



COVID-19 Surveillance Summary

Carson City

January 31 – February 13, 2021

Contact Tracing and Disease Investigation Update

From January 31 – February 13, 2021, the Carson City Health and Human Services COVID-19 Disease Investigation Team was able to successfully attempt contact with ninety-three percent of cases within twenty-four hours. The remaining seven percent were long-term care facility residents, correctional center inmates, or were missing necessary contact information. The Investigation Team also reintroduced a more expanded investigation to collect information such as symptomology, medical history, and refocused exposure questions. As always, the information reported here is based on preliminary laboratory findings and completed survey investigations and does not necessarily represent all cases during this two-week period.

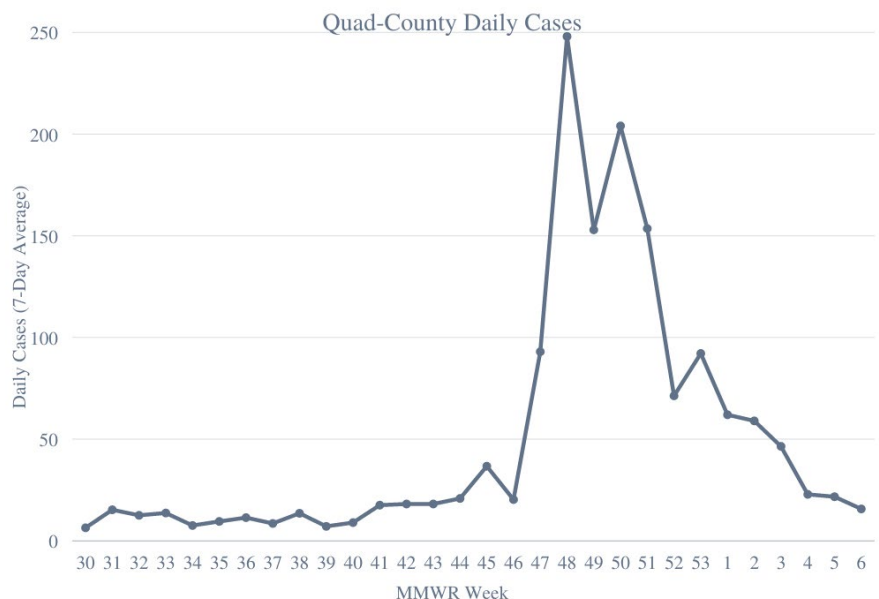
CCHHS also began partnering with the Nevada Resilience Project. On February 1, 2021, they began calling cases, close contacts, and other members of the community impacted by COVID-19 that were identified as having challenges associated with the pandemic including, but not limited to, managing work or school, social isolation, mental health, and resource navigation. Since the start of this partnership, the Resilience Ambassadors identified 141 individuals or families that could benefit from their services.

Quad-County Area Demographics

Across the Quad-County area (Carson City, Douglas, Lyon, and Storey Counties), there were 262 new COVID-19 cases in the two-week period from January 31 – February 13, 2021, a sixteen percent decrease from the previously reported two-week period. The daily cases reported, based on a seven-day average, over this two-week period was nineteen (Graph 1). This indicates that, on average, there have been nineteen new cases each day throughout the Quad-County area.

This case decrease is due, in part, to a decrease in testing, but also represents

a continued downward trend of new COVID-19 cases. Statewide, Nevada has been reporting decreased transmission. This, in combination with tireless vaccination efforts, will continue to drive the state towards fewer new cases and decreased hospitalizations.



Graph 1: 7-day Average per Week

Oftentimes lab reports are received with incomplete data and our survey data is on a delay. As such, the following demographic data has a significant percentage of unknown or missing information. The average age across all counties was forty-two years old with a range of less than a year old to ninety-two years old. Forty-eight percent of cases were female, and fifty-two percent were male. Of the cases that reported their race, eighty percent were reported as White, sixteen percent cases were reported as other, two percent were reported as American Indian, one percent preferred not to answer, and one percent were reported as Asian, Black or African American, or Native Hawaiian or Pacific Islander. Of those who reported their ethnicity, seventy-nine percent reported as Non-Hispanic or Latino/a, twenty percent reported as Hispanic or Latino/a, and one percent preferred not to answer. According to the Nevada Hospital Association report on January 29, 2021, hospitalizations in the Quad-County area have continued to decrease. Ventilator use as well as ICU occupancy due to COVID-19 have also decreased significantly. There were six deaths across the four counties. Morbidity data is often delayed, so this number is an estimate for that period of time.

