

STATE OF NORTH CAROLINA
COUNTY OF WAKE

IN THE GENERAL COURT OF JUSTICE
SUPERIOR COURT DIVISION
20 CVS 5035

NORTH CAROLINA STATE CONFERENCE)
OF THE NAACP, et al.,)

Plaintiffs,)

v.)

NORTH CAROLINA STATE BOARD OF)
ELECTIONS, et al.,)

Defendants,)

**AFFIDAVIT OF DR. DAVID J.
WEBER**

I, Dr. David J. Weber, do hereby under oath say the following:

1. I am of legal age and competent provide this affidavit. All the information herein is based on my own personal knowledge unless otherwise indicated.

2. My background, qualifications, and professional affiliations are set forth in my curriculum vitae, which is attached as Exhibit A.

3. In the context of this affidavit, I use several acronyms, as follows: US Centers for Disease Control and Prevention (CDC); Society for Healthcare Epidemiology of America (SHEA); University of North Carolina at Chapel Hill (UNC); World Health Organization (WHO). A list of specific references for the information included in this affidavit is attached as Exhibit B.

SUMMARY OF CONCLUSIONS

4. In my expert opinion and based on my expertise in assessing the impact of COVID-19 on public health, the risk of transmitting COVID imposed by voting in person at polling places where the use of electronic ballot-marking devices is required is far greater than the risk imposed by voting at places where most voters are casting hand-marked paper ballots.

5. I reach this conclusion for several reasons. First, many voters and poll workers are repeatedly touching the electronic voting machines. Even with vigorous disinfection, the electronic voting machines will have more microbes than individual paper ballots, which are

particular to each voter. Second, someone has to prepare the electronic voting machine to program the ballot for each voter. This interaction requires lengthier and closer interactions between the voter and the poll worker than exchanging paper ballots. COVID-19 is a distance-related disease; the longer time and closer the distance to an infected individual, the higher the risk of transmission. Third, the repeated disinfecting before and after each voter, as well as the time necessary to program the ballot, will lead to each voter waiting a longer period of time before he or she can begin filling out her ballot. Because COVID-19 is an aerosol spread disease, the longer the voter is in the polling place, the greater the risk of infection.

6. The measures described in the North Carolina State Board of Elections memorandum and the ES&S “best practices for disinfecting” document do not adequately reduce the risk of substantial transmission of COVID-19 when voting in person on ExpressVote voting machines at a polling place. Even if poll workers have hand wipes or have disinfectant spray on hand, people may not use it, and officials may not always follow with an environmental disinfectant.

7. The consensus of public health experts is that there will be a second wave of COVID-19 in Fall 2020, if not sooner. COVID-19 is not over and the situation is going to get worse from a public health perspective.

8. North Carolina election officials and poll workers have no public health expertise and their opinions about they propose undertaking for future elections, such as allowing voters to enter polling places without masks, are not consistent with basic and accepted principles of public health as recommended by the CDC and WHO. Yet, failing to take appropriate measures at polling places affects the health of voters, poll workers and election officials, and the entire community.

QUALIFICATIONS

9. I am a physician, having received my medical degree from the University of California, San Diego, in 1977. I am licensed to practice in North Carolina. I am currently a Professor of Medicine and Pediatrics in the UNC School of Medicine. I have been a faculty member of these Departments since 1985.

10. I received my Master’s in Public Health from Harvard University in 1985. I am a Professor in the Department of Epidemiology, University of North Carolina Gillings School of Global Public Health. I have been a faculty member of the Department of Epidemiology since 1985.

11. I have served as the Medical Director of the Department of Hospital Epidemiology (Infection Prevention), UNC Hospitals since 1985. Our Department consists of ~20 persons including multiple infection prevention nurses, a laboratory technologist, a public health epidemiologist, 2 quality improvement experts, 1 auditor, and 1 PhD epidemiologist/environmental scientist.

12. I have published approximately 440 scientific papers cited in PubMed, the great majority of which are in the field of healthcare-associated infections

13. I am an Associate Editor of Infection Control Hospital Epidemiology, the official journal of the Society for Healthcare Epidemiology of America.

14. I am a Fellow of SHEA. I have served on many committees of SHEA including the SHEA Board, Awards Committee (chair), Publications Committee, Annual Planning Committee, and Guidelines Committee. I am currently the Secretary of the SHEA Board.

15. I am a fellow of IDSA. I have served on several committee of IDSA including the Annual Planning Committee and Guidelines Committee.

16. I have served on multiple working groups of the Advisory Committee on Immunization Practices (ACIP), Centers for Disease Control and Prevention (CDC) in the recent past.

17. I have authored multiple guidelines for the Centers for Disease Control and Prevention and the Society of Healthcare Epidemiologists of America on the following subjects: Sterilization and Disinfection, 2008 (CDC); Influenza Vaccine for Healthcare Personnel (SHEA); Management of the HIV, HBV, or HCV Infected Healthcare Provider (SHEA); Sterilization and Disinfection of Prion Contaminated Medical Instruments (SHEA); Infection Control Guidelines for Persons with Cystic Fibrosis (CF Foundation), Prevention of *Clostridium difficile* Infections (SHEA), Management of Animals in Hospitals (SHEA); and Visitors in the Hospital (SHEA). Pending co-authored guidelines include: a revision of the Management of the HIV, HBV, or HCV Infected Healthcare Provider (SHEA), and revision of the Guideline on Sterilization and Disinfection (co-lead).

18. I was a visiting scientist at the National Institutes of Health (NIH) in 1992-1993 (HIV Epidemiology and Vaccine Branch, National Institute of Allergy and Infectious Diseases). I have served as a guest lecturer in the field of epidemiology and/or infectious diseases in the past 5 years for the Governments of Saudi Arabia, Germany, and Hong Kong.

19. I serve as the Chair of the North Carolina Department of Health's Tuberculosis Advisory Committee.

20. I have twice received the annual publication award of the American Journal of Infection Control for the most cited paper in the journal during the calendar year.

21. I received the 2018 Senior Scholar Award from SHEA. I am the 2014 recipient of the Greenberg Award, UNC Gillings School of Global Public Health.

22. I have authored multiple papers on coronaviruses, including SARS-CoV-2.

23. I am deeply involved on COVID-19 preparedness and mitigation for the UNC Medical Center and UNC Health. I serve as an advisor on COVID-19 preparedness and mitigation to the Chancellor of UNC-CH and the President of the UNC College/University system.

24. I am an advisor to the WHO and served on the working group that developed the WHO's Guidance on Cleaning and Disinfection of Surfaces during the COVID-19 pandemic. I serve as an advisor on COVID-19 preparedness and mitigation to the Lt General commanding the XVIII Airborne Corps at Fort Bragg (~90, soldiers under this command)

25. I Chair the UNC Institutional Review Board's Special COVID-19 Review Committee.

BACKGROUND INFORMATION CONCERNING TRANSMISSION OF COVID-19

26. Coronaviruses are single-stranded, linear, positive-sense RNA, enveloped viruses. Four endemic coronaviruses cause respiratory tract infections in humans: 229E, HKU1, NL63 and OC43. Three epidemic coronaviruses have been described; SARS-CoV-1, MERS-CoV, and SARS-CoV-2. All of these coronaviruses likely originated in bats (Menacherv VD, Chen Y, Lee P-I). While intermediate hosts have been noted for SARS-CoV-1 (i.e., palm civet) and MERS-CoV (i.e., dromedary camels), an intermediate host has not been described for SARS-CoV-2.

27. Transmission of SARS-CoV-2 has been well described by the WHO, the CDC, and medical experts (Weber DJ). The major mode of SARS-CoV -2 transmission is by respiratory droplets expelled by infectious persons. The WHO has stated the "Transmission of SARS-CoV-2 can occur through direct, indirect, or close contact with infected people through infected secretions such as saliva and respiratory secretions or their respiratory droplets, which are expelled when an infected person coughs, sneezes, talks or sings." WHO noted that "respiratory droplet transmission occurs when a person is in close contact (within 1 meter) with an infected person who has respiratory symptoms (e.g., coughing or sneezing) or who is talking or singing; in these circumstances, respiratory droplets that include virus can reach the mouth, nose or eye of a susceptible person and can result in infection."

28. The CDC has stated, "COVID-19 is thought to spread mainly through close contact from person-to-person. Some people without symptoms may be able to spread the virus." CDC has listed the main mode of persons-to-person spread of COVID-19 at follows (CDC): 1) Between people who are in close contact with one another (within about 6 feet); the more closely a person interacts with others and the longer that interaction, the higher the risk of COVID-19 spread; 2) Through respiratory droplets produced when an infected person coughs, sneezes, or talks; 3) These droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs; and, 4) COVID-19 may be spread by people who are not showing symptoms.

TRANSMISSION VIA ASYMPTOMATIC OR PRE-SYMPTOMATIC PERSONS

29. Per the WHO, SARS-CoV-2 transmission appears mainly to be spread via droplets and close contact with infected symptomatic cases (WHO). However, transmission may occur from asymptomatic persons. As noted by the WHO, to better understand the role of transmission from infected people without symptoms, it is important to distinguish between transmission from people who are infected who never develop symptoms (asymptomatic transmission) and transmission from people who are infected but have not developed symptoms yet (pre-symptomatic transmission). The WHO had noted that patients infected with SARS-CoV-2 may be asymptomatic, but that the proportion of people whose infection is asymptomatic likely varies

with age due to the increasing prevalence of underlying conditions in older age groups (and thus increasing risk of developing severe disease with increasing age), and studies that show that children are less likely to show clinical symptoms compared to adults (WHO). A recent systematic review estimated that the proportion of truly asymptomatic cases ranges from 6% to 41%, with a pooled estimate of 16% (12%–20%) (Byambasuren O).

30. Per WHO, multiple studies have shown that people infect others before they themselves became ill, which is supported by available viral shedding data (i.e., people may shed viable virus for at least 48 hours before they develop symptoms). One modelling study, that inferred the date of transmission based on the estimated serial interval and incubation period, estimated that up to 44% (25-69%) of transmission might have occurred just before symptoms appeared (He X).

31. Pre-symptomatic transmission of SARS-CoV-2 accounted for 6.4% of locally acquired cases in Singapore from 23 January to 16 March, 2020 (Wei W). Asymptomatic and pre-symptomatic transmission was demonstrated to play an important role in an outbreak in long-term care skilled nursing facility in King County, Washington (Kimball A).

32. Outbreaks of COVID-19 have been reported in indoor crowded spaces including restaurants (Lu J), fitness classes (Jang S), and during choir practice (Hamner L). Attending events at a Church led to a high COVID-19 attack rate (James A). Family gatherings such as attending a funeral or a birthday party have led to COVID-19 clusters (Ghinai I). These outbreaks demonstrate the infectiousness of SARS-CoV-2 and the possibility for transmission at both outside events and indoor congregate activities, such as a polling place where voting is occurring during an election.

SURVIVAL IN AIR AND ON SURFACES

33. Coronaviruses including SARS-CoV-2 may survive on environmental surfaces such as the screen of an electronic voting machine for hours to days (Weber DJ, Kampf G). Importantly, SARS-CoV-2 may survive on paper for at least several hours. Per WHO, experimental studies have generated aerosols of infectious samples using high-powered jet nebulizers under controlled laboratory conditions. These studies found SARS-CoV-2 virus RNA in air samples within aerosols for up to 3 hours in one study (van Doremalen) and 16 hours in another, which also found viable replication-competent virus (Fears AC).

