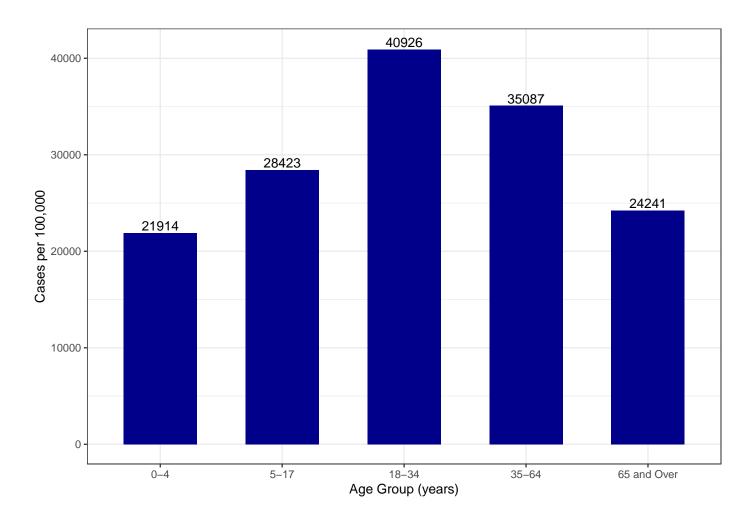
NEW MEXICO COVID-19 CASES UPDATE August 14, 2023

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 |
|-------------|--------------------------|
| 687,1311 | 643 |

Case rate per 100,000 population by age



53 cases with missing age information were excluded.

Daily case rate per 100,000 population by age

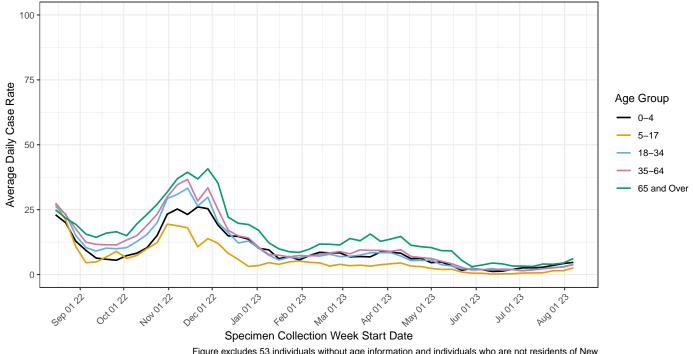


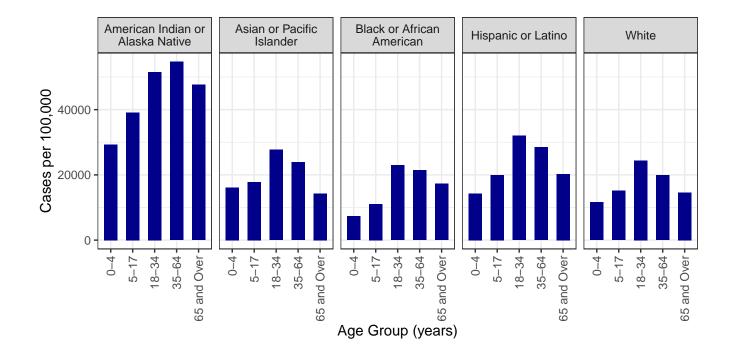
Figure excludes 53 individuals without age information and individuals who are not residents of New Mexico. Due to delays in reporting of positive lab results to NMDOH, data for the week of 2023–08–07 to 2023–08–13 are incomplete and subject to change.

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

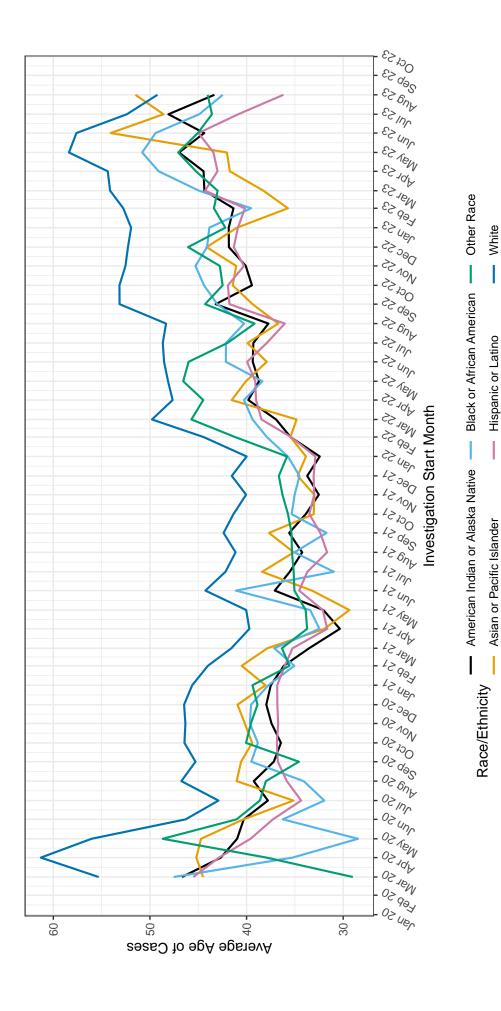
| Race/Ethnicity | Case rate per 100,000 |
|----------------------------------|-----------------------|
| American Indian or Alaska Native | 48,565 |
| Asian or Pacific Islander | 22,069 |
| Black or African American | 18,627 |
| Hispanic or Latino | 25,899 |
| White | 19,507 |

