Respiratory Illness Surveillance Report

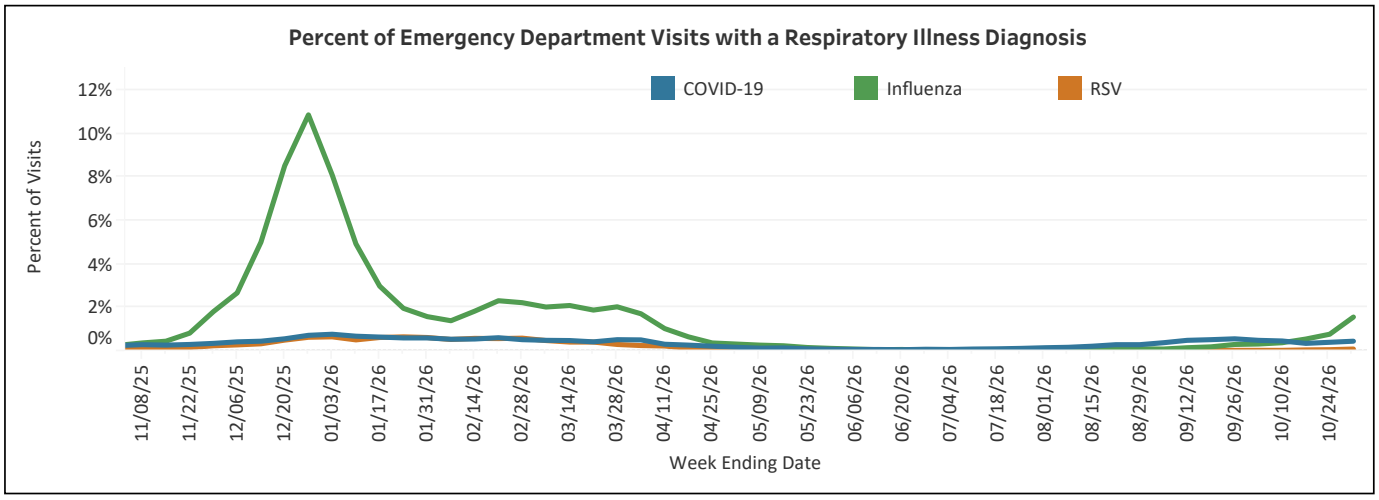
Week Ending October 31, 2026 (MMWR 43)

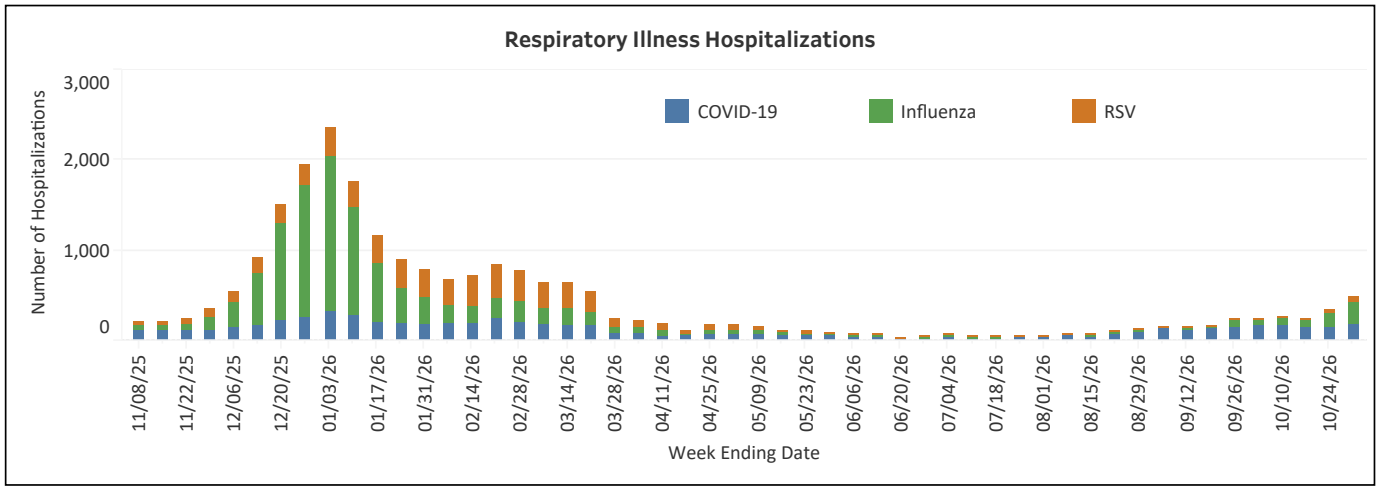
Report Highlights

- Seasonal influenza activity continues to rise and is currently higher than levels observed at this time last year.
- Influenza case counts, emergency department visits, outpatient visits, and test positivity continue to increase. Influenza-associated hospitalizations are also rising, with the highest burden primarily among adults aged 65 years and older.
- COVID-19-associated emergency department visits and hospital admissions increased since last week. COVID-associated hospitalizations continue to be mostly among persons 65 years and older. COVID-19 wastewater viral activity levels are moderate.
- RSV activity is low though hospital admissions increased since last week. RSV-associated hospitalizations are primarily among persons 0-4 years of age.
- Respiratory outbreaks recently reported in long-term care facilities were due to COVID-19 and influenza, while those in schools were due to influenza.
- Test positivity continues to be elevated for parainfluenza and rhinovirus/enterovirus.

