

Report Timeframe: September 3 to September 9, 2023

Statewide hospitalization levels: Low. New COVID-19 admissions are below 10 per 100,000 Vermonters per day.

- New hospital admissions of patients with COVID-19, last 7 days: 4.49 per 100K
 - 28 total new admissions with COVID-19

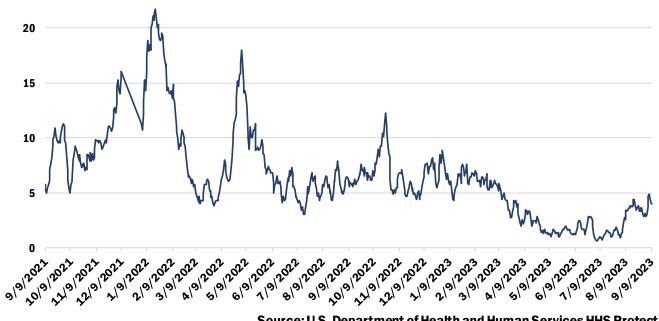
The number of reportable COVID-19 cases is still available in this report, below. Laboratoryconfirmed and diagnosed COVID-19 cases and COVID-19 outbreaks must still be reported to the Vermont Department of Health

Vermont Department of Health recommendations: Preventing COVID-19 (healthvermont.gov)

Hospitalizations Over Time







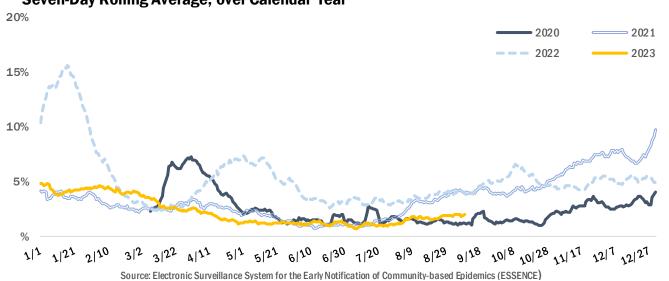
Source: U.S. Department of Health and Human Services HHS Protect

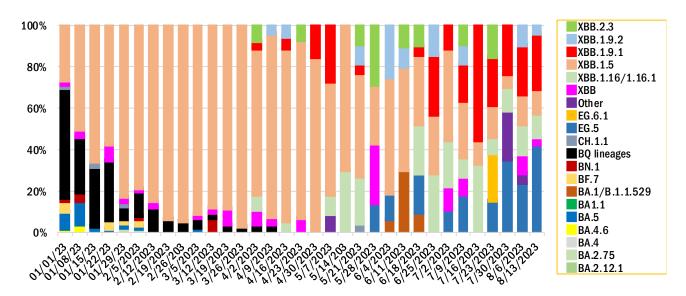
The seven-day rolling average of hospital patients admitted with a laboratory-confirmed COVID-19 was between three and five. The number is the daily average of the previous seven days; for example, the value for May 28 is the daily average for the days of May 21 through May 27.

Syndromic Surveillance

The Electronic Surveillance System for the Early Notification of Community-based Epidemics (ESSENCE) reflects all visits from participating emergency departments¹, to identify visits for COVID-Like Illness (CLI). During this reporting period the proportion of emergency visits in participating departments that included CLI was around 2%, but lower than the same time in 2021 and 2022.

Percent of Emergency Visits with COVID-Like Illness Seven-Day Rolling Average, over Calendar Year

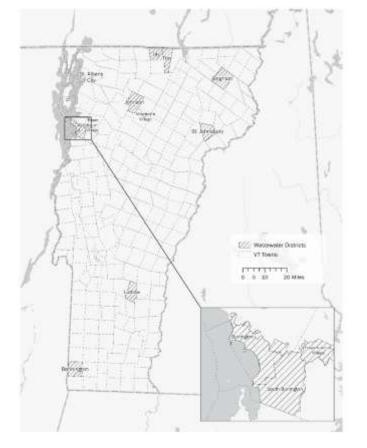




Proportion of sequenced variants

EG.5 accounts for 42% of sequenced virus during the week of 8/13/2023. (Sources: LabCorp, Quest, Helix, Health Department Whole Genome Sequencing program)

¹ All Vermont hospitals and two urgent care clinics are included in ESSENCE.



Wastewater Monitoring

Several Vermont wastewater districts participate with the National Wastewater Surveillance System (NWSS). Montpelier has recently been added as a new site.

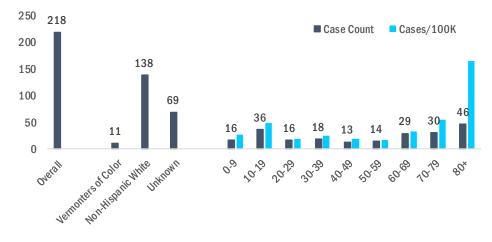
Starting on 8/17/23, wastewater monitoring results are described by how their COVID-19 measurements have been trending. Trend categories are: Sustained Decrease, Decrease, Plateau, Increase, and Sustained Increase.

NWSS Site	Current Trend				
Bennington	Plateau				
Brighton	*				
Burlington (Main plant)	Plateau				
Burlington (North plant)	*				
Essex Junction	Sustained Increase				
Montpelier	*				
Ludlow	Plateau				
South Burlington	*				
St. Albans City	Plateau				
St. Johnsbury	Plateau				
Troy / Jay WWTP	Sustained Increase				
Winooski	Decrease				

*Data will be reported when available.

Identified Cases

VermontWeeklyCase Counts/Rates



Note: Case counts and rates are calculated by *confirmed* and *probable* cases reported to the Health Department.

To calculate rates, counts are divided by 2019 Vermont population estimates for respective category and expressed per 100,000 in each category.

Due to a high number of cases missing race/ethnicity data, rates are not provided for race/ethnicity categories.

COVID-19 Outbreaks Reported September 5 to September 11

For purposes of this report, an outbreak is defined as three or more epidemiologically linked cases of COVID-19, where at least one such case has been laboratory or otherwise clinically confirmed as COVID-19.

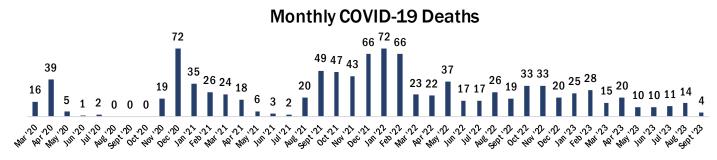
Facility type	New Outbreaks Reported 9/5 - 9/11				
Long-term Care (LTC)	8				
Non-LTC Healthcare	-				
Correctional Facility	-				
School/childcare	5				
Other	2				

County	New Outbreaks Reported 9/5-9/11				
Addison	-				
Bennington	1				
Caledonia	1				
Chittenden	2				
Essex	1				
Franklin	1				
Grand Isle	-				
Lamoille	1				
Orange	-				
Orleans	2				
Rutland	1				
Washington	-				
Windham	1				
Windsor	4				

Cumulative COVID-19 Deaths as of September 9, 2023

	Age group								
Total	Under 10	10-19	20-29	30-39	40-49	50-59	60-69	70-79	80+
1015	1	0	2	11	19	71	103	234	574

Note: the report posted on September 6, 2023, showed an incorrect **total** sum of deaths as of September 2, which should have been reported as 1013.



Note: Deaths are from registered death certificates and represent preliminary data. A change in death count may represent new deaths, corrections, or other updates.

Data Source: Vermont Department of Health Vital Statistics System.

For more information about this report, please contact john.davy@vermont.gov