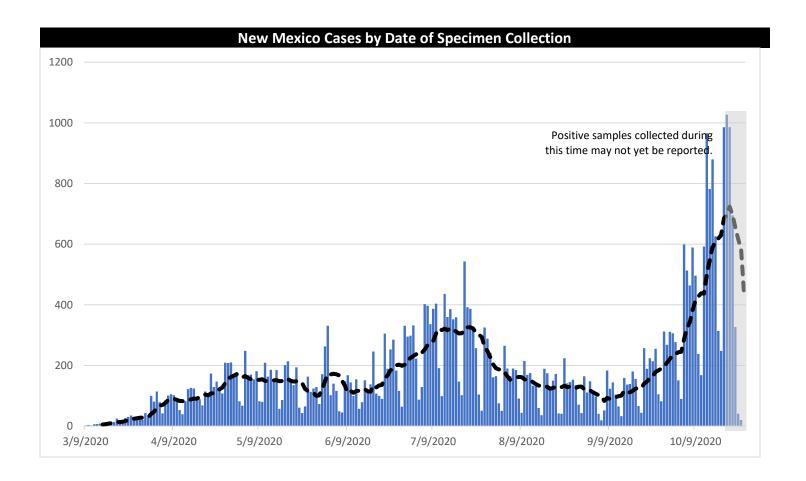
New Mexico COVID-19 Cases Update October 26th, 2020

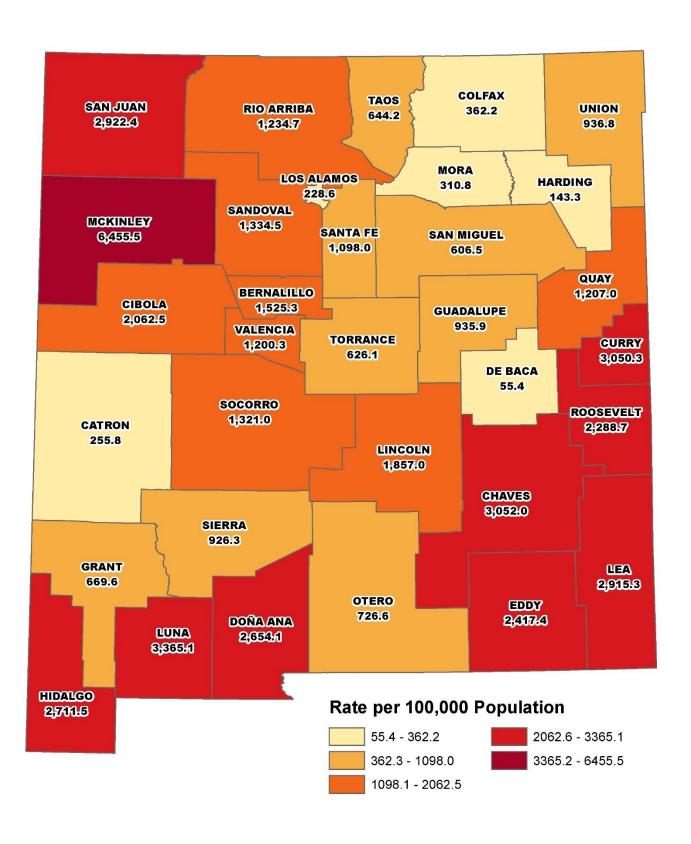
Unless stated otherwise, all data reported here exclude cases who are from out-of-state and cases who are detainees in Federal Immigration and Customs Enforcement (ICE) facilities.

