

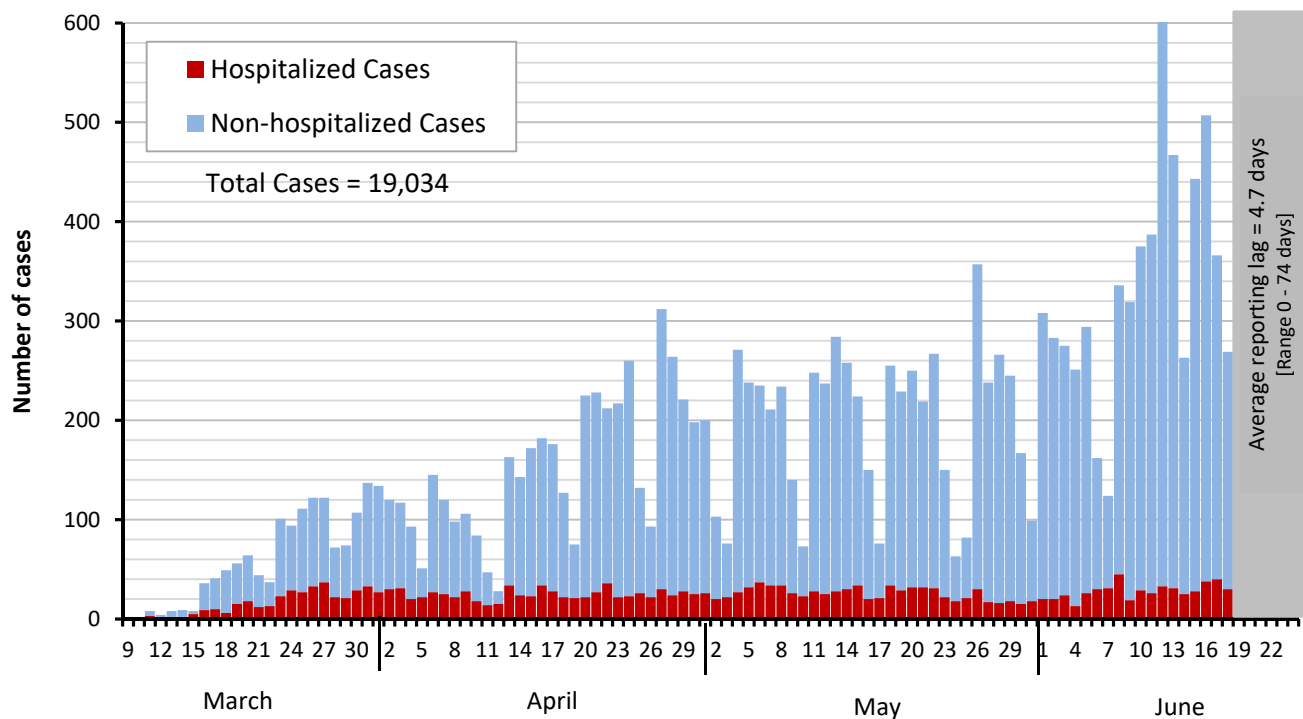


# Dallas County Health and Human Services 2019 Novel Coronavirus (COVID-19) Summary

June 26, 2020

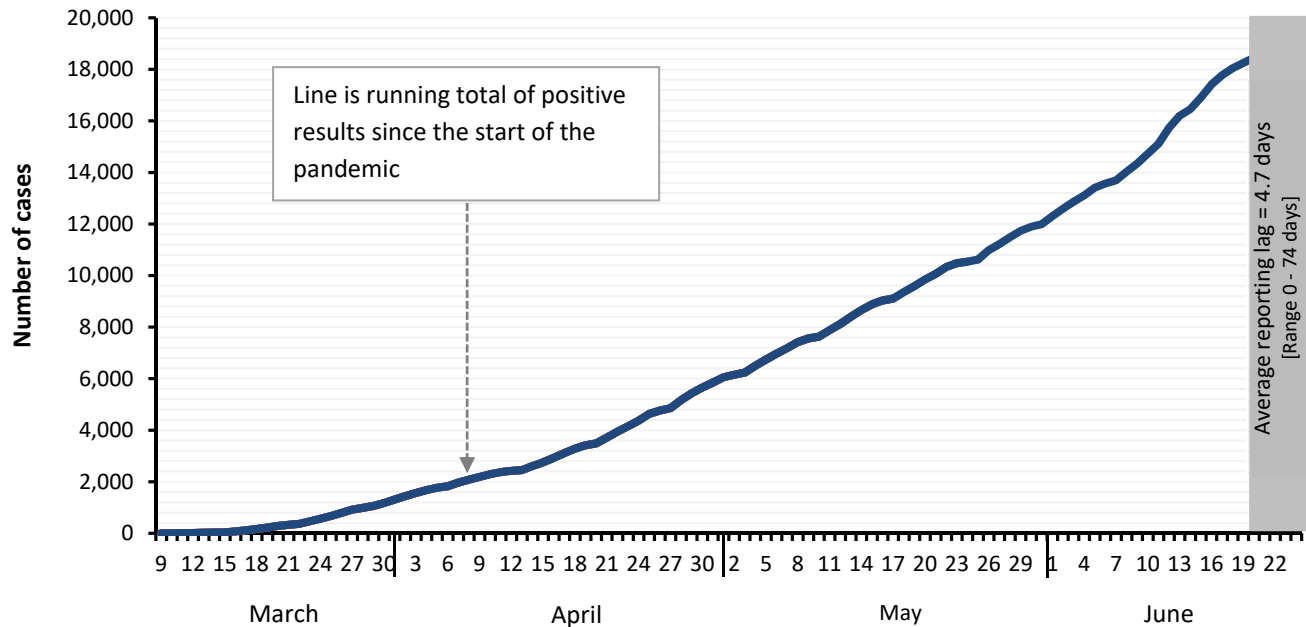
- As of June 26, 2020, DCHHS is reporting 496 additional cases of 2019 novel coronavirus (COVID-19), bringing the total case count in Dallas County to 19,034, including 344 deaths.
- An increasing proportion of COVID-19 cases are being diagnosed in young adults between 18 to 40 years of age, such that of all cases reported after June 1<sup>st</sup>, more than half have been in this age group.
- The age-adjusted rates of confirmed COVID-19 cases in non-hospitalized patients have been highest among Hispanics (667.4 per 100,000), Asians (187.4 per 100,000) and Blacks (136.4 per 100,000). These rates have been higher than Whites (43.8 per 100,000). Over 60% of overall COVID-19 cases to date have been Hispanic.
- The percentage of respiratory specimens testing positive for SARS-CoV-2 increased to 26.9% at area hospitals in week 25.
- Of the 2,536 cases requiring hospitalization to date, over two-thirds (69%) 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-five percent (35%) of deaths have been associated with long-term care facilities.

