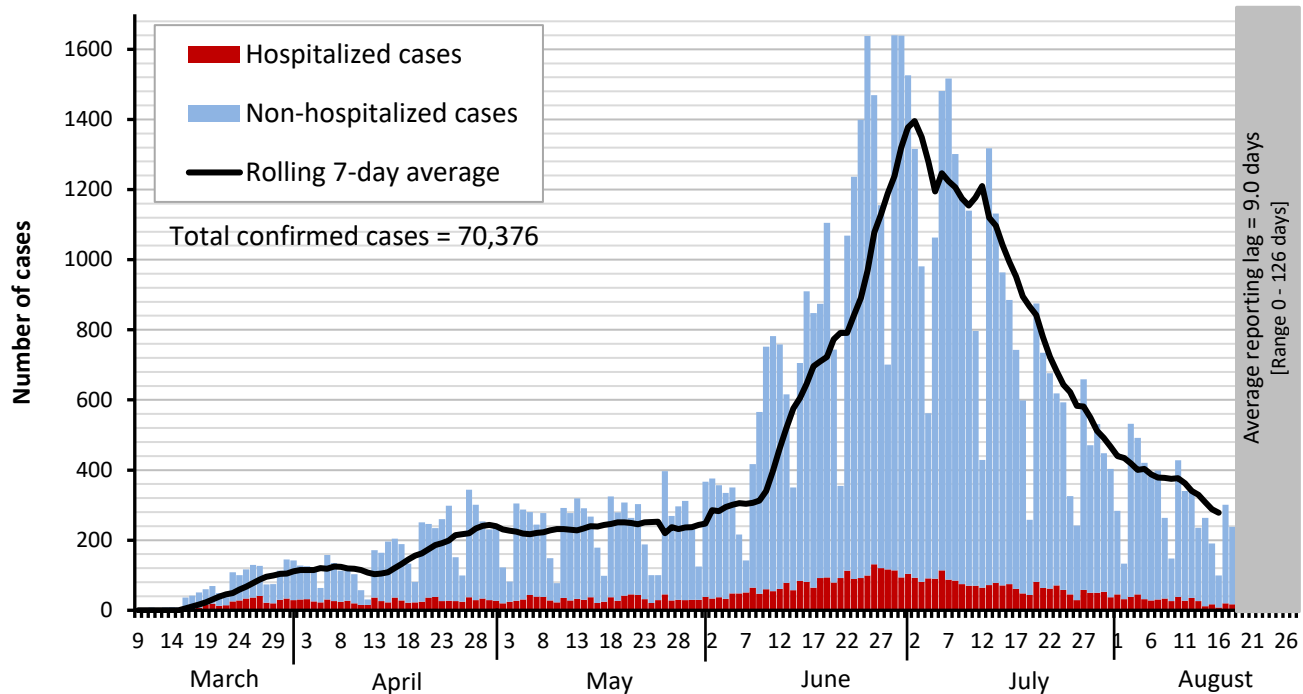# Dallas County Health and Human Services
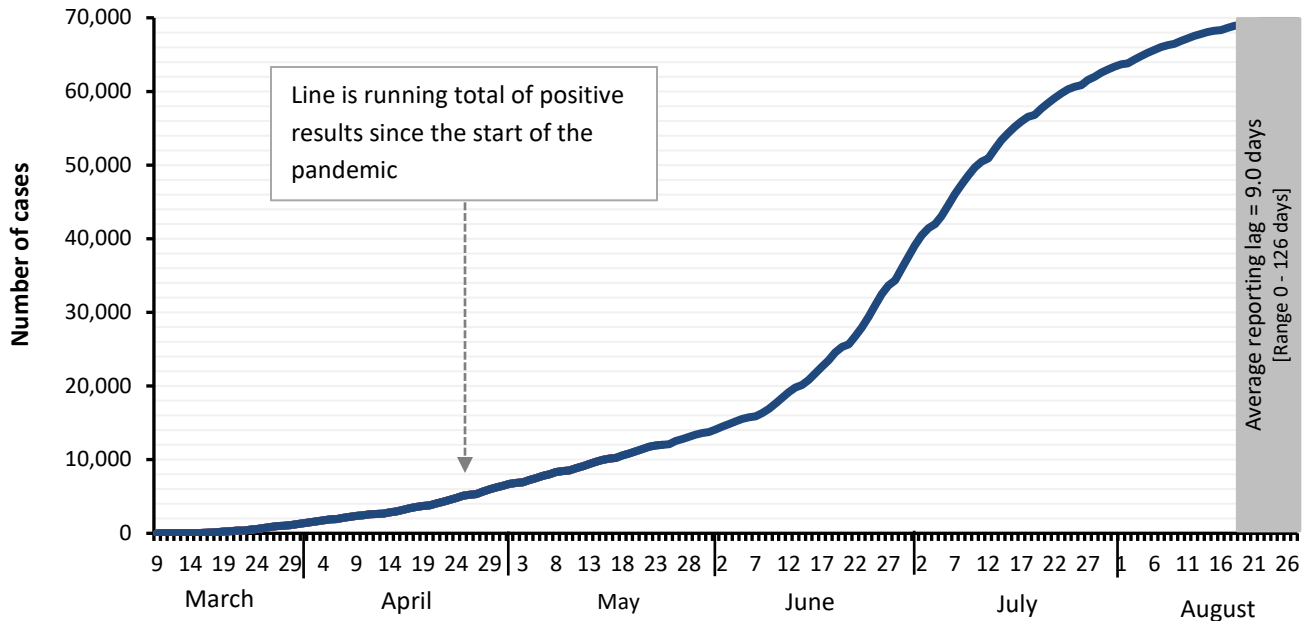# 2019 Novel Coronavirus (COVID-19) Summary

August 28, 2020

- As of August 28, 2020, DCHHS is reporting 276 additional confirmed cases of 2019 novel coronavirus (COVID-19), bringing the total number of confirmed cases in Dallas County to 70,376, including 898 confirmed deaths. The total number of probable cases in Dallas County is 2,834, including 8 probable COVID-19 associated deaths.

