

1. Data Summary and Key Messages

Local Summary (Hospital ED Visits):

The aggregate trend in emergency department (ED)¹ visits for respiratory-related complaints² at local LGLDHU hospitals continues to be lower than normal. The same trend has been observed for Ontario overall. After an uptick in respiratory-related complaints at LGLDHU EDs last week, visit counts have stabilized again. Currently, respiratory-related complaints account for 6% of LGLDHU hospital ED visits.

Highlights & Key Messages:

LGLDHU Case Summary (all cases):

- 313 lab confirmed cases including 43 deaths in LGLDHU^{3,4,5}:
 - ◊ Community cases: 67 (21%)
 - ◊ Healthcare worker cases 69 (22%)
 - ◊ Long-term care/retirement residence cases 177 (57%)
 - ◊ <1% increase in lab confirmed cases since last report
 - ◊ Lab confirmed case positivity rate is 9% with 3,544 tests done to date
 - ◊ 4 current COVID-19 related outbreaks in long-term care facilities
 - ◊ Cases geographically spread across region (17/21 municipalities reporting cases)
 - ◊ 68% of cases are female
 - ◊ Median age of cases is 74-years (min = 2, max = 104)
 - ◊ 3% < 19-years, 14% 20-44 years, 20% 45-64 years, 63% 65+ years
 - ◊ 11% of cases hospitalized, 14% of hospitalized cases required ventilation
 - ◊ 35% of cases recovered

LGLDHU Deaths Summary:

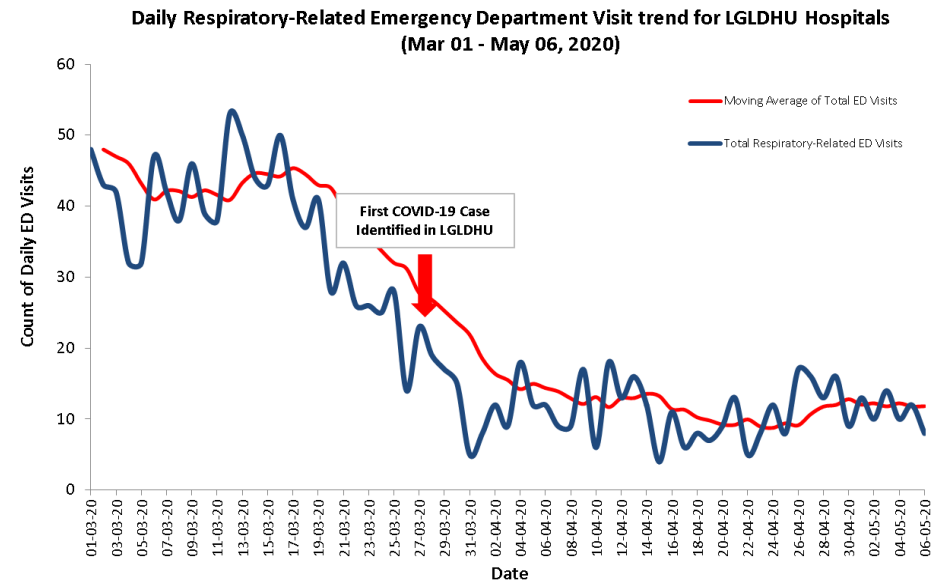
- 43 deaths (40 long-term care, 3 community)
 - ◊ Case fatality rate is 14%
 - ◊ Median age of deaths is 86-years (min = 56, max = 100)
 - ◊ 95% of deaths occurred in population aged 65+ years
 - ◊ 63% of deaths were female
 - ◊ 28% of deaths occurred in hospital

Provincial:

- 19,121 confirmed cases (13,012 investigations) including 1,477 deaths in Ontario.
 - ◊ 2% increase in lab-confirmed cases since last report
 - ◊ 5% cases hospitalized
 - ◊ 21% of hospitalizations transferred to ICU, 15% required ventilation

