



# Georgia

## \$17,536,406

Funding for AR Activities  
Fiscal Year 2024

CDC Prevention Epicenter

One of 10 sites for the Emerging  
Infections Program

## Funding to Health Departments



\$69,844

**AR Laboratory Network:** Labs detect, support response to, and prevent the spread of AR threats across the nation—and inform innovations to detect AR.

CDC's AR Lab Network provides nationwide lab capacity to detect AR and inform local prevention and response activities to stop the spread of antimicrobial-resistant germs and protect people. Collaboration from the local to national levels results in more rapid response for detecting AR and closes the gap between local capabilities and the data needed to combat AR in the United States.

Learn more: [www.cdc.gov/antimicrobial-resistance-laboratory-networks/php/about/domestic.html](http://www.cdc.gov/antimicrobial-resistance-laboratory-networks/php/about/domestic.html)



\$259,564

**Fighting AR in Health Care:** State, territory, and local public health partners prevent HAIs, support rapid detection and response, and improve antibiotic use.

CDC-funded HAI/AR Programs form a network of health departments that prevent, respond to, and contain HAI/AR threats and promote appropriate use of antibiotics. HAI/AR programs protect patients and healthcare personnel, improve healthcare safety and quality, and use data-driven prevention strategies to combat AR threats in health care.

Learn more: [www.cdc.gov/healthcare-associated-infections/programs/index.html](http://www.cdc.gov/healthcare-associated-infections/programs/index.html)



\$586,972

**Food Safety Projects** protect communities by rapidly identifying antimicrobial-resistant foodborne bacteria to stop and solve outbreaks and improve prevention.

Georgia uses whole genome sequencing to track local outbreaks of *Salmonella*, *Campylobacter*, *Shigella*, and *Escherichia coli*, identifies AR genes, and shares surveillance data with PulseNet. When outbreaks are detected, local CDC-supported epidemiologists respond to stop their spread. Georgia conducts active, population-based surveillance for foodborne diseases through CDC's Emerging Infections Program.

Learn more: [www.cdc.gov/food-safety/foods/antimicrobial-resistance.html](http://www.cdc.gov/food-safety/foods/antimicrobial-resistance.html)

The AR Investment Map includes data from CDC's largest funding categories for AR. It represents fiscal year 2024 extramural funding that supports AR activities from multiple funding lines in CDC's annual appropriations. Some work received full or partial funding from one-time supplemental appropriations.

**AR:** antimicrobial resistance

**HAI:** healthcare-associated infection

**IPC:** infection prevention and control

**NHSN:** National Healthcare Safety Network

**STI:** sexually transmitted infection

CDC provides critical support to protect people from antimicrobial resistance.

[ARinvestments.cdc.gov](http://ARinvestments.cdc.gov)





\$3,580,109

**The Emerging Infections Program (EIP) HAI Component** helps answer critical questions about emerging HAI threats, advanced infection tracking methods, and AR in the United States.

The Georgia EIP performs population-based surveillance for *Clostridioides difficile*, invasive *Staphylococcus aureus*, nontuberculous mycobacteria, and resistant gram-negative bacteria. They also conduct HAI and antimicrobial use prevalence surveys and surveillance for invasive *Escherichia coli* infections to support vaccine evaluation.

Learn more: [www.cdc.gov/healthcare-associated-infections/php/haic-eip/index.html](http://www.cdc.gov/healthcare-associated-infections/php/haic-eip/index.html)



\$75,000

**The Emerging Infections Program (EIP) sites** improve public health by translating population-based surveillance and research activities into informed policy and public health practice.

Active Bacterial Core surveillance (ABCs) is an active laboratory- and population-based surveillance system for invasive bacterial pathogens of public health importance. ABCs provides infrastructure for further public health research, which may include special studies to identify disease risk factors, evaluate vaccine efficacy, and monitor the effectiveness of infection prevention policies.

Learn more: [www.cdc.gov/abcs](http://www.cdc.gov/abcs)

## Funding to Universities & Healthcare Partners



\$843,844

**Emory University: CDC Prevention Epicenter**

The Prevention Epicenters Program is a collaborative network of public health and healthcare experts that responds to HAI and AR research priorities to protect patients. The network conducts research to support the translation of innovative IPC strategies for preventing HAIs, stopping the spread of AR, and preventing other adverse events in all healthcare settings.