IMPACT OF COVID-19 INFECTIONS

34. As of 12 July 2020, a total of 12,776,232 cases of COVID-19 has been reported worldwide which resulted in 566,036 deaths (Johns Hopkins). In addition to hospitalizations and death, a majority of patients who had had symptomatic COVID-19 suffered from persistent symptoms that may last for months (Carfi A). These include fatigue, shortness of breath, joint pain, and chest pain.

35. As of 12 July 2020, a total of 3,271,549 cases of COVID-19 has been reported in the US, which resulted in 134,904 deaths (Johns Hopkins). The US leads the world in both number of

COVID-19 cases and deaths. In fact, more than 25% of the total cases reported worldwide have occurred in the US and more than 23% of the total number of deaths reported worldwide have occurred in the US.

36. COVID-19 cases in the US rapidly increased between 1 March and 1 April 2020 (Johns Hopkins). The incidence of new cases decreased somewhat between 1 April and mid-June 2020 but remained a high level. Between 1 June and mid-July there has been a dramatic increase in the incidence of COVID-19 in US; there are now more than 50,000 new cases per day. It is likely that the US will continue to have a substantial number of new cases of COVID-19 for months to come as the CDC has estimated that less than 10% of the US population has acquired COVID-19.

37. As of 12 July 2020, NC has reported 85,701 cases and 1,501 deaths (NCDHHS). As of 12 July, 1,070 persons with COVID-19 were hospitalized in NC (NCDHHS). Importantly, every county in NC has reported cases of COVID-19. Cases by counties named in this lawsuit are as follows: Ashe, 63; Buncombe, 865; Burke, 1,206; Cherokee, 66; Davie, 252; Davidson, 1,247; Forsyth, 3,676; Haywood, 127; Henderson, 885; Jackson, 198; Lenoir, 427; Mecklenburg, 15,024; New Hanover, 1,451; Pender, 365; Perquimans, 39; Polk, 99; Rutherford, 383; Transylvania, 48; Surrey, 580; and Warren, 191.

38. As of 12 July, North Carolina continues to have a substantial of new COVID-19 cases each day (Johns Hopkins).

DISADVANTAGED GROUPS

39. The CDC states, “Long-standing systemic health and social inequities have put some members of racial and ethnic minority groups at increased risk of getting COVID-19 or experiencing severe illness, regardless of age. Among some racial and ethnic minority groups, including non-Hispanic black persons, Hispanics and Latinos, and American Indians/Alaska Natives, evidence points to higher rates of hospitalization or death from COVID-19 than among non-Hispanic white persons.

40. As of June 12, 2020, age-adjusted hospitalization rates are highest among non-Hispanic American Indian or Alaska Native and non-Hispanic black persons, followed by Hispanic or Latino persons” (CDC-COVID in Racial/Ethnic Minority Groups). CDC noted that that “non-Hispanic black persons have a rate approximately 5 times that of non-Hispanic white persons” and “Hispanic or Latino persons have a rate approximately 4 times that of non-Hispanic white persons” (CDC-COVID in Racial/Ethnic Minority Groups).

41. An analysis of 1,320,488 laboratory-confirmed COVID-19 cases individually reported to CDC during January 22–May 30, 2020, revealed that among cases with known race and ethnicity, 33% of persons were Hispanic, 22% were black, and 1.3% were Asian (Stokes EK). Per CDC, these findings suggest that persons in these groups, who account for 18%, 13%, and 0.7% of the U.S. population, respectively, are disproportionately affected by the COVID-19 pandemic (Stokes EK).

42. A study of race/ethnicity of adult patients with COVID-treated at an urban safety/net hospital revealed that hospitalized patients were likely to be Hispanic or to be experiencing homelessness; overall the cohort comprised 44.6% non-Hispanic black patients and 30.1% Hispanic or Latino (Hispanic patients) (Hsu HE).

43. Not only do Hispanic and Black individuals have a higher risk of acquiring COVID-19, but they also have a higher risk of hospitalization if infected. A study in Atlanta Georgia that used multivariable analysis reported the following characteristics were independently associated with hospitalization: age ≥ 65 years (adjusted odds ratio [aOR] = 3.4), *black race* (aOR = 3.2), having diabetes mellitus (aOR = 3.1), lack of insurance (aOR = 2.8), male sex (aOR = 2.4), smoking (aOR = 2.3), and obesity (aOR = 1.9) (Killerb ME).

44. The North Carolina State Board of Elections' memorandum does not indicate that officials are making special accommodations for older and medically-vulnerable populations. These individuals are at the greatest risk of suffering severe complications from COVID-19. In addition, they are more likely to experience more symptoms, such as coughing and running nose. These symptoms contribute to excess viral shedding, which contributes to greater contagion in a congregate setting like a polling place.

45. Per the NC Department of Health and Human Service COVID-19 Response webpage, Black or African Americans accounted for 24% of cases of COVID-19. Hispanics accounted for 44% of cases of COVID-19.

MITIGATION OF COVID-19: RECOMMENDATIONS TO PREVENT TRANSMISSION

46. Per the NC Department of Health and Human Services COVID-19 response webpage the following actions should be undertaken by people: Practice the 3Ws (wear a cloth covering over the nose and mouth, wait 6 feet, wash your hands) and encourage friends and family do the same (NCDHHS).

47. The CDC has the following recommendations for the public to avoid COVID-19 infections: 1) Avoid close contact outside your home; put 6 feet of distance between yourself and people who don't live in your household; 2) Cover your mouth and nose with a cloth face cover when around others; everyone should wear a cloth face cover in public settings and when around people who don't live in your household, especially when other social distancing measures are difficult to maintain; 3) Wash your hands often with soap and water for at least 20 seconds especially after you have been in a public place, or after blowing your nose, coughing, or sneezing; and, 4) Clean AND disinfect frequently touched surfaces daily (e.g., tables, doorknobs, light switches, countertops, handles, desks, phones, keyboards, toilets, faucets, and sinks) (CDC).

48. To prevent transmission, WHO recommends a comprehensive set of measures that include the following statement: "At all times, practice frequent hand hygiene, physical distancing from others when possible, and respiratory etiquette; avoid crowded places, close-contact settings and confined and enclosed spaces with poor ventilation; wear fabric masks when

in closed, overcrowded spaces to protect others; and ensure good environmental ventilation in all closed settings and appropriate environmental cleaning and disinfection” (WHO).

49. SARS-CoV-2 is inactivated by waterless ethanol based handrubs (60-90% alcohol) and can be removed from the hands by soap and water washing. EPA surface disinfectants with an emerging virus claim may be used to disinfect contaminated surfaces. UV devices and hydrogen peroxide systems may also be used for surface disinfection but since persons cannot be exposed to the UV rays or the hydrogen peroxide they are useful only for disinfection at the end of the day when persons are not in the room. Importantly, there is no scientific evidence to suggest that use of plexiglass partitions (unless they completely enclose a space) are protective. Similarly, other barrier methods such as partitions or curtains have not been demonstrated to prevent COVID-19 transmission.

50. As noted above, any congregate facility/activity placed persons at risk of acquiring SARS-CoV-2. Attendants at a voting location likely will NOT be able to practice physical distancing (i.e., remaining >6 feet apart) since in person voting requires waiting on line, checking in, verification of name and place of residence, and use of a voting machine or paper ballot. Further, it is highly unlikely that 100% of persons attending a voting location will be appropriately wearing a mask.

51. Use of a voting machine requires a person to touch a screen or a button. Any hand contact with a surface may lead to acquisition of COVID-29 if the previous person was infected (even if asymptomatic) unless the entire touchable surface was appropriately disinfected. Thus, use of any touchable surface requires per CDC guidance appropriate disinfection plus appropriate hand hygiene between each use. Paper ballots likely present a lower risk than a voting machine because SARS-CoV-2 survives for a shorter length of time on paper than on plastic, metal, or other solid surfaces, and because paper ballots are not touched by multiple persons. However, any election staff handling such ballots must either perform hand hygiene prior to touching the ballot or wear gloves.

THE EXPRESSVOTE DISINFECTING PROCESS IS LENGTHY AND CREATES RISK

52. ES&S has published guidelines for disinfecting its equipment, which I have reviewed. Its voting systems have a number of surfaces that will require disinfecting, including touch screens, ADA peripherals, input trays, ballot boxes, and external surfaces of the equipment.

53. Many common cleaners cannot be used on the ExpressVote. In its guidance, ES&S warned against using “full-strength, harsh detergents, liquid cleaners, aerosols, abrasive pads, scouring powders, or solvents.”

54. According to ES&S's instructions, to disinfect the ExpressVote, a trained poll worker must have access to a “soft, lint-free cloth with isopropyl alcohol (70%),” an “ES&S Touch Screen Cleaning Kit,” or “Alcohol wipes; especially, Super Sani-Cloth (2 min contact time required) and Incides N (30 second contact time but instruction say “wipe surface, let it dry”).”

55. ES&S's instructions contain warnings that limit how workers may disinfect the machines, including warnings to not scratch the screen, not to use common disinfectant sprays, not to apply liquid cleaner to the unit, and not to "soak the cloth with solution."

56. Disinfect the ExpressVote correctly will take a substantial amount of time, and it is not a simple endeavor to properly disinfect all of the ExpressVote components.

57. If the poll worker uses the wrong disinfectant, accidentally touches a button during disinfection, or does not disinfect the ExpressVote according to the vendor's instructions, the machine could break or malfunction.

58. If the machine is not disinfected after each person casts a ballot, the coronavirus-and other viruses and bacteria-will remain on the touch screen, keypad, and other surfaces.

59. If poll workers disinfect each ExpressVote after every voter uses it, particularly at the necessary level of care recommended by ES&S, that risks causing voters to have to wait at polling places before beginning to complete their ballot, particularly where those machines are mandatory and being used in high turnout elections. Longer wait times, in turn, voters having to stand near poll workers or in clusters inside the polling place, thereby increasing the risk of airborne transmission of COVID-19.

CONCLUSIONS AND RISK TO PERSONS VOTING INPERSON AT A POLLING LOCATION

60. COVID-19 is caused by a novel coronavirus, SARS-CoV-2

61. COVID-19 as of 12 July 2020 has resulted in 12,776,232 cases worldwide and 3,271,549 cases in the US. COVID-19 has resulted in 566,036 deaths worldwide and 134,904 deaths in the US.

62. As of 12 July 2020, NC has reported 85,701 cases and 1,501 deaths. Cases by counties named in this lawsuit are as follows: Ashe, 63; Buncombe, 865; Burke, 1,206; Cherokee, 66; Davie, 252; Davidson, 1,247; Forsyth, 3,676; Haywood, 127; Henderson, 885; Jackson, 198; Lenoir, 427; Mecklenburg, 15,024; New Hanover, 1,451; Pender, 365; Perquimans, 39; Polk, 99; Rutherford, 383; Transylvania, 48; Surrey, 580; and Warren, 191.

63. SARS-CoV-2 is mainly transmitted by expelled droplets from infected persons that may travel for up to 6 feet and by direct contact. Indirect transmission via contaminated fomites and environmental surfaces such as the screen of an electronic voting machine is likely.

