #: 4522

SPL Project ID: 2502-00421

Project Name: Gallup Indian Medical

PO Number: 3815

Sampled By: Josh Melter Date Received: 02/08/2025 Date Final: 02/17/2025

## **Summary**

This summary is provided for your convenience. Complete report on the following pages.

#### **General Comments:**

Gallup Indian Medical Center. Sample #s 1-48 Not Received, Not Tested.

Environmental Culture Test-Legionella			
Location	Result	Concentration	Species
49. 4 E 37	Positive	0.5 CFU/mL	L. pneumophila, serogroup 1
50. BLDG F 1A	Positive	1.0 CFU/mL	L. pneumophila, serogroup 5
51. 1124	Not Detected		
52. 1233	Positive	10.0 CFU/mL	L. anisa (Blue-white Legionella sp.)
53. 3213 Eyewash	Positive	5.0 CFU/mL	L. anisa (Blue-white Legionella sp.)
54. 2004	Positive	2.5 CFU/mL	L. pneumophila, serogroup 1
55. Boiler Rm Tank 2	Not Detected		
56. 3225	Positive	0.5 CFU/mL	L. anisa (Blue-white Legionella sp.)
57. 2009	Positive	5.0 CFU/mL	L. anisa (Blue-white Legionella sp.)

Approved By: Erika Egeler

Under 1

Dr. Michael Berg Laboratory Director



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## **FINAL REPORT**

Account #: 4522

SPL Project ID: 2502-00421

Project Name: Gallup Indian Medical

PO Number: 3815

Sampled By: Josh Melter Date Received: 02/08/2025 Date Final: 02/17/2025

Location: 49. 4 E 37 Date Collected: 02/06/2025 2502-00421.001 Water Sample ID: Sample Type: Source Type: Potable Time Collected: 3:08 pm Test Requested: Environmental Culture Test-Legionella Status: Complete 02/17/2025 Result: **Positive** Concentration: 0.5 CFU/mL Species: L. pneumophila, serogroup 1 2/8/25 5:00 pm Date Processed: 0.2 ml of processed sample Volume Examined: 02/06/2025 Location: 50. BLDG F 1A Date Collected: 2502-00421.002 Sample ID: Sample Type: Water Potable Source Type: Time Collected: 2:42 pm Test Requested: Environmental Culture Test-Legionella Status: Complete 02/17/2025 Result: **Positive** Concentration: 1.0 CFU/mL L. pneumophila, serogroup 5 Species: Report Comments: L. anisa (Blue-white species) also isolated Date Processed: 2/8/25 5:00 pm 0.2 ml of processed sample Volume Examined: Location: Date Collected: 02/06/2025 51, 1124 2502-00421.003 Sample ID: Sample Type: Water Source Type: Potable Time Collected: 1:29 pm Test Requested: Environmental Culture Test-Legionella Status: Complete 02/17/2025 Result: **Not Detected** 2/8/25 5:00 pm Date Processed: 0.2 ml of processed sample Volume Examined:



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Status: Complete 02/17/2025

## **FINAL REPORT**

Account #: 4522

SPL Project ID: 2502-00421

Project Name: Gallup Indian Medical

PO Number: 3815

Sampled By: Josh Melter Date Received: 02/08/2025 Date Final: 02/17/2025

Location: 52. 1233 Date Collected: 02/06/2025 2502-00421.004 Water Sample ID: Sample Type: Potable Source Type: 1:34 pm Time Collected: Test Requested: Environmental Culture Test-Legionella Status: Complete 02/17/2025

Result: **Positive** Concentration: 10.0 CFU/mL

Species: L. anisa (Blue-white Legionella sp.)

2/8/25 5:00 pm Date Processed:

0.2 ml of processed sample Volume Examined:

02/06/2025 Location: 53. 3213 Eyewash Date Collected:

Sample ID: 2502-00421.005 Sample Type: Water

Potable Source Type:

Time Collected: 1:52 pm

Environmental Culture Test-Legionella Test Requested: Result: **Positive** 

0.2 ml of processed sample

Concentration: 5.0 CFU/mL L. anisa (Blue-white Legionella sp.) Species:

2/8/25 5:00 pm Date Processed:

Volume Examined:

Location: 54. 2004 Date Collected: 02/06/2025

Sample ID: 2502-00421.006 Sample Type: Water

Potable Source Type:

Time Collected: 1:03 pm Test Requested: Environmental Culture Test-Legionella Status: Complete 02/17/2025

Result: **Positive** 

Concentration: 2.5 CFU/mL Species: L. pneumophila, serogroup 1

Report Comments: L. anisa (Blue-white species) also isolated

2/8/25 5:00 pm Date Processed:

0.2 ml of processed sample Volume Examined:



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## **FINAL REPORT**

Account #: 4522

SPL Project ID: 2502-00421

Project Name: Gallup Indian Medical

PO Number: 3815

Sampled By: Josh Melter Date Received: 02/08/2025 Date Final: 02/17/2025

Location:55. Boiler Rm Tank 2Date Collected:02/06/2025Sample ID:2502-00421.007Sample Type:WaterSource Type:Potable

Test Requested: Environmental Culture Test-Legionella Status: Complete 02/17/2025

Result: Not Detected

Date Processed: 2/8/25 5:00 pm

Volume Examined: 0.2 ml of processed sample

Location: 56. 3225 Date Collected: 02/06/2025

Sample ID: 2502-00421.008 Sample Type: Water

Source Type: Potable

Test Requested: Environmental Culture Test-Legionella Status: Complete 02/17/2025

Result: Positive
Concentration: 0.5 CFU/mL

Species: L. anisa (Blue-white Legionella sp.)

Date Processed: 2/8/25 5:00 pm

Volume Examined: 0.2 ml of processed sample

Location: 57. 2009 Date Collected: 02/06/2025

Sample ID: 2502-00421.009 Sample Type: Water

Source Type: Potable

Time Collected: 12:53 pm

Test Requested: Environmental Culture Test-Legionella Status: Complete 02/17/2025
Result: Positive

Concentration: 5.0 CFU/mL

Species: L. anisa (Blue-white Legionella sp.)

Date Processed: 2/8/25 5:00 pm

Volume Examined: 0.2 ml of processed sample

Approved By: Erika Egeler

Under 1

Dr. Michael Berg Laboratory Director 2:59 pm

1:58 pm

Time Collected:

Time Collected:



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### **FINAL REPORT**

Account #: 4522

SPL Project ID: 2502-00421

Project Name: Gallup Indian Medical

PO Number: 3815

Sampled By: Josh Melter Date Received: 02/08/2025 Date Final: 02/17/2025

# NOTES

#### **Environmental Culture Test-Legionella**

- -CFU/mL (or swab)=Colony Forming Units per milliliter or swab.
- -The limit of detection (LOD)\* is approximately 0.5 5 CFU/mL for Potable Water; 5 CFU/mL for Non-Potable Water (Cooling Towers); 0.5 5 CFU/mL for Hot Water Tanks; 10 -100 CFU/swab for Swabs.
- \* Sensitivity (LOD) may be affected if less than recommended sample volume is submitted for testing and if high concentration of non-Legionella bacteria are present in the sample. LOD values are mathematically derived according to the sample type, volume, and process.
- Results are reported as Not Detected, Positive, or Not Detected\*
- -Not Detected\* The presence of Legionella could not be determined due to overgrowth of non-Legionella bacteria.
- -Probable identification. Contact laboratory if further identification by 16S sequencing required.
- Method: ISO 11731:2017 (E). QA/QC performed on the date processed. Turnaround time is 7-10 days.
- Samples should be analyzed within 2 days of collection.
- Accredited by the American Association for Laboratory Accreditation (Cert. No. 2847.01) and CDC ELITE certified.
- Isolates saved upon request. Request must be received 1 week from receipt of report. Extra charges may apply.
- -'Project Name', 'Sampled By', 'Location', 'Date Collected', 'Time Collected' and 'Client Notes' are provided by the customer.

The data and information on this, and other accompanying documents, represent only the sample(s) analyzed. This report is not to be reproduced in whole or in part without the expressed consent of SPL. Results apply to the sample as received.

# **GENERAL MESSAGE (ICS 213)**

1. Incident Name (Optional): Legionella Mitigati			
2. To (Name and Position): ICS - Shannon Tsos Adrienne Livin	gston		+
3. From (Name and Position): Benjamin Williams, Hoskie Becenti, KiAllen Gibson			
4. Subject: IWE Legionella Test Results		<b>5. Date:</b> 02/20/2025	<b>6. Time</b> 09:28am
7. Message: Facility Management have received the remainifrom the collection that was taken on February			
8. Approved by: Name: KiAllen Gibson	Signature: Kiallen Gibson - S Digitally signed by Kiallen Gibson - S Date: 2025 02 20 09 46 48 -0707 Pos	ition/Title: FM Ad	min Assistant
9. Reply:			
10. Replied by: Name:		ignature:	
ICS 213	Date/Time:		_



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## **FINAL REPORT**

Account #: 4522

SPL Project ID: 2502-00504

Project Name: Gallup Indian Medical

PO Number: 3815

Sampled By: Josh Melter Date Received: 02/12/2025 Date Final: 02/19/2025

## **Industrial Water Engineering**

8701 Alameda Park Drive NE Albuquerque, NM 87113 P: (505) 345-5055

## Summary

This summary is provided for your convenience. Complete report on the following pages.

#### **General Comments:**

Gallup Indian Medical Center

Environmental Culture Test-Legionella				
Location	Result	Concentration	Species	
1. 1N05	Positive	0.5 CFU/mL	L. pneumophila, serogroup 1	
2. 1E210	Not Detected			
3. 1E245	Positive	70.0 CFU/mL	L. pneumophila, serogroup 1	
4. 1E233	Positive	590.0 CFU/mL	L. pneumophila, serogroup 1	
5. GW11	Not Detected			
6. 1S139	Positive	210.0 CFU/mL	L. pneumophila, serogroup 1	
7. GW13	Not Detected			
8. HSKPG	Positive	15.0 CFU/mL	L. anisa (Blue-white Legionella sp.)	
9. GS64	Not Detected			
10. GE34A	Not Detected			
11. 2W27	Positive	3.5 CFU/mL	L. anisa (Blue-white Legionella sp.)	
12. 1W12	Not Detected			
13. 2W20	Not Detected			
14. 3SE71	Not Detected			
15. 3SE73	Not Detected			
16. BLDG F 7A	Not Detected			
17. 1N13	Not Detected			
18. 2N24	Not Detected			
19. 1S143A	Not Detected			
20. 5002 Chiller	Not Detected			
21. 3W26	Not Detected			
22. 2008	Not Detected			
23. 4010 Rm 19	Positive	0.5 CFU/mL	L. anisa (Blue-white Legionella sp.)	
24. 3SE70	Not Detected			



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## **FINAL REPORT**

Account #: 4522

SPL Project ID: 2502-00504

Project Name: Gallup Indian Medical

PO Number: 3815

Sampled By: Josh Melter Date Received: 02/12/2025 Date Final: 02/19/2025

## **Environmental Culture Test-Legionella**

·	neumophila, serogroup 1 neumophila, serogroup 1 nisa (Blue-white Legionella sp.)
27. 4S77       Not Detected         28. 1E239       Positive       4.0 CFU/mL       L. pne         29. 3SE78       Positive       0.5 CFU/mL       L. pne         30. 3W20       Not Detected	neumophila, serogroup 1
28. 1E239       Positive       4.0 CFU/mL       L. pne         29. 3SE78       Positive       0.5 CFU/mL       L. pne         30. 3W20       Not Detected	neumophila, serogroup 1
29. 3SE78	neumophila, serogroup 1
30. 3W20 Not Detected	
	nisa (Blue-white Legionella sp.)
24 29F72 Not Detected	nisa (Blue-white Legionella sp.)
S1. SSE72 Not Detected	nisa (Blue-white Legionella sp.)
32. 3SW103 Not Detected	nisa (Blue-white Legionella sp.)
33. 3244	
34. 2002 Rm 12	nisa (Blue-white Legionella sp.)
35. 2017 Rm 6 Positive 1.5 CFU/mL L. pne	neumophila, serogroup 1
36. 4009 Rm 14 Not Detected	
37. 2S105 Not Detected	
38. 2SW101 Not Detected	
39. Boiler Rm Tank 1 Not Detected	
40. 3246 Not Detected	
41. 2003 Not Detected	
42. 2017 Rm 3	neumophila, serogroup 1
43. 2010 Not Detected	
44. 2217 Not Detected	
45. 3234	nisa (Blue-white Legionella sp.)
46. 3213	nisa (Blue-white Legionella sp.)
47. 2234	nisa (Blue-white Legionella sp.)
48. 3231 Not Detected	

Approved By: Travis Reed

Under 1

Dr. Michael Berg Laboratory Director



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Date Processed:

Volume Examined:

2/12/25 4:10 pm

0.2 ml of processed sample

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## **FINAL REPORT**

Account #: 4522

SPL Project ID: 2502-00504

Project Name: Gallup Indian Medical

PO Number: 3815

Sampled By: Josh Melter Date Received: 02/12/2025 Date Final: 02/19/2025

Location: 1. 1N05 Date Collected: 02/11/2025 2502-00504.001 Water Sample ID: Sample Type: Potable Source Type: 9:59 am Time Collected: Test Requested: Environmental Culture Test-Legionella Status: Complete 02/19/2025 Result: **Positive** Concentration: 0.5 CFU/mL Species: L. pneumophila, serogroup 1 2/12/25 4:10 pm Date Processed: 0.2 ml of processed sample Volume Examined: 02/11/2025 Location: 2. 1E210 Date Collected: Sample ID: 2502-00504.002 Sample Type: Water Potable Source Type: Time Collected: 10:05 am Environmental Culture Test-Legionella Status: Complete 02/19/2025 Test Requested: Result: **Not Detected** 2/12/25 4:10 pm Date Processed: Volume Examined: 0.2 ml of processed sample 02/11/2025 Date Collected: Location: 3. 1E245 Sample ID: 2502-00504.003 Sample Type: Water Potable Source Type: Time Collected: 10:11 am Test Requested: Environmental Culture Test-Legionella Status: Complete 02/19/2025 Result: **Positive** Concentration: 70.0 CFU/mL L. pneumophila, serogroup 1 Species: 2/12/25 4:10 pm Date Processed: 0.2 ml of processed sample Volume Examined: 02/11/2025 Location: 4. 1E233 Date Collected: 2502-00504.004 Water Sample ID: Sample Type: Source Type: Potable Time Collected: 10:06 am Test Requested: Environmental Culture Test-Legionella Status: Complete 02/19/2025 Result: **Positive** 590.0 CFU/mL Concentration: Species: L. pneumophila, serogroup 1



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## **FINAL REPORT**

Account #: 4522

SPL Project ID: 2502-00504

Project Name: Gallup Indian Medical

PO Number: 3815

Sampled By: Josh Melter Date Received: 02/12/2025 Date Final: 02/19/2025

Location:	5. GW11	Date Collected: 02/11/2025
Sample ID:	2502-00504.005	Sample Type: Water
Source Type:	Potable	
		Time Collected: 9:38 am
Test Requested:	Environmental Culture Test-Legionella	Status: Complete 02/19/2025
Result:	Not Detected	
Date Processed:	2/12/25 4:10 pm	
Volume Examined:	0.2 ml of processed sample	
Location:	6. 1S139	Date Collected: 02/11/2025
Sample ID:	2502-00504.006	Sample Type: Water
Source Type:	Potable	. ,,
,,		Time Collected: 9:54 am
Test Requested:	Environmental Culture Test-Legionella	Status: Complete 02/19/2025
Result:	Positive	
Concentration:	210.0 CFU/mL	
Species:	L. pneumophila, serogroup 1	
Date Processed:	2/12/25 4:10 pm	
Volume Examined:	0.2 ml of processed sample	
Location:	7. GW13	Date Collected: 02/11/2025
Sample ID:	2502-00504.007	Sample Type: Water
Source Type:	Potable	· · ·
		Time Collected: 9:36 am
Test Requested:	Environmental Culture Test-Legionella	Status: Complete 02/19/2025
Result:	Not Detected	
Date Processed:	2/12/25 4:10 pm	
Volume Examined:	0.2 ml of processed sample	
Location:	8. HSKPG	Date Collected: 02/11/2025
Sample ID:	2502-00504.008	Sample Type: Water
Source Type:	Potable	· · ·
,,		Time Collected: 9:40 am
Test Requested:	Environmental Culture Test-Legionella	Status: Complete 02/19/2025
Result:	Positive	·
Concentration:	15.0 CFU/mL	
Species:	L. anisa (Blue-white Legionella sp.)	
Date Processed:	2/12/25 4:10 pm	
	_,, p	



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## **FINAL REPORT**

Account #: 4522

SPL Project ID: 2502-00504

Project Name: Gallup Indian Medical

PO Number: 3815

Sampled By: Josh Melter Date Received: 02/12/2025 Date Final: 02/19/2025

Location:	9. GS64	Date Collected: 02/11/2025
Sample ID:	2502-00504.009	Sample Type: Water
Source Type:	Potable	
		Time Collected: 9:49 am
Test Requested:	Environmental Culture Test-Legionella	Status: Complete 02/19/2025
Result:	Not Detected	
Date Processed:	2/12/25 4:10 pm	
Volume Examined:	0.2 ml of processed sample	
Location:	10. GE34A	Date Collected: 02/11/2025
Sample ID:	2502-00504.010	Sample Type: Water
Source Type:	Potable	
		Time Collected: 9:47 am
Test Requested:	Environmental Culture Test-Legionella	Status: Complete 02/19/2025
Result:	Not Detected	
Date Processed:	2/12/25 4:10 pm	
Volume Examined:	0.2 ml of processed sample	
Location:	11. 2W27	Date Collected: 02/11/2025
Sample ID:	2502-00504.011	Sample Type: Water
Source Type:	Potable	
		Time Collected: 10:20 am
Test Requested:	Environmental Culture Test-Legionella	Status: Complete 02/19/2025
Result:	Positive	
Concentration:	3.5 CFU/mL	
Species:	L. anisa (Blue-white Legionella sp.)	
Date Processed:	2/12/25 4:10 pm	
Volume Examined:	0.2 ml of processed sample	
Location:	12. 1W12	Date Collected: 02/11/2025
Sample ID:	2502-00504.012	Sample Type: Water
Source Type:	Potable	
		Time Collected: 9:57 am
Test Requested:	Environmental Culture Test-Legionella	Status: Complete 02/19/2025
Result:	Not Detected	
Date Processed:	2/12/25 4:10 pm	
Volume Examined:	0.2 ml of processed sample	



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## **FINAL REPORT**

Account #: 4522

SPL Project ID: 2502-00504

Project Name: Gallup Indian Medical

PO Number: 3815

Sampled By: Josh Melter Date Received: 02/12/2025 Date Final: 02/19/2025

Location:	13. 2W20	Date Collected: 02/11/2025
Sample ID:	2502-00504.013	Sample Type: Water
Source Type:	Potable	Cample Type.
course Type.		Time Collected: 10:15 am
Test Requested:	Environmental Culture Test-Legionella	Status: Complete 02/19/2025
Result:	Not Detected	otatao.
Date Processed:	2/12/25 4:10 pm	
Volume Examined:	0.2 ml of processed sample	
Location:	14. 3SE71	Date Collected: 02/11/2025
Sample ID:	2502-00504.014	Sample Type: Water
Source Type:	Potable	Сатри туро.
.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Time Collected: 10:39 am
Test Requested:	Environmental Culture Test-Legionella	Status: Complete 02/19/2025
Result:	Not Detected	
Date Processed:	2/12/25 4:10 pm	
Volume Examined:	0.2 ml of processed sample	
Location:	15. 3SE73	Date Collected: 02/11/2025
Sample ID:	2502-00504.015	Sample Type: Water
Source Type:	Potable	
		Time Collected: 10:45 am
Test Requested:	Environmental Culture Test-Legionella	Status: Complete 02/19/2025
Result:	Not Detected	·
Date Processed:	2/12/25 4:10 pm	
Volume Examined:	0.2 ml of processed sample	
Location:	16. BLDG F 7A	Date Collected: 02/11/2025
Sample ID:	2502-00504.016	Sample Type: Water
Source Type:	Potable	
•		Time Collected: 11:42 am
Test Requested:	Environmental Culture Test-Legionella	Status: Complete 02/19/2025
Result:	Not Detected	
Date Processed:	2/12/25 4:10 pm	
Volume Examined:	0.2 ml of processed sample	



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Account #: 4522

SPL Project ID: 2502-00504

Project Name: Gallup Indian Medical

PO Number: 3815

Location:	17. 1N13	Date Collected: 02/11/2025
Sample ID:	2502-00504.017	Sample Type: Water
Source Type:	Potable	· ,·
		Time Collected: 10:01 am
Test Requested:	Environmental Culture Test-Legionella	Status: Complete 02/19/2025
Result:	Not Detected	
Date Processed:	2/12/25 4:10 pm	
Volume Examined:	0.2 ml of processed sample	
Location:	18. 2N24	Date Collected: 02/11/2025
Sample ID:	2502-00504.018	Sample Type: Water
Source Type:	Potable	
		Time Collected: 10:17 am
Test Requested:	Environmental Culture Test-Legionella	Status: Complete 02/19/2025
Result:	Not Detected	·
Date Processed:	2/12/25 4:10 pm	
Volume Examined:	0.2 ml of processed sample	
Location:	19. 1S143A	Date Collected: 02/11/2025
Sample ID:	2502-00504.019	Sample Type: Water
Source Type:	Potable	
,		Time Collected: 9:52 am
Test Requested:	Environmental Culture Test-Legionella	Status: Complete 02/19/2025
Result:	Not Detected	
Date Processed:	2/12/25 4:10 pm	
Volume Examined:	0.2 ml of processed sample	
Location:	20. 5002 Chiller	Date Collected: 02/11/2025
Sample ID:	2502-00504.020	Sample Type: Water
Source Type:	Potable	
		Time Collected: 10:58 am
Test Requested:	Environmental Culture Test-Legionella	Status: Complete 02/19/2025
Result:	Not Detected	·
Date Processed:	2/12/25 4:10 pm	
Volume Examined:	0.2 ml of processed sample	



