

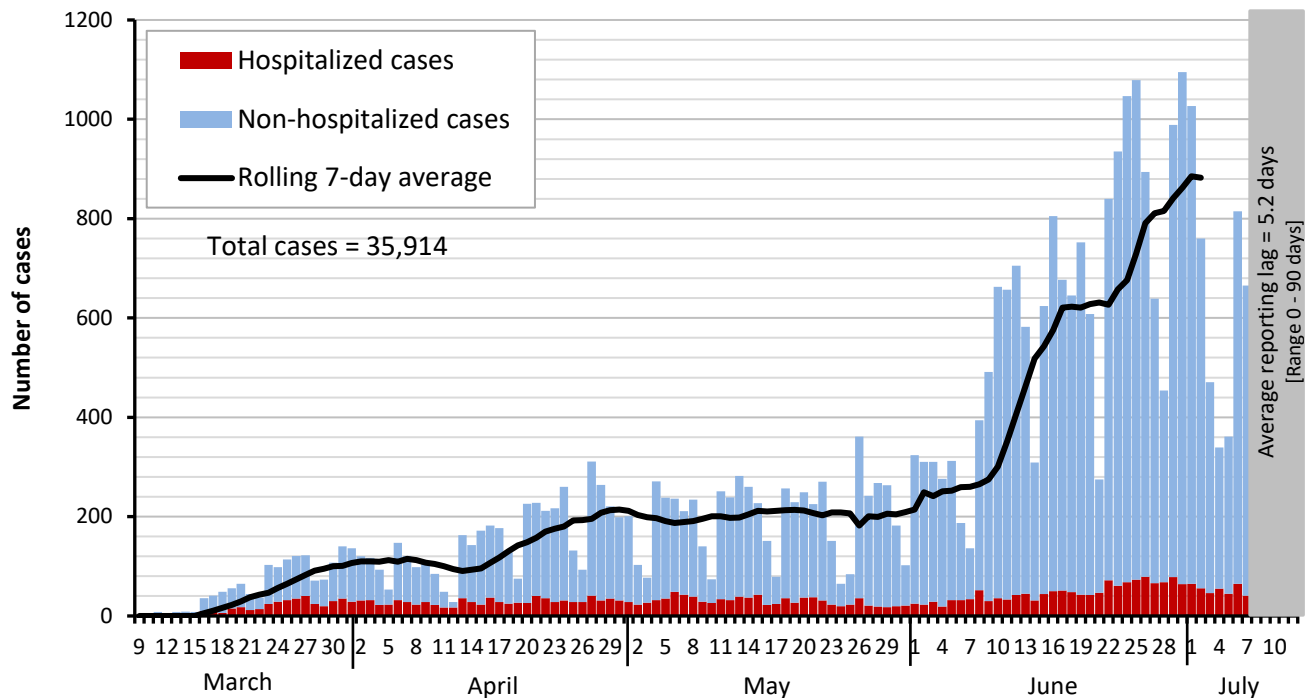


Dallas County Health and Human Services 2019 Novel Coronavirus (COVID-19) Summary

July 14, 2020

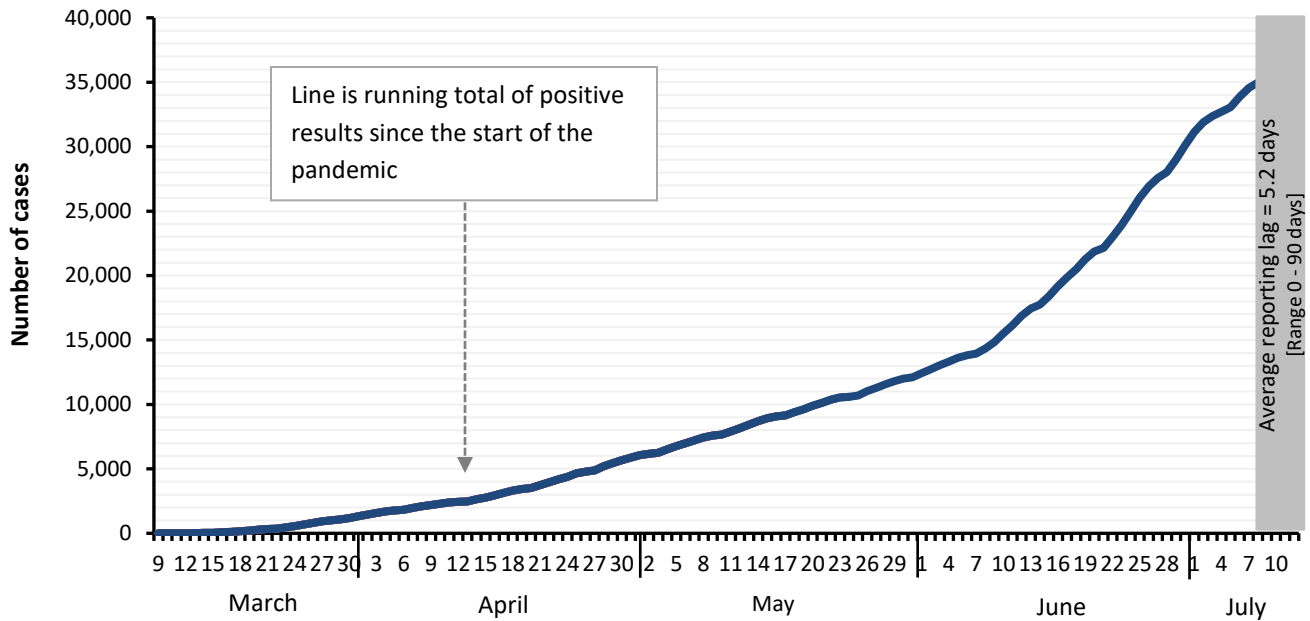
- As of July 14, 2020, DCHHS is reporting 1,000 additional cases of 2019 novel coronavirus (COVID-19), bringing the total case count in Dallas County to 35,914, including 477 deaths.
- An increasing proportion of COVID-19 cases are being diagnosed in young adults between 18 to 40 years of age, such that of all cases reported after June 1st, over 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 30.5% among symptomatic patients presenting to area hospitals in week 27.
- Of the 4,054 cases requiring hospitalization to date, over two-thirds (71%) have been under 65 years of age, and over half reported having a chronic health condition. 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-one percent (31%) 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 – July 14, 2020 ¹⁻⁴



