

Clinical Laboratory Update

Sexually Transmitted Infections

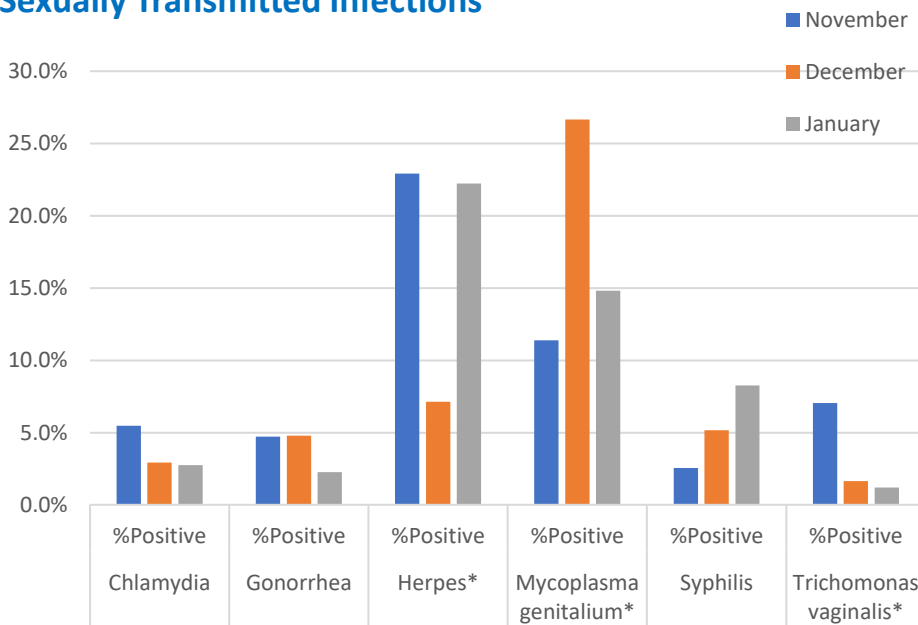


Figure 1: Percent positivity for specimens screened using molecular or serological assays for the given organism.

*Not reportable as per WI DHS 145.04 (3) (a)