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# **FINAL REPORT**

Account #: 4522

SPL Project ID: 2502-00504

Project Name: Gallup Indian Medical

PO Number: 3815

Location:	21. 3W26	Date Collected: 02/11/2025
Sample ID:	2502-00504.021	Sample Type: Water
Source Type:	Potable	Sample Type. Water
Source Type.	1 Stable	Time Collected: 10:34 am
Test Requested:	Environmental Culture Test-Legionella	Status: Complete 02/19/2025
Result:	Not Detected	Status. Complete 02/19/2025
Date Processed:	2/12/25 4:10 pm	
Volume Examined:	0.2 ml of processed sample	
Location:	22. 2008	Date Collected: 02/11/2025
	2502-00504.022	
Sample ID:	Potable	Sample Type: Water
Source Type:	rotable	Time Collected: 11:05 am
To at Dooms at all	Facility and the Colline Total Landson III.	111112 22112212
Test Requested: Result:	Environmental Culture Test-Legionella  Not Detected	Status: Complete 02/19/2025
Date Processed:	2/12/25 4:10 pm	
Volume Examined:	0.2 ml of processed sample	
Location:		Date Collected: 02/11/2025
	23. 4010 Rm 19	
Sample ID:	2502-00504.023	Sample Type: Water
Source Type:	Potable	0 II
		Time Collected: 11:01 am
Test Requested:	Environmental Culture Test-Legionella	Status: Complete 02/19/2025
Result: Concentration:	Positive 0.5 CFU/mL	
Species:	L. anisa (Blue-white Legionella sp.)	
Date Processed:	2/12/25 4:10 pm	
Volume Examined:	0.2 ml of processed sample	
Location:	24. 3SE70	Date Collected: 02/11/2025
Sample ID:	2502-00504.024	Sample Type: Water
•	Potable	Sample Type. Water
Source Type:	1 Otable	Time Collected: 10:37 am
Toot Dogwooded	Environmental Culture Teet Legismelle	Timo Concotou.
Test Requested: Result:	Environmental Culture Test-Legionella  Not Detected	Status: Complete 02/19/2025
Date Processed:	2/12/25 4:10 pm	
	0.2 ml of processed sample	
Volume Examined:	0.2 mi oi processeu sample	



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# **FINAL REPORT**

Account #: 4522

SPL Project ID: 2502-00504

Project Name: Gallup Indian Medical

PO Number: 3815

Location:	25. 2\$107	Date Collected: 02/11/2025
Sample ID:	2502-00504.025	Sample Type: Water
Source Type:	Potable	
		Time Collected: 10:23 am
Test Requested:	Environmental Culture Test-Legionella	Status: Complete 02/19/2025
Result:	Not Detected	
Date Processed:	2/12/25 4:10 pm	
Volume Examined:	0.2 ml of processed sample	
Location:	26. 3W23	Date Collected: 02/11/2025
Sample ID:	2502-00504.026	Sample Type: Water
Source Type:	Potable	
		Time Collected: 10:32 am
Test Requested:	Environmental Culture Test-Legionella	Status: Complete 02/19/2025
Result:	Not Detected	
Date Processed:	2/12/25 4:10 pm	
Volume Examined:	0.2 ml of processed sample	
Location:	27. 4\$77	Date Collected: 02/11/2025
Sample ID:	2502-00504.027	Sample Type: Water
Source Type:	Potable	
		Time Collected: 10:51 am
Test Requested:	Environmental Culture Test-Legionella	Status: Complete 02/19/2025
Result:	Not Detected	
Date Processed:	2/12/25 4:10 pm	
Volume Examined:	0.2 ml of processed sample	
_ocation:	28. 1E239	Date Collected: 02/11/2025
Sample ID:	2502-00504.028	Sample Type: Water
Source Type:	Potable	
		Time Collected: 10:08 am
Test Requested:	Environmental Culture Test-Legionella	Status: Complete 02/19/2025
Result:	Positive	
Concentration:	4.0 CFU/mL	
Species:	L. pneumophila, serogroup 1	
Report Comments:	L. anisa (Blue-white species) also isolated	
	Legionella rubrilucens also isolated	
Date Processed:	2/12/25 4:10 pm	
√olume Examined:	0.2 ml of processed sample	



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### **FINAL REPORT**

Account #: 4522

SPL Project ID: 2502-00504

Project Name: Gallup Indian Medical

PO Number: 3815

		0.014410005
Location:	29. 3SE78	Date Collected: 02/11/2025
Sample ID:	2502-00504.029	Sample Type: Water
Source Type:	Potable	
		Time Collected: 10:36 am
Test Requested:	Environmental Culture Test-Legionella	Status: Complete 02/19/2025
Result:	Positive	
Concentration:	0.5 CFU/mL	
Species:	L. pneumophila, serogroup 1	
Date Processed:	2/12/25 4:10 pm	
Volume Examined:	0.2 ml of processed sample	
Location:	30. 3W20	Date Collected: 02/11/2025
Sample ID:	2502-00504.030	Sample Type: Water
Source Type:	Potable	
		Time Collected: 10:29 am
Test Requested:	Environmental Culture Test-Legionella	Status: Complete 02/19/2025
Result:	Not Detected	·
Date Processed:	2/12/25 4:10 pm	
Volume Examined:	0.2 ml of processed sample	
Location:	31. 3SE72	Date Collected: 02/11/2025
Sample ID:	2502-00504.031	Sample Type: Water
Source Type:	Potable	
		Time Collected: 10:41 am
Test Requested:	Environmental Culture Test-Legionella	Status: Complete 02/19/2025
Result:	Not Detected	
Date Processed:	2/12/25 4:10 pm	
Volume Examined:	0.2 ml of processed sample	
Location:	32. 3SW103	Date Collected: 02/11/2025
Sample ID:	2502-00504.032	Sample Type: Water
Source Type:	Potable	, ,,
71		Time Collected: 10:47 am
Test Requested:	Environmental Culture Test-Legionella	Status: Complete 02/19/2025
Result:	Not Detected	·
Date Processed:	2/12/25 4:10 pm	
Volume Examined:	0.2 ml of processed sample	



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Result:

Date Processed:

Volume Examined:

**Not Detected** 

2/12/25 4:10 pm

0.2 ml of processed sample

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### **FINAL REPORT**

Account #: 4522

SPL Project ID: 2502-00504

Project Name: Gallup Indian Medical

PO Number: 3815

Sampled By: Josh Melter Date Received: 02/12/2025 Date Final: 02/19/2025

Location: 33. 3244 Date Collected: 02/11/2025 2502-00504.033 Water Sample ID: Sample Type: Potable Source Type: 11:32 am Time Collected: Test Requested: Environmental Culture Test-Legionella Status: Complete 02/19/2025 Result: **Positive** Concentration: 1.0 CFU/mL Species: L. anisa (Blue-white Legionella sp.) 2/12/25 4:10 pm Date Processed: 0.2 ml of processed sample Volume Examined: 02/11/2025 Location: 34. 2002 Rm 12 Date Collected: Sample ID: 2502-00504.034 Sample Type: Water Potable Source Type: Time Collected: 11:19 am Environmental Culture Test-Legionella Status: Complete 02/19/2025 Test Requested: Result: **Positive** Concentration: 11.5 CFU/mL L. anisa (Blue-white Legionella sp.) Species: Date Processed: 2/12/25 4:10 pm Volume Examined: 0.2 ml of processed sample Location: Date Collected: 02/11/2025 35. 2017 Rm 6 Sample ID: 2502-00504.035 Sample Type: Water Potable Source Type: 11:16 am Time Collected: Test Requested: Environmental Culture Test-Legionella Status: Complete 02/19/2025 Result: **Positive** 1.5 CFU/mL Concentration: Species: L. pneumophila, serogroup 1 Date Processed: 2/12/25 4:10 pm Volume Examined: 0.2 ml of processed sample 02/11/2025 Location: 36. 4009 Rm 14 Date Collected: 2502-00504.036 Water Sample ID: Sample Type: Potable Source Type: Time Collected: 11:45 am Test Requested: Status: Complete 02/19/2025 Environmental Culture Test-Legionella



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# **FINAL REPORT**

Account #: 4522

SPL Project ID: 2502-00504

Project Name: Gallup Indian Medical

PO Number: 3815

Location:	37. 2S105	Date Collected: 02/11/2025
Sample ID:	2502-00504.037	Sample Type: Water
Source Type:	Potable	
		Time Collected: 10:24 am
Test Requested:	Environmental Culture Test-Legionella	Status: Complete 02/19/2025
Result:	Not Detected	
Date Processed:	2/12/25 4:10 pm	
Volume Examined:	0.2 ml of processed sample	
Location:	38. 2SW101	Date Collected: 02/11/2025
Sample ID:	2502-00504.038	Sample Type: Water
Source Type:	Potable	
		Time Collected: 10:43 am
Test Requested:	Environmental Culture Test-Legionella	Status: Complete 02/19/2025
Result:	Not Detected	
Date Processed:	2/12/25 4:10 pm	
Volume Examined:	0.2 ml of processed sample	
Location:	39. Boiler Rm Tank 1	Date Collected: 02/11/2025
Sample ID:	2502-00504.039	Sample Type: Water
Source Type:	Non Potable	
		Time Collected: 11:53 am
Test Requested:	Environmental Culture Test-Legionella	Status: Complete 02/19/2025
Result:	Not Detected	
Date Processed:	2/12/25 4:10 pm	
Volume Examined:	0.2 ml of processed sample	
Location:	40. 3246	Date Collected: 02/11/2025
Sample ID:	2502-00504.040	Sample Type: Water
Source Type:	Potable	
		Time Collected: 11:33 am
Test Requested:	Environmental Culture Test-Legionella	Status: Complete 02/19/2025
Result:	Not Detected	
Date Processed:	2/12/25 4:10 pm	
Volume Examined:	0.2 ml of processed sample	



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# **FINAL REPORT**

Account #: 4522

SPL Project ID: 2502-00504

Project Name: Gallup Indian Medical

PO Number: 3815

Location:	41, 2003	Date Collected: 02/11/2025
Sample ID:	2502-00504.041	Sample Type: Water
Source Type:	Potable	Sample Type. Water
Source Type.	1 Otable	Time Collected: 11:12 am
Toot Dogwooded	Fundamental Cultura Test Legionelle	Timo Concotou.
Test Requested: Result:	Environmental Culture Test-Legionella  Not Detected	Status: Complete 02/19/2025
Date Processed: Volume Examined:	2/12/25 4:10 pm 0.2 ml of processed sample	
		D 1 0 11 1 1 00/44/0005
Location:	42. 2017 Rm 3	Date Collected: 02/11/2025
Sample ID:	2502-00504.042	Sample Type: Water
Source Type:	Potable	
		Time Collected: 11:17 am
Test Requested:	Environmental Culture Test-Legionella	Status: Complete 02/19/2025
Result:	Positive	
Concentration:	5.0 CFU/mL	
Species:	L. pneumophila, serogroup 1	
Date Processed:	2/12/25 4:10 pm	
Volume Examined:	0.2 ml of processed sample	
Location:	43. 2010	Date Collected: 02/11/2025
Sample ID:	2502-00504.043	Sample Type: Water
Source Type:	Potable	
		Time Collected: 11:09 am
Test Requested:	Environmental Culture Test-Legionella	Status: Complete 02/19/2025
Result:	Not Detected	
Date Processed:	2/12/25 4:10 pm	
Volume Examined:	0.2 ml of processed sample	
Location:	44. 2217	Date Collected: 02/11/2025
Sample ID:	2502-00504.044	Sample Type: Water
Source Type:	Potable	' '
,		Time Collected: 11:38 am
Test Requested:	Environmental Culture Test-Legionella	Status: Complete 02/19/2025
Result:	Not Detected	,
Date Processed:	2/12/25 4:10 pm	
Volume Examined:	0.2 ml of processed sample	



8701 Alameda Park Drive NE

Albuquerque, NM 87113

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Date Processed:

Volume Examined:

2/12/25 4:10 pm

0.2 ml of processed sample

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### **FINAL REPORT**

Account #: 4522

SPL Project ID: 2502-00504

Project Name: Gallup Indian Medical

PO Number: 3815

Sampled By: Josh Melter Date Received: 02/12/2025 Date Final: 02/19/2025

Location: 45. 3234 Date Collected: 02/11/2025 2502-00504.045 Water Sample ID: Sample Type: Potable Source Type: 11:31 am Time Collected: Test Requested: Environmental Culture Test-Legionella Status: Complete 02/19/2025 Result: **Positive** Concentration: 0.5 CFU/mL Species: L. anisa (Blue-white Legionella sp.) 2/12/25 4:10 pm Date Processed: 0.2 ml of processed sample Volume Examined: 02/11/2025 Location: 46. 3213 Date Collected: 2502-00504.046 Sample ID: Sample Type: Water Potable Source Type: Time Collected: 11:27 am Environmental Culture Test-Legionella Status: Complete 02/19/2025 Test Requested: Result: **Positive** Concentration: 0.5 CFU/mL L. anisa (Blue-white Legionella sp.) Species: Date Processed: 2/12/25 4:10 pm Volume Examined: 0.2 ml of processed sample Location: 47, 2234 Date Collected: 02/11/2025 Sample ID: 2502-00504.047 Sample Type: Water Potable Source Type: 11:25 am Time Collected: Test Requested: Environmental Culture Test-Legionella Status: Complete 02/19/2025 Result: **Positive** 4.0 CFU/mL Concentration: Species: L. anisa (Blue-white Legionella sp.) Date Processed: 2/12/25 4:10 pm Volume Examined: 0.2 ml of processed sample 02/11/2025 Location: 48. 3231 Date Collected: 2502-00504.048 Water Sample ID: Sample Type: Potable Source Type: Time Collected: 11:29 am Test Requested: Status: Complete 02/19/2025 Environmental Culture Test-Legionella Result: **Not Detected** 



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# **FINAL REPORT**

Account #: 4522

SPL Project ID: 2502-00504

Project Name: Gallup Indian Medical

PO Number: 3815

Sampled By: Josh Melter Date Received: 02/12/2025 Date Final: 02/19/2025

**Industrial Water Engineering** 

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Approved By: Travis Reed

Under 1

Dr. Michael Berg Laboratory Director



#### THE LEGIONELLA EXPERTS®

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#### FINAL REPORT

Account #: 4522

SPL Project ID: 2502-00504

Project Name: Gallup Indian Medical

PO Number: 3815

Sampled By: Josh Melter Date Received: 02/12/2025 Date Final: 02/19/2025

#### Industrial Water Engineering 8701 Alameda Park Drive NE

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#### **NOTES**

#### **Environmental Culture Test-Legionella**

- -CFU/mL (or swab)=Colony Forming Units per milliliter or swab.
- -The limit of detection (LOD)\* is approximately 0.5 5 CFU/mL for Potable Water; 5 CFU/mL for Non-Potable Water (Cooling Towers); 0.5 5 CFU/mL for Hot Water Tanks; 10 -100 CFU/swab for Swabs.
- \* Sensitivity (LOD) may be affected if less than recommended sample volume is submitted for testing and if high concentration of non-Legionella bacteria are present in the sample. LOD values are mathematically derived according to the sample type, volume, and process.
- Results are reported as Not Detected, Positive, or Not Detected\*
- -Not Detected\* The presence of Legionella could not be determined due to overgrowth of non-Legionella bacteria.
- -Probable identification. Contact laboratory if further identification by 16S sequencing required.
- Method: ISO 11731:2017 (E). QA/QC performed on the date processed. Turnaround time is 7-10 days.
- Samples should be analyzed within 2 days of collection.
- Accredited by the American Association for Laboratory Accreditation (Cert. No. 2847.01) and CDC ELITE certified.
- Isolates saved upon request. Request must be received 1 week from receipt of report. Extra charges may apply.
- -'Project Name', 'Sampled By', 'Location', 'Date Collected', 'Time Collected' and 'Client Notes' are provided by the customer.

The data and information on this, and other accompanying documents, represent only the sample(s) analyzed. This report is not to be reproduced in whole or in part without the expressed consent of SPL. Results apply to the sample as received.

# GENERAL MESSAGE (ICS 213)

1. Incident Name (Optional): Water Valve Replace	ment Incident				
2. To (Name and Position): Shannon Tsosie, Incident Commander Adrienne Livingston, Planning Section Chief					
3. From (Name and Position): Benjamin Williams, Maintenance Mechanic Supervisor					
4. Subject: GIMC 1W Water Valve Replacement -Industrial Water Engir	neering Final Re	esults		5. Date: 06/25/24	<b>6. Time</b> 03:15pm
7. Message:				•	
The next eight (8) pages are the final results from Industrial	Water Enginee	ing.			
8. Approved by: Name: KiAllen Gibson	Signature:	Kiallen Gibson -S S Day	tally signed by Kiallen Gibson - a: 2024.06.25 15:17:28-06'00'	Position/Title:	FM Admin Assistant
8. Approved by: Name: KiAllen Gibson  9. Reply:	Signature:	Kiallen Gibson -S s s	tally signed by Kiellen Gilbeon - s: 2024.06.25 16:17:28-06'00'	Position/Title:	FM Admin Assistant
	Signature:	Kiallen Gibson -S 5 000	tally signed by Kiellen Clisson - 2004-06.28 16:17:28-60'00'	Position/Title:	FM Admin Assistant
	Signature:	Kiallen Gibson -S 5 500	tally signed by Kiellen Glässen - 2024-06-25 16:17:28-69'00'	Position/Title:	FM Admin Assistant
	Signature:	Kiallen Gibson -S 2000	tally signed by Füstlen Gitson- is: 2024.06.25 16:17:28-00'07	Position/Title:	FM Admin Assistant
	Signature:	Kiallen Gibson -S and before	tally signed by Kisten Gilson- is: 2024-06-25 16:17:28-66'00'	Position/Title:	FM Admin Assistant
	Signature:	Kiallen Gibson -S Substitution   Sub	tally signed by Kiellen Glisson - iz 2004-06.25 16:17:28-09'00'	Position/Title:	FM Admin Assistant
	Signature:	Kiallen Gibson -S Disk	tally signed by Kistlen Gitson- is: 2024-06.25 16:17:28-06'00'	Position/Title:	FM Admin Assistant
	Signature:	Kiallen Gibson -S Son	tally signed by Füsten Gitson- is: 2024-06.25 16:17:28-09'00'	Position/Title:	FM Admin Assistant
	Signature:	Kiallen Gibson -S and an	tally signed by Kistlen Gilson- in 2024-06-25 16:17:28-46°00'	Position/Title:	FM Admin Assistant
	Signature:	Kiallen Gibson -S Divided	tally signed by Kiefen Gibson- 1: 2024-06.25 16:17:29-00'00'	Position/Title:	FM Admin Assistant
	Signature:	Kiallen Gibson -S Distriction	tally signed by Füsten Gitson- is: 2024-06.25 16:17:28-06'00'	Position/Title:	FM Admin Assistant
	Signature:	Kiallen Gibson -S Down	tally signed by Füsten Gitson- is: 2024.06.25 16:17:28-00'07	Position/Title:	FM Admin Assistant
	Signature:	Kiallen Gibson -S Son	tally signed by Füsten Gitson- is: 2024-06.25 15:17:28-09'00'	Position/Title:	FM Admin Assistant
	Signature:	Kiallen Gibson - S South	tally signed by Kiefen Gibson- 12 2024-06.25 16:17:29-00'00'	Position/Title:	FM Admin Assistant
		Kiallen Gibson -S Doub		Position/Title:	



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### **FINAL REPORT**

Account #: 4522

SPL Project ID: 2406-00446

Project Name: GIMC PO Number: 3130

Sampled By: McCoy/Chavira
Date Received: 06/07/2024
Date Final: 06/20/2024

## **Industrial Water Engineering**

8701 Alameda Park Drive NE Albuquerque, NM 87113 P: (505) 345-5055

# **Summary**

This summary is provided for your convenience. Complete report on the following pages.

# Environmental Culture Test-Legionella

Location	Result	Concentration	Species
1. Bottle Filler	Not Detected		
2. Dietary Prep Sink	Not Detected		
3. Eyewash 6W13	Positive	260.0 CFU/mL	L. pneumophila, serogroup 1
4. IE233 Sink	Positive	>1500.0 CFU/mL	L. pneumophila, serogroup 1
5. Eye wash IN05	Not Detected		
6. Eye wash IS143A	Positive	35.0 CFU/mL	L. pneumophila, serogroup 1
7. 2S72 Sink	Not Detected		
8. 2S72 Ice Machine	Not Detected		
9. 2W20 Shower	Not Detected		
10. 2E42 Sink	Not Detected		
11. 3W20 Shower	Not Detected		
12. 3W23 Sink	Not Detected		
13. 3W12 Sink	Not Detected		
14. 3S71 Shower	Not Detected		
15. 3SW98 Shower	Not Detected		
16. 3SW100 Shower	Not Detected		
17. 3SW100 Sink	Not Detected		
18. 4S82 Sink	Not Detected		
19. 4W Bottle Filler	Not Detected		
20. Chiller Eyewash	Positive	5.0 CFU/mL	L. pneumophila, serogroup 1

Approved By: Brian Verdi

Janet E. Stout, Ph.D.

