FOR IMMEDIATE RELEASE
March 11, 2021

Dallas County Reports 351 New Positive 2019 Novel Coronavirus (COVID-19) Cases and 35 Deaths, Including 122 Probable Cases

DALLAS -- As of 2:00 pm March 11, 2021 Dallas County Health and Human Services is reporting 351 additional positive cases of 2019 novel coronavirus (COVID-19) in Dallas County, 229 confirmed cases and 122 probable cases. There is a cumulative total of 248,724 confirmed cases (PCR test). There is a cumulative total of 36,959 probable cases (antigen test). A total of 3,236 Dallas County residents have lost their lives due to COVID-19 illness.

Dallas County Health and Human Services (DCHHS) is providing initial vaccinations to those most at risk of exposure to COVID-19 and over 148,000 total doses of COVID-19 vaccine have been administered at the Fair Park mega-vaccine clinic, which started operations on Monday, January 11. At Fair Park, first doses through the Community Vaccination Center and second doses through DCHHS will continue through Friday.

The additional deaths being reported today include the following:

- A woman in her 20’s who was a resident of the City of Farmers Branch. She had been critically ill in an area hospital and had underlying high risk health conditions.
- A woman in her 30’s who was a resident of the City of Garland. She had been critically ill in an area hospital and had underlying high risk health conditions.
- A man in his 40’s who was a resident of the City of Irving. He had been critically ill in an area hospital and had underlying high risk health conditions.
- A man in his 40’s who was a resident of the City of Garland. He was found deceased at home and did not have underlying high risk health conditions.
- A man in his 40’s who was a resident of the City of Dallas. He expired at home and did not have underlying high risk health conditions.
- A man in his 50’s who was a resident of the City of Dallas. He had been critically ill in an area hospital and had underlying high risk health conditions.
- A woman in her 50’s who was a resident of the City of Rowlett. She had been critically ill in an area hospital and had underlying high risk health conditions.
- A man in his 60’s who was a resident of the City of Grand Prairie. He expired in hospice and had underlying high risk health conditions.
- A woman in her 60’s who was a resident of the City of Garland. She had been hospitalized.
- A man in his 60’s who was a resident of the City of Grand Prairie. He had been hospitalized.
- A man in his 60’s who was a resident of the City of Mesquite. He expired in a hospital ED and had underlying high risk health conditions.
- A man in his 60’s who was a resident of a long-term care facility in the City of Garland. He had been hospitalized and had underlying high risk health conditions.
- A man in his 60’s who was a resident of the City of Cockrell Hill. He had been hospitalized and had underlying high risk health conditions.
- A woman in her 60’s who was a resident of the City of Dallas. She expired in a facility and had underlying high risk health conditions.
- A woman in her 70’s who was a resident of the City of Dallas. She had been critically ill in an area hospital and had underlying high risk health conditions.
- A man in his 70’s who was a resident of the City of Dallas. He had been critically ill in an area hospital and had underlying high risk health conditions.
- A woman in her 70’s who was a resident of the City of Dallas. She had been hospitalized and had underlying high risk health conditions.
- A woman in her 70’s who was a resident of the City of Dallas. She had been critically ill in an area hospital and had underlying high risk health conditions.
- A man in his 70’s who was a resident of a long-term care facility in the City of Balch Springs. He expired in the facility and had underlying high risk health conditions.
- A man in his 70’s who was a resident of a long-term care facility in the City of Mesquite. He expired in the facility and had underlying high risk health conditions.
- A man in his 80’s who was a resident of the City of Dallas. He had been hospitalized and had underlying high risk health conditions.
- A woman in her 80’s who was a resident of the City of Dallas. She had been hospitalized and had underlying high risk health conditions.
- A man in his 80’s who was a resident of the City of Mesquite. He had been hospitalized and had underlying high risk health conditions.
- A woman in her 80’s who was a resident of the City of Dallas. She expired in hospice care and had underlying high risk health conditions.
- A woman in her 80’s who was a resident of the City of Desoto. She had been critically ill in an area hospital and had underlying high risk health conditions.
- A man in his 80’s who was a resident of a long-term care facility in the City of Dallas. He expired in the facility and had underlying high risk health conditions.
- A woman in her 80’s who was a resident of the City of Grand Prairie. She had been hospitalized and had underlying high risk health conditions.
- A man in his 80’s who was a resident of the City of Irving. He had been critically ill in an area hospital and had underlying high risk health conditions.
- A woman in her 80’s who was a resident of the City of Dallas. She expired in hospice care and had underlying high risk health conditions.
- A woman in her 80’s who was a resident of the City of Grand Prairie. She had been hospitalized and had underlying high risk health conditions.
- A woman in her 80’s who was a resident of a long-term care facility in the City of Irving. She expired in hospice and had underlying high risk health conditions.
- A man in his 90’s who was a resident of the City of Dallas. He expired at home and had underlying high risk health conditions.
- A man in his 90’s who was a resident of the City of Dallas. He had been hospitalized and had underlying high risk health conditions.

