United States as a disease

Total # of Hospitalizations	Total # of Emergency Department Visits
5.7% of a recent peak week	4.0% of a recent peak week
8.2% of a recent peak week	-15.0% of a recent peak week
Total Hospitalizations	Total # of COVID-19 Deaths
1,192,000	1,180,000

GO TO THE OTHER PAGE FOR MORE DATA

United States COVID-19 Hospitalizations, Deaths, Emergency Department (ED) Visits, and Test Positivity by Geographic Area

Maps, charts, and tables updated weekly with updates weekly for the previous MMWR week (Sunday-Saturday) on Friday by 8 pm ET.

View Purpose and Download Data

TEST POSITIVITY (PAST WEEK)	% CHANGE IN TEST POSITIVITY	TEST POSITIVITY (PAST 2 WEEKS)
8.7%	-0.7%	9.0%

CDC | Data through October 31, 2021, Posted October 28, 2021

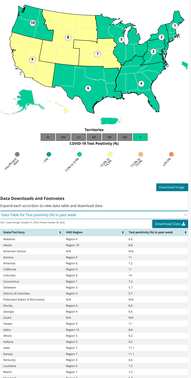
View:
- Hospitalizations
- Deaths
- Emergency Department Visits
- Test Positivity

Scale:
- MMS Region
- Total positivity (by past week
- % Change in by past week

Scale:
- Full Week
- Past 2 Weeks
- Past 4 Weeks

This shows the percentage of COVID-19 nucleic antigen amplification tests that were positive over the past week.

Percent Positivity of COVID-19 Nucleic Acid Amplification Tests (NAATs) in the Past Week by HHS Region - United States



Download Image

Data Downloads and Footnotes

Expand each accordion to view data table and download data

Data Table for Test positivity (%) in past week

Total rows/columns: 20, Data Source: Laboratory

Download Data

State/Territory	HHS Region	Test positivity (%) in past week	%
Alabama	Region 4	8.8	
Alaska	Region 10	8.6	
American Samoa	Region 9	0.0	
Arizona	Region 9	11.4	
Arkansas	Region 6	9.2	
California	Region 9	7.1	
Colorado	Region 8	7.1	
Connecticut	Region 1	5.1	
Delaware	Region 3	5.7	
District of Columbia	Region 3	6.6	
Federated States of Micronesia	Region 9	N/A	
Florida	Region 4	8.9	
Georgia	Region 4	9.1	
Guam	Region 9	7.1	
Hawaii	Region 9	3.1	
Idaho	Region 10	11.1	
Illinois	Region 5	6.1	
Indiana	Region 5	9.2	
Iowa	Region 7	7.1	
Kansas	Region 7	11.1	
Kentucky	Region 4	9.1	
Louisiana	Region 6	7.1	
Maine	Region 1	3.1	
Marshall Islands	Region 9	N/A	
Massachusetts	Region 1	7.2	
Michigan	Region 5	7.1	
Minnesota	Region 5	9.2	
Mississippi	Region 4	10.1	
Missouri	Region 7	9.2	
Montana	Region 8	7.1	
Nebraska	Region 7	9.2	
Nevada	Region 9	7.1	
New Hampshire	Region 1	5.1	
New Jersey	Region 2	7.1	
New Mexico	Region 6	9.2	
New York	Region 2	5.1	
New York (excl. NYC)	Region 2	5.1	
New York City	Region 2	5.1	
North Carolina	Region 4	9.6	
North Dakota	Region 8	7.1	
Northern Marianas Islands	Region 9	N/A	
Ohio	Region 5	7.1	
Oklahoma	Region 6	7.2	
Oregon	Region 10	7.1	
Palau	Region 9	N/A	
Pennsylvania	Region 3	5.7	
Puerto Rico	Region 2	7.1	
Republic of Marshall Islands	N/A	N/A	
Rhode Island	Region 1	7.2	
South Carolina	Region 4	9.2	
South Dakota	Region 8	7.1	
Tennessee	Region 4	9.2	
Texas	Region 6	7.2	
Utah	Region 8	7.1	
Vermont	Region 1	7.2	
Virgin Islands	Region 2	7.1	
Virginia	Region 3	5.7	
Washington	Region 10	7.1	
West Virginia	Region 3	5.7	
Wisconsin	Region 5	7.1	
Wyoming	Region 8	7.1	