Laboratory Director, Special Pathogens Laboratory



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### **FINAL REPORT**

Account #: 4522

SPL Project ID: 2406-00446

Project Name: GIMC PO Number: 3130

Location:	1. Bottle Filler	Date Collected: 06/06/2024
Sample ID:	2406-00446.001	Sample Type: Water
Source Type:	Potable	
		Time Collected: 10:02 am
est Requested:	Environmental Culture Test-Legionella	Status: Complete 06/14/2024
Result:	Not Detected	
Date Processed:	6/7/24 5:30 pm	
/olume Examined:	0.2 ml of processed sample	
ocation:	2. Dietary Prep Sink	Date Collected: 06/06/2024
Sample ID:	2406-00446.002	Sample Type: Water
Source Type:	Potable	
		Time Collected: 10:08 am
est Requested:	Environmental Culture Test-Legionella	Status: Complete 06/18/2024
Result:	Not Detected	
Date Processed:	6/7/24 5:30 pm	
olume Examined:	0.2 ml of processed sample	
ocation:	3. Eyewash 6W13	Date Collected: 06/06/2024
Sample ID:	2406-00446.003	Sample Type: Water
Source Type:	Potable	
		Time Collected: 10:29 am
est Requested:	Environmental Culture Test-Legionella	Status: Complete 06/18/2024
Result:	Positive	
Concentration:	260.0 CFU/mL	
Species:	L. pneumophila, serogroup 1	
Date Processed:	6/7/24 5:30 pm	
olume Examined:	0.2 ml of processed sample	
ocation:	4. IE233 Sink	Date Collected: 06/06/2024
Sample ID:	2406-00446.004	Sample Type: Water
ource Type:	Potable	' "
•		Time Collected: 10:44 am
est Requested:	Environmental Culture Test-Legionella	Status: Complete 06/20/2024
Result:	Positive	•
Concentration:	>1500.0 CFU/mL	
pecies:	L. pneumophila, serogroup 1	
ate Processed:	6/7/24 5:30 pm	
olume Examined:	0.2 ml of processed sample	



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# **FINAL REPORT**

Account #: 4522

SPL Project ID: 2406-00446

Project Name: GIMC PO Number: 3130

Location:	5. Eye wash IN05	Date Collected: 06/06/2024
Sample ID:	2406-00446.005	Sample Type: Water
Source Type:	Potable	
		Time Collected: 10:47 am
Test Requested:	Environmental Culture Test-Legionella	Status: Complete 06/18/2024
Result:	Not Detected	
Date Processed:	6/7/24 5:30 pm	
Volume Examined:	0.2 ml of processed sample	
Location:	6. Eye wash IS143A	Date Collected: 06/06/2024
Sample ID:	2406-00446.006	Sample Type: Water
Source Type:	Potable	
		Time Collected: 10:53 am
Test Requested:	Environmental Culture Test-Legionella	Status: Complete 06/18/2024
Result:	Positive	
Concentration:	35.0 CFU/mL	
Species:	L. pneumophila, serogroup 1	
Date Processed:	6/7/24 5:30 pm	
Volume Examined:	0.2 ml of processed sample	
Location:	7. 2S72 Sink	Date Collected: 06/06/2024
Sample ID:	2406-00446.007	Sample Type: Water
Source Type:	Potable	
		Time Collected: 11:18 am
Test Requested:	Environmental Culture Test-Legionella	Status: Complete 06/18/2024
Result:	Not Detected	
Date Processed:	6/7/24 5:30 pm	
Volume Examined:	0.2 ml of processed sample	
Location:	8. 2S72 Ice Machine	Date Collected: 06/06/2024
Sample ID:	2406-00446.008	Sample Type: Water
Source Type:	Potable	
		Time Collected: 11:21 am
Test Requested:	Environmental Culture Test-Legionella	Status: Complete 06/18/2024
Result:	Not Detected	-
Date Processed:	6/7/24 5:30 pm	
Volume Examined:	0.2 ml of processed sample	



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### **FINAL REPORT**

Account #: 4522

SPL Project ID: 2406-00446

Project Name: GIMC PO Number: 3130

Location:	9. 2W20 Shower	Date Collected: 06/06/2024
Sample ID:	2406-00446.009	Sample Type: Water
Source Type:	Potable	
		Time Collected: 11:25 am
Test Requested:	Environmental Culture Test-Legionella	Status: Complete 06/18/2024
Result:	Not Detected	·
Date Processed:	6/7/24 5:30 pm	
Volume Examined:	0.2 ml of processed sample	
Location:	10. 2E42 Sink	Date Collected: 06/06/2024
Sample ID:	2406-00446.010	Sample Type: Water
Source Type:	Potable	
<b>7</b> ,		Time Collected: 11:37 am
Test Requested:	Environmental Culture Test-Legionella	Status: Complete 06/18/2024
Result:	Not Detected	•
Date Processed:	6/7/24 5:30 pm	
Volume Examined:	0.2 ml of processed sample	
Location:	11. 3W20 Shower	Date Collected: 06/06/2024
Sample ID:	2406-00446.011	Sample Type: Water
Source Type:	Potable	
		Time Collected: 11:44 am
Test Requested:	Environmental Culture Test-Legionella	Status: Complete 06/14/2024
Result:	Not Detected	
Date Processed:	6/7/24 5:30 pm	
Volume Examined:	0.2 ml of processed sample	
Location:	12. 3W23 Sink	Date Collected: 06/06/2024
Sample ID:	2406-00446.012	Sample Type: Water
Source Type:	Potable	• •
		Time Collected: 11:53 am
Test Requested:	Environmental Culture Test-Legionella	Status: Complete 06/18/2024
Result:	Not Detected	•
Date Processed:	6/7/24 5:30 pm	
Volume Examined:	0.2 ml of processed sample	



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### **FINAL REPORT**

Account #: 4522

SPL Project ID: 2406-00446

Project Name: GIMC PO Number: 3130

Location:	13. 3W12 Sink	Date Collected: 06/06/2024
Sample ID:	2406-00446.013	Sample Type: Water
Source Type:	Potable	· · ·
		Time Collected: 11:58 am
est Requested:	Environmental Culture Test-Legionella	Status: Complete 06/14/2024
Result:	Not Detected	·
Date Processed:	6/7/24 5:30 pm	
/olume Examined:	0.2 ml of processed sample	
ocation:	14. 3S71 Shower	Date Collected: 06/06/2024
Sample ID:	2406-00446.014	Sample Type: Water
Source Type:	Potable	• •
		Time Collected: 12:05 pm
Test Requested:	Environmental Culture Test-Legionella	Status: Complete 06/18/2024
Result:	Not Detected	
Date Processed:	6/7/24 5:30 pm	
/olume Examined:	0.2 ml of processed sample	
_ocation:	15. 3SW98 Shower	Date Collected: 06/06/2024
Sample ID:	2406-00446.015	Sample Type: Water
Source Type:	Potable	
		Time Collected: 12:10 pm
est Requested:	Environmental Culture Test-Legionella	Status: Complete 06/14/2024
Result:	Not Detected	·
Date Processed:	6/7/24 5:30 pm	
/olume Examined:	0.2 ml of processed sample	
ocation:	16. 3SW100 Shower	Date Collected: 06/06/2024
Sample ID:	2406-00446.016	Sample Type: Water
Source Type:	Potable	
•		Time Collected: 12:14 pm
est Requested:	Environmental Culture Test-Legionella	Status: Complete 06/18/2024
Result:	Not Detected	·
Date Processed:	6/7/24 5:30 pm	
/olume Examined:	0.2 ml of processed sample	



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### FINAL REPORT

Account #: 4522

SPL Project ID: 2406-00446

Project Name: GIMC PO Number: 3130

Sampled By: McCoy/Chavira
Date Received: 06/07/2024
Date Final: 06/20/2024

Location: 17. 3SW100 Sink Date Collected: 06/06/2024 2406-00446.017 Water Sample ID: Sample Type: Source Type: Potable Time Collected: 12:15 pm Test Requested: Environmental Culture Test-Legionella Status: Complete 06/14/2024 Result: **Not Detected** Date Processed: 6/7/24 5:30 pm 0.2 ml of processed sample Volume Examined: Location: 18. 4S82 Sink Date Collected: 06/06/2024 2406-00446.018 Sample ID: Water Sample Type: Potable Source Type: Time Collected: 12:23 pm Test Requested: Environmental Culture Test-Legionella Status: Complete 06/14/2024 Result: Not Detected Date Processed: 6/7/24 5:30 pm Volume Examined: 0.2 ml of processed sample 06/06/2024 Date Collected: Location: 19. 4W Bottle Filler Sample ID: 2406-00446.019 Sample Type: Water Potable Source Type: Time Collected: 12:36 pm Test Requested: Environmental Culture Test-Legionella Status: Complete 06/18/2024 Result: **Not Detected** 6/7/24 5:30 pm Date Processed: 0.2 ml of processed sample Volume Examined: Location: 06/06/2024 20. Chiller Evewash Date Collected: 2406-00446.020 Water Sample ID: Sample Type: Source Type: Potable Time Collected: 1:12 pm Test Requested: Environmental Culture Test-Legionella Status: Complete 06/18/2024 Result: **Positive** Concentration: 5.0 CFU/mL Species: L. pneumophila, serogroup 1 Date Processed: 6/7/24 5:30 pm 0.2 ml of processed sample Volume Examined:



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### **FINAL REPORT**

Account #: 4522

SPL Project ID: 2406-00446

Project Name: GIMC PO Number: 3130

Sampled By: McCoy/Chavira
Date Received: 06/07/2024
Date Final: 06/20/2024

**Industrial Water Engineering** 

8701 Alameda Park Drive NE Albuquerque, NM 87113 P: (505) 345-5055

Approved By: Brian Verdi

Janet E. Stout, Ph.D.

Laboratory Director, Special Pathogens Laboratory



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### **FINAL REPORT**

Account #: 4522

SPL Project ID: 2406-00446

Project Name: GIMC PO Number: 3130

Sampled By: McCoy/Chavira
Date Received: 06/07/2024
Date Final: 06/20/2024

#### **Industrial Water Engineering**

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#### **NOTES**

#### **Environmental Culture Test-Legionella**

- -CFU/mL (or swab)=Colony Forming Units per milliliter or swab.
- -The limit of detection (LOD)\* is approximately 0.5 5 CFU/mL for Potable Water; 5 CFU/mL for Non-Potable Water (Cooling Towers); 0.5 5 CFU/mL for Hot Water Tanks; 10 -100 CFU/swab for Swabs.
- \* Sensitivity (LOD) may be affected if less than recommended sample volume is submitted for testing and if high concentration of non-Legionella bacteria are present in the sample. LOD values are mathematically derived according to the sample type, volume, and process.
- Results are reported as Not Detected, Positive, or Not Detected\*
- -Not Detected\* The presence of Legionella could not be determined due to overgrowth of non-Legionella bacteria.
- -Probable identification. Contact laboratory if further identification by 16S sequencing required.
- Method: ISO 11731:2017 (E). QA/QC performed on the date processed. Turnaround time is 7-10 days.
- Samples should be analyzed within 2 days of collection.
- Accredited by the American Association for Laboratory Accreditation (Cert. No. 2847.01) and CDC ELITE certified.
- Isolates saved upon request. Request must be received 1 week from receipt of report. Extra charges may apply.
- -'Project Name', 'Sampled By', 'Location', 'Date Collected', 'Time Collected' and 'Client Notes' are provided by the customer.

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### ICS 213 General Message

**Purpose.** The General Message (ICS 213) is used by the incident dispatchers to record incoming messages that cannot be orally transmitted to the intended recipients. The ICS 213 is also used by the Incident Command Post and other incident personnel to transmit messages (e.g., resource order, incident name change, other ICS coordination issues, etc.) to the Incident Communications Center for transmission via radio or telephone to the addressee. This form is used to send any message or notification to incident personnel that requires hard-copy delivery.

Preparation. The ICS 213 may be initiated by incident dispatchers and any other personnel on an incident.

**Distribution.** Upon completion, the ICS 213 may be delivered to the addressee and/or delivered to the Incident Communication Center for transmission.

#### Notes:

- The ICS 213 is a three-part form, typically using carbon paper. The sender will complete Part 1 of the form and send Parts 2 and 3 to the recipient. The recipient will complete Part 2 and return Part 3 to the sender.
- A copy of the ICS 213 should be sent to and maintained within the Documentation Unit.
- Contact information for the sender and receiver can be added for communications purposes to confirm resource orders. Refer to 213RR example (Appendix B)

Block Number	Block Title	Instructions
1	Incident Name (Optional)	Enter the name assigned to the incident. This block is optional.
2	To (Name and Position)	Enter the name and position the General Message is intended for. For all individuals, use at least the first initial and last name. For Unified Command, include agency names.
3	From (Name and Position)	Enter the name and position of the individual sending the General Message. For all individuals, use at least the first initial and last name. For Unified Command, include agency names.
4	Subject	Enter the subject of the message.
5	Date	Enter the date (month/day/year) of the message.
6	Time	Enter the time (using the 24-hour clock) of the message.
7	Message	Enter the content of the message. Try to be as concise as possible.
8	<ul><li>Approved by</li><li>Name</li><li>Signature</li><li>Position/Title</li></ul>	Enter the name, signature, and ICS position/title of the person approving the message.
9	Reply	The intended recipient will enter a reply to the message and return it to the originator.
10	Replied by     Name     Position/Title     Signature     Date/Time	Enter the name, ICS position/title, and signature of the person replying to the message. Enter date (month/day/year) and time prepared (24-hour clock).



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### **FINAL REPORT**

Account #: 4522

SPL Project ID: 2411-01327

Project Name: Gallup Indian Medical

PO Number: 3608

Sampled By: McCoy/Melter
Date Received: 11/20/2024
Date Final: 12/02/2024

### **Industrial Water Engineering**

8701 Alameda Park Drive NE Albuquerque, NM 87113 P: (505) 345-5055

### Summary

This summary is provided for your convenience. Complete report on the following pages.

#### **General Comments:**

Gallup Indian Medical Center

Environmental Culture Test-Legionella							
Location	Result	Concentration	Species				
1. GW11	Positive	15.0 CFU/mL	L. pneumophila, serogroup 1				
2. GE34 Right Sink	Positive	825.0 CFU/mL	L. anisa (Blue-white Legionella sp.)				
3. Kitchen Kettle	Not Detected						
4. 15139 Sink	Positive	125.0 CFU/mL	L. pneumophila, serogroup 1				
5. 1W12 Left Sink	Positive	5.0 CFU/mL	L. anisa (Blue-white Legionella sp.)				
6. 1E210 Sink	Positive	5.0 CFU/mL	L. pneumophila, serogroup 1				
7. 2S107	Positive	55.0 CFU/mL	L. anisa (Blue-white Legionella sp.)				
8. 2W27 Sink	Positive	0.5 CFU/mL	L. pneumophila, serogroup 1				
9. 2E39	Not Detected						
10. 3E32 Fountain	Not Detected						
11. 3W26	Positive	50.0 CFU/mL	L. pneumophila, serogroup 1				
12. 3SE78 Sink	Positive	5.0 CFU/mL	L. pneumophila, serogroup 1				
13. 4577 Sink	Not Detected						
14. 4W09	Not Detected						
15. 43 Sink	Positive	5.0 CFU/mL	L. anisa (Blue-white Legionella sp.)				
16. 2006 Breakroom Sink	Not Detected						
17. 2005 Breakroom Sink	Not Detected						
18. 2007 Breakroom Sink	Not Detected						
19. 2008 Restroom 6	Positive	135.0 CFU/mL	L. pneumophila, serogroup 1				
20. 2009 Bathroom 3	Positive	5.0 CFU/mL	L. anisa (Blue-white Legionella sp.)				
21. 2010 Breakroom	Positive	0.5 CFU/mL	L. anisa (Blue-white Legionella sp.)				
22. 2004 Breakroom	Positive	5.0 CFU/mL	L. pneumophila, serogroup 1				
23. 2003 Breakroom	Not Detected						
24. 2017 Restroom 3 Sink	Positive	1.0 CFU/mL	L. pneumophila, serogroup 1				



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### **FINAL REPORT**

Account #: 4522

SPL Project ID: 2411-01327

Project Name: Gallup Indian Medical

PO Number: 3608

Sampled By: McCoy/Melter
Date Received: 11/20/2024
Date Final: 12/02/2024

#### **Industrial Water Engineering**

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### **Environmental Culture Test-Legionella**

	<b>5</b> "		_
Location	Result	Concentration	Species
25. 2017 Restroom Side B	Positive	1.0 CFU/mL	L. pneumophila, serogroup 1
26. 2002 12 Bathroom	Positive	1.0 CFU/mL	L. anisa (Blue-white Legionella sp.)
27. A Patient Rm M Sink	Not Detected		
28. 2018 2234	Positive	15.0 CFU/mL	L. anisa (Blue-white Legionella sp.)
29. 2018 1st Floor Bottle Filler	Not Detected		
30. 1A Bathroom	Positive	280.0 CFU/mL	L. pneumophila, serogroup 5
31. 7A Bathroom Bldg F	Positive	350.0 CFU/mL	L. pneumophila, serogroup 5
32. 3003 West Breakroom	Not Detected		
33. 4009 Breakroom	Positive	0.5 CFU/mL	L. anisa (Blue-white Legionella sp.)
34. 3003 East Bathroom	Not Detected		
35. CT Breakroom	Not Detected		
36. 5000 Bottle Filler	Not Detected		
37. 4010 19 Sink Hot	Positive	5.0 CFU/mL	L. anisa (Blue-white Legionella sp.)
38. INB Micro Lab Sink	Positive	15.0 CFU/mL	L. pneumophila, serogroup 1

Approved By: Jennifer Furlong

Janet E. Stout, Ph.D.

Laboratory Director, Special Pathogens Laboratory



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Date Processed:

Volume Examined:

11/20/24 6:00 pm

0.2 ml of processed sample

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### **FINAL REPORT**

Account #: 4522

SPL Project ID: 2411-01327

Project Name: Gallup Indian Medical

PO Number: 3608

Sampled By: McCoy/Melter
Date Received: 11/20/2024
Date Final: 12/02/2024

Location: 1. GW11 Date Collected: 11/19/2024 2411-01327.001 Water Sample ID: Sample Type: Potable Source Type: 10:04 am Time Collected: Test Requested: Environmental Culture Test-Legionella Status: Complete 11/27/2024 Result: **Positive** Concentration: 15.0 CFU/mL Species: L. pneumophila, serogroup 1 11/20/24 6:00 pm Date Processed: 0.2 ml of processed sample Volume Examined: 11/19/2024 Location: 2. GE34 Right Sink Date Collected: Sample ID: 2411-01327.002 Sample Type: Water Potable Source Type: Time Collected: 10:10 am Environmental Culture Test-Legionella Status: Complete 11/27/2024 Test Requested: Result: **Positive** Concentration: 825.0 CFU/mL L. anisa (Blue-white Legionella sp.) Species: Date Processed: 11/20/24 6:00 pm Volume Examined: 0.2 ml of processed sample Location: Date Collected: 11/19/2024 3. Kitchen Kettle Sample ID: 2411-01327.003 Sample Type: Water Potable Source Type: 10:15 am Time Collected: Test Requested: Environmental Culture Test-Legionella Status: Complete 11/27/2024 Result: **Not Detected** 11/20/24 6:00 pm Date Processed: Volume Examined: 0.2 ml of processed sample 11/19/2024 Location: 4. 15139 Sink Date Collected: 2411-01327.004 Water Sample ID: Sample Type: Potable Source Type: Time Collected: 10:19 am Test Requested: Environmental Culture Test-Legionella Status: Complete 11/27/2024 Result: **Positive** 125.0 CFU/mL Concentration: Species: L. pneumophila, serogroup 1



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### **FINAL REPORT**

Account #: 4522

SPL Project ID: 2411-01327

Project Name: Gallup Indian Medical

PO Number: 3608

Sampled By: McCoy/Melter
Date Received: 11/20/2024
Date Final: 12/02/2024

Location: 5. 1W12 Left Sink Date Collected: 11/19/2024 2411-01327.005 Water Sample ID: Sample Type: Source Type: Potable Time Collected: 10:22 am Test Requested: Environmental Culture Test-Legionella Status: Complete 11/27/2024 Result: **Positive** Concentration: 5.0 CFU/mL Species: L. anisa (Blue-white Legionella sp.) 11/20/24 6:00 pm Date Processed: 0.2 ml of processed sample Volume Examined: 11/19/2024 Location: 6. 1E210 Sink Date Collected: Sample ID: 2411-01327.006 Sample Type: Water Potable Source Type: Time Collected: 10:26 am Test Requested: Environmental Culture Test-Legionella Status: Complete 11/27/2024 Result: **Positive** Concentration: 5.0 CFU/mL L. pneumophila, serogroup 1 Species: 11/20/24 6:00 pm Date Processed: Volume Examined: 0.2 ml of processed sample Location: 7.2S107 Date Collected: 11/19/2024 Sample ID: 2411-01327.007 Sample Type: Water Potable Source Type: 10:34 am Time Collected: Test Requested: Environmental Culture Test-Legionella Status: Complete 11/27/2024 Result: **Positive** 55.0 CFU/mL Concentration: Species: L. anisa (Blue-white Legionella sp.) Date Processed: 11/20/24 6:00 pm Volume Examined: 0.2 ml of processed sample