Figure 1. Daily COVID-19 cases by date of test collection, Dallas County: March 10 – June 26, 2020<sup>1-4</sup>



1. Data received as of 8:00 pm, June 25, 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 26, 2020<sup>1-2</sup>



1. Data received as of 8:00 pm, June 25, 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=19,034)	% of Total Cases
Commercial or Hospital Laboratory*	17,803	94%
Dallas LRN Laboratory	970	5%
Other Public Health Laboratory	261	1%

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

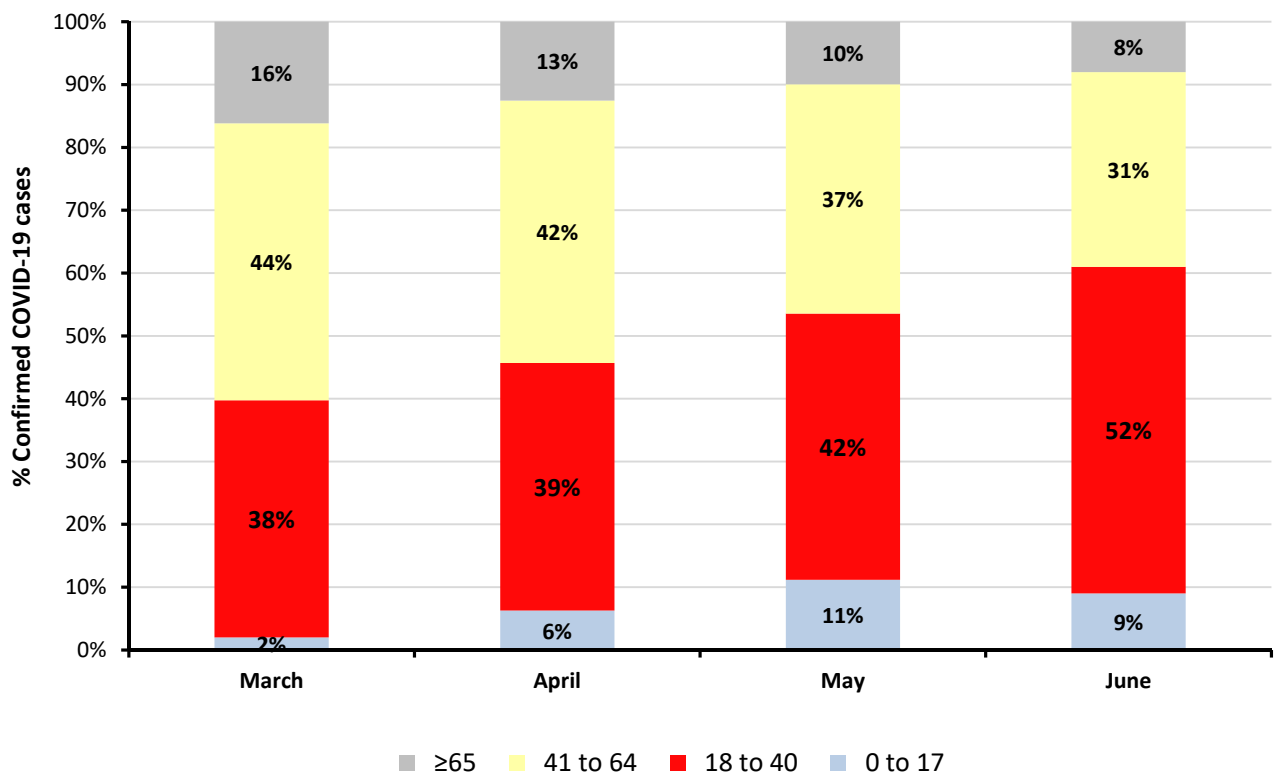
Table 2. Characteristics of cumulative confirmed COVID-19 cases, Dallas County: March 9 – June 26, 2020

