

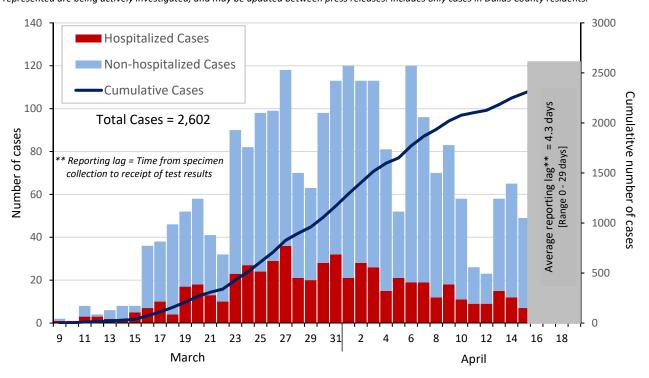
# Dallas County Health and Human Services 2019 Novel Coronavirus (COVID-19) Summary

### April 21, 2020

- As of April 20, 2020, DCHHS is reporting 90 additional cases of 2019 novel coronavirus (COVID-19), bringing the total case count in Dallas County to 2,602, including 64 deaths.
- The numbers of hospital admissions and intensive care hospitalizations for COVID-19 for the week ending 4/18 (Week 16) declined from the preceding 2 weeks.
- Of 617 cases requiring hospitalization, most have been either over 60 years of age or have had at least one known high-risk chronic health condition. Diabetes has been an underlying high-risk health condition reported in about a third of all hospitalized patients with COVID-19.
- Most (67%) deaths have been male. One third of deaths have been associated with long-term care facilities.
- The percentage of respiratory specimens testing positive for SARS-CoV-2 was 10.8% at area hospitals in week 15.

Figure 1. Daily and Cumulative COVID-19 Cases by Date of Test collection, Dallas County: March 10 – April 20, 2020\*

\*The data in this summary reflect cumulative data received as of 2:00 pm, April 21, 2020. All data are preliminary and subject to change as cases represented are being actively investigated, and may be updated between press releases. Includes only cases in Dallas County residents.



**Table 1.** Cumulative COVID-19 Cases by Age Groups and Gender, Dallas County

Age Group (years)	# Cases (N=2,602)	% of Total Cases <sup>+</sup>			
0 to 17	55	2%			
18 to 40	870	35%			
41 to 64	1,134	45%			
≥65	450	18%			
Sex					
Female	1,166	47%			
Male	1,341	54%			

\*Percentages are calculated among cases with known age/sex

**Table 2.** Source of Laboratory Testing for Reported COVID-19 Positive Cases, Dallas County

Source of Laboratory Testing for Reported Positive Tests	# Tests (N=2,602)	% of Total Cases	
Commercial or Hospital Laboratory*	2,299	88%	
Dallas LRN Laboratory	288	11%	
Other Public Health Laboratory	15	1%	

<sup>\*</sup> Includes: AIT, ARUP, CPL, Excelsior, LabCorp, Magnolia, Medfusion, Prism, Quest, Viracor, and multiple hospital laboratories

Table 3. Respiratory Virus Testing by North Texas Hospitals: March 22 – April 11, 2020 (CDC Weeks 13-15)

Week Ending	3/28/20		4/4/20		4/11/20	
	Positive/Total %		Positive/Total	%	Positive/Total	% Positive
	Tests	Positive	Tests	Positive	Tests	% Positive
SARS-CoV-2 Novel Coronavirus	168 /1,461	11.5%	336 /2,359	14.2%	276 /2,390	11.5%
Influenza	14 /1,772	0.8%	5 /1,067	0.4%	1/301	0.3%
Seasonal (non-SARS-2) Coronavirus	15 /1,123	1.3%	9 /545	1.7%	0 /293	0%
Adenovirus (respiratory)	15 /1,129	1.3%	11 /560	2.0%	5 /293	1.7%
Metapneumovirus	114 /1,129	10.1%	29 /630	4.6%	14 /293	4.8%
Rhinovirus/Enterovirus	99 /1,129	8.8%	43 /630	6.8%	18 /293	6.1%
RSV	10 /1,272	0.8%	4 /763	0.5%	1 /343	0.3%

