

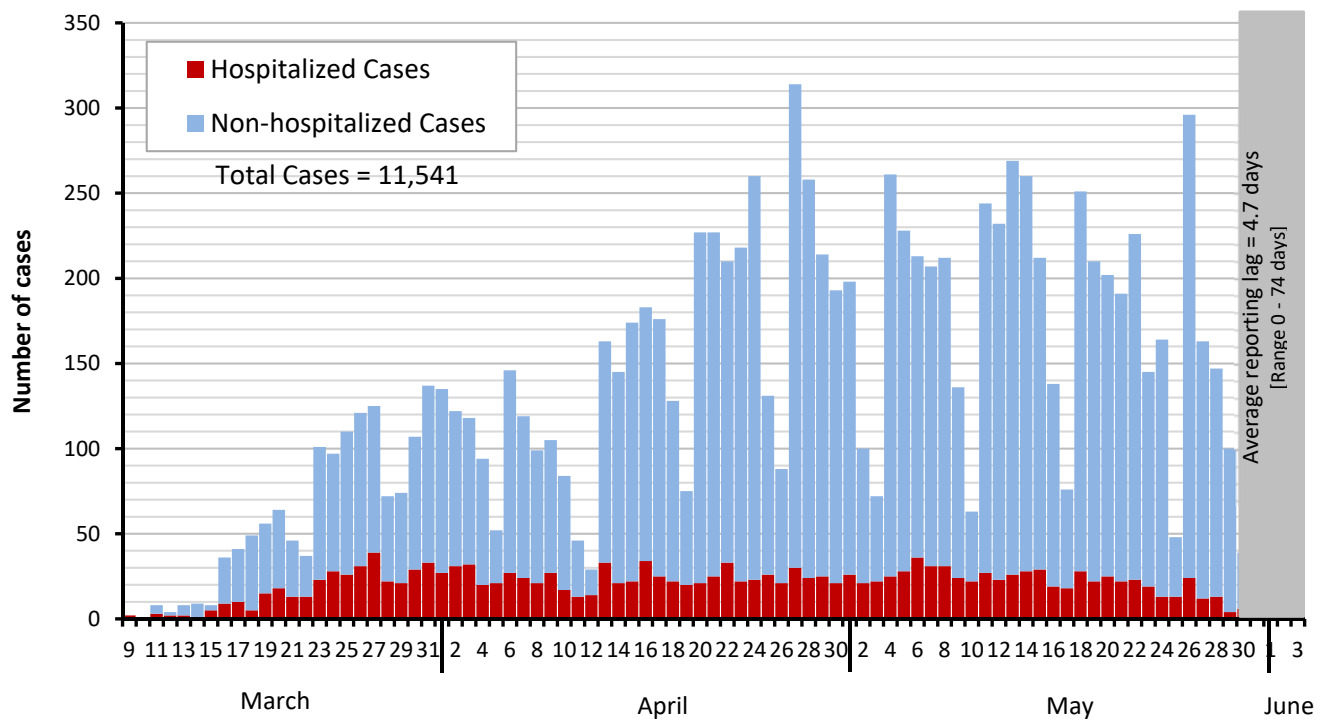


Dallas County Health and Human Services 2019 Novel Coronavirus (COVID-19) Summary

