New Mexico COVID-19 Cases Update November 9, 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
56,289 ¹	8,124



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



Sixteen cases missing age information were excluded.



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SECTION 3: RACE/ETHNICITY

Race/Ethnicity	Case rate per 100,000
American Indian or Alaska Native	6,012.7
Asian or Pacific Islander	1,379.1
Black or African American	1,915.6
Hispanic or Latino	2,358.6
White	1,040.9

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

10,013 cases with missing Race/Ethnicity information and 16 cases missing age information were excluded. 994 cases who self-identified as Other Race were also excluded due to missing population estimates in New Mexico.



10,013 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.





Sixteen cases missing age information and 10,013 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



579 cases with unknown or missing gender information and 16 cases 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.









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

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

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



Symptom	Percent of Symptomatic Respondents
Fever	36%
Subjective Fever	27%
Chills	42%
Muscle Aches	55%
Runny Nose	43%
Sore Throat	39%
Cough	64%
Shortness of Breath	30%
Nausea or Vomiting	26%
Headache	64%
Abdominal Pain	16%
Diarrhea	31%
Fatigue	61%
Loss of Appetite	39%
Loss of Taste or Smell	49%

Percentage of specific symptoms reported by cases

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.
 - 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.