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# **FINAL REPORT**

Account #: 4522

SPL Project ID: 2411-01327

Project Name: Gallup Indian Medical

PO Number: 3608

Sampled By: McCoy/Melter
Date Received: 11/20/2024
Date Final: 12/02/2024

Location:	8. 2W27 Sink	Date Collected: 11/19/2024
Sample ID:	2411-01327.008	Sample Type: Water
Source Type:	Potable	
		Time Collected: 10:37 am
est Requested:	Environmental Culture Test-Legionella	Status: Complete 11/27/2024
Result:	Positive	
Concentration:	0.5 CFU/mL	
Species:	L. pneumophila, serogroup 1	
Date Processed:	11/20/24 6:00 pm	
/olume Examined:	0.2 ml of processed sample	
₋ocation:	9. 2E39	Date Collected: 11/19/2024
Sample ID:	2411-01327.009	Sample Type: Water
Source Type:	Potable	
		Time Collected: 10:40 am
Test Requested:	Environmental Culture Test-Legionella	Status: Complete 11/27/2024
Result:	Not Detected	·
Date Processed:	11/20/24 6:00 pm	
Volume Examined:	0.2 ml of processed sample	
_ocation:	10. 3E32 Fountain	Date Collected: 11/19/2024
Sample ID:	2411-01327.010	Sample Type: Water
Source Type:	Potable	1 71
		Time Collected: 10:43 am
est Requested:	Environmental Culture Test-Legionella	Status: Complete 11/27/2024
Result:	Not Detected	'
Date Processed:	11/20/24 6:00 pm	
/olume Examined:	0.2 ml of processed sample	
ocation:	11. 3W26	Date Collected: 11/19/2024
Sample ID:	2411-01327.011	Sample Type: Water
Source Type:	Potable	, ,,
,,		Time Collected: 10:45 am
est Requested:	Environmental Culture Test-Legionella	Status: Complete 11/27/2024
Result:	Positive	1
Concentration:	50.0 CFU/mL	
Species:	L. pneumophila, serogroup 1	
Date Processed:	11/20/24 6:00 pm	
Volume Examined:	0.2 ml of processed sample	



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Volume Examined:

0.2 ml of processed sample

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#### **FINAL REPORT**

Account #: 4522

SPL Project ID: 2411-01327

Project Name: Gallup Indian Medical

PO Number: 3608

Sampled By: McCoy/Melter
Date Received: 11/20/2024
Date Final: 12/02/2024

Location: 12. 3SE78 Sink Date Collected: 11/19/2024 2411-01327.012 Water Sample ID: Sample Type: Potable Source Type: 10:48 am Time Collected: Test Requested: Environmental Culture Test-Legionella Status: Complete 11/27/2024 Result: **Positive** Concentration: 5.0 CFU/mL Species: L. pneumophila, serogroup 1 Report Comments: L. anisa (Blue-white species) also isolated Legionella rubrilucens also isolated 11/20/24 6:00 pm Date Processed: Volume Examined: 0.2 ml of processed sample Location: 13. 4577 Sink Date Collected: 11/19/2024 2411-01327.013 Water Sample ID: Sample Type: Potable Source Type: Time Collected: 10:53 am Test Requested: Environmental Culture Test-Legionella Status: Complete 11/27/2024 Result: **Not Detected** Date Processed: 11/20/24 6:00 pm Volume Examined: 0.2 ml of processed sample Location: Date Collected: 11/19/2024 14. 4W09 Sample ID: 2411-01327.014 Sample Type: Water Potable Source Type: 10:56 am Time Collected: Test Requested: Environmental Culture Test-Legionella Status: Complete 11/27/2024 Result: **Not Detected** 11/20/24 6:00 pm Date Processed: 0.2 ml of processed sample Volume Examined: 11/19/2024 Location: 15. 43 Sink Date Collected: 2411-01327.015 Water Sample ID: Sample Type: Source Type: Potable Time Collected: 11:00 am Test Requested: Environmental Culture Test-Legionella Status: Complete 11/27/2024 Result: **Positive** 5.0 CFU/mL Concentration: Species: L. anisa (Blue-white Legionella sp.) Date Processed: 11/20/24 6:00 pm



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Volume Examined:

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# **FINAL REPORT**

Account #: 4522

SPL Project ID: 2411-01327

Project Name: Gallup Indian Medical

PO Number: 3608

Sampled By: McCoy/Melter
Date Received: 11/20/2024
Date Final: 12/02/2024

Location:	16. 2006 Breakroom Sink	Date Collected: 11/19/2024
Sample ID:	2411-01327.016	Sample Type: Water
Source Type:	Potable	
		Time Collected: 11:08 am
Test Requested:	Environmental Culture Test-Legionella	Status: Complete 11/27/2024
Result:	Not Detected	
Date Processed:	11/20/24 6:00 pm	
Volume Examined:	0.2 ml of processed sample	
Location:	17. 2005 Breakroom Sink	Date Collected: 11/19/2024
Sample ID:	2411-01327.017	Sample Type: Water
Source Type:	Potable	
		Time Collected: 11:12 am
Test Requested:	Environmental Culture Test-Legionella	Status: Complete 11/27/2024
Result:	Not Detected	
Date Processed:	11/20/24 6:00 pm	
Volume Examined:	0.2 ml of processed sample	
Location:	18. 2007 Breakroom Sink	Date Collected: 11/19/2024
Sample ID:	2411-01327.018	Sample Type: Water
Source Type:	Potable	
		Time Collected: 11:16 am
Test Requested:	Environmental Culture Test-Legionella	Status: Complete 11/27/2024
Result:	Not Detected	
Date Processed:	11/20/24 6:00 pm	
Volume Examined:	0.2 ml of processed sample	
Location:	19. 2008 Restroom 6	Date Collected: 11/19/2024
Sample ID:	2411-01327.019	Sample Type: Water
Source Type:	Potable	
		Time Collected: 11:19 am
Test Requested:	Environmental Culture Test-Legionella	Status: Complete 11/27/2024
Result:	Positive	
Concentration:	135.0 CFU/mL	
Species:	L. pneumophila, serogroup 1	
Date Processed:	11/20/24 6:00 pm	
	0.0	

0.2 ml of processed sample



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#### **FINAL REPORT**

Account #: 4522

SPL Project ID: 2411-01327

Project Name: Gallup Indian Medical

PO Number: 3608

Sampled By: McCoy/Melter
Date Received: 11/20/2024
Date Final: 12/02/2024

Location: 20. 2009 Bathroom 3 Date Collected: 11/19/2024 2411-01327.020 Water Sample ID: Sample Type: Potable Source Type: 11:24 am Time Collected: Test Requested: Environmental Culture Test-Legionella Status: Complete 11/27/2024 Result: **Positive** Concentration: 5.0 CFU/mL Species: L. anisa (Blue-white Legionella sp.) 11/20/24 6:00 pm Date Processed: 0.2 ml of processed sample Volume Examined: 11/19/2024 Location: 21, 2010 Breakroom Date Collected: Sample ID: 2411-01327.021 Sample Type: Water Potable Source Type: Time Collected: 11:26 am Environmental Culture Test-Legionella Status: Complete 11/27/2024 Test Requested: Result: **Positive** Concentration: 0.5 CFU/mL L. anisa (Blue-white Legionella sp.) Species: Date Processed: 11/20/24 6:00 pm Volume Examined: 0.2 ml of processed sample Location: Date Collected: 11/19/2024 22, 2004 Breakroom Sample ID: 2411-01327.022 Sample Type: Water Potable Source Type: 11:30 am Time Collected: Test Requested: Environmental Culture Test-Legionella Status: Complete 11/27/2024 Result: **Positive** Concentration: 5.0 CFU/mL Species: L. pneumophila, serogroup 1 Date Processed: 11/20/24 6:00 pm Volume Examined: 0.2 ml of processed sample 11/19/2024 Location: 23. 2003 Breakroom Date Collected: 2411-01327.023 Water Sample ID: Sample Type: Potable Source Type: Time Collected: 11:36 am Test Requested: Environmental Culture Test-Legionella Status: Complete 11/27/2024 Result: **Not Detected** 

11/20/24 6:00 pm

0.2 ml of processed sample

Date Processed: Volume Examined:



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Volume Examined:

0.2 ml of processed sample

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### **FINAL REPORT**

Account #: 4522

SPL Project ID: 2411-01327

Project Name: Gallup Indian Medical

PO Number: 3608

Sampled By: McCoy/Melter
Date Received: 11/20/2024
Date Final: 12/02/2024

Location: 24. 2017 Restroom 3 Sink Date Collected: 11/19/2024 2411-01327.024 Water Sample ID: Sample Type: Potable Source Type: 11:41 am Time Collected: Test Requested: Environmental Culture Test-Legionella Status: Complete 11/27/2024 Result: **Positive** Concentration: 1.0 CFU/mL Species: L. pneumophila, serogroup 1 11/20/24 6:00 pm Date Processed: 0.2 ml of processed sample Volume Examined: 11/19/2024 Location: 25, 2017 Restroom Side B Date Collected: Sample ID: 2411-01327.025 Sample Type: Water Potable Source Type: Time Collected: 11:42 am Test Requested: Environmental Culture Test-Legionella Status: Complete 11/27/2024 Result: **Positive** Concentration: 1.0 CFU/mL Species: L. pneumophila, serogroup 1 Date Processed: 11/20/24 6:00 pm Volume Examined: 0.2 ml of processed sample Location: Date Collected: 11/19/2024 26. 2002 12 Bathroom Sample ID: 2411-01327.026 Sample Type: Water Potable Source Type: 11:50 am Time Collected: Test Requested: Environmental Culture Test-Legionella Status: Complete 11/27/2024 Result: **Positive** 1.0 CFU/mL Concentration: Species: L. anisa (Blue-white Legionella sp.) Date Processed: 11/20/24 6:00 pm Volume Examined: 0.2 ml of processed sample 11/19/2024 Location: 27. A Patient Rm M Sink Date Collected: 2411-01327.027 Water Sample ID: Sample Type: Potable Source Type: Time Collected: 11:57 am Test Requested: Status: Complete 11/27/2024 Environmental Culture Test-Legionella Result: **Not Detected** 11/20/24 6:00 pm Date Processed:



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Species:

Date Processed:

Volume Examined:

L. pneumophila, serogroup 5

0.2 ml of processed sample

11/20/24 6:00 pm

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### **FINAL REPORT**

Account #: 4522

SPL Project ID: 2411-01327

Project Name: Gallup Indian Medical

PO Number: 3608

Sampled By: McCoy/Melter
Date Received: 11/20/2024
Date Final: 12/02/2024

Location: 28. 2018 2234 Date Collected: 11/19/2024 2411-01327.028 Water Sample ID: Sample Type: Potable Source Type: 12:02 pm Time Collected: Test Requested: Environmental Culture Test-Legionella Status: Complete 11/27/2024 Result: **Positive** Concentration: 15.0 CFU/mL Species: L. anisa (Blue-white Legionella sp.) 11/20/24 6:00 pm Date Processed: 0.2 ml of processed sample Volume Examined: 11/19/2024 Location: 29, 2018 1st Floor Bottle Filler Date Collected: Sample ID: 2411-01327.029 Sample Type: Water Potable Source Type: Time Collected: 12:05 pm Test Requested: Environmental Culture Test-Legionella Status: Complete 12/02/2024 Result: Not Detected 11/20/24 6:00 pm Date Processed: Volume Examined: 0.2 ml of processed sample 11/19/2024 Date Collected: Location: 30. 1A Bathroom Sample ID: 2411-01327.030 Sample Type: Water Potable Source Type: Time Collected: 12:12 pm Test Requested: Environmental Culture Test-Legionella Status: Complete 11/27/2024 Result: **Positive** Concentration: 280.0 CFU/mL L. pneumophila, serogroup 5 Species: 11/20/24 6:00 pm Date Processed: 0.2 ml of processed sample Volume Examined: 11/19/2024 31. 7A Bathroom Bldg F Location: Date Collected: 2411-01327.031 Water Sample ID: Sample Type: Source Type: Potable Time Collected: 12:14 pm Test Requested: Environmental Culture Test-Legionella Status: Complete 11/27/2024 Result: **Positive** 350.0 CFU/mL Concentration:



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# **FINAL REPORT**

Account #: 4522

SPL Project ID: 2411-01327

Project Name: Gallup Indian Medical

PO Number: 3608

Sampled By: McCoy/Melter
Date Received: 11/20/2024
Date Final: 12/02/2024

Location:	32. 3003 West Breakroom	Date Collected: 11/19/2024
Sample ID:	2411-01327.032	Sample Type: Water
Source Type:	Potable	
		Time Collected: 12:21 pm
Test Requested:	Environmental Culture Test-Legionella	Status: Complete 11/27/2024
Result:	Not Detected	
Date Processed:	11/20/24 6:00 pm	
Volume Examined:	0.2 ml of processed sample	
Location:	33. 4009 Breakroom	Date Collected: 11/19/2024
Sample ID:	2411-01327.033	Sample Type: Water
Source Type:	Potable	
		Time Collected: 12:30 pm
Test Requested:	Environmental Culture Test-Legionella	Status: Complete 11/27/2024
Result:	Positive	
Concentration:	0.5 CFU/mL	
Species:	L. anisa (Blue-white Legionella sp.)	
Date Processed:	11/20/24 6:00 pm	
Volume Examined:	0.2 ml of processed sample	
Location:	34. 3003 East Bathroom	Date Collected: 11/19/2024
Sample ID:	2411-01327.034	Sample Type: Water
Source Type:	Potable	
		Time Collected: 12:23 pm
Test Requested:	Environmental Culture Test-Legionella	Status: Complete 12/02/2024
Result:	Not Detected	
Date Processed:	11/20/24 6:00 pm	
Volume Examined:	0.2 ml of processed sample	
Location:	35. CT Breakroom	Date Collected: 11/19/2024
Sample ID:	2411-01327.035	Sample Type: Water
Source Type:	Potable	
•.		Time Collected: 12:38 pm
Test Requested:	Environmental Culture Test-Legionella	Status: Complete 11/27/2024
Result:	Not Detected	·
Date Processed:	11/20/24 6:00 pm	
Volume Examined:	0.2 ml of processed sample	



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Date Collected:

Time Collected:

Date Collected:

Time Collected:

Sample Type:

Time Collected:

Status: Complete 11/27/2024

Sample Type:

Status: Complete 11/27/2024

Sample Type:

11/19/2024

12:46 pm

11/19/2024

12:52 pm

Water

Water

1:03 pm

Water

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### **FINAL REPORT**

Account #: 4522

SPL Project ID: 2411-01327

Project Name: Gallup Indian Medical

PO Number: 3608

Sampled By: McCoy/Melter
Date Received: 11/20/2024
Date Final: 12/02/2024

Location: 36. 5000 Bottle Filler

Sample ID: 2411-01327.036

Source Type: Potable

Test Requested: Environmental Culture Test-Legionella

Result: Not Detected

Date Processed: 11/20/24 6:00 pm

Volume Examined: 0.2 ml of processed sample

Location: 37, 4010 19 Sink Hot

Sample ID: 2411-01327.037

Source Type: Potable

Test Requested: Environmental Culture Test-Legionella

Result: **Positive**Concentration: 5.0 CFU/mL

Species: L. anisa (Blue-white Legionella sp.)

Date Processed: 11/20/24 6:00 pm

Volume Examined: 0.2 ml of processed sample

Location: 38. INB Micro Lab Sink Date Collected: 11/19/2024

Sample ID: 2411-01327.038

Potable

Test Requested: Environmental Culture Test-Legionella Status: Complete 11/27/2024

Result: **Positive**Concentration: 15.0 CFU/mL

Species: L. pneumophila, serogroup 1

Report Comments: L. anisa (Blue-white species) also isolated

Legionella rubrilucens also isolated

Date Processed: 11/20/24 6:00 pm

Volume Examined: 0.2 ml of processed sample

Approved By: Jennifer Furlong

Janet E. Stout, Ph.D.

Source Type:

Laboratory Director, Special Pathogens Laboratory



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### **FINAL REPORT**

Account #: 4522

SPL Project ID: 2411-01327

Project Name: Gallup Indian Medical

PO Number: 3608

Sampled By: McCoy/Melter
Date Received: 11/20/2024
Date Final: 12/02/2024

#### **Industrial Water Engineering**

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#### **NOTES**

#### **Environmental Culture Test-Legionella**

- -CFU/mL (or swab)=Colony Forming Units per milliliter or swab.
- -The limit of detection (LOD)\* is approximately 0.5 5 CFU/mL for Potable Water; 5 CFU/mL for Non-Potable Water (Cooling Towers); 0.5 5 CFU/mL for Hot Water Tanks; 10 -100 CFU/swab for Swabs.
- \* Sensitivity (LOD) may be affected if less than recommended sample volume is submitted for testing and if high concentration of non-Legionella bacteria are present in the sample. LOD values are mathematically derived according to the sample type, volume, and process.
- Results are reported as Not Detected, Positive, or Not Detected\*
- -Not Detected\* The presence of Legionella could not be determined due to overgrowth of non-Legionella bacteria.
- -Probable identification. Contact laboratory if further identification by 16S sequencing required.
- Method: ISO 11731:2017 (E). QA/QC performed on the date processed. Turnaround time is 7-10 days.
- Samples should be analyzed within 2 days of collection.
- Accredited by the American Association for Laboratory Accreditation (Cert. No. 2847.01) and CDC ELITE certified.
- Isolates saved upon request. Request must be received 1 week from receipt of report. Extra charges may apply.
- -'Project Name', 'Sampled By', 'Location', 'Date Collected', 'Time Collected' and 'Client Notes' are provided by the customer.

The data and information on this, and other accompanying documents, represent only the sample(s) analyzed. This report is not to be reproduced in whole or in part without the expressed consent of SPL. Results apply to the sample as received.



Report for:

John R. Isham iina' ba', Inc. 1812 North Schofield Lane PO Box 2606 Farmington, NM 87401

Eurofins Aerotech Built Environment Testing, Inc. Regarding: Project: 21-018-0301; GIMC Post Repair Sampling

EML ID: 3634073

Approved by:

Business Unit Manager Joshua Cox Dates of Analysis:

Legionella-CDC method: 05-14-2024

Service SOPs: Legionella-CDC method (EM-BT-S-1687) AIHA-LAP, LLC accredited service, Lab ID #102297

All samples were received in acceptable condition unless noted in the Report Comments portion in the body of the report. Due to the nature of the analyses performed, field blank correction of results is not applied. The results relate only to the samples as received and tested.

Eurofins Aerotech Built Environment Testing, Inc. ("the Company"), a member of the Eurofins Built Environment Testing group of companies, shall have no liability to the client or the client's customer with respect to decisions or recommendations made, actions taken or courses of conduct implemented by either the client or the client's customer as a result of or based upon the Test Results. In no event shall the Company be liable to the client with respect to the Test Results except for the Company's own willful misconduct or gross negligence nor shall the Company be liable for incidental or consequential damages or lost profits or revenues to the fullest extent such liability may be disclaimed by law, even if the Company has been advised of the possibility of such damages, lost profits or lost revenues. In no event shall the Company's liability with respect to the Test Results exceed the amount paid to the Company by the client therefor.

Eurofins Aerotech Built Environment Testing, Inc.'s LabServe® reporting system includes automated fail-safes to ensure that all AIHA-LAP, LLC quality requirements are met and notifications are added to reports when any quality steps remain pending.

#### **Eurofins Aerotech Built Environment Testing, Inc.**

1501 West Knudsen Drive, Phoenix, AZ 85027 (800) 651-4802 www.eurofinsus.com/Built

EMLab ID: 3634073, Page 2 of 9

Client: iina' ba', Inc.

C/O: John R. Isham

Re: 21-018-0301; GIMC Post Repair Sampling

Date of Sampling: 05-06-2024

Date of Receipt: 05-07-2024

Date of Report: 05-15-2024

**OUANTITATIVE LEGIONELLA REPORT** 

Location:	Boiler Room: Eye Wash		GW13: Eye Wash		HSK PG: Eye Wash		Kitchen 1: Ice Machine		1E210: Ice Machine	
Comments (see below)	None		None		None		None		None	
Lab ID-Version‡:	17786	5330-1	17786332-1		17786334-1		17786336-1		17786338-1	
Analysis Date:	05/14/2024		05/14/2024		05/14/2024		05/14/2024		05/14/2024	
Sample type	Water sample		Water sample		Water sample		Water sample		Water sample	
Volume filtered (ml)	20	200 2		00	200		200		200	
Reporting Units	1 ml		1 ml		1 ml		1 ml		1 ml	
Detection Limit†	< 0.1		< 0.1		< 0.1		< 0.1		< 0.1	
Analytical Sensitivity†	< !	0.1	< 0.1		< 0.1		< 0.1		< 0.1	
	raw ct.	cfu*/unit	raw ct.	cfu*/unit	raw ct.	cfu*/unit	raw ct.	cfu*/unit	raw ct.	cfu*/unit
L. pneumophila serotype 1			40	4						
L. pneumophila serotype 2-15										
Other Legionella species					1	0.1				
§TOTAL Legionella	ND	< 0.1	40	4	1	0.1	ND	< 0.1	ND	< 0.1

\*cfu = colony forming units

ND = none detected

**Comments:** 

For water samples, the submitted volume affects dilution factor and limit of detection. A sample volume of at least 200ml is recommended for potable water samples for environments with high-risk populations and some other applications. Guidance on sampling, action thresholds and other relevant information can be found at (https://www.osha.gov) as well as other international, national and local agencies.

Identifiers listed without a count or data entry were not detected during the course of the analysis for the respective sample.

<sup>&</sup>quot;Other Legionella species" include, but are not limited to, the following organisms: Legionella anisa, Legionella bozemanii, Legionella dumoffii, Legionella gormanii, Legionella jordanis, Legionella longbeachae 1 and 2, and Legionella micdadei.

<sup>†</sup> The limit of detection is a raw count of 1 at the lowest dilution plated, represented here as a theoretical detection limit of 1 raw count/reporting unit x the dilution factor on the lowest dilution plated. The analytical sensitivity is represented as being equal to 1 raw count/reporting unit x the dilution factor, but on the on the lowest reportable (or countable) dilution plated.

<sup>§</sup> Total CFU/unit has been rounded to two significant figures to reflect analytical precision.

 $<sup>\</sup>ddagger$  A "Version" indicated by -"x" after the Lab ID# with a value greater than 1 indicates a sample with amended data. The revision number is reflected by the value of "x".