Footnotes

- Data are from the previous MMWR week (Sunday-Saturday) and update weekly on Friday as soon as they are reviewed and verified. Usually before 8 p.m. ET. Updated with the following exceptions: data reflecting previous weeks with a federal holiday. Note: Weekly updates might be delayed for some states and territories. Please see the Data Notes for more information about the data and its limitations. Data are provisional and subject to change.
- **Please note:** Aggregate COVID-19 case and death data reporting has been discontinued with the end of the Public Health Emergency. Beginning on May 11, 2023, COVID-19 case and death data will be updated weekly on the COVID Data Tracker Weekly Review page. Hospital data will continue to be updated weekly on the COVID Data Tracker Home page. Vaccination data will be updated weekly on the COVID Data Tracker Vaccination page. Data from the National Respiratory and Enteric Virus Surveillance System (NREVSS) will continue to be updated weekly on the COVID Data Tracker Wastewater page. Data from the National Notifiable Diseases Surveillance System (NNDSS) will continue to be updated weekly on the NNDSS Weekly Data page.
- **Health and Human Services (HHS) regions:** The six HHS Regions of HHS regions are defined here
- **Data Sources:** Laboratory, Hospital, Emergency Department Visits

Hospitalization Data

- Hospitalization data are primarily collected and reported to CDC's National Healthcare Safety Network (NHSN).
- Hospitals are asked to report data on all patients who are hospitalized with a laboratory-confirmed COVID-19 infection and have been admitted to healthcare system sites, capacity, and commonly shared fields for approximately 5,000 hospitals in the United States. Data collection and reporting vary by jurisdiction, but most hospitals in the United States are reporting. Hospitals in the United States that are not currently hospitalizing COVID-19 patients are asked to report zeros in order to indicate that they are not currently reporting. Hospitals are required data directly to the U.S. Department of Health and Human Services (HHS) or via a state submission for collection in the HHS Protection Data Platform. Hospitals are asked to report data for the previous day. Data are updated daily and posted on weekdays.
- Hospitalization data are based on the date the facility first submitted a COVID-19 hospitalization to HHS. Because of reporting lags, HHS Protection Data Platform (HPDP) reviews these data for errors and corrects those found, some reporting errors might still exist within the data. To minimize the impact of reporting lags on the most recent data, the most recent 7 days of data are not included in the analysis. Hospitalization data are updated and corrected as more complete data are received.
- Many hospital networks, including some large and small private hospital networks, as well as Veterans Administration, Defense Health Agency, and Indian Health Service facilities, report their COVID-19 hospitalization data directly to their local or state health departments. Because of this, and the processing and reporting lag described above, some hospitals' data may be reported to their local or state health departments sooner than others. Because of this, and because not all hospitals report to their local or state health departments on the same schedule, there may be some variation in how recent the most recent data is for hospitals in different states. Because of this, and because of variations in when hospitals report their data to their local or state health departments, there may be some variation in how complete the most recent data is for hospitals in different states. For COVID-19 hospitalization data, the most recent data is generally more complete than the 7 days of data shown in the analysis.
- Beginning with data reported on November 1, 2020, the Centers for Medicare and Medicaid Services (CMS) began requiring hospitals within the 50 states, plus the District of Columbia (included in HHS Region 3), American Samoa (HHS Region 9), the Commonwealth of Northern Marianas Islands (HHS Region 9), Guam (HHS Region 9), Puerto Rico (HHS Region 2), and the United States Virgin Islands (HHS Region 2) to report COVID-19 hospitalization data as a condition of participation in a program to receive Medicare and Medicaid reimbursement. Hospitals in these jurisdictions that fail to report COVID-19 hospital data reporting cannot be listed here: https://www.cms.gov/files/document/qso-20-39-nh.pdf. Data from these hospitals are included in the COVID Data Tracker when available.
- **Hospital admissions with confirmed COVID-19 (adult and pediatric):** Number of hospitalized patients who were admitted to a hospital and tested positive for COVID-19 in the previous week including both adult and pediatric admissions in the entire jurisdiction.
- **Hospital admissions with confirmed COVID-19 (adult):** Number of hospitalized patients who were admitted to a hospital and tested positive for COVID-19 in the previous week including adult admissions in the entire jurisdiction.
- **Hospital admissions with confirmed COVID-19 (pediatric):** Number of hospitalized patients who were admitted to a hospital and tested positive for COVID-19 in the previous week including pediatric admissions in the entire jurisdiction.
- **Total adult and pediatric inpatient bed occupancy:** Total number of inpatient bed occupancy reported by facilities in the previous week.
- **Total adult and pediatric inpatient bed occupancy by patients with confirmed COVID-19 from the prior week:** The previous week average number of inpatient bed occupancy by patients with confirmed COVID-19 in the jurisdiction.
- **Total adult and pediatric inpatient bed occupancy by patients with suspected COVID-19 from the prior week:** The previous week average number of inpatient bed occupancy by patients with suspected COVID-19 in the jurisdiction.
- **Total staffed adult and pediatric inpatient bed capacity:** Total number of inpatient bed capacity reported by facilities in the previous week.
- **Total staffed adult and pediatric inpatient bed capacity by patients with confirmed COVID-19 from the prior week:** The previous week average number of inpatient bed capacity by patients with confirmed COVID-19 in the jurisdiction.
- **Total staffed adult and pediatric inpatient bed capacity by patients with suspected COVID-19 from the prior week:** The previous week average number of inpatient bed capacity by patients with suspected COVID-19 in the jurisdiction.
- **Total staffed adult and pediatric ICU bed capacity:** Total number of ICU bed capacity reported by facilities in the previous week.
- **Total staffed adult and pediatric ICU bed capacity by patients with confirmed COVID-19 from the prior week:** The previous week average number of ICU bed capacity by patients with confirmed COVID-19 in the jurisdiction.
- **Total staffed adult and pediatric ICU bed capacity by patients with suspected COVID-19 from the prior week:** The previous week average number of ICU bed capacity by patients with suspected COVID-19 in the jurisdiction.
- **% Change in new hospital admissions with confirmed COVID-19 from the prior week:** Percent change in the current weekly total of hospital admissions with confirmed COVID-19 compared to the previous week's total. Data are shown for the most recent week.
- **% Change in new hospital admissions with confirmed COVID-19 from peak week:** Percent change in the current weekly total of hospital admissions with confirmed COVID-19 compared to the highest weekly total in the past 4 weeks. Data are shown for the most recent week.
- **Percent of staffed adult inpatient beds occupied by patients with confirmed COVID-19 from the prior week:** The previous week average number of inpatient bed occupancy by patients with confirmed COVID-19 in the jurisdiction divided by the total number of staffed adult inpatient beds in the jurisdiction. This average percentage can be taken as the ratio of these two values for the entire week.