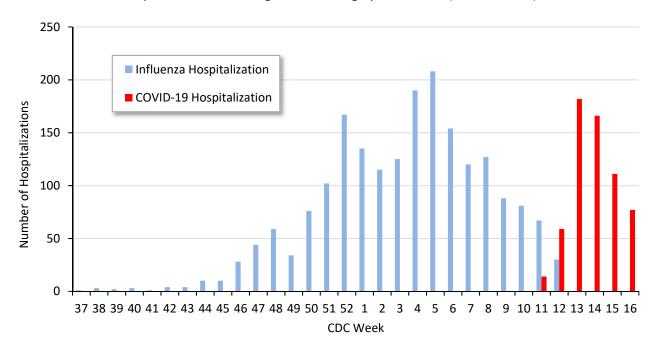
Data sources: National Respiratory and Enteric Virus Surveillance System and additional hospitals voluntarily reporting directly to DCHHS. Testing denominators include out-of-county patients and testing performed only through hospitals in Dallas County. (Does not include FEMA drive-thru clinics)

Table 4. Transmission Risk Factors for Cumulative COVID-19 Cases, Dallas County

Exposure Risk Factor	Cases (N= 2,602)	% of Total Cases	
International Travel	55	2.1%	
Domestic Travel (Out-of-state)	113	4.3%	
Cruise Ship Travel	8	0.3%	
Long-Term Care Facility (Residency)	197	7.6%	
Jail (Inmate)	81	3.1%	
Homeless Shelter	16	0.6%	
Close contact or Presumed Community Transmission*	2,132	81.9%	

<sup>\*</sup>Includes: household transmission, and cases with no other exposure risk factors identified

**Figure 2.** Influenza and COVID-19 Hospitalizations by Week of Admission, Dallas County: September 2019 through week ending April 18, 2020 (CDC Week 16)\*



<sup>\*</sup>The data in this summary reflect cumulative data received as of 7:00 pm yesterday. All data are preliminary and subject to change as cases represented are being actively investigated, and may be updated between press releases. Includes only cases in Dallas County residents.

Table 5. Cumulative COVID-19 Case Characteristics, Dallas County: March 10 – April 16, 2020

	Non-Hospitalized Cases	%
Not Hospitalized	N = 1,985	75% of Total Cases
Outpatient/ Urgent Care/ Drive-through	1,663	84%
Emergency Department only	322	16%

		Hospitalized Cases	%		
Ever Hospitalized		N = 617	25% of Total Cases		
Admitted to Intensive	Care Unit	197	32%		
Mechanical Ventilation	1	118	19%		
Male		362	59%		
	0-17	1	0%		
Ago Group (voors)	18-40	95	15%		
Age Group (years)	41-64	283	46%		
	≥65	238	39%		
Presence of ≥1 high risk o	Presence of ≥1 high risk condition		55%		
Diabetes		182	30%		
Lung Disease (e.g. COI	Lung Disease (e.g. COPD, asthma)		13%		
Heart Disease (e.g. CHF)		84	14%		
Kidney Disease (e.g. E.	Kidney Disease (e.g. ESRD, dialysis)		8%		
Cancer, Immune-com	oromise	57	9%		
Pregnancy		7	1%		
	White	122	20%*		
Hispanic		194	31%*		
Race/ Ethnicity	Black	161	26%*		
	Other	57	9%*		
	Non-reported/ Unknown		13%		

<sup>\*</sup> Percentages can also be calculated to exclude cases for which race/ethnicity was unknown (not reported).

