

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

July 7, 2020

- As of July 7, 2020, DCHHS is reporting 1,077 additional cases of 2019 novel coronavirus (COVID-19), bringing the total case count in Dallas County to 28,131, including 410 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>, 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 32.0% among symptomatic patients presenting to area hospitals in week 26.
- Of the 3,222 cases requiring hospitalization to date, over two-thirds (69%) 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-three percent (33%) of deaths have been associated with long-term care facilities.

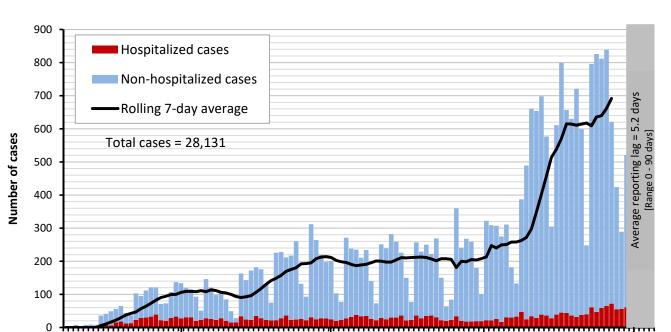


Figure 1. Daily COVID-19 cases by date of test collection, Dallas County: March 10 – July 7, 2020 1-4

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.

9 12 15 18 21 24 27 30 2 5 8 11 14 17 20 23 26 29 2 5 8 11 14 17 20 23 26 29 1 4 7 10 13 16 19 22 25 28 1 4

- 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.

March

5. Rolling 7-day average is the average number of new confirmed COVID-19 cases collected 7 days prior to value.

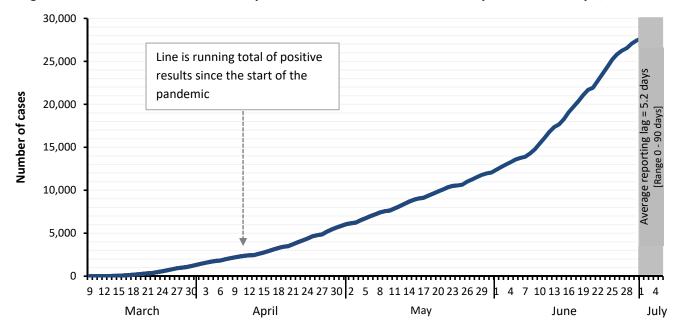


Figure 2. Cumulative COVID-19 cases by date of test collection, Dallas County: March 10 – July 7, 2020 1-2

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=28,131)	% of Total Cases
Commercial or Hospital Laboratory*	26,523	94%
Dallas LRN Laboratory	1,335	5%
Other Public Health Laboratory	273	1%

<sup>\*</sup> 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 7, 2020

	Number	% of Total Cases+	
Total Cases in Dallas County resider	N = 28,131	100%	
	0 to 17	2,571	9%
Ago Group (voors)	18 to 40	13,116	47%
Age Group (years)	41 to 64	9,672	34%
	≥65	2,650	10%
Sex	Female	11,642	50%
Sex	Male	11,620	50%
Not Hospitalized (Includes: Outpatien	24,909	88%	
Ever Hospitalized		3,222	12%

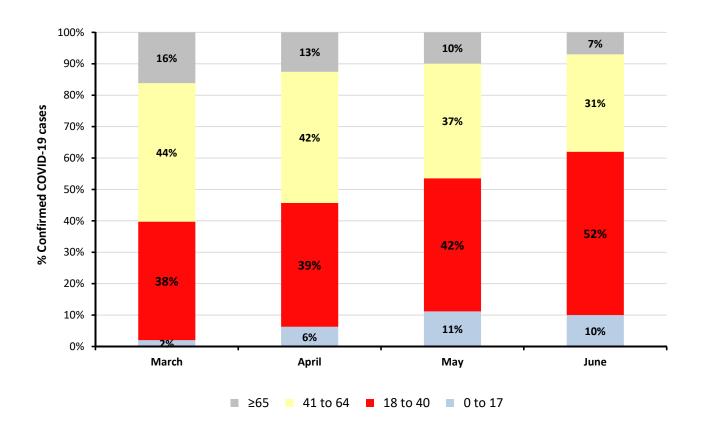
<sup>&</sup>lt;sup>+</sup>Percentages calculated among cases with known age/sex

<sup>1.</sup> 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.