1. Data received as of 8:00 pm yesterday, 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 5.2 days, with a range from 0 – 90 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.
5. Rolling 7-day average is the average number of new confirmed COVID-19 cases collected 7 days prior to value.

Figure 2. Cumulative COVID-19 cases by date of test collection, Dallas County: March 10 – July 14, 2020¹⁻²



1. Data received as of 8:00 pm yesterday, 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 5.2 days, with a range from 0 – 90 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=35,914)	% of Total Cases
Commercial or Hospital Laboratory*	34,299	95%
Dallas LRN Laboratory	1,358	4%
Other Public Health Laboratory	257	1%

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

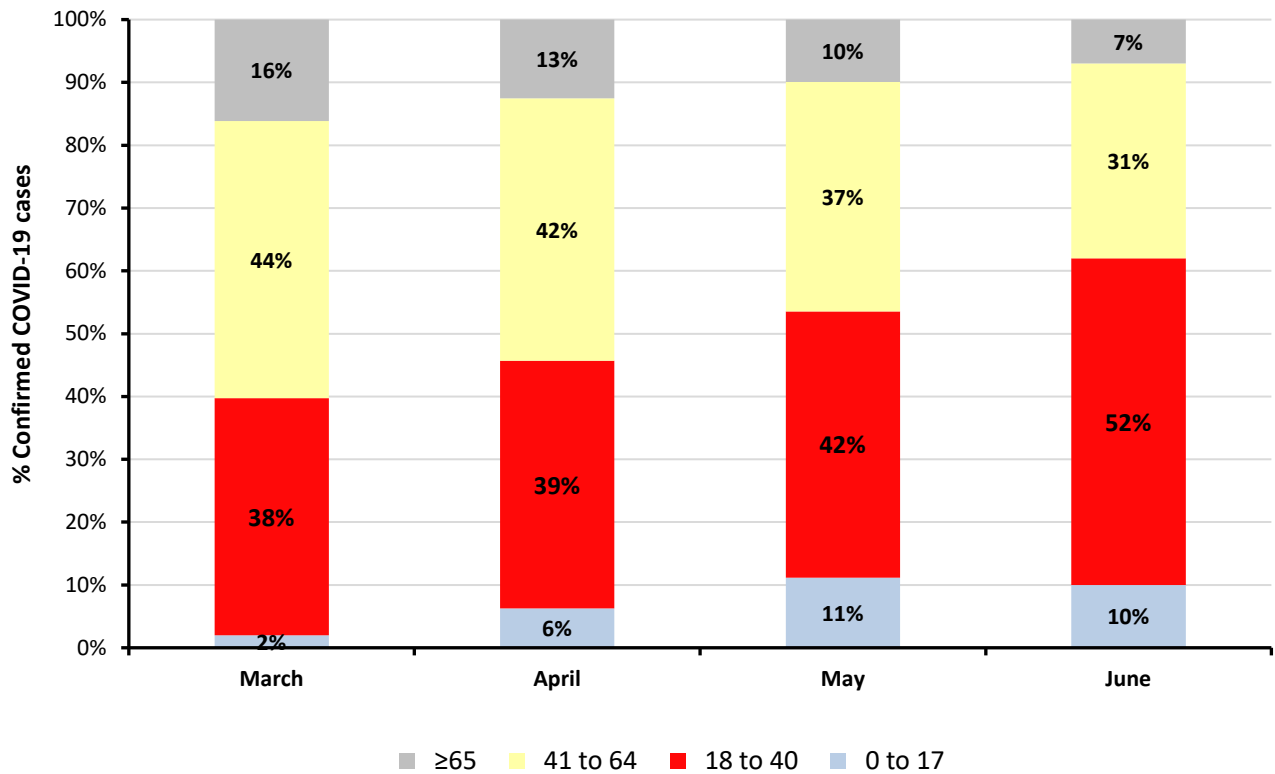
Table 2. Characteristics of cumulative confirmed COVID-19 cases, Dallas County: March 9 – July 14, 2020