		Deaths	%	
		N = 64	3% of Total Cases	
Male		43	67%	
	18-40	2	3%	
Age Group (years)	41-64	13	20%	
	≥65	49	77%	
Presence of ≥1 high risk condition		48	80%**	
Diabetes		23	38%**	
	White	29	<b>45%</b> (29% of population)†	
Race/ Ethnicity	Hispanic	17	<b>27%</b> (41% of population)†	
Race/ Etimicity	Black	15	<b>23%</b> (24% of population)†	
	Other	3	5% (6% of population)†	

<sup>\*\*</sup> Percentages are of 51 cases for which underlying health conditions were reported

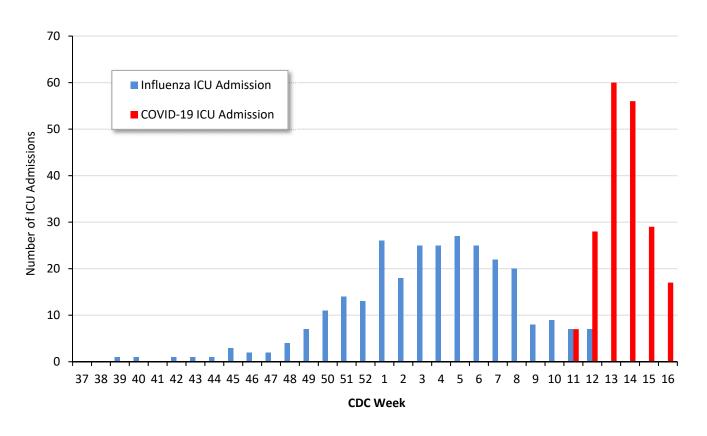
<sup>† 2019</sup> U.S. Census population estimates for Dallas County

**Table 6.** Summary of Influenza and COVID-19 Hospitalizations and Deaths from Dallas County Hospitals, Vital Statistics and Medical Examiner's Office

Week Ending	03/07	03/14	03/21	03/28	04/04	4/11	4/18	9/08/19-
CDC Week	10	11	12	13	14*	15*	16*	Present
Influenza hospitalizations <sup>1</sup>	81	67	30	N/A	N/A	N/A	N/A	1,990
Influenza ICU admissions <sup>1</sup>	9	7	7	N/A	N/A	N/A	N/A	281
Confirmed influenza-associated deaths <sup>2</sup>	2	0	0	N/A	N/A	N/A	N/A	25
COVID-19 hospitalizations <sup>3</sup>	0	14	59	182	166*	111*	77*	617*
COVID-19 ICU admissions <sup>3</sup>	0	7	27	60	56*	29*	17*	197*
Confirmed COVID-19-associated deaths	0	0	3	11	8*	16*	24*	64*

<sup>\*</sup>All data are preliminary and subject to change as additional information is received.

**Figure 3.** Intensive Care Unit Hospitalizations for Influenza and COVID-19 by Week of Admission, Dallas County: September 2019 through week ending April 18, 2020 (CDC Week 16)\*



<sup>\*</sup>The data in this summary reflect cumulative data received as of 7:00 pm yesterday. All data are preliminary and subject to change as cases represented are being actively investigated, and may be updated between press releases. Includes only cases in Dallas County residents.

<sup>&</sup>lt;sup>1</sup> Reflects all influenza-associated hospitalizations reported from 14 hospitals located within Dallas County by week of any positive influenza tests.

<sup>&</sup>lt;sup>2</sup> Confirmed influenza-associated deaths as defined by a positive laboratory test and any of the following: (1) death certificate denotation, (2) medical record documentation of compatible symptoms and clear progression from illness to death, or (3) determination by the County Medical Examiner's office (ME) of no alternate cause of death. Does not include possible influenza-associated deaths with pending determination of primary cause of death.

<sup>&</sup>lt;sup>3</sup> Reflect all COVID-19-associated hospitalizations reported from area hospitals within Dallas County by week of admission; data as of 7:00 pm yesterday.