#### **Eurofins Aerotech Built Environment Testing, Inc.**

1501 West Knudsen Drive, Phoenix, AZ 85027 (800) 651-4802 www.eurofinsus.com/Built

EMLab ID: 3634073, Page 3 of 9

Client: iina' ba', Inc.

C/O: John R. Isham

Re: 21-018-0301; GIMC Post Repair Sampling

Date of Sampling: 05-06-2024

Date of Receipt: 05-07-2024

Date of Report: 05-15-2024

#### **QUANTITATIVE LEGIONELLA REPORT**

Location:	1S132: ER Eye Wash		1S143A: Eye Wash		1st Fl: Bottle Filler		1N05: Eye Wash		
Comments (see below)	None		None		None		None		
Lab ID-Version‡:	17786	5340-1	17786342-1		17786344-1		17786346-1		
Analysis Date:	05/14	05/14/2024		05/14/2024		05/14/2024		05/14/2024	
Sample type	Water	sample	Water sample		Water sample		Water sample		
Volume filtered (ml)	200		200		200		200		
Reporting Units	1 ml		1 ml		1 ml		1 ml		
Detection Limit†	<	0.1	< 0.1		< 0.1		< 0.1		
Analytical Sensitivity†	<	0.1	< 0.1		< 0.1		< 0.1		
	raw ct.	cfu*/unit	raw ct.	cfu*/unit	raw ct.	cfu*/unit	raw ct.	cfu*/unit	
L. pneumophila serotype 1			77	7.7			2	0.2	
L. pneumophila serotype 2-15									
Other Legionella species	_		·				_		
§TOTAL Legionella	ND	< 0.1	77	7.7	ND	< 0.1	2	0.2	

<sup>\*</sup>cfu = colony forming units ND = none detected

**Comments:** 

For water samples, the submitted volume affects dilution factor and limit of detection. A sample volume of at least 200ml is recommended for potable water samples for environments with high-risk populations and some other applications. Guidance on sampling, action thresholds and other relevant information can be found at (https://www.osha.gov) as well as other international, national and local agencies.

Identifiers listed without a count or data entry were not detected during the course of the analysis for the respective sample.

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<sup>§</sup> Total CFU/unit has been rounded to two significant figures to reflect analytical precision.

 $<sup>\</sup>ddagger$  A "Version" indicated by -"x" after the Lab ID# with a value greater than 1 indicates a sample with amended data. The revision number is reflected by the value of "x".

1501 West Knudsen Drive, Phoenix, AZ 85027 (800) 651-4802 www.eurofinsus.com/Built

EMLab ID: 3634073, Page 4 of 9

Client: iina' ba', Inc.

C/O: John R. Isham

Re: 21-018-0301; GIMC Post Repair Sampling

Date of Sampling: 05-06-2024

Date of Receipt: 05-07-2024

Date of Report: 05-15-2024

### **OUANTITATIVE LEGIONELLA REPORT**

Location:	2E55: Ice Machine		2S72: Ice Machine		2S93: Eye Wash		GND CORR: Bottle Filler	
Comments (see below)		one		None		None		one
Lab ID-Version‡:	17786	5348-1	17786	5350-1	17786	5352-1	17786354-1	
Analysis Date:	05/14	1/2024	05/14	1/2024	05/14	-/2024	05/14	-/2024
Sample type	Water	sample	Water	sample	Water	sample	Water	sample
Volume filtered (ml)	2	00	20	00	200		200	
Reporting Units	1	ml	1 ml		1 ml		1 ml	
Detection Limit†	<	0.1	< 0.1		<	0.1	< !	0.1
Analytical Sensitivity†	<	0.1	< 0.1		<	0.1	< !	0.1
	raw ct.	cfu*/unit	raw ct.	cfu*/unit	raw ct.	cfu*/unit	raw ct.	cfu*/unit
L. pneumophila serotype 1							12	1.2
L. pneumophila serotype 2-15								
Other Legionella species								
§TOTAL Legionella	ND	< 0.1	ND	< 0.1	ND	< 0.1	12	1.2

\*cfu = colony forming units ND =

ND = none detected

**Comments:** 

For water samples, the submitted volume affects dilution factor and limit of detection. A sample volume of at least 200ml is recommended for potable water samples for environments with high-risk populations and some other applications. Guidance on sampling, action thresholds and other relevant information can be found at (https://www.osha.gov) as well as other international, national and local agencies.

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1501 West Knudsen Drive, Phoenix, AZ 85027 (800) 651-4802 www.eurofinsus.com/Built

EMLab ID: 3634073, Page 5 of 9

Client: iina' ba', Inc.

C/O: John R. Isham

Re: 21-018-0301; GIMC Post Repair Sampling

Date of Sampling: 05-06-2024

Date of Receipt: 05-07-2024

Date of Report: 05-15-2024

**QUANTITATIVE LEGIONELLA REPORT** 

Location:	2S105:		2W18: Ice Machine		2W14: Shower		2W20: Shower	
	Shower		ice Machine					
Comments (see below)	No	one	No	one	None		None	
Lab ID-Version‡:	17786	5356-1	17786	5358-1	17786	5360-1	17786362-1	
Analysis Date:	05/14	1/2024	05/14	1/2024	05/14	/2024	05/14	/2024
Sample type	Water	sample	Water	sample	Water	sample	Water	sample
Volume filtered (ml)	2	00	2	00	200		200	
Reporting Units	1	ml	1 ml		1 ml		1 ml	
Detection Limit†	<	0.1	< 0.1		<	0.1	<	0.1
Analytical Sensitivity†	<	0.1	< 0.1		<	0.1	<	0.1
	raw ct.	cfu*/unit	raw ct.	cfu*/unit	raw ct.	cfu*/unit	raw ct.	cfu*/unit
L. pneumophila serotype 1	1	0.1					2	0.2
L. pneumophila serotype 2-15								
Other Legionella species								
§TOTAL Legionella	1	0.1	ND	< 0.1	ND	< 0.1	2	0.2

<sup>\*</sup>cfu = colony forming units ND

ND = none detected

**Comments:** 

For water samples, the submitted volume affects dilution factor and limit of detection. A sample volume of at least 200ml is recommended for potable water samples for environments with high-risk populations and some other applications. Guidance on sampling, action thresholds and other relevant information can be found at (https://www.osha.gov) as well as other international, national and local agencies.

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1501 West Knudsen Drive, Phoenix, AZ 85027 (800) 651-4802 www.eurofinsus.com/Built

EMLab ID: 3634073, Page 6 of 9

Client: iina' ba', Inc.

C/O: John R. Isham

Re: 21-018-0301; GIMC Post Repair Sampling

Date of Sampling: 05-06-2024

Date of Receipt: 05-07-2024

Date of Report: 05-15-2024

### **OUANTITATIVE LEGIONELLA REPORT**

Location:	2W24: Sprayer		3S71: Shower		3SE78: Ice Machine		3SE92: Eye Wash	
Comments (see below)		one	None		None		None	
Lab ID-Version‡:	17786	5364-1	17786	5366-1	17786	5368-1	17786370-1	
Analysis Date:	05/14	/2024	05/14	/2024	05/14	-/2024	05/14	-/2024
Sample type	Water	sample	Water	sample	Water	sample	Water	sample
Volume filtered (ml)	20	00	20	00	200		200	
Reporting Units	1	ml	1 ml		1 ml		1 ml	
Detection Limit†	<	0.1	< 0.1		<	0.1	<	0.1
Analytical Sensitivity†	<	0.1	< 0.1		<	0.1	<	0.1
	raw ct.	cfu*/unit	raw ct.	cfu*/unit	raw ct.	cfu*/unit	raw ct.	cfu*/unit
L. pneumophila serotype 1	1	0.1	4	0.4				
L. pneumophila serotype 2-15								
Other Legionella species	_		·				_	
§TOTAL Legionella	1	0.1	4	0.4	ND	< 0.1	ND	< 0.1

\*cfu = colony forming units ND = none detected

**Comments:** 

For water samples, the submitted volume affects dilution factor and limit of detection. A sample volume of at least 200ml is recommended for potable water samples for environments with high-risk populations and some other applications. Guidance on sampling, action thresholds and other relevant information can be found at (https://www.osha.gov) as well as other international, national and local agencies.

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1501 West Knudsen Drive, Phoenix, AZ 85027 (800) 651-4802 www.eurofinsus.com/Built

EMLab ID: 3634073, Page 7 of 9

Client: iina' ba', Inc.

C/O: John R. Isham

Re: 21-018-0301; GIMC Post Repair Sampling

Date of Sampling: 05-06-2024

Date of Receipt: 05-07-2024

Date of Report: 05-15-2024

# **QUANTITATIVE LEGIONELLA REPORT**

Location:	3SW94:			3SW100:		12:	3W18:	
	Drinking Fountain		Shower		Shower		Ice Machine	
Comments (see below)	No	one	No	one	None		None	
Lab ID-Version‡:	17786	5372-1	17786	5374-1	17786	5376-1	17786	5378-1
Analysis Date:	05/14	/2024	05/14	1/2024	05/14	/2024	05/14	/2024
Sample type	Water	sample	Water	sample	Water	sample	Water	sample
Volume filtered (ml)	2	00	2	00	200		200	
Reporting Units	1	ml	1 ml		1 ml		1 ml	
Detection Limit†	<	0.1	< 0.1		<	0.1	<	0.1
Analytical Sensitivity†	<	0.1	< 0.1		< 0.1		< 0.1	
	raw ct.	cfu*/unit	raw ct.	cfu*/unit	raw ct.	cfu*/unit	raw ct.	cfu*/unit
L. pneumophila serotype 1								
L. pneumophila serotype 2-15								
Other Legionella species								
§TOTAL Legionella	ND	< 0.1	ND	< 0.1	ND	< 0.1	ND	< 0.1

<sup>\*</sup>cfu = colony forming units ND = none detected

**Comments:** 

For water samples, the submitted volume affects dilution factor and limit of detection. A sample volume of at least 200ml is recommended for potable water samples for environments with high-risk populations and some other applications. Guidance on sampling, action thresholds and other relevant information can be found at (https://www.osha.gov) as well as other international, national and local agencies.

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1501 West Knudsen Drive, Phoenix, AZ 85027 (800) 651-4802 www.eurofinsus.com/Built

EMLab ID: 3634073, Page 8 of 9

Client: iina' ba', Inc. Date of Sampling: 05-06-2024 Date of Receipt: 05-07-2024 C/O: John R. Isham Re: 21-018-0301; GIMC Post Repair Sampling Date of Report: 05-15-2024

### OUANTITATIVE LEGIONELLA REPORT

Location:	3W20:		3W	/23:	4th	Fl:	4S	96:
	Shower		Sprayer		Drinking Fountain		Drinking Fountain	
Comments (see below)	No	one	No	one	None		None	
Lab ID-Version‡:	17786	5380-1	17786	5382-1	17786	5384-1	17786386-1	
Analysis Date:	05/14	/2024	05/14	1/2024	05/14	-/2024	05/14	/2024
Sample type	Water	sample	Water	sample	Water	sample	Water	sample
Volume filtered (ml)	20	00	20	00	200		200	
Reporting Units	1	ml	1 ml		1 ml		1 ml	
Detection Limit†	<	0.1	< 0.1		<	0.1	<	0.1
Analytical Sensitivity†	<	0.1	< 0.1		< 0.1		<	0.1
	raw ct.	cfu*/unit	raw ct.	cfu*/unit	raw ct.	cfu*/unit	raw ct.	cfu*/unit
L. pneumophila serotype 1	2	0.2	1	0.1				
L. pneumophila serotype 2-15								
Other Legionella species								
§TOTAL Legionella	2	0.2	1	0.1	ND	< 0.1	ND	< 0.1

<sup>\*</sup>cfu = colony forming units

ND = none detected

**Comments:** 

For water samples, the submitted volume affects dilution factor and limit of detection. A sample volume of at least 200ml is recommended for potable water samples for environments with high-risk populations and some other applications. Guidance on sampling, action thresholds and other relevant information can be found at (https://www.osha.gov) as well as other international, national and local agencies.

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<sup>‡</sup> A "Version" indicated by -"x" after the Lab ID# with a value greater than 1 indicates a sample with amended data. The revision number is reflected by the value of "x".

1501 West Knudsen Drive, Phoenix, AZ 85027 (800) 651-4802 www.eurofinsus.com/Built

EMLab ID: 3634073, Page 9 of 9

Client: iina' ba', Inc.

C/O: John R. Isham

Re: 21-018-0301; GIMC Post Repair Sampling

Date of Sampling: 05-06-2024

Date of Receipt: 05-07-2024

Date of Report: 05-15-2024

### **OUANTITATIVE LEGIONELLA REPORT**

Location:	4S93: Shower		Influent: Gallup Source		Kitchen 2: Eye Wash		4W Bottle Filler: Bottle Filler	
Comments (see below)	No	one	None		None		None	
Lab ID-Version‡:	17786	5388-1	17786	5390-1	17786	5392-1	17786	5394-1
Analysis Date:	05/14	/2024	05/14	/2024	05/14	-/2024	05/14	-/2024
Sample type	Water	sample	Water	sample	Water	sample	Water	sample
Volume filtered (ml)	20	00	2	00	200		200	
Reporting Units	1	ml	1 ml		1 ml		1 ml	
Detection Limit†	<	0.1	< 0.1		<	0.1	< !	0.1
Analytical Sensitivity†	<	0.1	< 0.1		<	0.1	< !	0.1
	raw ct.	cfu*/unit	raw ct.	cfu*/unit	raw ct.	cfu*/unit	raw ct.	cfu*/unit
L. pneumophila serotype 1							163	16
L. pneumophila serotype 2-15								
Other Legionella species								
§TOTAL Legionella	ND	< 0.1	ND	< 0.1	ND	< 0.1	163	16

\*cfu = colony forming units ND = none detected

**Comments:** 

For water samples, the submitted volume affects dilution factor and limit of detection. A sample volume of at least 200ml is recommended for potable water samples for environments with high-risk populations and some other applications. Guidance on sampling, action thresholds and other relevant information can be found at (https://www.osha.gov) as well as other international, national and local agencies.

<sup>&</sup>quot;Other Legionella species" include, but are not limited to, the following organisms: Legionella anisa, Legionella bozemanii, Legionella dumoffii, Legionella gormanii, Legionella jordanis, Legionella longbeachae 1 and 2, and Legionella micdadei.

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 $<sup>\</sup>ddagger$  A "Version" indicated by -"x" after the Lab ID# with a value greater than 1 indicates a sample with amended data. The revision number is reflected by the value of "x".



Report for:

John R. Isham iina' ba', Inc. 1812 North Schofield Lane PO Box 2606 Farmington, NM 87401

Eurofins Aerotech Built Environment Testing, Inc. Project: 24-018-0301; GIMC Pre-Repair Sampling Regarding:

EML ID: 3629373

Approved by:

**Business Unit Manager** 

Joshua Cox

Service SOPs: Legionella-CDC method (EM-BT-S-1687) AIHA-LAP, LLC accredited service, Lab ID #102297

All samples were received in acceptable condition unless noted in the Report Comments portion in the body of the report. Due to the nature of the analyses performed, field blank correction of results is not applied. The results relate only to the samples as received and tested.

Dates of Analysis:

Legionella-CDC method: 05-09-2024

Eurofins Aerotech Built Environment Testing, Inc. ("the Company"), a member of the Eurofins Built Environment Testing group of companies, shall have no liability to the client or the client's customer with respect to decisions or recommendations made, actions taken or courses of conduct implemented by either the client or the client's customer as a result of or based upon the Test Results. In no event shall the Company be liable to the client with respect to the Test Results except for the Company's own willful misconduct or gross negligence nor shall the Company be liable for incidental or consequential damages or lost profits or revenues to the fullest extent such liability may be disclaimed by law, even if the Company has been advised of the possibility of such damages, lost profits or lost revenues. In no event shall the Company's liability with respect to the Test Results exceed the amount paid to the Company by the client therefor.

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1501 West Knudsen Drive, Phoenix, AZ 85027 (800) 651-4802 www.eurofinsus.com/Built

EMLab ID: 3629373, Page 2 of 9

Client: iina' ba', Inc.

C/O: John R. Isham

Re: 24-018-0301; GIMC Pre-Repair Sampling

Date of Sampling: 05-01-2024

Date of Receipt: 05-02-2024

Date of Report: 05-09-2024

**OUANTITATIVE LEGIONELLA REPORT** 

Location:		GND CORR: Bottle Filler		GS59: Eye Wash		Boiler Rm: Eye Wash		GW13: Eye Wash		KPG: Wash
Comments (see below)	No	one	No	one	None		None		No	one
Lab ID-Version‡:	17764	1373-1	17765	5592-1	17764	1377-1	17764	1379-1	17764	1381-1
Analysis Date:	05/09	/2024	05/09	/2024	05/09	)/2024	05/09	0/2024	05/09	/2024
Sample type	Water	sample	Water	sample	Water	sample	Water sample		Water	sample
Volume filtered (ml)	20	00	20	00	20	00	200		200	
Reporting Units	1	ml	1	ml	1 ml		1 ml		1 ml	
Detection Limit†	<	0.1	< 0.1		<	0.1	< 1	0.1	<	0.1
Analytical Sensitivity†	<	0.1	<	0.1	< 0.1		< 1	0.1	< 0.1	
	raw ct.	cfu*/unit	raw ct.	cfu*/unit	raw ct.	cfu*/unit	raw ct.	cfu*/unit	raw ct.	cfu*/unit
L. pneumophila serotype 1	4	0.4					29	2.9		
L. pneumophila serotype 2-15										
Other Legionella species			1	0.1					5	0.5
§TOTAL Legionella	4	0.4	1	0.1	ND	< 0.1	29	2.9	5	0.5

\*cfu = colony forming units ND = none detected

**Comments:** 

For water samples, the submitted volume affects dilution factor and limit of detection. A sample volume of at least 200ml is recommended for potable water samples for environments with high-risk populations and some other applications. Guidance on sampling, action thresholds and other relevant information can be found at (https://www.osha.gov) as well as other international, national and local agencies.

<sup>&</sup>quot;Other Legionella species" include, but are not limited to, the following organisms: Legionella anisa, Legionella bozemanii, Legionella dumoffii, Legionella gormanii, Legionella jordanis, Legionella longbeachae 1 and 2, and Legionella micdadei.

<sup>†</sup> The limit of detection is a raw count of 1 at the lowest dilution plated, represented here as a theoretical detection limit of 1 raw count/reporting unit x the dilution factor on the lowest dilution plated. The analytical sensitivity is represented as being equal to 1 raw count/reporting unit x the dilution factor, but on the on the lowest reportable (or countable) dilution plated.

<sup>§</sup> Total CFU/unit has been rounded to two significant figures to reflect analytical precision.

 $<sup>\</sup>ddagger$  A "Version" indicated by -"x" after the Lab ID# with a value greater than 1 indicates a sample with amended data. The revision number is reflected by the value of "x".

1501 West Knudsen Drive, Phoenix, AZ 85027 (800) 651-4802 www.eurofinsus.com/Built

EMLab ID: 3629373, Page 3 of 9

Client: iina' ba', Inc.

C/O: John R. Isham

Re: 24-018-0301; GIMC Pre-Repair Sampling

Date of Sampling: 05-01-2024

Date of Receipt: 05-02-2024

Date of Report: 05-09-2024

### **OUANTITATIVE LEGIONELLA REPORT**

Location:	Kitchen: Ice Machine		IE 210: Ice Machine		IS 132: ER Eye Wash		IS 143A: Eye Wash	
Comments (see below)	No	one	No	one	None		None	
Lab ID-Version‡:	17764	1383-1	17764	1385-1	17764	1387-1	17764389-1	
Analysis Date:	05/09	9/2024	05/09	0/2024	05/09	0/2024	05/09	9/2024
Sample type	Water	sample	Water	sample	Water	sample	Water	sample
Volume filtered (ml)	2	00	2	00	200		200	
Reporting Units	1	ml	1 ml		1 ml		1 ml	
Detection Limit†	<	0.1	< 0.1		<	0.1	<	0.1
Analytical Sensitivity†	<	0.1	< 0.1		< 0.1		< 0.1	
	raw ct.	cfu*/unit	raw ct.	cfu*/unit	raw ct.	cfu*/unit	raw ct.	cfu*/unit
L. pneumophila serotype 1					2	0.2	52	5.2
L. pneumophila serotype 2-15								
Other Legionella species								
§TOTAL Legionella	ND	< 0.1	ND	< 0.1	2	0.2	52	5.2

<sup>\*</sup>cfu = colony forming units ND

ND = none detected

**Comments:** 

For water samples, the submitted volume affects dilution factor and limit of detection. A sample volume of at least 200ml is recommended for potable water samples for environments with high-risk populations and some other applications. Guidance on sampling, action thresholds and other relevant information can be found at (https://www.osha.gov) as well as other international, national and local agencies.

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<sup>§</sup> Total CFU/unit has been rounded to two significant figures to reflect analytical precision.

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EMLab ID: 3629373, Page 4 of 9

Client: iina' ba', Inc.