Syphilis Surveillance

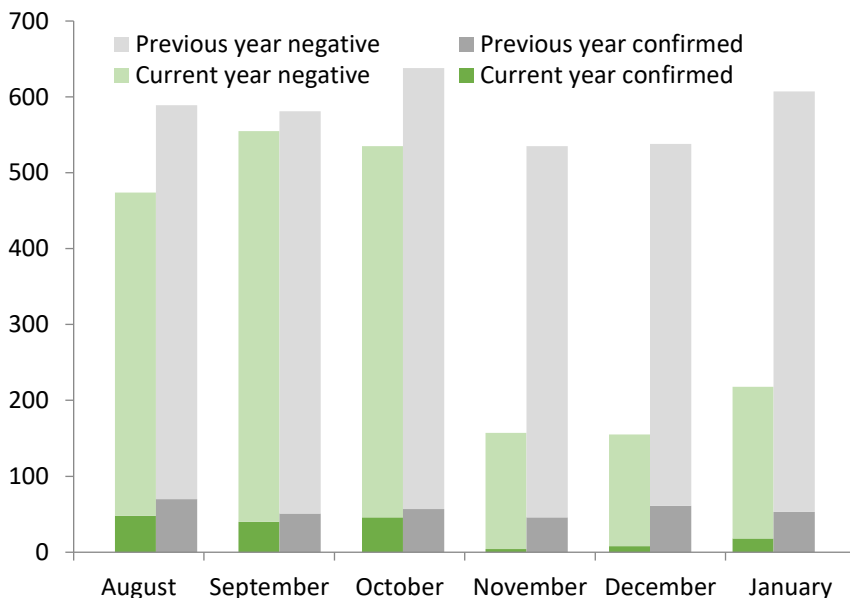


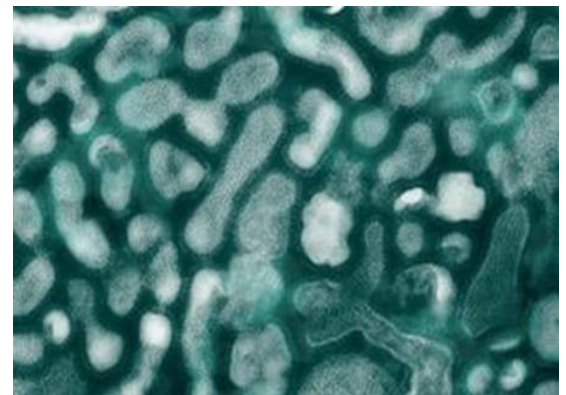
Figure 2: Monthly comparison of syphilis data with year over year comparisons.

Number of specimens screened at MHD, darker bars represent confirmed tests.

National Influenza Surveillance Program

MDHL participates in the National influenza surveillance program which ultimately leads CDC researchers to recommend the best strains to use in the next flu season (that is, the southern hemisphere's flu season). Lab technicians screen respiratory samples submitted from various clients for influenza and follow up any positive Flu A or Flu B by further subtyping its Hemoglobin (H1 or H3 most commonly for Flu A) and Neuraminidase (N1 or N2 for Flu A) protein subtypes. Selected positives are then sent on to a national regional lab for further investigation.

Many surveillance labs around the nation and world participate together to identify thousands of influenza illnesses and further characterize the strains for vaccine coverage and compatibility.



Links to related information & data:

[MHD COVID-19 Situation](#)

[WSLH Laboratory Surveillance Report](#)

[WI SARS-CoV-2 Genomic Dashboard:](#)

<https://dataportal.slh.wisc.edu/>

<https://city.milwaukee.gov/CovidVax>

CDC COVID-19 Data Tracker:

<https://www.cdc.gov/coronavirus/2019-ncov/covid-data/covidview/index.html>

New HIV Infections

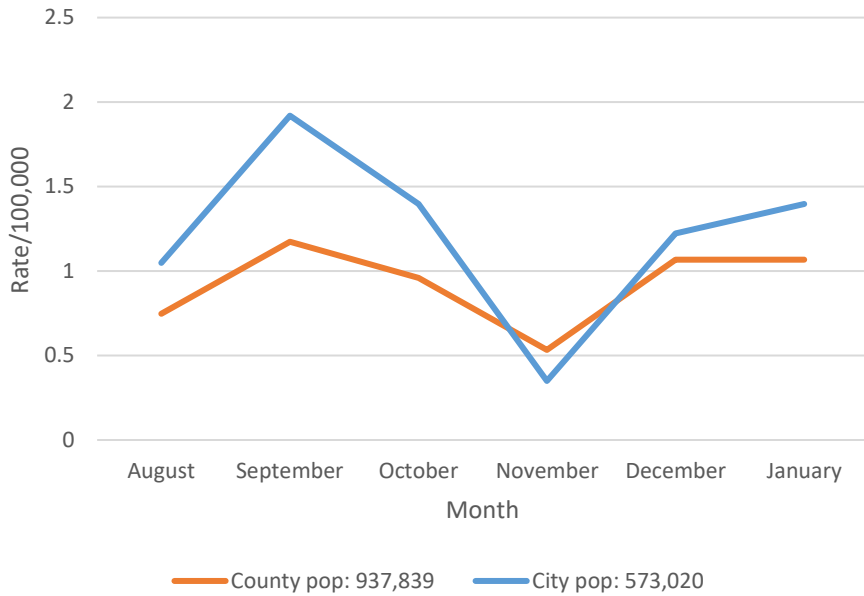


Figure 3: Monthly comparison of rate of new HIV infections in Milwaukee County and the City of Milwaukee, using data obtained from the Wisconsin Department of Health Services. Numbers are provisional and subject to change. Population figures taken from 2020 census results.