June 5, 2020

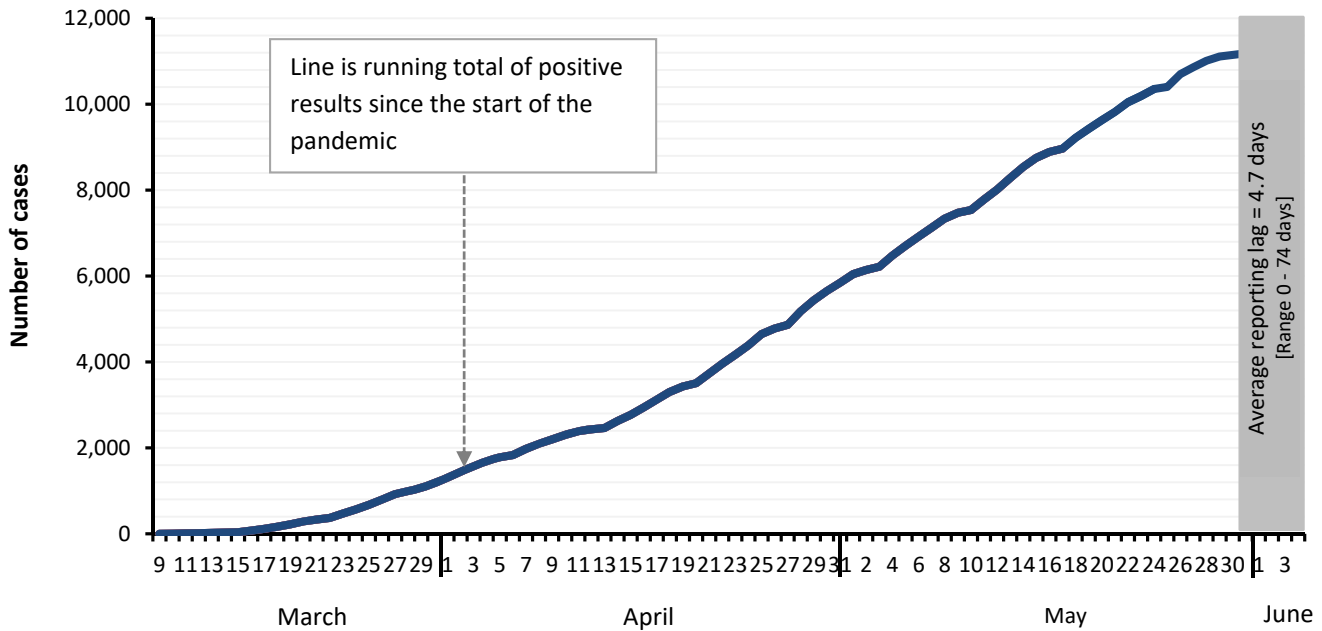
- As of June 2, 2020, DCHHS is reporting 298 additional cases of 2019 novel coronavirus (COVID-19), bringing the total case count in Dallas County to 11,541, including 260 deaths.
- The weekly numbers of new hospital admissions for COVID-19 have not declined significantly over the past 7 weeks. Of the 1,768 cases requiring hospitalization to date, nearly two-thirds (68%) 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 about 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-seven percent (37%) of deaths have been associated with long-term care facilities.
- The percentage of respiratory specimens testing positive for SARS-CoV-2 was 10.9% at area hospitals in week 22.

Figure 1. Daily COVID-19 cases by date of test collection, Dallas County: March 10 – June 5, 2020¹⁻⁴



1. Data received as of 8:00 pm, June 4, 2020, for residents of Dallas County tested with known specimen collection dates. This does include delayed results from previous days. All data are preliminary and subject to change as cases continue to be investigated.
2. Data are incomplete for the most recent dates. Test results may be reported to DCHHS several days after the result. The reporting lag is calculated as time from specimen collection to receipt of test results. The average reporting lag is 4.7 days, with a range from 0 – 74 days.
3. The validity of results based on antibody tests is not yet known. This summary report includes only confirmed cases based on PCR test results.
4. Bars are the number of positive PCR tests which were collected that day.

Figure 2. Cumulative COVID-19 cases by date of test collection, Dallas County: March 10 – June 5, 2020¹⁻²



1. Data received as of 8:00 pm, June 1, 2020, for residents of Dallas County tested with known specimen collection dates. This does include delayed results from previous days. All data are preliminary and subject to change as cases continue to be investigated.
2. Data are incomplete for the most recent dates. Test results may be reported to DCHHS several days after the result. The reporting lag is calculated as time from specimen collection to receipt of test results. The average reporting lag is 4.7 days, with a range from 0 – 74 days.

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=11,541)	% of Total Cases
Commercial or Hospital Laboratory*	10,708	93%
Dallas LRN Laboratory	737	6%
Other Public Health Laboratory	96	1%

