

3/16 UPDATES –

- Internal analysis found the Washington State Department of Health’s [data dashboard](#) duplicate case count issue identified in last month’s report has been mostly resolved. However, the recent surge in cases has resulted in a delay in case report processing, possibly resulting in an undercount of recent cases, hospitalizations, and deaths on the [data dashboard](#). We have incorporated this into our data interpretation narrative below.
- To give a more thorough description of COVID-19 deaths, we have broken out deaths associated with long-term care facilities by time to correspond with the peaks in the above graph. We are unable to do this for underlying conditions because of small numbers.
- Beginning next month, we will transition this report from a PDF to webpage format. Most elements from the report — including COVID-19 case, hospitalization, and death epidemiologic analysis — will be provided on [this webpage](#) and updated weekly. People will soon have the opportunity to sign up for email and/or text message alerts when the webpage is updated. We will continue periodically publishing reports on health-related topics as needs arise or when there is public interest.

This report provides a narrative of current COVID-19 trends and data not available elsewhere online. This report references data obtained from the Washington State Department of Health’s COVID-19 [data dashboard](#) as well as more detailed in-house analysis of case, hospitalization, death, and other COVID-related data. More frequent data updates can be found on our [Facebook page](#) and [COVID-19 data webpage](#). Updates on vaccine data can be found on our [COVID-19 vaccine webpage](#). If you have a question about this report, or a suggestion for what to include, please email: AskCowlitzHealth@co.cowlitz.wa.us.

***Case and hospital admission declines may be leveling off; deaths are steady.
Per-capita rates in school-age children now on par with county average.***

	<u>Cumulative to date</u>	<u>Current count</u> from most recent complete time period	<u>Noteworthy trends</u>
Cases	22,334 As of 3/13/22	10 cases/day (from test dates 2/25/22 – 3/3/22)	Decline may be leveling off. Per-capita rates in school-age children now on par with county average. Cowlitz County’s per-capita rate is roughly the same as Washington State as a whole, and our decrease in case counts is also roughly in line with statewide trends .
Hospital admissions	1,153 As of 3/13/22	1-2 hospital admissions/day (from test dates 2/18/22 – 3/3/22)	Decline may be leveling off. Per-capita rates continue to be highest among adults aged 80+ . Cowlitz County’s per-capita rate is roughly the same as Washington State as a whole, and our decrease in hospital admissions is also roughly in line with statewide trends .
Deaths	339 As of 3/13/22	Almost 1 death/day (from deaths in January 2022)	Has held fairly steady since late fall 2021 . Cowlitz County’s per-capita rate is roughly the same as Washington State as a whole, though deaths are decreasing statewide while ours are not .

Cowlitz County COVID-19 Epidemiologic Curve

Cowlitz County's epidemiologic curve can be found on the Washington State Department of Health's [data dashboard](#), on the "Epidemiologic Curves" tab under "Cases" and "Cowlitz County". Note that very recent rates may be an undercount because of the data processing delay described on the first page of this report.



Active cases

COVID-19 cases are considered "active", or contagious, for 10 days after their symptom onset, or, for asymptomatic cases, 10 days after their test date. **There are currently an estimated 95 identified active COVID-19 cases in Cowlitz County.** Note that these only include cases that have been identified via a COVID-19 test. Because we know that some people with COVID-19 are not tested, and cases identified with at-home tests will probably not be reported, the true number of active cases is probably higher, and possibly much higher, than this figure.

Variants

- **The new Omicron variant has been identified in Cowlitz County residents.**
 - **The latest statewide variant report has more information and can be found [here](#). The true number of residents infected with the Omicron variant is much higher than what is provided in this report.** Details are provided below.
- COVID-19 tests at doctors' offices or drive-thru testing sites detect the COVID-19 virus but do not differentiate between different variants of the virus. That's why your provider may say they can't test for variants, and our public health nurses can't tell you if you've tested positive for a specific variant. If you are infected with a specific variant, advice and patient care is the same as anyone who tests positive for COVID-19.
- Determining whether a person is infected with a variant of the SARS-CoV-2 virus requires a lab to perform genomic sequencing on a collected specimen. A specimen is the fluid collected from someone's nose with a test swab. Genomic sequencing looks at the virus genes for mutations specific to the different variants. If a mutation is detected in a specimen, it means that person was infected with the corresponding variant.
- Specimens from only about 10% of cases are sent for genomic sequencing. Specimens may be chosen for sequencing if they are from a unique case, such as a younger otherwise healthy person who is hospitalized for COVID-19. This may help identify new variants that could be more transmissible or cause more severe illness. The state DOH has also begun to sequence a random sample of specimens across the state to estimate the overall prevalence of variants.
- The CDC's [SARS-CoV-2 Classifications and Definitions website](#) provides information on variants being tracked in the US.