Absolute change, % staffed inpatient beds occupied by patients with confirmed COVID-19 from the prior week: The absolute change between the previous week average number of inpatient bed occupancy by patients with confirmed COVID-19 in the jurisdiction and the previous week average number of inpatient bed occupancy by patients with confirmed COVID-19 in the jurisdiction expressed as the ratio of staffed adult inpatient beds in the jurisdiction.

Percent of staffed adult inpatient beds occupied by patients with suspected COVID-19 from the prior week: The previous week average number of inpatient bed occupancy by patients with suspected COVID-19 in the jurisdiction divided by the total number of staffed adult inpatient beds in the jurisdiction. This average percentage can be taken as the ratio of these values for the entire week.

Absolute change, % staffed inpatient beds occupied by patients with suspected COVID-19 from the prior week: The absolute change in the previous week average number of inpatient bed occupancy by patients with suspected COVID-19 in the jurisdiction and the previous week average number of inpatient bed occupancy by patients with suspected COVID-19 in the jurisdiction expressed as the ratio of staffed adult inpatient beds in the jurisdiction.

New hospital admissions with confirmed COVID-19 per 100k population (7-day average): The previous week average number of hospital admissions with confirmed COVID-19 per 100,000 population in the jurisdiction. Population denominators are based on the 2019 census estimates. This metric is used to determine each jurisdiction's COVID-19 transmission level.

Change in new hospital admissions with confirmed COVID-19 from prior week: The absolute change in hospital admissions with confirmed COVID-19 between the previous week and the week before. This metric is used to determine each jurisdiction's COVID-19 transmission level.

Percent change in new hospital admissions with confirmed COVID-19 from prior week: The percent change in hospital admissions with confirmed COVID-19 between the previous week and the week before. This metric is used to determine each jurisdiction's COVID-19 transmission level.