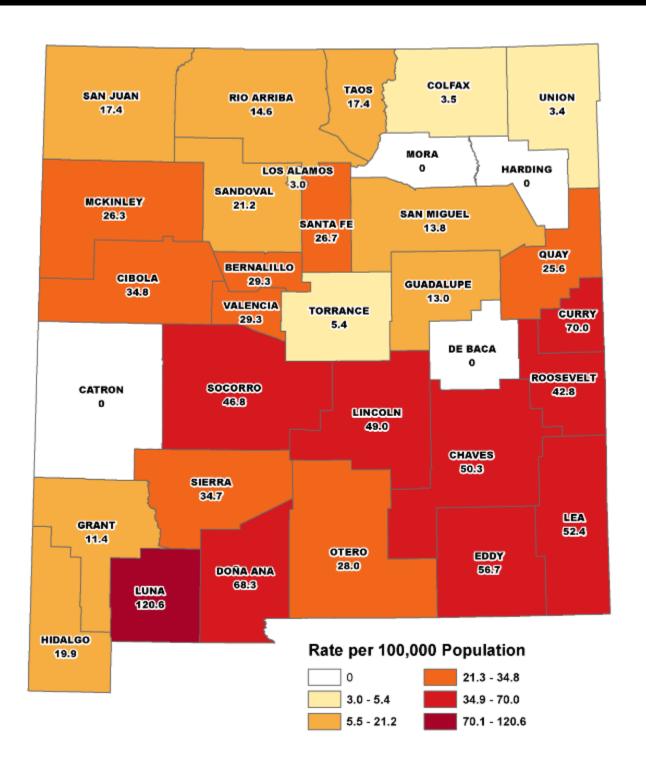
Total Cases	Cases in the Last 7 Days
42,586 ¹	5,239

SECTION 1: STATEWIDE AND COUNTY-LEVEL CASES

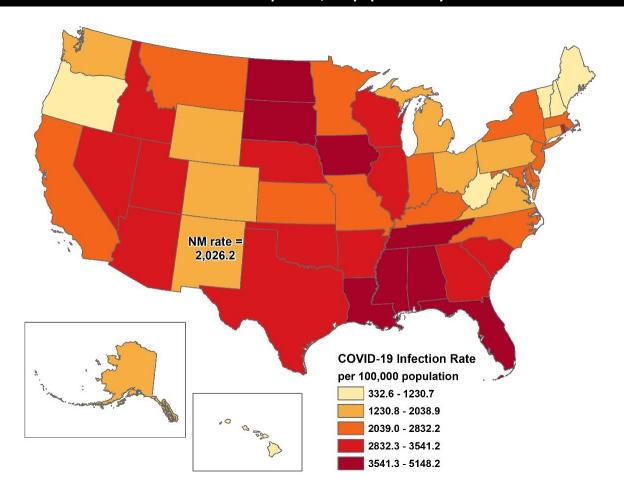


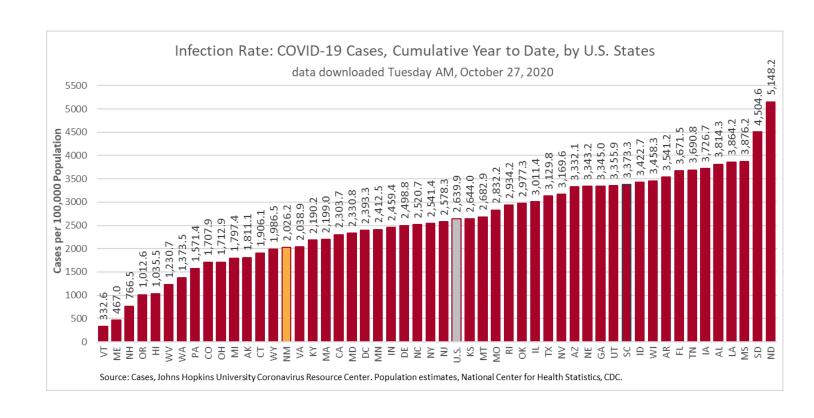
 $^{^{\}rm 1}$ Total cases, as reported on cv.nmhealth.org, include ICE detainees.



