- As of July 17, 2020, DCHHS is reporting 1,195 additional cases of 2019 novel coronavirus (COVID-19), bringing the total case count in Dallas County to 39,191, including 514 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 remains high with 26.8% among symptomatic patients presenting to area hospitals in week 28.

- Of the 4,781 cases requiring hospitalization to date, nearly three-quarter (72%) 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 percent (30%) 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 17, 2020 [1-4]
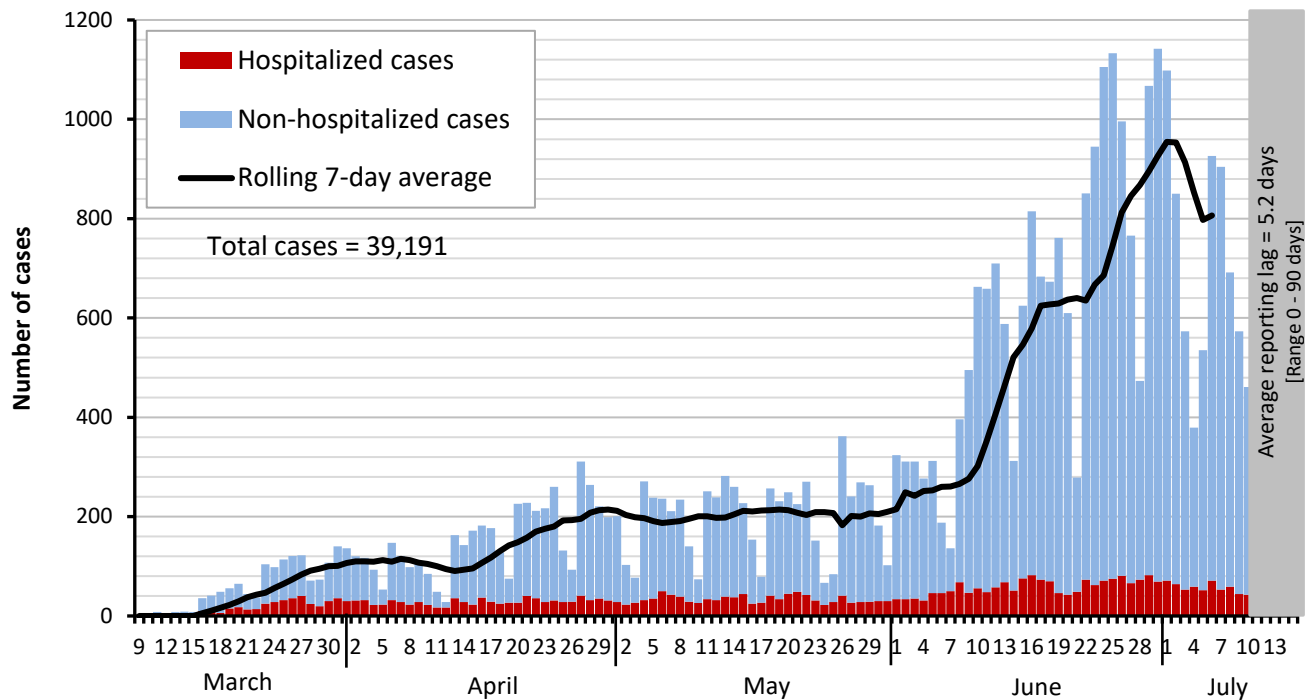
1. *Data received as of 8:00 pm yesterday, for residents of Dallas County tested with known specimen collection dates. This does include delayed results from previous days. All data are preliminary and subject to change as cases continue to be investigated.*

