



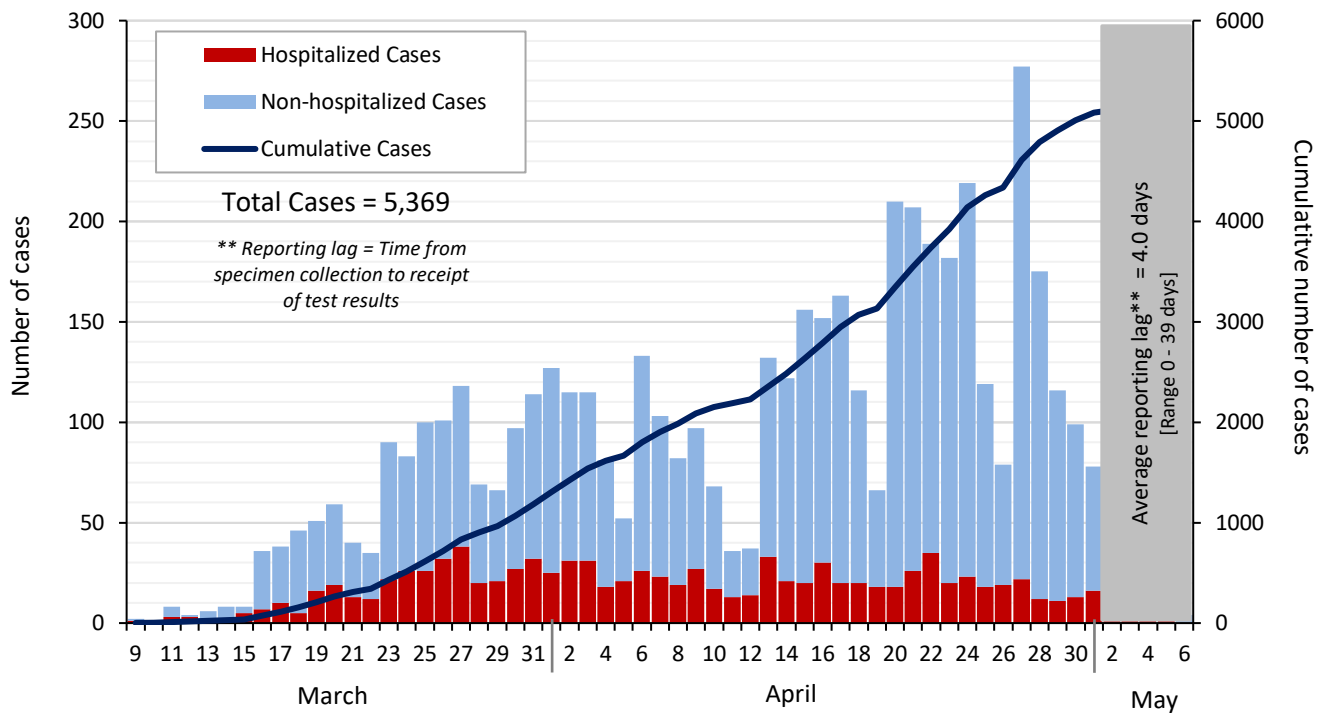
Dallas County Health and Human Services 2019 Novel Coronavirus (COVID-19) Summary

May 8, 2020

- As of May 8, 2020, DCHHS is reporting 249 additional cases of 2019 novel coronavirus (COVID-19), bringing the total case count in Dallas County to 5,369, including 135 confirmed deaths.
- Of 1,029 cases requiring hospitalization, two-thirds (66%) were under 65 years of age, and about half did not have any chronic health conditions. Diabetes has been an underlying high-risk health condition reported in under a third of all hospitalized patients with COVID-19.
- Of cases requiring hospitalization who reported employment, over 80% have been critical infrastructure workers, with a broad range of affected occupational sectors, including: healthcare, transportation, food and agriculture, public works, finance, communications, clergy, first responders and other essential functions.
- Thirty-six percent (36%) of deaths have been associated with long-term care facilities.
- The percentage of respiratory specimens testing positive for SARS-CoV-2 was 9.4% at area hospitals in week 18.