Respiratory Trends

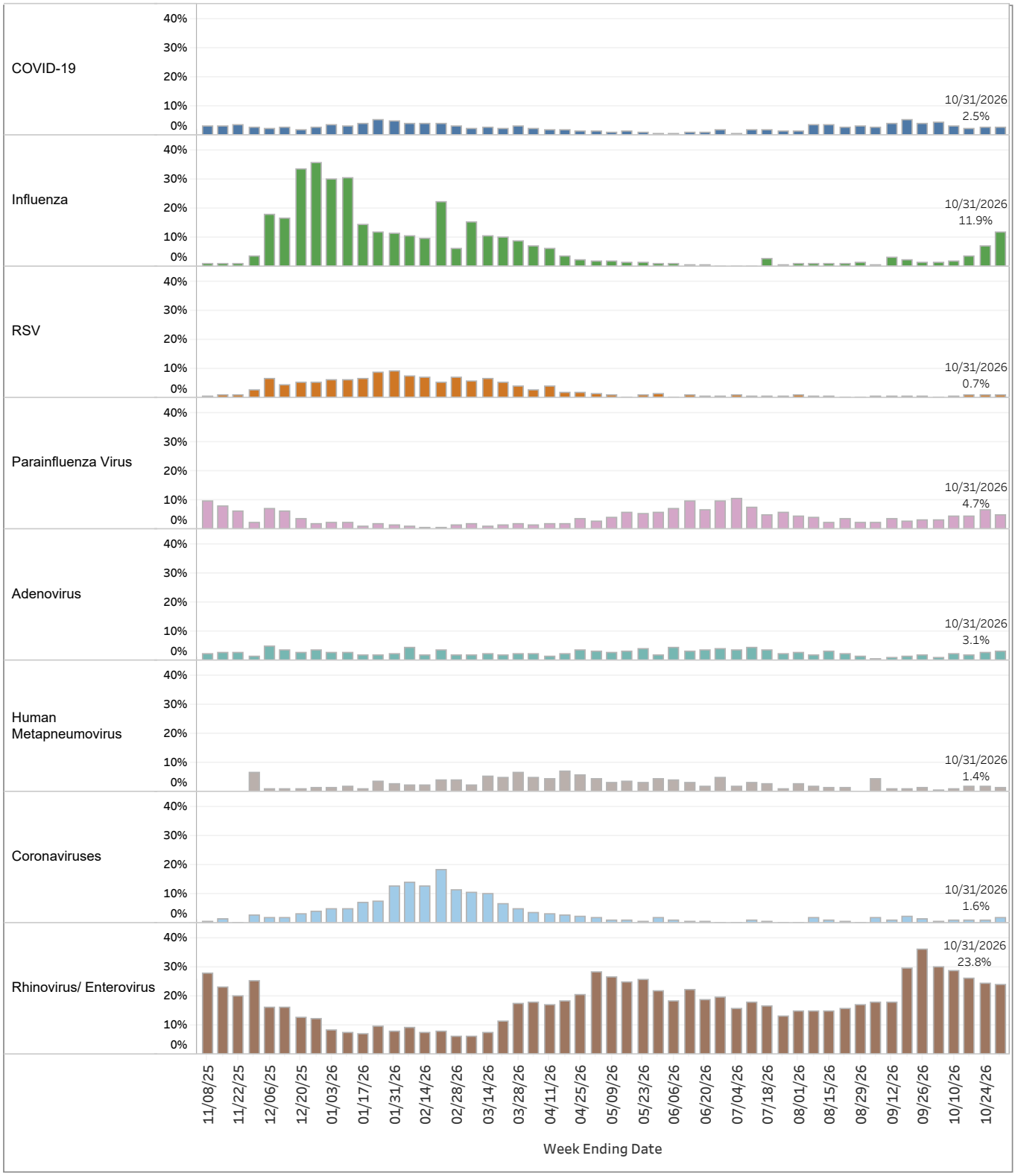
Data from the NJDOH Syndromic Surveillance System (EpiCenter) shows the weekly percent of emergency department visits and visits that resulted in hospitalizations associated with COVID-19, Influenza, and/or RSV diagnoses codes reported by 79 New Jersey emergency departments.