- The provisional 7-day average daily new confirmed and probable cases (by date of test collection) for CDC week 34 was 206. The percentage of respiratory specimens testing positive for SARS-CoV-2 continues to decline but remains high, with 11.0% of symptomatic patients presenting to area hospitals testing positive in week 34.

- From August 8th through 21st, 393 school-aged children between 5 to 18 years of age were diagnosed with COVID-19 in Dallas County. About 50% of these cases were high school age. By zip code of residence, 203 (51%) of these children were projected to have been enrolled in Dallas ISD schools.

- Of the 7,174 cases requiring hospitalization to date, almost three-quarters (70%) 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, almost 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.

- Twenty-six percent (26%) of deaths have been associated with long-term care facilities.

Figure 1. Confirmed COVID-19 positive cases by date of test collection, Dallas County: March 10 – August 28, 2020

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 9.0 days, with a range from 0 – 126 days.*
3. *This summary graph includes only confirmed cases based on molecular amplification detection test results.*
4. *Bars are the number of positive molecular amplification detection 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 confirmed COVID-19 cases by date of test collection, Dallas County: March 10 – August 28, 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 9.0 days, with a range from 0 – 126 days.

Table 1. Source of laboratory testing for confirmed cases of COVID-19, Dallas County

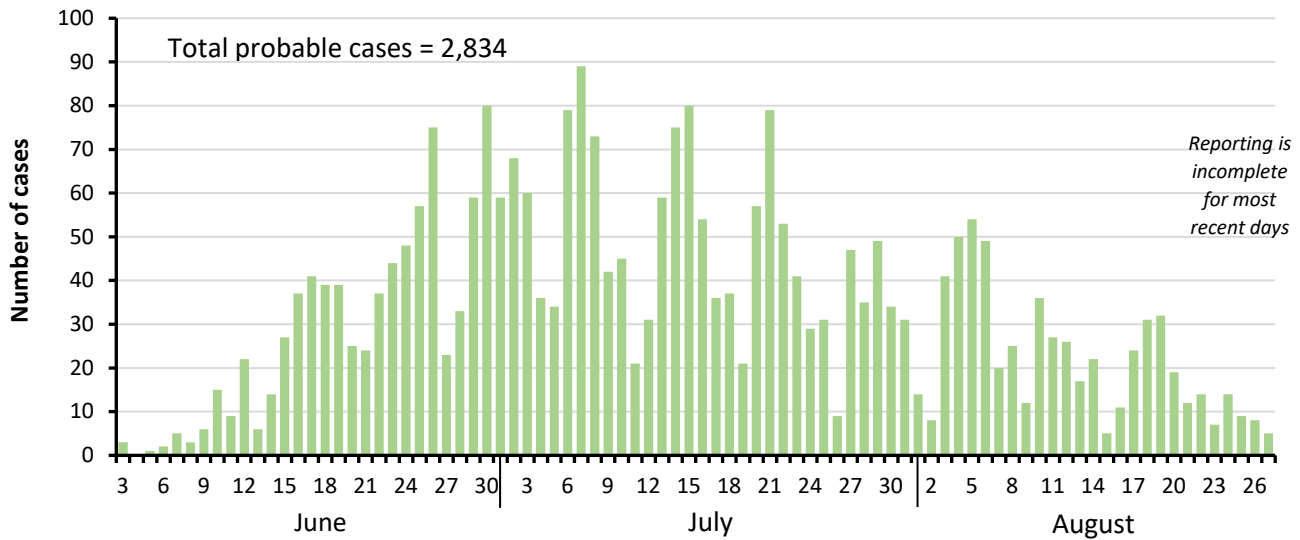| *Source of Laboratory Testing for Reported Positive Molecular Amplification Detection Tests*	# Tests (N=70,376)	% of Total Cases
Commercial or Hospital Laboratory*	68,486	97%
Dallas LRN Laboratory	1,617	2%
Other Public Health Laboratory	273	<1%

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 – August 28, 2020

		Number	% of Total Cases[+]
Total Cases in Dallas County residents		N = 70,376	100%
Age Group (years)	0 to 17	7,319	11%
	18 to 40	32,545	46%
	41 to 64	24,101	34%
	≥65	6,223	9%
Sex	Female	35,173	51%
	Male	34,378	49%
Not Hospitalized *(Includes: Outpatient, urgent care, drive-through, ED)*		63,202	90%
Ever Hospitalized		7,174	10%

[+]*Percentages calculated among cases with known age/sex*

Figure 3. Probable COVID-19 cases by date of test collection, Dallas County: June 3 – August 28, 2020 [1-5]

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.*
3. *This summary graph includes only probable cases which meet below CDC case definition. Probable cases are reported separately from confirmed cases.*

Table 3. Characteristics of cumulative probable COVID-19 cases, Dallas County: June 3 – August 28, 2020

		Number	% of Total Cases[+]
Total Probable Cases in Dallas County residents		N = 2,834	100%
Age Group (years)	0 to 17	722	26%
	18 to 40	1,326	47%
	41 to 64	654	23%
	≥65	128	4%
Sex	Female	1,420	50%
	Male	1,408	50%

[+]*Percentages calculated among cases with known age/sex*

CDC Definition of a COVID-19 case:

"A COVID-19 case includes confirmed and probable cases and deaths. This change was made to reflect an interim COVID-19 position statement issued by the Council of State and Territorial Epidemiologists on April 5, 2020. The position statement included a case definition and made COVID-19 a nationally notifiable disease."