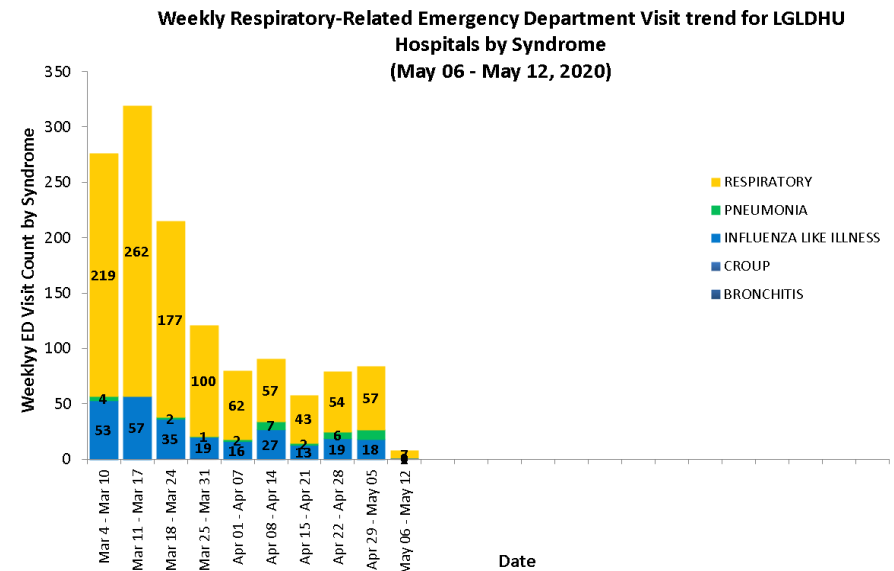
For more information visit: <https://healthunit.org/coronavirus/>, call the *Infectious Diseases Line* at 613.345.5685 (ex 2222) or contact the epidemiologist at epi@healthunit.org

2. Respiratory Related ED Visits to LGLDHU Hospitals¹



Source: Acute Care Enhanced Surveillance (ACES). KFLA 2020, LGLDHU Data.

3. Respiratory Related ED Visits by Syndrome



Source: Acute Care Enhanced Surveillance (ACES). KFLA 2020, LGLDHU Data.

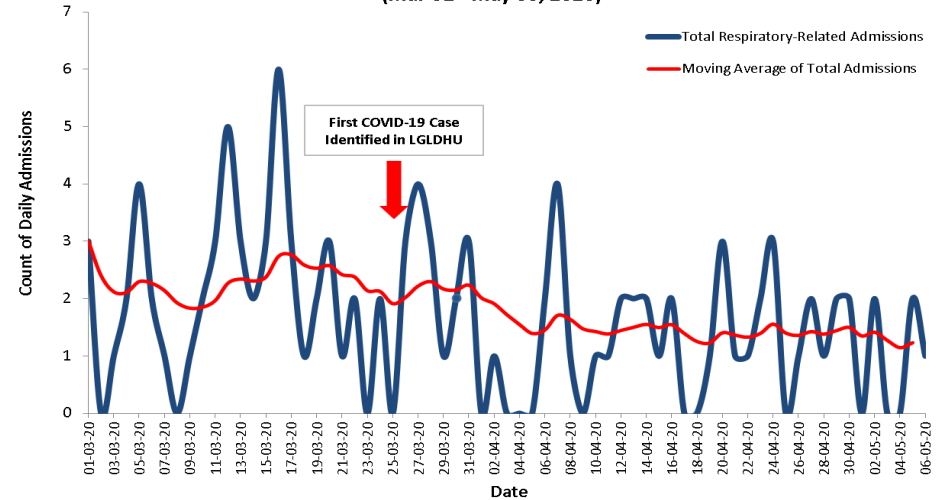
4. Data Summary and Key Messages

Local Summary (Hospital Admissions):

The aggregate trend in emergent admissions¹ for respiratory-related² reasons at local LGLDHU hospitals continues to remain low. The same trend has been observed for Ontario overall. Currently, respiratory-related complaints account for about 3% of LGLDHU hospital admissions with pneumonia-related admissions representing the highest count overall. The median age of respiratory-related admissions was 71-years over the past week (Min=21, Max=81).

