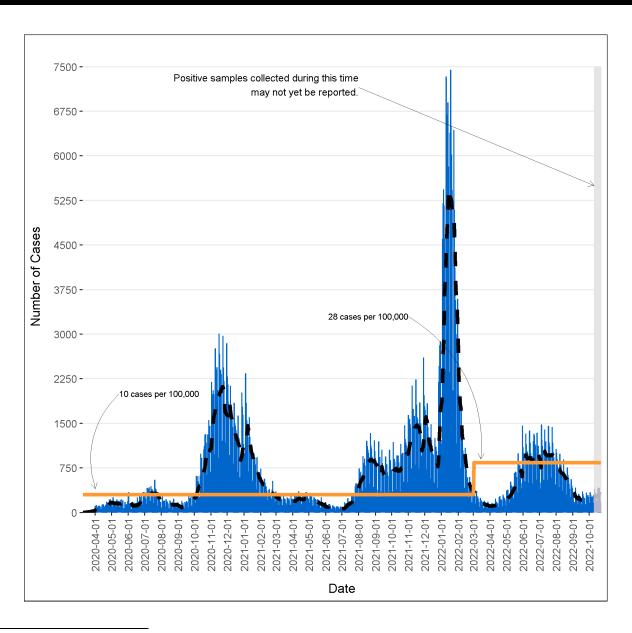
NEW MEXICO COVID-19 CASES UPDATE STATEWIDE AND COUNTY-LEVEL TRENDS October 24, 2022

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
625,236 ¹	2,310

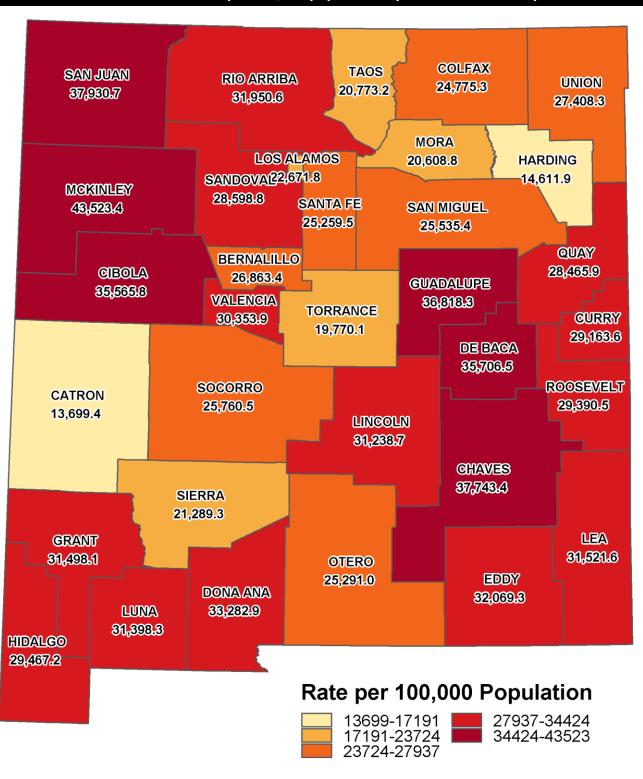
SECTION 1: STATEWIDE AND COUNTY-LEVEL CASES

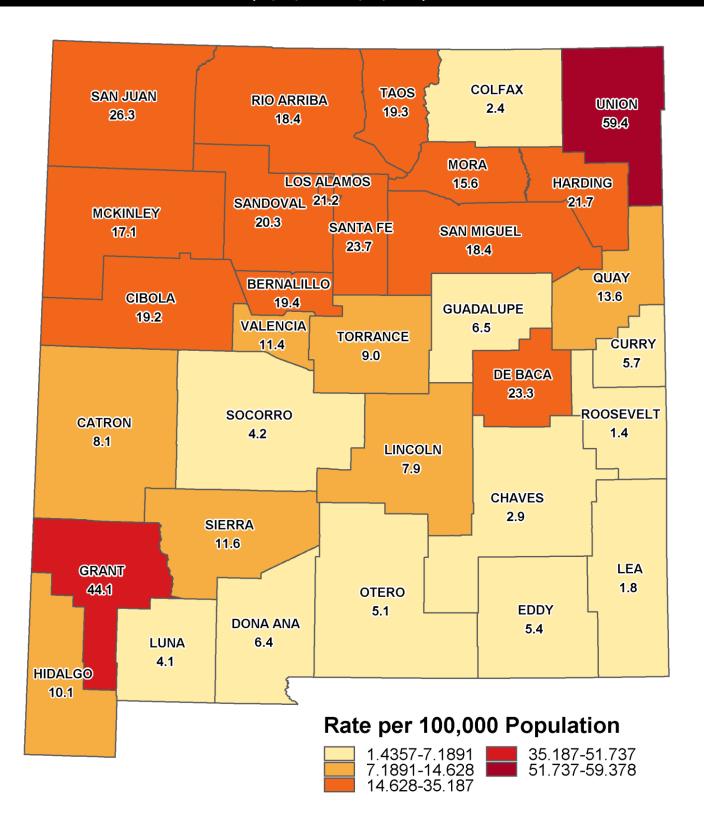
New Mexico cases by date of specimen collection with 7 day moving average