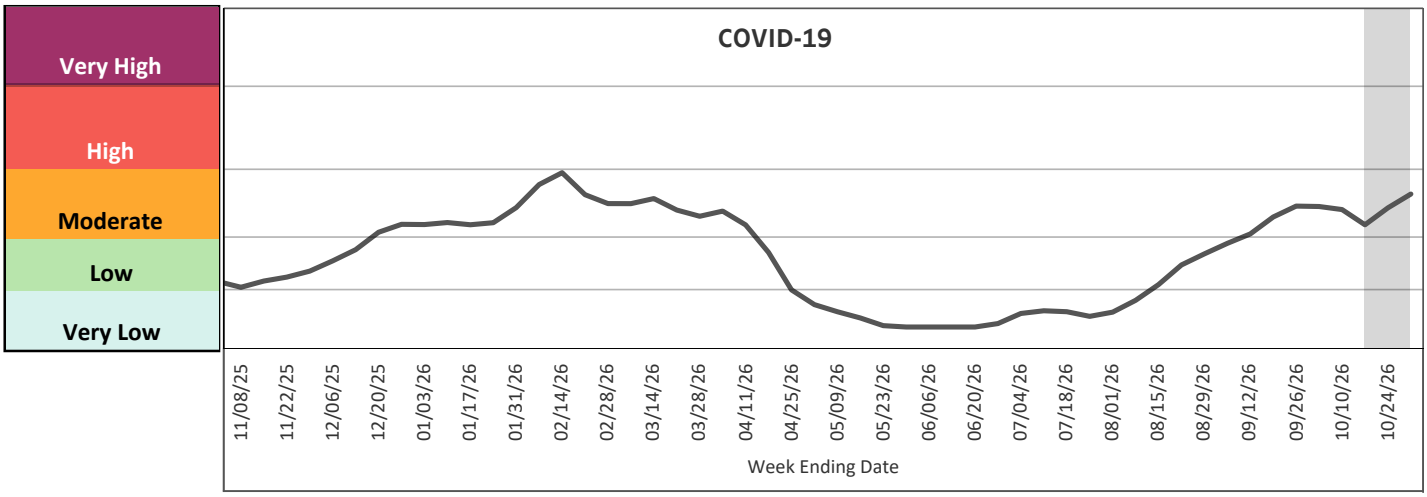
Respiratory Virus Test Positivity

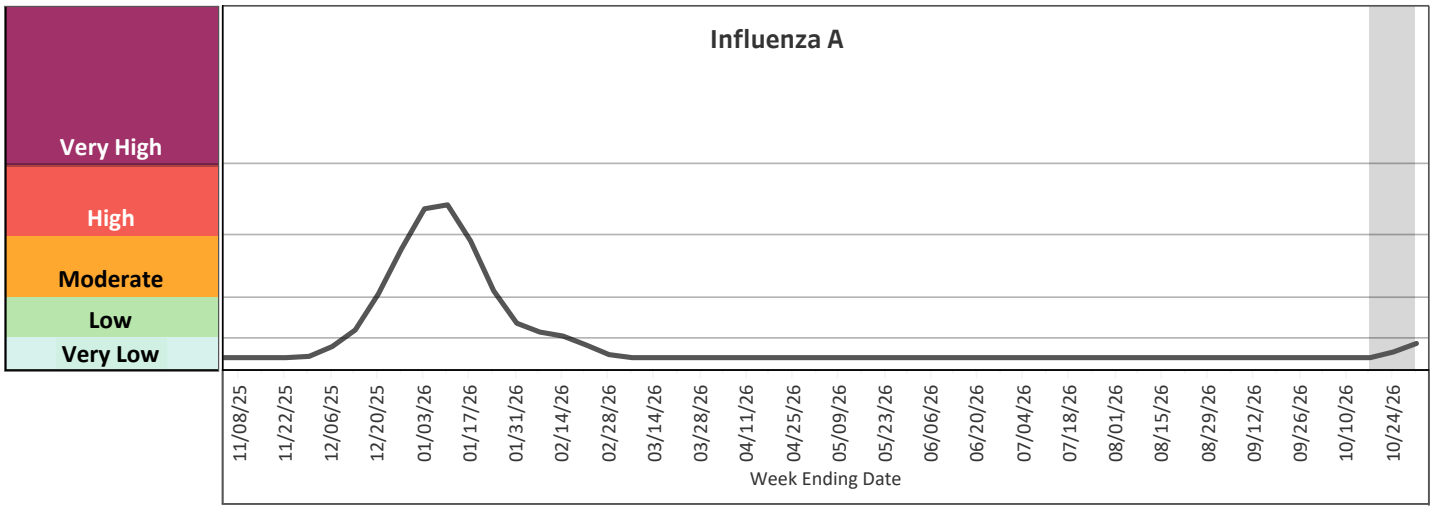
The National Respiratory and Enteric Virus Surveillance System (NREVSS) is a laboratory-based surveillance system and participating laboratories report the total number of tests performed and the total positive tests for respiratory viruses, including adenovirus, human metapneumovirus, and parainfluenza. Information about the CDC NREVSS system can be found at: https://www.cdc.gov/nrevss/php/participating-labs/index.html

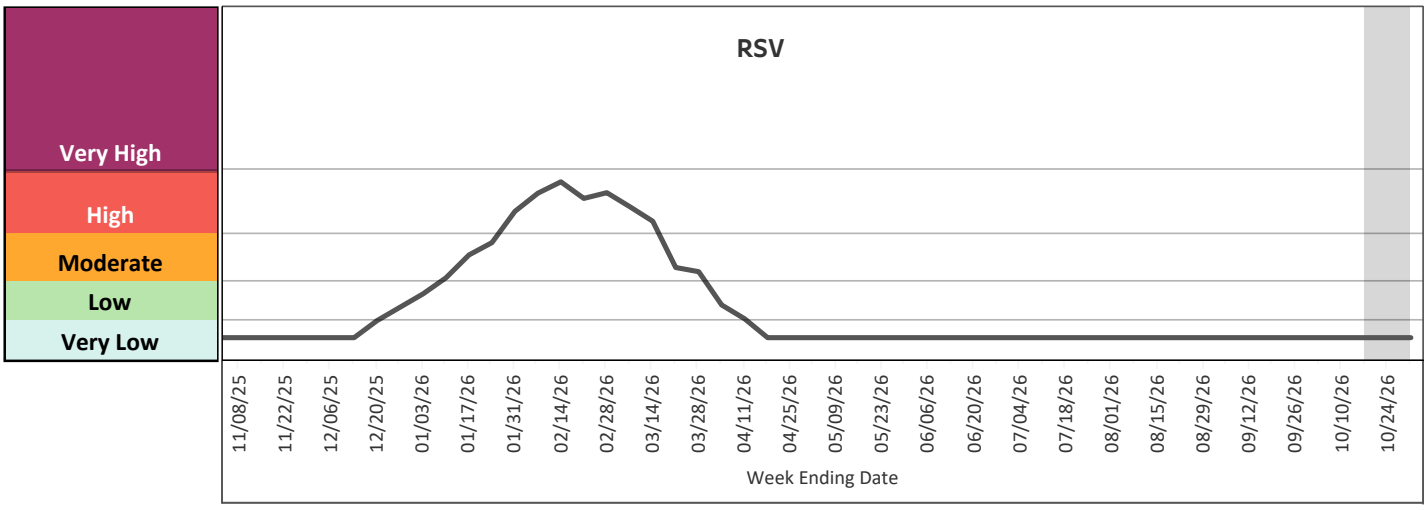


Wastewater Surveillance

Wastewater viral activity levels (WVALs) compare current levels of COVID-19, influenza, and RSV in wastewater to low-level baselines. Data from the most recent two weeks may be incomplete due to delays in reporting. These data are subject to change and are indicated by the gray shading. Additional information on WVALs can be found at: https://www.cdc.gov/nwss/data-methods.html.