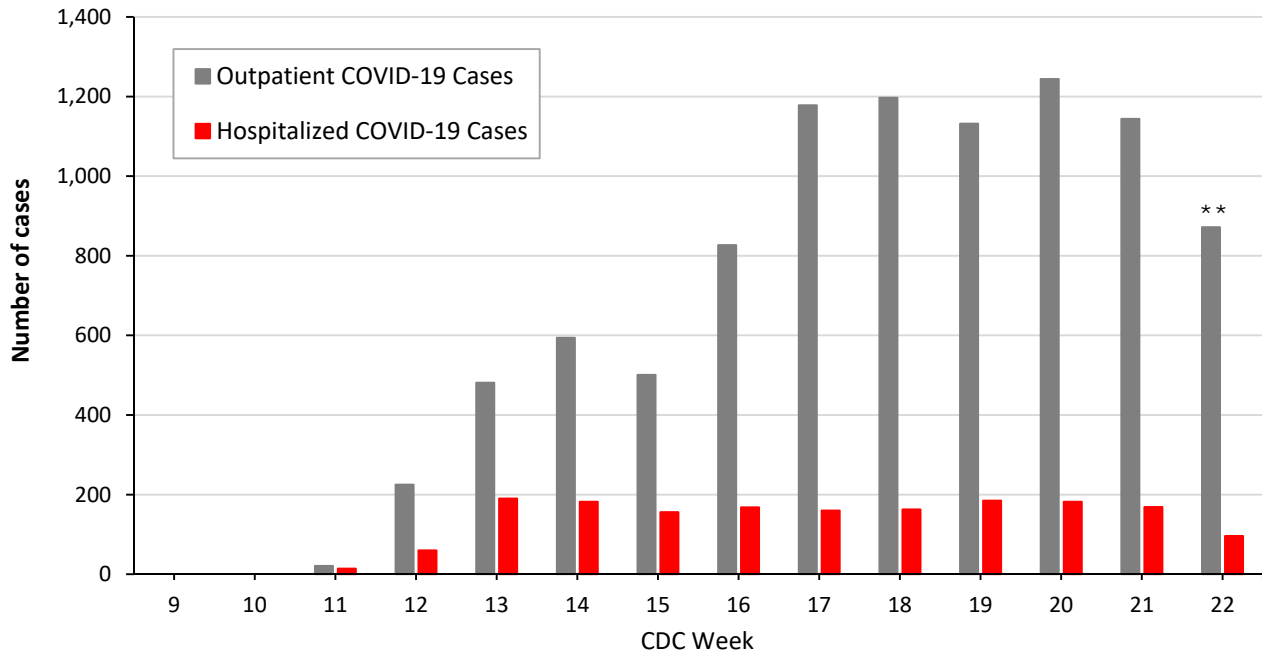
* Includes: AIT, ARUP, CPL, Excelsior, LabCorp, Magnolia, Medfusion, Prism, Quest, Viracor, and multiple hospital laboratories

Table 2. Characteristics of cumulative confirmed COVID-19 cases, Dallas County: March 9 – June 5, 2020

	Number	% of Total Cases*
Total Cases in Dallas County residents	N = 11,541	100%
Age Group (years)	0 to 17	914 (8%)
	18 to 40	4,563 (40%)
	41 to 64	4,514 (40%)
	≥65	1,436 (12%)
Sex	Female	5,397 (48%)
	Male	5,839 (52%)
Not Hospitalized (Includes: Outpatient, urgent care, drive-through, ED)	9,773	85%
Ever Hospitalized	1,768	15%

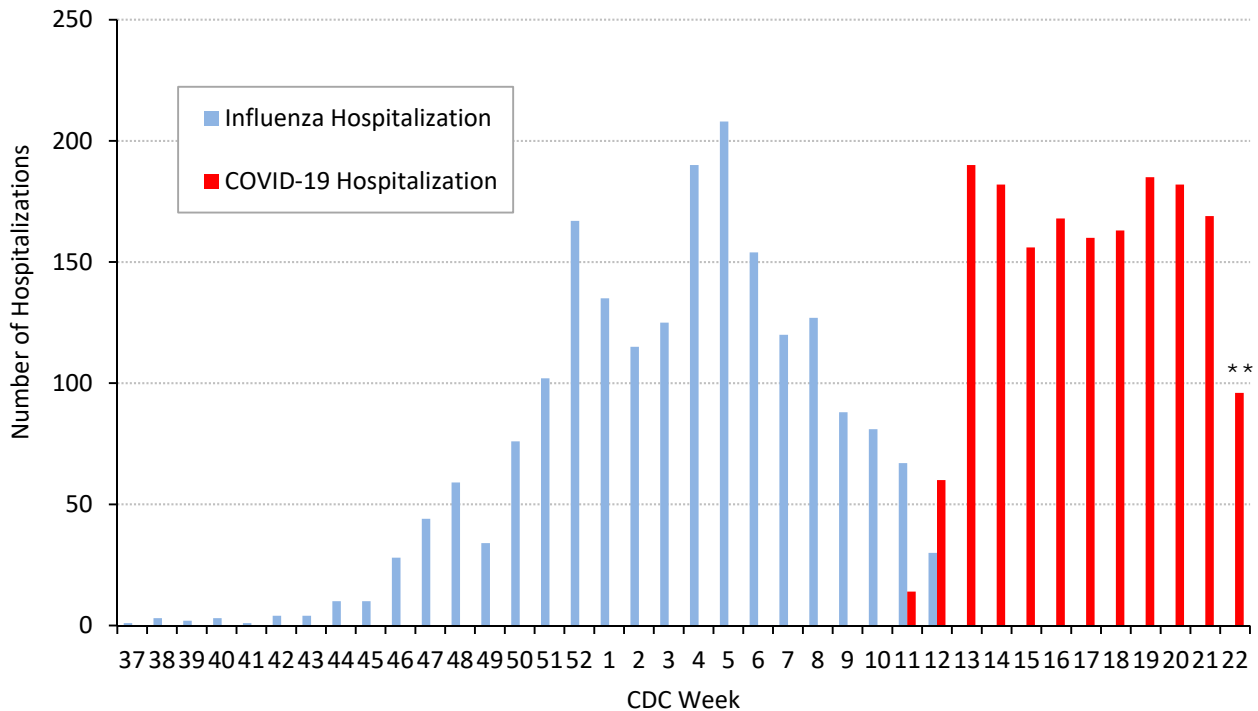
* Percentages calculated among cases with known age/sex