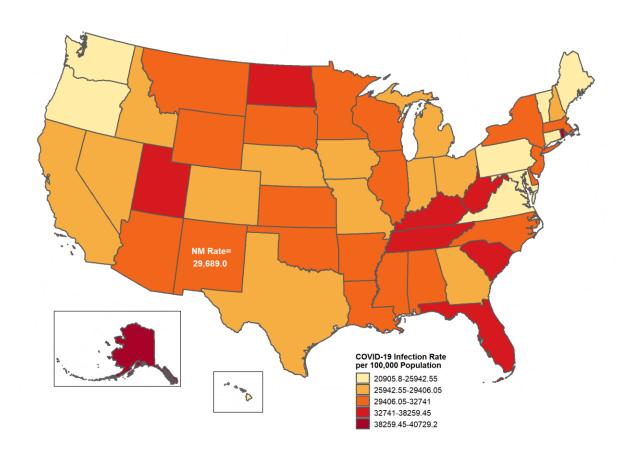
¹ Total cases, as reported on cv.nmhealth.org, include ICE detainees.

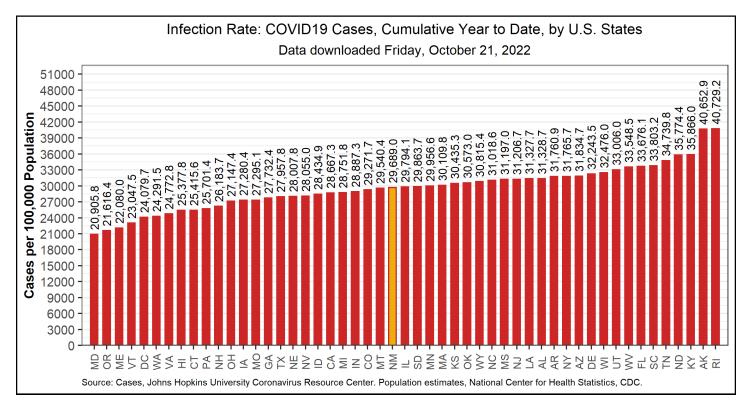
Cumulative case rate per 100,000 population by New Mexico County





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

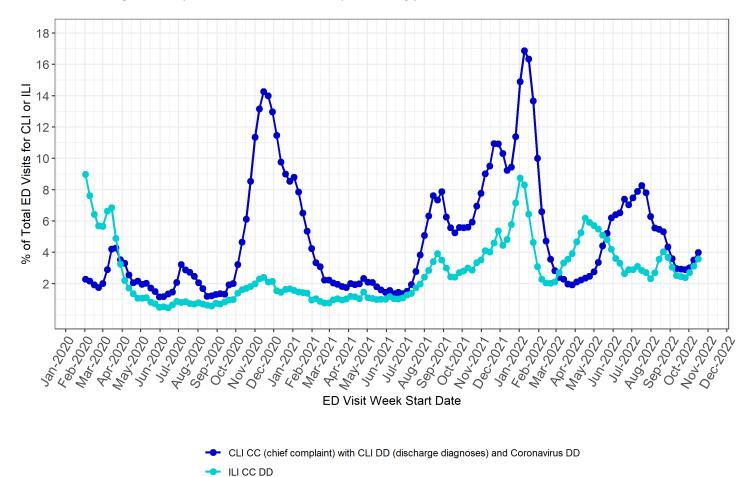




Note: Data updated 10/21/2022 and downloaded from https://coronavirus.jhu.edu/. For U.S. interstate comparisons, the methodology used here is slightly different than methodologies used in other NMDOH COVID-19 reports.