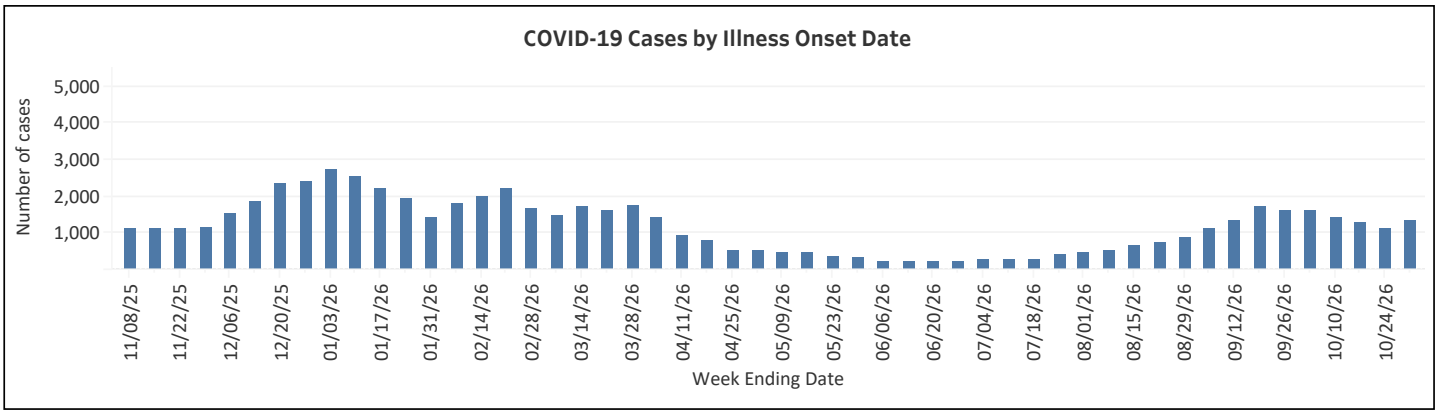






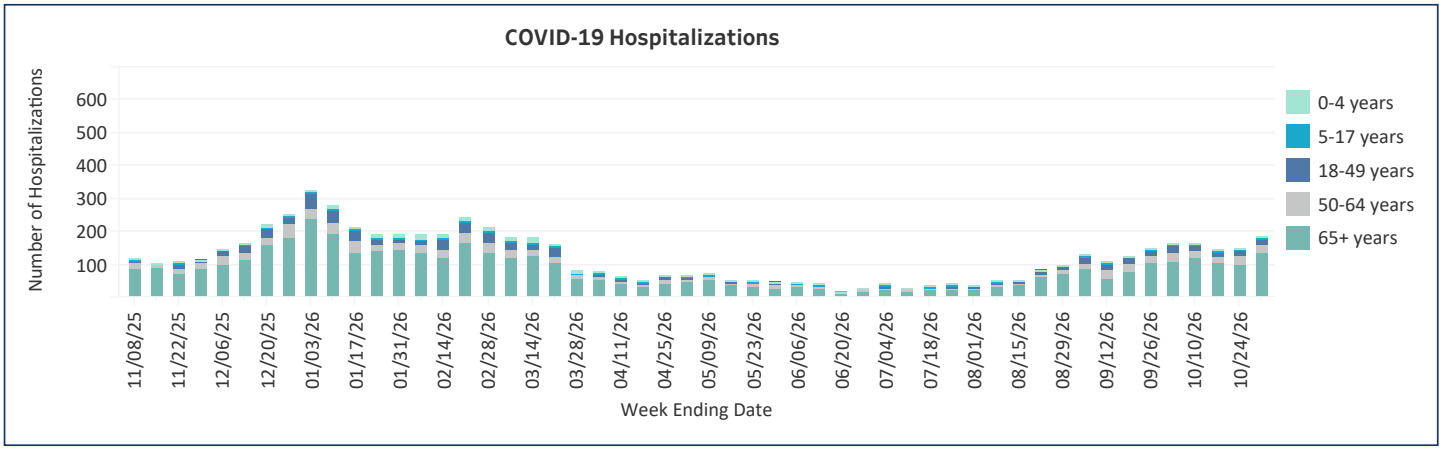
COVID-19: Cases

Data from the NJDOH Communicable Disease Reporting and Surveillance System (CDRSS) is used to report weekly COVID-19 cases. COVID-19 case data is based on PCR and antigen tests.



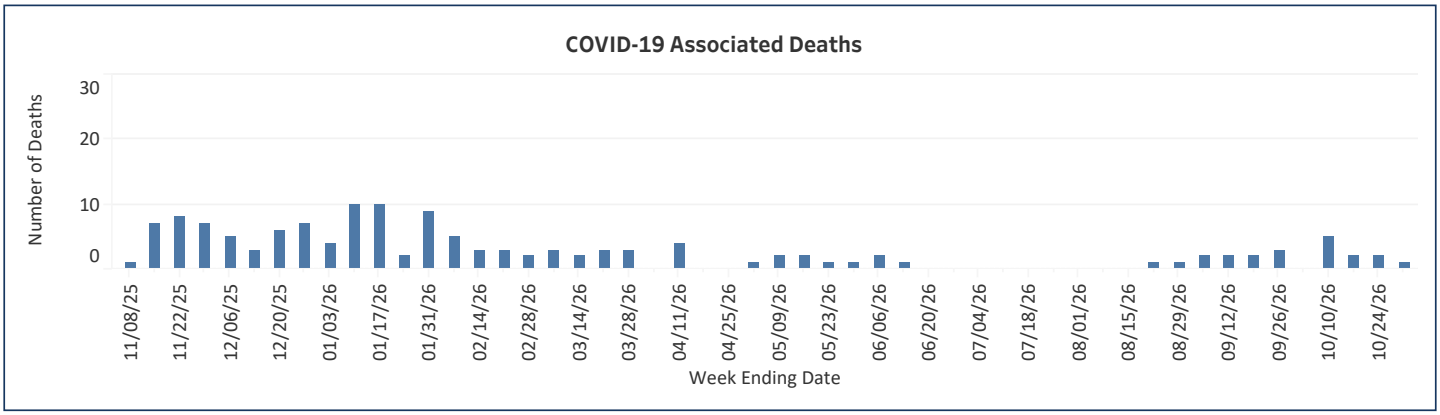
COVID-19: Hospitalizations

Data from the National Healthcare Safety Network (NHSN) shows the number of hospitalizations with COVID-19 diagnosis by age group.