C/O: John R. Isham

Re: 24-018-0301; GIMC Pre-Repair Sampling

Date of Sampling: 05-01-2024

Date of Receipt: 05-02-2024

Date of Report: 05-09-2024

QUANTITATIVE LEGIONELLA REPORT

Location:	1st Fl.:		IN	IN05:		55:	2S	72:
	Bottle Filler		Eye Wash		Ice Machine		Ice Machine	
Comments (see below)	No	one	No	one	None		None	
Lab ID-Version‡:	17764	1391-1	17764	1393-1	17764	1395-1	17764397-1	
Analysis Date:	05/09	0/2024	05/09	0/2024	05/09	/2024	05/09	9/2024
Sample type	Water	sample	Water	sample	Water	sample	Water	sample
Volume filtered (ml)	20	00	2	00	200		200	
Reporting Units	1	ml	1 ml		1 ml		1 ml	
Detection Limit†	<	0.1	< 0.1		<	0.1	<	0.1
Analytical Sensitivity†	<	0.1	< 0.1		< 0.1		< 0.1	
	raw ct.	cfu*/unit	raw ct.	cfu*/unit	raw ct.	cfu*/unit	raw ct.	cfu*/unit
L. pneumophila serotype 1			43	4.3				
L. pneumophila serotype 2-15								
Other Legionella species								
§TOTAL Legionella	ND	< 0.1	43	4.3	ND	< 0.1	ND	< 0.1

<sup>\*</sup>cfu = colony forming units ND = none detected

**Comments:** 

For water samples, the submitted volume affects dilution factor and limit of detection. A sample volume of at least 200ml is recommended for potable water samples for environments with high-risk populations and some other applications. Guidance on sampling, action thresholds and other relevant information can be found at (https://www.osha.gov) as well as other international, national and local agencies.

<sup>&</sup>quot;Other Legionella species" include, but are not limited to, the following organisms: Legionella anisa, Legionella bozemanii, Legionella dumoffii, Legionella gormanii, Legionella jordanis, Legionella longbeachae 1 and 2, and Legionella micdadei.

<sup>†</sup> The limit of detection is a raw count of 1 at the lowest dilution plated, represented here as a theoretical detection limit of 1 raw count/reporting unit x the dilution factor on the lowest dilution plated. The analytical sensitivity is represented as being equal to 1 raw count/reporting unit x the dilution factor, but on the on the lowest reportable (or countable) dilution plated.

<sup>§</sup> Total CFU/unit has been rounded to two significant figures to reflect analytical precision.

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EMLab ID: 3629373, Page 5 of 9

Client: iina' ba', Inc.

C/O: John R. Isham

Re: 24-018-0301; GIMC Pre-Repair Sampling

Date of Sampling: 05-01-2024

Date of Receipt: 05-02-2024

Date of Report: 05-09-2024

### **OUANTITATIVE LEGIONELLA REPORT**

Location:	2S93:			105:		B14:		718:
	Eye Wash		Shower		Shower		Ice Machine	
Comments (see below)	No	one	No	one	No	one	None	
Lab ID-Version‡:	17764	1399-1	17764	1401-1	17764	1403-1	17764405-1	
Analysis Date:	05/09	9/2024	05/09	9/2024	05/09	0/2024	05/09	0/2024
Sample type	Water	sample	Water	sample	Water	sample	Water	sample
Volume filtered (ml)	2	00	2	00	200		200	
Reporting Units	1	ml	1 ml		1 ml		1 ml	
Detection Limit†	<	0.1	< 0.1		<	0.1	<	0.1
Analytical Sensitivity†	<	0.1	< 0.1		<	0.1	<	0.1
	raw ct.	cfu*/unit	raw ct.	cfu*/unit	raw ct.	cfu*/unit	raw ct.	cfu*/unit
L. pneumophila serotype 1								
L. pneumophila serotype 2-15								
Other Legionella species								
§TOTAL Legionella	ND	< 0.1	ND	< 0.1	ND	< 0.1	ND	< 0.1

\*cfu = colony forming units ND = none detected

**Comments:** 

For water samples, the submitted volume affects dilution factor and limit of detection. A sample volume of at least 200ml is recommended for potable water samples for environments with high-risk populations and some other applications. Guidance on sampling, action thresholds and other relevant information can be found at (https://www.osha.gov) as well as other international, national and local agencies.

<sup>&</sup>quot;Other Legionella species" include, but are not limited to, the following organisms: Legionella anisa, Legionella bozemanii, Legionella dumoffii, Legionella gormanii, Legionella jordanis, Legionella longbeachae 1 and 2, and Legionella micdadei.

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EMLab ID: 3629373, Page 6 of 9

Client: iina' ba', Inc.

C/O: John R. Isham

Re: 24-018-0301; GIMC Pre-Repair Sampling

Date of Sampling: 05-01-2024

Date of Receipt: 05-02-2024

Date of Report: 05-09-2024

### **OUANTITATIVE LEGIONELLA REPORT**

Location:	2W20: Shower		2W24: Sprayer		3S71: Shower		3SE78: Ice Machine	
Comments (see below)		one		None		None		one
Lab ID-Version:		1407-1		1409-1		l411-1	17764413-1	
Analysis Date:	05/09	0/2024	05/09	9/2024	05/09	/2024	05/09	0/2024
Sample type	Water	sample	Water	sample	Water	sample	Water	sample
Volume filtered (ml)	20	00	2	00	200		200	
Reporting Units	1	ml	1 ml		1 ml		1 ml	
Detection Limit†	<	0.1	< 0.1		<	0.1	<	0.1
Analytical Sensitivity†	<	0.1	< 0.1		< 0.1		< 0.1	
	raw ct.	cfu*/unit	raw ct.	cfu*/unit	raw ct.	cfu*/unit	raw ct.	cfu*/unit
L. pneumophila serotype 1	14	1.4			275	28	40	4
L. pneumophila serotype 2-15								
Other Legionella species								
§TOTAL Legionella	14	1.4	ND	< 0.1	275	28	40	4

<sup>\*</sup>cfu = colony forming units ND = none detected

**Comments:** 

For water samples, the submitted volume affects dilution factor and limit of detection. A sample volume of at least 200ml is recommended for potable water samples for environments with high-risk populations and some other applications. Guidance on sampling, action thresholds and other relevant information can be found at (https://www.osha.gov) as well as other international, national and local agencies.

<sup>&</sup>quot;Other Legionella species" include, but are not limited to, the following organisms: Legionella anisa, Legionella bozemanii, Legionella dumoffii, Legionella gormanii, Legionella jordanis, Legionella longbeachae 1 and 2, and Legionella micdadei.

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EMLab ID: 3629373, Page 7 of 9

Client: iina' ba', Inc.

C/O: John R. Isham

Re: 24-018-0301; GIMC Pre-Repair Sampling

Date of Sampling: 05-01-2024

Date of Receipt: 05-02-2024

Date of Report: 05-09-2024

**QUANTITATIVE LEGIONELLA REPORT** 

Location:	3SE92:			V94:		7100:		/18:
	Eye Wash		Drinking Fountain		Shower		Ice Machine	
Comments (see below)	No	one	No	one	None		None	
Lab ID-Version‡:	17764	1415-1	17764	1417-1	17764	1419-1	17764	1421-1
Analysis Date:	05/09	0/2024	05/09	0/2024	05/09	/2024	05/09	9/2024
Sample type	Water	sample	Water	sample	Water	sample	Water	sample
Volume filtered (ml)	20	00	2	00	200		200	
Reporting Units	1	ml	1 ml		1 ml		1 ml	
Detection Limit†	<	0.1	< 0.1		<	0.1	<	0.1
Analytical Sensitivity†	<	0.1	< 0.1		< 0.1		<	0.1
	raw ct.	cfu*/unit	raw ct.	cfu*/unit	raw ct.	cfu*/unit	raw ct.	cfu*/unit
L. pneumophila serotype 1	3	0.3						
L. pneumophila serotype 2-15								
Other Legionella species								
§TOTAL Legionella	3	0.3	ND	< 0.1	ND	< 0.1	ND	< 0.1

<sup>\*</sup>cfu = colony forming units ND = none detected

**Comments:** 

For water samples, the submitted volume affects dilution factor and limit of detection. A sample volume of at least 200ml is recommended for potable water samples for environments with high-risk populations and some other applications. Guidance on sampling, action thresholds and other relevant information can be found at (https://www.osha.gov) as well as other international, national and local agencies.

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EMLab ID: 3629373, Page 8 of 9

Client: iina' ba', Inc.

C/O: John R. Isham

Re: 24-018-0301; GIMC Pre-Repair Sampling

Date of Sampling: 05-01-2024

Date of Receipt: 05-02-2024

Date of Report: 05-09-2024

**OUANTITATIVE LEGIONELLA REPORT** 

Location:	3W20:		3W	3W23:		4THFL:		96:
	Shower		Sprayer		Drinking Fountain		Drinking Fountain	
Comments (see below)	No	one	No	one	No	one	None	
Lab ID-Version‡:	17764	1423-1	17764	1425-1	17764	17764427-1		1429-1
Analysis Date:	05/09	0/2024	05/09/2024		05/09/2024		05/09/2024	
Sample type	Water	sample	Water	sample	Water	sample	Water sample	
Volume filtered (ml)	200		2	00	200		200	
Reporting Units	1 ml		1	ml	1	ml	1 ml	
Detection Limit†	<	0.1	< 0.1		< 0.1		< 0.1	
Analytical Sensitivity†	<	0.1	< 0.1		< 0.1		< 0.1	
	raw ct.	cfu*/unit	raw ct.	cfu*/unit	raw ct.	cfu*/unit	raw ct.	cfu*/unit
L. pneumophila serotype 1	5	0.5	2	0.2				
L. pneumophila serotype 2-15								
Other Legionella species								
§TOTAL Legionella	5	0.5	2	0.2	ND	< 0.1	ND	< 0.1

<sup>\*</sup>cfu = colony forming units ND = none detected

**Comments:** 

For water samples, the submitted volume affects dilution factor and limit of detection. A sample volume of at least 200ml is recommended for potable water samples for environments with high-risk populations and some other applications. Guidance on sampling, action thresholds and other relevant information can be found at (https://www.osha.gov) as well as other international, national and local agencies.

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EMLab ID: 3629373, Page 9 of 9

Client: iina' ba', Inc.

C/O: John R. Isham

Re: 24-018-0301; GIMC Pre-Repair Sampling

Date of Sampling: 05-01-2024

Date of Receipt: 05-02-2024

Date of Report: 05-09-2024

**OUANTITATIVE LEGIONELLA REPORT** 

Location:	4S93: Shower		Influent: Gallup Source		4W-Bottle Filler: Bottler Filler		3W-12		
Comments (see below)	No	one	No	None		one	None		
Lab ID-Version‡:	17764	1431-1	17764	1433-1	17764	1435-1	17764437-1		
Analysis Date:	05/09	9/2024	05/09/2024		05/09	05/09/2024		9/2024	
Sample type	Water sample		Water	sample	Water	sample	Water	sample	
Volume filtered (ml)	200		2	00	200		200		
Reporting Units	1 ml		1	ml	1	ml	1 ml		
Detection Limit†	<	0.1	<	< 0.1		< 0.1		< 0.1	
Analytical Sensitivity†	<	0.1	< 0.1		< 0.1		< 0.1		
	raw ct.	cfu*/unit	raw ct.	cfu*/unit	raw ct.	cfu*/unit	raw ct.	cfu*/unit	
L. pneumophila serotype 1			1	0.1	55	5.5			
L. pneumophila serotype 2-15									
Other Legionella species									
§TOTAL Legionella	ND	< 0.1	1	0.1	55	5.5	ND	< 0.1	

<sup>\*</sup>cfu = colony forming units ND = none detected

**Comments:** 

For water samples, the submitted volume affects dilution factor and limit of detection. A sample volume of at least 200ml is recommended for potable water samples for environments with high-risk populations and some other applications. Guidance on sampling, action thresholds and other relevant information can be found at (https://www.osha.gov) as well as other international, national and local agencies.

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May 31, 2024

Mr. Ben Williams – Maintenance Mechanic Supervisor Gallup Indian Medical Center – IHS Gallup Service Unit 516 E. Nizhoni Boulevard Gallup, NM 87301

RE: Results of Water Sampling Services

Gallup Indian Medical Center Building Emergency Valve Replacement 516 E. Nizhoni Boulevard Gallup, McKinley County, New Mexico 87301 *iiná bá* Proposal No.: P24-017-03

Dear Mr. Williams:

iiná bá, Inc. (iiná bá) is pleased to provide the following results pertaining to the performance of potable (drinking) water sampling services at the above-referenced facility. We provided the following services in response to your phone request and have prepared our submittal in accordance with the details you provided in a Statement of Work (SOW) obtained during our site visit conducted on Wednesday, April 17, 2024, and on our Cost Proposal for services dated April 19, 2024.

### **Description of Services Performed**

IBI personnel, Mr. John R. Isham, CPG, Mr. Leotis Denetclaw, and Mr. Forrest Johnson conducted prerepair water sampling services on Wednesday, May 1, 2024 at the subject location with post-repair water samples collected on Monday, May 6, 2024 by Mr. Leotis Denetclaw and Mr. Forrest Johnson. A total of 33 discrete water samples were collected during each event from various cold water domestic pointsources throughout the facility that were selected by Gallup Indian Medical Center (GIMC) personnel. The samples were collected in laboratory-prepared containers provided by either Eurofins EM Lab P&K of Phoenix, Arizona (pathogens) or Green Analytical Laboratories of Durango, Colorado (residual/free chlorine). All samples were collected in accordance with IBI Standard Operating Procedures (SOPs). In addition, field measurements of water quality were also obtained during the sampling events using a fieldcalibrated YSI Water Quality Meter for pH, temperature, dissolved oxygen, specific conductance, and oxidation-reduction potential. All field data was recorded on individual Water System Repair Inspection Sampling Forms, including photographs of the specific sample location and device sampled (see Attachments). Once collected, all samples were prepared for delivery to their respective laboratory either by overnight shipping via FedEx® or hand delivered. Pathogen sample analyses were to include Burkholdena, Pseudomonas, Mycobacteria, Legionella. Acinetobacter, Stenotrophomonas, Nontuburculous, and Fungi.

#### Summary of Results

The results of the field-measured water quality parameters are summarized on **Table 1** in the **Attachments**. The analytical results from the water sampling for residual/free chlorine and pathogens

Maintaining Harmony Between Man and His Environment

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www.iinaba.com



are also summarized in **Table 1** in the **Attachments**. A copy of the laboratory analytical reports for the respective tests are included in the **Attachments** with their *Chain-of-Custody* (COC) forms.

### Residual/Free Chlorine

Based on the water sampling events performed at the subject building, the source water from the City of Gallup tested with a residual chlorine level of 1.0 milligram per liter (mg/L), both before and after valve repairs were made. Other point-source residual chlorine levels ranged from less than the laboratory method detection limit (MDL) of 0.1 mg/L to 1.3 mg/L. The building average residual chlorine level before repairs was 0.60 mg/L and the post-repair level was 0.80 mg/L.

### Legionella

Based on the water sampling events performed at the subject building, the detection of Legionella was reported in the influent sample prior to valve repairs at 0.1 colony-forming units (cfu). Post-repair sampling reported no detectable concentration. However, there were other detections throughout the remaining 32 sampling points, with 40% of the locations testing positive prior to system repairs and 36% of the locations testing positive after system repairs and flushing. Furthermore, a closer statistical look at these detections reveals that 43% of them are from eye wash stations, with showers at 21%, bottle fillers and sprayers at 14%, and ice machines at 7%. Post-repair detections revealed that 36% of them are from eye wash stations, with showers at 27%, bottle fillers and sprayers at 18%, and no ice machines.

## Fungi

Based on the water sampling events performed at the subject building, the detection of fungi in the source water sampled from all 33 point-source locations did not detect the presence of fungi during either the pre- or post-repair sampling events.

#### Other Pathogens

Based on the water sampling events performed at the subject building, the detection of other pathogens was confirmed in some of the point-source sampling locations. The laboratory analyses was performed in two (2) stages. The first stage was to provide a general indication of the presence or absence of bacteria that are present as either gram-negative or gram-positive. Based on the target bacteria list provided by GIMC, Pseudomonas, Acinetobacter, Burkholdena, and Stenotrophomonas are representative of gramnegative bacteria and Mycobacteria and Nontuberculous are representative of gram-positive bacteria. Based on the pre-repair sampling event, 91% of the locations contained one (1) or both of these gram bacteria types and 82% of the post-repair sample locations. Based on the speciation of the positive bacteria strains (pre- and post-repair), there was only one (1) specific species from the SOW list that was detected in the water system (Pseudomonas). It was detected in the pre-repair sample from the first floor corridor bottle filler; second floor shower (2W 20); third floor shower (3S 71), and the fourth floor shower (4S 93). One (1) interesting observation is that all of these pre-repair positive tests were not confirmed after post-repairs, likely due to the operation or use of the sampling locations during the purging process. It should also be noted that several other bacteria species were specifically identified in both the pre- and post-repair samples that were NOT part of the SOW list. These species are not summarized on the attached **Table** but can be seen in the laboratory reports attached.



## **Conclusions**

Based on the performance of this water sampling event conducted before and after repairs were made to several values of the cold-water domestic line system within the GIMC building, the following conclusions were drawn:

- The quality of the potable water being delivered from the cold-water domestic system within the subject building was comparable before and after repairs were made with regards to the levels of residual (free) chlorine indicated IBI relinquished the subject system back to the government in the same condition as it was prior to making the repairs.
- The sampling events did not detect the presence of fungi in the subject water system at detectable levels either pre- or post-repair.
- 3. The sampling events reported the presence of Legionella bacteria in several of the pre- and post-repair dead-end use devices throughout the subject structure, with eye wash stations reporting the most frequent detection likely due to the least-frequently used device.
- 4. The sampling events reported the presence of Pseudomonas in several pre-repair sampling points that were not confirmed post-repair likely due to the flushing action as part of the sampling methodology.
- 5. The presence of bacteria in the water system is likely lingering as a result of the formation of a biofilm that provides bacteria a substrate and environment to grow (amplification).

## **Discussion of Sample Results**

With regards to residual/free chlorine in domestic drinking water, the United States Environmental Protection Agency (USEPA) cites a safe drinking water level of up to 4.0 mg/L without potential for human health issues. For normal domestic use, it is recommended to keep residual chlorine levels between 0.2 mg/L and 0.5 mg/L. Given that the City of Gallup water source appears to deliver domestic water with a residual chlorine level of 1.0 mg/L, the concentrations throughout most of the point sources are generally less than 1.0 mg/L, both pre- and post-repairs. A few outliers were noted where the residual chlorine was not able to be detected in the sample or was slightly above the 1.0 mg/L. In general, the decay of residual chlorine in the domestic water system will increase with the use of hot water with more stable levels found in the domestic cold water system. Based on the data collected, the GIMC cold water system residual chlorine levels were statistically similar between the pre- and post-repair concentrations, indicating that the system draining, repairs, and chlorination/flushing activities did not alter any pre-existing water system characteristics. However, based on further water sampling discussions below, the active level of residual chlorine in the subject building as a whole appears to be insufficient to be completely protective of human health as there is the existence of bacteria in the water system (see below).

With regards to Legionella, it was specifically reported as L. pneumophila serotype 1 in all of the water samples. Legionella pneumophila is the species responsible for  $\approx 90\%$  of human cases of infection. L.



pneumophila is divided into 15 serogroups, among which serogroup 1 is the most prevalent disease-causing variant. According to the National Library of Medicine (NIH), Legionella pneumophila, the causative agent of Legionnaires' disease (LD), is a bacterium omnipresent in aquatic environments and increasingly recognized as a major cause of community- and hospital-acquired pneumonia. L. pneumophila serogroup 1 (Lp1), the dominant serogroup, accounts for  $\approx$ 84% of human infections worldwide. Of the 60 species documented, 24 are known to cause infections in humans. Hospital-acquired LD has been reported globally, and routine use of environmental cultures is recommended as a useful strategy to prevent infections. With pre-repair testing reporting detections at 43% of the locations, this is considered a high-risk detection limit that warrants some sort of remedial action. Based on American Industrial Hygienists Association (AIHS), a detection of Legionella below the detection limit of 1.0 cfu is considered to be the standard, with detections between 1.0 and 10 cfu indicates that amplification in the water system has occurred. The United States Environmental Protection Agency (USEPA) has not set a Maximum Contaminant Level (MCL) for Legionella and does not require analysis as part of water sampling plans. According to the Centers for Disease Control and Prevention (CDC), extrapulmonary infections from open wounds related to Legionella exposure are very rare.

# Recommendations

The following are recommendations being offered as a result of the sampling and testing services performed:

- Have the entire cold-water domestic service throughout the subject building be treated with a strong biocide that can effectively kill Legionella and the other bacteria that may be lingering due to the presence of a biofilm.
- After confirmation of bacteria removal from the entire water system, install a whole-system water treatment method such as ultraviolet light (UV) disinfection.
- Continue to periodically monitor the water system during treatment to ensure bacteria are completely removed from the water system and do not amplify again.

iiná bá, Inc. appreciates the opportunity to provide environmental services for the subject project. If you have any questions or comments concerning this proposal, feel free to contact John R. Isham, CPG, Environmental Manager (<u>jisham@iinaba.com</u>) or Duane Aspaas, President (<u>daspaas@iinaba.com</u>) at (505) 327-1072.

Respectfully submitted,

iiná bá, Inc.

John R. Isham, CPG Environmental Manager



**Attachments:** Pre- and Post-Water System Repair Sampling Point Inspection Forms

Pre- and Post-Water System Repair Residual Chlorine Analytical Laboratory Data

Reports

Pre- and Post-Water System Repair Legionella Analytical Laboratory Data Reports Pre- and Post-Water System Repair Fungi Analytical Laboratory Data Reports Pre- and Post-Water System Repair Pathogens Analytical Laboratory Data Reports



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Maintaining Harmony Between Man and His Environment

iiná bá, Inc. 1812 Schofield Lane, Farmington, NM 87401 PO Box 2606 Farmington, NM 87499 Phone: (505) 327-1072 Fax: (505) 327-1517

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### **ATTACHMENTS**

RESULTS OF WATER SAMPLING SERVICES

Gallup Indian Medical Center Building Emergency Valve Replacement

Gallup, McKinley County, New Mexico

IHS Contract No.: 75H71024P00878





**Prepared For:** 

Gallup Indian Medical Center 516 E. Nizhoni Boulevard Gallup, NM 87301



Prepared By:

iiná bá, Inc. 1812 Schofield Lane Farmington, NM 87401 www.iinaba.com

Phone: (505) 327-1072 Fax: (505) 327-1517

# **WATER LIMITATION ALERT**

# Building 2000 and Outside Modular Buildings Mammography, Diabetes Program and Radiology Office



# DO NOT USE THE WATER FOR CONSUMPTION

Failure to follow this advisory could result in illness.