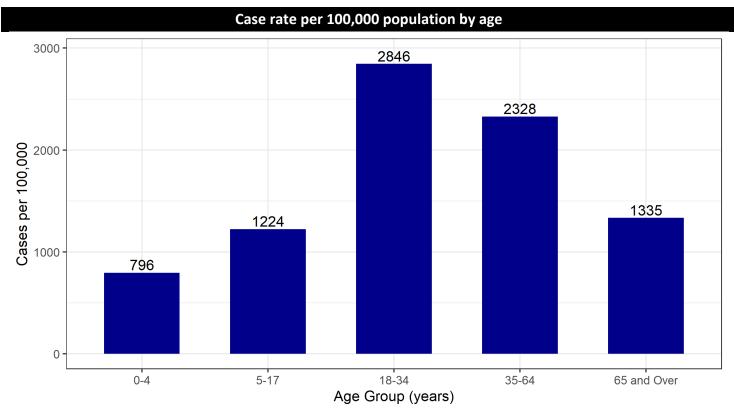


Cumulative infection rate per 100,000 population by U.S. States

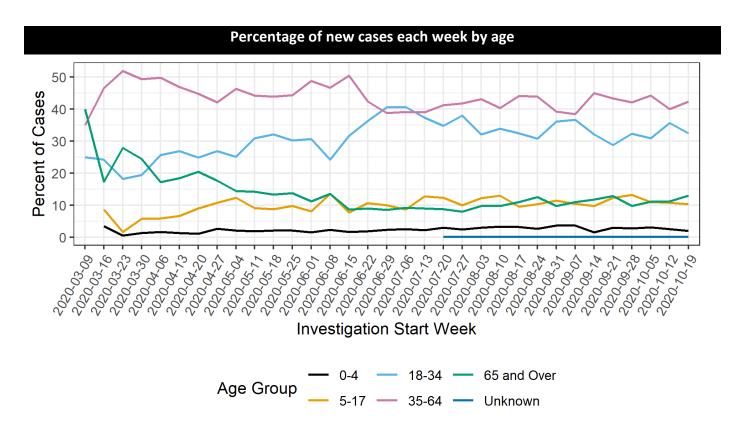




SECTION 2: AGE

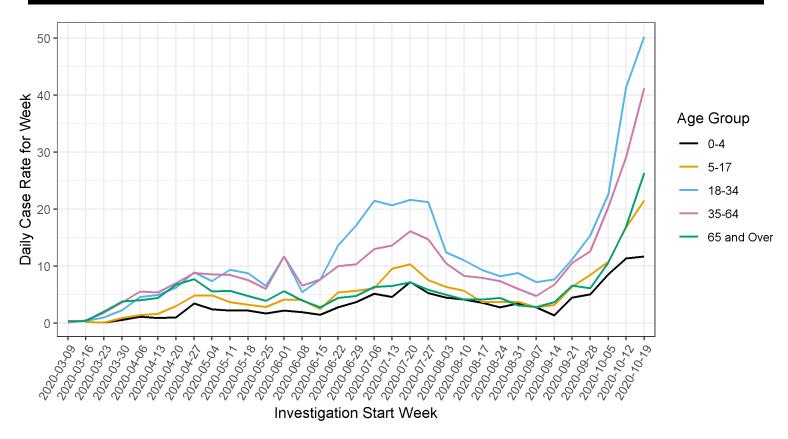


Five cases missing age information was excluded.



Five cases missing age information was excluded. For each investigation start week, the sum of the percentages for each age group is 100%





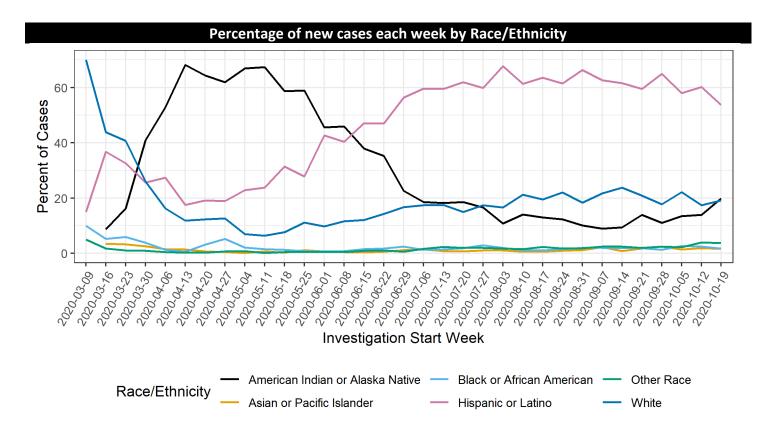
Five cases missing age information was excluded.