	Number	% of Total Cases*
Total Cases in Dallas County residents	N = 35,914	100%
Age Group (years)	0 to 17	9%
	18 to 40	47%
	41 to 64	34%
	≥65	9%
Sex	Female	50%
	Male	50%
Not Hospitalized (Includes: Outpatient, urgent care, drive-through, ED)	31,860	89%
Ever Hospitalized	4,054	11%

* Percentages calculated among cases with known age/sex

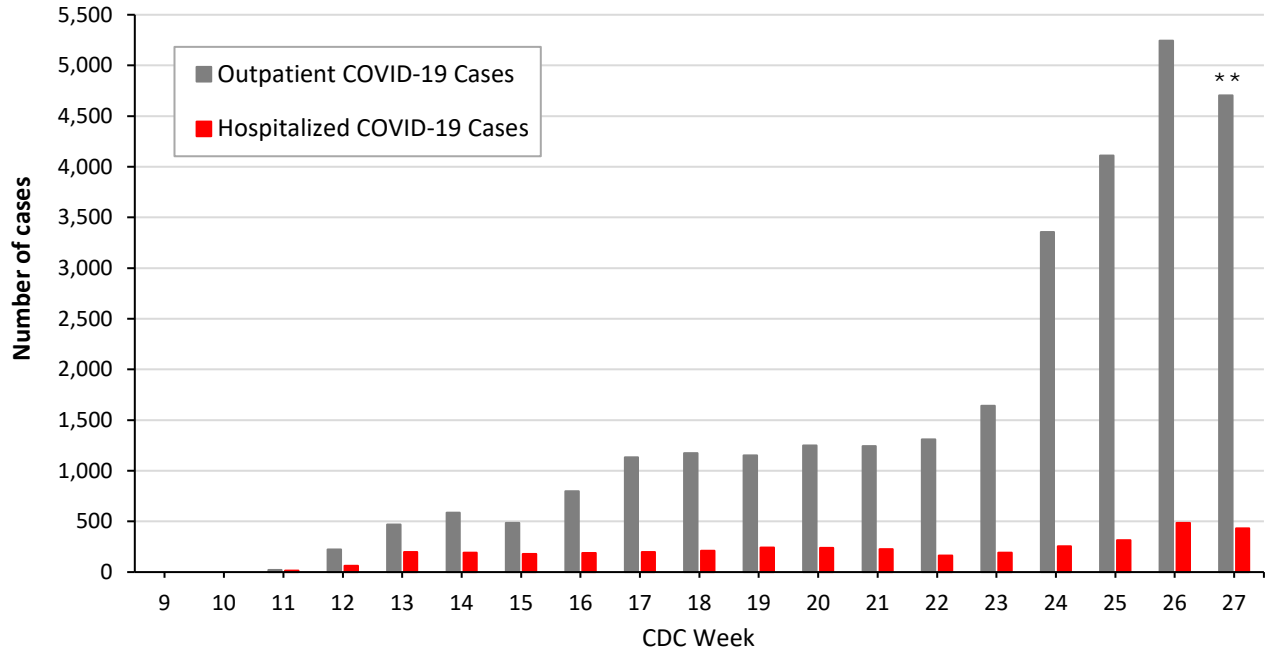
Figure 3. Number of confirmed COVID-19 cases by age group and month of collection, Dallas County

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	1,534	10%	7,945	52%	4,702	31%	1,174	7%
July (through 7/13)	496	9%	2,423	45%	1,955	36%	512	10%