	Number	% of Total Cases*
Total Cases in Dallas County residents	N = 19,034	100%
Age Group (years)	0 to 17	1,640 (9%)
	18 to 40	8,455 (45%)
	41 to 64	6,857 (36%)
	≥65	1,967 (10%)
Sex	Female	9,252 (49%)
	Male	9,431 (51%)
Not Hospitalized (Includes: Outpatient, urgent care, drive-through, ED)	16,497	87%
Ever Hospitalized	2,536	13%

\* Percentages calculated among cases with known age/sex

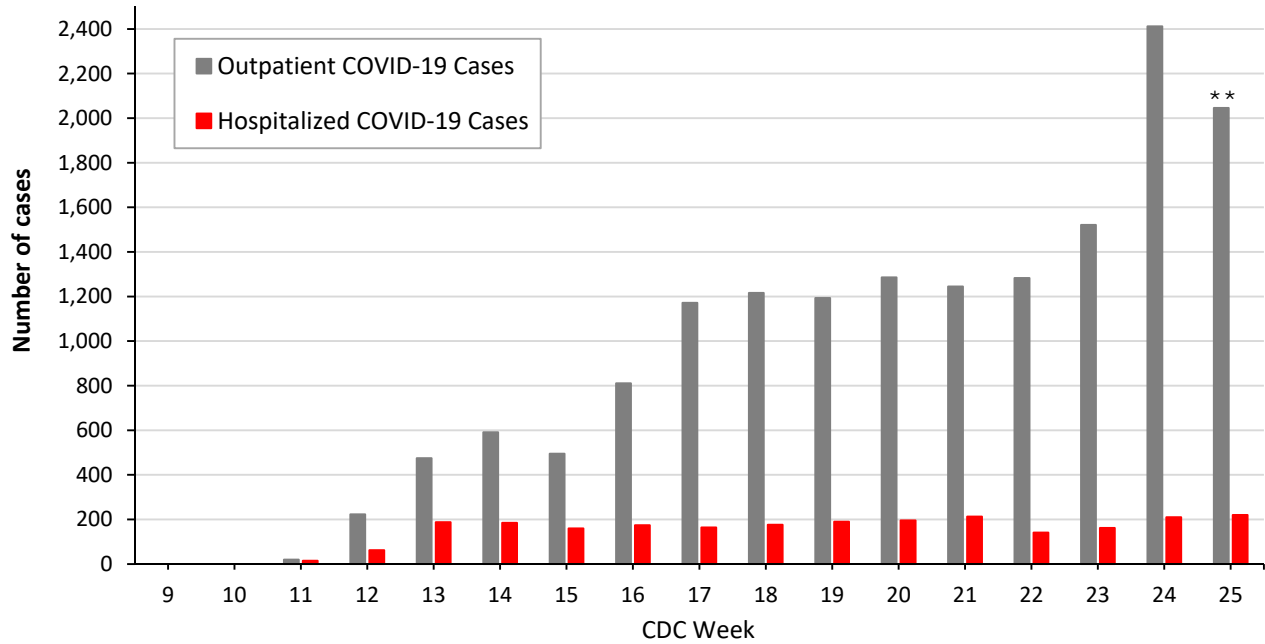
**Figure 3. Number of confirmed COVID-19 cases by age group and month of collection, Dallas County**

Age Group (in years)	0 to 17		18 to 40		41 to 64		≥65	
Month of Diagnosis	N	%	N	%	N	%	N	%
March	26	2%	493	38%	576	44%	211	16%
April	285	6%	1,791	39%	1,897	42%	570	13%
May	682	11%	2,590	42%	2,230	37%	607	10%
June (through 6/25)	642	9%	3,525	52%	2,088	31%	552	8%