Figure 3. Non-hospitalized and hospitalized COVID-19 Cases by week of test collection, Dallas County: September 2019 through week ending May 30, 2020 (CDC Week 22)*



* Non-hospitalized includes all patients not admitted to acute-care hospitals (e.g. outpatient, urgent care, drive-through, ED-only, LTCF) and diagnosed with confirmed COVID-19 by PCR testing. All data are preliminary and subject to change as cases continue to be received and investigated.
 ** Data are incomplete for the most recent dates. Test results may be reported to DCHHS several days after the result. The reporting lag is calculated as time from specimen collection to receipt of test results.

Figure 4. Influenza and COVID-19 hospitalizations by week of admission, Dallas County: September 2019 through week ending May 30, 2020 (CDC Week 22)*



* Hospitalized Dallas County residents diagnosed with confirmed COVID-19 by PCR testing. All data are preliminary and subject to change as cases continue to be received and investigated.
 ** Data are incomplete for the most recent dates. Test results may be reported to DCHHS several days after the result. The reporting lag is calculated as time from specimen collection to receipt of test results.

Table 3. Characteristics of cumulative hospitalized confirmed COVID-19 cases, Dallas County: March 10 – June 5, 2020

		Hospitalized Cases	%
<i>Ever Hospitalized</i>		N = 1,768	15% of Total Cases
Admitted to Intensive Care Unit		523	30%
Mechanical Ventilation		307	17%
Sex	Male	987	56%
	Female	781	44%
Age Group (years)	0-17	19	1%
	18-40	345	20%
	41-64	842	48%
	≥65	562	32%
Presence of ≥1 high risk condition		937	53%
Diabetes		545	31%
Lung Disease (e.g. COPD, asthma)		209	12%
Heart Disease (e.g. CHF)		245	14%
Kidney Disease (e.g. ESRD, dialysis)		189	11%
Cancer, Immune-compromise		137	8%
Pregnancy		43	2%
Race/ Ethnicity	White	260	15%*
	Hispanic	865	49%*
	Black	379	21%*
	Other	64	4%*
	Non-reported/ Unknown	200	11%

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

Table 4. Characteristics of cumulative confirmed COVID-19 deaths, Dallas County: March 10 – June 5, 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 office, hospitals, and vital statistics.</i>		Confirmed Deaths	% ¹
		N = 260	2% of Total Cases
Sex	Male	171	66%
	Female	89	34%
Age Group (years)	17-40	14	5%
	41-64	69	27%
	≥65	177	68%
Resident of a Long-Term Care Facility		97	37%
Presence of ≥1 high risk condition		171	72%
Diabetes		98	42%
Race/ Ethnicity	White	85	33% (29% of population) ²
	Hispanic	95	37% (41% of population) ²
	Black	62	24% (24% of population) ²
	Asian	9	4% (7% of population) ²

¹ Percentages calculated among those with known underlying health conditions or race/ethnicity as reported by medical provider