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, 2020 [1-2]
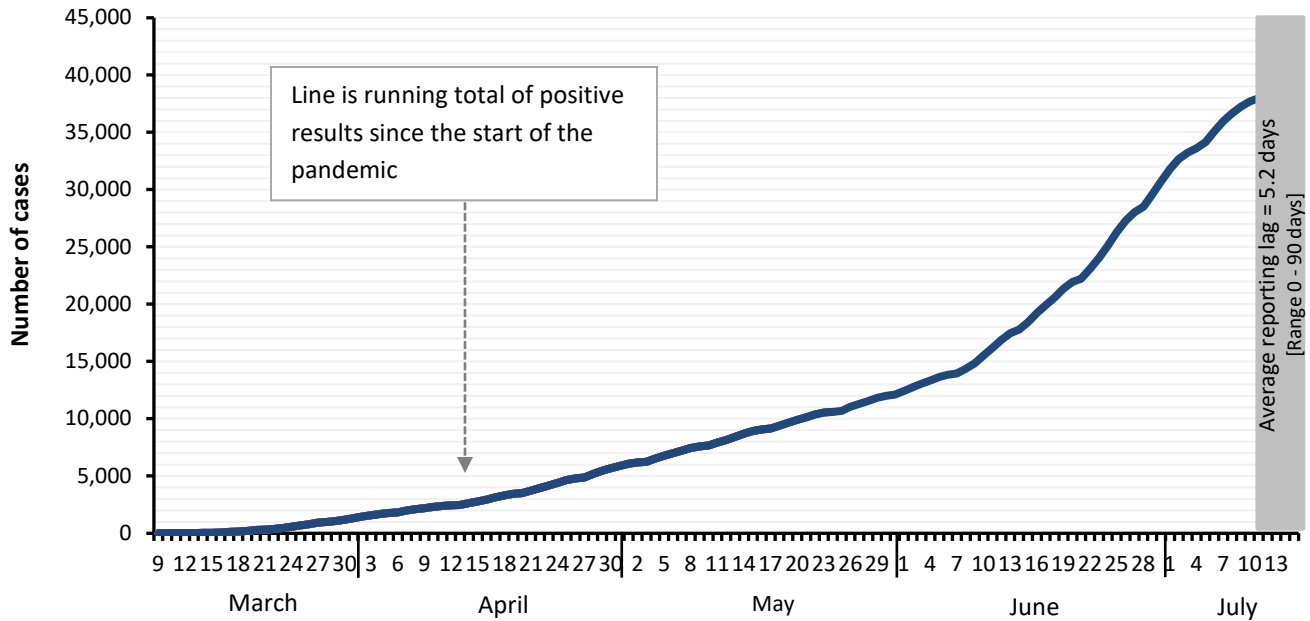
1. Data received as of 8:00 pm yesterday, for residents of Dallas County tested with known specimen collection dates. This does include delayed results from previous days. All data are preliminary and subject to change as cases continue to be investigated.
2. Data are incomplete for the most recent dates. 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=39,191)	% of Total Cases
Commercial or Hospital Laboratory*	37,518	96%
Dallas LRN Laboratory	1,424	3%
Other Public Health Laboratory	249	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 17, 2020

		Number	% of Total Cases[+]
Total Cases in Dallas County residents		N = 39,191	100%
Age Group (years)	0 to 17	3,821	10%
	18 to 40	18,199	47%
	41 to 64	13,456	34%
	≥65	3,572	9%
Sex	Female	19,196	50%
	Male	19,346	50%
Not Hospitalized *(Includes: Outpatient, urgent care, drive-through, ED)*		34,410	88%
Ever Hospitalized		4,781	12%