8.0 •ILI 7.0 CLI Proportion of Daily ED Visits (%) 6.0 5.0 4.0 3.0 2.0 1.0 0.0 2019-49 2019-44 2019-45 2019-46 2019-50 2020-1 2020-2 2020-3 2020-4 2020-5 2020-6 2020-8 2020-9 2020-10 2019-41 2019-42 2019-47 2019-48 2019-52 2020-7 2020-11 2020-12 2019-40 2019-51

Figure 4. Syndromic Surveillance of Emergency Department Visits for COVID-like Illness (CLI)\* and Influenza-like Illness (ILI)\*\*, Dallas County: September 29, 2019 – April 18, 2020

CDC Week

ESSENCE Data is from 18 hospital emergency departments voluntarily reporting numbers of persons presenting with self-reported chief complaints.

**Table 7.** Cumulative COVID-19 Cases by City of Residence within Dallas County as of April 20, 2020 (e.g. Does not include cases who reside in portions of cities which are not within Dallas County.)

City of Residence	Cases (N=2,602)	% of Total Cases		
Addison	15	0.6%		
Balch Springs	18	0.7%		
Carrollton	36	1.4%		
Cedar Hill	45	1.7%		
Cockrell Hill	4	0.2%		
Coppell	22	0.8%		
Dallas	1,476	56.7%		
DeSoto	80	3.1%		
Duncanville	47	1.8%		
Farmers Branch	41	1.6%		
Garland	229	8.8%		
Glenn Heights	13	0.5%		
Grand Prairie	65	2.5%		
Highland Park	15	0.6%		
Hutchins	1	0.0%		
Irving	218	8.4%		
Lancaster	40	1.5%		
Mesquite	103	4.0%		
Richardson	47	1.8%		
Rowlett	40	1.5%		
Sachse	9	0.3%		
Seagoville	5	0.2%		
Sunnyvale	7	0.3%		
University Park	23	0.9%		
Wilmer	2	0.1%		
Wylie	1	0.0%		

<sup>\*</sup> CLI is defined as chief complaint of fever and cough or shortness of breath or difficulty breathing.

<sup>\*\*</sup>ILI is defined as chief complaint of fever and cough or sore throat or mention of influenza.

### CDC Priorities for COVID-19 Testing (rev. date: 3/24/20)

(See CDC Guidance for Evaluating and Reporting Persons Under Investigation (PUI) at:

https://www.cdc.gov/coronavirus/2019-nCoV/hcp/clinical-criteria.html)

PRIORITY 1: Ensure optimal care options for all hospitalized patients, lessen the risk of nosocomial infections, and maintain the integrity of the healthcare system

- Hospitalized patients
- Symptomatic healthcare workers

## PRIORITY 2: Ensure those who are at highest risk of complication of infection are rapidly identified and appropriately triaged

- Patients in long-term care facilities with symptoms
- Patients 65 years of age and older with symptoms
- Patients with underlying conditions with symptoms
- First responders with symptoms

## PRIORITY 3: As resources allow, test individuals in the surrounding community of rapidly increasing hospital cases to decrease community spread, and ensure health of essential workers

- Critical infrastructure workers with symptoms
- Individuals who do not meet any of the above categories with symptoms
- Healthcare workers and first responders
- Individuals with mild symptoms in communities experiencing high COVID-19 hospitalizations

#### **NON-PRIORITY**

Individuals without symptoms

### Many thanks to our area hospitals and healthcare providers for reporting lab-confirmed COVID-19 cases

New COVID-19 cases are reported as a daily aggregate, with this cumulative summary updated Tuesdays and Fridays.

DCHHS COVID-19 Summaries and Case Report Form are accessible at: <a href="https://www.dallascounty.org/departments/dchhs/2019-novel-coronavirus.php">https://www.dallascounty.org/departments/dchhs/2019-novel-coronavirus.php</a>

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