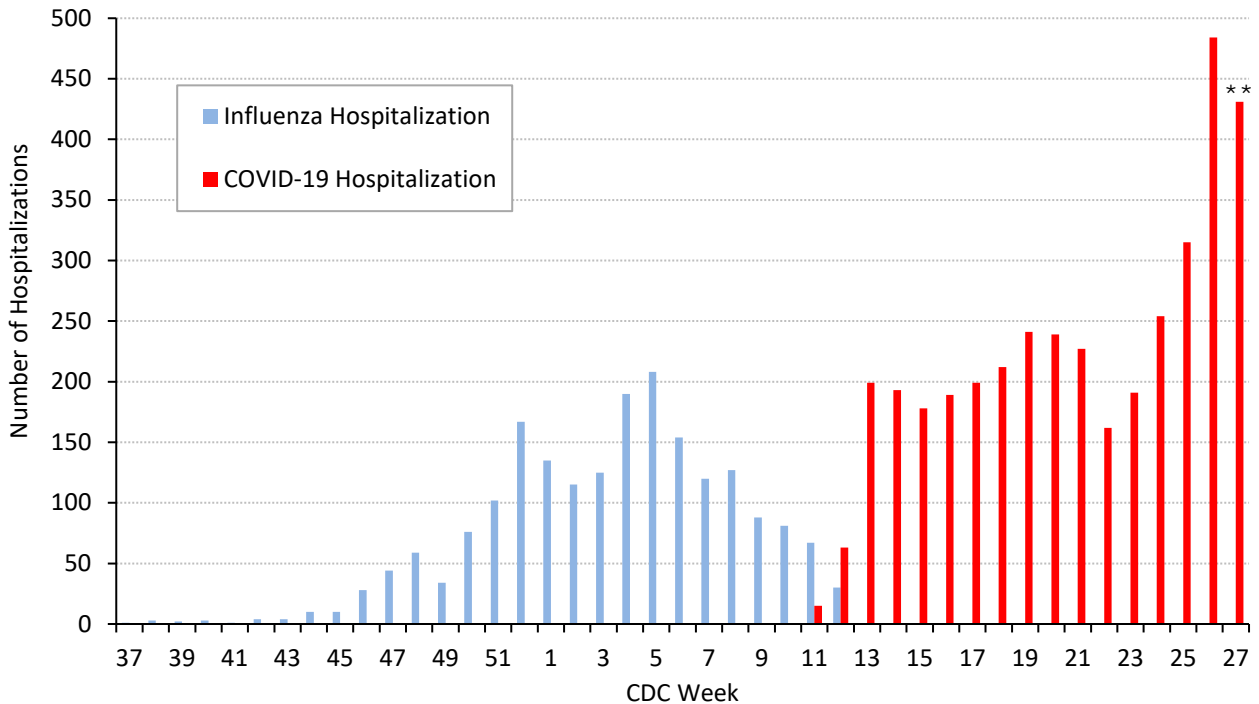
1. Data received as of 8:00 pm yesterday, for residents of Dallas County tested with known specimen collection dates. This does include delayed results from previous days. All data are preliminary and subject to change as cases continue to be investigated.
2. Data are incomplete for the most recent dates. 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 5.2 days, with a range from 0 – 90 days.

Figure 4. Non-hospitalized and hospitalized COVID-19 Cases by week of test collection, Dallas County: September 2019 through week ending July 4, 2020 (CDC Week 27)*



* 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 July 4, 2020 (CDC Week 27)*



* 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 – July 14, 2020

		Hospitalized Cases	%
<i>Ever Hospitalized</i>		N = 4,054	11% of Total Cases
Admitted to Intensive Care Unit		948	23%
Mechanical Ventilation		534	13%
Sex	Male	2,161	53%
	Female	1,893	47%
Age Group (years)	0-17	74	2%
	18-40	895	22%
	41-64	1,892	47%
	≥65	1,193	29%
Presence of ≥1 high risk condition		2,307	57%
Diabetes		1,247	31%
Lung Disease (e.g. COPD, asthma)		449	11%
Heart Disease (e.g. CHF)		546	13%
Kidney Disease (e.g. ESRD, dialysis)		422	10%
Cancer, Immune-compromise		301	7%
Obesity		605	15%
Race/ Ethnicity	White	617	15%*
	Hispanic	2,081	51%*
	Black	855	21%*
	Other	158	4%*
	Non-reported/ Unknown	343	9%

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

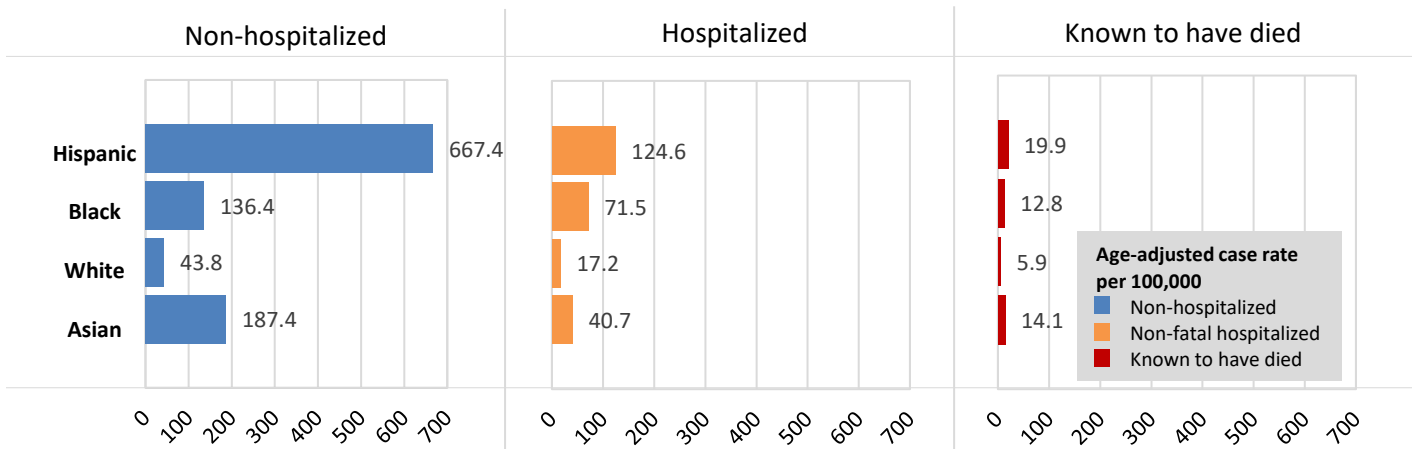
Table 4. Characteristics of cumulative confirmed COVID-19 deaths, Dallas County: March 10 – July 14, 2020