Due to the recent Water Valve Replacement Project and hospital water shut off event, staff and patients are NOT TO USE THE TAP WATER FOR DRINKING, COOKING, BATHING, and WOUND CARE.

### What should I do?

- <u>DO NOT USE THE TAP WATER---USE ONLY BOTTLED WATER.</u> Bottled water should be used for all drinking (including baby formula), brushing teeth, washing dishes, making ice, food preparation and bathing **until further notice**. Bottled water will be available for pick up in the Cafeteria. (Delivery is not available)
- Drinking water for both Patients and Staff will be available in the Cafeteria. Potable water will be available to support the limited food service.

ICS will inform you when tests show that the water is safe to utilize for consumption. Test results are expected to be available by 5/18/2024.

Please share this information with all GIMC staff and patients who receive this water, especially those who may not have received this notice directly. Thank you for your patience and understanding.

For questions or further information, please contact Infection Prevention & Control: Merriam Abeita (505) 721-8312 or Sharlene Todicheeney (505) 609-7969

# **Proactive Risk Assessment-IPC and Safety**

**Building 2000 and NW Modular Building Legionella Mitigation** 

**Describe the issue:** GSU Incident Management Team continues to inform GSU staff and patients to follow the original water limitation guidelines sent out May 3, 2024 (attached) and not to use the water for drinking, bathing, brushing of the teeth, and for wound care in Building 2000 and NW modular trailers. Post-water valve repair test results submitted early May 2024 returned with Legionella bacteria detected in some locations of the water system.

Remediation for this issue is currently underway. Preventive measures were implemented such as daily flushing of the water system and daily Chlorine testing at 5 varying sites (rotation) for surveillance and monitoring.

GSU priority is to maintain a safe working environment for staff and patients. The objective is to safely return to normal water use as soon as possible. Re-testing of water system, and completing mitigation/maintenance plan.

Test results: Pre and Post Water Testing: 32 sampling points. In 43% of the locations, Legionella was detected prior to the water system repairs and 36% after the repairs and flushing were completed.

Location	Eyewash	Shower	Bottle Filler	Sprayer	Ice Machine
Pre Repair	43%	21%	14%	14%	7%
Post Repair	36%	27%	18%	18%	0%

# Legionella Positive Locations (10): Post Valve Repair

Eyewash: 1N05, GW13, 1S-143A Shower: 2W20, 3S71, 3W20 Bottle Filler: 4W, GR Corridor Water Fountain: 3SW94

Sprayer: 3W23

**Ice Machine:** None (point of water collection was not determined from each ice machine)

### Those involved in the discussion:

Facilities Maintenance/Management: Antonio Anagal-Facility Manager, Benjamin Williams-Facility Maintenance

Supervisor, Hoskie Becenti-Supervisor Utility System Operator, Arthur Moore- Facility Projects Manager

Infection Prevention and Control: Merriam Abeita, IP GIMC Infectious Disease Physician: Dr. Alithea Gabrellas

Safety: Fleurette Brown and Deanna Barber

Leadership: Valarie Tolino-Chief Operations Officer, Dr. Jordan Begay-Deputy CEO

# Any risk or performance improvement (PI) data applicable:

GIMC water system surveillance demonstrates the current mitigation of flushing the water system is effective. The free Chlorine levels are within range (EPA drinking water standard for free chlorine residual is 0.2 mg/L to 2.0 mg/L). Hyper-chlorination or System Disinfection poses more risk and challenge to our current process. Increasing the free Chlorine to significant elevated levels may be readily attained; however, it would be challenging to bring the free Chlorine levels back down to the appropriate parameters. Aggressive hyper-chlorination activities, have risk of harm to the patients or staff who may inadvertently turn on the water. For patient and staff safety, hospital services would be

interrupted and closed. The alternative Disinfection System (Sani-kill) involves the installation of an automatic Chlorine injector. The custom made unit would provide intermittent treatment to the water system over extended periods of time. This involves the use of toxic chemical disinfectants that pose contact and inhalation risks. There would be issues of safe storage of the unit in the facility. Due to the age of our water system, both of the latter aggressive processes may corrode the seals in the current water pipes.

# Any Sentinel Event Alerts applicable:

No positive Legionnaires disease to date.

# Education of all staff on preventive measures:

- Notification to all GSU staff regarding Legionella detection via Incident Command communication, daily patient safety huddles, Public Service Announcements (PSAs) and posted situational awareness material.
- 2. "Background on Legionella" Training and Education to all GSU Staff via a computer based HealthStream module. The training was made available 6/7/2024 with a due date for completion on 6/14/2024.

# Mitigation Measures:

# Daily Chlorine Surveillance: Spreadsheets

Continue to conduct daily Chlorine testing and surveillance, mitigation in the event that the Chlorine is out of range.

# Water System Component Maintenance: (faucets, ice machine, bottle fillers/water fountains, eyewash stations, showers and sprayers)

- 1. Conduct flushing of potable water outlets
- 2. Conduct Filter changes per Manufacturer's Instruction for Use (IFU)
- 3. Perform demineralization of fixtures including aerators
- 4. Maintain Hot Water temperature to inhibit legionella growth (140°F and above)
- 5. Maintain Air Changes per Hour (ACH) in restrooms to avoid aerosol generated legionella
- 6. Maintain documentation logs (here)
  - Preventive Maintenance Schedules
  - Chlorine Surveillance Records
  - Completed work orders



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# Facility Maintenance/Utility System Operator Training:

- 1. Standard Operating Procedures for Chlorine Testing
  - a. Training, education and competencies, list of staff who can perform the task- completed 6/7/2024
  - b. DR300 Hach Pocket Chlorimeter Kit for GIMC Training and Competencies.
  - c. Schedule to conduct the testing with targeted approach, map out sample areas (identify key areas of focus based on assessment)
- 2. Training and Education, competency for ACH

# GSU Water Management Plan

- 1. GIMC water system drawings, assess for dead legs, areas that may have low water use (stagnant water potential) and pipes that may have corrosion.
- 2. Provide the most recent plumbing drawings.
- 3. Drinking water component assessment
- 4. Water Infection Control Risk Assessment completion
- 5. Standard Operating Procedures; Legionella detection (including re-test frequencies), Chlorine testing and component maintenance requirements

# Recommendation:

# Multidisciplinary Approach to Flushing the system:

- 1. Develop department flush-time protocols with timeframes for flushing in inpatient rooms, outpatient clinics, patient care areas, non-patient care areas-timeframe, non-occupied areas.
- 2. Involve participation from all staff to engage in flushing activates.

# Research contract services for water system maintenance:

- 1. To do the flushing, cleaning and disinfection of the shower heads, sink faucets, sprayers, eyewashes, bottle fillers/water fountains.
- 2. To continue free chlorine residual testing and documentation.

## References:

*TJC EC.02.05.01* Eps 6 and 14 address the need for the organization to minimize pathogenic biological agents in the cooling towers, domestic hot-and cold-water systems, and other aerosol producing water systems. This process includes a risk assessment, water management plan, and testing protocols with acceptable ranges to address the need for oversight and implementation of the water management program, including but not limited to, development, management; and maintenance activities. This includes basic diagram that maps water supply sources, treatment systems, processing steps, control measures, and end-use points. The water risk management plan is based on the information in the diagram and includes an evaluation of the physical and chemical conditions of each step of the water flow diagram. It is required for an annual review of the water management program, indicate any changes that may have occurred,

## TJC EC.02.05.02 EP2:

- 1. Basic diagram that maps all water supply sources, treatment systems, processing steps, control measures, and end-use points. (Flow-chart showing sinks, showers, water fountains/bottle fillers, ice machines, sprayers, etc.)
- 2. Water Infection Control Risk Assessment (WICRA)
- 3. A plan to address the use of areas in the buildings where water may have low usage or stagnant.
- 4. Identify the population of patients who are considered immunocompromised
- 5. Monitoring of water temperature, residual disinfectant, and pH. Parameters measured, the locations where the measurements are made, and corrective action taken when the parameters are out of range.

# TJC EC.02.05.02, EP3:

- 1. Documenting results of all monitoring activities (surveillance)
- 2. Corrective actions and procedures to follow if a test result is outside of acceptable limits, including

when a probable or confirmed waterborne pathogen(s) indicates action.

3. Documenting corrective actions taken when the control limits are not maintained.

# TJC EC 02.05.02. EP4:

- 1. Document changes made to the water system that would add additional risk. This includes renovations, changing use of a space, commissioning of a new wing or building.
- 2. Monitor new equipment or at-risk water system(s) that could generate aerosols or be a potential source for Legionella and assure that they have been added to the surveillance listing of equipment. Follow Manufacturer's instructions for use.

CDC toolkit: Controlling Legionella in common sources of exposure U.S. EPA Drinking Water Standards

Conclusion: Water systems in healthcare facilities have a complex network of water lines and due to changes in use of space, opportunities for Legionella growth is a potential. This includes areas of water stagnation, exposure to plumbing materials, especially in an aged building; and there is variability in temperature, pH and disinfectant types and levels. GIMC has to utilize a pump to help water reach the 3<sup>rd</sup> and 4<sup>th</sup> floor of the hospital. In addition, GIMC has gone through the COVID Pandemic in which areas of the facility were not utilized; demonstrating low water usage in those areas of the facility. Changes in the use of space to support non-patient care services, office space or patient care took place over the years. These conditions can promote the development of biofilms and opportunistic pathogens such as Legionella. In healthcare settings, exposure to the water in the environment of care can place patients and staff at risk for infection from waterborne pathogens. The key to preventing Legionnaire's disease is ongoing maintenance of the water system to prevent Legionella growth. Please note that the 2024 detectable amounts of Legionella were lower in comparison to those in 2017. In review of the test results that were processed in the laboratory and the daily Chlorine surveillance, indicate that flushing is effective and prove to be the safest mitigation measure in comparison to the chemical water treatment options. The other mitigation measures described above are currently taking place.

**Communication plan:** RA will be shared with all key stakeholders and Leadership (ELT, Quality Management Director/Risk Management, Safety, IPC, Facilities Maintenance/Utility System Operators/Space Committee.

Time frame for reassessment, if applicable:	Date(s): TE	BD				
Responsible for follow-up, if applicable:	Person(s): Antonio Anagal, Facilities Maintenance Manager, Benjamin Williams-Facility Maintenance Supervisor.					
Route form to the risk manager/QI: Jacob Manche, Quality Management Director/ Risk Management	<b>Date</b> : 6/4/2024	Person(s): Merriam Abeita, IP Fleurette Brown-Safety Deanna Barber-Safety				

Date	Tes	t Site	Results in mg/L Cl2	Pass / Fail	Mitigation
	IW18	Q:52PM	.96	PAS5	
	ed cost	1:57 PM	-57	PASS	
MAN 5,2000					
		EPA pa	rameters: 0.20 -2.	.0 mg/L Cl2	

Mitigation Performed:	
Comments: -	
Technician: B Will	

Date	Test	Sita	Results in mg/l	Pass / Fail	Adlatonation
Date					Mitigation
nm/6	2555	11:37AVV	1.16	ALSS	
	2029	11:38 Apr	1.61	P485	
	35 NURS. STA	~ 11:43Am	1.21	PASS	
	3W26	11:48 Am	1.23	PA-55	
	35W103	11:53A1	1.18	1455	
		EPA pa	rameters: 0.20 -	2.0 mg/L Cl2	

Mitigation Performed:	
Comments: -	
Technician: B WWL	

Date	Test Site	Results in mg/L Cl2	Pass / Fail	Mitigation
	64.7	.90	PASS	
	6,648	.77	PASS	
1.2	1\$147	. 95	1485	
5/9/21	ZE 39	.92	PASS	
11/2024	3840	1.10	PASS	
	EPA	parameters: 0.20 -2.0	mg/L Cl2	

Mitigation Performed	d:		 _
Comments: -			
			_
Technician: B_	- wel		

		Results in mg/L		
Date	Test Site	CI2	Pass / Fail	Mitigation
\$18	4E35A 12.369	110	PASS	
	1660 12:411M		DASS	
	2545 12:48/M	.52	PA55	
	3E52 12:53 IM	1.16	PASS	
	48 56 12:58PM		PASS	
	EPA po	arameters: 0.20 -2.	0 mg/L Cl2	

Mitigation Performed:	 	
Comments: -		
Tachalaina R Will		

			Results in mg/		
Date	Test	Site	Cl2	Pass / Fail	Mitigation
	18243	1125 AM	1.13	PASS	
	21409	11:22 Am	1.09	PASS	
1,	3WIO	11:29 AM	1.18	PASS	
5/9/201	356 70	1/33 And	149	PASS	
1/0814	5002 SINK	11:41 Am	1.15	PASS	
			ameters: 0.20 -		

Mitigation Per	formed:			
Comments: -				
(,	D. 0	- 0		

Technician:

			Results in mg/l	L	
Date	Tes	t Site	Cl2	Pass / Fail	Mitigation
	15137	1:09 PM	.21	PASS	
	2051	1:19PM	.90	PASS	
5/10	35673	1:27001	1.18	PASS	
	4588	1:37 PM	1.03	PASS	
	1W14	1:481M	1.12	P455	
		EPA pa	rameters: 0.20 -		

Mitigation Peri	ormed:			
Comments: -				
	D-L	- 0		-

Technician:

Date	Test Site	Results in mg/L Cl2	Pass / Fail	Mitigation
	15139 1:15PM	.67	PASS	
	2554 1:23PM	. 49	PASS	
/ .	35880 1:70PM	,90	PASS	
5/11/2-1	45 NRS SE 1:36PM	1.02	1455	
4.112024	6554 1:461M	1.04	P455	
	EPA p	arameters: 0.20 -2.	0 mg/L Cl2	

Mitigation P	erformed:		
Comments: -	-		
Tochnicion	agh		

		Results in mg/	L	
Date	Test Site	Cl2	Pass / Fail	Mitigation
5/12/2024	6W11	-54	1055	
	1597	.82	PASS	
	2W19	-63	PASS	
	3039	1.17	PASS	
	4659	1.15	PASS	2
	EPA	parameters: 0.20		

Mitigation Performed:	
Comments: -	
Technician: Bull	

Date	Test Site	Results in mg/I	Pass / Fail	Mitigation
May	I West 15 1:2	1.12	Pass	
	2-138 2:29	0.98	Pass	
13)	3west 27 2:41	(,11	Pass	
2024	2W45+23 2:48	1.12	Pass	
0-0	18ast 224 2:51	6 0.39	PASS	
	EPA ;	parameters: 0.20 -	2.0 mg/L Cl2	

Mitigation Performed:	
Community	
Comments: -	
Technician: Recard	

		Results in mg/L		
Date	Test Site	Cl2	Pass / Fail	Mitigation
May	1904th 145 1109	0.86	PASS	
	2 enot 59 1:13	1.01	PASS	
14,	3eas7 57 1:19	1.00	PASS	
2024	4 South 70 1;24	1.04	PASS	
2021	4eas+43 1:28	0.36	PASS	
	EPA pai	rameters: 0.20 -2.0	0 mg/L Cl2	

Mitigation Performed:		
Comments: -		
		 <del></del>

Technician: Roll S

			Results in mg/	L	
Date	Test	Site	Cl2	Pass / Fail	Mitigation
	6834	1:11 PM	.69	RASS	
5/15/2021	151324	1:1790	.98	AASS	
	2054	1:24 Am	,80	PASS	
	3632	1:73PM	.37	PASS	
	4637	1:41 Pm	1.02	PASS	
	N 1180 180	EPA pa	rameters: 0.20 -	2.0 mg/L Cl2	

Mitigation Performed:	 	
Comments: -		
Tachnician P - WW		

		Results in mg/L		
Date	Test Site	Cl2	Pass / Fail	Mitigation
	Kitchen Sink 2:24	0.85	P455	
05-16-2024	3 E-43 2:34	0.88	Pass	
1	4 W- 08 2:41	0.62	Pass	
	48-45 2:47	0.81	Pags	
	4E CSR 2:53	0.89	Pass	
	EPA pa	rameters: 0.20 -2.0	0 mg/L Cl2	

Mitigation Per	formed:		54.55.77 <u>= 1</u> 1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57 (1.57
Comments: -			
Technician:	Kyle Little		

			Results in mg/		
Date	Te	st Site	Cl2	Pass / Fail	Mitigation
	6W17	2:42 PM	,70	P455	
	1W23	2:51PM	.53	PASS	
5/-1	15229	3:05PM	,26	P455	
5/11/2024	25867	3:10/M	.56	PASS	
, ,	35W99	3:17 PM	181	PASS	
		EPA pa	rameters: 0.20 -	2.0 mg/L Cl2	

Mitigation Perform	ned:	 	
Comments: -			
Technician: Z	4100		

			Results in mg/	L	
Date	Te	st Site	Cl2	Pass / Fail	Mitigation
	6N15	11:21 April	.16	FAIL	465
	/W25	11:36 Am	.47	PASS	
101	2542	11:42AM	.47	1485	
7/18/1014	25667	61:46 AM	-42	PASS	
	356 43	11:53 Au	.62	1485	
		ЕРА ра	rameters: 0.20 -	2.0 mg/L Cl2	

RAM.	ion Performed:	5 MINURS	BUT TEST	NOW DOOK	6w14@.	36 mg/L	
Comme	ents: -						
Technic	cian: Z	WILL					

Date	Test Site	Results in mg/L Cl2	Pass / Fail	Mitigation
2024	1W-24	0.66	Pass	
	1E-239	0.83	Park	
05.19-2024	ZW-25	0.95	P233	
	15E-72	1.35	Pa45	
	45-73	0.87	Pass	
	EPA	parameters: 0,20 -2,0	THE RESERVE THE PARTY NAMED IN	

Mitigation Per	formed:	 	
Comments: -			
Technician	Kile Witte		

			Results in mg/L		
Date	Tes	t Site	Cl2	Pass / Fail	Mitigation
,	1667	3:04 PM	.42	PAS	
	18216	3:14PM	.4/	PASS	
5/20	2039	3:25 PM	.8/	PASS	
120	3W25	3:32 PM	.99	PASS	
	4W08	3:43 PM	.36	PASS	
		EPA pa	rameters: 0.20 -2.		

Mitigation Performed	<b>d:</b>		
Comments: -			
D	//		

Technician: B Will

		Results in mg/L		
Date	Test Site	Cl2	Pass / Fail	Mitigation
5/4	6N20 2:36PM	.50	PASS	
	Ketcher SINK 2:410M	.99	PASS	
	ER 6AY 2:491M	.84	P485	
	2W27 2:50 Pm		PASS	
	3W17 3:06 PM	.97	PA85	
	EPA pai	rameters: 0.20 -2.	0 mg/L Cl2	

Mitigation P	erformed	d:		 	 
Comments:	_				
	$\mathcal{P}$	6)//	,		

Technician:

		Results in mg/L					
Date	Test Site	CI2	Pass / Fail	Mitigation			
May	GWest 15 2:02	0.37					
1 1	930wth 2:08	1.03					
22,	Trailer 12m2 2:17	0.99					
2024	East annex Merts 2126	0.93					
201	2504theas+64 2:32						
	EPA parameters: 0.20 -2.0 mg/L Cl2						

Mitigation Performed:	
Comments: -	
Technician: Relation	

		Results in mg/L		
Date	Test Site	Cl2	Pass / Fail	Mitigation
May	18ast248 2106	1.07	Pass	
,	Trailer 2   Rm2 2:15	1.04	PAS	
23,	2 south 105 2:25	1.00	PASS	
2024	4 east 58 2131	1.12	PASS	
2021	Bbb 5002 2:42	1.12	PASS	
	EPA par	rameters: 0.20 -2.	0 mg/L Cl2	

Mitigation Performed:	
Comments: -	
Technician: Quality De	

			Results in mg/L		
Date	Tes	t Site	Cl2	Pass / Fail	Mitigation
	1W21	5:08PM	.93	PA55	
	25E 65	5:01 PM	1.06	P155	
11	25069	5112 PM	.80	PASS	
3/24/2024	35541	5119PM	1.15	PK39	
101/201	3549	5:22 PM	1.15	PAST	
		EPA pa	rameters: 0.20 -2	.0 mg/L Cl2	

Mitigation Performed:	
Comments: -	
Technician: B Will	

Date	Test	Site	Results in mg/L Cl2	Pass / Fail	Mitigation
	1W-18	3:18	0.76	Pass	
65-25-2024	1 E-127	3:25	0.87	Pass	
	18-98	3:31	0.65	Pars	
	1 E-233	3:34	0.24	Puss	
	2E-41	3:46	0.66	Pass	
	***************************************	EPA p	arameters: 0.20 -2.0	All Parts	

Mitigation Pe	rformed:	 	
Comments: -			
Technician:	Kyle Little		

		Results in mg/L		
Date	Test Site	Cl2	Pass / Fail	Mitigation
	2W-22 3:53	0.89	Pass	
05-25.2024	25-107 3:58	0.77	Pass	
	38-42 4:05	1.01	Pass	
	35E-71 4:12	0,96	Pass	
	35W-78A 4:21	1.14	Puss	
	ЕРА ра	rameters: 0.20 -2		

Mitigation Per	formed:	 	
Comments: -			
Technician:	Kyle little		

Date	Test S	ite	Results in mg/L Cl2	Pass / Fail	Mitigation
	46-57	4:28	0.82	pays	
05.25-2024	45-75	4:34	1. 14	Pe55	
		EPA pa	rameters: 0.20 -2.0	mg/L Cl2	