1. Data received as of 8:00 pm, June 25, 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.

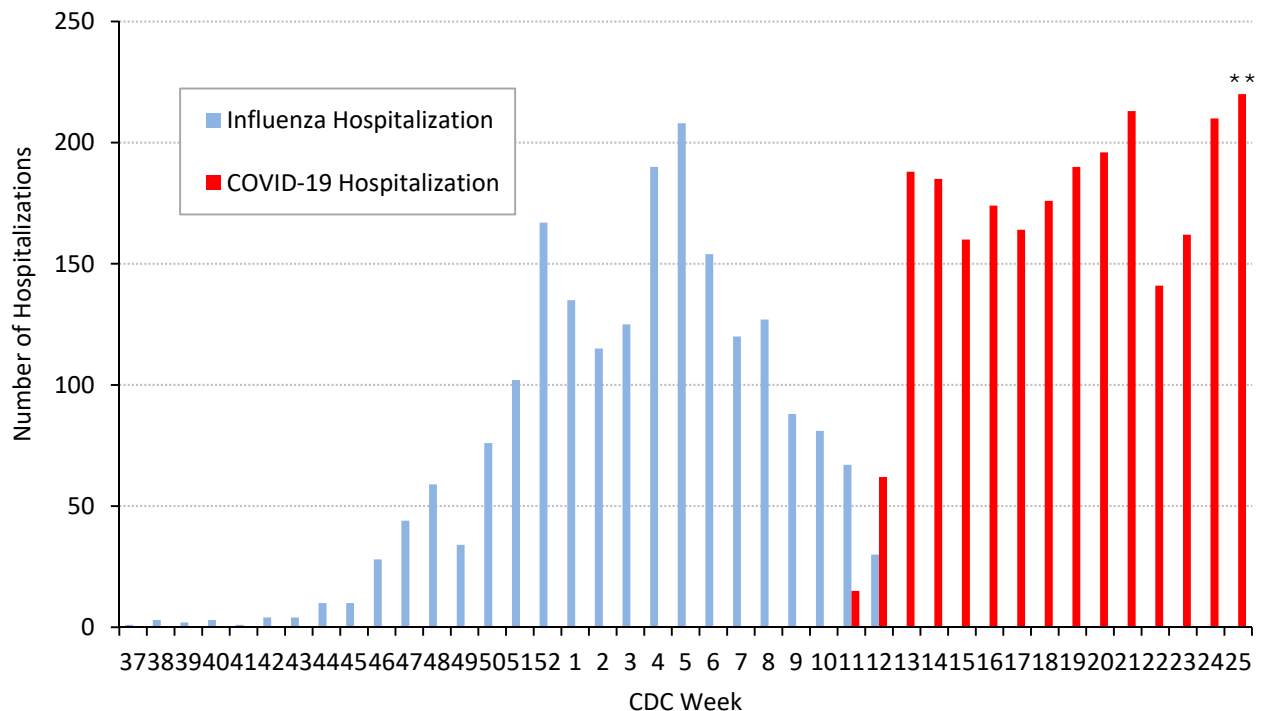
**Figure 4. Non-hospitalized and hospitalized COVID-19 Cases by week of test collection, Dallas County: September 2019 through week ending June 20, 2020 (CDC Week 25)\***



\* 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 5. Influenza and COVID-19 hospitalizations by week of admission, Dallas County: September 2019 through week ending June 20, 2020 (CDC Week 25)\***



\* 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 26, 2020**

		Hospitalized Cases	%
<i>Ever Hospitalized</i>		N = 2,536	13% of Total Cases
Admitted to Intensive Care Unit		708	28%
Mechanical Ventilation		399	16%
Sex	Male	1,397	55%
	Female	1,139	45%
Age Group (years)	0-17	45	2%
	18-40	527	21%
	41-64	1,171	46%
	≥65	793	31%
Presence of ≥1 high risk condition		1,355	53%
Diabetes		788	31%
Lung Disease (e.g. COPD, asthma)		298	12%
Heart Disease (e.g. CHF)		346	14%
Kidney Disease (e.g. ESRD, dialysis)		286	11%
Cancer, Immune-compromise		194	8%
Pregnancy		78	3%
Race/ Ethnicity	White	376	15%*
	Hispanic	1,289	51%*
	Black	537	21%*
	Other	102	4%*
	Non-reported/ Unknown	232	9%

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

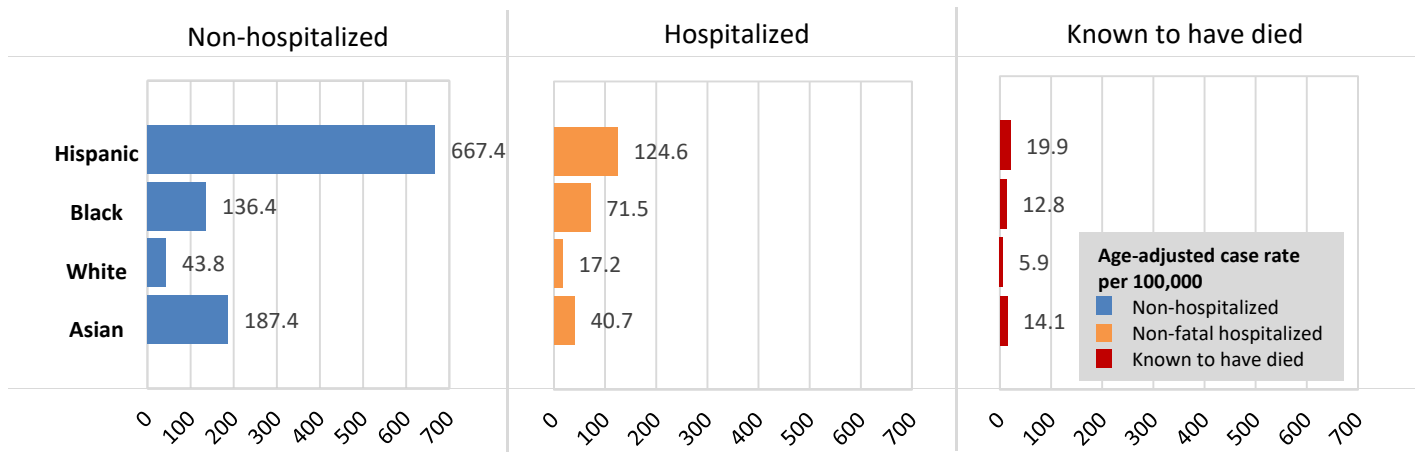
**Table 4. Characteristics of cumulative confirmed COVID-19 deaths, Dallas County: March 10 – June 26, 2020**