<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 = 477	1.4% of Total Cases
Sex	Male	305	64%
	Female	172	36%
Age Group (years)	17-40	24	5%
	41-64	138	29%
	≥65	315	66%
Resident of a Long-Term Care Facility		149	31%
Presence of ≥1 high risk condition		334	74%
Diabetes		205	45%
Race/ Ethnicity	White	127	27% (29% of population) ²
	Hispanic	207	43% (41% of population) ²
	Black	118	25% (24% of population) ²
	Asian	18	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

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
Age-adjusted case rate per 100,000	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

	Race/Ethnicity	Non-hospitalized	Hospitalized	Known to have died
Count of cases	Hispanic	6,672	933	101
	Black	814	400	63
	White	695	275	91
	Asian	333	50	11

	Race/Ethnicity	Non-hospitalized	Hospitalized	Known to have died
Percent of known race/ethnicity	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

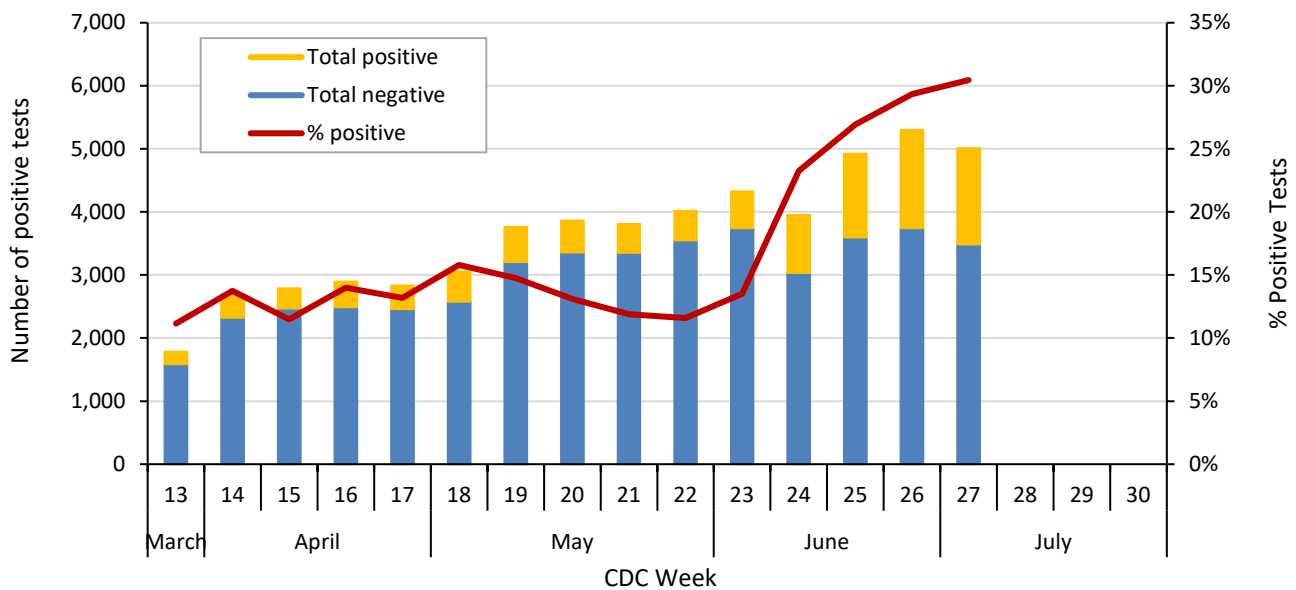
1. Data received as of 8:00 pm, June 8, 2020, for residents of Dallas County tested with known specimen collection dates. This does include delayed results from previous days. All data are preliminary and subject to change as cases continue to be investigated.
2. Data on persons who identify as American 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 19 – July 4, 2020 (CDC Weeks 17-27)¹⁻²