[+]*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*)	893	11%	3,515	44%	2,872	35%	766	10%
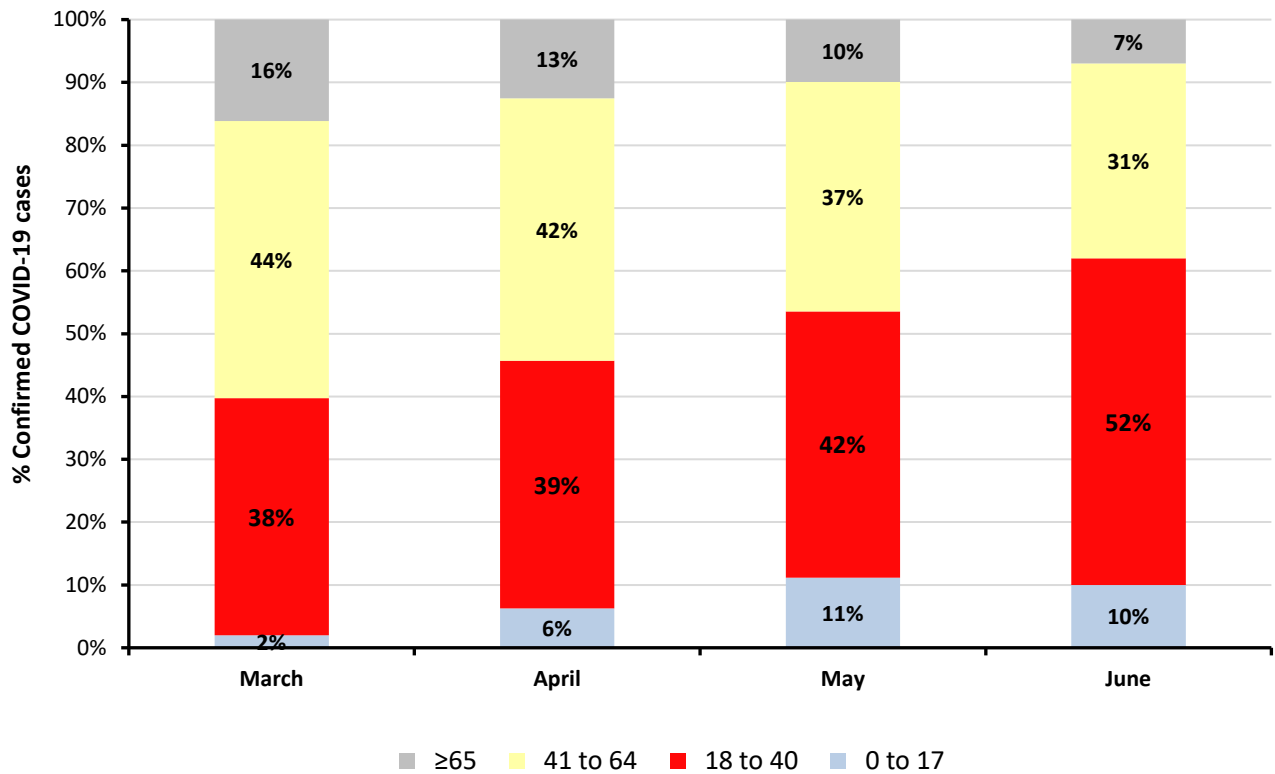
1. *Data received as of 8:00 pm yesterday, for residents of Dallas County tested with known specimen collection dates. This does include delayed results from previous days. All data are preliminary and subject to change as cases continue to be investigated.*
2. *Data are incomplete for the most recent 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 11, 2020 (CDC Week 28)*
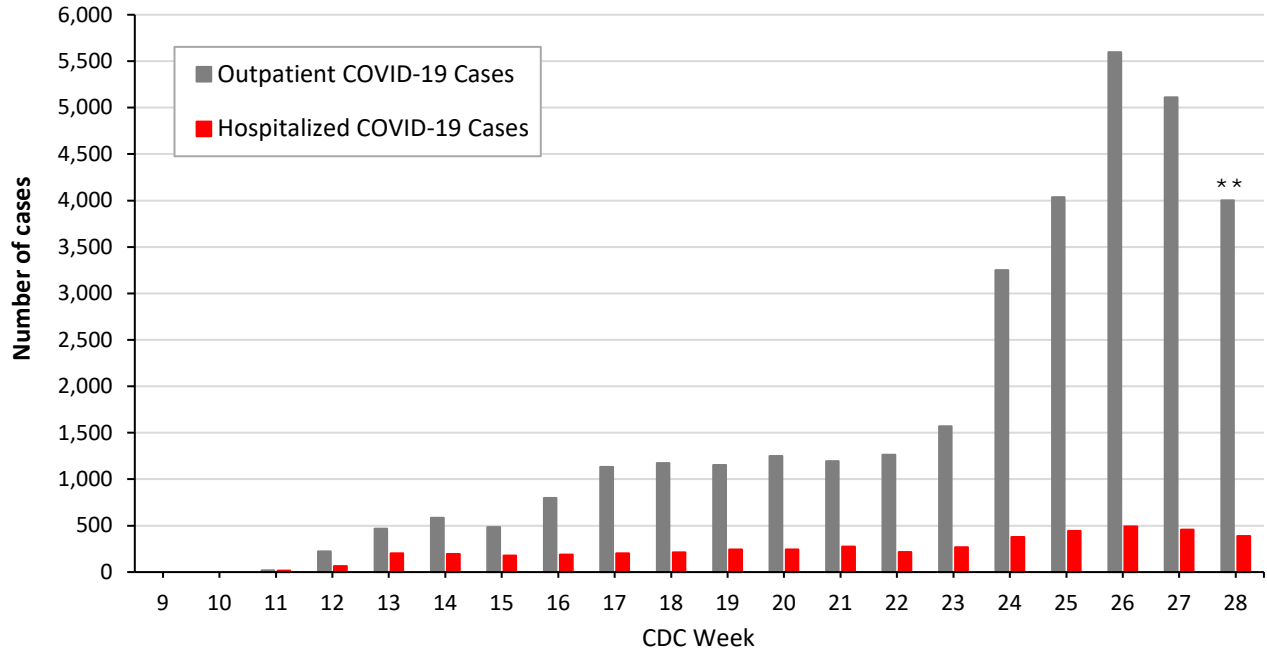
* Non-hospitalized includes all patients not admitted to acute-care hospitals (e.g. outpatient, urgent care, drive-through, ED-only, LTCF) and diagnosed with confirmed COVID-19 by PCR testing. All data are preliminary and subject to change as cases continue to be received and investigated.