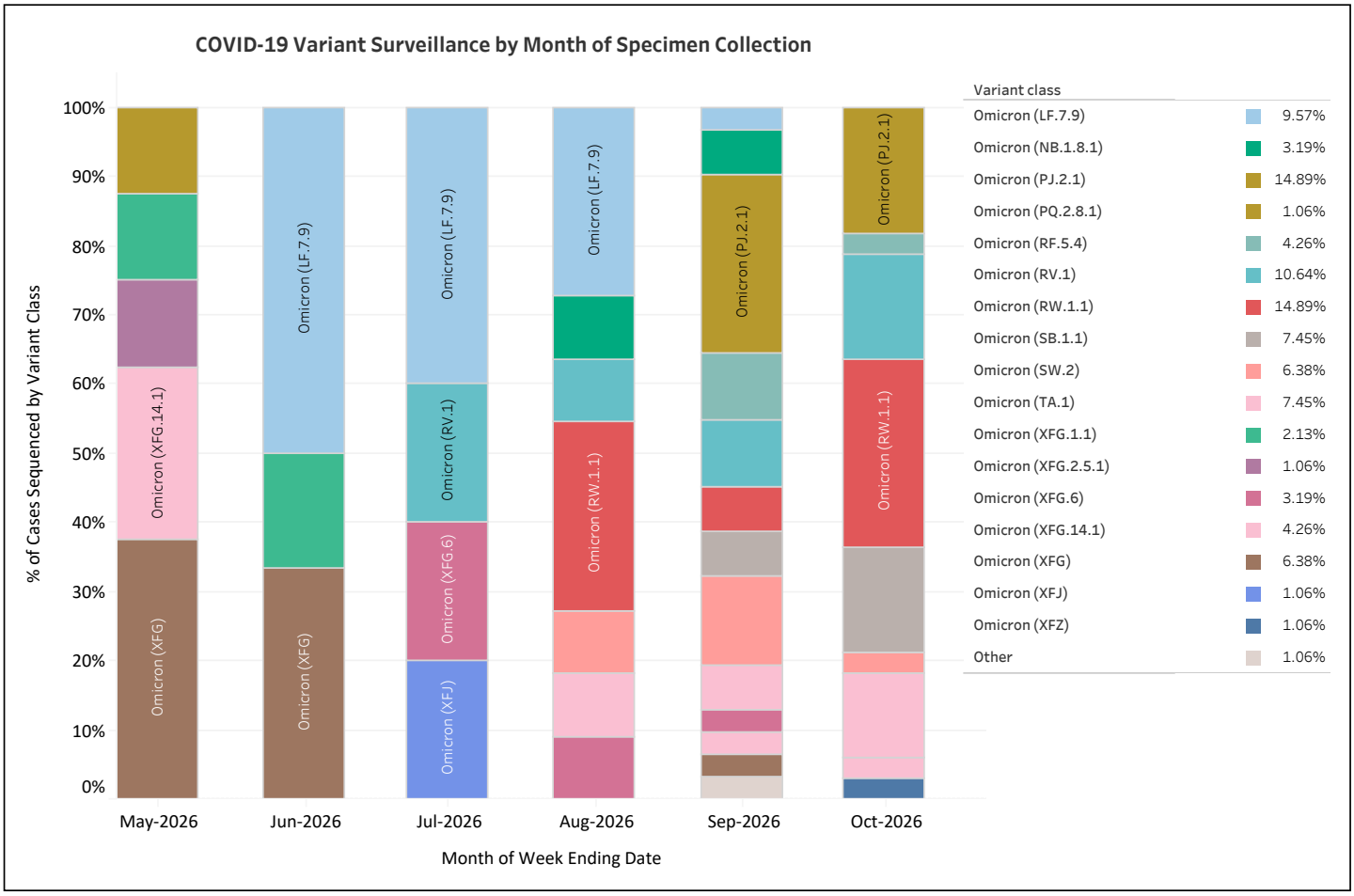
COVID-19: Deaths

Data from CDRSS and the NJ Electronic Death Registration System (EDRS) are used to provide information on the number of COVID-19 associated deaths. COVID-19 associated deaths are based on the CSTE Revised COVID-19 associated Death Classification Guidance for Public Health Surveillance Programs.



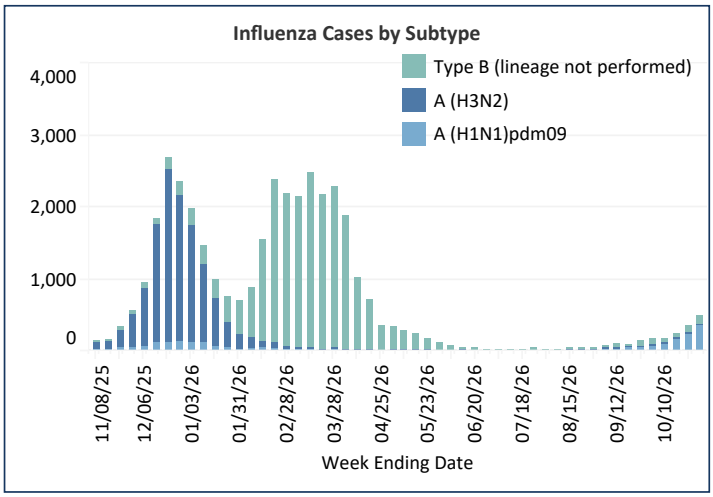
COVID-19: Variants

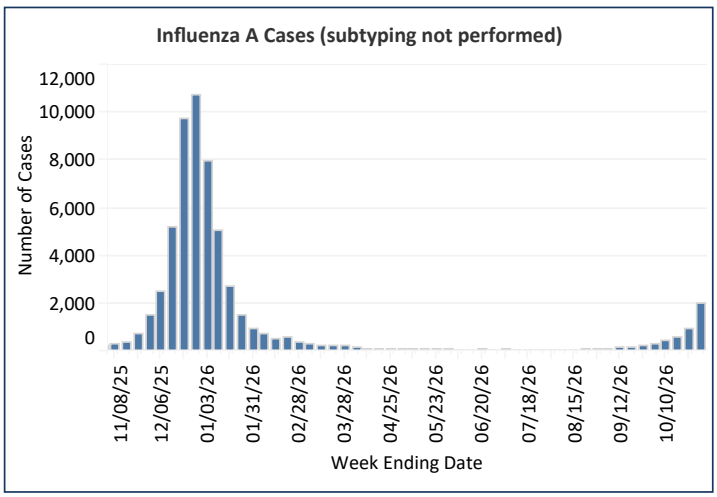
The chart depicts a summary of COVID-19 variant surveillance by month of specimen collection. Data includes sequencing results reported by selected commercial Labs and the NJ Public Health and Enviromental Laboratories that have been submitted for surveillance purposes. Percentages represent the proportion of specimens sequenced with the specified variant lineage. For additional information on variant classification, see CDC SARS-CoV-2 Variant Classifications and Definitions:
https://covid.cdc.gov/covid-data-tracker/#variants-genomic-surveillance