Week Ending		4/25	5/2	5/9	5/16	5/23	5/30	6/6	6/13	6/20	6/27	7/4
SARS-CoV-2	Positive	374	483	555	507	453	465	585	919	1,327	1,555	1,526
	Total Tests	2,835	3,060	3,762	3,865	3,807	4,017	4,328	3,953	4,925	5,300	5,011
Novel Coronavirus	% Positive	13.2%	15.8%	14.8%	13.1%	11.9%	11.6%	13.5%	23.2%	26.9%	29.3%	30.5%
Influenza	Positive	1	0	0	0	0	0	0	0	0	0	0
	Total Tests	454	325	337	315	277	233	235	206	121	238	126
	% Positive	0.2%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
Seasonal (non-SARS-2) Coronavirus	Positive	0	0	0	0	0	1	0	0	0	0	0
	Total Tests	214	119	133	135	113	76	97	94	20	26	126
	% Positive	0%	0%	0%	0%	0%	1.3%	0%	0%	0%	0%	0%
Adenovirus (respiratory)	Positive	2	3	2	5	3	1	2	3	0	1	0
	Total Tests	374	246	281	252	255	198	217	183	100	194	126
	% Positive	0.5%	1.2%	0.7%	2.0%	1.2%	0.5%	0.9%	1.6%	0%	0.5%	0%
Metapneumovirus	Positive	2	1	2	0	0	0	0	0	0	0	0
	Total Tests	374	246	281	252	255	198	217	183	100	194	126
	% Positive	0.5%	0.4%	0.7%	0%	0%	0%	0%	0%	0%	0%	0%
Rhinovirus/Enterovirus	Positive	17	10	7	3	5	5	6	6	2	4	12
	Total Tests	374	246	281	252	255	198	217	184	100	194	126
	% Positive	4.5%	4.1%	2.5%	1.2%	2.0%	2.5%	2.8%	3.3%	2.0%	2.1%	9.5%
RSV	Positive	0	1	2	0	0	0	0	0	0	0	0
	Total Tests	382	250	282	258	262	200	218	187	104	197	126
	% Positive	0%	0.4%	0.7%	0%	0%	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 – July 4, 2020 (CDC Weeks 13-27)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= 35,914)	% of Total Cases
International Travel	80	0.2%
Domestic Travel (Out-of-state)	198	0.6%
Cruise Ship Travel	13	0.0%
Long-Term Care Facility (Resident) ¹	864	2.4%
County Jail (Inmate)	572	1.6%
State Jail (Inmate-- TDCJ COVID-19 Medical Action Center) ²	84	0.2%
Federal Prison (Inmate) ³	718	2.0%
Homeless Shelter	64	0.2%
Meat/Food Processing Facilities	481	1.3%
Close contact or Presumed Community Transmission ⁴	32,840	91.4%

¹ Does not include over 290 COVID-19 cases reported in LTCF staff members employed by the > 104 affected LTCFs.

² Texas Department of Criminal Justice cases are under the jurisdiction of the Texas Department of State Health Services for investigation

³ Federal prison cases are under the jurisdiction of the federal government for investigation, but are now included in total County cases

⁴ 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	05/09	05/16	05/23	05/30	06/06	06/13	06/20	06/27	07/04	07/11	9/08/19– Present
CDC Week	19	20	21	22	23	24	25	26*	27*	28*	
COVID-19 hospitalizations ¹	241	239	227	162	191	254	315	484*	431*	261*	4,054
COVID-19 ICU admissions ¹	59	54	63	43	58	61	79	62*	59*	32*	948
Probable COVID-19-associated deaths ²	0	0	0	0	0	0	0	0	0	0	0
Confirmed COVID-19-associated deaths ³	28	47	27	30	27	25	34	47	44	28	477

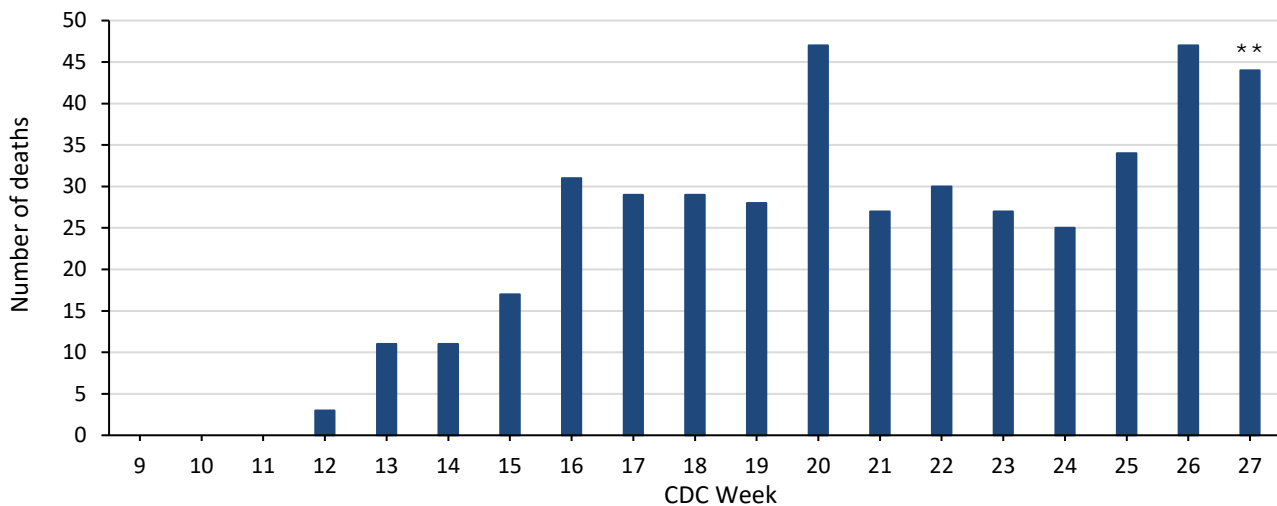
* All data are preliminary and subject to change as cases continue to be received and investigated.