CDC Definition of a COVID-19 probable case:

"A probable case or death is defined as:
- A person meeting clinical criteria **AND** epidemiologic evidence with no confirmatory laboratory testing performed for COVID-19;
- A person meeting presumptive laboratory evidence **AND** either clinical criteria **OR** epidemiologic evidence;
- A person meeting vital records criteria with no confirmatory laboratory testing performed for COVID-19."

*Centers for Disease Control and Prevention FAQ: COVID-19 Data and Surveillance:
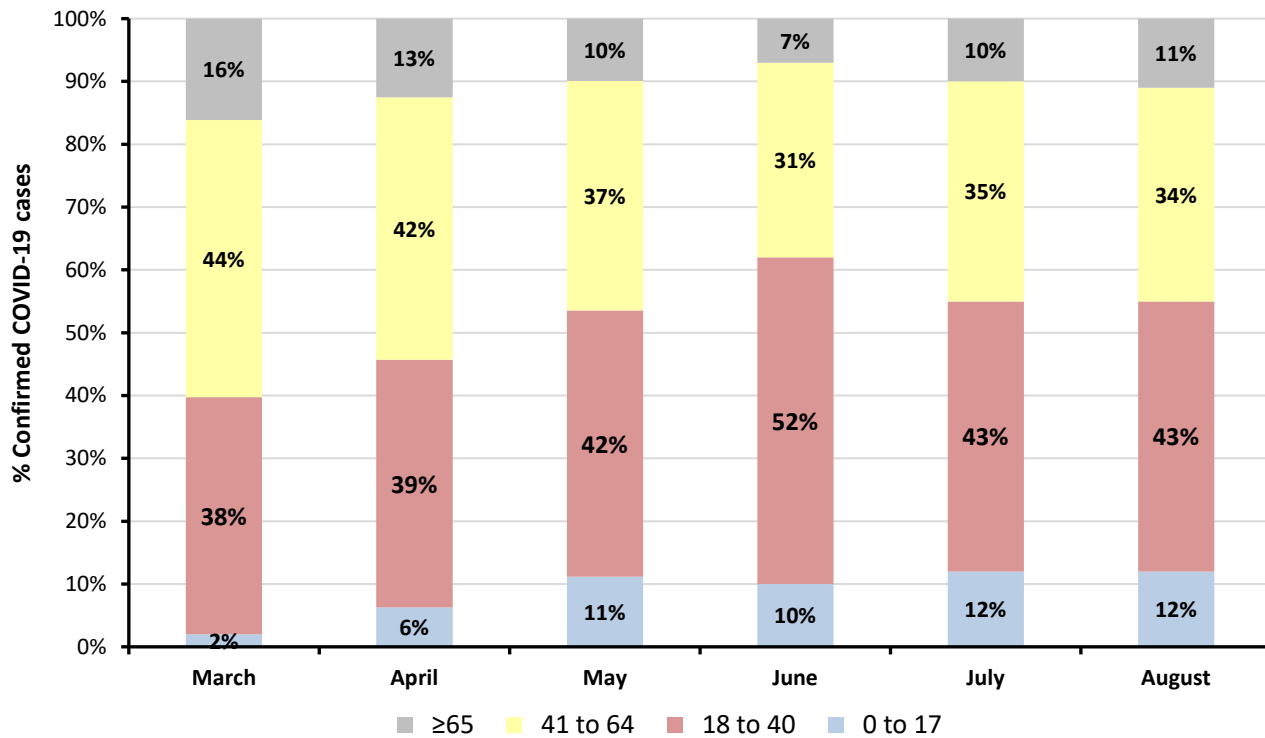https://www.cdc.gov/coronavirus/2019-ncov/covid-data/faq-surveillance.html
**See also Texas Department of State Health Services (DSHS) Case Definition:
https://www.dshs.state.tx.us/coronavirus/docs/DSHS-COVID19CaseDefinitionandInvestigationPrioritizationGuidance.pdf

Figure 4. Number of confirmed COVID-19 cases by age group and month of collection, Dallas County

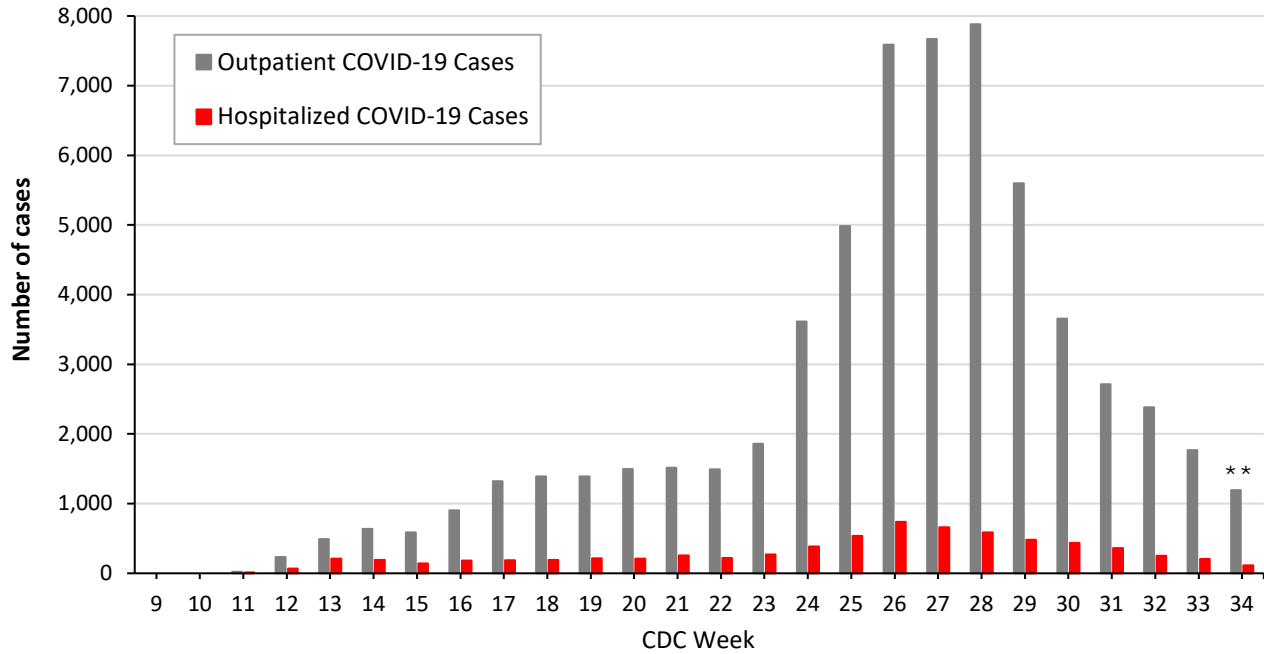| Age Group (in years)	0 to 17		18 to 40		41 to 64		≥65	
Month of Diagnosis	N	%	N	%	N	%	N	%
March	26	2%	493	38%	576	44%	211	16%
April	285	6%	1,791	39%	1,897	42%	570	13%
May	682	11%	2,590	42%	2,230	37%	607	10%
June	1,534	10%	7,945	52%	4,702	31%	1,174	7%
July	2,337	12%	8,079	43%	6,678	35%	1,845	10%
August (*through 8/28*)	800	12%	2,778	43%	2,220	34%	699	11%