64. Importantly, SARS-CoV-2 may be transmitted by persons who are infectious but are asymptomatic or pre-symptomatic.

65. Masks worn by infected persons and by non-infected persons reduce the risk of transmitting or acquiring SARS-CoV-2.

66. Outbreak investigations have demonstrated that COVID-19 infections may result when groups of people have close contact without practicing universal masks and physical distancing.

67. SARS-CoV-2 is a serious disease that has let to millions of American being infected and has resulted in greater than 130,000 American deaths.

68. Based on scientific studies of SARS-CoV-2 transmission, evaluation of COVID-29 outbreaks, and CDC and WHO guidelines, the presence of multiple people at a polling location places such people at high risk for acquiring COVID-29. As a consequence of acquiring COVID-19 such persons are at high risk for hospitalization, death, and if they survive, long-term health problems.

69. The risk of transmitting COVID-19 by touching an ExpressVote ballot-marking device is higher than by voting using hand-marked paper ballots. Other coronaviruses have been found to survive for 4 to 5 days on glass surfaces and up to 5 days on plastic (with certain strains surviving for up to 9 days).

70. Every voter will have to touch the ExpressVote screen or keypad a number of times to vote and touch the plastic components when inserting and retrieving the ballot card.

71. In Mecklenburg County and in other counties, poll workers must touch the screen of the ExpressVote to activate the machine and pull up the ballot style for each voter. This creates additional vectors of transmission, as it increases the chance of person-to-person transmission between the poll worker and voter while they are in close proximity, and increases the risk that the poll worker will transfer the virus onto the screen while setting the machine up for the voter. To avoid the second type of transmission, the poll worker should disinfect the screen a second time, after activating the machine and pulling up the ballot style-but this will lengthen the time that the poll workers is in close proximity with the voter, and risk the poll worker inadvertently making selections on the voter's behalf.

72. Voters casting ballots in polling places where use of the ExpressVote is required will be at greater risk for contracting the novel coronavirus than voters who vote in counties using hand-marked paper ballots that reserve BMDs for individuals who require assistive technology or want to use those devices.

73. Poll workers also risk contracting COVID-19 or inadvertently transmitting it to voters due to the number of times they must touch the ExpressVote on Election Day.

74. Voting booths and pens do not pose the same threat of transmission as does touching an electronic voting machine. Paper ballots do not have to be handled by anyone except the poll worker and the voter.

The foregoing is true and accurate to the best of my knowledge under penalty of perjury.

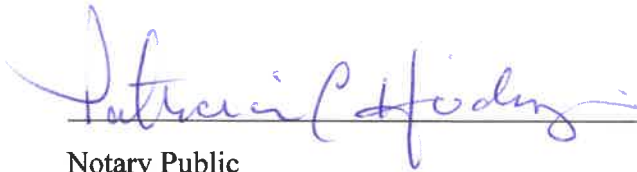
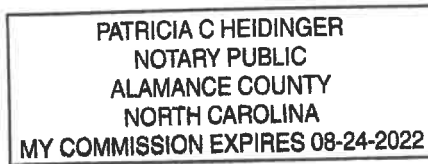
Executed July 16, 2020, at Chapel Hill, North Carolina.



David Jay Weber, MD, MPH, FIDSA, FSHEA, FRSM (London)
Professor of Medicine, Pediatrics and Epidemiology
School of Medicine and Gillings School of Global Public Health
Associate Chief Medical Officer, UNC Medical Center
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I, the undersigned notary public, hereby certify that DAVID JAY WEBER personally appeared before me this day and acknowledged the due execution of this AFFIDAVIT.

Witness my hand and official seal, this the 16 day of July, 2020.


Notary Public

My commission expires 08-24-2022, 2022.

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27. NCDHHS COVID-19 Response. Available at: <https://covid19.ncdhhs.gov/>. Accessed 12 July 2020.
28. World Health Organization. Transmission of SARS-CoV-2: Implications for infection prevention precautions. Available at: <https://www.who.int/publications/i/item/modes-of-transmission-of-virus-causing-covid-19-implications-for-ipc-precaution-recommendations>. Accessed 12 July 2020.

Exhibit A

CURRICULUM VITAE:

David Jay Weber, M.D., M.P.H.

Home Address: 226 Old Forest Creek Dr.
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Business Address: Division of Infectious Diseases
2163 Bioinformatics Building
Campus box 7030
UNC at Chapel Hill
Chapel Hill, NC 27599-7030
Phone: (919) 966-2536
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E-mail: dweber@unch.unc.edu

Date of Birth: April 14, 1951

Place of Birth: New York, New York

Wife: Sharon Wallman Weber

Children: Jessica Michelle Weber
Elyssa Brianne Weber
Rachel Lauren-Holly Weber

Education:

1973	B.A. (biology and political science), Wesleyan University, Middletown, Connecticut (magna cum laude)
1977	M.D., University of California at San Diego, La Jolla, California
1985	M.P.H. (Epidemiology), School of Public Health, Harvard University, Brookline, Massachusetts

Postdoctoral Training:

Residencies:

1977-78	First year resident in Medicine, Massachusetts General Hospital, Boston, Massachusetts
1978-79	Second year resident in Medicine, Massachusetts General Hospital, Boston, Massachusetts
1979-80	Third year resident in Medicine, Massachusetts General Hospital, Boston, Massachusetts

Fellowships:

1980-81	Ambulatory Care Fellow, Massachusetts General Hospital, Boston, Massachusetts
1981-85	Clinical and Research Fellow in Medicine, Infectious Disease Unit, Massachusetts General Hospital, Boston, Massachusetts

Licensure and Certification:

1977	Diplomate, National Board of Medical Examiners
1980	Licensure, Commonwealth of Massachusetts (MA 44929)
1980	Diplomate, American Board of Internal Medicine
1983	American Heart Association, Advanced Cardiac Life Support
1985	American Heart Association, Advanced Cardiac Life Support, Instructor
1985-1988	Licensure, State of North Carolina (NC 29186)
1988	Diplomate, Infectious Disease Boards, American Board of Internal Medicine
1991	Diplomate, Critical Care Medicine Boards, American Board of Internal Medicine
1992	Diplomate, Preventive Medicine Boards, American Academy of Preventive Medicine

Academic Appointments:

1981-85	Research Fellow in Medicine, Harvard Medical School
1984-85	Instructor, Infectious Disease Unit, Department of Pediatrics, Massachusetts General Hospital
1985-91	Assistant Professor of Medicine, School of Medicine, University of North Carolina at Chapel Hill
1985-91	Assistant Professor of Pediatrics, School of Medicine, University of North Carolina at Chapel Hill
1985-91	Assistant Professor of Epidemiology, School of Public Health, University of North Carolina at Chapel Hill
1991-99	Associate Professor of Medicine, School of Medicine, University of North Carolina at Chapel Hill
1991-99	Associate Professor of Pediatrics, School of Medicine, University of North Carolina at Chapel Hill
1991-99	Associate Professor of Epidemiology, School of Public Health, University of North Carolina at Chapel Hill
1995-1998-99	Associate Director, UNC School of Medicine M.D./Ph.D. Program.
1998-99	Assistant Dean, UNC School of Medicine, university of North Carolina at Chapel Hill
1999-	Professor of Medicine, School of Medicine, University of North Carolina at Chapel Hill
1999-	Professor of Pediatrics, School of Medicine, University of North Carolina at Chapel Hill
1999-	Professor of Epidemiology, School of Public Health, University of North Carolina at Chapel Hill

Hospital Appointments:

1984	Clinical Assistant in Infectious Diseases, Pediatric Service, Massachusetts General Hospital
1985-	Medical Director, Department of Hospital Epidemiology, University of North Carolina Hospitals
1990-91	Service Chief, Infectious Disease Inpatient Ward, UNC Hospitals
1994-	Medical Director, Occupational Health Service, UNC Hospitals
1998-99	Associate Chief of Staff, UNC Hospitals
2007-	Associate Chief Medical Officer, UNC Health Care

State of North Carolina Professional Services:

1985-91	Infectious Disease Consultant: Statewide Tuberculosis Management and Infection Control Program in Community Hospital
1991-	Associate Director: Statewide Tuberculosis Management and Infection Control Program in Community Hospitals
1998-2001	Chair, AARR-VI Study Section, AIDS Epidemiology and Clinical Trials, NIAID, NIH
1999-	Member, NC State TB Advisory Committee
2009-	Chair, NC State TB Medical Advisory Committee
2004-present	Member, Public Health Institution Best Practices Task Force

Other UNC Professional Activities:

1991-2008	Epidemiologist, General Clinical Research Center, UNC School of Medicine
1996-99	Associate Director, MD/PHD Program, UNC School of Medicine
1999-	Chair, M.D., with Honors Committee
2007-present	Co-Chair Biomedical IRB
2008-2017	Director, Regulatory Core, CTSA grant

Awards and Honors:

1972	Phi Beta Kappa
1991	Faculty Teaching Award, UNC Department of Medicine
1995	Teaching Scholar, UNC School of Medicine
1999	Chair, Section L (Nosocomial Infections), American Society of Microbiology
2006	H. Fleming Fuller award (outstanding clinician of the year), UNC Health Care System
2011	Margaret Jenkins Lectureship, Medical University of South Carolina
2011	Division L (Nosocomial Infections) Keynote speaker, American Society of Microbiology, Annual Meeting, New Orleans, LA, 2011
2012	Publication Award, American Journal of Infection Control, Association of Professionals in Infection Control, Annual Meeting, San Antonio, TX, 2011
2014	Greenberg Award (excellence in research, teaching and service), UNC Gillings School of Global Public Health
2018	Publication Award, American Journal of Infection Control, Association of Professionals in Infection Control, Annual Meeting, Minneapolis, MN, 2018
2018	Senior Scholars Award, Society for Healthcare Epidemiology of America, to be presented at IDweek, San Francisco, October, 2018
2020	Awarded "Friend of Nursing Award", UNC Medical Center

Memberships:

1984	American Society of Microbiology
1985	Fellow, Society of Hospital Epidemiologists
1991	Fellow, Infectious Disease Society of America
1991	Member, American College of Physicians
2017	Fellow, Royal Society of Medicine, London

Editorships:

1993-2007	Subsection Editor, Topics In Occupational Health. Infection Control & Hospital Epidemiology
2000-2002	Editor, Seminars in Infection Control, W.B. Saunders
2006-2011	Editor-In-Chief, Advances in Vaccinology
2007-present	Associate Editor, Infection Control and Hospital Epidemiology
2016-present	Editorial Board, Infection, Disease & Health, Sydney, Australia
2015-present	Editorial Board, Journal of Infection and Public Health

Visiting Professorship

1992-93	Visiting Scientist, Vaccine Trials and Epidemiology Branch, Division of AIDS, National Institute of Allergy and Infectious Diseases, NIH
2000 (summer)	Institute of Epidemiology & Medical Biometry, Ulm University, Ulm Germany, 1 week course "Epidemiology of Infectious Diseases"
2002 (summer)	Institute of Epidemiology & Medical Biometry, Ulm University, Ulm Germany, 1 week course "Epidemiology of Infectious Diseases"
2005 (summer)	Institute of Epidemiology & Medical Biometry, Ulm University, Ulm Germany, 1 week course "Epidemiology of Infectious Diseases"
2010 (summer)	Institute of Epidemiology & Medical Biometry, Ulm University, Ulm Germany, 1 week course "Epidemiology of Infectious Diseases"
2017 (summer)	Institute of Epidemiology & Medical Biometry, Ulm University, Ulm Germany, 1 week course "New and Emerging Infectious Diseases"
2018	26 July 2018, Royal Melbourne Hospital, Parkville, Victoria, Australia