For statewide HIV data, visit:

<https://www.dhs.wisconsin.gov/hiv/data.htm>

Sexually Transmitted Infections by Source

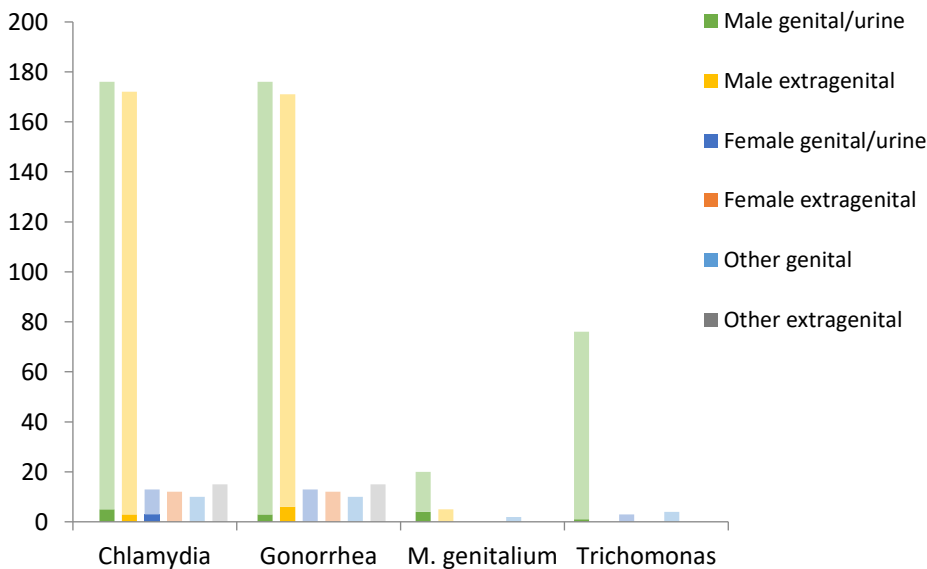


Figure 4: Distribution of STIs detected using NAAT. In January 2026, 2.3% of male, 12% of female and 0% of other gender specimens screened were positive for Chlamydia. 2.6% of male, 0% of female and 0% of other gender specimens were positive for Gonorrhea. 16% of male, 0% female and 0% of other gender specimens were positive for *M. genitalium*. 1.3% of male specimens, 0% of female and 0% of the other gender specimens were positive for *Trichomonas*.

Note: Darker bars indicate positive specimens.

Gonorrhea Antimicrobial Susceptibility Testing

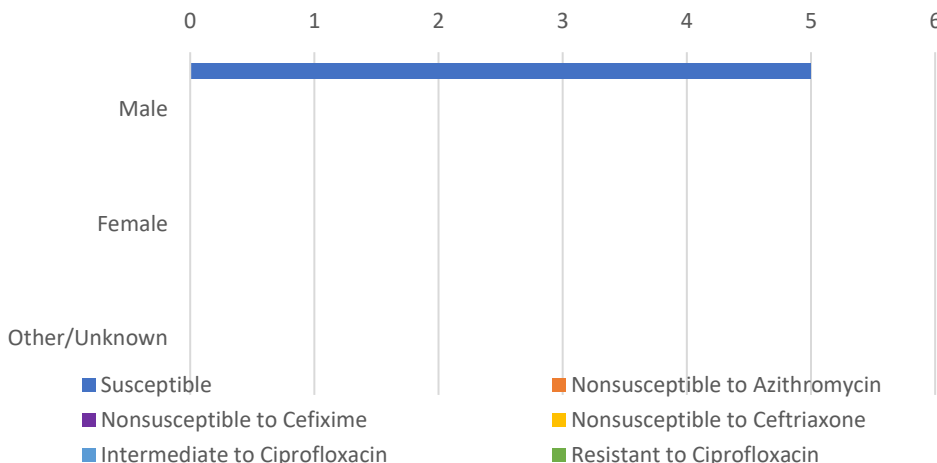


Figure 5: Antibiotic susceptibility profile of Gonorrhea isolates identified in males and females. In January 2026, 0 of 5 cultures tested were found to be resistant to Ciprofloxacin according to CLSI guidelines. MHDL tests for antibiotic resistance to Ceftriaxone, Cefixime and Ciprofloxacin, and Azithromycin on request.