SECTION 3: RACE/ETHNICITY

Cumulative age-adjusted case rate per 100,000 population by race/ethnicity

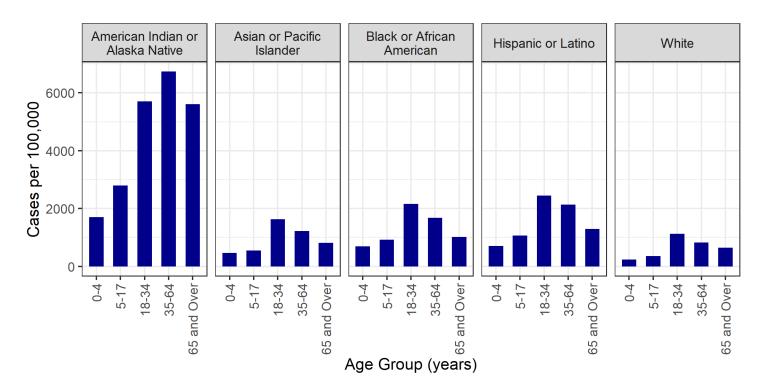
Race/Ethnicity	Case rate per 100,000
American Indian or Alaska Native	5,271.0
Asian or Pacific Islander	1,090.5
Black or African American	1,542.3
Hispanic or Latino	1,817.9
White	776.5

5,808 cases with missing Race/Ethnicity information and 5 cases missing age information were excluded. 660 cases who self-identified as Other Race were also excluded due to missing population estimates in New Mexico.

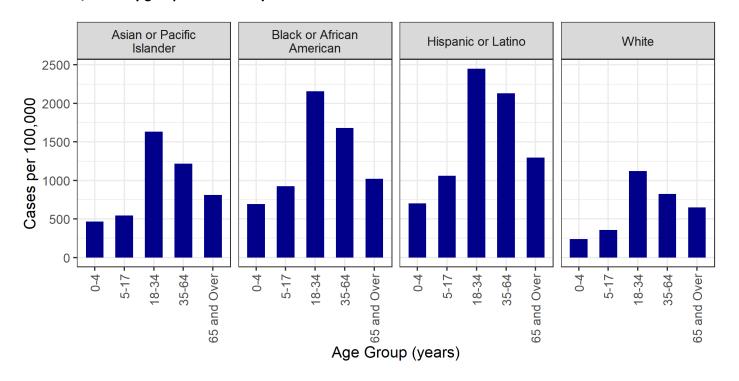


5,808 cases with missing Race/Ethnicity or admission date information were excluded. For each investigation start week, the sum of the percentages for each Race/Ethnicity group is 100%.

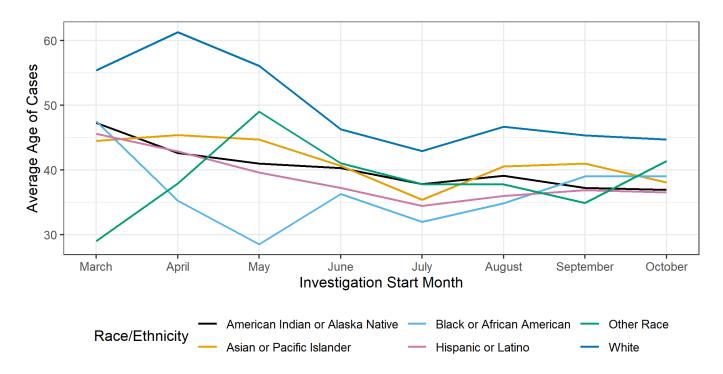
Cumulative case rate per 100,000 by Race/Ethnicity and age



The following figure excludes American Indian or Alaska Native to observe the case rate per 100,000 population of the other Race/Ethnicity groups more closely.