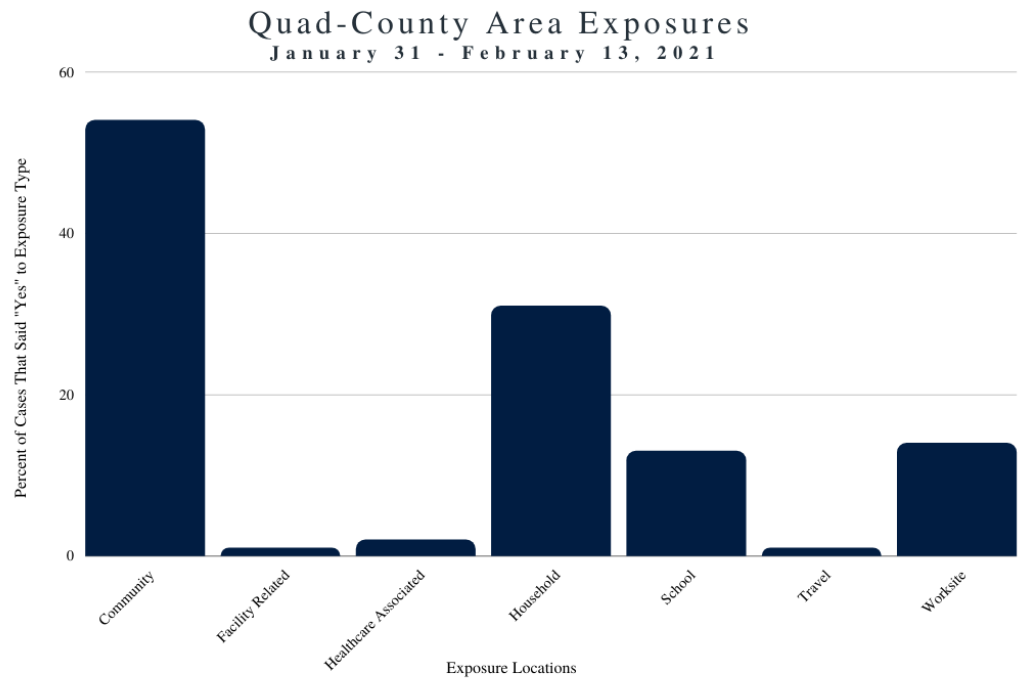
Quad-County Area Exposure

Beginning February 10, 2021, our investigations team began conducting more robust investigations including information on medical history, symptomology, and more specific exposure questions. This will allow our agency to look at symptomology due to possible variants, reinfections, the effects of comorbidities, and analyze more expansive exposure data.

Among cases with complete information, the most common, known COVID-19 exposures were household and community (Graph 2). Cases can have more than one exposure. The information on the graph and below indicates the percentage of cases that said “yes” to each question, independently.

Approximately fifty-four percent of known case exposures were related community exposure. This can be family gatherings, weddings, funerals, birthday parties, political

events, or any other similar activity. Community exposure, as defined by the state, also refers to individuals that did not know where they were exposed. Thirty-one percent were household cases, indicating that the transmission occurred within the immediate household. There were eighteen student case investigations completed from January 31 – February 13, 2021. Of these student cases, thirty-three percent attended school during their infectious period. There were two school faculty cases, of



Graph 2: Case Exposures

whom fifty percent attended school while infectious. Our school biostatistician works closely with schools to help with contact tracing, case surveillance, and the implementation of mitigation strategies.

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From January 31 – February 13, 2021, there were 95 confirmed cases reported in Carson City. This represents approximately thirty-six percent of all Quad-County cases during this two-week period and is a nineteen percent decrease from the previous two-week period. The decrease indicates a trend in decreased transmission as well as a decrease in testing. The daily cases reported, based on a seven-day average, over this two-week period was seven. This indicates that, on average, there have been seven new cases each day throughout Carson City. Forty-seven percent of cases were female, fifty-two percent were male, and one percent preferred not to answer. The average age of Carson City cases was forty-one years old. There were four known hospitalizations among Carson City cases. Fifty-eight percent of cases were employed (or employed within the last thirty days). There were six students that tested positive for COVID-19 during this two-week period. Of those student cases, two attended school during their infectious period (33%). Additionally, there was one faculty members that tested positive but did not attend school while infectious.

Community exposure accounted for fifty-eight percent of known exposures. Household exposure accounted for twenty-seven percent of known exposures. The graph shows more information on Carson City exposures (Graph 3). Just as above, exposure questions are independent, meaning an individual can answer “yes” to more than one exposure type. Transmission trends are challenging to track or predict. Due to this, Carson City Health and Human Services continues to promote messages regarding safe practices, social-distancing, vaccinations, and testing.