132,612 cases with missing Race/Ethnicity information and 53 cases missing age information were excluded. 32,283 cases who self-identified as Other Race were also excluded due to missing population estimates in New Mexico.

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

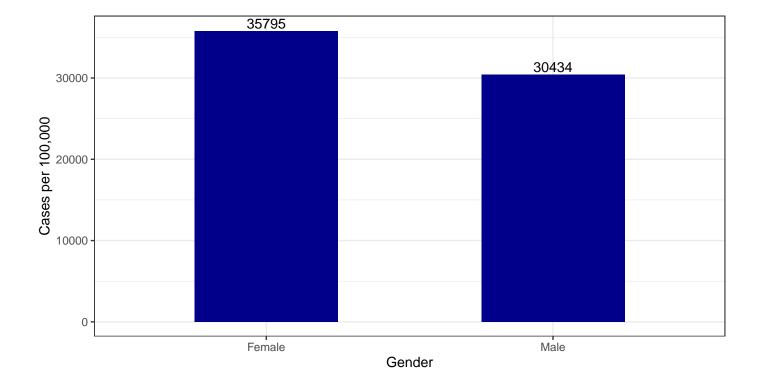


53 cases with missing age information and 132,612 cases with missing Race/Ethnicity information were excluded.



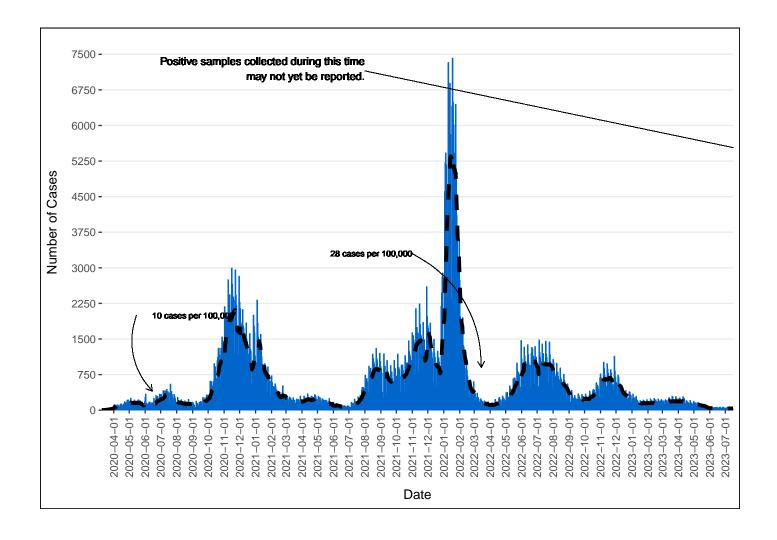


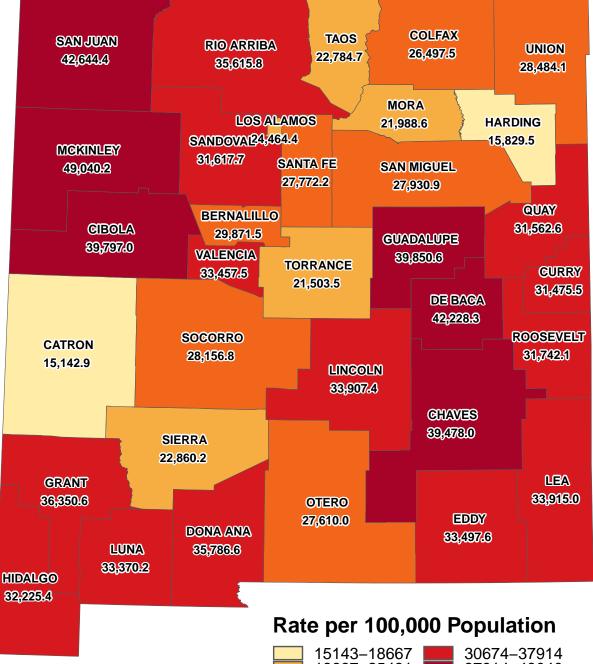
Cumulative age-adjusted case rate per 100,000 population by gender

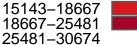


8,968 cases with unknown or missing gender information and 53 cases missing age information were excluded.