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 9.0 days, with a range from 0 – 126 days.*

If all public schools in Dallas County had been open for full on-campus only instruction during the week of August 17th:

- From August 8th through 21st, 393 school-aged children between 5 – 18 years of age were diagnosed with COVID-19 in Dallas County. If in-person school had begun on Monday, August 17th, these 393 children would have been absent from school for at least some portion of that week (from August 17th – August 21st).

- The 115 children who were diagnosed between August 17th – 21s h were residents in 43 different zip codes in Dallas County. Their attendance on-campus would have prompted classroom closures for cleaning and identification of classmate/teacher contacts for 14-day quarantine.

- About half (210) of these cases were high-school age, and almost a third (114) were elementary-school age (5-10 years).

- Of these pediatric COVID-19 cases: 203 (51%) were projected (by zip code of residence) to be students enrolling in Dallas ISD schools; 37 (9%) in Irving ISD; 36 (9%) in Garland ISD; 25 (9%) in Mesquite ISD; 17 (4%) in Grand Prairie ISD; 8 (2%) in Carrollton-Farmers Branch ISD; 8 (2%) in Richardson ISD; 7 (1%) in DeSoto ISD; 7 (2%) in Lancaster ISD; 5 (1%) in Duncanville ISD; 4 (1%) in Cedar Hill ISD; 2 (1%) in Coppell ISD; 1 (2%) in Highland Park ISD; 0 (0.2%) in Sunnyvale ISD.
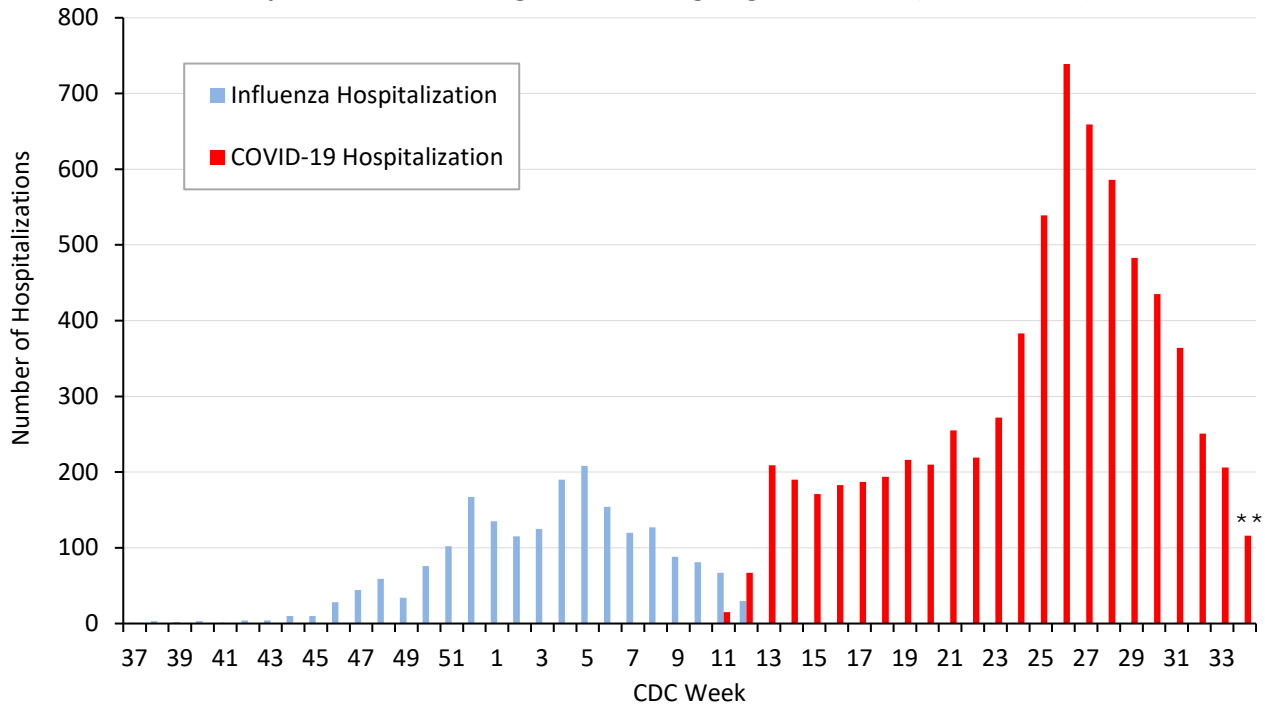
Figure 5. Non-hospitalized and hospitalized confirmed COVID-19 cases by week of test collection, Dallas County: September 2019 through week ending August 22, 2020 (CDC Week 34)*

* 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. 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 molecular amplification detection test results.