Other Activities for Professional Societies:

2007-2010	Member, Annual Meeting Committee, Infectious Disease Society of America
2008-2010	Member, Annual Planning Committee, Society for Healthcare Epidemiology of America
2008-2009	Member, Awards Committee, Society for Healthcare Epidemiology of America
2010-2015	Member, Education Committee, Society for Healthcare Epidemiology of America
2011-2014	Member, Guidelines Committee, Society for Healthcare Epidemiology of America
2012-2017	Member, Awards Committee, Society for Healthcare Epidemiology of America
2013-2017	Member, Immunization Committee, American College of Physicians
2015-present	Reviewer, IDweek abstracts
2015-2016	Chair, Awards Committee, Society for Healthcare Epidemiology of America
2016-2018	Board Liaison, Awards Committee, Society for Healthcare Epidemiology of America
2015-present	Member, Guidelines Committee, Infectious Disease Society of America
2017-2018	Member, Board of the Society for Healthcare Epidemiology of America
2017-2018	Member, Conflicts of Interest Committee, Society for Healthcare Epidemiology of America
2020-2022	Member, Education and Research Committee, Society for Healthcare Epidemiology of America
2020-2022	Secretary (Board Member), Society for Healthcare Epidemiology of America
2020-2022	Guidelines Committee, Society for Healthcare Epidemiology of America
2020-2020	SHEA Board Liaison, Guideline Committee

Teaching Experience:

1979-83	Preceptor, Third Year Medical Students, Harvard Medical School
1982-84	Lecturer, Emergency Medicine Workshops, Massachusetts General Hospital
1984-85	Attending Physician, Pediatric Infectious Disease Unit, Massachusetts General Hospital
1985-	Attending Physician, Medical Service, University of North Carolina Hospitals
1985-	Attending Physician, Pediatric Service, University of North Carolina Hospitals
1985-present	Co-Director, Hospital Acquired Infections, sponsored 2x/year by the Statewide Program in Infection Control and Epidemiology (SPICE), Part 1 and Part II
1985-2007	Course Director, Epidemiology 218 (now 752) "Introduction to Infectious Disease Epidemiology", Department of Epidemiology, School of Public Health, UNC at Chapel Hill
1985-90, 94, 96	Instructor, "Clinical Epidemiology and Preventative Medicine", Department of Social and Administrative Medicine, School of Medicine, UNC at Chapel Hill
1986-88	Co-Director, Epidemiology 141-D "Sexually Transmitted Diseases", Department of Epidemiology, School of Public Health, UNC at Chapel Hill
1988-present	Course Director, Epidemiology 280 (now 764) "Epidemiology of Hospital Acquired Infections", Department of Epidemiology, School of Public Health, UNC at Chapel Hill
1988-1992	Co-Director, Epidemiology 141 "Epidemiology of Immunizations", Department of Epidemiology, School of Public Health, UNC at Chapel Hill
1991-2013	Course Director, "Methods in Clinical Research", School of Medicine, UNC at Chapel Hill
1992-2016	Course Director, "Ethics in Scientific Research", School of Medicine, UNC at Chapel Hill
1995-96, 2000	Course Director, "Graduate Seminar Series - Infectious Diseases", School of Public Health, UNC at Chapel Hill
1996-2005	Course Co-Director, "Seminar in Critical Appraisal of the Literature in Epidemiology and Medicine", School of Public Health, UNC at Chapel Hill
2006-2010	Co-Director, Epidemiology 141 "Epidemiology of Zoonotic Diseases" {taught in alternate years}
2008-2015	Co-Director, Epidemiology 754 "Prevention and Control of Infectious Diseases at the Level of the Community"
2008-2011	Co-Director, Epidemiology 889 "Vaccines"

Master's Students And Thesis Topics:

1986	Robert Brawley, M.D. Multiple nosocomial infections. UNC School of Public Health, Department of Epidemiology - M.P.H.
1986	Susan Saviteer, M.D. Nosocomial infections in the elderly: Increased risk per hospital day. UNC School of Public Health, Department of Epidemiology - M.P.H.
1987	Brenda Gant. Secular trends in the incidence of nosocomial infections. UNC School of Public Health, Department of Epidemiology -M.S.P.H.
1987	Harold Martin. The Epidemiology of nontuberculous mycobacterial colonization in North Carolina from 1970 to 1985. UNC School of Public Health, Department of Epidemiology - M.P.H.
1988	Dennis Clements, M.D. The pertussis immunization status of eight-month-old children in North Carolina. UNC School of Public Health, Department of Epidemiology - M.P.H.
1988	Phylliss Sholinsky. Cervical <i>Chlamydia trachomatis</i> infections as a university student health service. UNC School of Public Health, Department of Epidemiology - M.P.H.
1989	Laura Hanson, M.D. Risk factors for nosocomial pneumonia in the elderly. UNC School of Public Health, Department of Epidemiology - M.P.H.
1990	Duanping Liao, M.D. Risk factors for nosocomial sepsis in the prematures at a NICU in Shanghai. UNC School of Public Health, Department of Epidemiology - M.P.H.
1991	Paul Becherer, M.D. Hepatitis D in hemophiliacs. UNC School of Medicine, Department of Epidemiology -M.P.H.
1991	Stuart Cooper, M.D. Epidemiology of tuberculosis in North Carolina children. UNC School of Public Health, Department of Epidemiology - M.P.H.
1991	Theresa Klimko, D.V.M. Lack of serologic evidence of human ehrlichiosis in central North Carolina, 1989. UNC School of Public Health, Department of Epidemiology - M.P.H.
1991	Laura Hanson, M.D. Risk factors for nosocomial pneumonia in elderly patients. UNC School of Public Health, Department of Epidemiology - M.P.H.
1992	Susan Cohn, M.D. Migration of HIV-infected patients to North Carolina: An emerging rural phenomenon. UNC School of Public Health, Department of Epidemiology - M.P.H.
1992	Kenji Cunnion, M.D. Risk factors for nosocomial pneumonia: Comparing surgical and medical critical care. UNC School of Public Health, Department of Epidemiology - M.P.H.
1992	Emmanuel Walter. UNC School of Public Health, Department of Epidemiology - M.P.H.
1993	Ada Adimora, M.D. Clinical testing of a gonococcal vaccine. UNC at Chapel Hill, Department of Epidemiology - M.P.H.
1993	Paul Becherer, M.D. Hepatitis C infection: Transmission and clinical impact. UNC at Chapel Hill, Department of Epidemiology - M.P.H.
1994	Ken Olivier, M.D. - Multicenter investigation of nontuberculous mycobacteria in persons with cystic fibrosis. UNC School of Public Health, Department of Epidemiology - M.P.H.
1994	Manual Mah, M.D. Epidemiology of bloodborne virus infection in a U.S. hemophiliac population. UNC School of Public Health, Department of Epidemiology - M.P.H.
1994	Daughn Charles. Lyme disease in North Carolina, 1991-1993. UNC School of Public Health, Department of Epidemiology - M.P.H.

Master's Students And Thesis Topics:

1995	George Beatty. Gender differences in immunosuppression among HIV-infected patients seeking care at a southern infectious disease clinic. UNC School of Public Health, Department of Epidemiology - M.P.H.
1995	Janet Alexander. Tularemia in the United States, 1985-1992. UNC School of Public Health, Department of Epidemiology - M.P.H.
1995	Shiela Kinty. Epidemiology of tuberculosis in North Carolina, 1989-1993. UNC School of Public Health, Department of Epidemiology - M.P.H.
1995	Scott Woods. Collegial networking and faculty vitality: A case-control study. UNC School of Public Health, Department of Epidemiology - M.P.H.
1996	Brian Sebastian. The Epidemiology of nontuberculous mycobacteria in North Carolina, 1970 to 1995. UNC School of Public Health, Department of Epidemiology - M.P.H.
1996	Kimberly Fox, M.D. Antimicrobial resistance in <i>Neisseria gonorrhoeae</i> in the United States, 1988-1994: The emergence of reduced susceptibility to the fluoroquinolones. UNC School of Public Health, Department of Epidemiology - M.P.H.
1996	Holli Hamilton, M.D. A cost minimization analysis of varicella vaccine in health care workers. UNC School of Public Health, Department of Epidemiology - M.P.H.
1998	Allison Aiello. Detection and occurrence of enteric viruses in oysters and clams from sites impacted by point and non-point fecal contamination by using cell culture infectivity and RT-PCR. UNC School of Public Health, Department of Epidemiology - M.P.H.
2010	Joseph Everette Hatch. Methicillin-resistant <i>Staphylococcus aureus</i> in gyms. UNC School of Public Health, Department of Environmental Sciences, MSPH.
2012	Rebekah Moehring, MD. Gram negative infections in community hospitals (DIKON network). UNC School of Public Health, Department of Epidemiology - M.P.H.
2018	Jessica Seidelman, MD. Prevalence and risk factors for <i>Candida</i> endophthalmitis: A multicenter retrospective cohort study. UNC School of Public Health, Department of Epidemiology - M.P.H.

Doctoral Committees (Chair):

1997-2004	Gayle Shimokura, PhD: Risk factors for hepatitis C transmission in hemodialysis units. Dept. of Epidemiology, UNC School of Public Health.
2006-2010	Emily Sickbert-Bennett, PhD: Sensitivity and specificity of communicable disease reporting. Dept. of Epidemiology, UNC School of Public Health.
2008-2010	Mary Beth Richey, PhD: Device infection rates as a function of device duration. Dept. of Epidemiology, UNC School of Public Health.
2010-2013	Sarah Rhea, DVM: Epidemiology of animal bites in North Carolina. Dept. of Epidemiology, UNC School of Public Health.
2010-2013	Eric Lofgren, MSPH: Modeling of transmission of <i>Clostridium difficile</i> in hospitals. Dept. of Epidemiology, UNC School of Public Health.
2016-2018	Paula Strassle, MSPH, Analysis of risk factors for non-device related healthcare-associated infections. Dept. of Epidemiology, UNC School of Public Health.