** 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 11, 2020 (CDC Week 28)*
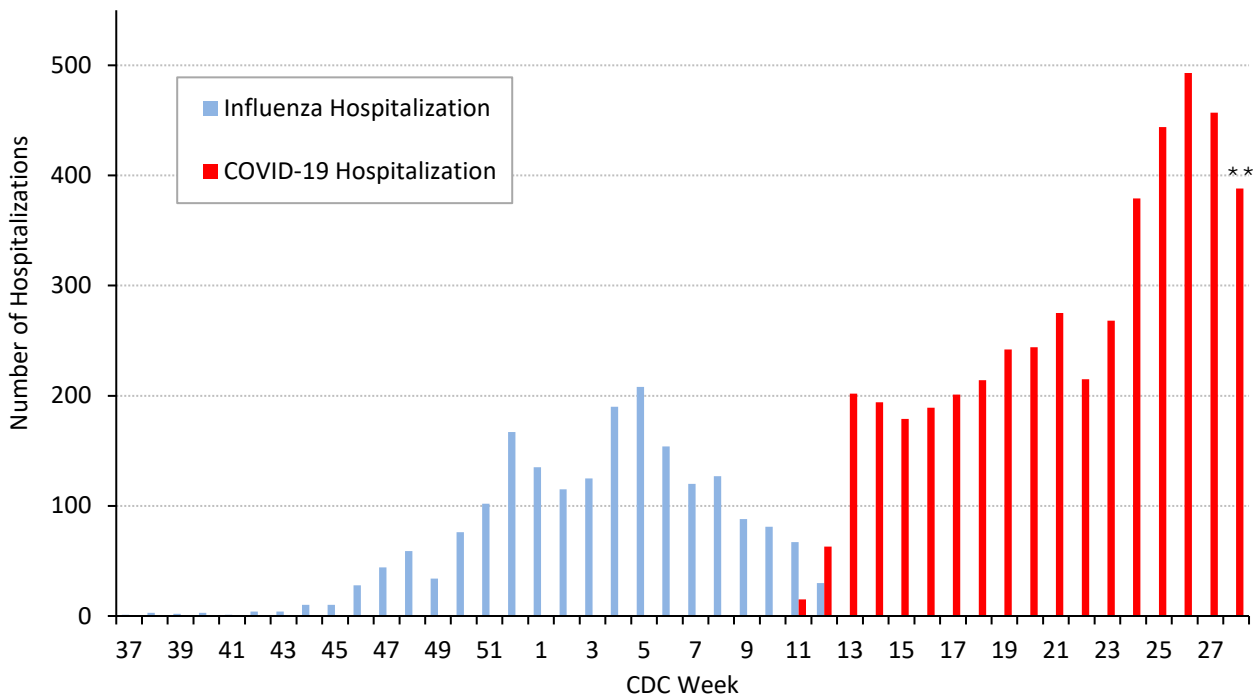
* Hospitalized Dallas County residents diagnosed with confirmed COVID-19 by PCR testing. All data are preliminary and subject to change as cases continue to be received and investigated.

** 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 17, 2020

		Hospitalized Cases	%
Ever Hospitalized		N = 4,781	12% of Total Cases
Admitted to Intensive Care Unit		1,038	22%
Mechanical Ventilation		574	12%
Sex	Male	2,493	52%
	Female	2,288	48%
Age Group (years)	0-17	101	2%
	18-40	1,140	24%
	41-64	2,219	46%
	≥65	1,321	28%
Presence of ≥1 high risk condition		2,692	56%
Diabetes		1,434	30%
Lung Disease *(e.g. COPD, asthma)*		507	11%
Heart Disease *(e.g. CHF)*		621	13%
Kidney Disease *(e.g. ESRD, dialysis)*		481	10%
Cancer, Immune-compromise		343	7%
Obesity		725	15%
Race/ Ethnicity	White	689	14%*
	Hispanic	2,569	54%*
	Black	973	20%*
	Other	174	4%*
	Non-reported/ Unknown	376	8%

