

Report Timeframe: May 21 to May 27, 2023

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

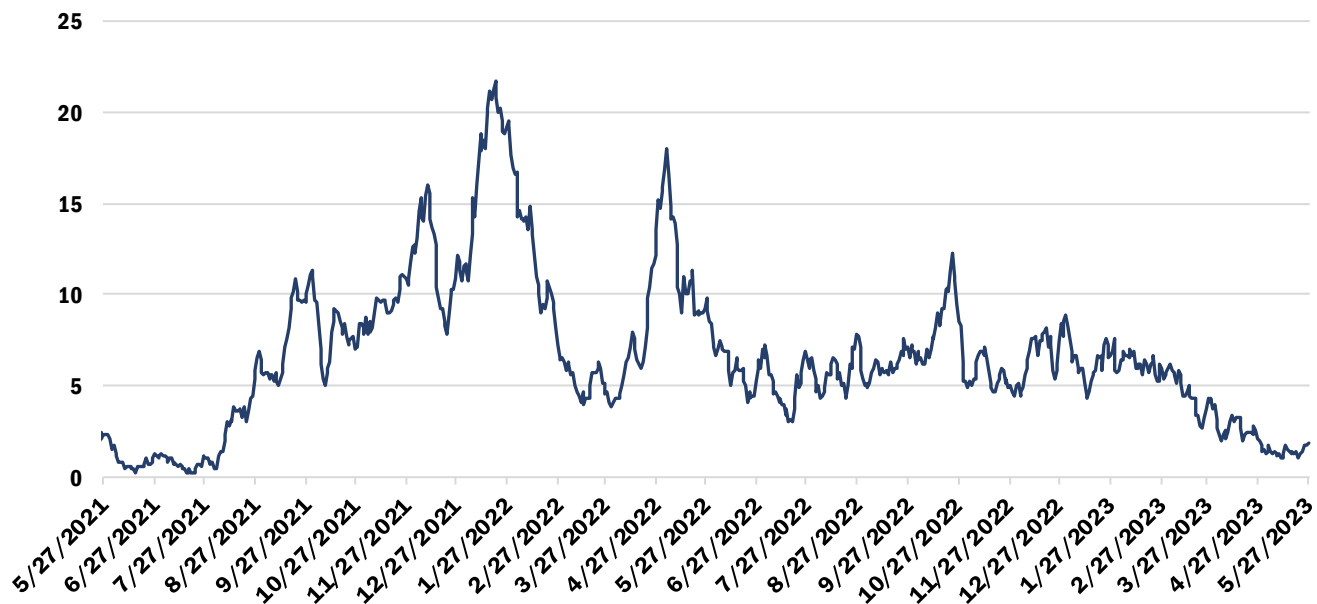
- New hospital admissions of patients with COVID-19, last 7 days: 2.08 per 100K
 - 13 total new admissions with COVID-19 (increase from previous week)

The number of reportable COVID-19 cases is still available in this report, below. Laboratory-confirmed 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 \(healthvermont.gov\)](https://healthvermont.gov)