Doctoral Committees:

1990	Peter Margolis, M.D: Respiratory illness in children. Department of Epidemiology, UNC School of Public Health
1991	Danielle LaBorde: Infections in daycare centers. Department of Epidemiology, UNC School of Public Health
1991	Grey Davis: Strategies to prevent neonatal herpes infections. Department of Health Policy, UNC School of Public Health
1995	Peter Millard: Tuberculosis. Department of Epidemiology, UNC.
1995	Francis Martinson: Risk factors for horizontal transmission of hepatitis B virus in a rural district in Ghana. Department of Epidemiology, UNC.School of Public Health
1995	Antonio J. Cunha: Acute lower respiratory infections (ALRI) in children in Northeast Brazil; implications for prevention and control. Department of Epidemiology, UNC.School of Public Health
1998	Diane Catellier. Inference for the general linear multivariate model with missing data in small samples. Dept of Biostatistics, UNC.School of Public Health
2000	Laura Moorhead, White plague in black L.A.: Tuberculosis among African Americans in Los Angeles, 1930-1950. Dept. of Geography, UNC
2010	"Ku" Lanakila McMahan: Evaluation of the H2S test as an indicator of waterborne fecal contamination. Department of Environmental Sciences, UNC School of Public Health
2012	Emily Bratton: Influenza vaccine efficacy in hemodialysis patients. Department of Epidemiology, UNC School of Public Health
2013	JaHyun Kang, RN. Analyses of healthcare associated infections. UNC School of Nursing.
2014	Meagan Vaughn. Effectiveness of permethrin impregnated uniforms for the prevention of tick bites among outdoor workers. Dept. of Epidemiology, UNC School of Public Health
2016	Ruth Link-Gelles. Role of socioeconomic status in the internal and external validity of estimated effectiveness of 13-valent pneumococcal conjugate vaccine in the United States. Dept. of Epidemiology, UNC School of Public Health
2016	Melanie Denise Napier. Exposure to human source-associated fecal indicators and self-reported illness among swimmers. Dept. of Epidemiology, UNC School of Public Health.
2018	Melissa Arvay. Improving detection and treatment of infections in neonates: secondary analyses of the Aetiology of Neonatal Infection in South Asia (ANISA) study. Dept. of Epidemiology, UNC School of Public Health.
2019	Alessandra Bassalobre Garcia Reeves. Antimicrobial stewardship programs: Implications for resistance rates & quality of care hospitals. Dept. of Health Policy and Management, UNC Gillings School of Global Public Health.
2018	Paul Zivich. To be determined.

NIH/CDC/FDA/WHO Review Panels:

1988-91	Ad Hoc Reviewer: AIDS & Related Research Study Section 2 (Epidemiology and Biostatistics), National Institutes of Health
1991-1996	Reviewer: AIDS & Related Research Study Section 2, National Institutes of Health
1994-1996	Chair: AIDS & Related Research Study Section 2 (Epidemiology and Biostatistics), National Institutes of Health
1995-1996	Reviewer: FDA Panel to review VAERS System
1997-1998	Member Review Panel For HIV Postexposure Prophylaxis Registry
1997-99	Chair: AIDS Related Research Study Section 6 (Epidemiology and Biostatistics, National Institutes of Health
2004-2008	Member, Recombinant DNA Advisory Committee, National Institutes of Health
2007-present	Member, Ad Hoc Working Group on Clinical Trial Design, NIH
2014-	SHEA liaison to CDC Advisory Committee on Immunization Practices
2010-2011	Advisory Committee on Immunization Practices, Centers for Disease Control and Prevention, Working Group on immunization requirements for healthcare personnel
2010-2011	Advisory Committee on Immunization Practices, Centers for Disease Control and Prevention, Working Group on hepatitis B vaccine for diabetics
2011-2012	Advisory Committee on Immunization Practices, Centers for Disease Control and Prevention, Working Group on screening healthcare personnel for hepatitis B immunity on initial employment
2016	Member, Review Committee, Emerging Infections Programs, 31 August-1 September, 2016
2019-	Advisory Committee on Immunization Practices, Centers for Disease Control and Prevention, Working Group on Orthopoxviruses vaccine
2020	Advisory Committee on Immunization Practices, Centers for Disease Control and Prevention, Working Group on SARS-Co-V-2 vaccines
2020	Consultant, World Health Organization, COVID-19 preparedness and mitigation
2020	Advisor to LTG Kurilla, Commander XVIII Airborne Corps, Fort Bragg, on COVID-19 preparedness and mitigation

Invited National and International Lectures:

1. 1987, "Hospital Acquired Fungal Infections", Karolinska Institute, Stockholm, Sweden
2. 1989, "Risk Factors Associated with Ingestion of Raw Shellfish", National Academy of Sciences, Woodshole, Massachusetts
3. 1989, "Tuberculosis in North Carolina", North Carolina Association of Public Health, Charlotte, North Carolina
4. 1990, "Natural History of HIV-1 Infection", University of Uhm, West Germany
5. 1991, "Contact Tracing As A Strategy for Controlling HIV Transmission", National Institutes of Health, Washington D.C.
6. 1992, "Current Issues in the Prevention of Nosocomial Infections", Medical Grand Rounds, Medical College of Georgia
7. 1993, "Design of Clinical Trials", Critical Care Conference, Clinical Center, National Institutes of Health
8. 1993, "Statistics for the Clinician", Critical Care Conference, Clinical Center, National Institutes of Health
9. 1993, "Design of Clinical Trials", Infectious Disease Conference, Clinical Center, National Institutes of Health
10. 1995, "Outbreak Investigations", CDC/SHEA Infection Control Course, San Francisco, May 6-9, 1995
11. 1995, "Update of Occupational Medicine", North Carolina APIC Convention, Ashville, NC Oct. 18-20, 1995.
12. 1997, "Monitoring and Management of Occupational Injuries", Society for Healthcare Epidemiology of America, St. Louis, April 27-29, 1997
13. 1997, "Airborne Fungal Infections", American Society for Microbiology, Miami, May 4-8, 1997
14. 1997, "Toxicities Associated With Germicides and Disinfectants", Association of Practitioners In Infection Control, New Orleans, May 11-13, 1997
15. 1997, "Infectious Disease Epidemiology", University of Ulm, Ulm, West Germany, July 9-13, 1997
16. 1997, Methods in Infectious Disease Epidemiology (series of 4 lectures), University of Utah, August 10-12, 1997
17. 1998, "Adult Vaccines", Medical Grand Rounds, University of Tennessee, Knoxville, March 24, 1998
18. 1998, Varicella vaccine: Use in the US.
19. 1999, "Nosocomial Pneumonia", Lecture, Infectious Disease Course, Massachusetts General Hospital, Boston, April

Invited National and International Lectures:

20. 1999, "Infection Control Update", Lecture, Infectious Disease Course, Massachusetts General Hospital, Boston, April
21. 2000, Thai Infectious Disease Society, "Impact and Control of Drug Resistant Pathogens", Bangkok, September
22. 2000, Infectious Disease Society of America, "Review of Occupational Health Issues", New Orleans, September
23. 2001, National Institutes of Health, Critical Care Grand Rounds, "Challenges in Infection Control for the 21st Century", Bethesda, MD, January
24. 2001, Society for Healthcare Epidemiology of America, "Infection Control for
25. 2001, Harvard Medical School, Infectious Diseases of Adults, "New Challenges in Infection Control," "Healthcare-Associated Pneumonia," Boston, Massachusetts, April.
26. 2001, American Society of Microbiology, "Outbreaks Associated With the Environment", Orlando, May.
27. 2001, North Carolina Chapter of American Family Practice Association, "Recognition and Management of Bioterrorist Agents," August.
28. 2001, Interscience Conference on Antimicrobial Agents and Chemotherapy, "Non-Fermenting Gram Negative Rods," December 2001, San Diego, CA
29. 2001, Trauma Grand Rounds UCS, Prevention and Management of Nosocomial Airborne Fungal Infections, December.
30. 2004, University of East Tennessee, Surgery Grand Rounds, Cincinnati, OH, "Skin and Soft Tissue Infections," January 2004
31. 2004, University of Kentucky, Medicine Grand Rounds, "SARS," February 2004
32. 2004, Hong Kong Infectious Disease Society, Hong Kong, "Managing Drug Resistant Pathogens," March 2004
33. 2004, Hospital (Number 1), Shanghai, China, "Healthcare-Associated Infections," March 2004
34. 2004, Terri Lee Memorial Symposium, Asheville, N.C., " Rabies," March 2004
35. 2004, European Congress of Clinical Microbiology and Infectious Diseases (ECCMID), Prague, "Current Options For the Treatment Of Bacterial Infections," May 1-4
36. 2004, Infectious Disease Rounds, Medical College of South Carolina (Visiting Professor), Charleston, SC, "Management of Neutropenic Fever", September
37. 2005, Grand Rounds, Internal Medicine, Womack Army Hospital, Fort Bragg, Fayetteville, NC, "Advances in the Diagnosis and Treatment of Community Acquired Pneumonia", February 2005
38. 2005, Association of Clinical Research Professionals, RTP, NC Chapter, "Data Safety and Monitoring", February 2005

Invited National and International Lectures:

39. 2005, Grand Rounds, Family Practice, Womack Army Hospital, Fort Bragg, Fayetteville, NC, "Changing Nature of *Staphylococcus aureus* Infection", April 2005
40. 2005, Grand Rounds, Internal Medicine, Walter Reed Army Hospital, Washington, D.C., "Managing Drug Resistant Pathogens", April 2005
41. 2005, Pandemic Influenza Planning: The Reality of Implementation in the Southeast, "Local Pandemic Preparedness", Emory University, November 2005
42. 2005, Grand Rounds, Internal Medicine, Christ Hospital, Cincinnati, OH, "The Growing Threat of Antibiotic Resistant Pathogens", November 2005
43. 2005, 5th International Symposium on Antimicrobial Agents and Resistance, "Treatment Options For Polymicrobial Infections: Is Monotherapy a Thing of the Past?" Seoul, Korea, April 29, 2005
44. 2006, Charlotte Infectious Disease Society, "Changing Nature of *Staphylococcus aureus* Infections", Charlotte, NC, February 2006
45. 2006, ID Division Rounds, University of Virginia School of Medicine, "Herpes Zoster Epidemiology," February 2006
46. 2006, Annual Meeting, Society for Healthcare Epidemiology of America (SHEA), "Transmission of Bloodborne Pathogens From Provider-to-Patient", March 2006
47. 2006, Annual Meeting, European Clinical Microbiology and Infectious Diseases (ECCMID), Nice, France, "Health Care Associated ICU Infections: Focus on Collateral Damage From Antibiotics", April 2006
48. 2006, German Congress on Anesthesiology, Leipzig, Germany, "Antibiotic Resistant Pathogens and New Therapies: The American Experience", May 2006
49. 2006, "Bad Bugs" Infectious Disease Update For Nurses, Chapel Hill, NC, "Prevention and Treatment of Infections Associated with Travel", May 2006
50. 2006, NC Colleges, Planning for Epidemic Influenza, Raleigh, NC, "Primer on Influenza and Local Preparedness for Epidemic Influenza", June 2006
51. 2006, Annual Meeting, Association of Practitioners in Infection Control (APIC), Tampa, FL, "Nosocomial Pneumonia, 2006: Epidemiology, Therapy, and Prevention", June 2006
52. 2006, Annual Meeting, Association of Practitioners in Infection Control (APIC), Tampa, FL, "Efficacy of Antiseptic or Antibiotic Impregnated Medical Devices In Preventing Nosocomial Infections", June 2006
53. 2006, Annual Meeting, Association of Practitioners in Infection Control (APIC), Tampa, FL,, "Outbreaks Associated With Sterilants and Disinfectants", June 2006
54. 2006 12th International Congress on Infectious Disease, Lisbon, Portugal, "Use of Broad Spectrum Antibiotics To Treat Complicated Skin and Soft Tissue Infections and Complicated Intra-abdominal ", June 2006

Invited National and International Lectures:

55. 2006, Keynote Speaker, Randolph Hospital Sports Medicine Symposium, "Infections Related to Sports: Focus on Community-Associated Methicillin-Resistant *Staphylococcus aureus*", August 2006
56. 2006, Terry Lee Memorial Symposium, Asheville, NC., "Infectious Diseases in the Movies: Fact or Fiction", November 2006.
57. 2007, Internal Medicine Grand Rounds, Medical University of South Carolina (MUSC), SC, "Vaccine Update", March 2007
58. 2007, "Bad Bugs" Infectious Disease Update for Nurses, Chapel Hill, NC, "Emerging Agents Causing Gastroenteritis: *E. coli* O157:H7, norovirus, *Clostridium difficile*", May 2007
59. 2007, Camp LaJeune Marine Base, "Changing nature of *S. aureus* Infections, May 2007
60. 2007, American Society of Gene Therapy Annual Meeting, "Ethical and Safety Issues To Be Considered in Gene Transfer Research" (part of an NIH sponsored symposium), Seattle WA, June 2007
61. 2008, Fort Bragg, Womack Army Hospital, "Proper Use of Antibiotics", January 2008
62. 2008, Orange County EMS, "Pandemic Influenza", Chapel Hill NC, January 2008
63. 2008, Annual Conference on *Aspergillus*, "CDC/HICPAC Recommendations to Prevent *Aspergillus*", Miami FL, January 2008
64. 2008, Centers for Disease Control and Prevention and Society for Healthcare Epidemiology, "Transmission in Healthcare Facilities", Washington, DC, April 2008
65. 2008, University of Kentucky, "New Antibiotics", April 2008
66. 2008, SECBET, Emory University, Key Note Talk, "Infections Acquired in the Hospital", May 2008
67. 2008, National Foundation of Infectious Diseases, "Vaccines for Healthcare Workers", Washington, DC, November 2008
68. 2008, University of Nebraska (visiting professor), "Update on Norovirus Infections" and "Infectious Diseases in the Movies", December 2008
69. 2011, One Health, "From Animals to Humans and Back", RTP, February, 2011
70. 2011, General Electric Medicine Review, "New and Emerging Diseases", Wilmington, NC, April, 2011
71. 2011, Society for Healthcare Epidemiology of America, Annual Meeting, "Disinfection and Sterilization: Meeting the CDC Guideline", Dallas, TX, April, 2011
72. 2011, American Geriatric Society, Annual Meeting, "Immunization of Healthcare Personnel: Does It Really Matter?" Suburban Washington, DC, May, 2011.

Invited National and International Lectures:

73. 2011, American Society of Microbiology, Annual Meeting, Section L Division Featured Speaker, "*Clostridium difficile* and the Environment: Disinfection Practices and Mitigating Risk to Patients", New Orleans, May, 2011
74. 2011, Pediatric Grand Rounds, "Pertussis: Prevention and Management in Healthcare Facilities", Medical University of South Carolina, June, 2011
75. 2011, Margaret Jenkins Lecture, "Infectious Diseases in the Movies: Fact or Fiction", Medical University of South Carolina, June, 2011
76. 2011, Society for Healthcare Epidemiology of America (SHEA), "Disinfection and Sterilization: Meeting the CDC Guidelines", Dallas TX, April 1-4, 2011
77. 2011, Association of Professionals in Infection Control, Annual Meeting, "Occupational Health Update, 2011", Baltimore, June, 2011
78. 2011, Association of Professionals in Infection Control, Annual Meeting, "Pertussis: Prevention and Management in Healthcare Facilities", Baltimore, June, 2011
79. 2011, Infectious Disease Grand Rounds, "Adult Vaccines", University of Virginia School of Medicine, June, 2011
80. 2011, Association of Professionals in Infection Control, NC Annual Meeting, "Infectious Diseases in the Movies: Fact or Fiction", NC, September, 2011
81. 2011, Infectious Disease Grand Rounds, "Vaccines to Prevent Multidrug Resistant Pathogens.", Duke University, NC, November, 2011
82. 2012, Commissioned Training on Disinfection and Sterilization, Keynote Speaker, "Role of the Surface Environment in the Transmission of Healthcare-Associated Pathogens (MRSA, VRE, *C. difficile*, norovirus, *Acinetobacter*): Epidemiology and Prevention", Infectious Disease Control Training Centre & Chief Infection Control Office, Hospital Authority and Infection Control Branch, Centre for Health Protection, Hong Kong, China, February, 2012.
83. 2012, Commissioned Training on Disinfection and Sterilization, "CJD/Prions: The Basics and an Update", Infectious Disease Control Training Centre & Chief Infection Control Office, Hospital Authority and Infection Control Branch, Centre for Health Protection, Hong Kong, China, February, 2012.
84. 2012, Commissioned Training on Disinfection and Sterilization, "Infection Control During Construction: Focus on CDC/HICPAC Recommendations", Infectious Disease Control Training Centre & Chief Infection Control Office, Hospital Authority and Infection Control Branch, Centre for Health Protection, Hong Kong, China, February, 2012.
85. 2012, Commissioned Training on Disinfection and Sterilization, "Sterilization and Disinfection: Current Issues and New Techniques – a US Perspective", Infectious Disease Control Training Centre & Chief Infection Control Office, Hospital Authority and Infection Control Branch, Centre for Health Protection, Hong Kong, China, February, 2012.

Invited National and International Lectures:

86. 2012, Association for Professionals In Infection Control and Epidemiology (APIC), "Occupational Health Issues That Should Keep You Up At Night", Annual Meeting, San Antonio, TX, June, 2012.
87. 2012, Association for Professionals In: Infection Control and Epidemiology (APIC), "Self Disinfecting Surfaces: Use of Antimicrobial Impregnated Surfaces and Using Persistent Antimicrobials in the Patient Environment", Annual Meeting, San Antonio, TX, June, 2012.
88. 2012, Association for Professionals In Infection Control and Epidemiology (APIC), "Vaccine Preventable MDROs and HAIs", Annual Meeting, San Antonio, TX, June, 2012.
89. 2012, Association for Professionals In Infection Control and Epidemiology (APIC), "Errors in Reprocessing Medical Devices: Lessons Learned From Patient Exposures and Outbreaks of Infections", Annual Meeting, San Antonio, TX, June, 2012.
90. 2012, UNC Center for Leadership Development, "Infectious Disease in the Movies: Fact or Fiction?", June, 2012
91. 2012, Fifth International Conference on Infectious Diseases (ICID), "From Vaccine to Vaccination: Clinical Implications", Bangkok, Thailand, June 2012
92. 2012, The 9th National Seminar on Infection Control: Infection Control in Special Settings, "Best Practices for Cleaning and Disinfection of Room Surfaces and Equipment", Bangkok, Thailand, July 2012
93. 2012, The 9th National Seminar on Infection Control: Infection Control in Special Settings, "Epidemiology and Control of CLA-BSI: Focus on the Role of New Technologies", Bangkok, Thailand, July 2012
94. 2012, The 9th National Seminar on Infection Control: Infection Control in Special Settings, "Infection Control During Construction: Focus on CDC/HICPAC Recommendations", Bangkok, Thailand, July 2012
95. 2012, The 9th National Seminar on Infection Control: Infection Control in Special Settings, "Occupational Health Update, 2012", Bangkok, Thailand, July 2012.
96. 2012, The 9th National Seminar on Infection Control: Infection Control in Special Settings, "Disinfection and Sterilization in Developing Countries: What Clinicians and IPs Need to Know", Bangkok, Thailand, July 2012.
97. 2012, IDweek, "Role of the Environment in the Development of HAIs: A Critical Review of the Literature", San Diego, CA, October 17-21. 2012.
98. 2012, IDweek, "Vaccines for Older Adults: Current Recommendations and Rationale", San Diego, CA, October 17-21. 2012.
99. 2013, Medical College of South Carolina (visiting Professor), "Role of the contaminated environment in the transmission of healthcare-associated pathogens", July, 2013
100. 2013, Puerto Rico Infectious Disease Society meeting, "Healthcare-associated pneumonia", Puerto Rico, September 2013.

Invited National and International Lectures:

101. 2013, University Hospital San Juan, "Healthcare-associated pneumonia", Puerto Rico, September 2013
102. 2013, Mayaguez Medical Center, "Healthcare-associated pneumonia", Puerto Rico, September, 2013
103. 2013, Virginia Association of Professionals in Infection Control, "Best practices for room disinfection", Richmond, VA, October, 2013
104. 2013, Carolina's Medical Center, "Overview of adult immunizations", Charlotte, October, 2013
105. 2013, Duke University Medical Centers, "Diagnosis and treatment of complicated urinary tract infections", Durham, NC, October, 2013
106. 2013, Infectious Disease Society of Las Angeles, "Vaccines for adults: New ACIP recommendations and rationale", Anaheim CA, October, 2013
107. 2013, *Clostridium difficile* Society, "Role of the contaminated environment in *C. difficile*", Durham, NC, November 2013
108. 2013, Society for Healthcare Epidemiology of America (SHEA), "Role of Emerging Technologies For Disinfection of the Healthcare Environment", Atlanta GA, May 1-4, 2013.
109. 2013, Society for Healthcare Epidemiology of America (SHEA), "Where Should My Hospital Spend Its Money; Optimizing Process or Adding Technology", May 1-4, Atlanta GA, 2013
110. 2013, Demarva Foundation for Medical Care (teleconference), "Role of the contaminated environment in the transmission of *C. difficile*"
111. 2013, Kuwait, 7th Gulf States Infection Control Conference, "Role of the Contaminated Surface Environment in the Transmission of MDROs: MRSA, VRE, *C. difficile*, *Acinetobacter* and Norovirus", Kuwait City, Kuwait, December, 2013
112. 2013, Kuwait, 7th Gulf States Infection Control Conference, "Infection control during construction/renovation: Focus on CDC/HICPAC recommendations", Kuwait City, Kuwait, December, 2013
113. 2013, Kuwait, 7th Gulf States Infection Control Conference, "Epidemiology and prevention of *C. difficile*", Kuwait City, Kuwait, December, 2013
114. 2013, Kuwait, 7th Gulf States Infection Control Conference, "Occupational health update", Kuwait City, Kuwait, December, 2013
115. 2014, Teleconference, Walgreen's, Rocky Mountain spotted fever, January 2014
116. 2014, V International Symposium on Healthcare-Associated Infections, "Vaccination in healthcare personnel and older patients", Cartagena, Colombia, March 5-7, 2014
117. 2014 V International Symposium on Healthcare-Associated Infections, "Environmental hygiene and infection prevention: An update", Cartagena, Colombia, March 5-7, 2014

Invited National and International Lectures:

118. 2014, V International Symposium on Healthcare-Associated Infections, "Vaccination for adults: Review of new ACIP recommendations", Cartagena, Colombia, March 5-7, 2014
119. 2014, Society for Healthcare Epidemiology of America (SHEA), "Assessing the Risk of Disease Transmission When There Is A Possible Failure of Disinfection or Sterilization", Denver CO, April 3-6, 2014.
120. 2014, Infection Prevention Society Conference, "The use of disinfectants and healthcare-associated infections", Glasgow, Scotland, 29 September – 1 October, 2014.
121. 2014, IDweek, "Transmission of Drug Resistant Pathogens Through Endoscopy: Current Issues, Challenges and Opportunities", Philadelphia, PA, October 8-12, 2014.
122. 2015, 55th Interscience Conference on Antimicrobial Agents and Chemotherapy, "Vaccines for healthcare providers; Current ACIP recommendations and rationale", San Diego, September 17-21, 2015.
123. 2015, 7th Asian Pacific Congress of the Asian Pacific Society of Infection Control (APSIC 2015), "The importance of the Surface Environment in Controlling Healthcare-Associated Infections, Taipei, Taiwan, 26-29 March, 2015.
124. 2015, IAGG Master Class on Ageing, "Global Perspective of Vaccine-Preventable Diseases in the Elderly", Taipei Veterans General Hospital, Taipei, Taiwan, 26-28 March, 2015.
125. 2015, Eastern Health Alliance, Scientific Meeting 2015, "Implications of multidrug-resistant pathogens/hospital infections for endoscopy", "Vertical methods versus horizontal methods to prevent healthcare-associated infections due to MDRO pathogens" and "The importance of management of the surface environment in controlling healthcare-associated infections", Changi General Hospital, Singapore, November 4-7, 2015.
126. 2015 Hong Kong Health Department Annual Meeting, "Endoscope Reprocessing in Healthcare Facilities: Best Practices and Recommendations", Hong Kong, August 25-27, 2015.
127. 2015j Hong Kong Health Department Annual Meeting, "Healthcare-Associated Pneumonia: Epidemiology, Microbiology & Pathophysiology", Hong Kong, August 25-27, 2015.
128. 2015, Hong Kong Health Department Annual Meeting, "Sterilization and Disinfection Round Table", August 25-27, 2015.
129. 2015, 4th International Australasia College for Infection Prevention and Control Conference, "Animals in healthcare", and "Terminal room disinfection". Hobart, Australia, November 22-25, 2015.
130. 2015, 43rd Annual APIC meeting conference, "Emerging Viral Pathogens (SARS, MERS, Ebola, Novel Influenza): Focus on Control Measures", Nashville, June 27-27, 2015
131. 2015, 43rd Annual APIC meeting conference, "Does The Use Of Room Decontamination Units Reduce HAIs: A Review of the Literature", Nashville, June 27-27, 2015
132. 2015, 43rd Annual APIC meeting conference, "Occupational Health Risks Associated With The Use of Disinfectants in Health Care", Nashville, June 27-27, 2015

Invited National and International Lectures:

133. 2016, 31st Annual IDAC Spring Symposium, Infectious Disease Association of California (IDAC), "Immunizations in Adults: New CDC/ACIP Recommendations and Rationale", Costa Mesa, CA, April 30-May 1, 2016.
134. 2016, 43rd Annual APIC meeting conference, "Responding to Emerging Infectious Diseases: Focus on Zika Virus and MERS-Co-V", Charlotte, NA, June 11-13, 2016.
135. 2016, IDweek, "From Pox to Pertussis: Post-Exposure Management for Healthcare Personnel", New Orleans, LA, October 26-30, 2016.
136. 2017, 8th International Congress of the Asia Pacific Society of Infection Control, "No-Touch' Methods For Room Disinfection: Focus on UV", Bangkok, Thailand, February 12-15, 2017.
137. 2017 8th International Congress of the Asia Pacific Society of Infection Control, Key Note Address "Recent CRE Outbreaks Associated With Endoscopes: Should We Shift From Disinfection To Sterilization", Bangkok, Thailand, February 12-15, 2017.
138. 2017, 8th International Congress of the Asia Pacific Society of Infection Control, "Non-Technology vs. Technology Approach For Environmental Disinfection To Contain HAIs and MDROs: A Debate", Bangkok, Thailand, February 12-15, 2017.
139. 2017, 8th International Congress of the Asia Pacific Society of Infection Control, "Vaccines for Healthcare Personnel: US Recommendations and Rationale", Bangkok, Thailand, February 12-15, 2017.
140. 2017, Symposium on Bioterrorism, Infectious Disease Control Training Centre, Hospital Authority/Infection Control Branch, Centre for Health Protection; Chief Infection Control Officer's Office, Hospital Authority, "Recognition and Management of Agents of Biothreats: Overview", Kowloon, Hong Kong, February 16-17, 2017.
141. 2017, Symposium on Bioterrorism, Infectious Disease Control Training Centre, Hospital Authority/Infection Control Branch, Centre for Health Protection; Chief Infection Control Officer's Office, Hospital Authority, "Responding t Emerging Infectious Diseases: Focus On Highly Communicable Contact and Respiratory Transmitted Infectious Diseases", Kowloon, Hong Kong, February 16-17, 2017.
142. 2017, Symposium on Sterilization and Disinfection, Infectious Disease Control Training Centre, Hospital Authority/Infection Control Branch, Centre for Health Protection, "Disinfection and Sterilization: What's New", Kowloon, Hong Kong, February 16, 2017.
143. 2017, Japanese Society for Infection Prevention and Control, Key Note Address: "Role of the contaminated surface environment in the transmission of MDROs in the hospital: Impact and prevention", Kobe, Japan, February 24-26, 2017
144. 2017, XVIII Congese Panamericano De Infectiologia, VI Congreso Nacional de Enfermedades Infecciosas, "Pneumococcal disease and prevention with vaccination", Panama City, Panama, 16-19 May, 2017
145. 2017, National Institute for Antibiotic Resistance and Infection Control Workshop, Israel Ministry of Health, "The Importance in Management of the Surface Environment in Controlling Healthcare-Associated Infections", Tel Aviv, Israel, 30 October – 1 November, 2017.

Invited National and International Lectures:

146. 2017, National Institute for Antibiotic Resistance and Infection Control Workshop, Israel Ministry of Health, “Assessment of Strategies for Terminal Room Disinfection and Measuring the Cleanliness of Rooms”, Tel Aviv, Israel, 30 October – 1 November, 2017.
147. 2017, National Institute for Antibiotic Resistance and Infection Control Workshop, Israel Ministry of Health, “Disinfection and Sterilization – Assessing Disinfectants and Sterilants”, Tel Aviv, Israel, 30 October – 1 November, 2017.
148. 2017, National Institute for Antibiotic Resistance and Infection Control Workshop, Israel Ministry of Health, “High Level Disinfection: Training for Central Sterile Services Personnel”, Tel Aviv, Israel, 30 October – 1 November, 2017.
149. 2018, American Gastrointestinal Society Technical Summit on Endoscope Reprocessing, “Long-term solution, endoscope design and reprocessing techniques: Will high-level disinfection be enough”, Boston, MA, 21-23 March, 2018.
150. 2018, NC Museum of Natural Sciences in Raleigh, “The going threat of new and emerging infectious diseases leading to epidemics”, 7 April, 2018.
151. 2018, National Association of School Nurses, 50th Annual Conference, “Preventing infections and outbreaks in schools”, Baltimore, Maryland , 30 June – 3 July, 2018
152. 2018, Disinfection, Sterilization, and Antisepsis: Principles, Practices, Current Issues, New Research, and New Technologies Workshop, Association of Professionals in Infection Control (APIC) Annual Meeting, “Emerging Pathogens (*C. auris*, MDROs, norovirus, Ebola, *C. auris*, MDROs, MERS, Avian influenza, *C. difficile*): Germicidal Activity and Control Measures“, Minneapolis, Minnesota, 12 June, 2018.
153. 2018, Disinfection, Sterilization, and Antisepsis: Principles, Practices, Current Issues, New Research, and New Technologies Workshop, Association of Professionals in Infection Control (APIC) Annual Meeting, “Continuous Room Decontamination Technologies (visible light, dilute HP, persistent disinfectants, copper): Review of the Literature “, Minneapolis, Minnesota, 12 June, 2018.
154. 2018, Disinfection, Sterilization, and Antisepsis: Principles, Practices, Current Issues, New Research, and New Technologies Workshop, Association of Professionals in Infection Control (APIC) Annual Meeting, “Use of germicides in the home and health care setting: Is there a relationship between germicide use and antimicrobial resistance “, Minneapolis, Minnesota, 12 June, 2018.
155. 2018, 50th Annual National Association of School Nurses Conference, “Preventing Infections and Outbreaks in Schools“, 29 June–3 July, Baltimore, MD
156. 2018, Australian Society for Infectious Diseases, Healthcare Infection Control Education Day, Improving Disinfection of the Surface Environment“, 27 July, Melbourne, Australia
157. 2018, Australian Society for Infectious Diseases, “Water Related Outbreaks and Response: It’s What Is Below the Surface That Sinks You“, 27 July, Melbourne, Australia

Invited National and International Lectures:

158. 2018, 17th Asia-Pacific Congress of Clinical Microbiology and Infection, 8th International Infection Control Conference, “Role of the Contaminated Environment in Transmission of Healthcare-Associated Pathogens: Challenges and Prevention”, Hong Kong, 30 August-2 September 2018.
159. 2018, 17th Asia-Pacific Congress of Clinical Microbiology and Infection, 8th International Infection Control Conference, “Unsettled Issues in Infection Control”, Hong Kong, 30 August-2 September 2018.
160. 2018, 17th Asia-Pacific Congress of Clinical Microbiology and Infection, 8th International Infection Control Conference, “Risks of Disease Transmission by Ultrasound Probes: Concerns and Solutions”, Hong Kong, 30 August-2 September 2018.
161. 2018, 17th Asia-Pacific Congress of Clinical Microbiology and Infection, 8th International Infection Control Conference, “Endoscope-Associated Infections and Safety Concerns: Is HLD Sufficient? Hong Kong, 30 August-2 September 2018.
162. 2018, London School of Hygiene and Tropical Medicine, “Demonstrating the Role of the Contaminated Environment in Transmission of Healthcare-Associated Pathogens: Focus on New Methods for Terminal Room Disinfection”, London, England, 6 November, 2018
163. 2019, International Conference on Prevention and Infection (ICPIC), Satellite Symposium, “Best practices for surface disinfection: Focus on terminal disinfection with UV-C”, Geneva Switzerland, 10-13 September 2019
164. 2019, IDweek; Session, “If I Built a Hospital: Designing to Optimize Infection Prevention”; talk, “The ideal infection prevention hospital: Antimicrobial surfaces or continuous disinfection methods”, Washington DC, 2 October-6 October.
165. 2020, Workshop on Ultraviolet Disinfection Technologies & Healthcare Associated Infections—Defining Standards and Metrology Needs; talk “Panel IV: Building environment and using EM/Light – Overview and best practices and us of EM/Light to date, gaps in research”, U.S. Department of Commerce, National Institute of Standards and Technology, Gaithersburg, MD, 14-15 January.
166. 2020, Workshop on Ultraviolet Disinfection Technologies & Healthcare Associated Infections—Defining Standards and Metrology Needs; talk “Panel V: Beyond UVC – reflective surfaces and coatings”, U.S. Department of Commerce, National Institute of Standards and Technology, Gaithersburg, MD, 14-15 January.
167. 2020, SHEA COVID-19 Town Hall webinar #1, Society for Healthcare Epidemiology of America, 29 March
168. 2020, SHEA COVID-19 Town Hall webinar #2, Society for Healthcare Epidemiology of America, 5 April
169. 2020, SHEA COVID-19 Town Hall webinar #3, Society for Healthcare Epidemiology of America, 12 April

Invited National and International Lectures:

- 170. 2020, SHEA COVID-19 Town Hall webinar #4, Society for Healthcare Epidemiology of America, 19 April
- 171. 2020, SHEA COVID-19 Town Hall webinar #5, Society for Healthcare Epidemiology of America, 26 April
- 172. 2020, SHEA COVID-19 Town Hall webinar #6, Society for Healthcare Epidemiology of America, 3 May
- 173. 2020, SHEA COVID-19 Town Hall webinar #7, Society for Healthcare Epidemiology of America, 17 May
- 174. 2020, COVID-19 Update: Focus on Ocular Disease, North Carolina Glaucoma Club (UNC/Wake Forest/Duke, 20 May

