

July 31, 2024

Report Timeframe: July 21 to July 27, 2024

Current Vermont Department of Health recommendations on preventing COVID-19.

Syndromic Surveillance

The Electronic Surveillance System for the Early Notification of Community-based Epidemics (ESSENCE) reflects all visits from participating emergency departments (ED). The chart below shows a rolling seven-day average of all ED visits in Vermont hospitals that include a COVID-19 diagnosis (emergency and non-emergency, in- and outpatient visits).

Emergency Department Visits with COVID-19 Diagnosis Seven-Day Rolling Average, Vermont Hospitals



Variant Proportions - Clinical Specimens



KP.2 and KP.3 are the dominant circulating variants. Some limited specimen quantities may impact proportion accuracy. Source: Vermont Department of Health Whole Genome Sequencing program.

Variant Proportions - Wastewater Monitoring

KP.2 is the dominant circulating variant in wastewater.



Samples from two wastewater sites, Bennington and Ludlow, are sequenced to estimate the proportion of circulating variants. Data from 6/22 and 6/29 are from Bennington only.

Source: Centers for Disease Control and Prevention <u>National</u> <u>Wastewater Surveillance</u> <u>System</u>

Virus Concentrations and Trends – Wastewater Monitoring

Concentrations have increased in Montpelier (see chart below) and remain elevated at Burlington North (data not shown – see link below) Some week-to-week fluctuation is expected.

Montpelier, South Burlington and Essex Junction wastewater districts participate in <u>WastewaterSCAN</u>. The graph below shows COVID-19 levels and trends over time in these districts.



SARS-CoV-2, Vermont

Montpelier, VT (Montpelier Water Resource Recovery Facility)

South Burlington, VT (South Burlington-Airport Parkway WWTF)

Essex Junction, VT (City of Essex Junction Wastewater Treatment Facility)

Data for Burlington's North and Main plants are available through <u>Burlington's Wastewater</u> <u>Monitoring Report</u>.

Identified Cases



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

To calculate rates, counts are divided by 2021 Vermont population estimates for the 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 July 23 to July 29

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

Facility type	New Outbreaks Reported 7/23 - 7/29
Long-term Care (LTC)	3
Non-LTC Healthcare	-
Correctional Facility	-
School/childcare	-
Other	-

ew Outbreaks Reported 7/23 - 7/29
-
1
1
1
-
-
-
-
-
-
-
-
-
-

Cumulative COVID-19 Deaths as of July 27, 2024



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