<sup>2.</sup> 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 3. Number of confirmed COVID-19 cases by age group and month of collection, Dallas County

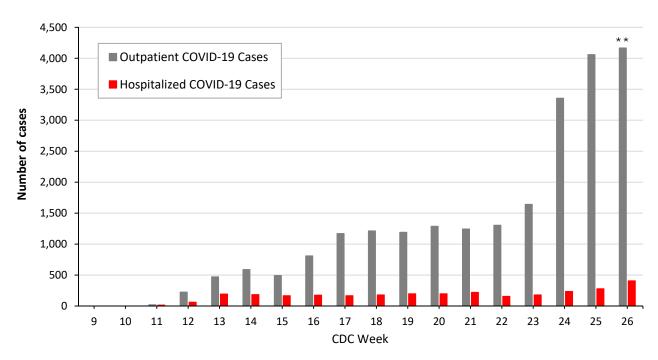
Age Group (in years)	0 to 17		18 to	18 to 40		o 64	≥65		
Month of Diagnosis	N	%	N	%	N	%	N	%	
March	26	2%	493	38%	576	44%	211	16%	
April	285	6%	1,791	39%	1,897	42%	570	13%	
May	682	11%	2,590	42%	2,230	37%	607	10%	
June	1,534	10%	7,945	52%	4,702	31%	1,174	7%	



<sup>1.</sup> 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.

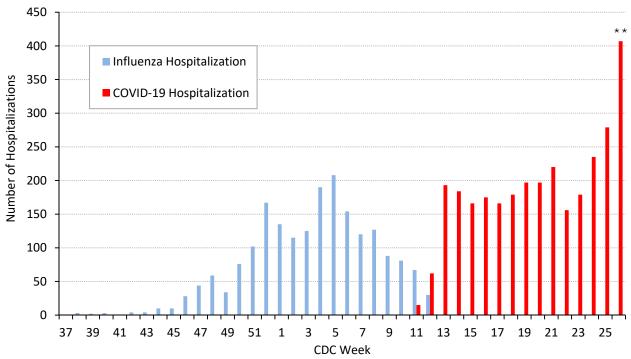
<sup>2.</sup> Data are incomplete for the most recent dates. Test results may be reported to DCHHS several days after the result. The reporting lag is calculated as time from specimen collection to receipt of test results. The average reporting lag is 5.2 days, with a range from 0 – 90 days.

Figure 4. Non-hospitalized and hospitalized COVID-19 Cases by week of test collection, Dallas County: September 2019 through week ending June 27, 2020 (CDC Week 26)\*



<sup>\*</sup> 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.

Figure 5. Influenza and COVID-19 hospitalizations by week of admission, Dallas County: September 2019 through week ending June 27, 2020 (CDC Week 26)\*



<sup>\*</sup> 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.

<sup>\*\*</sup> 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.

<sup>\*\*</sup> 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 7, 2020

		Hospitalized Cases	%	
Ever Hospitalized		N = 3,222	12% of Total Cases	
Admitted to Intensive	Care Unit	822	26%	
Mechanical Ventilatio	n	471	15%	
Cov	Male	1,734	54%	
Sex	Female	1,488	46%	
	0-17	58	2%	
Ago Croup (voors)	18-40	678	21%	
Age Group (years)	41-64	1,492	46%	
	≥65	994	31%	
Presence of ≥1 high risk of	condition	1,869	58%	
Diabetes		1,020	32%	
Lung Disease (e.g. CO	PD, asthma)	380	12%	
Heart Disease (e.g. Ch	HF)	445	14%	
Kidney Disease (e.g. E	SRD, dialysis)	356	11%	
Cancer, Immune-com	promise	259	8%	
Obesity		474	15%	
	White	493	15%*	
	Hispanic	1,617	50%*	
Race/ Ethnicity	Black	694	22%*	
	Other	132	4%*	
	Non-reported/ Unknown	286	9%	