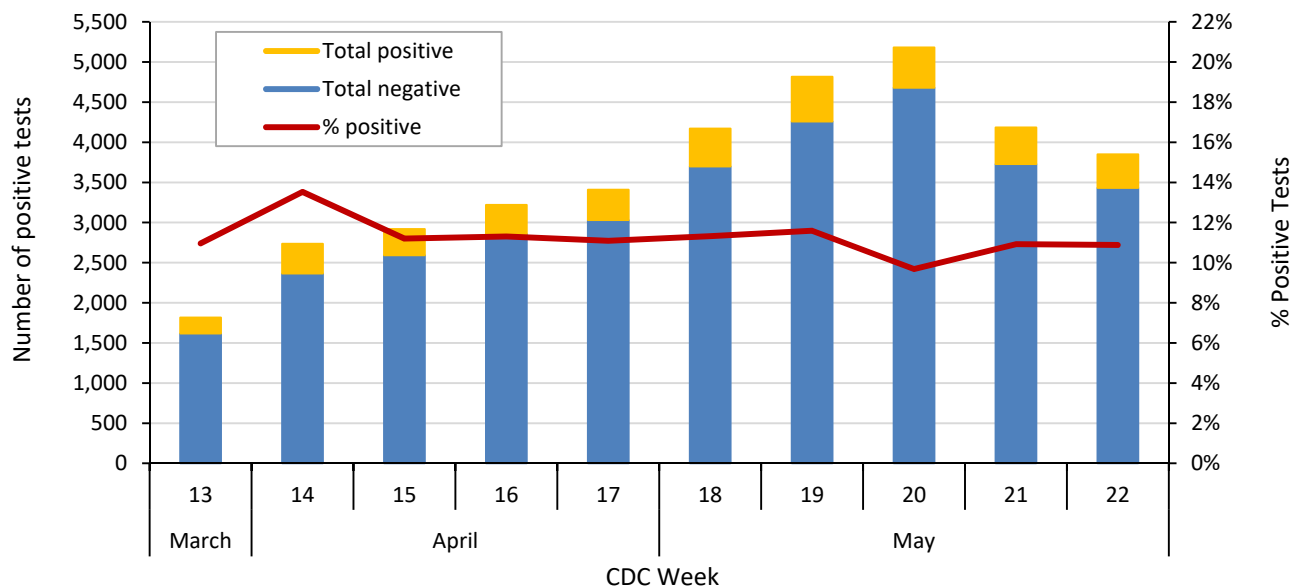
² 2019 U.S. Census population estimates for Dallas County

Table 5. Respiratory virus testing by North Texas hospitals: March 22 – May 30, 2020 (CDC Weeks 13-22)¹⁻²

Week Ending		3/28/20	4/4/20	4/11/20	4/18/20	4/25/20	5/2/20	5/9/20	5/16/20	5/23/20	5/30/20
SARS-CoV-2 Novel Coronavirus	Positive	199	370	327	364	378	472	558	502	457	419
	Total Tests	1,816	2,736	2,920	3,221	3,409	4,171	4,816	5,182	4,185	3,851
	% Positive	11.0%	13.5%	11.2%	11.3%	11.1%	11.3%	11.6%	9.7%	10.9%	10.9%
Influenza	Positive	14	5	1	0	1	0	0	0	0	0
	Total Tests	1,772	1,067	328	560	454	325	337	315	277	179
	% Positive	0.8%	0.4%	0.3%	0%	0.2%	0%	0%	0%	0%	0%
Seasonal (non-SARS-2) Coronavirus	Positive	15	9	1	1	0	0	0	0	0	1
	Total Tests	1,123	545	313	456	214	119	133	135	113	22
	% Positive	1.3%	1.7%	0.3%	0.2%	0%	0%	0%	0%	0%	4.5%
Adenovirus (respiratory)	Positive	15	11	5	3	2	3	2	5	3	1
	Total Tests	1,129	560	313	440	374	246	281	252	255	144
	% Positive	1.3%	2.0%	1.6%	0.7%	0.5%	1.2%	0.7%	2.0%	1.2%	0.7%
Metapneumo- -virus	Positive	114	29	15	6	2	1	2	0	0	0
	Total Tests	1,129	630	313	444	374	246	281	252	255	144
	% Positive	10.1%	4.6%	4.8%	1.4%	0.5%	0.4%	0.7%	0%	0%	0%
Rhinovirus/ Enterovirus	Positive	99	43	19	20	17	10	7	3	5	5
	Total Tests	1,129	630	313	444	374	246	281	252	255	144
	% Positive	8.8%	6.8%	6.1%	4.5%	4.5%	4.1%	2.5%	1.2%	2.0%	3.5%
RSV	Positive	10	7	1	1	0	1	2	0	0	0
	Total Tests	1,272	763	370	461	382	250	282	258	262	146
	% Positive	0.8%	0.5%	0.3%	0.2%	0%	0.4%	0.7%	0%	0%	0%

Data sources: National Respiratory and Enteric Virus Surveillance System and an additional subset of hospitals voluntarily reporting surveillance data 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). Data are incomplete for the most recent dates.

Figure 5. SARS-CoV-2 novel coronavirus positive tests reported to DCHHS by hospital laboratories: March 22 – May 30, 2020 (CDC Weeks 13-22)¹⁻²



1. Data received as of 8:00 pm yesterday. All data are preliminary and subject to change as cases continue to be received and investigated.
 2. Data are incomplete for the most recent dates. Test results may be reported to DCHHS several days after the result.