Figure 6. Influenza and confirmed COVID-19 hospitalizations by week of admission, Dallas County: September 2019 through week ending August 22, 2020 (CDC Week 34)*

* Hospitalized Dallas County residents diagnosed with confirmed COVID-19 by molecular amplification detection 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 4. Characteristics of cumulative hospitalized confirmed COVID-19 cases,
Dallas County: March 10 – August 28, 2020**

		Hospitalized Cases	%
Ever Hospitalized		N = 7,174	10% of Total Cases
Admitted to Intensive Care Unit		1,706	24%
Mechanical Ventilation		909	13%
Sex	Male	3,753	52%
	Female	3,421	48%
Age Group (years)	0-17	167	2%
	18-40	1,661	23%
	41-64	3,194	45%
	≥65	2,152	30%
Presence of ≥1 high risk condition		4,155	58%
Diabetes		2,224	31%
Lung Disease *(e.g. COPD, asthma)*		763	11%
Heart Disease *(e.g. CHF)*		976	14%
Kidney Disease *(e.g. ESRD, dialysis)*		777	11%
Cancer, Immune-compromise		512	7%
Obesity		1,247	17%
Race/ Ethnicity	White	1,138	16%*
	Hispanic	3,798	53%*
	Black	1,521	21%*
	Other	257	4%*
	Non-reported/ Unknown	460	6%

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

**Table 5. Characteristics of cumulative confirmed COVID-19 deaths,
Dallas County: March 10 – August 28, 2020**

		Confirmed Deaths	%[1]
Death classified as confirmed if decedent was a Dallas County resident with a positive molecular test. Data are obtained from ME office, hospitals, and vital statistics.		N = 898	1.3% of Total Cases
Sex	Male	567	63%
	Female	331	37%
Age Group (years)	0-17	2	<1%
	18-40	43	5%
	41-64	282	31%
	≥65	571	64%
Resident of a Long-Term Care Facility		230	26%
Presence of ≥1 high risk condition		65	77%
Diabetes		400	47%
Race/ Ethnicity	White	242	**27%** (29% of population)[2]
	Hispanic	403	**45%** (41% of population)[2]
	Black	215	**24%** (24% of population)[2]
	Asian	26	**3%** (7% of population)[2]

[1] *Percentages calculated among those with known underlying health conditions or race/ethnicity as reported by medical provider*
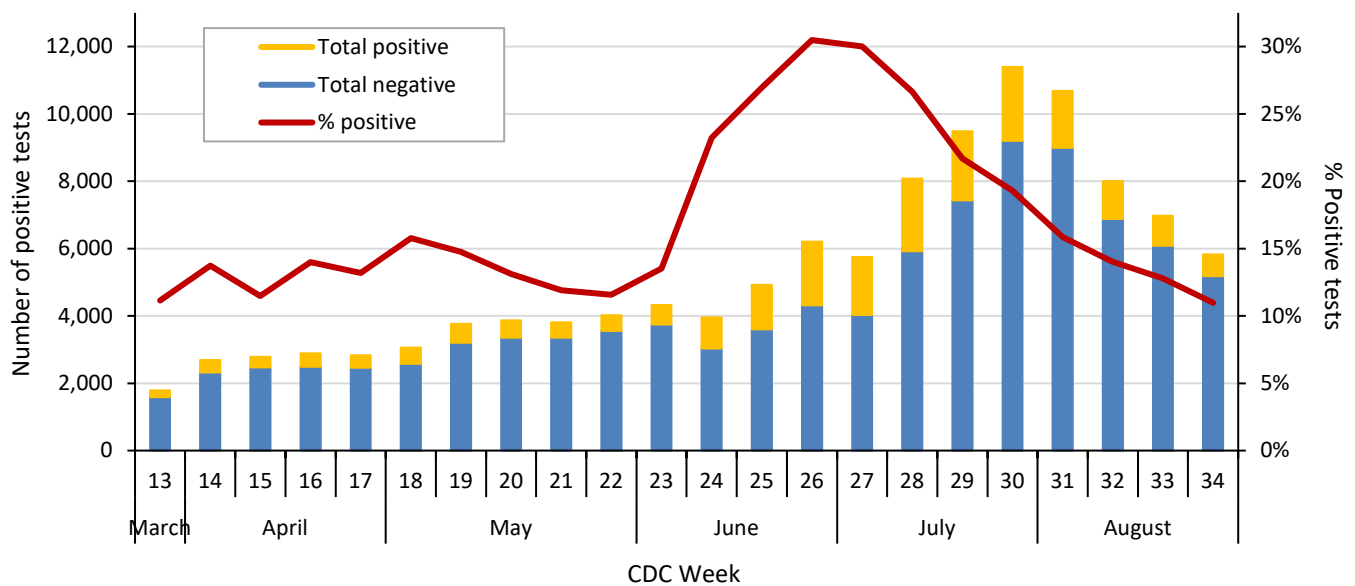[2] *2019 U.S. Census population estimates for Dallas County*

Table 6. Respiratory virus testing by North Texas hospitals participating in public health surveillance programs: June 13 – August 22, 2020 (CDC Weeks 24-34) [1-2]