<sup>\*</sup> 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 7, 2020

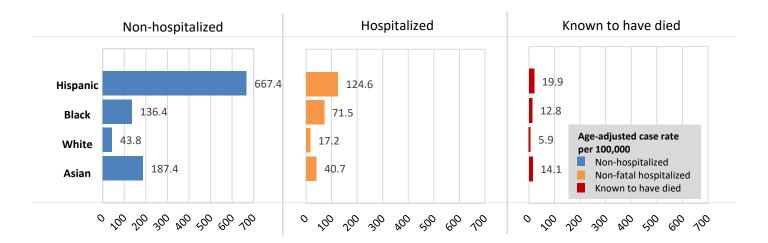
Death classified as confirmed		Confirmed Deaths	<b>%</b> ¹	
County resident with a positive COVID-19 PCR test. Data are obtained from ME office, hospitals, and vital statistics.		N = 410	2% of Total Cases	
Cov	Male	267	65%	
Sex	Female	143	35%	
	17-40	23	6%	
Age Group (years)	41-64	119	29%	
	≥65	268	65%	
Resident of a Long-Term (	Care Facility	134	33%	
Presence of ≥1 high risk co	ondition	279	73%	
Diabetes		170	44%	
	White	114	<b>28%</b> (29% of population) <sup>2</sup>	
Dogo / Etharicity	Hispanic	179	<b>44%</b> (41% of population) <sup>2</sup>	
Race/ Ethnicity	Black	100	<b>26%</b> (24% of population) <sup>2</sup>	
	Asian	13	3% (7% of population) <sup>2</sup>	

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

<sup>&</sup>lt;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



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

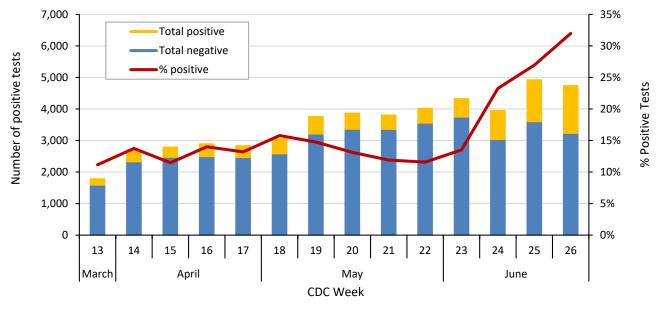
Table 5. Respiratory virus testing by North Texas hospitals participating in public health surveillance programs: April 12 – June 27, 2020 (CDC Weeks 16-26) 1-2

Week En	ding	4/18	4/25	5/2	5/9	5/16	5/23	5/30	6/6	6/13	6/20	6/27
SARS-CoV-2	Positive	405	374	483	555	507	453	465	585	919	1,327	1,516
Novel	Total Tests	2,893	2,835	3,060	3,762	3,865	3,807	4,017	4,328	3,953	4,925	4,742
Coronavirus	% Positive	14.0%	13.2%	15.8%	14.8%	13.1%	11.9%	11.6%	13.5%	23.2%	26.9%	32.0%
	Positive	0	1	0	0	0	0	0	0	0	0	0
Influenza	Total Tests	560	454	325	337	315	277	233	235	206	121	238
	% Positive	0%	0.2%	0%	0%	0%	0%	0%	0%	0%	0%	0%
Seasonal	Positive	1	0	0	0	0	0	1	0	0	0	0
(non-SARS-2)	Total Tests	456	214	119	133	135	113	76	97	94	20	26
Coronavirus	% Positive	0.2%	0%	0%	0%	0%	0%	1.3%	0%	0%	0%	0%
	Positive	3	2	3	2	5	3	1	2	3	0	1
Adenovirus	Total Tests	440	374	246	281	252	255	198	217	183	100	194
(respiratory)	% Positive	0.7%	0.5%	1.2%	0.7%	2.0%	1.2%	0.5%	0.9%	1.6%	0%	0.5%
D. d. a. t. a.	Positive	6	2	1	2	0	0	0	0	0	0	0
Metapneumo- virus	Total Tests	444	374	246	281	252	255	198	217	183	100	194
VII us	% Positive	1.4%	0.5%	0.4%	0.7%	0%	0%	0%	0%	0%	0%	0%
DI: /	Positive	20	17	10	7	3	5	5	6	6	2	4
Rhinovirus/ Enterovirus	Total Tests	444	374	246	281	252	255	198	217	184	100	194
Litterovirus	% Positive	4.5%	4.5%	4.1%	2.5%	1.2%	2.0%	2.5%	2.8%	3.3%	2.0%	2.1%
	Positive	1	0	1	2	0	0	0	0	0	0	0
RSV	Total Tests	461	382	250	282	258	262	200	218	187	104	197
	% Positive	0.2%	0%	0.4%	0.7%	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 – June 27, 2020 (CDC Weeks 13-26)<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