<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	% <sup>1</sup>
		N = 344	2% of Total Cases
Sex	Male	217	66%
	Female	117	34%
Age Group (years)	17-40	20	6%
	41-64	95	28%
	≥65	229	67%
Resident of a Long-Term Care Facility		119	35%
Presence of ≥1 high risk condition		233	73%
Diabetes		139	43%
Race/ Ethnicity	White	105	<b>31%</b> (29% of population) <sup>2</sup>
	Hispanic	140	<b>41%</b> (41% of population) <sup>2</sup>
	Black	83	<b>24%</b> (24% of population) <sup>2</sup>
	Asian	11	<b>3%</b> (7% of population) <sup>2</sup>

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

<sup>2</sup> 2019 U.S. Census population estimates for Dallas County

**Figure 6. Age-adjusted rates of lab confirmed COVID-19 non-hospitalized cases, hospitalized cases, and patients known to have died (per 100,000 population by race/ethnicity), Dallas County: March 10 – June 9, 2020**



	Race/Ethnicity	Non-hospitalized	Hospitalized	Known to have died
<b>Age-adjusted case rate per 100,000</b>	Hispanic	667.4	124.6	19.9
	Black	136.4	71.5	12.8
	White	43.8	17.2	5.9
	Asian	187.4	40.7	14.1
<b>Count of cases</b>	Hispanic	6,672	933	101
	Black	814	400	63
	White	695	275	91
	Asian	333	50	11
<b>Percent of known race/ethnicity</b>	Hispanic	78.4%	56.3%	38.0%
	Black	9.6%	24.1%	23.7%
	White	8.2%	16.6%	34.2%
	Asian	3.9%	3.0%	4.1%

**RACIAL DEMOGRAPHIC DATA COMPLETE FOR**  
**81%** of cases  
**90%** of hospitalizations  
**97%** of deaths

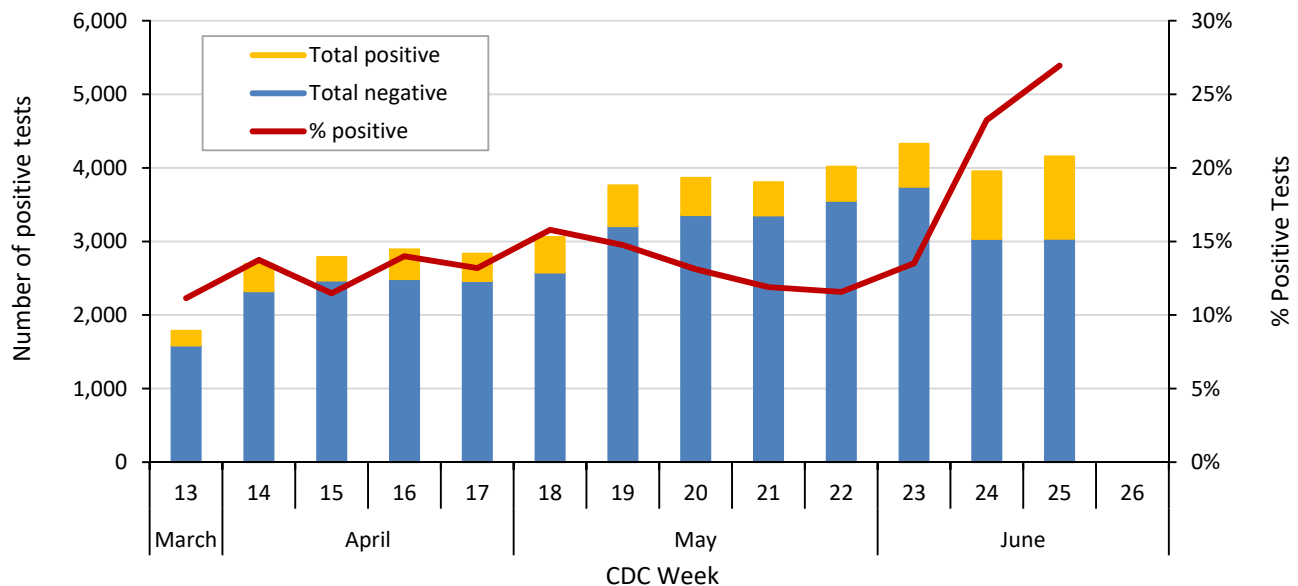
1. Data received as of 8:00 pm, June 8, 2020, for residents of Dallas County tested with known specimen collection dates. This does include delayed results from previous days. All data are preliminary and subject to change as cases continue to be investigated.
2. Data on persons who identify as American Indian/Alaska Native, Native Hawaiian/ Pacific Islander, or other race are not shown. Hispanic/Latino includes people of any race.
3. The rate of non-hospitalized and hospitalized cases shows patients not known to have died. The three categories shown are not mutually exclusive.
4. For non-fatal, non-hospitalized data, race/ethnicity data comes from laboratory reports, and laboratories often do not have access to race/ethnicity information.
5. We are including and reporting here all deaths that we are aware of that are laboratory positive or probable COVID-19, not just those with known race and ethnicity.
6. The health department continues to seek ways to improve the completeness of race/ethnicity information, including matching to other known internal and external surveillance databases with timely race/ethnicity data.