Hospitalizations Over Time

Daily Hospitalizations With COVID-19 Diagnosis Seven-Day Rolling Average



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

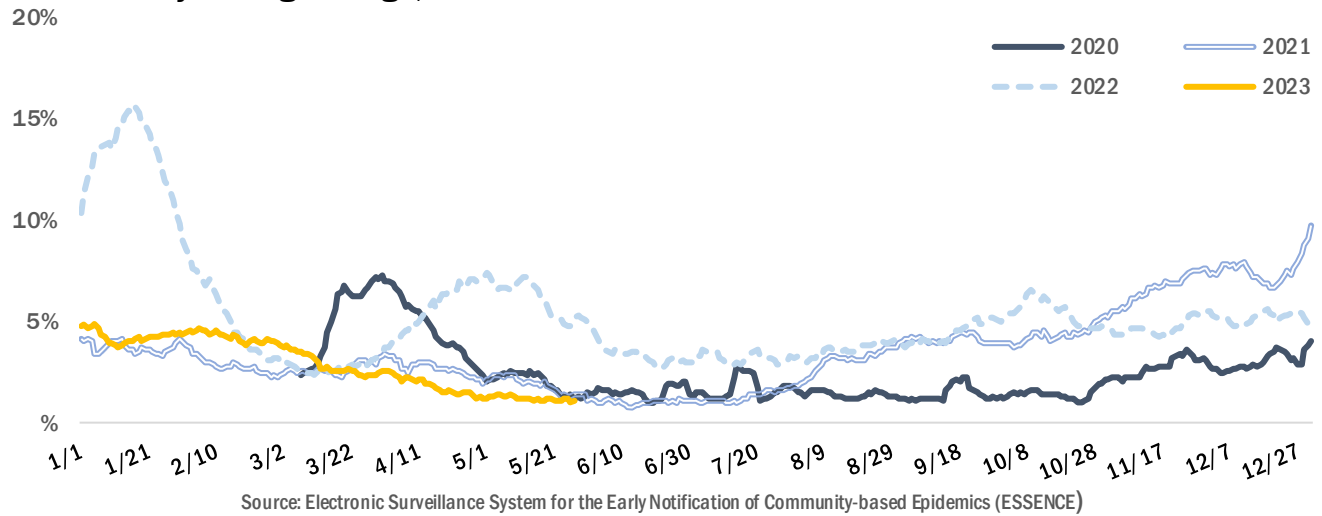
The seven-day rolling average of hospital patients admitted with a laboratory-confirmed COVID-19 was around one to two during the most recent reporting week. The number is the daily average of the previous seven days; for example, the value for May 28 is the daily average for the days of May 21 through May 27.

Syndromic Surveillance

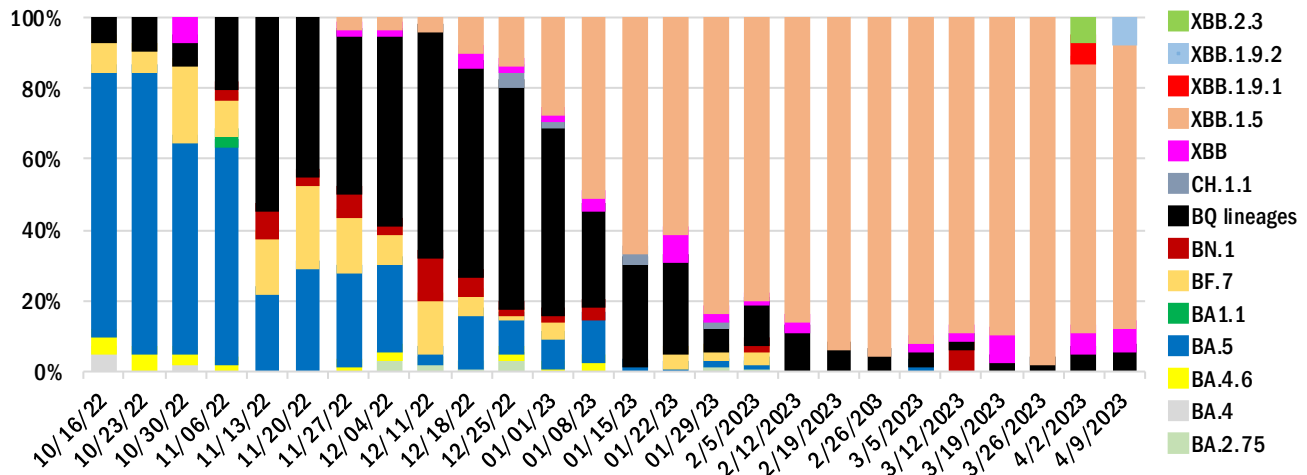
Vermont is using the Electronic Surveillance System for the Early Notification of Community-based Epidemics (ESSENCE), which provides all individual emergency department visits from participating emergency departments¹, to identify Emergency Department visits for COVID-Like Illness (CLI).

During this reporting period the proportion of emergency visits in participating emergency departments that included CLI was under 2%, lower than the same dates in 2022.