Figure 1. Daily and cumulative COVID-19 cases by date of test collection, Dallas County: March 10 – May 8, 2020*

*PCR test data received as of 8:00 pm, May 7, 2020, for residents of Dallas County tested with known specimen collection dates. All data are preliminary and subject to change as cases represented are being actively investigated and as additional reports are received for the most recent week.



**Reporting lag = Time from specimen collection to receipt of test results

Table 1. Source of laboratory testing for confirmed cases of COVID-19, Dallas County

Source of Laboratory Testing for Reported Positive PCR Tests	# Tests (N=5,369)	% of Total Cases
Commercial or Hospital Laboratory*	4,811	90%
Dallas LRN Laboratory	547	10%
Other Public Health Laboratory	11	1%

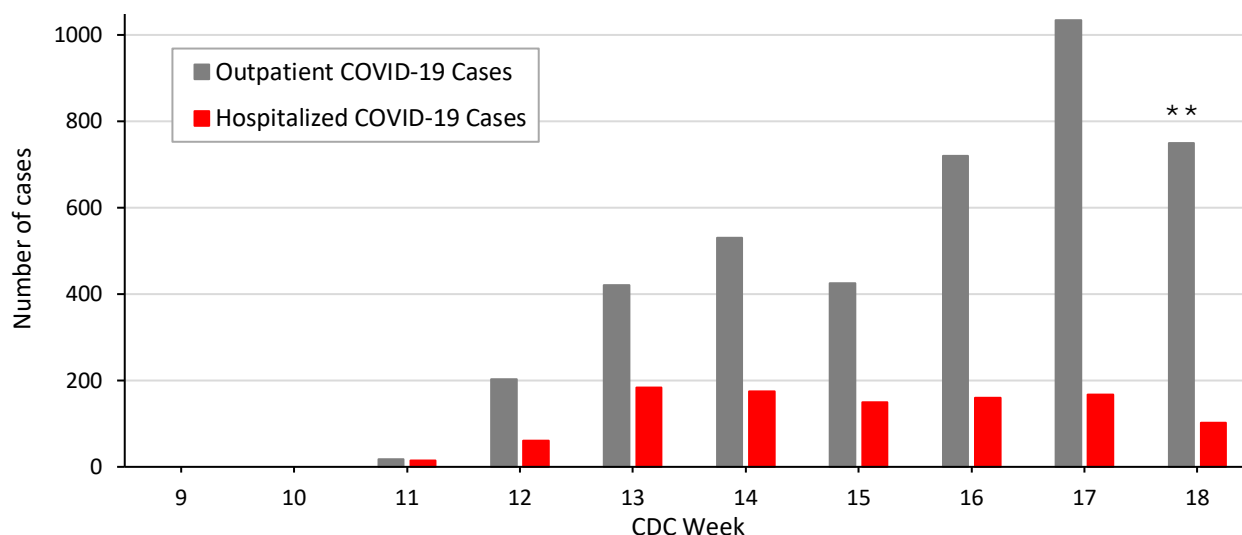
* Includes: AIT, ARUP, CPL, Excelsior, LabCorp, Magnolia, Medfusion, Prism, Quest, Viracor, and multiple hospital laboratories

Table 2. Characteristics of cumulative confirmed COVID-19 cases, Dallas County: March 9 – May 7, 2020

		Number	% of Total Cases ⁺
Total Cases in Dallas County residents		5,369	100%
Age Group (years)	0 to 17	255	5%
	18 to 40	2,032	39%
	41 to 64	2,220	42%
	≥65	767	14%
Sex	Female	2,098	46%
	Male	2,474	54%
Not Hospitalized (Includes: Outpatient, urgent care, drive-through, ED)		4,340	81%
Ever Hospitalized		1,029	19%