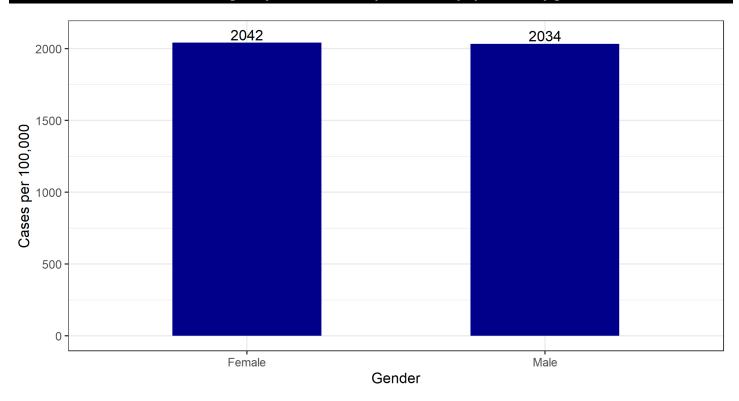
Average age by race/ethnicity over time



Five cases missing age information and 5,808 cases missing Race/Ethnicity information were excluded from the previous three graphs.

SECTION 4: GENDER

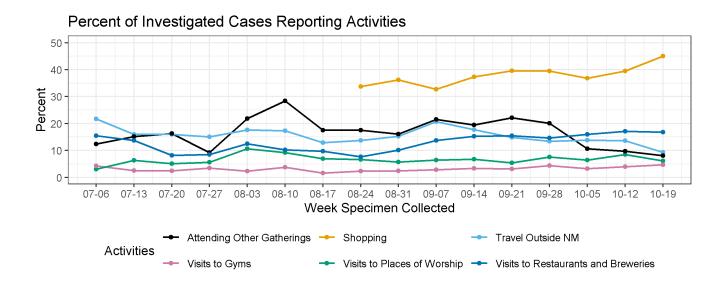
Cumulative age-adjusted case rate per 100,000 population by gender



390 cases with unknown or missing gender information and one case missing age information were excluded.

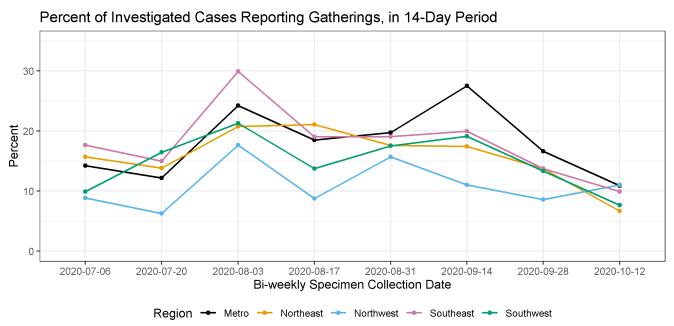
SECTION 5: POSSIBLE EXPOSURES AND ACTIVITIES

Percentage of cases participating in activities each week



Cases in correctional facilities and residents of long-term care facilities were excluded. Percentages are out of cases who were contacted and asked about their exposures 14 days prior to illness onset. Previous published reports did not always include 14 days prior to illness onset.

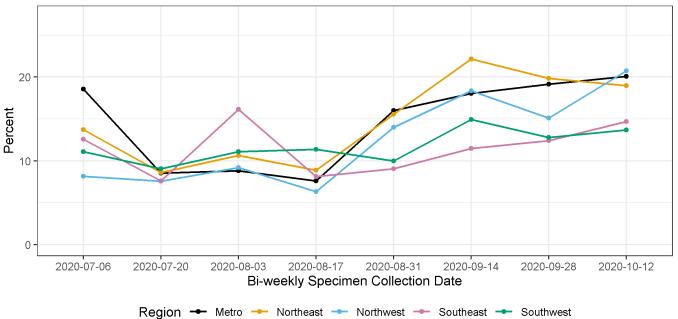
Percentage of cases participating in activities by region in a 14-day period



The percentage for each bi-weekly specimen collection date is based on the previous 14-days data.

Data from the most recent two-week interval will change as investigations continue.