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



Proportion of sequenced variants



XBB.1.5 and XBB continue to comprise >90% of circulating virus. (Sources: Broad; Aegis; Helix; LabCorp; Quest; Health Department Whole Genome Sequencing program)

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

Wastewater Monitoring



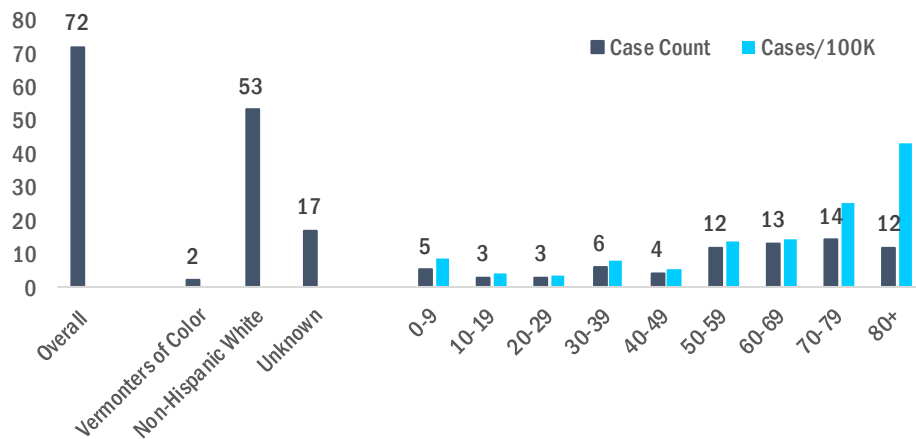
Vermont wastewater districts participating with the National Wastewater Surveillance System (NWSS).

There is a mix of increases and decreases this week.

NWSS Site	15-day % change
Bennington	Increase between 10%-99%
Brighton	*
Burlington (main plant)	Decrease between 0%-9%
Essex Junction	Increase between 10%-99%
Ludlow	Increase between 10%-99%
South Burlington	Decrease between 0%-9%
St. Albans City	Decrease between 10%-99%
St. Johnsbury	Increase between 10%-99%
Troy / Jay WWTP	Decrease between 10%-99%
Winooski	Decrease between 10%-99%

Identified Cases

Vermont Weekly Case 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 May 23 to May 30

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.

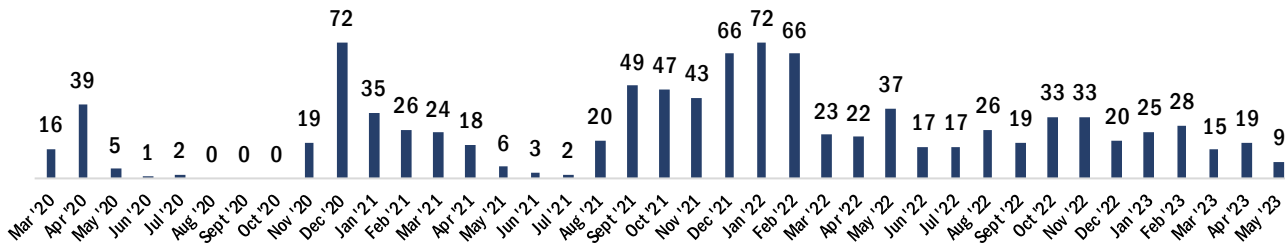
Facility type	New Outbreaks Reported 5/23- 5/30
Long-term Care (LTC)	-
Non-LTC Healthcare	-
Correctional Facility	-
School/childcare	-
Other	-

County	New Outbreaks Reported 5/23 - 5/30
Addison	-
Bennington	-
Caledonia	-
Chittenden	-
Essex	-
Franklin	-
Grand Isle	-
Lamoille	-
Orange	-
Orleans	-
Rutland	-
Washington	-
Windham	-
Windsor	-

Cumulative COVID-19 Deaths as of May 27, 2023

Total	Age group								
	Under 10	10-19	20-29	30-39	40-49	50-59	60-69	70-79	80+
974	1	0	2	11	19	67	101	225	548

Monthly COVID-19 Deaths



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