**Table 5. Respiratory virus testing by North Texas hospitals participating in public health surveillance programs: April 5 – June 20, 2020 (CDC Weeks 14-25)<sup>1-2</sup>**

Week Ending		4/11	4/18	4/25	5/2	5/9	5/16	5/23	5/30	6/6	6/13	6/20
SARS-CoV-2 Novel Coronavirus	Positive	320	405	374	483	555	507	453	465	585	919	1,120
	Total Tests	2,789	2,893	2,835	3,060	3,762	3,865	3,807	4,017	4,328	3,953	4,157
	% Positive	11.5%	14.0%	13.2%	15.8%	14.8%	13.1%	11.9%	11.6%	13.5%	23.2%	26.9%
Influenza	Positive	1	0	1	0	0	0	0	0	0	0	0
	Total Tests	328	560	454	325	337	315	277	233	235	206	121
	% Positive	0.3%	0%	0.2%	0%	0%	0%	0%	0%	0%	0%	0%
Seasonal (non-SARS-2) Coronavirus	Positive	1	1	0	0	0	0	0	1	0	0	0
	Total Tests	313	456	214	119	133	135	113	76	97	94	20
	% Positive	0.3%	0.2%	0%	0%	0%	0%	0%	1.3%	0%	0%	0%
Adenovirus (respiratory)	Positive	5	3	2	3	2	5	3	1	2	3	0
	Total Tests	313	440	374	246	281	252	255	198	217	183	100
	% Positive	1.6%	0.7%	0.5%	1.2%	0.7%	2.0%	1.2%	0.5%	0.9%	1.6%	0%
Metapneumo- virus	Positive	15	6	2	1	2	0	0	0	0	0	0
	Total Tests	313	444	374	246	281	252	255	198	217	183	100
	% Positive	4.8%	1.4%	0.5%	0.4%	0.7%	0%	0%	0%	0%	0%	0%
Rhinovirus/ Enterovirus	Positive	19	20	17	10	7	3	5	5	6	6	2
	Total Tests	313	444	374	246	281	252	255	198	217	184	100
	% Positive	6.1%	4.5%	4.5%	4.1%	2.5%	1.2%	2.0%	2.5%	2.8%	3.3%	2.0%
RSV	Positive	1	1	0	1	2	0	0	0	0	0	0
	Total Tests	370	461	382	250	282	258	262	200	218	187	104
	% Positive	0.3%	0.2%	0%	0.4%	0.7%	0%	0%	0%	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 7. SARS-CoV-2 novel coronavirus positive tests reported to DCHHS by hospital laboratories: March 22 – June 20, 2020 (CDC Weeks 13-25)<sup>1-2</sup>**



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>	<b>Cases (N= 19,034)</b>	<b>% of Total Cases</b>
International Travel	61	0.3%
Domestic Travel (Out-of-state)	128	0.7%
Cruise Ship Travel	10	0.1%
Long-Term Care Facility (Resident)	688	3.6%
County Jail (Inmate)	524	2.8%
State Jail (Inmate-- <a href="#">TDCJ COVID-19 Medical Action Center</a> )*	84	0.4%
Homeless Shelter	48	0.3%
Meat/Food Processing Facilities	304	1.6%
Close contact or Presumed Community Transmission**	17,187	90.3%

\*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 office<sup>1-4</sup>**

Week Ending	04/18	04/25	05/02	05/09	05/16	05/23	05/30	06/06	06/13	06/20	06/27	9/08/19– Present
<b>CDC Week</b>	<b>16</b>	<b>17</b>	<b>18</b>	<b>19</b>	<b>20</b>	<b>21</b>	<b>22*</b>	<b>23*</b>	<b>24*</b>	<b>25*</b>	<b>26*</b>	<b>Present</b>
COVID-19 hospitalizations <sup>1</sup>	174	164	176	190	196	213	141	162	210	220	80*	2,536
COVID-19 ICU admissions <sup>1</sup>	49	50	52	54	49	52	41	46	39	42	8*	708
Probable COVID-19-associated deaths <sup>2</sup>	0	0	0	0	0	0	0	0	0	0	0	0
Confirmed COVID-19-associated deaths <sup>3</sup>	31	28	28	28	42	27	29*	22*	23*	26*	18*	344

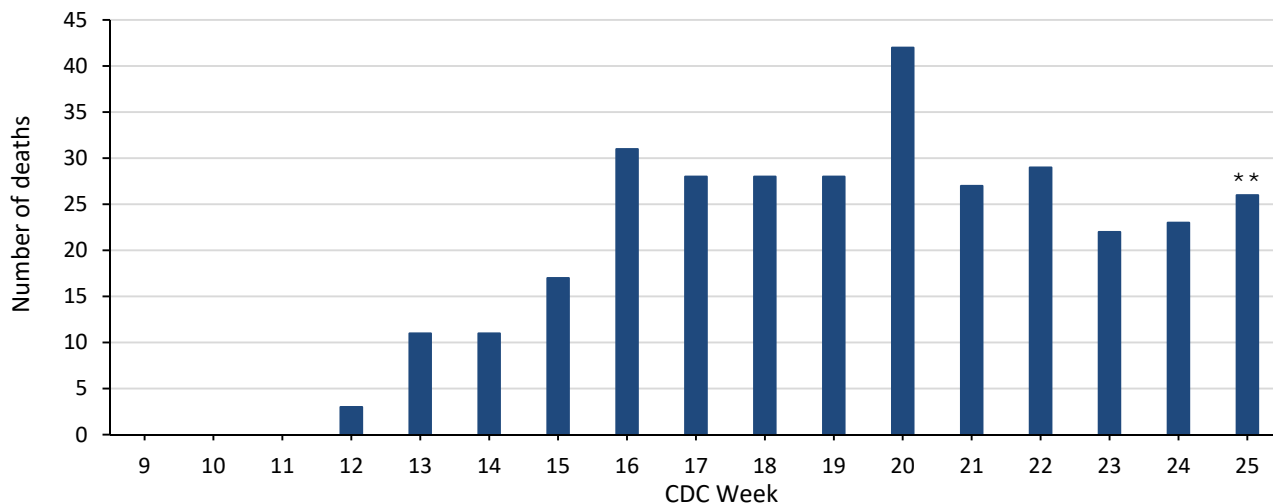
\* All data are preliminary and subject to change as cases continue to be received and investigated.