⁺ Percentages calculated among cases with known age/sex

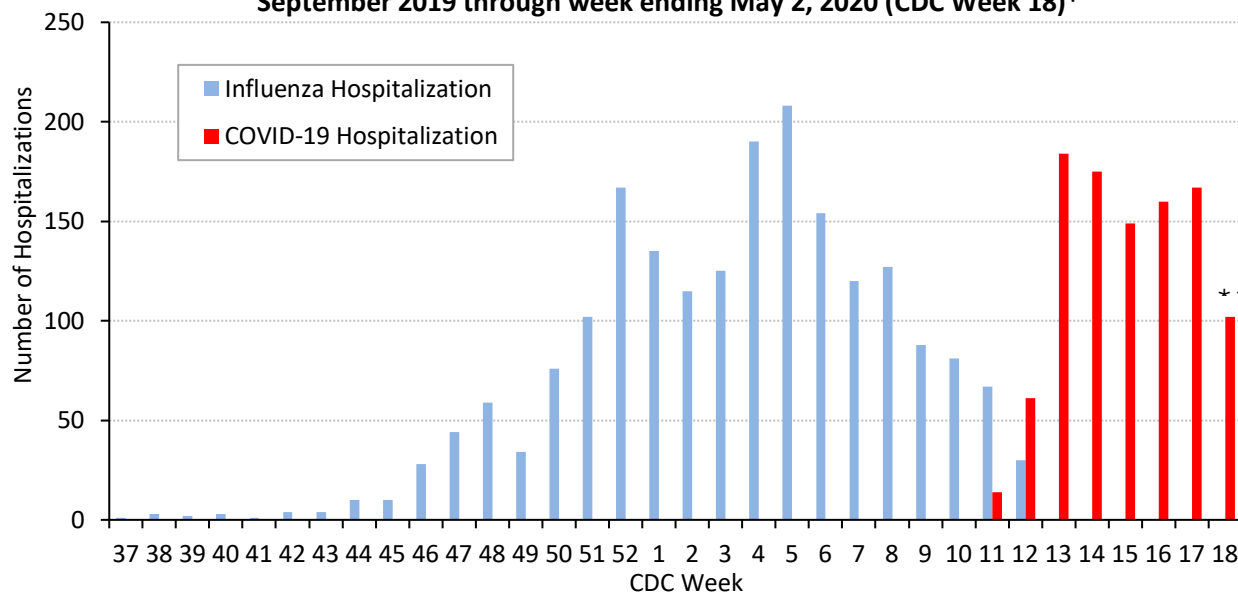
Figure 2. Non-hospitalized* vs hospitalized COVID-19 cases by week of test collection, Dallas County: September 2019 through week ending May 2, 2020 (CDC Week 18)



*Non-hospitalized includes all patients not admitted to acute-care hospitals (e.g. outpatient, urgent care, drive-through, ED-only, LTCF)

** All data are preliminary and subject to change as cases represented are being actively investigated and as additional reports are received.

Figure 3. Influenza and COVID-19 hospitalizations by week of admission, Dallas County: September 2019 through week ending May 2, 2020 (CDC Week 18)*



* Dallas County residents diagnosed with confirmed COVID-19 by PCR testing.

** All data are preliminary and subject to change as cases represented are being actively investigated and as additional reports are received.

Table 3. Characteristics of cumulative hospitalized confirmed COVID-19 cases, Dallas County: March 10 – May 7, 2020

		Hospitalized Cases	%
<i>Ever Hospitalized</i>		N = 1,029	19% of Total Cases
Admitted to Intensive Care Unit		311	30%
Mechanical Ventilation		199	19%
Sex	Male	582	57%
	Female	447	43%
Age Group (years)	0-17	11	1%
	18-40	178	17%
	41-64	492	48%
	≥65	348	34%
Presence of ≥1 high risk condition		495	48%
Diabetes		278	27%
Lung Disease (e.g. COPD, asthma)		125	12%
Heart Disease (e.g. CHF)		135	13%
Kidney Disease (e.g. ESRD, dialysis)		86	8%
Cancer, Immune-compromise		89	9%
Pregnancy		15	1%
Race/ Ethnicity	White	171	17%*
	Hispanic	459	45%*
	Black	221	21%*
	Other	14	1%*
	Non-reported/ Unknown	135	13%