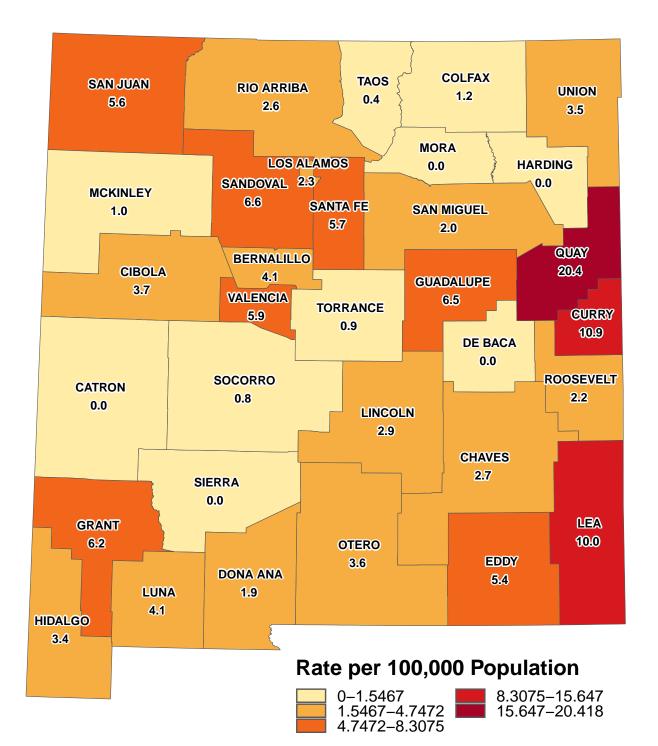
New Mexico cases by date of specimen collection with 7 day moving average





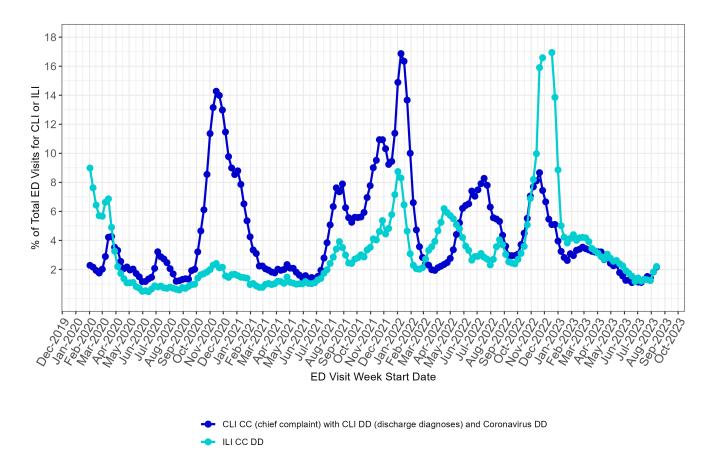


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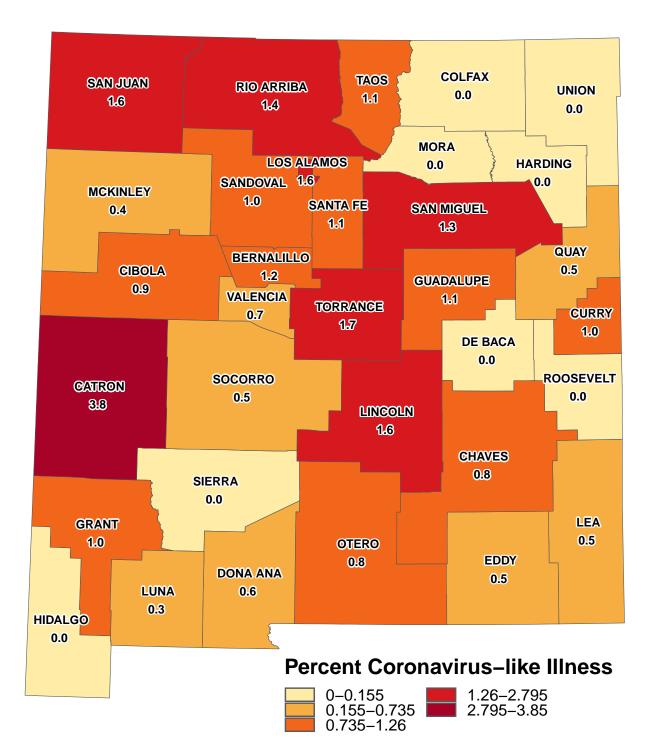
Percentage of all emergency department (ED) visits that were Coronavirus-like illness (CLI) and Influenza-like illness (ILI) related

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.