Week Ending		6/20	6/27	7/4	7/11	7/18	7/25	8/1	8/8	8/15	8/22
SARS-CoV-2 Novel Coronavirus	Positive	1,327	1,892	1,727	2,152	2,058	2,197	1,694	1,122	891	639
	Total Tests	4,925	6,207	5,753	8,077	9,488	11,393	10,682	8,005	6,976	5,822
	% Positive	26.9%	29.3%	30.5%	26.8%	21.7%	19.3%	15.9%	14.0%	12.8%	11.0%
Influenza	Positive	0	0	0	0	0	0	0	0	0	0
	Total Tests	121	238	225	174	111	115	124	106	61	52
	% Positive	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
Seasonal (non-SARS-2) Coronavirus	Positive	0	0	0	1	0	0	0	0	0	0
	Total Tests	20	26	126	44	28	24	37	25	18	23
	% Positive	0%	0%	0%	2.3%	0%	0%	0%	0%	0%	0%
Adenovirus (respiratory)	Positive	0	1	0	2	1	0	2	0	0	0
	Total Tests	100	194	200	145	101	108	105	88	60	52
	% Positive	0%	0.5%	0%	1.4%	1.0%	0%	1.9%	0%	0%	0%
Metapneumo-virus	Positive	0	0	0	0	0	0	0	0	0	0
	Total Tests	100	194	200	145	101	108	105	80	60	52
	% Positive	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
Rhinovirus/ Enterovirus	Positive	2	4	12	5	8	2	9	4	2	3
	Total Tests	100	194	200	145	101	108	105	88	60	52
	% Positive	2.0%	2.1%	6.0%	3.4%	7.9%	1.9%	8.6%	4.5%	3.3%	5.8%
RSV	Positive	0	0	0	0	0	0	0	0	0	0
	Total Tests	104	197	200	145	103	108	107	94	61	52
	% Positive	0%	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 PCR 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 positive PCR tests reported to DCHHS by hospital laboratories: March 22 – August 22, 2020 (CDC Weeks 13-34) [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 7. Transmission risk factors for cumulative confirmed COVID-19 cases, Dallas County

Exposure Risk Factor	Cases (N= 70,376)	% of Total Cases
International Travel	109	0.2%
Domestic Travel (Out-of-state)	295	0.4%
Cruise Ship Travel	14	<0.1%
Long-Term Care Facility (Resident)[1]	1,340	1.9%
County Jail (Inmate)	687	1.0%
State Jail (Inmate--TDCJ COVID-19 Medical Action Center)[2]	96	0.1%
Federal Prison (Inmate)[3]	1,387	2.0%
Homeless Shelter	82	0.1%
Meat/Food Processing Facilities	591	0.8%
Close contact or Presumed Community Transmission[4]	65,775	93.5%

[1] *Does not include over 565 COVID-19 cases reported in LTCF staff members employed by the > 112 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 8. Summary of weekly COVID-19 hospitalizations and deaths from Dallas County hospitals, Vital Statistics and Medical Examiner's office [1-4]

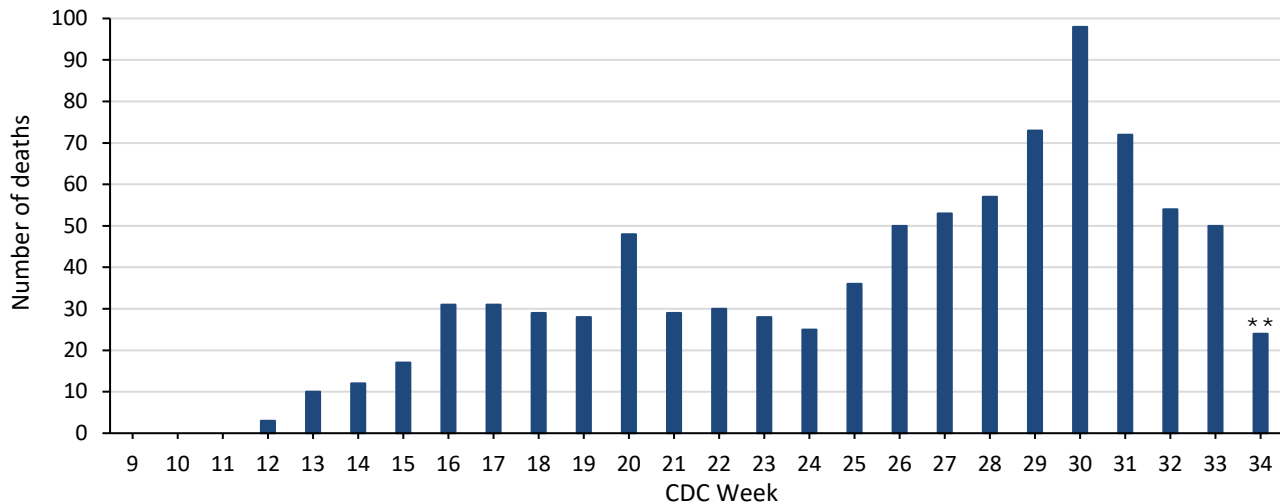| Week Ending	06/20	06/27	07/04	07/11	07/18	07/25	08/01	08/08	08/15	08/22	9/08/19–
CDC Week	25	26	27	28	29	30	31	32	33	34	Present
COVID-19 hospitalizations[1]	539	739	659	586	483	435	364	251	206	116	7,174*
COVID-19 ICU admissions[1]	97	119	136	148	117	83	97	56	48	27	1,706*
Probable COVID-19-associated deaths[2]	0	0	0	0	0	1	1	4	1	1	8*
Confirmed COVID-19-associated deaths[3]	36	50	53	57	73	98	72	54	50	24	898*

* 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 molecular lab test confirmation.