Scientific Papers: PubMed Citations:

1. Tolkoff-Rubin NE, **Weber D**, Fang LS, Kelly M, Wilkinson R, Rubin RH. Single-dose therapy with trimethoprim-sulfamethoxazole for urinary tract infection in women. *Rev Infect Dis*. 1982 Mar-Apr;4(2):444-8.
2. **Weber DJ**, Tolkoff-Rubin NE, Rubin RH. Amoxicillin and potassium clavulanate: an antibiotic combination. Mechanism of action, pharmacokinetics, antimicrobial spectrum, clinical efficacy and adverse effects. *Pharmacotherapy*. 1984 May-Jun;4(3):122-36.
3. **Weber DJ**, Wolfson JS, Swartz MN, Hooper DC. *Pasteurella multocida* infections. Report of 34 cases and review of the literature. *Medicine (Baltimore)*. 1984 May;63(3):133-54. Review.
4. Wolfson JS, Hopkins CC, Weber DJ, Richter JM, Waldron MA, McCarthy DM. An association between cryptosporidium and giardia in stool. *N Engl J Med*. 1984 Mar 22;310(12):788.
5. **Weber DJ**, Rutala WA, Samsa GP, Santimaw JE, Lemon SM. Obesity as a predictor of poor antibody response to hepatitis B plasma vaccine. *JAMA*. 1985 Dec 13;254(22):3187-9.
6. Wolfson JS, Richter JM, Waldron MA, **Weber DJ**, McCarthy DM, Hopkins CC. Cryptosporidiosis in immunocompetent patients. *N Engl J Med*. 1985 May 16;312(20):1278-82.
7. **Weber DJ**, Redfield RR, Lemon SM. Acquired immunodeficiency syndrome: epidemiology and significance for the obstetrician and gynecologist. *Am J Obstet Gynecol*. 1986 Aug;155(2):235-40.
8. **Weber DJ**, Rutala WA, Samsa GP, Bradshaw SE, Lemon SM. Impaired immunogenicity of hepatitis B vaccine in obese persons. *N Engl J Med*. 1986 May 22;314(21):1393.
9. Lemon SM, **Weber DJ**. Immunogenicity of plasma-derived hepatitis B vaccine: relationship to site of injection and obesity. *J Gen Intern Med*. 1986 May-Jun;1(3):199-201.
10. **Weber DJ**, Rutala WA, Kenyear SA, Lemon SM. Response to deltoid muscle injection of hepatitis B vaccine after failure to respond to gluteal injections. *JAMA*. 1986 Apr 25;255(16):2157.
11. **Weber DJ**, Hoffman KL, Thoft RA, Baker AS. Endophthalmitis following intraocular lens implantation: report of 30 cases and review of the literature. *Rev Infect Dis*. 1986 Jan-Feb;8(1):12-20. Review.
12. Cohen MS, **Weber DJ**. Outpatient antibiotic therapy for osteomyelitis. *JAMA*. 1987 Jul 17;258(3):322.
13. **Weber DJ**, Calderwood SB, Karchmer AW, Pennington JE. Ampicillin versus cefamandole as initial therapy for community-acquired pneumonia. *Antimicrob Agents Chemother*. 1987 Jun;31(6):876-82.
14. Rutala WA, **Weber DJ**, Thomann CA. Outbreak of wound infections following outpatient podiatric surgery due to contaminated bone drills. *Foot Ankle*. 1987 Jun;7(6):350-4.
15. **Weber DJ**, Rutala WA. *Bacillus* species. *Infect Control Hosp Epidemiol*. 1988 Aug;9(8):368-73. Review.
16. Rutala WA, **Weber DJ**, Thomann CA, John JF, Saviteer SM, Sarubbi FA. An outbreak of *Pseudomonas cepacia* bacteremia associated with a contaminated intra-aortic balloon pump. *J Thorac Cardiovasc Surg*. 1988 Jul;96(1):157-61.

Scientific Papers: PubMed Citations (continued)

17. **Weber DJ**, Saviteer SM, Rutala WA, Thomann CA. In vitro susceptibility of *Bacillus* spp. to selected antimicrobial agents. *Antimicrob Agents Chemother*. 1988 May;32(5):642-5.
18. **Weber DJ**, Rutala WA, Parham C. Epidemiology of nosocomial fungal infections. *Curr Top Med Mycol*. 1988;2:305-37. Review.
19. **Weber DJ**, Rutala WA. Hepatitis B immunization update. *Infect Control Hosp Epidemiol*. 1989 Dec;10(12):541-6. Review.
20. Hoffmann KK, **Weber DJ**, Rutala WA. Pseudoepidemic of *Rhodotorula rubra* in patients undergoing fiberoptic bronchoscopy. *South Med J*. 1989 Oct;82(10):1204-14.
21. **Weber DJ**, Rutala WA, Samsa GP, Sarubbi FA Jr, King LC. Epidemiology of tuberculosis in North Carolina, 1966 to 1986: analysis of demographic features, geographic variation, AIDS, migrant workers, and site of infection. *South Med J*. 1989 Oct;82(10):1204-14.
22. Brawley RL, **Weber DJ**, Samsa GP, Rutala WA. Multiple nosocomial infections. An incidence study. *Am J Epidemiol*. 1989 Oct;130(4):769-80.
23. **Weber DJ**, Saviteer SM, Rutala WA, Thomann CA. Clinical significance of *Bacillus* species isolated from blood cultures. *South Med J*. 1989 Jun;82(6):705-9.
24. Davis LG, **Weber DJ**, Lemon SM. Horizontal transmission of hepatitis B virus. *Lancet*. 1989 Apr 22;1(8643):889-93.
25. **Weber DJ**, Rutala WA. Management of HIV-1 infection in the hospital setting. *Infect Control Hosp Epidemiol*. 1989 Jan;10(1):3-7.
26. Kaplan AH, **Weber DJ**, Oddone EZ, Perfect JR. Infection due to *Actinobacillus actinomycetemcomitans*: 15 cases and review. *Rev Infect Dis*. 1989 Jan-Feb;11(1):46-63. Review.
27. Hopkins CC, **Weber DJ**, Rubin RH. Invasive aspergillus infection: possible non-ward common source within the hospital environment. *J Hosp Infect*. 1989 Jan;13(1):19-25.
28. Becherer P, **Weber D**. "The needle and the damage done"? Responding to a needle stick. *N C Med J*. 1989 May;50(5):281-3.
29. **Weber DJ**, Wilson MB, Rutala WA, Thomann CA. Manual ventilation bags as a source for bacterial colonization of intubated patients. *Am Rev Respir Dis*. 1990 Oct;142(4):892-4.
30. Cole EC, Rutala WA, Nessen L, Wannamaker NS, **Weber DJ**. Effect of methodology, dilution, and exposure time on the tuberculocidal activity of glutaraldehyde-based disinfectants. *Appl Environ Microbiol*. 1990 Jun;56(6):1813-7.
31. Buehrer JL, **Weber DJ**, Meyer AA, Becherer PR, Rutala WA, Wilson B, Smiley ML, White GC 2nd. Wound infection rates after invasive procedures in HIV-1 seropositive versus HIV-1 seronegative hemophiliacs. *Ann Surg*. 1990 Apr;211(4):492-8.
32. Kaplan AH, **Weber DJ**, Davis L, Israel F, Wells RJ. Short courses of antibiotics in selected febrile neutropenic patients. *Am J Med Sci*. 1991 Dec;302(6):353-4.

Scientific Papers: PubMed Citations (continued)

33. **Weber DJ**, Hoffmann KK, Rutala WA. Management of the healthcare worker infected with human immunodeficiency virus: lessons from nosocomial transmission of hepatitis B virus. *Infect Control Hosp Epidemiol*. 1991 Oct;12(10):625-30. Review.
34. Rutala WA, Cole EC, Wannamaker NS, **Weber DJ**. Inactivation of *Mycobacterium tuberculosis* and *Mycobacterium bovis* by 14 hospital disinfectants. *Am J Med*. 1991 Sep 16;91(3B):267S-271S.
35. **Weber DJ**, Becherer PR, Rutala WA, Samsa GP, Wilson MB, White GC 2nd. Nosocomial infection rate as a function of human immunodeficiency virus type 1 status in hemophiliacs. *Am J Med*. 1991 Sep 16;91(3B):206S-212S.
36. **Weber DJ**, Hansen AR. Infections resulting from animal bites. *Infect Dis Clin North Am*. 1991 Sep;5(3):663-80. Review.
37. Rutala WA, **Weber DJ**. Infectious waste--mismatch between science and policy. *N Engl J Med*. 1991 Aug 22;325(8):578-82.
38. **Weber DJ**, Rutala WA, Orenstein WA. Prevention of mumps, measles, and rubella among hospital personnel. *J Pediatr*. 1991 Aug;119(2):322-6. Review.
39. Himmelberg CJ, Pleasants RA, **Weber DJ**, Kessler JM, Samsa GP, Spivey JM, Morris TL. Use of antimicrobial drugs in adults before and after removal of a restriction policy. *Am J Hosp Pharm*. 1991 Jun;48(6):1220-7.
40. Rutala WA, Clontz EP, **Weber DJ**, Hoffmann KK. Disinfection practices for endoscopes and other semicritical items. *Infect Control Hosp Epidemiol*. 1991 May;12(5):282-8.
41. Hoffmann KK, **Weber DJ**, Rutala WA. Infection control strategies relevant to employee health. *AAOHN J*. 1991 Apr;39(4):167-81. Review.
42. **Weber DJ**, Walker DH. Rocky Mountain spotted fever. *Infect Dis Clin North Am*. 1991 Mar;5(1):19-35. Review.
43. Rutala DR, Rutala WA, **Weber DJ**, Thomann CA. Infection risks associated with spirometry. *Infect Control Hosp Epidemiol*. 1991 Feb;12(2):89-92.
44. **Weber DJ**, Rutala WA, Samsa GP, Wilson MB, Hoffmann KK. Relative frequency of nosocomial pathogens at a university hospital during the decade 1980 to 1989. *Am J Infect Control*. 1992 Aug;20(4):192-7.
45. Hoffmann KK, **Weber DJ**, Samsa GP, Rutala WA. Transparent polyurethane film as an intravenous catheter dressing. A meta-analysis of the infection risks. *JAMA*. 1992 Apr 15;267(15):2072-6.
46. Hanson LC, **Weber DJ**, Rutala WA. Risk factors for nosocomial pneumonia in the elderly. *Am J Med*. 1992 Feb;92(2):161-6.
47. Landis SE, Schoenbach VJ, **Weber DJ**, Mittal M, Krishan B, Lewis K, Koch GG. Results of a randomized trial of partner notification in cases of HIV infection in North Carolina. *N Engl J Med*. 1992 Jan 9;326(2):101-6.

Scientific Papers: PubMed Citations (continued)

48. Rutala WA, Gergen MF, **Weber DJ**. Sporidicidal activity of chemical sterilants used in hospitals. *Infect Control Hosp Epidemiol*. 1993 Dec;14(12):713-8.
49. **Weber DJ**. Infections acquired in the great out-of-doors of North Carolina. *N C Med J*. 1993 Oct;54(10):537-42.
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