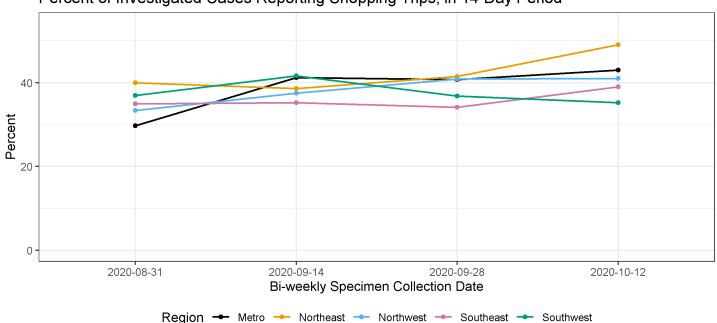
Percent of Investigated Cases Reporting Visits to Restaurants or Bars, in 14-Day Period



The percentage for each bi-weekly specimen collection date is based on the previous 14-days data.

Data from the most recent two-week interval will change as investigations continue.

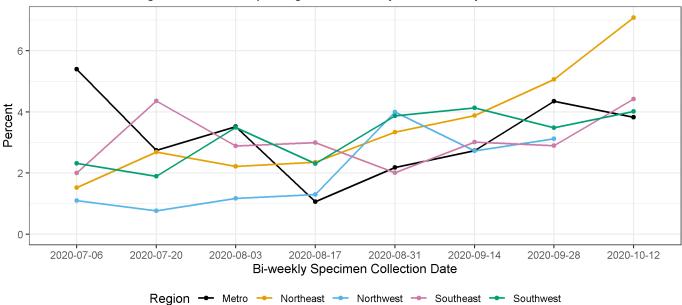
Percent of Investigated Cases Reporting Shopping Trips, in 14-Day Period



The percentage for each bi-weekly specimen collection date is based on the previous 14-days data.

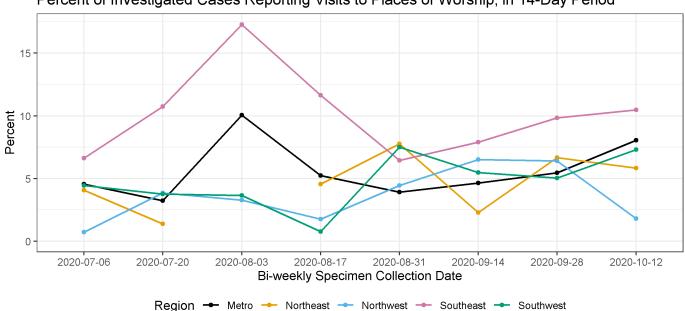
Data from the most recent two-week interval will change as investigations continue.

Percent of Investigated Cases Reporting Visits to a Gym, in 14-Day Period



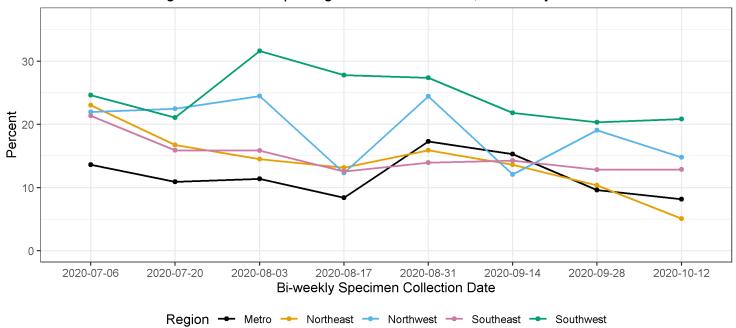
The percentage for each bi-weekly specimen collection date is based on the previous 14-days data. Data from the most recent two-week interval will change as investigations continue.

Percent of Investigated Cases Reporting Visits to Places of Worship, in 14-Day Period



The percentage for each bi-weekly specimen collection date is based on the previous 14-days data. Data from the most recent two-week interval will change as investigations continue.

Percent of Investigated Cases Reporting Out of State Travel, in 14-Day Period



The percentage for each bi-weekly specimen collection date is based on the previous 14-days data.