Viral Surveillance

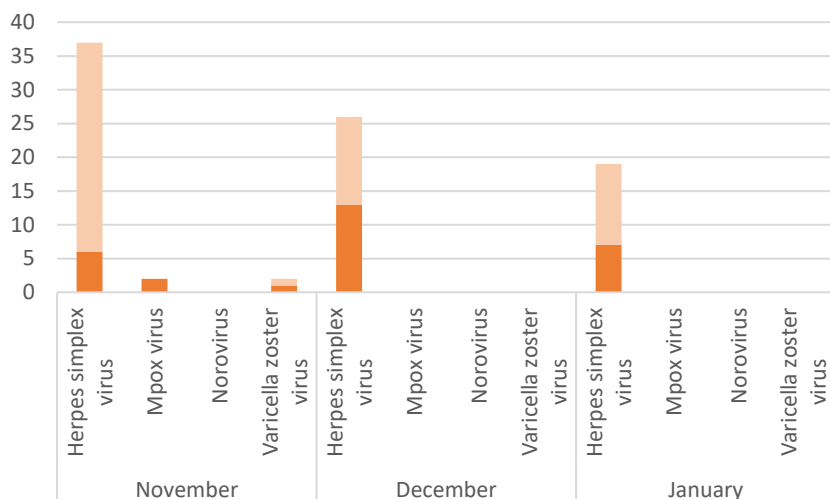


Figure 6: Specimens tested using molecular methods.

Note: Height of bar indicates number of specimens tested.

Dark orange bars indicate DNA/RNA detected by real-time PCR and/or nucleotide sequencing analysis, blue indicates inconclusive results.

Respiratory Infections

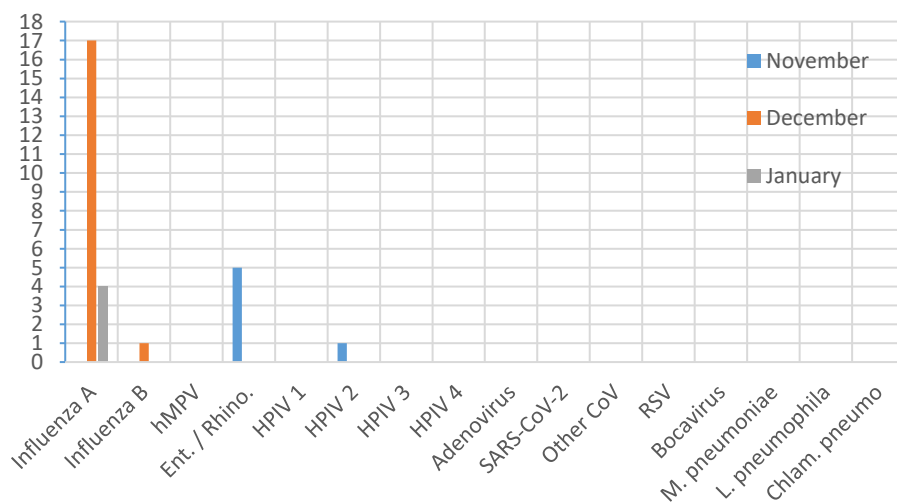


Figure 7: Respiratory pathogens detected using a Respiratory Pathogen Panel (RPP) and/or RT-PCR Influenza and Covid-19 assays.