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.

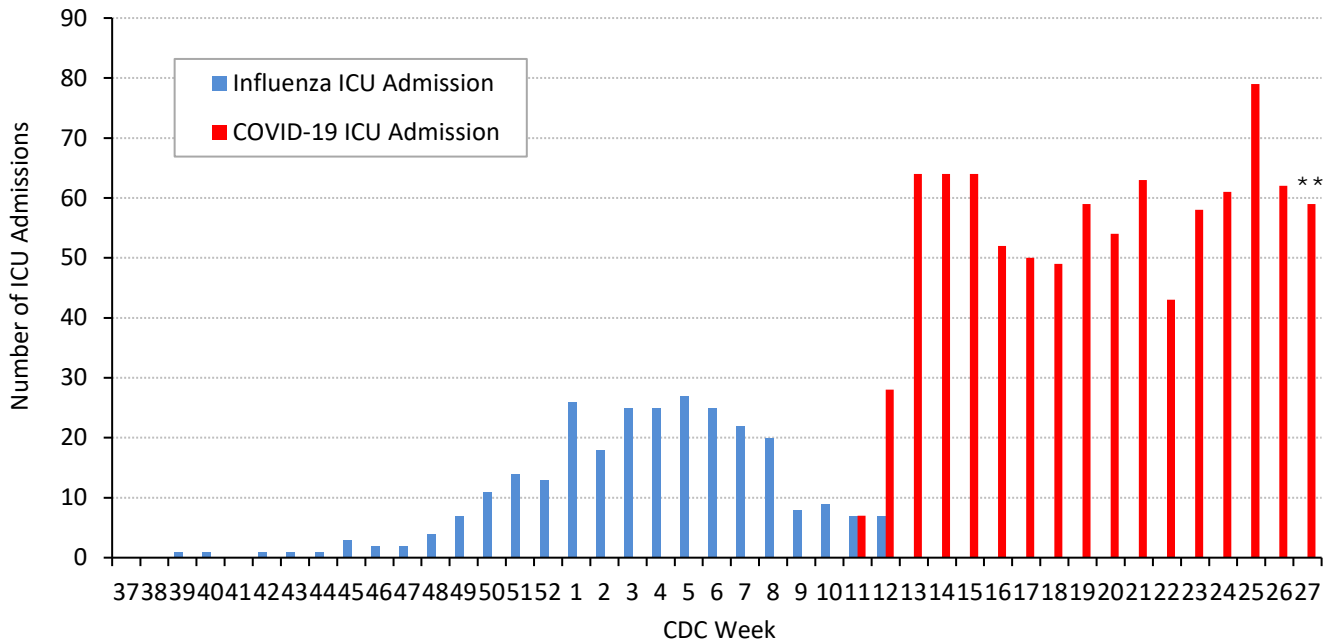
Figure 8. Confirmed COVID-19-associated deaths by week of death, Dallas County: March 2019 through week ending July 4, 2020 (CDC Week 27)*



* 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.