5. Respiratory Related Admissions to LGLDHU Hospitals¹

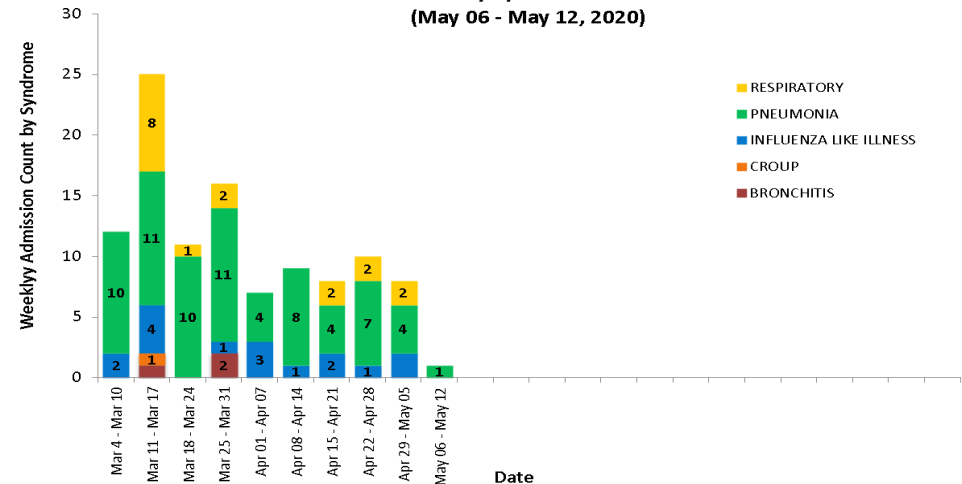
Daily Respiratory-Related Emergent Hospital Admission trend for LGLDHU (Mar 01 - May 06, 2020)



Source: Acute Care Enhanced Surveillance (ACES). KFLA 2020, LGLDHU Data.

6. Respiratory Related Admissions by Syndrome

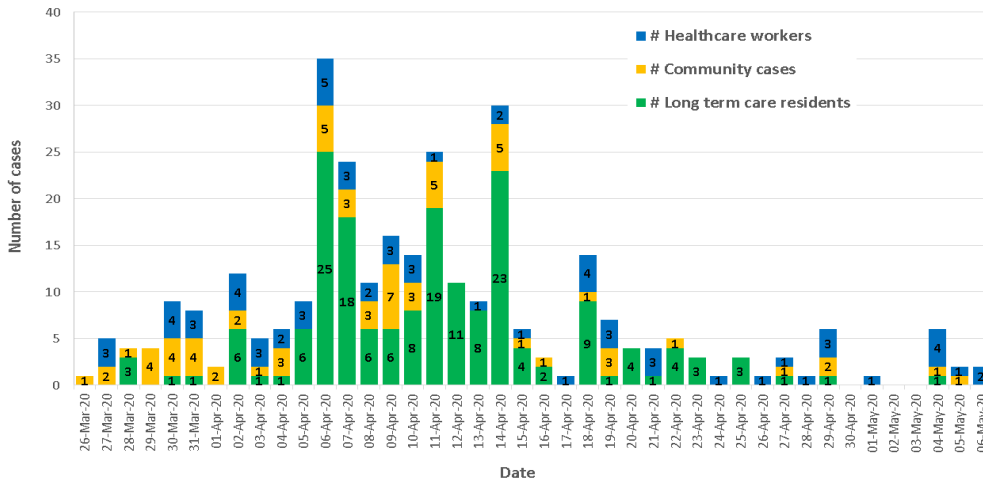
Weekly Respiratory-Related Emergent Hospital Admissions trend for LGLDHU by Syndrome (May 06 - May 12, 2020)



Source: Acute Care Enhanced Surveillance (ACES). KFLA 2020, LGLDHU Data.

7. COVID-19 Lab Confirmed Case Summary for LGLDHU^{4,5}

Daily count for lab confirmed positive COVID-19 cases by case type (As of May 06, 2020: LGLDHU)



Source: Integrated Public Health Information System. Ontario MOHLTC. LGLDHU Data.

Note 1: Reporting hospitals include: Brockville General (BRGH), Kemptville District (KEDH), Carleton Place Memorial (CCC), Smiths Falls (SFH), Perth (GWMH).

Note 2: Respiratory-related emergency department visits or admissions include: Bronchitis, Croup, influenza-like illness (ILI), pneumonia, and respiratory syndromes.

Note 3: Differences between LGLDHU counts and provincial counts may result due to data abstraction time differences.

Note 4: One of the labs identified that there was a problem with testing on April 26, 27 with potential false positives on several people. These cases have been removed from the report retroactively pending reassessment.

Note 5: Community-based and healthcare worker cases have been separated into their own sub-categories as of May 03, 2020.