<sup>1</sup> 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.

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

<sup>3</sup> 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 8. Confirmed COVID-19-associated deaths by week of death, Dallas County: March 2019 through week ending June 20, 2020 (CDC Week 25)\***

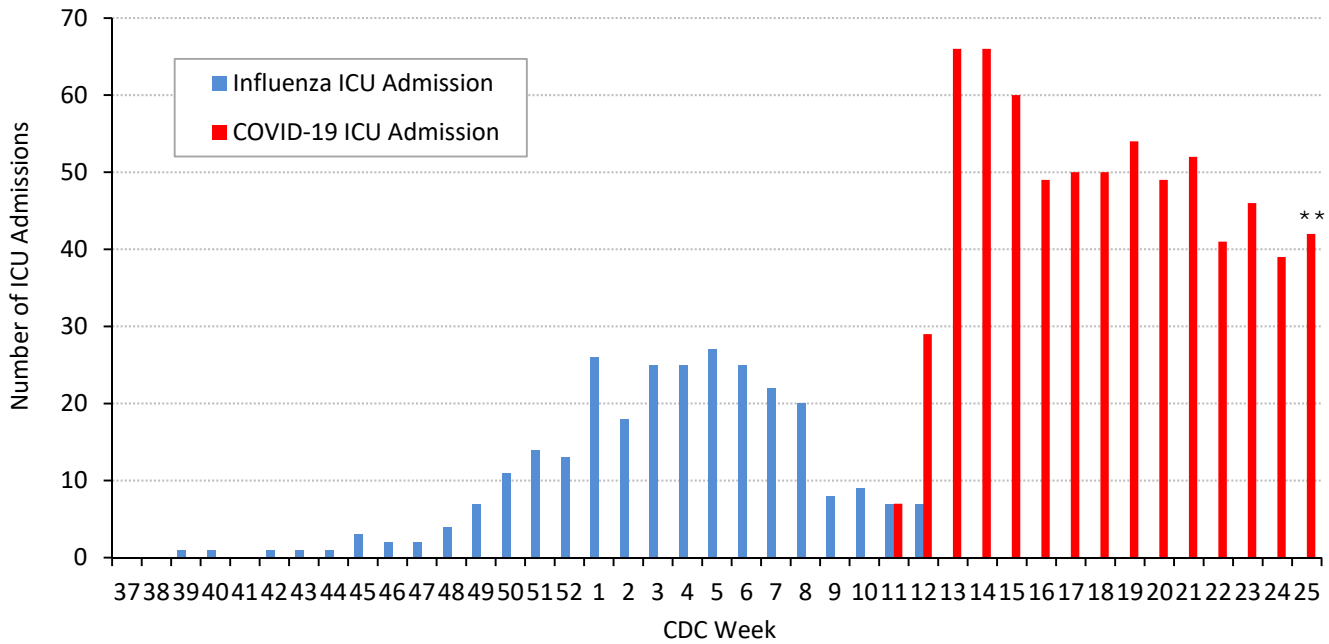


\* Dallas County residents diagnosed with confirmed COVID-19 by PCR testing.