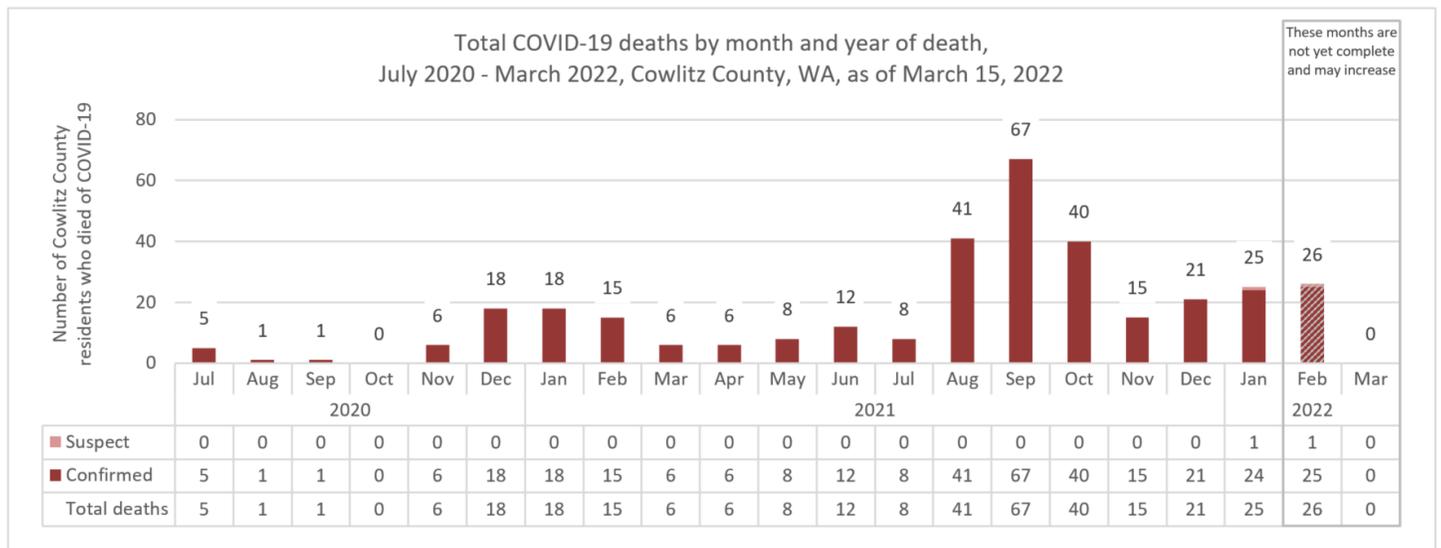
Deaths

The number of deaths reported by the state DOH includes both confirmed and suspect deaths. Confirmed COVID-19 deaths are those with a positive COVID-19 test (molecular or antigen) and have COVID-19 listed on the death certificate. Suspected COVID-19 deaths are those that occur within 28 days of a positive COVID-19 test but do not have COVID-19 listed on the death certificate. Suspect deaths are removed from the state’s count if COVID-19 is later ruled out as the official cause of death following a clinical review. A clinical review may instead reclassify a suspect death into a confirmed death. As a result, the number of suspect deaths in the most recent month or two may decrease if they are ruled out or reclassified to “confirmed”. All confirmed and suspect COVID-19 deaths undergo a clinical review in Cowlitz County.

Note that the counts on this graph will not match the counts reported on the state DOH’s [COVID-19 Data Dashboard](#). The Dashboard reports deaths based on the decedent’s test date. Our graph is based on the date of death, which we believe to be more meaningful.

COVID-19 death count to date among Cowlitz County residents:

- **339** total deaths
 - **337** were confirmed
 - **2** are considered suspect



Additional information on COVID-19 deaths

- Over 95% of total confirmed deaths had underlying conditions.
- Proportion of deaths associated with a long-term care facility
 - **In about the first year of the pandemic (through April 2021), 2 out of every 5 deaths (41%) were associated with a long-term care facility**
 - **This proportion is lower since then.**
 - From May 2021 – November 2021, 1 in 7 (14%) of deaths were associated with a long-term care facility.
 - From December 2021 – March 2022, 1 in 6 (16%) of deaths were associated with a long-term care facility.