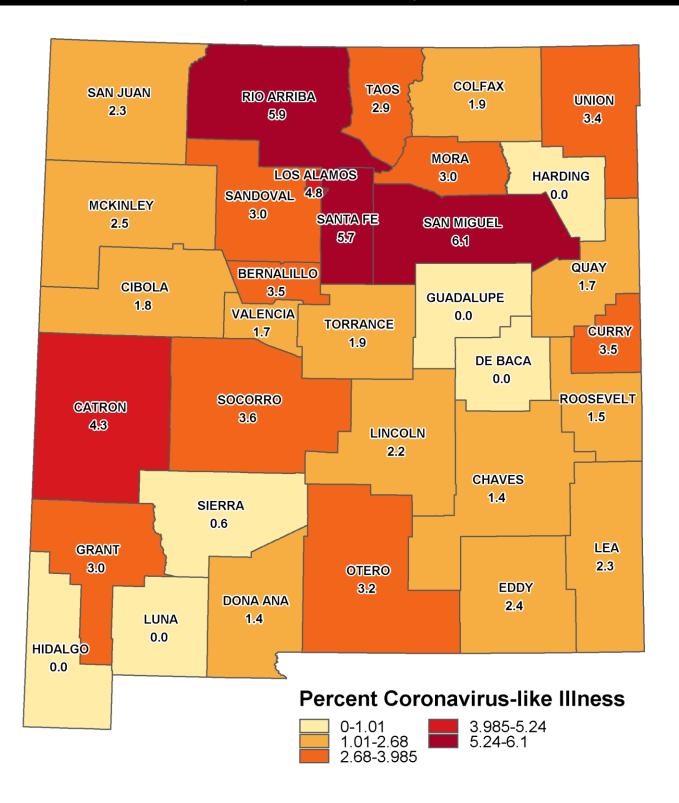
Percentage of all emergency department (ED) visits that were Coronavirus-like illness (CLI) and Influenza-like illness (ILI) related

These visualizations are populated from data in New Mexico's Syndromic Surveillance Database. Initial patient encounter information is usually received within 24 hours, but clinical documentation is continuously being updated as it is identified throughout the patient encounter and hospital coding process.



CLI CC with CLI DD and Coronavirus DD includes ED encounters with chief complaint consisting of fever and cough, shortness of breath, or difficulty breathing, while also including COVID-19 associated discharge diagnoses codes. The CLI definition excludes known influenza related ED visits coded with related influenza discharge diagnosis.

ILI CCDD includes ED encounters with chief complaint consisting of fever and cough, while also including ILI and influenza related discharge diagnoses.

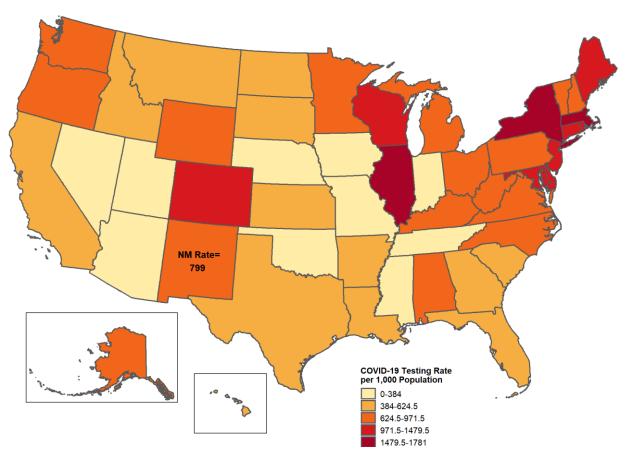


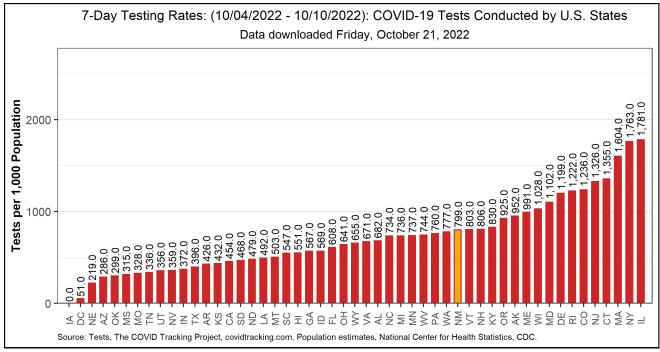
Cumulative number of cases and recovered cases by county

