



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

April 28, 2020

- As of April 28, 2020, DCHHS is reporting 135 additional cases of 2019 novel coronavirus (COVID-19), bringing the total case count in Dallas County to 3,240, including 94 confirmed deaths.
- Of 796 cases requiring hospitalization, most have been either over 60 years of age or have had at least one known high-risk 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, about 79% have been critical infrastructure workers, with a broad range of affected occupational sectors, including: healthcare, public health, food and agriculture, public works, and other essential functions.
- Forty percent (40%) of deaths have been associated with long-term care facilities.
- The percentage of respiratory specimens testing positive for SARS-CoV-2 was 12.5% at area hospitals in week 16.

Figure 1. Daily and Cumulative COVID-19 Cases by Date of Test collection, Dallas County: March 10 – April 28, 2020*

*The data in this summary reflect cumulative data received as of 8:00 pm, April 27, 2020. All data are preliminary and subject to change as cases represented are being actively investigated, and may be updated between press releases. Includes only cases in Dallas County residents.

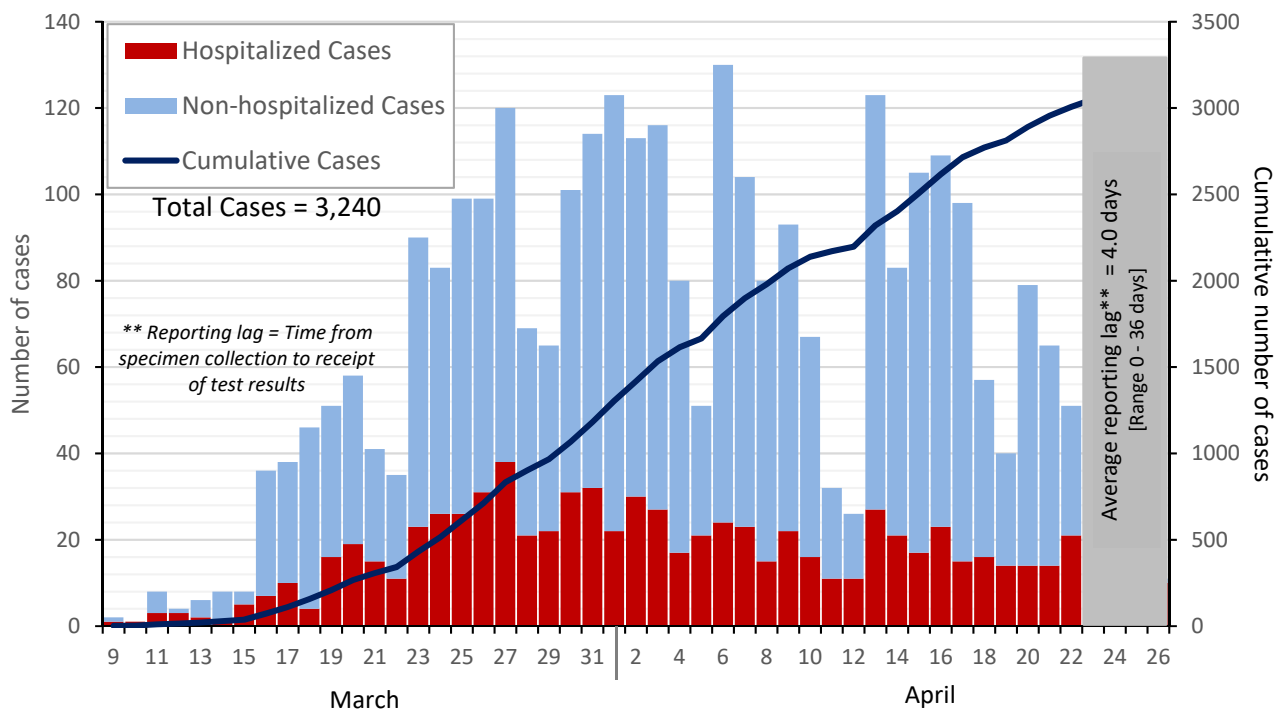


Table 1. Cumulative COVID-19 Cases by Age Groups and Gender, Dallas County

Age Group (years)	# Cases (N=3,240)	% of Total Cases*
0 to 17	85	3%
18 to 40	1,124	36%
41 to 64	1,393	44%
≥65	545	17%
Sex		
Female	1,462	47%
Male	1,672	53%

* Percentages are calculated among cases with known age/sex

Table 2. Source of Laboratory Testing for Reported Confirmed Cases of COVID-19, Dallas County

