

NEW YORK

\$7,087,691

Funding for AR Activities
Fiscal Year 2016



AR Lab for the Northeast Region

One of 10 sites for the Emerging Infections Program

FUNDING TO STATE HEALTH DEPARTMENTS



\$1,854,385

AR LABORATORY NETWORK (ARLN) REGIONAL LABS provide information to protect communities by rapidly identifying and describing new resistance genes and mechanisms.

The ARLN establishes nationwide lab infrastructure by boosting state and local capacity and technology to detect, support response to, and contain AR threats—and create new innovations to detect AR. New York is one of seven ARLN regional labs supporting the larger network.



\$949,835

(Includes funding to
New York City)

HAI/AR DETECT & RESPOND PROGRAMS quickly detect and then contain the spread of resistant infections, protecting patients from new resistance threats.

CDC and states are working together to scale up programs and HAI prevention infrastructure to identify, contain, and prevent HAIs, including those infections caused by antibiotic-resistant bacteria. Programs will use data for local response. All states and five major cities/territories will receive support and lab capacity to track and stop the "nightmare bacteria," carbapenem-resistant Enterobacteriaceae (CRE).



\$866,135

HAI/AR PREVENTION PROGRAMS work with partners to prevent infection and contain spread of germs between patients and healthcare facilities, and increase antibiotic stewardship education, to protect patients.

With state HAI/AR prevention programs, CDC will implement more empowered prevention networks—where public health and healthcare work together—to better prevent infections, contain spread, and improve antibiotic use. Of the factors contributing to antibiotic resistance, the most important one we can change is inappropriate antibiotic use. CDC works to improve antibiotic use by increasing education and awareness of the importance of antibiotic use among providers and the public.



\$651,512

(Includes funding to New York City)

FOOD SAFETY projects protect communities by rapidly identifying drug-resistant foodborne bacteria to stop and solve outbreaks and improve prevention.

To improve food safety, CDC works to rapidly identify and respond to drug-resistant foodborne bacteria and outbreaks by using whole genome sequencing and increasing lab testing of pathogens like *Salmonella* and *Campylobacter*. CDC promotes responsible antibiotic use in food-producing animals.



\$765,995

(Includes funding to New York City)

GONORRHEA RAPID DETECTION & RESPONSE works with state and local partners to be ready to stop the spread of resistant gonorrhea in high risk communities.

Gonorrhea is resistant to most antibiotics and only one treatment option remains. CDC is developing local and state health department epidemiological and laboratory capacity to more rapidly detect and effectively respond to antibiotic-resistant gonorrhea.



\$1,127,834

EMERGING INFECTIONS PROGRAM (EIP) sites improve public health by translating population-based surveillance and research activities into informed policy and public health practice.

CDC's EIP network is a national resource for surveillance, prevention, and control of emerging infectious diseases—like antibiotic-resistant infections. Learn more: www.cdc.gov/ncezid/dpei/eip.

FUNDING TO UNIVERSITIES & HEALTHCARE PARTNERS



\$500,000

CORNELL UNIVERSITY: Microbiome Assessment & Intervention

To understand the acquisition of antibiotic resistance genes in Leukemia patients and what role the microbiome is playing.



\$371,995

COLUMBIA UNIVERSITY: Innovative Prevention & Tracking

To conduct a national study to determine the barriers of nursing homes to tracking *C. difficile* and multidrug-resistant organisms (MDROs) using CDC's National Healthcare Safety Network (NHSN), and what resources are needed to overcome these barriers.