Mitigation Pe	rformed:	
Comments: -		e e
Technician: _	Kyle Little	

Date	Test Si	te	Results in mg/L Cl2	Pass / Fail	Mitigation +imes
100.	I West DH	2:59	0.19	Fail	Drains for 5 miles
may	ING + DS	3:01	0.23	Pass	0 - 20
261	15-132 H	3:05	0.78	PASS	
00026	ISE: ER	3:10	0.95	PASS	
2024	15139	3:13	0.91	Pars	
		EPA pa	rameters: 0.20 -2.	0 mg/L Cl2	*

Mitigation Performed: Racin Water	
Comments: -	
Technician:	

Date	Test Site	Results in mg/L Cl2	Pass / Fail	Mitigation
	1E-99 2:04	0.91	Pass	
05-27-2024	1E - 226 2:11	0.34	Pass	
	15-132 Bay 1 2:18	1.27	Pass	
	15-147 Room Z 2124	0.78	Pass	
	ZW-12 2:35	0.88	Pres	
	EPA pa	rameters: 0.20 -2.0	mg/L Cl2	

Mitigation Per	formed:		-		
Comments: -					
					_
Technician:	Kyle	little			

Date	Test Si	te	Results in mg/L Cl2	Pass / Fail	Mitigation
	3E-55 A	2:45	1.11	Paris	
- 1	35W-101	2:54	1.19	17259	
05-27-2024	45-84	3105	1.19	Pass	
0 7	45-90	3410	0.77	Pass	
		EPA no	rameters: 0.20 -2	0 mg/l Cl2	

Mitigation Per	formed:	 	
Comments: -			
Technician:	Kyle little		

Date	Test	Site	Results in mg/L Cl2	Pass / Fail	Mitigation
	1E231	1533	0.56	PASS	
5/28/24	2543	1549	0.89	PASS	
	35E78	1553	1,07	PASS	
	4584	1599	1.06	PASS	
	100000	DOM	6500	8000	
		EPA po	arameters: 0.20 -2.0	0 mg/L Ci2	

Mitigation Performed:	 	
Comments: -		
Technician:		

			Results in mg/I		
Date	Test S	ite	Cl2	Pass / Fail	Mitigation
	6W13	1114	0.66	PHSS	
5/30/24	1N05	1121	0.80	144	
	Trailer 4	1191	0.93	PHS	
	ZE38	1147	1.06	PHSS	
	41-100	1192	1.05	PASS	
		EPA po	rameters: 0.20 -	2.0 mg/L Cl2	

Mitigation Performed	:	 	
Comments: -			
Technician:	ing L		

			Results in mg/	L	
Date	Test	Site	Cl2	Pass / Fail	Mitigation
	6964	1420	1.13	P144	
	1697	1425	0,89	PMSS	
5/31/24	25666	1491	0.99	PASS	
	39673	1441	1.16	PH49	
	4986	1448	0.13	PAIL	Flush
	1000000	EPA pa	rameters: 0.20 -	2.0 mg/L Cl2	

Mitigation Performed:	FUN 5 mins.	1450-1455	
Comments: -			
Technician:	7L	_	

Data	T. 100	Results in mg/L	2 (2 !!	
Date	Test Site	Cl2	Pass / Fail	Mitigation
	14238	0.73	PIASS	
04/01/24	2W27	0.68	PA45	
	3W15	1.03	PASS	
,,,,	4450	0.89	PAGS	
	6E34	0.78	PHYS	
	EPA	parameters: 0.20 -2.0	mg/L Cl2	

Mitigation Performed:				
Comments:	-			
Tochnicion	so-IL			

Date	Test Site	Results in mg/L Cl2	Pass / Fail	Mitigation
	6561	1.08	PASS	
	1w12	0.63	PASS	
06/02/24	25/05	0.93	PAG	
	3599	0.43	PASS	
	4009	0.88	PASS	
	EPA	parameters: 0.20 -2.	0 mg/L Cl2	

Mitigation Performed:			
Comments: -			
Technician:	2		

Date	Test Site	Results in mg/L Cl2	Pass / Fail	Mitigation
06/03/24	6963	0.74	Pot45	
	ERIS	0.35	PASS	
	25/07	0.97	DASS	
1. 1	35670	1.01	PASS	
	4988	1.07	PHSS	
	EPA	parameters: 0.20 -2.0	0 mg/L Cl2	

Mitigation Performed:			
Comments: -			
Tachnician All			

		Results in mg/L		
Date	Test Site	CI2	Pass / Fail	Mitigation
	6W13(SWL)	0.98	MASS	
06/04/24	(E230	0.2le	PASS	
	25664	1.01	PASS	
,	35W (feeding RM)	1.27	PASS	
	4850	1.20	PASS	
	EPA ;	parameters: 0.20 -2.	.0 mg/L Cl2	

Mitigation Performed:	Mitigation Performed:			
Comments: -				
Technician:	-JL			

Date	Test Site	Results in mg/L Cl2	Pass / Fail	Mitigation
luna	GW HSKPG 1:15	0.48	Pass	
June	1East 210 2:13	0:48	Oass	
05,	2 East 73 2143	0.58	Pass	
2024	2 East 40 2148	8,98	Pass	
2001	3 Wes+26 3:03	1.21	Pass	
	ЕРА ра	rameters: 0.20 -2	.0 mg/L Cl2	

Mitigation Performed:	
Comments: -	
Technician: Quality J	

Date	Test Site	Results in mg/L Cl2	Pass / Fail	Mitigation
June 7, 2024	Trailer #1 RM2	0.95	Pass	
	2East 49	0.85	Pass	
	3 East 47	1.10	Pass	
	4 South 93	1.04	Pass	
	4 30WH 84	1.17	Pass	
	EPA po	arameters: 0.20 -2.	0 mg/L Cl2	

Technician: Ben Bates, Strallie, Kyle L, Rod Tso,

			Results in mg	/L	
Date	Test:	Site	Cl2	Pass / Fail	Mitigation
June 3, 2024	BMH	10139	0.39	PASS	
	15 135A	11:08	0.76	Pass	
	2W25	11:33	0.65	Pass	
	3E 52	#1153	1.24	Pass	
	4009	£1:56	0-93	Pass	
			rameters: 0.20	-2.0 mg/L Cl2	

Mitigation Performed:		
Comments: -		

Technician:

_			Results in mg/L	I' I	
Date	Test Si	te	Cl2	Pass / Fail	Mitigation
June	Gwest 16	10:24	0.49	Pass	
	18ast 97	15:36	0.92	Pass	
9,	29E64	11:11	0-41	Pass	
2024	4570	1140	0.58	PASS	
	4863	1:45	0.62	Pass	
		EPA pa	rameters: 0.20 -2	.0 mg/L Ci2	

Mitigation Performed:			
Comments: -			
Rod 2			

Date	Test S	ite	Results in mg/ Cl2	Pass / Fail	Mitigation
June	15146A	1:20	0.93	Pass	
	OPT. RX	1:25	1.07	Tag	
101	2W17	1:39	0.83	Pass	
2024	26/57	1:41	0.39	Pacc	
700	B3W2399	1:52	1.09	Pass	
		EPA pa	rameters: 0.20 -	2.0 mg/L Cl2	

Mitigation Performed:		
Comments: -		
Technician:		

#### U.S. Department of Labor

Occupational Safety and Health Administration El Paso Area Office 4849 North Mesa, Suite 200 El Paso, TX 79912



June 6, 2024

Jacob Manche Gallup Indian Medical Center P. O Box 1337 Gallup, NM 87301

RE: OSHA Complaint No. 2170741

Dear Employer:

On Jun 6, 2024, the Occupational Safety and Health Administration (OSHA) received a notice of alleged workplace hazard(s) at your worksite at:

514 E. Nizhoni Blvd Gallup, NM 87301

A representative of your company was notified, by telephone, of alleged hazards on June 6, 2024. The specific nature of the alleged hazards are as follows:

Legionella found in water; water has not been adequately supplied to staff.

OSHA has not determined whether the hazards, as alleged, exist at your workplace and we do not intend to conduct an inspection at this time. However, since allegations of violations and/or hazards have been made, you are requested to immediately investigate the alleged conditions and make any necessary corrections or modifications. Please advise me in writing, no later than June 13, 2024, of the results of your investigation. You must provide supporting documentation of your findings, including any applicable measurements or monitoring results, and photographs/video which you believe would be helpful, as well as a description of any corrective action you have taken or are in the process of taking, including documentation of the corrected condition. Please submit your documentation electronically to oshaelpaso@dol.gov.

This letter is not a citation or a notification of proposed penalty which, according to the Occupational Safety and Health Act, may be issued only after an inspection or investigation of the workplace. It is our goal to assure that hazards are promptly identified and eliminated. Please take immediate corrective action where needed. If we do not receive a response from you by June 13, 2024, indicating that appropriate action has been taken or that no hazard exists and why, an OSHA inspection will be conducted. An inspection may include a review of the following: injury and illness records, hazard communication, personal protective equipment.

emergency action or response, bloodborne pathogens, confined space entry, lockout, and related safety and health issues.

Please note, however, that OSHA selects for inspection some cases where we have received letters in which employers have indicated satisfactory corrective action. This is to ensure that employers have actually taken the action stated in their letters.

If you need assistance to help resolve the issues of this complaint, the State of New Mexico offers OSHA consultation services, without charge, to assist in resolving all occupational safety and health issues. The variety of services available of the scheduling of those services may be limited by the consultation project's requirement to give priority to small business in high hazard industries and by its backlog. However, you may be able to obtain similar services from your insurance carrier or private consultant in a more timely fashion. To discuss or request their services, call or write your consultation project at the following address:

#### **OSHA** Consultation

New Mexico State Occupational Health and Safety Bureau (OHSB) Consultation Program
525 Camino De Los Marquez Suite 3

Santa Fe, NM 87505 Phone: 505-476-8700 1-877-610-6742

Website: https://www.env.nm.gov/occupational health safety/consultation-program/

You are requested to **post a copy of this letter and your response** where it will be readily accessible for review by all of your employees and return a copy of the signed Certificate of Posting (Attachment A) to this office. In addition, you are requested to provide a copy of this letter and your response to it to a representative of any recognized employee union or safety committee if these are at your facility. Failure to do this may result in an on-site inspection. The complainant has been furnished a copy of this letter and will be advised of your response. Section 11(c) of the Occupational Safety and Health Act provides protection for employees against discrimination because of their involvement in protected safety and health activity.

If you have any questions regarding this matter, please contact the Area Office at the address in the letterhead. Your personal support and interest in the safety and health of your employees is appreciated.

Sincerely,

Diego Alvarado Jr.

Area Director

#### CERTIFICATE OF POSTING OSHA NOTIFICATION OF ALLEGED HAZARD(S)

Date of Posting: June 13, 2024
Date Copy Given to an Employee Representative: June 10, 2024
On behalf of the employer, I certify that a copy of the complaint letter received from the Occupational Safety and Health Administration (OSHA) has been posted in a conspicuous place, where all affected employees will have notice, or near such location where the violation occurred, and such notice has been given to each authorized representative of affective employees, if any. This notice was or will be posted for a minimum of ten (10) days or until any hazardous conditions found are corrected.
Jacob Manche Name Signature
Quality Management Chief Title
If Applicable:
Union Representative/Committee Name, Title, Local #
Union Address

Employer Name: Gallup Indian Medical Center

Complaint Number: 2170741

#### U.S. Department of Labor

Occupational Safety and Health Administration El Paso Area Office 4849 North Mesa, Suite 200 El Paso, TX 79912



June 10, 2024

Pamela Detsoi-smiley Gallop Indian Medical Center 516 E Nizhoni Blvd Gallup, NM 87301

RE: OSHA Complaint No. 2171813

#### Dear Employer:

On Jun 10, 2024, the Occupational Safety and Health Administration (OSHA) received a notice of alleged workplace hazard(s) at your worksite at:

516 E Nizhoni Blvd Gallup, NM 87301

A representative of your company was notified, by telephone, of alleged hazards on June 10, 2024. The specific nature of the alleged hazards are as follows:

- 1. Legionella Found in Water, water has not been adequately supplied to patients and staff. Staff are having to buy ice for patients and specimen collection.
- 2. Patients are being bathed upstairs in this water containing the bacteria Hospital Wide This condition exposes employees to health hazards.

OSHA has not determined whether the hazards, as alleged, exist at your workplace and we do not intend to conduct an inspection at this time. However, since allegations of violations and/or hazards have been made, you are requested to immediately investigate the alleged conditions and make any necessary corrections or modifications. Please advise me in writing, no later than June 17, 2024 of the results of your investigation. You must provide supporting documentation of your findings, including any applicable measurements or monitoring results, and photographs/video which you believe would be helpful, as well as a description of any corrective action you have taken or are in the process of taking, including documentation of the corrected condition. Please submit your documentation electronically to oshaelpaso@dol.gov.

This letter is not a citation or a notification of proposed penalty which, according to the Occupational Safety and Health Act, may be issued only after an inspection or investigation of the workplace. It is our goal to assure that hazards are promptly identified and eliminated. Please take immediate corrective action where needed. If we do not receive a response from you by June 17, 2024, indicating that appropriate action has been taken or that no hazard exists and

why, an OSHA inspection will be conducted. An inspection may include a review of the following: injury and illness records, hazard communication, personal protective equipment, emergency action or response, bloodborne pathogens, confined space entry, lockout, and related safety and health issues.

Please note, however, that OSHA selects for inspection some cases where we have received letters in which employers have indicated satisfactory corrective action. This is to ensure that employers have actually taken the action stated in their letters.

If you need assistance to help resolve the issues of this complaint, the State of New Mexico offers OSHA consultation services, without charge, to assist in resolving all occupational safety and health issues. The variety of services available of the scheduling of those services may be limited by the consultation project's requirement to give priority to small business in high hazard industries and by its backlog. However, you may be able to obtain similar services from your insurance carrier or private consultant in a more timely fashion. To discuss or request their services, call or write your consultation project at the following address:

#### **OSHA** Consultation

New Mexico State Occupational Health and Safety Bureau (OHSB) Consultation Program 525 Camino De Los Marquez Suite 3

Santa Fe, NM 87505 Phone: 505-476-8700 1-877-610-6742

Website: https://www.env.nm.gov/occupational health safety/consultation-program/

You are requested to **post a copy of this letter and your response** where it will be readily accessible for review by all of your employees and return a copy of the signed Certificate of Posting (Attachment A) to this office. In addition, you are requested to provide a copy of this letter and your response to it to a representative of any recognized employee union or safety committee if these are at your facility. Failure to do this may result in an on-site inspection. The complainant has been furnished a copy of this letter and will be advised of your response. Section 11(c) of the Occupational Safety and Health Act provides protection for employees against discrimination because of their involvement in protected safety and health activity.

If you have any questions regarding this matter, please contact the Area Office at the address in the letterhead. Your personal support and interest in the safety and health of your employees is appreciated.

Sincerely,

Diego Alvarado Jr.

Area Director

# CERTIFICATE OF POSTING OSHA NOTIFICATION OF ALLEGED HAZARD(S)

Complaint Number: 2171813

Date of Posting: June 13, 2024

Employer Name: Gallop Indian Medical Center

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Date Copy Given to an Employee Representative: June 10, 2024

On behalf of the employer, I certify that a copy of the complaint letter received from the Occupational Safety and Health Administration (OSHA) has been posted in a conspicuous place, where all affected employees will have notice, or near such location where the violation occurred, and such notice has been given to each authorized representative of affective employees, if any. This notice was or will be posted for a minimum of ten (10) days or until any hazardous conditions found are corrected.

Jacob Manche Name

Quality Management Chief

If Applicable:

Union Representative/Committee Name, Title, Local #

8902N Certral Ave the PHY Az 85020

Union Address

#### **GENERAL MESSAGE (ICS 213)**

1. Incident Name (Optional): Water Valve Repl	acement			
2. To (Name and Position): Maurco Ambrose, Cook Supervisor				
3. From (Name and Position): Shannon Tsosie	, Incident Commander			
4. Subject: Continued Water Restriction		<b>5. Date:</b> 6/4/2024	<b>6. Time</b> 9:10	
7. Message:		•		
The limited water use for Building 2000 will rem water for dietary use for patients and staff in building 2000 will rem		nsure there is en	ough "potable"	
If you have any questions or concerns, please r	eply on this 213. Thank you.			
8. Approved by: Name: Shannon Tsosie	Signature: Shannon Tsosie - S Digitally signed by Shannon Tsosie - S Digitally signed by Shannon Tsosie - S Digitally signed by Shannon Tsosie - Pos	sition/Title: Incide	nt Commander	
9. Reply:				
10. Replied by: Name:	1	ignature:		
ICS 213	Date/Time:			

#### **ICS 213**

#### **General Message**

**Purpose.** The General Message (ICS 213) is used by the incident dispatchers to record incoming messages that cannot be orally transmitted to the intended recipients. The ICS 213 is also used by the Incident Command Post and other incident personnel to transmit messages (e.g., resource order, incident name change, other ICS coordination issues, etc.) to the Incident Communications Center for transmission via radio or telephone to the addressee. This form is used to send any message or notification to incident personnel that requires hard-copy delivery.

Preparation. The ICS 213 may be initiated by incident dispatchers and any other personnel on an incident.

**Distribution.** Upon completion, the ICS 213 may be delivered to the addressee and/or delivered to the Incident Communication Center for transmission.

#### Notes:

- The ICS 213 is a three-part form, typically using carbon paper. The sender will complete Part 1 of the form and send Parts 2 and 3 to the recipient. The recipient will complete Part 2 and return Part 3 to the sender.
- A copy of the ICS 213 should be sent to and maintained within the Documentation Unit.
- Contact information for the sender and receiver can be added for communications purposes to confirm resource orders. Refer to 213RR example (Appendix B)

Block Number	Block Title	Instructions
1	Incident Name (Optional)	Enter the name assigned to the incident. This block is optional.
2	To (Name and Position)	Enter the name and position the General Message is intended for. For all individuals, use at least the first initial and last name. For Unified Command, include agency names.
3	From (Name and Position)	Enter the name and position of the individual sending the General Message. For all individuals, use at least the first initial and last name. For Unified Command, include agency names.
4	Subject	Enter the subject of the message.
5	Date	Enter the date (month/day/year) of the message.
6	Time	Enter the time (using the 24-hour clock) of the message.
7	Message	Enter the content of the message. Try to be as concise as possible.
8	<ul><li>Approved by</li><li>Name</li><li>Signature</li><li>Position/Title</li></ul>	Enter the name, signature, and ICS position/title of the person approving the message.
9	Reply	The intended recipient will enter a reply to the message and return it to the originator.
10	Replied by  Name Position/Title Signature Date/Time	Enter the name, ICS position/title, and signature of the person replying to the message. Enter date (month/day/year) and time prepared (24-hour clock).



#### PUBLIC HEALTH SERVICE INDIAN HEALTH SERVICE

Navajo Area Indian Health Service GALLUP INDIAN MEDICAL CENTER 516 Bast Nizhoni Boulevard P.O. Box 1337 Gallup, New Mexico 87301-1337

Date: June 12, 2024

Pamela J. Detsoi-

Digitally signed by Pamela J. Detsoi-smiley -S

From: smiley -S

Date: 2024.06.13 14:51:41 -06'00'

CDR Pamela Detsoi-Smiley

Chief Executive Officer
Gallup Service Unit

Navajo Area Indian Health Service

To: Occupational Safety and Health Administration

ATTN: Diego Alvarado Jr.

U.S. Department of Labor - OSHA Region 6

El Paso Area Office

4849 North Mesa, Suite 200

El Paso, TX 79912

RE: OSHA Complaint No. 2170741 / 2171813

This is a response to allegations of hazardous workplace environment at the Gallup Indian Medical Center, 516 E. Nizhoni Blvd, Gallup NM 87301.

1. <u>Legionella found in water, water has not been adequately supplied to patients and staff. Staff are having to buy ice for patients and specimen collection.</u>

The building at the aforementioned address had to replace broken water valves, which was completed on May 3, 2024. The post water valve repair test results were received on May 24, 2024 and had positive findings of Legionella bacteria. See APPENDIX A.

The hospital's priority has been to maintain a safe environment for staff, patients, and visitors. Thus prior to the commencement of the main water valve replacements, all in-patient services were stopped and patients were transferred to other service unit facilities except ancillary services and the Emergency Department.

Bottled water/ice has been supplied to staff, patients and visitors at no cost (free) from the cafeteria, before and after the repair work project.

However, management received complaints of bottled water/ice quantity restrictions to departments by the cafeteria. Management intervened and reiterated to the cafeteria to not limit nor restrict the amount of bottled water/ice given to staff and patients. This is reiterated at the daily patient safety huddle and weekly nurse supervisors' meetings about the bottled water/ice availability and limited restriction of tap water usage by staff and patients.

2. Patients are being bathed upstairs in this water containing the bacteria – Hospital wide. This condition exposes employees to health hazards.

After the replacement of the water valves, the hospital returned to normal business operations on May 4, 2024. However, bottled water and ice were continuously supplied for staff and patients use.

The limited tap water restriction states that "Due to the recent Water Valve Replacement Project and hospital water shut off event, staff and patients are NOT TO USE THE TAP WATER FOR DRINKING, COOKING, BATHING, and WOUND CARE." See APPENDIX B.

This is reiterated at the daily patient safety huddle and weekly nurse supervisors' meetings about the bottled water/ice availability and limited restriction of tap water usage by staff and patients. For showering and bathing, the nursing division provided comfort bath wipes for patients. The hospital is performing daily flushing and chlorine residual testing while we waiting for the second laboratory test results.

- 3. Legionella Mitigation Risk Assessment, APPENDIX C.
- 4. Potable water supply to staff and patients, APPENDIX D.
- 5. Daily Chlorine residual test results, APPENDIX E and F.