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

<i>Exposure Risk Factor</i>	Cases (N= 11,541)	% of Total Cases
International Travel	61	0.5%
Domestic Travel (Out-of-state)	128	1.1%
Cruise Ship Travel	10	0.1%
Long-Term Care Facility (Resident)	570	4.9%
County Jail (Inmate)	416	3.6%
State Jail (Inmate-- TDCJ COVID-19 Medical Action Center)*	84	0.7%
Homeless Shelter	48	0.4%
Meat/Food Processing Facilities	304	2.6%
Close contact or Presumed Community Transmission**	9,920	86.0%

*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 COVID-19 hospitalizations and deaths from Dallas County hospitals, Vital Statistics and Medical Examiner’s office¹⁻⁴

Week Ending	03/28	04/04	04/11	04/18	04/25	05/02	05/09	05/16	05/23	05/30	06/06	9/08/19– Present
CDC Week	13	14	15	16	17	18	19	20	21*	22*	23*	
COVID-19 hospitalizations ¹	190	182	156	168	160	163	185	182	169	96	40	1,768
COVID-19 ICU admissions ¹	62	64	57	46	52	44	52	43	35	30	30	523
Probable COVID-19-associated deaths ²	0	0	0	0	0	0	0	0	0	0	0	0
Confirmed COVID-19-associated deaths ³	11	11	17	31	28	28	28	41	27*	25*	10*	260

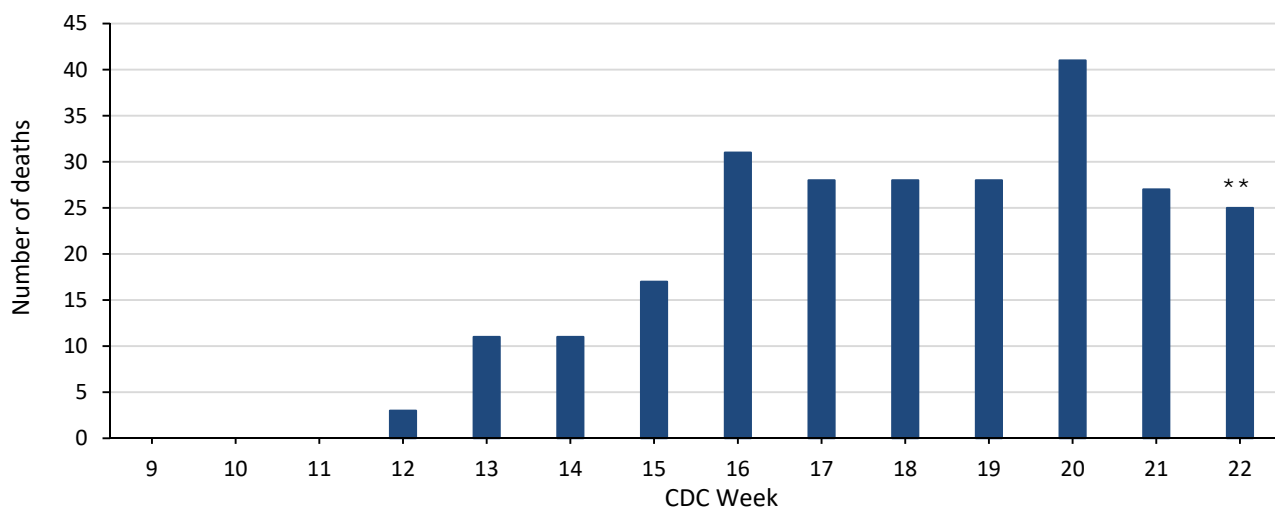
* All data are preliminary and subject to change as cases continue to be received and investigated.

¹ Reflects all COVID-19-associated hospitalizations and intensive care unit admissions reported from area hospitals within Dallas County by week of admission. Hospitalizations are inclusive of ICU admissions. Data are preliminary and include reports received as of 8:00 pm yesterday.

² Probable COVID-19 deaths as defined by CSTE interim case classification criteria--meeting vital records criteria without PCR laboratory confirmation.

³ Confirmed COVID-19 deaths as defined by a positive PCR 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 COVID-19 -associated deaths with pending determination of cause of death.