* 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 17, 2020

		Confirmed Deaths	% [1]
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.		N = 514	1.3% of Total Cases
Sex	Male	330	64%
	Female	184	36%
Age Group (years)	17-40	27	5%
	41-64	146	29%
	≥65	341	66%
Resident of a Long-Term Care Facility		154	30%
Presence of ≥1 high risk condition		365	75%
Diabetes		229	45%
Race/ Ethnicity	White	138	**27%** (29% of population)[2]
	Hispanic	224	**44%** (41% of population)[2]
	Black	128	**24%** (24% of population)[2]
	Asian	19	**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 participating in public health surveillance programs: April 26 – July 11, 2020 (CDC Weeks 18-28) [1-2]

Week Ending		5/2	5/9	5/16	5/23	5/30	6/6	6/13	6/20	6/27	7/4	7/11
SARS-CoV-2 Novel Coronavirus	Positive	483	555	507	453	465	585	919	1,327	1,555	1,526	1,952
	Total Tests	3,060	3,762	3,865	3,807	4,017	4,328	3,953	4,925	5,300	5,011	7,282
	% Positive	15.8%	14.8%	13.1%	11.9%	11.6%	13.5%	23.2%	26.9%	29.3%	30.5%	26.8%
Influenza	Positive	0	0	0	0	0	0	0	0	0	0	0
	Total Tests	325	337	315	277	233	235	206	121	238	225	174
	% Positive	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
Seasonal (non-SARS-2) Coronavirus	Positive	0	0	0	0	1	0	0	0	0	0	1
	Total Tests	119	133	135	113	76	97	94	20	26	126	44
	% Positive	0%	0%	0%	0%	1.3%	0%	0%	0%	0%	0%	2.3%
Adenovirus (respiratory)	Positive	3	2	5	3	1	2	3	0	1	0	2
	Total Tests	246	281	252	255	198	217	183	100	194	200	145
	% Positive	1.2%	0.7%	2.0%	1.2%	0.5%	0.9%	1.6%	0%	0.5%	0%	1.4%
Metapneumo-virus	Positive	1	2	0	0	0	0	0	0	0	0	0
	Total Tests	246	281	252	255	198	217	183	100	194	200	145
	% Positive	0.4%	0.7%	0%	0%	0%	0%	0%	0%	0%	0%	0%
Rhinovirus/ Enterovirus	Positive	10	7	3	5	5	6	6	2	4	12	5
	Total Tests	246	281	252	255	198	217	184	100	194	200	145
	% Positive	4.1%	2.5%	1.2%	2.0%	2.5%	2.8%	3.3%	2.0%	2.1%	6.0%	3.4%
RSV	Positive	1	2	0	0	0	0	0	0	0	0	0
	Total Tests	250	282	258	262	200	218	187	104	197	200	145
	% Positive	0.4%	0.7%	0%	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 11, 2020 (CDC Weeks 13-28) [1-2]
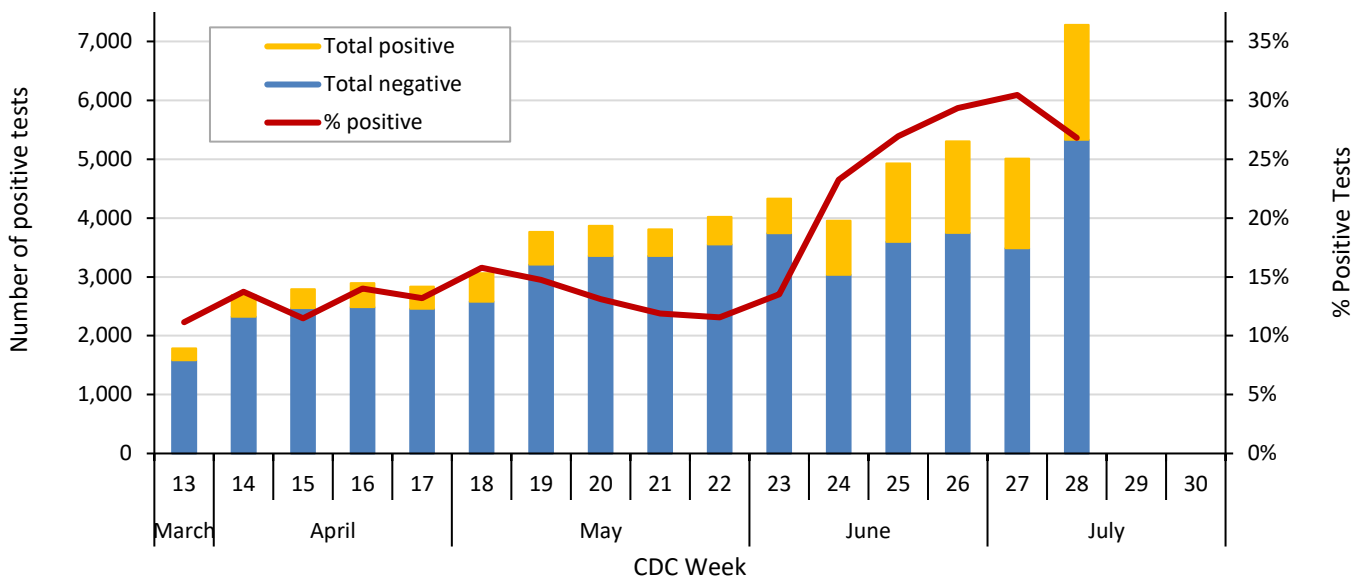
1. *Data received as of 8:00 pm yesterday. All data are preliminary and subject to change as cases continue to be received and investigated.*
2. *Data are incomplete for the most recent dates. Test results may be reported to DCHHS several days after the result.*