Influenza: Cases

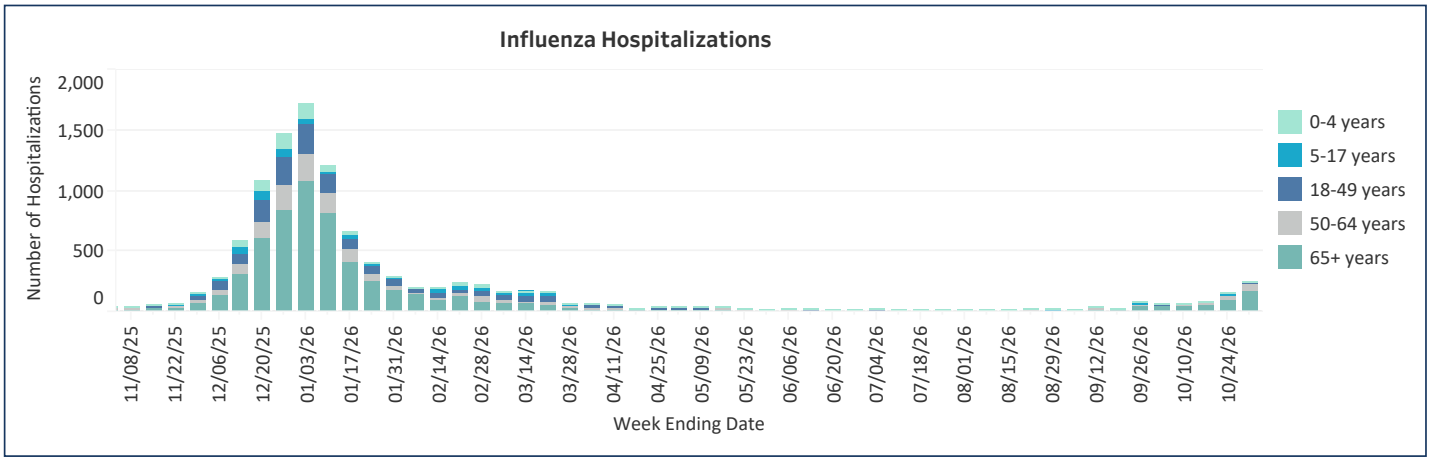
Data from CDRSS is used to report weekly influenza cases. Influenza case data is based on PCR and antigen tests.





Influenza: Hospitalizations

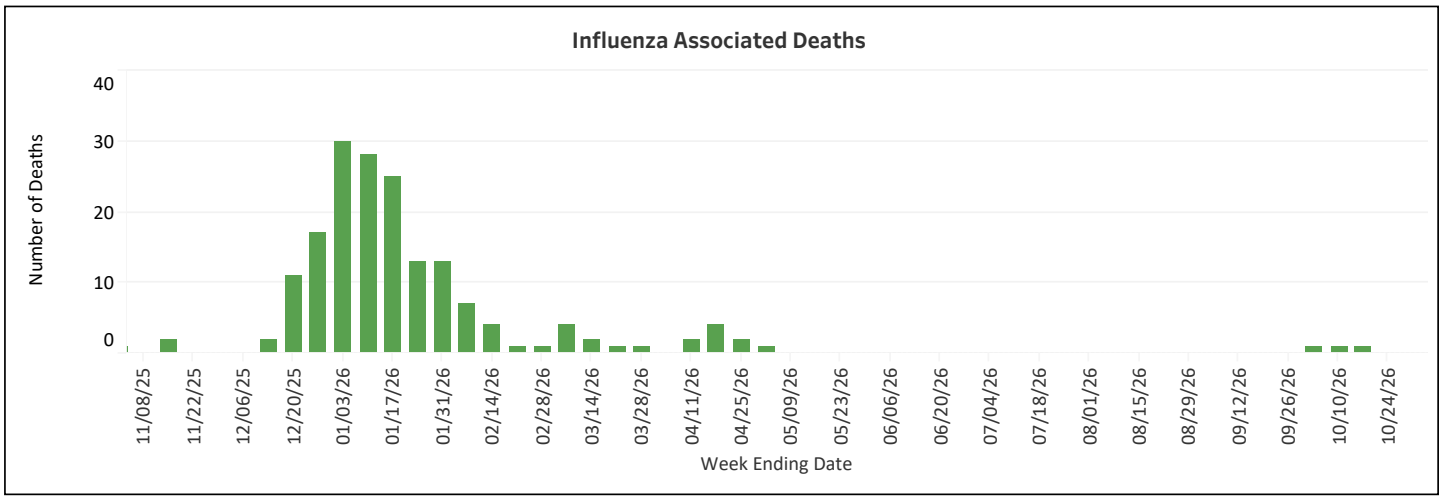
Data from the National Healthcare Safety Network (NHSN) shows the number of hospitalizations with an influenza diagnosis by age group.



Influenza: Deaths

Data from CDRSS and EDRS is used determine the number of adult influenza-associated deaths reported weekly.

The table includes severe and fatal influenza-associated pediatric cases reported to NJDOH compared to national pediatric influenza deaths for a 5-year period. An influenza-associated pediatric death is defined as a death resulting from a clinically compatible illness with laboratory confirmed influenza. Severe illness is defined as admission to an intensive care unit for an influenza-related illness.