Source of Laboratory Testing for Reported Positive PCR Tests	# Tests (N=3,240)	% of Total Cases
Commercial or Hospital Laboratory*	2,876	89%
Dallas LRN Laboratory	344	11%
Other Public Health Laboratory	20	1%

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

Table 3. Respiratory Virus Testing by North Texas Hospitals: March 22 – April 18, 2020 (CDC Weeks 13-16)

Week Ending	3/28/20		4/4/20		4/11/20		4/18/20	
PCR Tests for:	Positive/ Total Tests	% Positive	Positive/ Total Tests	% Positive	Positive/ Total Tests	% Positive	Positive/ Total Tests	% Positive
SARS-CoV-2 Novel Coronavirus	168 /1,461	11.5%	336 /2,359	14.2%	276 /2,390	11.5%	319 /2,607	12.5%
Influenza	14 /1,772	0.8%	5 /1,067	0.4%	1 /308	0.3%	0 /523	0%
Seasonal (non-SARS-2) Coronavirus	15 /1,123	1.3%	9 /545	1.7%	0 /293	0%	1 /419	0.2%
Adenovirus (respiratory)	15 /1,129	1.3%	11 /560	2.0%	5 /293	1.7%	3 /403	0.7%
Metapneumovirus	114 /1,129	10.1%	29 /630	4.6%	14 /293	4.8%	6 /407	1.5%
Rhinovirus/Enterovirus	99 /1,129	8.8%	43 /630	6.8%	18 /293	6.1%	19 /407	4.7%
RSV	10 /1,272	0.8%	4 /763	0.5%	1 /350	0.3%	1 /424	0.2%

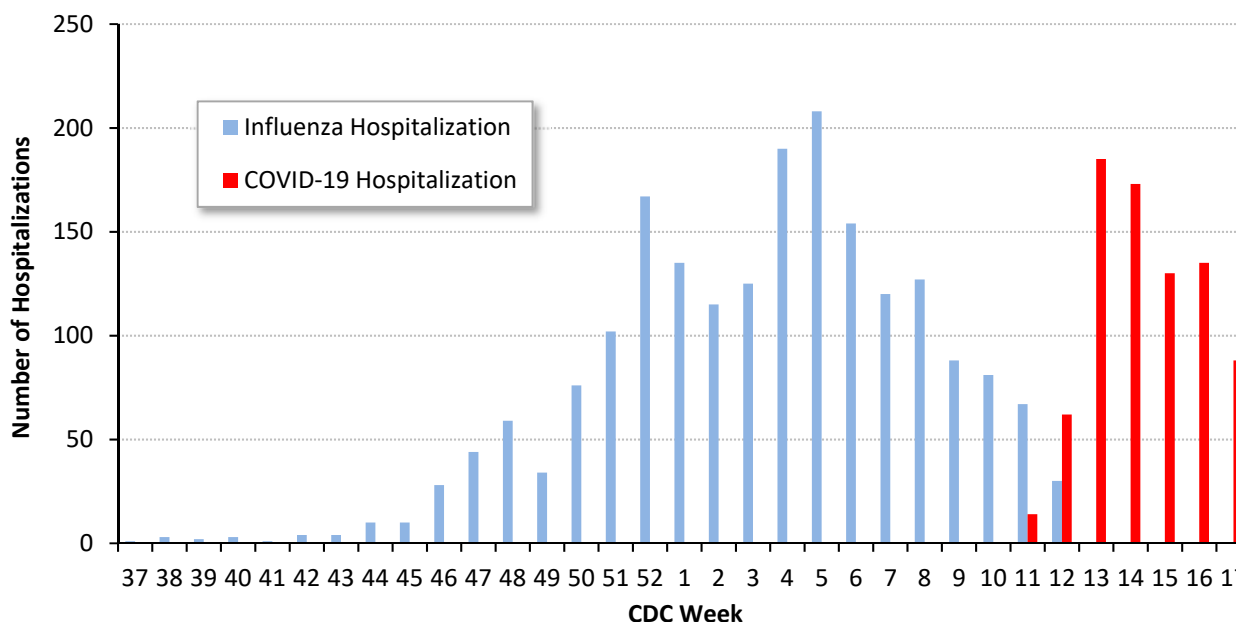
Data sources: National Respiratory and Enteric Virus Surveillance System and additional hospitals voluntarily reporting directly to DCHHS. Testing denominators include out-of-county patients and testing performed only through hospitals in Dallas County. (Does not include FEMA drive-thru clinics)

Table 4. Transmission Risk Factors for Cumulative Confirmed COVID-19 Cases, Dallas County