County	Cumulative cases	Cumulative Recovered
Bernalillo	182208	177279
Catron	484	460
Chaves	23812	23384
Cibola	8669	8354
Colfax	2668	2565
Curry	14553	14242
De Baca	656	640
Doña Ana	72508	71230
Eddy	18676	18279
Grant	8754	8482
Guadalupe	1254	1233
Harding	96	91
Hidalgo	1249	1229
Lea	21645	21211
Lincoln	6203	6086
Los Alamos	4268	4147
Luna	7671	7503
McKinley	30580	29640
Mora	940	908
Otero	15878	15596
Quay	2386	2308
Rio Arriba	12352	12015
Roosevelt	5848	5711
San Juan	47755	46448
San Miguel	7125	6964
Sandoval	41794	40736
Santa Fe	37423	36334
Sierra	2356	2258
Socorro	4428	4297
Taos	6737	6451
Torrance	3117	3024
Union	896	846
Valencia	22389	21815

SECTION 2: TESTING

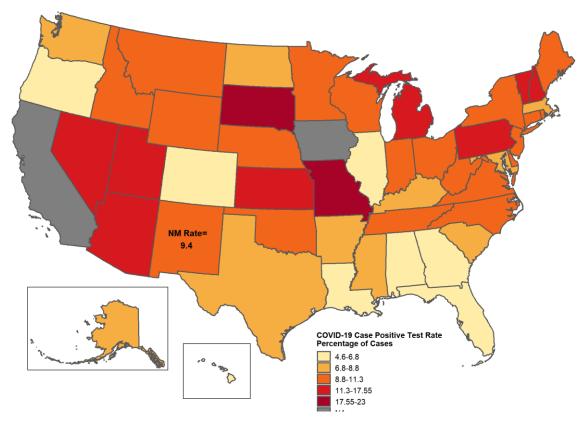
Testing rate by U.S. States

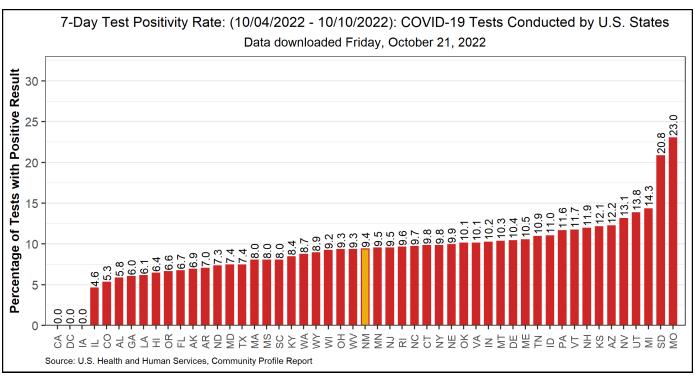




Note: Data downloaded 10/21/2022 and downloaded from https://beta.healthdata.gov/National/COVID-19-Community-Profile-Report/gqxm-d9w9. For U.S. interstate comparisons, the methodology used here is slightly different than methodologies used in other NMDOH COVID-19 reports.

Test positivity by U.S. States





Note: Data downloaded 10/21/2022 and downloaded from https://beta.healthdata.gov/National/COVID-19-Community-Profile-Report/gqxm-d9w9. For U.S. interstate comparisons, the methodology used here is slightly different than methodologies used in other NMDOH COVID-19 reports. States colored gray in the map are missing data this week.

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

- The data reported in this weekly update may not match the daily numbers that are reported in the New Mexico Department
 of Health (NMDOH) press releases and/or the NMDOH COVID-19 data dashboard. This may be due to variation in the date
 and time of data extraction from NM-EDSS, corrections after quality assurance review, and differences in the exclusion
 criteria.
- 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. Underreporting 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 2019. 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 ageadjusted 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.