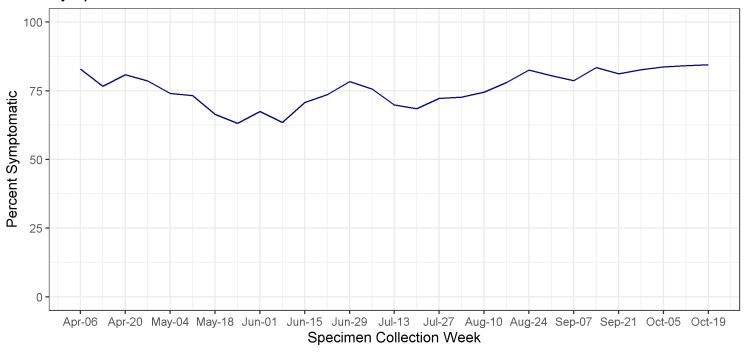
Data from the most recent two-week interval will change as investigations continue.

For specific activities reported by cases in each region, cases in correctional facilities and residents of long-term care facilities were excluded. Percentages are out of cases who were contacted and asked about their exposures 14 days prior to illness onset. Previous published reports did not always include 14 days prior to illness onset.

SECTION 6: SYMPTOMS

Percentage of cases reporting symptoms each week

Symptomatic Cases Over Time



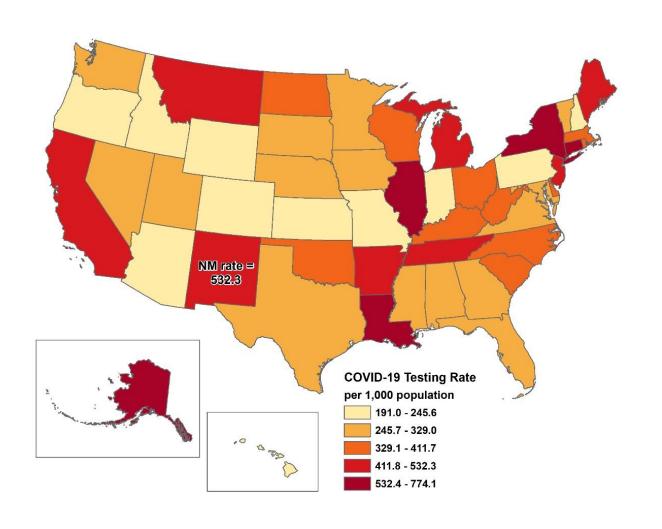
Percentage of specific symptoms reported by cases

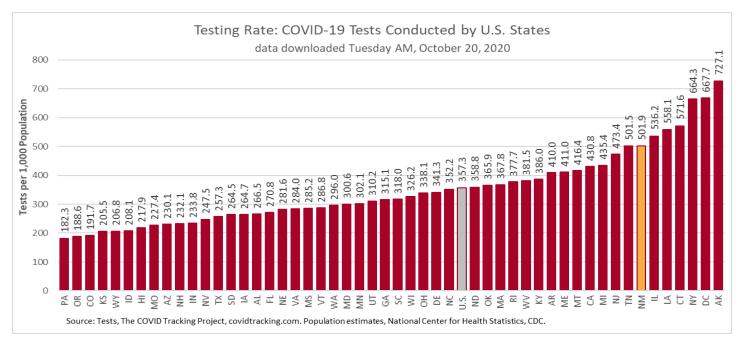
Symptom	Percent of Symptomatic Respondents
Cough	64%
Headache	63%
Fatigue	59%
Muscle Aches	55%
Loss of Taste or Smell	45%
Runny Nose	42%
Chills	42%
Sore Throat	38%
Loss of Appetite	37%
Fever	37%
Diarrhea	31%
Subjective Fever	31%
Shortness of Breath	29%
Nausea or Vomiting	25%
Abdominal Pain	15%

Data on "Loss of Taste or Smell" are from cases with positive tests on or after 8/3/2020, as this question was not asked consistently until August.