Exposure Risk Factor	Cases (N= 3,240)	% of Total Cases
International Travel	57	2.0%
Domestic Travel (Out-of-state)	115	3.5%
Cruise Ship Travel	8	0.2%
Long-Term Care Facility (Residency)	218	6.7%
County Jail (Inmate)	133	4.1%
Homeless Shelter	42	1.3%
Close contact or Presumed Community Transmission*	2,667	82.3%

*Includes: household transmission, and cases with no other exposure risk factors identified

Figure 2. Influenza and COVID-19 Hospitalizations by Week of Admission, Dallas County: September 2019 through week ending April 25, 2020 (CDC Week 17)*



*Patients diagnosed with confirmed COVID-19 by PCR testing. The data in this summary reflect cumulative data received as of 7:00 pm yesterday. All data are preliminary and subject to change as cases represented are being actively investigated, and may be updated between press releases. Includes only cases in Dallas County residents.

Table 5. Characteristics of Cumulative Confirmed COVID-19 Cases, Dallas County: March 10 – April 28, 2020

		Non-Hospitalized Cases	%
<i>Not Hospitalized</i>		N = 2,444	75% of Total Cases
Outpatient/ Urgent Care/ Drive-through		2,052	84%
Emergency Department only		392	16%
		Hospitalized Cases	%
<i>Ever Hospitalized</i>		N = 796	25% of Total Cases
Admitted to Intensive Care Unit		255	32%
Mechanical Ventilation		162	20%
Male		458	58%
Age Group (years)	0-17	4	1%
	18-40	134	17%
	41-64	361	45%
	≥65	297	37%
Presence of ≥1 high risk condition		410	52%
Diabetes		230	29%
Lung Disease (e.g. COPD, asthma)		106	13%
Heart Disease (e.g. CHF)		118	15%
Kidney Disease (e.g. ESRD, dialysis)		75	9%
Cancer, Immune-compromise		77	10%
Pregnancy		9	1%
Race/ Ethnicity	White	131	16%*
	Hispanic	258	32%*
	Black	179	22%*
	Other	38	5%*
	Non-reported/ Unknown	190	24%

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

<i>Death classified as confirmed if decedent was a Dallas County resident with a positive COVID-19 PCR test. Data are obtained from ME, hospitals, and vital statistics.</i>		Confirmed Deaths	%
		N = 94	3% of Total Cases
Male		63	67%
Age Group (years)	17-40	5	5%
	41-64	18	19%
	≥65	71	76%
Presence of ≥1 high risk condition		65	77%**
Diabetes		31	37%**
Race/ Ethnicity	White	41	44% (29% of population)†
	Hispanic	28	30% (41% of population)†
	Black	17	18% (24% of population)†
	Other	8	8% (6% of population)†

** Percentages are of cases for which underlying health conditions were reported

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

Table 6. Summary of Influenza and COVID-19 Hospitalizations and Deaths from Dallas County Hospitals, Vital Statistics and Medical Examiner’s Office

Week Ending	03/07	03/14	03/21	03/28	04/04	04/11	04/18	04/25	9/08/19–Present
CDC Week	10	11	12	13	14	15*	16*	17*	
Influenza hospitalizations ¹	81	67	30	N/A	N/A	N/A	N/A	N/A	1,990
Influenza ICU admissions ¹	9	7	7	N/A	N/A	N/A	N/A	N/A	281
Confirmed influenza-associated deaths ²	2	0	0	N/A	N/A	N/A	N/A	N/A	25
COVID-19 hospitalizations ³	0	14	62	185	173	130*	135*	88*	796*
COVID-19 ICU admissions ³	0	7	27	62	60	42*	33*	24*	255*
Confirmed COVID-19-associated deaths	0	0	3	11	8	16*	32*	21*	94*