* Percentages can also be calculated to exclude cases for which race/ethnicity was not reported

Table 4. Characteristics of cumulative hospitalized confirmed COVID-19 deaths, Dallas County: March 10 – May 7, 2020

<i>Death classified as confirmed if decedent was a Dallas County resident with a positive COVID-19 PCR test. Data are obtained from ME, hospitals, and vital statistics.</i>		Confirmed Deaths	%
		N = 135	3% of Total Cases
Sex	Male	91	67%
	Female	44	33%
Age Group (years)	17-40	8	6%
	41-64	31	23%
	≥65	96	71%
Resident of a Long-Term Care Facility		52	39%
Presence of ≥1 high risk condition		88	73%**
Diabetes		48	40%**
Race/ Ethnicity	White	49	36% (29% of population)†
	Hispanic	42	31% (41% of population)†
	Black	31	23% (24% of population)†
	Other	7	5% (6% of population)†

** Percentages are among cases for which underlying health conditions were reported.

† 2019 U.S. Census population estimates for Dallas County

Table 5. Respiratory virus testing by North Texas hospitals: March 29 – May 2, 2020 (CDC Weeks 14-18)

Week Ending	4/4/20		4/11/20		4/18/20		4/25/20		5/2/20	
PCR Tests for:	Positive/ Total Tests	% Positive	Positive/ Total Tests	% Positive	Positive/ Total Tests	% Positive	Positive/ Total Tests	% Positive	Positive/ Total Tests	% Positive
SARS-CoV-2 Novel Coronavirus	370 /2,736	13.5%	327 /2,920	11.2%	364 /3,221	11.3%	378 /3,409	11.1%	295 /3,134	9.4%
Influenza	5 /1,067	0.4%	1 /308	0.3%	0 /560	0%	1 /442	0.2%	0/ 98	0%
Seasonal (non-SARS-2) Coronavirus	9 /545	1.7%	0 /293	0%	1 /456	0.2%	0 /202	0%	0/ 119	0%
Adenovirus (respiratory)	11 /560	2.0%	5 /293	1.7%	3 /440	0.7%	2 /362	0.6%	3/ 119	2.5%
Metapneumovirus	29 /630	4.6%	14 /293	4.8%	6 /444	1.4%	2 /362	0.6%	1/ 119	0.8%
Rhinovirus/Enterovirus	43 /630	6.8%	18 /293	6.1%	20 /444	4.5%	16 /362	4.4%	5/ 119	4.2%
RSV	4 /763	0.5%	1 /350	0.3%	1 /461	0.2%	0 /370	0%	1/ 121	0.8%

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 6. Transmission risk factors for cumulative confirmed COVID-19 cases, Dallas County

Exposure Risk Factor	Cases (N= 5,369)	% of Total Cases
International Travel	58	1.1%
Domestic Travel (Out-of-state)	123	2.3%
Cruise Ship Travel	9	0.2%
Long-Term Care Facility (Residency)	321	6.0%
County Jail (Inmate)	287	5.3%
State Jail (Inmate-- TDCJ COVID-19 Medical Action Center)*	23	0.4%
Homeless Shelter	44	0.8%
Meat/Food Processing Facilities	76	1.4%
Close contact or Presumed Community Transmission**	4,428	82.5%

*TDCJ cases are under the jurisdiction of the Texas Department of State Health Services