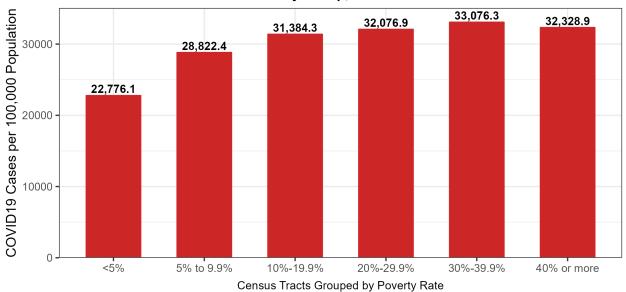


CLI CC with CLI DD and Coronavirus DD includes ED encounters with chief complaint consisting of fever and cough, shortness of breath, or difficulty breathing, while also including COVID-19 associated discharge diagnoses codes. The CLI definition excludes known influenza related ED visits coded with related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

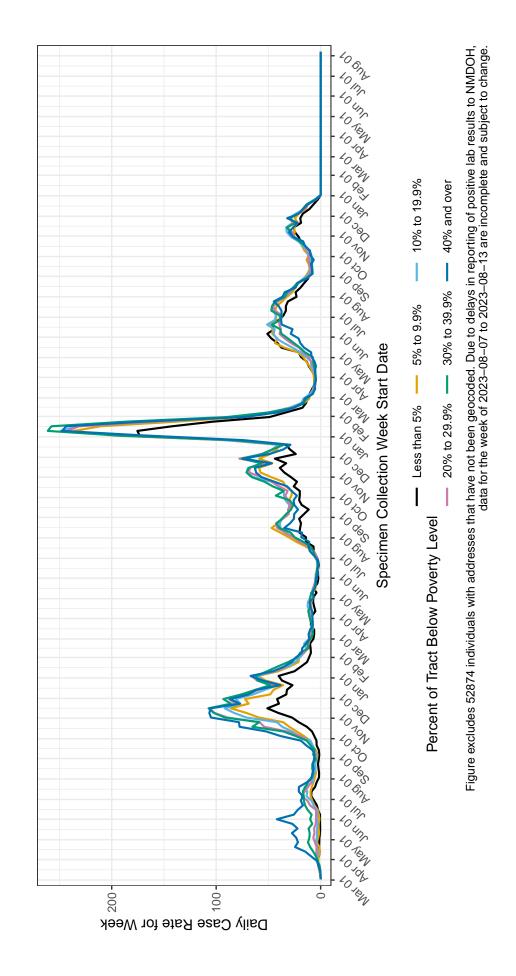
ILI CCDD includes ED encounters with chief complaint consisting of fever and cough, while also including ILI and influenza related discharge diagnoses.



Case rate per 100,000 population by census tract below poverty level

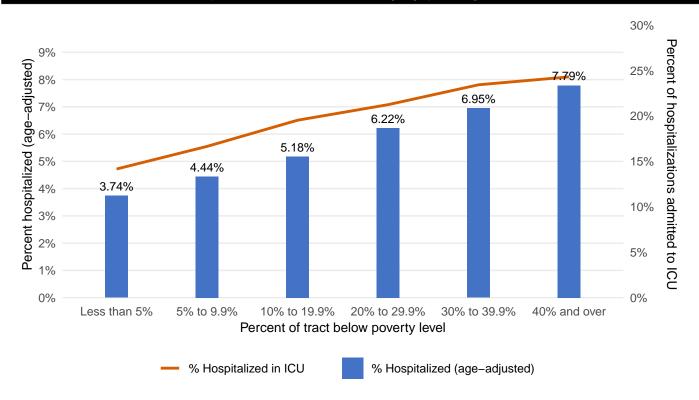


COVID-19 Infection Rates by Census Tract Poverty Group, New Mexico

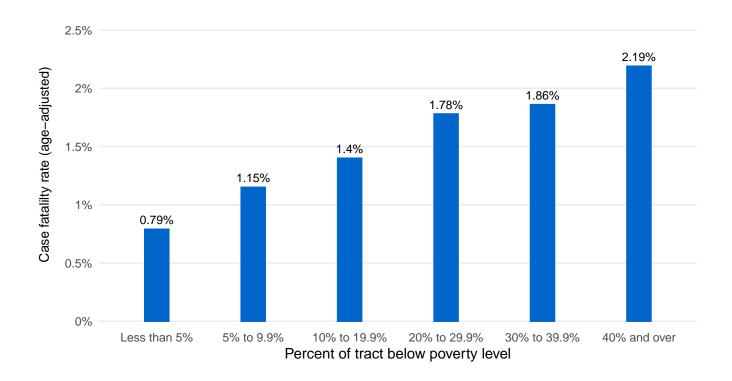




Hospitalizations and ICU stay by poverty level



Case fatality rate by poverty level



- 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. 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 2021. 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.