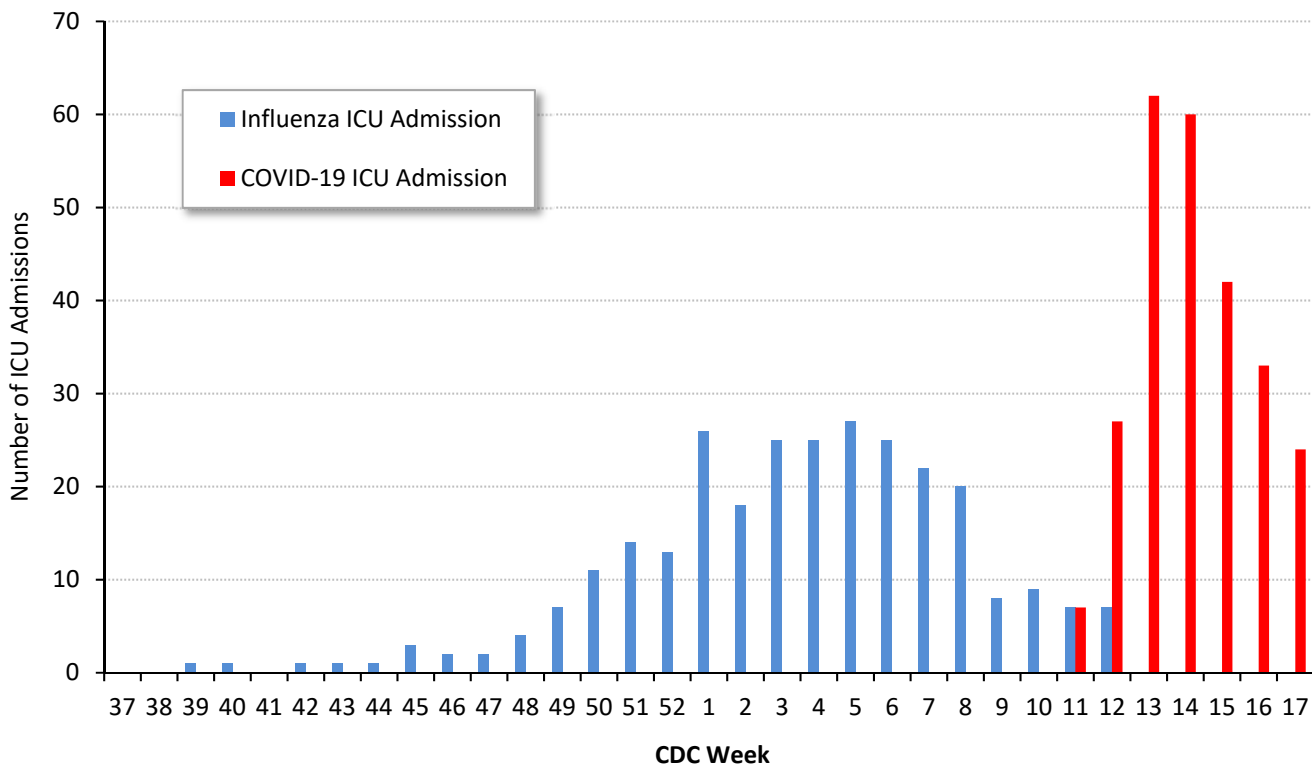
*All data are preliminary and subject to change as additional information is received.

¹ Reflects all influenza-associated hospitalizations reported from 14 hospitals located within Dallas County by week of any positive influenza tests.

² Confirmed influenza-associated deaths as defined by a positive laboratory 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 influenza-associated deaths with pending determination of primary cause of death.

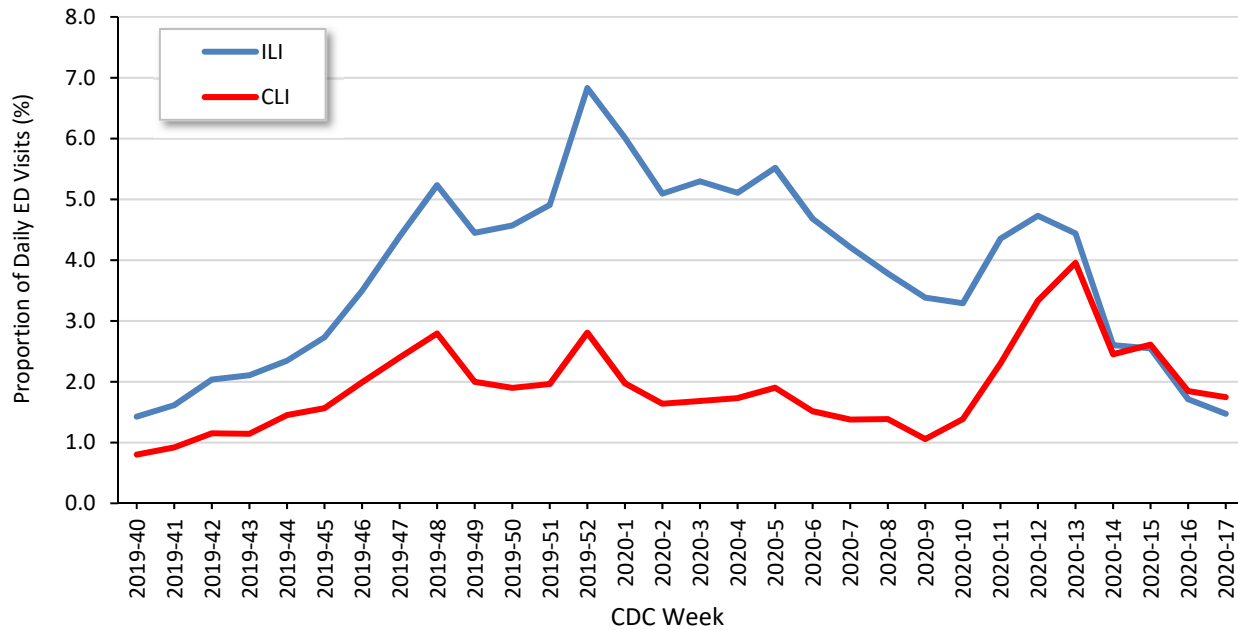
³ Reflect all COVID-19-associated hospitalizations reported from area hospitals within Dallas County by week of admission; data as of 7:00 pm yesterday.