Learn more: [www.cdc.gov/healthcare-associated-infections/php/prevention-epicenters/index.html](http://www.cdc.gov/healthcare-associated-infections/php/prevention-epicenters/index.html)



\$6,179,401

**ABT Associates, Inc.: Discovering & Implementing What Works**

Investigators have established a nursing home network with pre-positioned study staff and readily available lab capacity to perform data collection without impacting clinical care. This network rapidly characterizes infectious diseases, particularly emerging pathogens and SARS-CoV-2 variants of concern, to inform IPC in nursing homes. Funding supports network sites in Georgia, Maryland, Michigan, Ohio, Oregon, Pennsylvania, Rhode Island, and Wisconsin.

Learn more: [www.cdc.gov/healthcare-associated-infections/php/research/shepherd.html](http://www.cdc.gov/healthcare-associated-infections/php/research/shepherd.html)



\$114,893

**Emory University: Innovative Prevention & Tracking**

An Emory University expert provides technical assistance to improve diagnosis and management of hospitalized patients, in support of CDC's sepsis prevention efforts.



\$70,554

**Emory University: Innovative Prevention & Tracking**

An Emory University expert works with CDC investigators to provide technical assistance to NHSN on patient outcomes, measurement of HAIs, and other complications in the neonatal patient population. Additionally, experts identify opportunities to enhance IPC and antibiotic stewardship in the practice of neonatology.

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**\$112,861**

### **Emory University: Innovative Prevention & Tracking**

Two Emory University experts work with CDC investigators to provide critical clinical nephrology expertise to inform the development of new quality metrics, outcome measures, surveillance definitions and protocols.



**\$80,154**

### **Emory University: Innovative Prevention & Tracking**

Three Emory University experts work with CDC investigators, providing immediate cardiology and echocardiography expertise and skills to support NHSN's accelerating transition to automated methods, including natural language processing-aided case finding.



**\$109,115**

### **Emory University: Innovative Prevention & Tracking**

An Emory University expert works with CDC investigators to provide technical assistance to NHSN on surveillance of surgical site infections (SSIs), many of which are due to antimicrobial-resistant pathogens, and collaborative efforts with surgical professional organizations to harmonize and strengthen SSI tracking for clinical and public health purposes.



**\$222,782**

### **Emory University: Innovative Prevention & Tracking**

An Emory University expert works with CDC investigators to provide technical assistance to NHSN on the development of new measures of HAI and AR, with the goal of enabling electronic health record systems and laboratory information systems to serve as source systems for the new measures. This will provide new insights into HAIs and AR in health care while streamlining reporting to NHSN.



**\$102,025**

### **Emory University: Innovative Prevention & Tracking**

An Emory University expert works with CDC investigators to provide technical assistance to NHSN on the use of health information technology, including electronic health record systems, and medical informatics strategies and solutions for streamlining reporting to NHSN .



**\$139,288**

### **Organization for Safety, Asepsis, and Prevention (Dental Infection Prevention and Safety Association): Innovative Prevention & Tracking**

Experts support dissemination of educational resources about appropriate antibiotic use to dental health professionals.



**\$800,000**

### **Council of State and Territorial Epidemiologists: Innovative Prevention & Tracking**

Experts strengthen the capacity of health department HAI/AR Programs to detect, prevent, and respond to outbreaks in healthcare facilities.

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**\$4,190,000**

### **Emory University: Innovative Prevention & Tracking**

CDC's Project Firstline is a collaborative of partners that provides innovative and effective IPC training for U.S. healthcare workers and the public health workforce. It offers resources in a variety of formats to meet the diverse learning needs and preferences of those working to ensure safe care in healthcare settings. Partners host events, create tools, and publish resources to help frontline healthcare workers better understand and apply IPC correctly. This work was partially supported by emergency supplemental funding.

Learn more: [www.cdc.gov/project-firstline/index.html](http://www.cdc.gov/project-firstline/index.html)

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