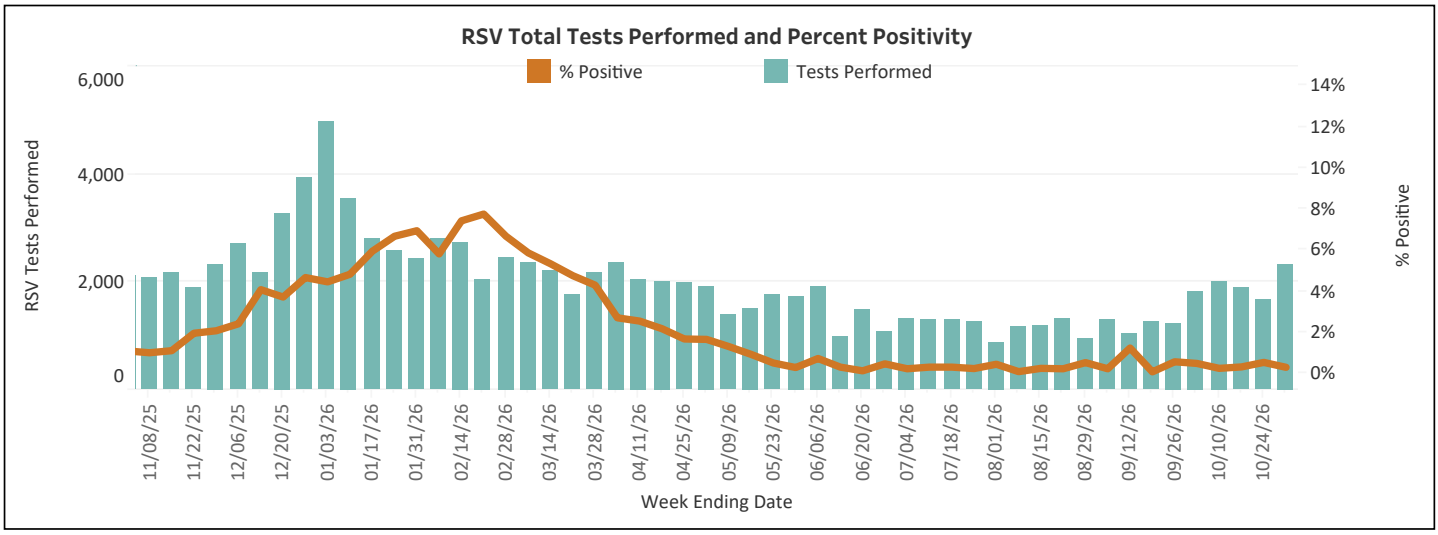


Pediatric Influenza Deaths and Severe Cases

Influenza Season	US (fatal)	NJ (fatal)	NJ (severe cases)
2022-2023	187	4	95
2023-2024	210	2	100
2024-2025	297	5	149
2025-2026	199	6	135
2026-2027	1	0	3

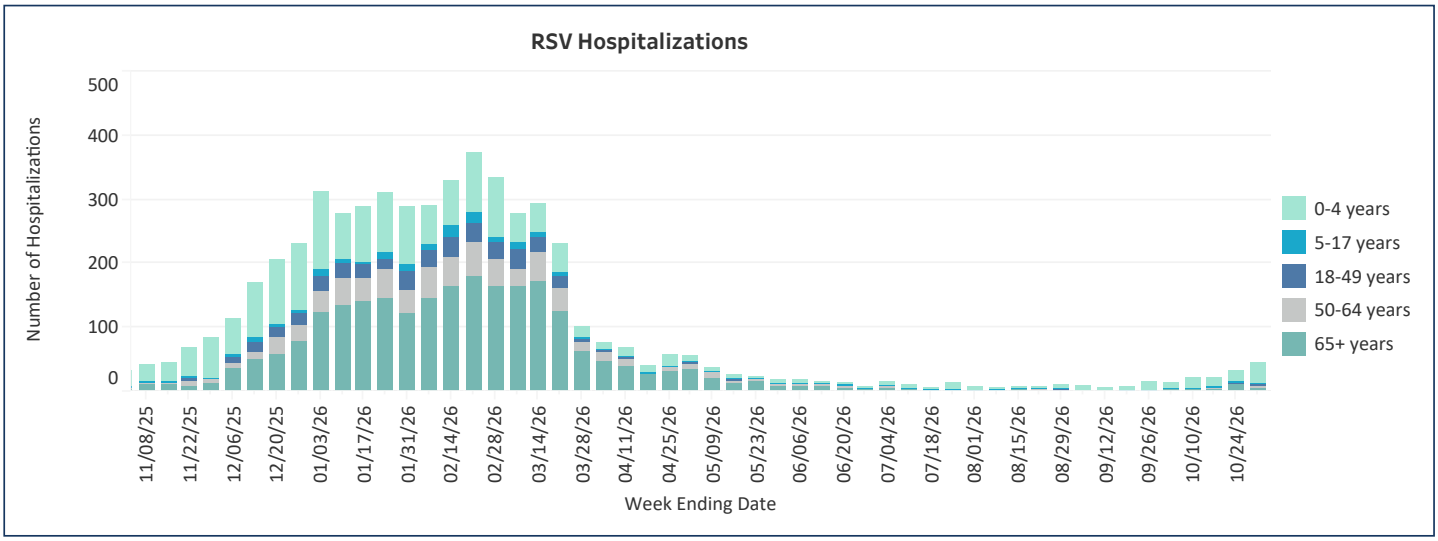
RSV: Test Positivity

Data from CDRSS submitted by select acute care facilites is used to report weekly number of respiratory syncytial virus (RSV) tests performed and the test positivity.