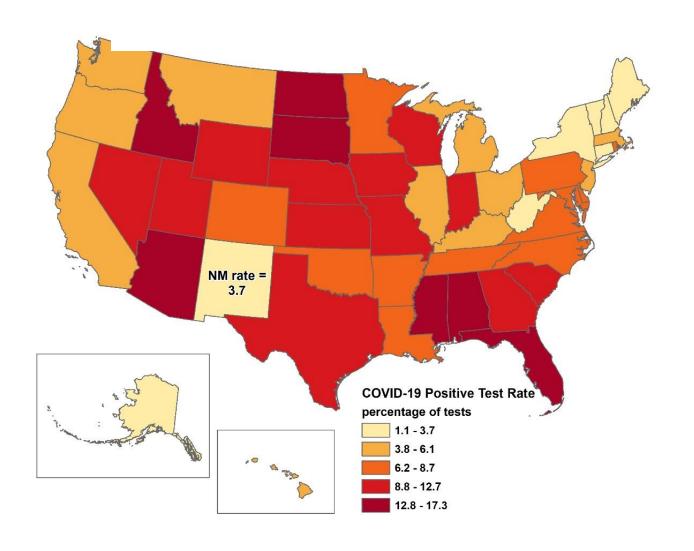
SECTION 7: TESTING

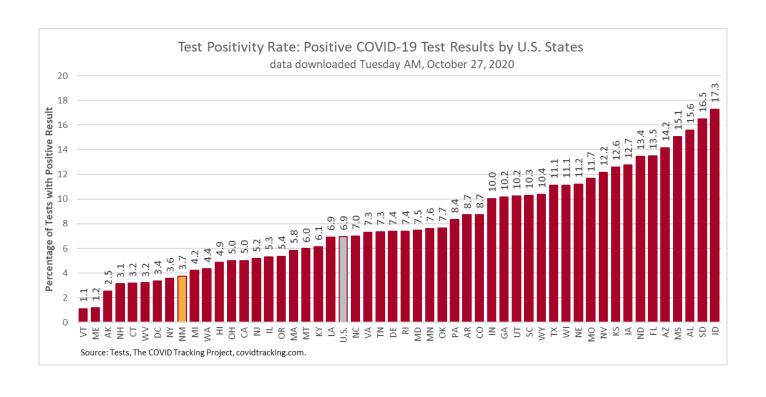
Testing rate by U.S. States





Test positivity by U.S. States





Data Sources

- COVID-19 data
 - New Mexico Electronic Disease Surveillance System (NM-EDSS), Infectious Disease Epidemiology Bureau, Epidemiology and Response Division, New Mexico Department of Health.
 - o Salesforce/MTX COVID-19 Case Investigation Platform.
- Population Estimates: University of New Mexico, Geospatial and Population Studies (GPS) Program.
- Age-adjustment: US 2000 Standard Population Weights

Data Notes

- New Mexico Electronic Disease Surveillance System (NM-EDSS). Disease incidence data are derived from reports of notifiable infectious diseases. NMDOH relies on health care providers, laboratories, hospitals, clinics, institutions and individuals to report suspected and confirmed notifiable infectious diseases in accordance with New Mexico Administrative Code 7.4.3.13. Under-reporting can occur due to of lack of awareness about reporting requirements or lack of compliance with those requirements. Not all cases of infectious diseases can be detected for various reasons including lack of access to health care services, lack of laboratory testing or concerns about confidentiality. Specific and standardized national case definitions are used to classify disease reports by case status.
- New Mexico Population Estimates. All population estimates apply to July 1 of 2018. Estimates include
 decimal fractions. The sum of population subgroup estimates may not exactly equal the overall state
 population estimate due to rounding error. Population estimates for previous years are occasionally
 revised as new information becomes available. When publishing trend data, always be sure that your rates
 for earlier years match current rates on NM-IBIS that have been calculated with the most up-to-date
 population estimates.
- Race/Ethnicity. Race/Ethnicity are reported as a single variable according to the selection of the case. Any case who is Hispanic is in the Hispanic category and all other races are non-Hispanic.
- Gender refers to a person's internal sense of being male, female, some combination of male and female, or neither male nor female. Sex refers to the biological anatomy of an individual's reproductive system, and secondary sex characteristics.
- Case rate per 100,000 population. A basic measure of disease-specific case frequency is a rate, which takes into account the number of cases and the population size. It is helpful in making public health decisions for a given population, relative to another population regardless of size.
- Age-adjusted case rate per 100,000 population. The age-distribution of a population (the number of
 people in particular age categories) can change over time and can be different in different geographic
 areas. The use of age-adjusted rates permits a valid comparison among populations. It ensures that the
 differences in cases from one population to another are not due to differences in the age distribution of
 the populations being compared.