**Includes: household transmission, and cases with no other exposure risk factors identified

Table 7. Summary of weekly 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	04/11	04/18	04/25	05/02	9/08/19– Present
CDC Week	10	11	12	13	14	15*	16*	17*	18*	
Influenza hospitalizations ¹	81	67	30	N/A	N/A	N/A	N/A	N/A	N/A	1,990
Influenza ICU admissions ¹	9	7	7	N/A	N/A	N/A	N/A	N/A	N/A	281
Confirmed influenza-associated deaths ²	2	0	0	N/A	N/A	N/A	N/A	N/A	N/A	25
COVID-19 hospitalizations ³	0	14	61	184	175	149*	160*	167*	102*	1,029*
COVID-19 ICU admissions ³	0	7	29	59	61	50*	42*	41*	19*	311*
Confirmed COVID-19-associated deaths	0	0	3	11	9	16*	31*	27*	26*	135*

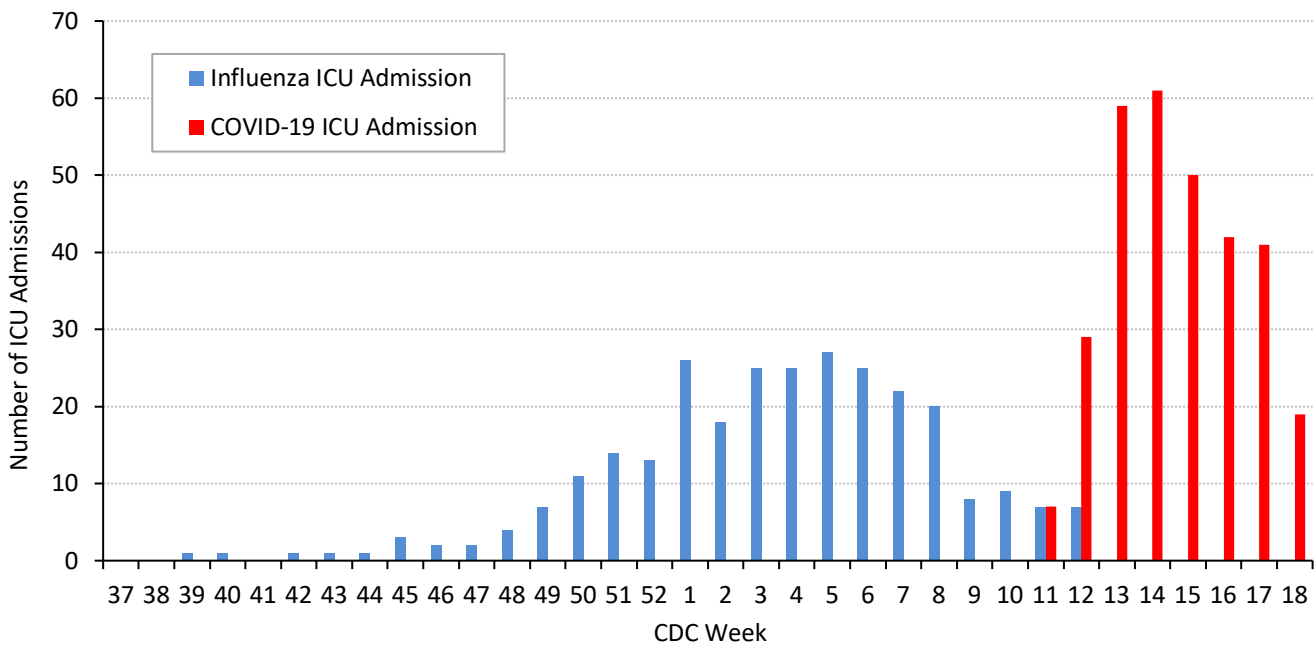
*All data are preliminary and subject to change as additional reports are received for the most recent weeks.

¹ Reflects all influenza-associated hospitalizations reported from 14 hospitals located within Dallas County by week of any positive influenza tests.

² 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.