Exposure Risk Factor	Cases (N= 28,131)	% of Total Cases
International Travel	72	0.3%
Domestic Travel (Out-of-state)	175	0.6%
Cruise Ship Travel	12	0.1%
Long-Term Care Facility (Resident) <sup>1</sup>	793	2.8%
County Jail (Inmate)	558	2.0%
State Jail (Inmate <u>TDCJ COVID-19 Medical Action Center</u> ) <sup>2</sup>	84	0.3%
Federal Prison (Inmate) <sup>3</sup>	378	1.3%
Homeless Shelter	64	0.2%
Meat/Food Processing Facilities	386	1.4%
Close contact or Presumed Community Transmission <sup>4</sup>	25,625	91.1%

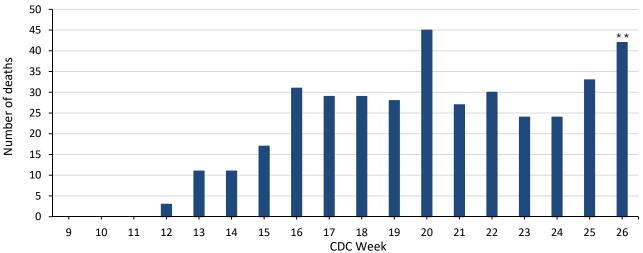
<sup>&</sup>lt;sup>1</sup> Does not include over 290 COVID-19 cases reported in LTCF staff members employed by the > 95 affected LTCFs

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	05/02	05/09	05/16	05/23	05/30	06/06	06/13	06/20	06/27	07/04	9/08/19-
CDC Week	18	19	20	21	22*	23*	24*	25*	26*	27*	Present
COVID-19 hospitalizations <sup>1</sup>	179	197	197	220	156	179	235	279	407*	212*	3,222
COVID-19 ICU admissions <sup>1</sup>	50	58	52	61	42	57	54	68	39*	16*	822
Probable COVID-19-associated deaths <sup>2</sup>	0	0	0	0	0	0	0	0	0	0	0
Confirmed COVID-19-associated deaths <sup>3</sup>	29	29	45	27	30	24	24	33	42	26	410

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

Figure 8. Confirmed COVID-19-associated deaths by week of death, Dallas County: March 2019 through week ending June 27, 2020 (CDC Week 26)\*



<sup>\*</sup> Dallas County residents diagnosed with confirmed COVID-19 by PCR testing.

<sup>&</sup>lt;sup>2</sup> Texas Department of Criminal Justice cases are under the jurisdiction of the Texas Department of State Health Services for investigation

<sup>&</sup>lt;sup>3</sup> Federal prison cases are under the jurisdiction of the federal government for investigation, but are now included in total County cases

<sup>&</sup>lt;sup>4</sup> Includes: household transmission and cases with no other exposure risk factors identified