[3] Confirmed COVID-19 deaths as defined by a positive molecular amplification detection 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.
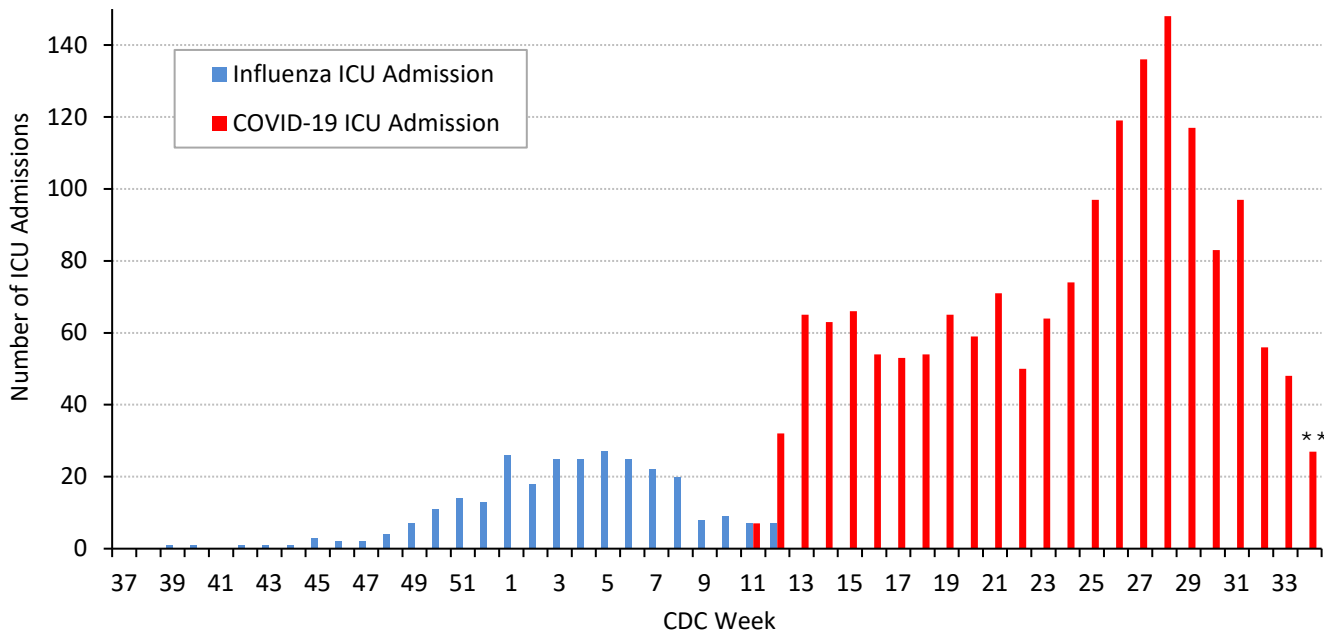
Figure 8. Confirmed COVID-19-associated deaths by week of death, Dallas County: March 2019 through week ending August 22, 2020 (CDC Week 34)*

* Dallas County residents diagnosed with confirmed COVID-19 by molecular amplification detection testing.
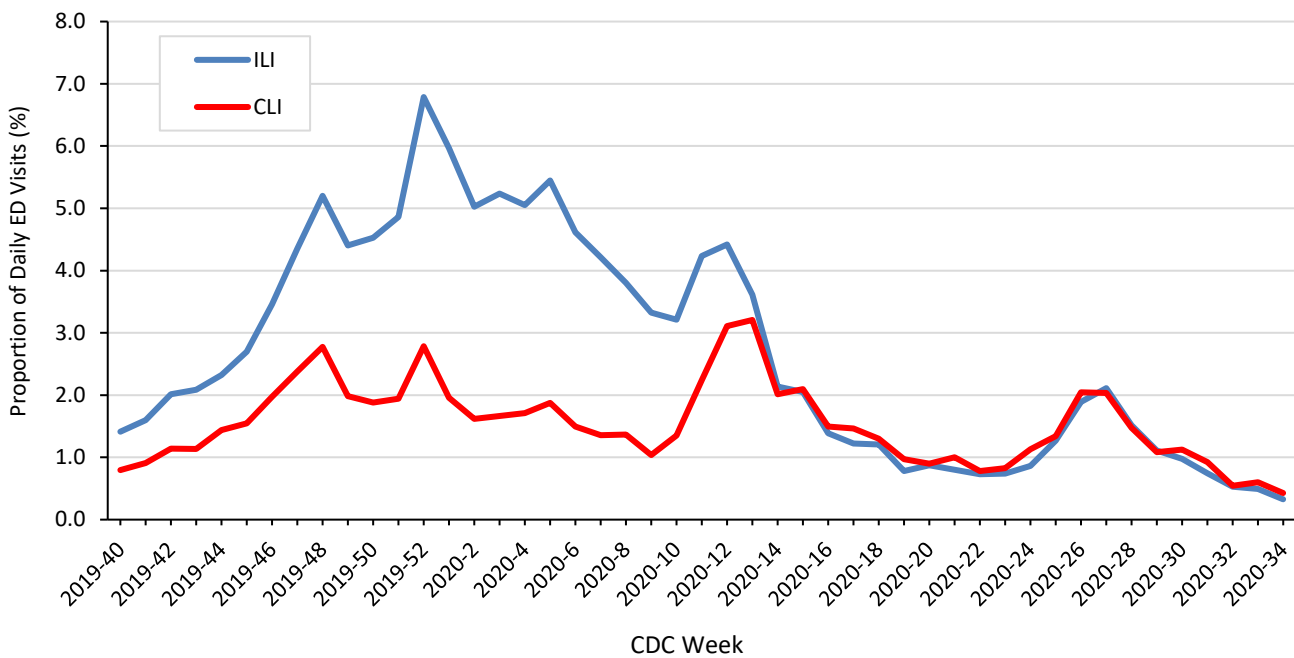
** All data are preliminary and subject to change as cases continue to be received and investigated.