One case of a B.1.526 variant of SARS-CoV-2 has been newly reported in a resident of Dallas County; this individual did not have a history of travel outside of Dallas County. Nine cases of the SARS-CoV-2 variant B.1.1.7 have been identified in residents of Dallas County. One was hospitalized and five had history of recent domestic travel outside of Texas. The provisional seven-day average of daily new confirmed and probable cases (by date of test collection) for CDC week 8 was 457, which is a rate of 17.3 daily new cases per 100,000 residents. The percentage of respiratory specimens testing positive for SARS-CoV-2 remains high, with 12.1% of symptomatic patients presenting to area hospitals testing positive in week 8 (week ending 2/27/21).
During the past 30 days, there were 1,714 COVID-19 cases in school-aged children and staff reported from 504 separate K-12 schools in Dallas County. An additional death of a teacher’s assistant in a Dallas County K-12 school from COVID-19 was confirmed this past week.

There are currently 43 active long-term care facility outbreaks. A cumulative total of 4,225 residents and 2,332 healthcare workers in long-term facilities in Dallas have been diagnosed with COVID-19. Of these, 969 have been hospitalized and 624 have died. About 22% of all deaths reported to date have been associated with long-term care facilities. Eleven outbreaks of COVID-19 in congregate-living facilities (e.g. homeless shelters, group homes, and halfway homes) have been reported in the past 30 days. A cumulative total of 402 residents and 203 staff members in congregate-living facilities in Dallas have been diagnosed with COVID-19.

Of all confirmed cases requiring hospitalization to date, more than two-thirds have been under 65 years of age. Diabetes has been an underlying high-risk health condition reported in about a third of all hospitalized patients with COVID-19. New cases are being reported as a daily aggregate, with more detailed summary reports updated Tuesday and Friday evenings are available at: https://www.dallascounty.org/departments/dchhs/2019-novel-coronavirus/daily-updates.php.

Local health experts use hospitalizations, ICU admissions, and ER visits as three of the key indicators in determining the COVID-19 Risk Level (color-coded risk) and corresponding guidelines for activities during our COVID-19 response. There were 268 COVID-19 patients in acute care in Dallas County for the period ending on Wednesday, March 10. The number of emergency room visits for COVID-19 like symptoms in Dallas County was 396 for the same time-period, which represents around 15 percent of all emergency department visits in the county according to information reported to the North Central Texas Trauma Regional Advisory Council. These decreasing numbers are evidence of good practices related to masking, distancing and avoiding gatherings, unlike what we saw over the winter holidays. Please be mindful of these recommended actions over spring break and spring holidays. We remain concerned for additional waves due to a potential rise in variants and because community spread remains high creating an environment for cases to reignite. We encourage everyone to follow public health guidance, continue masking and avoid crowded and non-essential indoor settings. Updated UTSW forecasting indicates hospitalizations between 130-220 and daily case counts between 240-500 by March 25. You can find additional information on risk-level monitoring data here.
“Today we report 35 additional deaths from COVID-19 and 351 additional positive cases. One of the cases we report today is the B.1.526 variant that began in New York City. This, coupled with several cases last week of the B.1.1.7 variant that began in the United Kingdom, shows that the more contagious variants have arrived here in Dallas County. The person diagnosed with the B.1.526 variant did not have a history of travel outside of Dallas County. It is likely that many others with milder symptoms, who were not tested, are transmitting these more contagious variants. The B.1.1.7 and B.1.526 variants currently make up over half the cases in New York City.

The emergence of these strains is another strong reason to continue to wear a mask, social distance, wash hands frequently, avoid crowds and forego get-togethers. By practicing the fact-based approaches that provided
protection for the past year, coupled with registering in as many places as you are willing to drive, and being vaccinated as soon as it is your turn, we will beat COVID-19 this year. It takes resolve on all of our parts and grace towards one another.

Please take care of yourself, not only physically, but also mentally, emotionally, and spiritually. Get plenty of sleep, eat right, exercise, spend time with people that you love, practice intentional gratitude, and laugh out loud at something every day. This has been a long ordeal for all of us, but now is not the time to lose our resolve. Let’s continue to make the small sacrifices that patriotism and public health require to protect our community and our country,” said Dallas County Judge Clay Jenkins.

All Dallas County COVID-19 Updates and Information can be found here: https://www.dallascounty.org/covid-19/ and all guidance documents can be found here: https://www.dallascounty.org/covid-19/guidance-health.php

Specific Guidance for the Public:

- Dallas County COVID-19 Related Health Guidance for the Public
- Dallas County Measures for Protecting An Institution’s Workforce from COVID-19 Infection: Employer/Employee Guidance
- Dallas County Guidance for Individuals at High-Risk for Severe COVID-19

The Centers for Disease Control and Prevention (CDC) recommends taking everyday preventive actions to help prevent the spread of respiratory diseases, including:

- Avoid close contact outside your home: Put 6 feet of distance between yourself and people who don’t live in your household.
- Cover your mouth and nose with a cloth face cover when around others and continue to keep about 6 feet between yourself and others. The cloth face cover is not a substitute for social distancing.
- Stay home when you are sick, except to seek medical care
- Wash your hands often and with soap and water for at least 20 seconds and help young children to do the same. If soap and water are not available, use an alcohol-base hand sanitizer with at least 60% alcohol.
- Avoid touching your eyes, nose, and mouth with unwashed hands.
- Avoid close contact with people who are sick.
- Clean and disinfect frequently touched objects and surfaces daily using a regular household cleaning spray or wipes.
- Cover your cough or sneeze with a tissue, then throw the tissue in the trash. If you do not have a tissue, use your sleeve, not your hands. Immediately wash your hands.
- Monitor your health daily. Be alert for symptoms. Take your temperature and follow CDC guidance if symptoms develop.

Additional information is available at the following websites:

- DSHS: https://dshs.texas.gov/coronavirus/

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