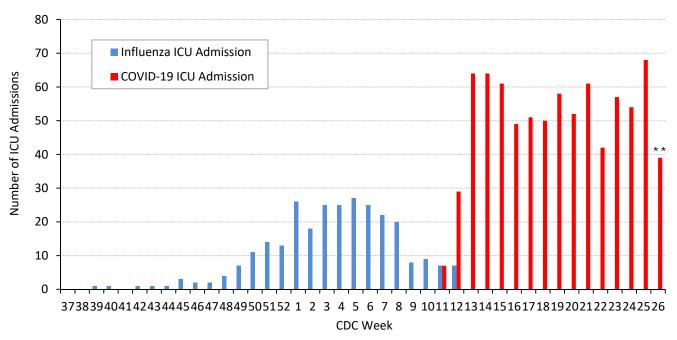
<sup>&</sup>lt;sup>1</sup>Reflects all COVID-19-associated hospitalizations and intensive care unit admissions reported from area hospitals within Dallas County by week of admission. Hospitalizations are inclusive of ICU admissions. Data are preliminary and include reports received as of 8:00 pm yesterday.

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

<sup>&</sup>lt;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.

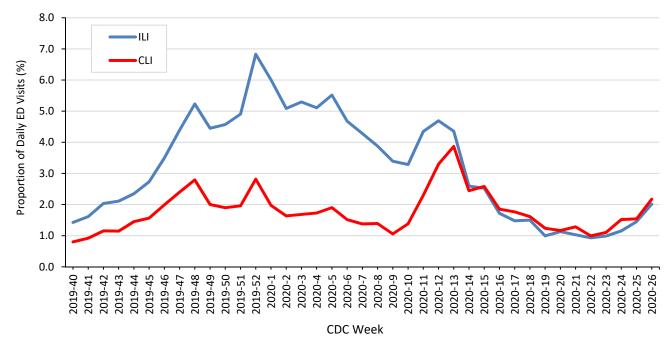
<sup>\*\*</sup> All data are preliminary and subject to change as cases continue to be received and investigated.

Figure 9. Intensive care unit hospitalizations for influenza and COVID-19 by week of admission, Dallas County: September 2019 through week ending June 27, 2020 (CDC Week 26)\*



<sup>\*</sup> New ICU admissions of Dallas County residents reported with confirmed COVID-19 by PCR testing as of 8:00 pm yesterday.

Figure 10. Syndromic surveillance of emergency department visits for COVID-like illness (CLI)\* and Influenza-like illness (ILI)\*\*, Dallas County: September 29, 2019 – June 27, 2020



ESSENCE Data is from 18 hospital emergency departments voluntarily reporting numbers of persons presenting with self-reported chief complaints.

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

<sup>\*</sup> CLI is defined as chief complaint of fever and cough or shortness of breath or difficulty breathing.

<sup>\*\*</sup>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

	_	lized Cases al Employed
Occupation	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

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

<sup>\*\*</sup>CISA Advisory Memorandum on Identification of Essential Critical Infrastructure Workers During COVID-19 Response, v3.1, May 19, 2020 <a href="https://www.cisa.gov/sites/default/files/publications/Version 3.1">https://www.cisa.gov/sites/default/files/publications/Version 3.1</a> CISA Guidance on Essential Critical Infrastructure Workers.pdf.

Table 9. Cumulative COVID-19 cases by city of residence within Dallas County as of July 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=28,131)	% of Total Cases
Addison	117	0.4%
Balch Springs	278	1.0%
Carrollton	455	1.6%
Cedar Hill	445	1.6%
Cockrell Hill	56	0.2%
Combine	3	0.0%
Coppell	119	0.4%
Dallas	15,621	55.5%
DeSoto	535	1.9%
Duncanville	430	1.5%
Farmers Branch	292	1.0%
Ferris	2	0.0%
Garland	2,589	9.2%
Glenn Heights	67	0.2%
Grand Prairie	1,288	4.6%
Highland Park	27	0.1%
Hutchins	130	0.5%
Irving	2,497	8.9%
Lancaster	423	1.5%
Mesquite	1,456	5.2%
Ovilla	1	0.0%
Richardson	429	1.5%
Rowlett	284	1.0%
Sachse	60	0.2%
Seagoville	343	1.2%
Sunnyvale	41	0.1%
University Park	47	0.2%
Wilmer	94	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: <a href="https://www.dallascounty.org/departments/dchhs/2019-novel-coronavirus.php">https://www.dallascounty.org/departments/dchhs/2019-novel-coronavirus.php</a>

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