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

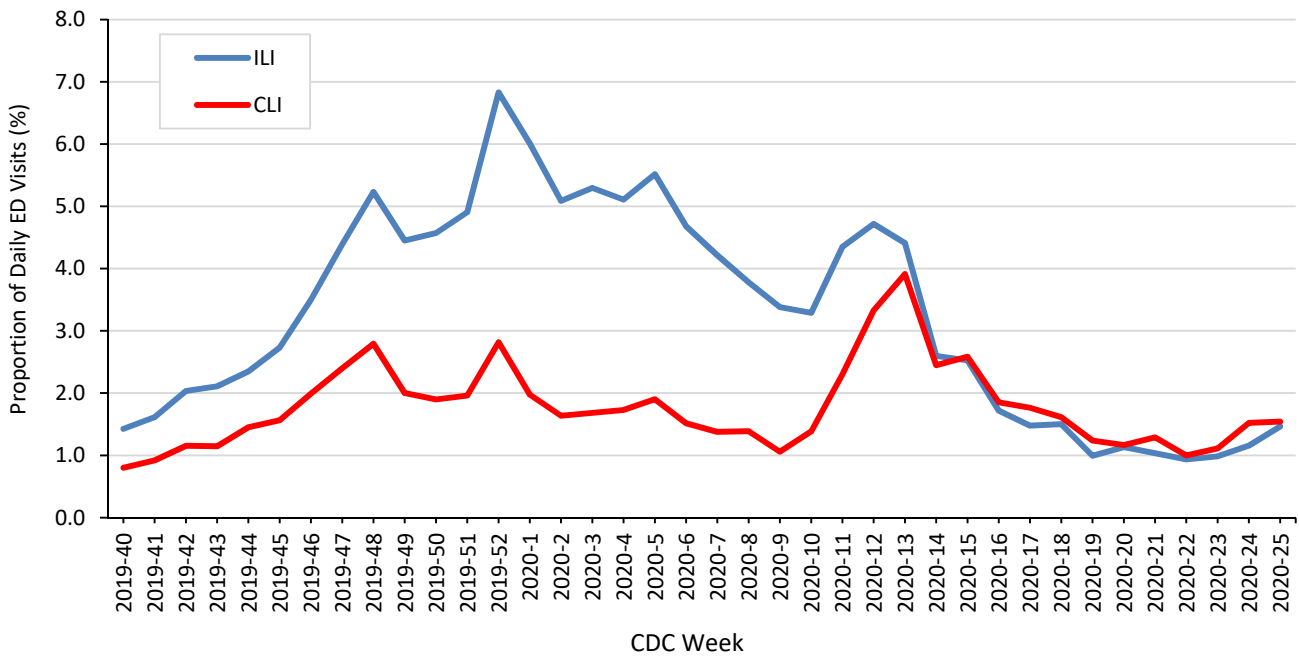


**Figure 9. Intensive care unit hospitalizations for influenza and COVID-19 by week of admission, Dallas County: September 2019 through week ending June 20, 2020 (CDC Week 25)\***



\* 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 10. Syndromic surveillance of emergency department visits for COVID-like illness (CLI)\* and Influenza-like illness (ILI)\*\*, Dallas County: September 29, 2019 – June 20, 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 – 6/22/20

Occupation	Hospitalized Cases (%) of Total Employed	
	Position	Sector
<b>Critical Infrastructure Workers*</b>		618 (83%)
Healthcare and Public Health		99 (13%)
	<i>Nurse, LVN, CNA</i>	15
	<i>Physician</i>	4
	<i>Other: Dentist, dietary, home health, medical assistant, mental health, PCT</i>	80
Transportation and Logistics		80 (13%)
	<i>Airline/Airport</i>	12
	<i>Parcel or postal delivery</i>	10
	<i>Cab/rideshare or bus driver</i>	16
	<i>Other: Mechanic, truck driver, freight, railroad</i>	42
Food and Agriculture		125 (17%)
	<i>Grocery</i>	25
	<i>Restaurant</i>	49
	<i>Other: Food processing, production, supply</i>	51
Other Community/Government Essential Functions		34 (5%)
	<i>Clergy (Pastor, priest)</i>	7
	<i>Education (Teacher, administration)</i>	10
	<i>Judicial system (Attorney)</i>	7
	<i>Other: Real estate services, shelter services, government operations</i>	11
Public Works and Infrastructure Support Services		88 (12%)
	<i>Construction/Contractor</i>	52
	<i>Other: Waste disposal, landscaping, maintenance</i>	36
Financial ( <i>Accounting, bank, insurance</i> )		33 (4%)
Communications and Information Technology		14 (2%)
Commercial Facilities ( <i>Building materials, painting, warehouse</i> )		47 (6%)
Hygiene Services ( <i>Custodian, housekeeping</i> )		33 (4%)
Law Enforcement, Public Safety, First Responders		18 (2%)
Critical Manufacturing ( <i>Manufacturing metal, packaging</i> )		23 (3%)
Energy/Utilities ( <i>Electricity, petroleum, gas</i> )		11 (1%)
<b>Non-Critical Infrastructure Workers (Includes retail, personal services)</b>		91 (12%)
<b>Employed (position not reported)</b>		33 (4%)
<b>Total reporting any employment</b>		<b>742</b>
<b>Non-Employed (Includes retired, child, homemaker, etc.)</b>		777
<b>Student (≥18 years old)</b>		17
<b>Not reported</b>		776
<b>Total hospitalized</b>		<b>2,312</b>

\* 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](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 26, 2020***(e.g. Does not include cases who reside in portions of cities which are not within Dallas County.)*

<b>City of Residence</b>	<b>Cases (N=19,034)</b>	<b>% of Total Cases</b>
Addison	72	0.4%
Balch Springs	172	0.9%
Carrollton	317	1.7%
Cedar Hill	275	1.4%
Cockrell Hill	40	0.2%
Combine	3	0.0%
Coppell	81	0.4%
Dallas	10,670	56.1%
DeSoto	321	1.7%
Duncanville	298	1.6%
Farmers Branch	205	1.1%
Ferris	1	0.0%
Garland	1,774	9.3%
Glenn Heights	42	0.2%
Grand Prairie	782	4.1%
Highland Park	21	0.1%
Hutchins	92	0.5%
Irving	1,847	9.7%
Lancaster	281	1.5%
Mesquite	984	5.2%
Richardson	293	1.5%
Rowlett	184	1.0%
Sachse	35	0.2%
Seagoville	123	0.6%
Sunnyvale	26	0.1%
University Park	35	0.2%
Wilmer	58	0.3%
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