Figure 3. Intensive Care Unit Hospitalizations for Influenza and COVID-19 by Week of Admission, Dallas County: September 2019 through week ending April 25, 2020 (CDC Week 17)*



* Patients diagnosed with confirmed COVID-19 by PCR testing. The data in this summary reflect cumulative data received as of 7:00 pm yesterday. All data are preliminary and subject to change as cases represented are being actively investigated, and may be updated between

Figure 4. Syndromic Surveillance of Emergency Department Visits for COVID-like Illness (CLI)* and Influenza-like Illness (ILI)**, Dallas County: September 29, 2019 – April 25, 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 7. Cumulative COVID-19 Cases by City of Residence within Dallas County as of April 28, 2020

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

City of Residence	Cases (N=3,240)	% of Total Cases
Addison	16	0.5%
Balch Springs	26	0.8%
Carrollton	41	1.3%
Cedar Hill	56	1.7%
Cockrell Hill	5	0.2%
Coppell	24	0.7%
Dallas	1,829	56.5%
DeSoto	89	2.7%
Duncanville	51	1.6%
Farmers Branch	48	1.5%
Garland	324	10.0%
Glenn Heights	14	0.4%
Grand Prairie	99	3.1%
Highland Park	16	0.5%
Hutchins	1	0.0%
Irving	266	8.2%
Lancaster	47	1.5%
Mesquite	135	4.2%
Richardson	54	1.7%
Rowlett	49	1.5%
Sachse	9	0.3%
Seagoville	6	0.2%
Sunnyvale	8	0.2%
University Park	25	0.8%
Wilmer	2	0.1%
Wylie	1	0.0%

Table 8. Occupations of Hospitalized Patients with Confirmed COVID-19, Dallas County, 3/10 – 4/23/20

<i>Occupation</i>	<i>Position</i>	<i>Sector</i>
Critical Infrastructure Workers*		Hospitalized Cases (%) of Total Employed
Healthcare and Public Health		45 (18%)
	<i>Nurse, LVN, CNA</i>	11
	<i>Physician</i>	5
	<i>Other: Dentist, dietary, home health, medical assistant, mental health, PCT, pharmacist, physical therapy, facilities, administrative</i>	29
Transportation and Logistics		38 (15%)
	<i>Airline/Airport</i>	7
	<i>Parcel or postal delivery</i>	6
	<i>Cab/rideshare or bus driver</i>	5
	<i>Other: Mechanic, truck driver, freight, railroad</i>	20
Food and Agriculture		32 (13%)
	<i>Grocery</i>	10
	<i>Restaurant</i>	13
	<i>Other: Food processing, production, supply</i>	9
Other Community/Government Essential Functions		19 (8%)
	<i>Clergy (Pastor, priest)</i>	6
	<i>Education (Teacher, administration)</i>	5
	<i>Judicial system (attorney)</i>	4
	<i>Real estate services</i>	3
Public Works and Infrastructure Support Services		12 (5%)
	<i>Construction</i>	9
Financial (<i>Accounting, Bank, Insurance</i>)		12 (5%)
Communications and Information Technology		10 (4%)
Commercial Facilities (<i>Building materials, painting, warehouse</i>)		8 (3%)
Hygiene Services (<i>Custodian, Lawn Service</i>)		7 (3%)
Law Enforcement, Public Safety, First Responders		6 (2%)
Critical Manufacturing (<i>Manufacturing metal, packaging</i>)		4 (2%)
Energy/Utilities (<i>Electricity, Petroleum, Gas</i>)		2 (1%)
Non- Critical Infrastructure Workers (<i>Includes retail, personal services</i>)		52 (21%)
Non-Employed (<i>includes retired</i>)		185
Student		3
Not reported		234
Total		669

* 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, April 17, 2020 .

CDC Priorities for COVID-19 Testing (rev. date: 4/27/20)

(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
- 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
- Persons identified through public health cluster and selected contact investigations

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