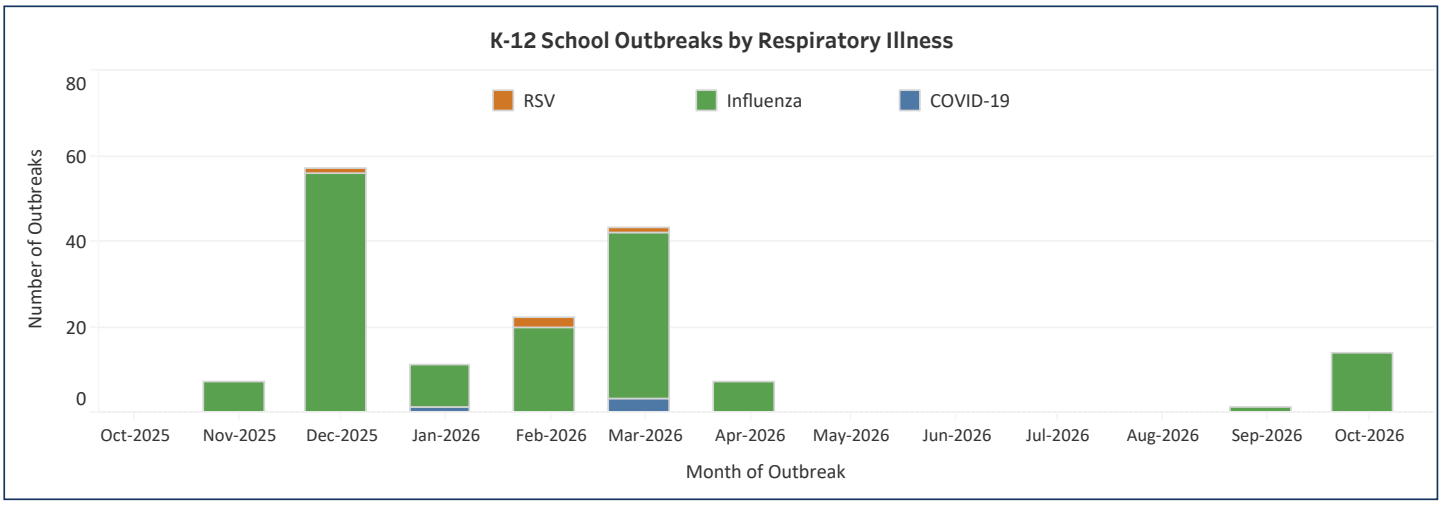
RSV: Hospitalizations

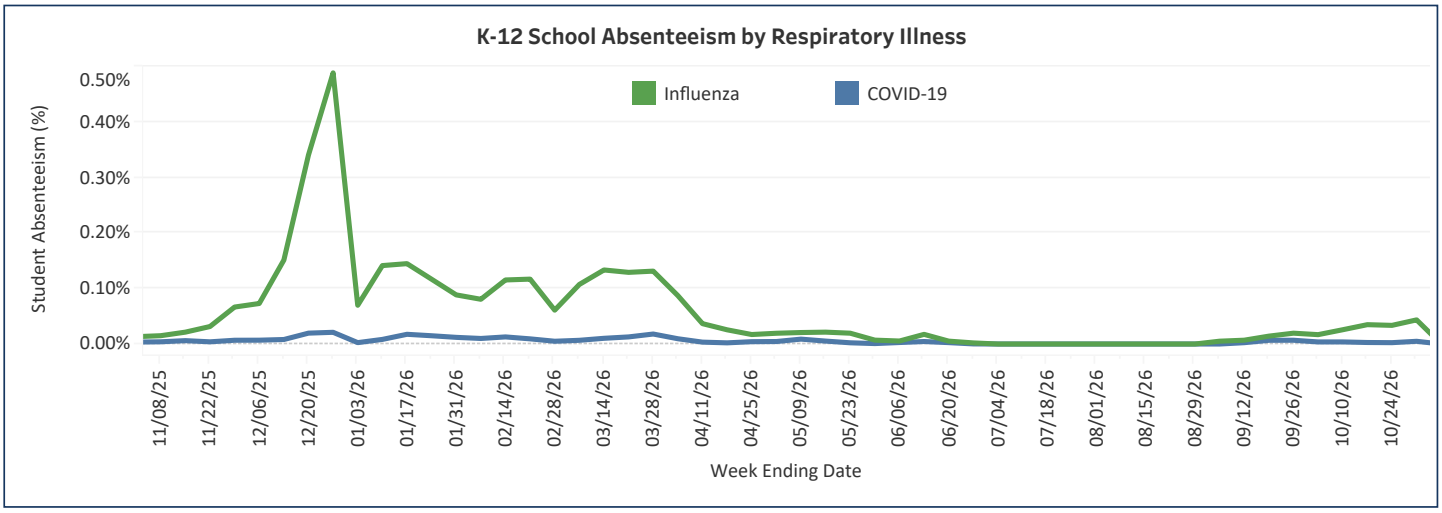
Data from the National Healthcare Safety Network (NHSN) shows the number of hospitalizations with an RSV diagnosis by age group.



K-12 Schools

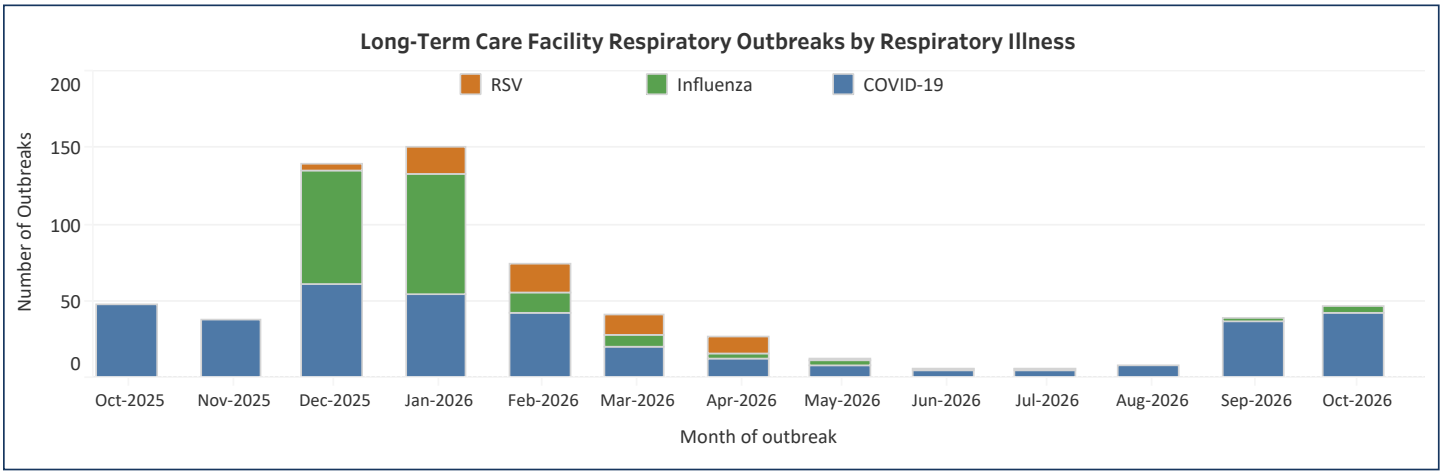
Data from CDRSS is used to provide information on COVID-19, influenza, and RSV outbreaks in school settings, including in childcare and early elementary care facilities and to provide information on school-related absenteeism due to COVID-19 and influenza.





Outbreaks in Long-Term Care

Respiratory outbreaks in long-term care facilities by month of outbreak as reported to NJDOH in the Communicable Disease Surveillance and Reporting System (CDRSS) are plotted below. Counts include COVID-19, influenza and RSV outbreaks.



For additional information visit:

- **NJDOH CDS Respiratory Illness Dashboard www.nj.gov/health/respiratory-viruses/data-and-reports/#respiratory-illness-dashboard/**
- **NJDOH CDS LTC Vaccination Coverage Dashboard www.nj.gov/health/ltc/home/dashboard.shtml**