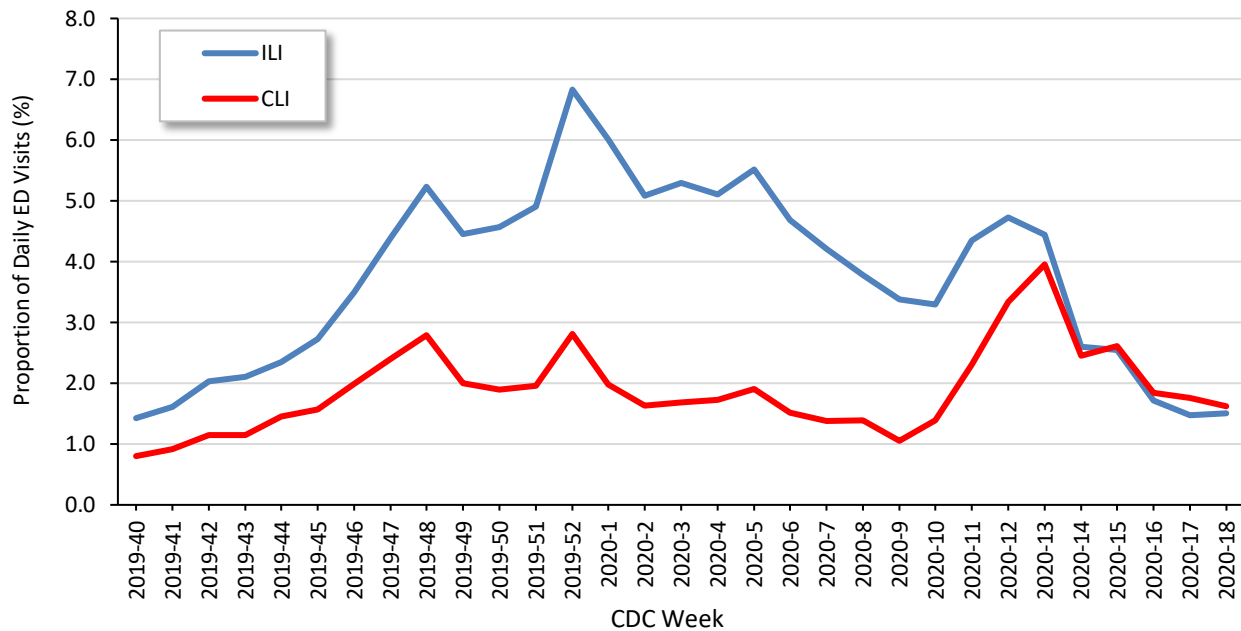
³ Reflect all COVID-19-associated hospitalizations reported from area hospitals within Dallas County by week of admission; data as of 7:00 pm yesterday.

Figure 4. Intensive Care Unit Hospitalizations for Influenza and COVID-19 by week of admission, Dallas County: September 2019 through week ending May 2, 2020 (CDC Week 18)*



* Dallas County residents reported with confirmed COVID-19 by PCR testing as of 7:00 pm yesterday. All data are preliminary and subject to change as cases represented are being actively investigated and as additional reports are received for the most recent week.

Figure 5. Syndromic surveillance of emergency department visits for COVID-like Illness (CLI)* and Influenza-like Illness (ILI), Dallas County: September 29, 2019 – May 2, 2020**



ESSENCE data are from 18 hospital emergency departments voluntarily reporting numbers of patients presenting with self-reported chief complaints.

* CLI is defined as chief complaint of fever and cough or shortness of breath or difficulty breathing.

**ILI is defined as chief complaint of fever and cough or sore throat or mention of influenza.

Table 8. Occupations of hospitalized patients with confirmed COVID-19, Dallas County, 3/10 – 5/3/20