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

Exposure Risk Factor	Cases (N= 39,191)	% of Total Cases
International Travel	80	0.2%
Domestic Travel (Out-of-state)	198	0.5%
Cruise Ship Travel	13	0.0%
Long-Term Care Facility (Resident)[1]	922	2.4%
County Jail (Inmate)	586	1.5%
State Jail (Inmate--TDCJ COVID-19 Medical Action Center)[2]	84	0.2%
Federal Prison (Inmate)[3]	1,042	2.7%
Homeless Shelter	64	0.2%
Meat/Food Processing Facilities	481	1.2%
Close contact or Presumed Community Transmission[4]	35,721	91.1%

[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 office [1-4]

| Week Ending	05/16	05/23	05/30	06/06	06/13	06/20	06/27	07/04	07/11	9/08/19– Present
CDC Week	20	21	22	23	24	25	26*	27*	28*	
COVID-19 hospitalizations[1]	244	275	215	268	379	444	493*	457*	388*	4,781
COVID-19 ICU admissions[1]	55	63	47	56	64	84	70*	73*	65*	1,038
Probable COVID-19-associated deaths[2]	0	0	0	0	0	0	0	0	0	0
Confirmed COVID-19-associated deaths[3]	47	28	30	28	25	35	49*	45*	37*	514

* 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 11, 2020 (CDC Week 28)*
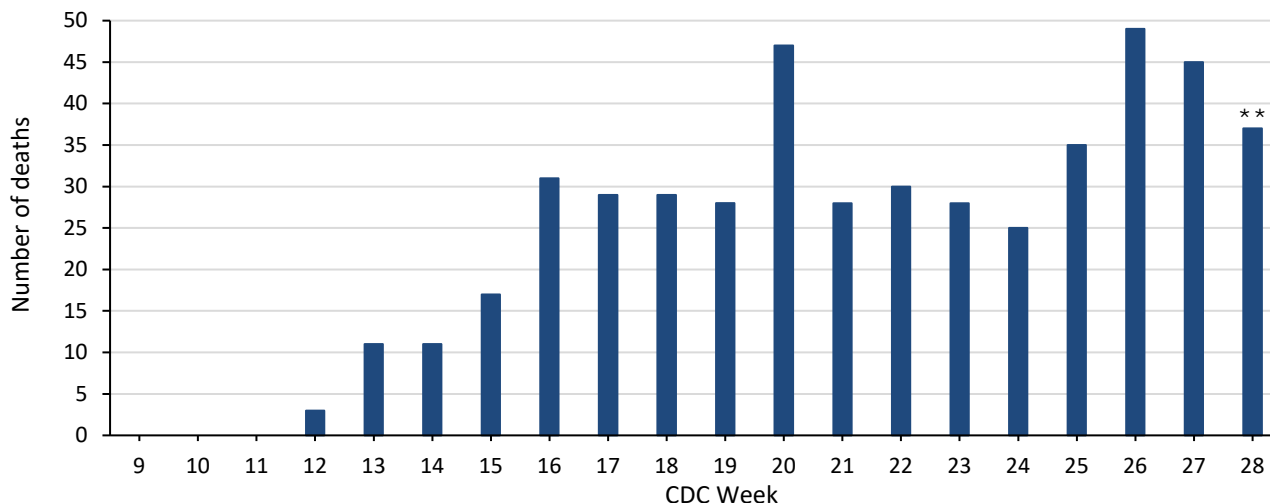
* Dallas County residents diagnosed with confirmed COVID-19 by PCR testing.