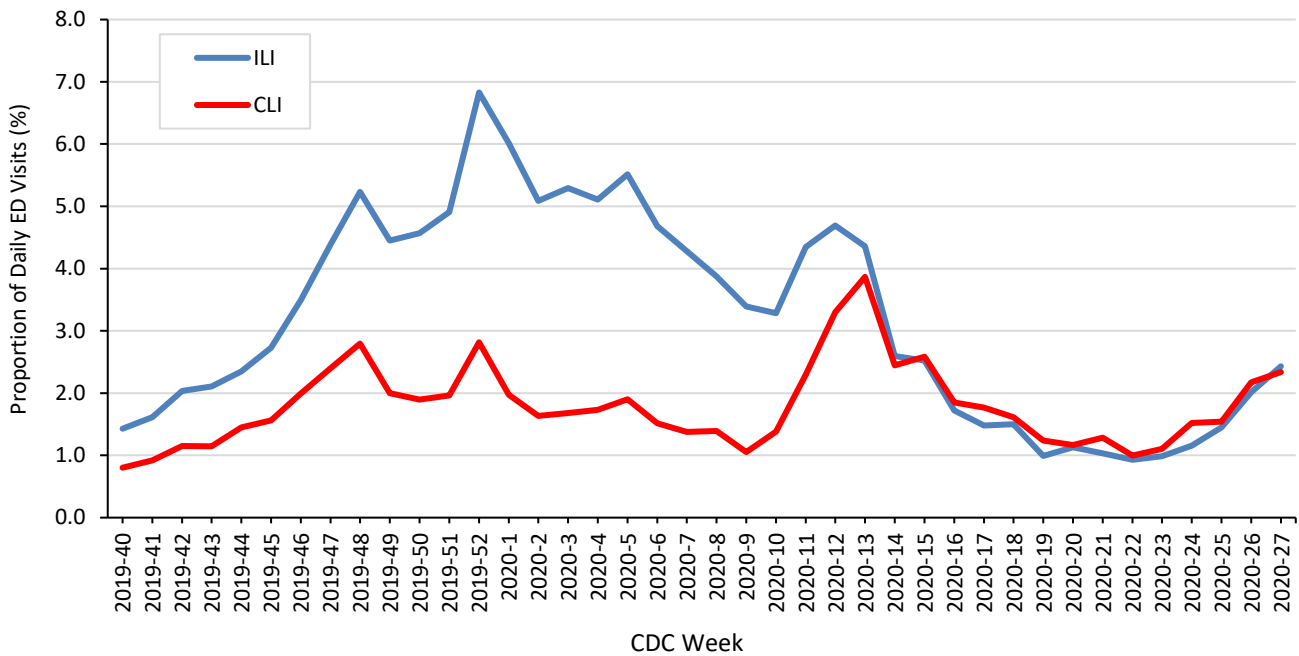
Figure 9. Intensive care unit hospitalizations for influenza and COVID-19 by week of admission, Dallas County: September 2019 through week ending July 4, 2020 (CDC Week 27)*



* New ICU admissions of Dallas County residents reported with confirmed COVID-19 by PCR testing as of 8:00 pm yesterday. Hospitalized patients with self-reported residence from outside of Dallas County are not included.

** 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 – July 4, 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 – 7/6/20

Occupation	Hospitalized Cases (%) of Total Employed	
	Position	Sector
Critical Infrastructure Workers*		767 (80%)
Healthcare and Public Health		125 (13%)
	<i>Nurse, LVN, CNA</i>	19
	<i>Physician</i>	4
	<i>Other: Dentist, dietary, home health, medical assistant, mental health, PCT</i>	102
Transportation and Logistics		107 (11%)
	<i>Airline/Airport</i>	12
	<i>Parcel or postal delivery</i>	11
	<i>Cab/rideshare or bus driver</i>	19
	<i>Other: Mechanic, truck driver, freight, railroad</i>	65
Food and Agriculture		154 (16%)
	<i>Grocery</i>	30
	<i>Restaurant</i>	65
	<i>Other: Food processing, production, supply</i>	59
Other Community/Government Essential Functions		47 (5%)
	<i>Clergy (Pastor, priest)</i>	9
	<i>Education (Teacher, administration)</i>	13
	<i>Judicial system (Attorney)</i>	7
	<i>Other: Real estate services, shelter services, government operations</i>	18
Public Works and Infrastructure Support Services		114 (12%)
	<i>Construction/Contractor</i>	67
	<i>Other: Waste disposal, landscaping, maintenance</i>	47
Financial (<i>Accounting, bank, insurance</i>)		40 (4%)
Communications and Information Technology		14 (1%)
Commercial Facilities (<i>Building materials, painting, warehouse</i>)		55 (6%)
Hygiene Services (<i>Custodian, housekeeping</i>)		42 (4%)
Law Enforcement, Public Safety, First Responders		24 (3%)
Critical Manufacturing (<i>Manufacturing metal, packaging</i>)		33 (3%)
Energy/Utilities (<i>Electricity, petroleum, gas</i>)		12 (1%)
Non-Critical Infrastructure Workers (Includes retail, personal services)		131 (14%)
Employed (position not reported)		57 (6%)
Total reporting any employment		955
Non-Employed (Includes retired, child, homemaker, etc.)		1076
Student (≥18 years old)		22
Not reported		1,169
Total hospitalized		3,222

* 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 July 14, 2020*(e.g. Does not include cases who reside in portions of cities which are not within Dallas County.)*

City of Residence	Cases (N=35,914)	% of Total Cases
Addison	139	0.4%
Balch Springs	356	1.0%
Carrollton	566	1.6%
Cedar Hill	576	1.6%
Cockrell Hill	85	0.2%
Combine	8	0.0%
Coppell	172	0.5%
Dallas	19,483	54.2%
DeSoto	711	2.0%
Duncanville	574	1.6%
Farmers Branch	351	1.0%
Ferris	2	0.0%
Garland	3,276	9.1%
Glenn Heights	81	0.2%
Grand Prairie	1,629	4.5%
Highland Park	30	0.1%
Hutchins	148	0.4%
Irving	3,008	8.4%
Lancaster	564	1.6%
Mesquite	1,965	5.5%
Ovilla	1	0.0%
Richardson	544	1.5%
Rowlett	379	1.1%
Sachse	77	0.2%
Seagoville	964	2.7%
Sunnyvale	57	0.2%
University Park	57	0.2%
Wilmer	109	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