Figure 9. Intensive care unit hospitalizations for influenza and COVID-19 by week of admission, Dallas County: September 2019 through week ending August 22, 2020 (CDC Week 34)*

* New ICU admissions of Dallas County residents reported with confirmed COVID-19 by molecular amplification
   detection 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 – August 22, 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 9. Occupations of hospitalized patients with confirmed COVID-19, Dallas County, 3/10 – 8/17/20

Occupation	Hospitalized Cases (%) of Total Employed	
	Position	Sector
*Critical Infrastructure Workers**		1,406 (78%)
Healthcare and Public Health		216 (12%)
Nurse, LVN, CNA	36	
Physician	10	
Other: Dentist, dietary, home health, medical assistant, mental health, PCT	170	
Transportation and Logistics		177 (10%)
Airline/Airport	14	
Parcel or postal delivery	17	
Cab/rideshare or bus driver	21	
Other: Mechanic, truck driver, freight, railroad	125	
Food and Agriculture		268 (15%)
Grocery	52	
Restaurant	81	
Other: Food processing, production, supply	135	
Other Community/Government Essential Functions		98 (5%)
Clergy (Pastor, priest)	11	
Education (Teacher, administration)	30	
Judicial system (Attorney)	11	
Other: Real estate services, shelter services, government operations	46	
Public Works and Infrastructure Support Services		231 (13%)
Construction/Contractor	167	
Other: Waste disposal, landscaping, maintenance	64	
Financial *(Accounting, bank, insurance)*		68 (4%)
Communications and Information Technology		28 (2%)
Commercial Facilities *(Building materials, painting, warehouse)*		133 (7%)
Hygiene Services *(Custodian, housekeeping)*		73 (4%)
Law Enforcement, Public Safety, First Responders		48 (3%)
Critical Manufacturing *(Manufacturing metal, packaging)*		45 (2%)
Energy/Utilities *(Electricity, petroleum, gas)*		21 (1%)
Non-Critical Infrastructure Workers *(Includes retail, personal services)*		260 (14%)
Employed *(position not reported)*		139 (8%)
Total reporting any employment		**1,805**
Non-Employed *(Includes retired, child, homemaker, etc.)*		2,121
Student *(≥18 years old)*		66
Not reported		2,986
Total hospitalized		6,978

* 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 10. Cumulative COVID-19 cases by city of residence within Dallas County as of August 28, 2020

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

City of Residence	Confirmed Cases (N=70,376)	Probable Cases (N=2,834)	Total Confirmed + Probable Cases reported in 14 day period from 8/9 – 8/22*	Estimated COVID-19 Prevalence (%) in 14 day period from 8/9 – 8/22** (lower – upper estimate range)
Addison	292	15	19	0.35 - 1.17
Balch Springs	775	36	32	0.38 - 1.28
Carrollton	1,205	39	79	0.42 - 1.39
Cedar Hill	1,146	32	32	0.20 - 0.68
Cockrell Hill	162	1	8	0.58 - 1.93
Combine	11	0	0	N/A
Coppell	345	74	38	0.28 - 0.94
Dallas	37,097	1,484	1,833	0.44 - 1.45
DeSoto	1,261	18	67	0.38 - 1.26
Duncanville	1,163	28	61	0.47 - 1.57
Farmers Branch	665	28	38	0.24 - 0.79
Ferris	5	0	1	N/A
Garland	6,334	12	338	0.42 - 1.41
Glenn Heights	155	7	11	0.32 - 1.07
Grand Prairie	3,492	309	191	0.43 - 1.43
Highland Park	69	20	4	0.13 - 0.44
Hutchins	226	2	14	0.72 - 2.39
Irving	6,402	250	289	0.36 - 1.21
Lancaster	1,068	19	48	0.37 - 1.22
Mesquite	3,949	257	214	0.46 - 1.52
Ovilla	1	0	0	N/A
Richardson	1,138	62	60	0.21 - 0.69
Rowlett	906	5	70	0.36 - 1.18
Sachse	177	2	22	0.37 - 1.23
Seagoville	1,886	19	29	0.52 - 1.72
Sunnyvale	109	19	2	0.09 - 0.29
University Park	142	92	18	0.22 - 0.72
Wilmer	188	2	11	0.69 - 2.31
Wylie	7	2	1	0.48 - 1.62
Dallas County	**70,376**	**2,834**	**3,530**	**0.40 - 1.34**

*Sum of confirmed and probable cases by date of test collection, for 14 day timeframe from: August 9– August 22, 2020. Most recent 2 weeks not included due to average reporting lag of 9.0 days. Case numbers are only for portions of each city which are within Dallas County.

**Estimated COVID-19 prevalence rate ranges calculated based on: Fox SJ, Lachmann M, Meyers LA. "COVID-19 Campus Introduction Risks for School Reopenings" presented to the TEA on July 22, 2020. Denominator populations are only for portions of each city which are within Dallas County.
https://sites.cns.utexas.edu/sites/default/files/cid/files/covid-19_school_introduction_risks.pdf?m=1595468503

Table 11. Summary of weekly COVID-19 confirmed and probable cases and deaths, Dallas County (CDC Weeks 30 - 34)

CDC Week	Week Ending	Total Confirmed and Probable Cases	Daily Average New Confirmed and Probable Cases*	Daily Average New Confirmed and Probable Deaths**	Percentage of Respiratory Specimens Testing Positive for SARS-CoV-2***
30	7/25/2020	4,393	628	14	19.3%
31	8/1/2020	3,255	465	10	15.9%
32	8/8/2020	2,868	410	8	14.0%
33	8/15/2020	2,092	299	7	12.8%
34	8/22/2020	1,439	206	4	11.0%

* For 7-day time period for respective CDC week by date of test collection
** For 7-day time period for respective CDC week by date of death
*** See Table 6 for historical data

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