** 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 11, 2020 (CDC Week 28)*
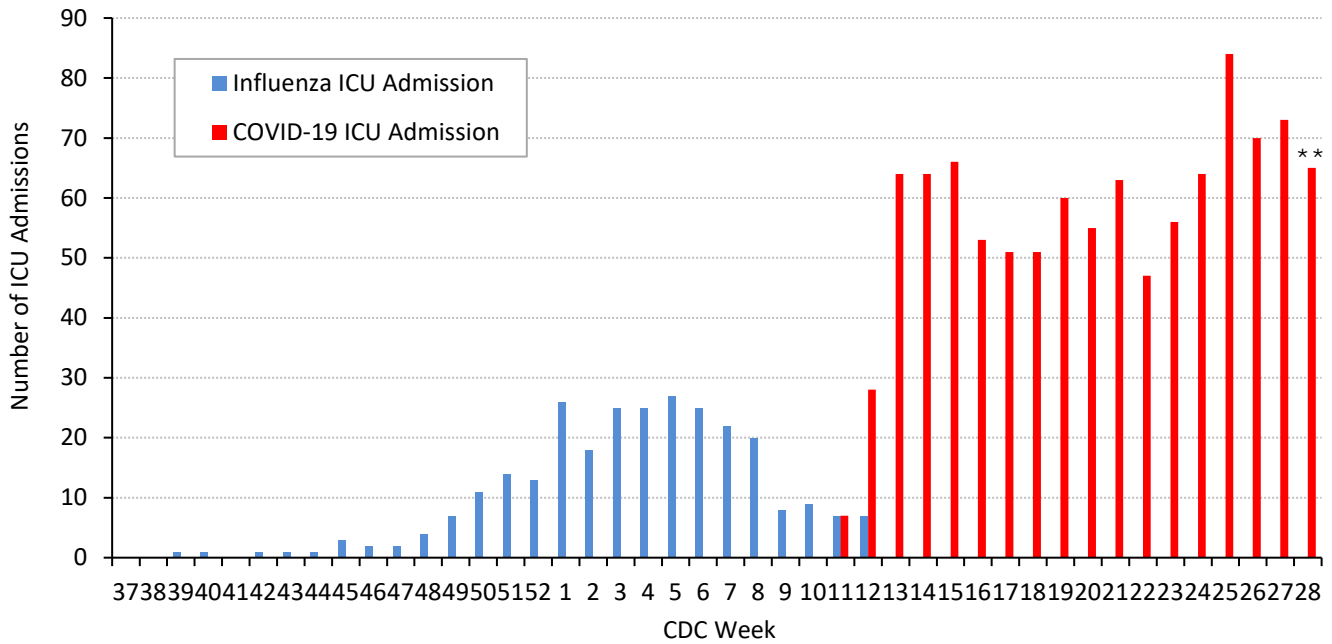
* New ICU admissions of Dallas County residents reported with confirmed COVID-19 by PCR testing as of 8:00 pm yesterday. Hospitalized patients with self-reported residence from outside of Dallas County are not included.
** All data are preliminary and subject to change as cases continue to be received 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 11, 2020**
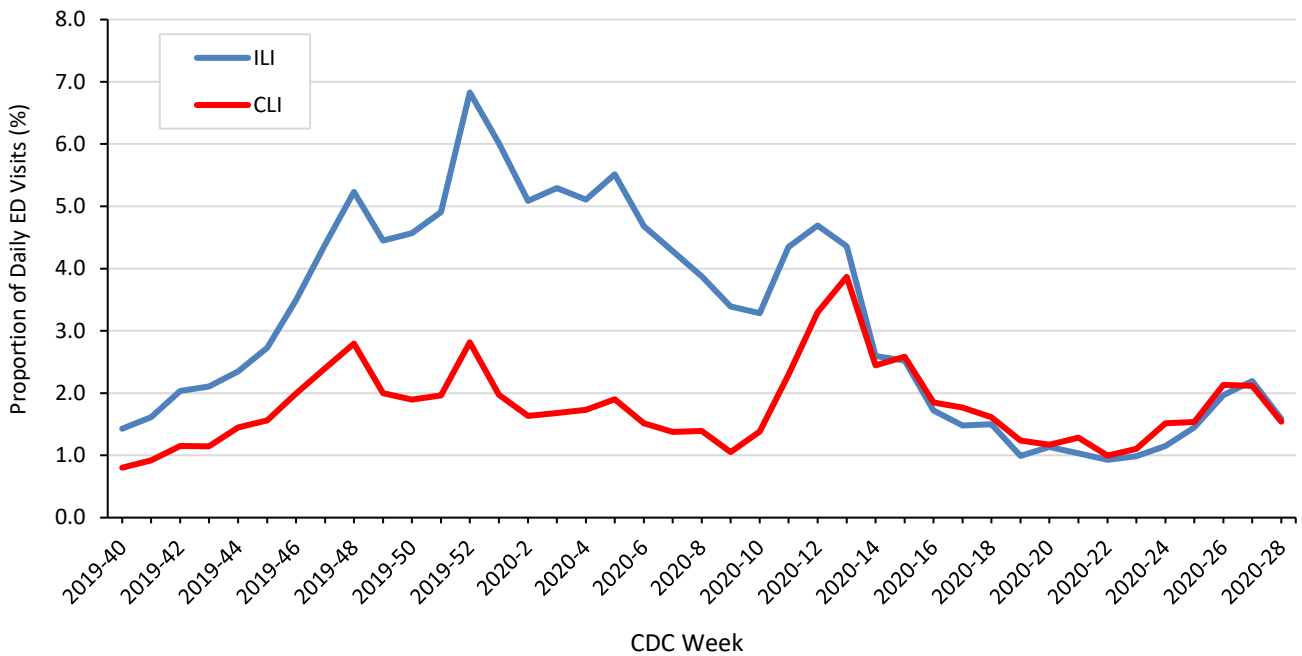
ESSENCE Data is from 18 hospital emergency departments voluntarily reporting numbers of persons presenting with self-reported chief complaints.
* CLI is defined as chief complaint of fever and cough or shortness of breath or difficulty breathing.
**ILI is defined as chief complaint of fever and cough 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%)
Nurse, LVN, CNA	19	
Physician	4	
Other: Dentist, dietary, home health, medical assistant, mental health, PCT	102	
Transportation and Logistics		107 (11%)
Airline/Airport	12	
Parcel or postal delivery	11	
Cab/rideshare or bus driver	19	
Other: Mechanic, truck driver, freight, railroad	65	
Food and Agriculture		154 (16%)
Grocery	30	
Restaurant	65	
Other: Food processing, production, supply	59	
Other Community/Government Essential Functions		47 (5%)
Clergy (Pastor, priest)	9	
Education (Teacher, administration)	13	
Judicial system (Attorney)	7	