Occupation	Position	Sector
Critical Infrastructure Workers*	Hospitalized Cases (%) of Total Employed	
Healthcare and Public Health		50 (18%)
	<i>Nurse, LVN, CNA</i>	13
	<i>Physician</i>	5
	<i>Other: Dentist, dietary, home health, medical assistant, mental health, PCT, pharmacist, physical therapy, facilities, administrative</i>	29
Transportation and Logistics		44 (16%)
	<i>Airline/Airport</i>	10
	<i>Parcel or postal delivery</i>	7
	<i>Cab/rideshare or bus driver</i>	7
	<i>Other: Mechanic, truck driver, freight, railroad</i>	20
Food and Agriculture		41 (15%)
	<i>Grocery</i>	13
	<i>Restaurant</i>	15
	<i>Other: Food processing, production, supply</i>	13
Other Community/Government Essential Functions		19 (8%)
	<i>Clergy (Pastor, priest)</i>	6
	<i>Education (Teacher, administration)</i>	5
	<i>Judicial system (Attorney)</i>	4
	<i>Real estate services</i>	3
Public Works and Infrastructure Support Services		22 (8%)
	<i>Construction/Contractor</i>	15
Financial (<i>Accounting, bank, insurance</i>)		14 (5%)
Communications and Information Technology		12 (4%)
Commercial Facilities (<i>Building materials, painting, warehouse</i>)		11 (4%)
Hygiene Services (<i>Custodian, Lawn Service</i>)		9 (3%)
Law Enforcement, Public Safety, First Responders		7 (3%)
Critical Manufacturing (<i>Manufacturing metal, packaging</i>)		4 (2%)
Energy/Utilities (<i>Electricity, petroleum, gas</i>)		2 (1%)
Non- Critical Infrastructure Workers (Includes retail, personal services)		42 (15%)
Non-Employed (Includes retired)		265
Student		4
Not reported		426
Total		972

* Includes only residents of Dallas County with self-reported occupational information. All data are preliminary and subject to change.

**CISA Advisory Memorandum on Identification of Essential Critical Infrastructure Workers During COVID-19 Response, April 17, 2020.

Table 9. Cumulative COVID-19 cases by city of residence within Dallas County as of May 7, 2020*(e.g. Does not include cases who reside in portions of cities which are not within Dallas County.)*

City of Residence	Cases (N=5,369)	% of Total Cases
Addison	20	0.4%
Balch Springs	48	0.9%
Carrollton	66	1.2%
Cedar Hill	76	1.4%
Cockrell Hill	9	0.2%
Coppell	27	0.5%
Dallas	2,989	55.7%
DeSoto	121	2.3%
Duncanville	77	1.4%
Farmers Branch	70	1.3%
Garland	465	8.7%
Glenn Heights	15	0.3%
Grand Prairie	200	3.7%
Highland Park	18	0.3%
Hutchins	26	0.5%
Irving	563	10.5%
Lancaster	93	1.7%
Mesquite	252	4.7%
Richardson	105	2.0%
Rowlett	59	1.1%
Sachse	13	0.2%
Seagoville	11	0.2%
Sunnyvale	8	0.1%
University Park	25	0.5%
Wilmer	12	0.2%
Wylie	1	0.0%

CDC Priorities for COVID-19 Testing (rev. date: 5/3/20)

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

<https://www.cdc.gov/coronavirus/2019-nCoV/hcp/clinical-criteria.html>)**High Priority**

- Hospitalized patients **with** symptoms
- Healthcare facility workers, workers in congregate living settings, and first responders **with** symptoms
- Residents in long-term care facilities or other congregate living settings, including prisons and shelters, **with** symptoms

Priority

- Persons **with** symptoms of potential COVID-19 infection, including: fever, cough, shortness of breath, chills, muscle pain, new loss of taste or smell, vomiting or diarrhea and/or sore throat.
- Persons **without** symptoms who are prioritized by health departments or clinicians, for any reason, including but not limited to: public health monitoring, sentinel surveillance, or screening of other asymptomatic individuals according to state and local plans.

Many Thanks to:

Our area hospitals and healthcare providers for reporting lab-confirmed COVID-19 cases

Our DCHHS Case and Contact Investigations Team volunteers from:

Dallas County Medical Society

UT Southwestern Medical School

Texas A&M College of Medicine

UTHealth School of Public Health

Retired School Nurses

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:

<https://www.dallascounty.org/departments/dchhs/2019-novel-coronavirus.php>

DCHHS Acute Communicable Disease Epidemiology Division: COVID-19@dallascounty.org