Death Data

- Deaths are processed Deaths from the CDC's National Center for Health Statistics (NCHS) National Vital Statistics System (NVSS).
- Death counts are based on the date the death occurred and are based on the place where the death occurred in the State and United States. Data are updated weekdays at 11:00 a.m. ET. Updates are not scheduled on Federal holidays. Death data are displayed by date of death to ensure consistency with the epidemiologic curve. Because of this, the most recent days of data are incomplete because it takes time for death certificates to be filed and for those death certificates to be processed and added to the NCHS mortality files. Death counts for the most recent 7 days are not shown because they are too incomplete to be shown without a large amount of statistical uncertainty. Death counts are shown by jurisdiction of residence, regardless of the place of death.
- Death counts in the last few weeks are expected to increase as more death certificates are received from jurisdictions. Death counts are updated and corrected as more complete data are received. Because of this, the most recent data is subject to change and is most complete for earlier weeks.
- Data during recent periods are incomplete because of the lag in time between when a death occurs and when a death certificate is submitted and processed. The number of deaths reported for recent days, weeks, and months will increase over time as more death certificates are processed. The trends in deaths shown in charts and graphs are considered to be accurate because they account for the lag in receipt of death certificates and their processing, based on previous patterns in the data.
- Provisional death counts and rates can be shortly among U.S. residents and occurring in the United States, plus the District of Columbia and Puerto Rico. Provisional death counts exclude deaths of persons who are not residents of the United States. Rates are not shown for Puerto Rico because of a change in the population size following Hurricane Maria in September 2017. Rates are based on population estimates from the Bureau of Economic Analysis. Rates are based on the 2019 census estimates for NVSS provisional reporting.
- Rates for the 50 States, the District of Columbia, and the United States are age-adjusted using the 2000 standard population. Age-adjusted rates are preferred for comparing death rates across different jurisdictions because they account for differences in the age distribution of the population. Age-adjusted rates are based on 5-year age groups and are calculated using the National Cancer Institute's SEER*Stat software. Rates based on fewer than 20 deaths are not shown because they are unstable. Rates based on 20-50 deaths are shown but are unstable. Age-adjusted rates which have been adjusted to allow for comparisons between jurisdictions with different age distributions.
- Data are provisional and subject to change. Many factors can affect death rates including the completeness of death certificate reporting, the ability of jurisdictions to collect and process death certificates, and the ability of NCHS to receive, process, and code death certificates. Such national death counts however it are supplemented in accordance with NCHS data collection and processing standards. Rates based on death counts of less than 20 are not shown because they are unstable. Rates based on death counts of 20-50 are shown but are unstable. Rates based on death counts greater than or equal to 20 are stable. Death rates for 2020 are based on bridged-race population estimates from the National Center for Health Statistics. Death rates for 2021 are based on bridged-race population estimates from the NCHS website. https://www.cdc.gov/nchs/nvss/bridged_race.htm.
- For information about NVSS, please visit https://www.cdc.gov/nchs/nvss/index.htm.
- For downloading the NCHS mortality files please visit https://www.cdc.gov/nchs/fhp/VSRR/Provisional-COD-19-death-counts-rates-and-NCHS-estimates.htm.

Emergency Department Visits Data

- **Source:** Emergency Department (ED) visits from the National Syndromic Surveillance Program (NSSP).
- NSSP is a collaboration among CDC, federal partners, local and state health departments, and academic and private sector partners to rapidly collect, analyze, and share data from syndromic surveillance systems to inform public health practice and response to emergencies and other events, such that lives and COVID-19 disease are minimized by a variety of strategies implemented by the United States. Currently 47 jurisdictions and Guam (Guam-Hagatna) are reporting to NSSP. Data are from 3,500 facilities.
- Data are based on the date the patient presented to the ED, and are updated by the date the patient presented to the ED, geography, and for each chief complaint and diagnosis combination. Data are updated weekdays at 11:00 a.m. ET. Updates are not scheduled on Federal holidays.
- ED visits are not available for Northern Marianas Islands, Palau, Puerto Rico, and the U.S. Virgin Islands, jurisdictions with low ED participation. Data are not available for Guam (Guam-Hagatna) for the most recent 2 weeks.
- Data are provisional and subject to change. Many factors can affect ED visits including the completeness of data received.
- For more information on NSSP, see https://www.cdc.gov/nssp/index.html. For technical information, see https://www.cdc.gov/nssp/technical-resources.html.

Testing Data

- **Source:** National Respiratory and Enteric Virus Surveillance System (NREVSS).
- The data represent SARS-CoV-2 Nucleic Acid Amplification Test (NAAT) results, which include reverse transcriptase polymerase chain reaction (RT-PCR) and other molecular amplification tests. Laboratories report the number of NAAT tests performed and the number of NAAT tests with positive results to gis-group@cdc.gov and/or https://www.cdc.gov/nssp/ntd/index.html. These laboratories include private, commercial, and public laboratories. Laboratories report data to their local or state health department, and then it is reported to CDC.
- Test positivity is calculated by dividing the number of positive tests by the total number of tests performed.
- The percent positivity and case rate data are shown by week of specimen collection. Because of the time it takes for results and specimens to be reported, recent data are incomplete and will be updated in subsequent weeks of data.
- Laboratories report to NREVSS on a voluntary basis. Not all laboratories are reporting, and the number of laboratories reporting may change from week to week. Because of this, changes in the number of laboratories reporting can impact the trend in the data. Because not all laboratories report every week, gaps in the data may appear in the data displayed here.

- For more information on NREVSS, see https://www.cdc.gov/nssp/index.html. For technical information, see https://www.cdc.gov/nssp/technical-resources.html.

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