Other: Real estate services, shelter services, government operations	18	
Public Works and Infrastructure Support Services		114 (12%)
Construction/Contractor	67	
Other: Waste disposal, landscaping, maintenance	47	
Financial *(Accounting, bank, insurance)*		40 (4%)
Communications and Information Technology		14 (1%)
Commercial Facilities *(Building materials, painting, warehouse)*		55 (6%)
Hygiene Services *(Custodian, housekeeping)*		42 (4%)
Law Enforcement, Public Safety, First Responders		24 (3%)
Critical Manufacturing *(Manufacturing metal, packaging)*		33 (3%)
Energy/Utilities *(Electricity, petroleum, gas)*		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 17, 2020
(e.g. Does not include cases who reside in portions of cities which are not within Dallas County.)

City of Residence	Cases (N=39,191)	% of Total Cases
Addison	147	0.4%
Balch Springs	401	1.0%
Carrollton	610	1.6%
Cedar Hill	633	1.6%
Cockrell Hill	94	0.2%
Combine	10	0.0%
Coppell	187	0.5%
Dallas	21,163	54.0%
DeSoto	785	2.0%
Duncanville	641	1.6%
Farmers Branch	367	0.9%
Ferris	2	0.0%
Garland	3,494	8.9%
Glenn Heights	87	0.2%
Grand Prairie	1,796	4.6%
Highland Park	36	0.1%
Hutchins	150	0.4%
Irving	3,204	8.2%
Lancaster	623	1.6%
Mesquite	2,207	5.6%
Ovilla	1	0.0%
Richardson	589	1.5%
Rowlett	416	1.1%
Sachse	81	0.2%
Seagoville	1,216	3.1%
Sunnyvale	65	0.2%
University Park	64	0.2%
Wilmer	120	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