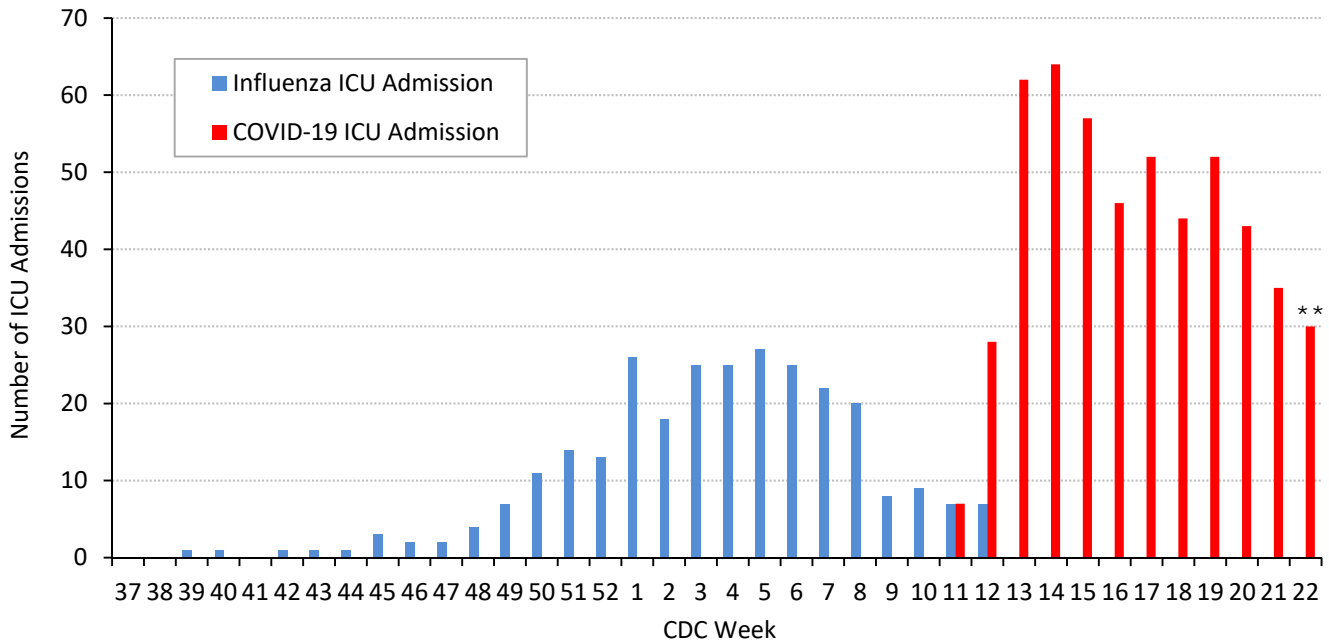
Figure 6. Confirmed COVID-19-associated deaths by week of death, Dallas County: March 2020 through week ending May 30, 2020 (CDC Week 22)*



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

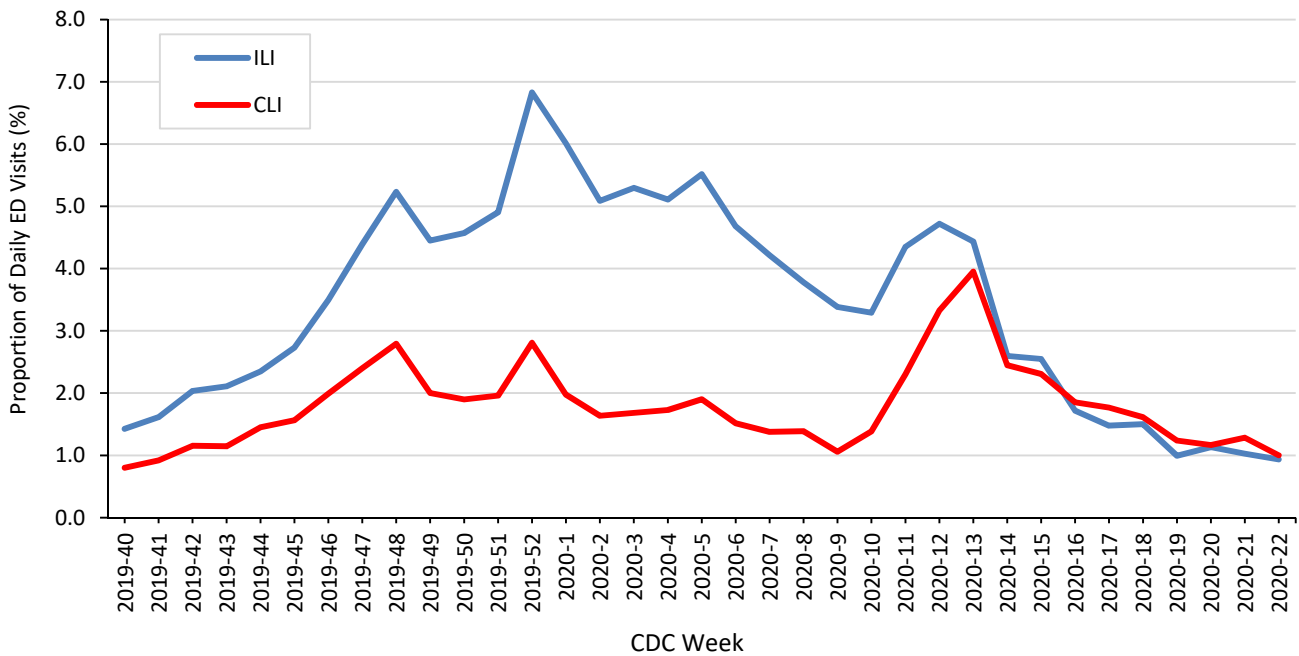
** All data are preliminary and subject to change as cases continue to be received and investigated.

Figure 7. Intensive care unit hospitalizations for influenza and COVID-19 by week of admission, Dallas County: September 2019 through week ending May 30, 2020 (CDC Week 22)*



* New ICU admissions of Dallas County residents reported with confirmed COVID-19 by PCR testing as of 8:00 pm yesterday.
 ** All data are preliminary and subject to change as cases continue to be received and investigated.

Figure 8. Syndromic surveillance of emergency department visits for COVID-like illness (CLI)* and Influenza-like illness (ILI), Dallas County: September 29, 2019 – May 30, 2020**



ESSENCE Data is from 18 hospital emergency departments voluntarily reporting numbers of persons 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 – 6/5/20

Occupation	Hospitalized Cases (%) of Total Employed	
	Position	Sector
Critical Infrastructure Workers*		502 (84%)
Healthcare and Public Health		84 (14%)
	<i>Nurse, LVN, CNA</i>	12
	<i>Physician</i>	4
	<i>Other: Dentist, dietary, home health, medical assistant, mental health, PCT</i>	68
Transportation and Logistics		77 (13%)
	<i>Airline/Airport</i>	11
	<i>Parcel or postal delivery</i>	10
	<i>Cab/rideshare or bus driver</i>	16
	<i>Other: Mechanic, truck driver, freight, railroad</i>	40
Food and Agriculture		95 (16%)
	<i>Grocery</i>	19
	<i>Restaurant</i>	33
	<i>Other: Food processing, production, supply</i>	43
Other Community/Government Essential Functions		30 (5%)
	<i>Clergy (Pastor, priest)</i>	7
	<i>Education (Teacher, administration)</i>	7
	<i>Judicial system (Attorney)</i>	7
	<i>Other: Real estate services, shelter services, government operations</i>	9
Public Works and Infrastructure Support Services		74 (12%)
	<i>Construction/Contractor</i>	40
	<i>Other: Waste disposal, landscaping, maintenance</i>	34
Financial (<i>Accounting, bank, insurance</i>)		26 (4%)
Communications and Information Technology		14 (2%)
Commercial Facilities (<i>Building materials, painting, warehouse</i>)		37 (6%)
Hygiene Services (<i>Custodian, housekeeping</i>)		22 (4%)
Law Enforcement, Public Safety, First Responders		14 (2%)
Critical Manufacturing (<i>Manufacturing metal, packaging</i>)		20 (3%)
Energy/Utilities (<i>Electricity, petroleum, gas</i>)		9 (2%)
Non-Critical Infrastructure Workers (Includes retail, personal services)		70 (12%)
Employed (position not reported)		26 (4%)
Total reporting any employment		598
Non-Employed (Includes retired, child, homemaker, etc.)		592
Student (≥18 years old)		13
Not reported		565
Total hospitalized		1,768

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

**CISA Advisory Memorandum on Identification of Essential Critical Infrastructure Workers During COVID-19 Response, v3.1, May 19, 2020

https://www.cisa.gov/sites/default/files/publications/Version_3.1_CISA_Guidance_on_Essential_Critical_Infrastructure_Workers.pdf.

Table 9. Cumulative COVID-19 cases by city of residence within Dallas County as of June 5, 2020*(e.g. Does not include cases who reside in portions of cities which are not within Dallas County.)*

City of Residence	Cases (N=11,541)	% of Total Cases
Addison	35	0.3%
Balch Springs	100	0.9%
Carrollton	170	1.5%
Cedar Hill	165	1.4%
Cockrell Hill	21	0.2%
Combine	2	0.0%
Coppell	47	0.4%
Dallas	6,383	55.3%
DeSoto	216	1.9%
Duncanville	184	1.6%
Farmers Branch	158	1.4%
Garland	988	8.6%
Glenn Heights	30	0.3%
Grand Prairie	506	4.4%
Highland Park	19	0.2%
Hutchins	53	0.5%
Irving	1,245	10.8%
Lancaster	178	1.5%
Mesquite	607	5.3%
Richardson	185	1.6%
Rowlett	97	0.8%
Sachse	18	0.2%
Seagoville	63	0.5%
Sunnyvale	14	0.1%
University Park	29	0.3%
Wilmer	26	0.2%
Wylie	2	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