

# Respiratory Illness Surveillance Report

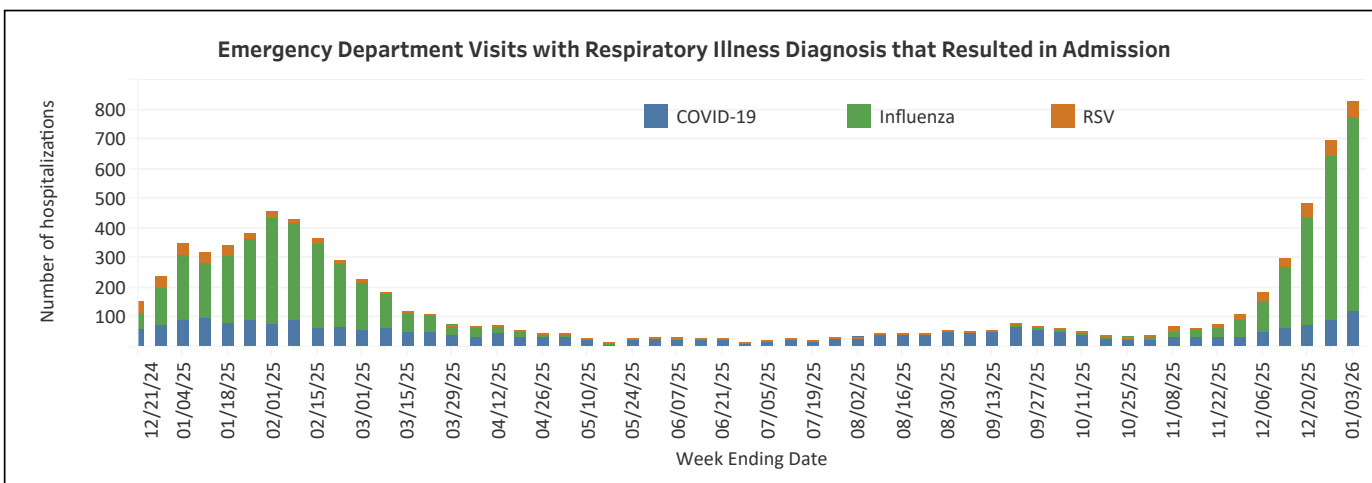
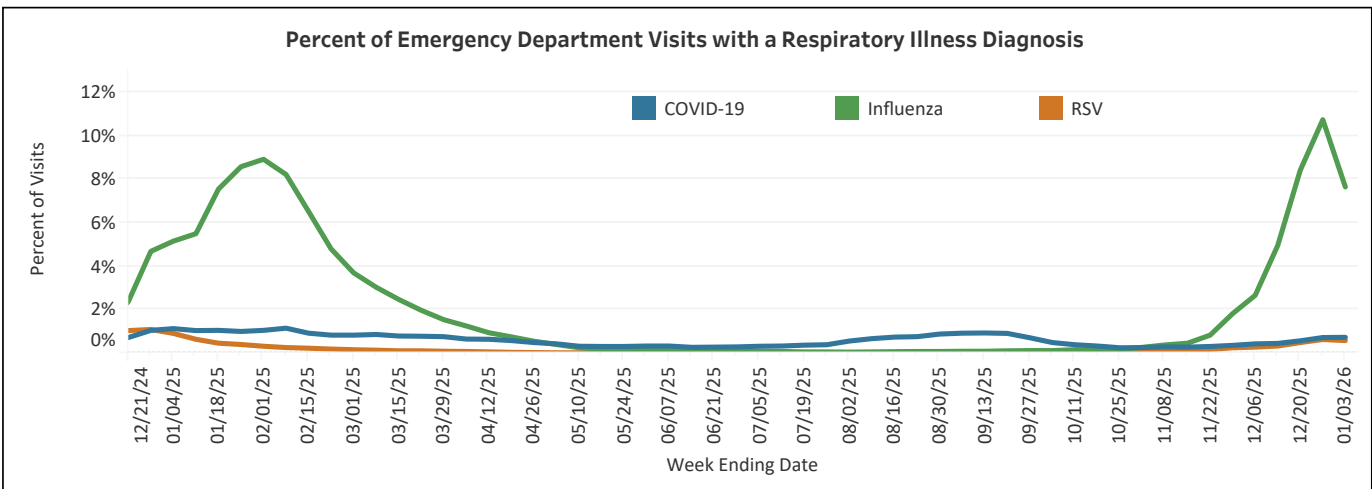
Week Ending January 3, 2026 (MMWR 53)

## Report Highlights

- Influenza activity continues to be elevated in NJ. Although the number of cases, emergency department visits, outpatient visits and test positivity reported last week are slightly lower than the previous week this season, wastewater activity levels continue to rise. Emergency department visits that resulted in admissions also continue to rise, predominantly in persons 65 years and older.
- Influenza A(H3N2) remains the predominant subtyped influenza virus so far this season, and has been associated with increased severity in past seasons. A majority of A(H3N2) viruses tested at CDC belong to an emerging subclade K, however the impact of this drift on the current season is unclear.
- The number of emergency department visits due to RSV resulting in hospital admissions increased this week, predominantly in persons 50 years of age and older. Test positivity remains elevated this week, but is lower than this time last year.
- COVID-19 activity remains low, but emergency department visits and hospital admissions have been increasing since early December. Hospital admissions are greater than they were this time last year and continue to be predominantly in persons 65 years and older. The predominant variant continues to be Omicron XFG.
- Respiratory outbreaks reported in long-term care facilities over the last week were primarily due to influenza and COVID-19 while those in schools continue to be predominantly due to influenza.
- Test positivity for seasonal coronaviruses has been increasing since the beginning of December. Rhinovirus and enterovirus test positivity, which peaked in September, continues to decline.

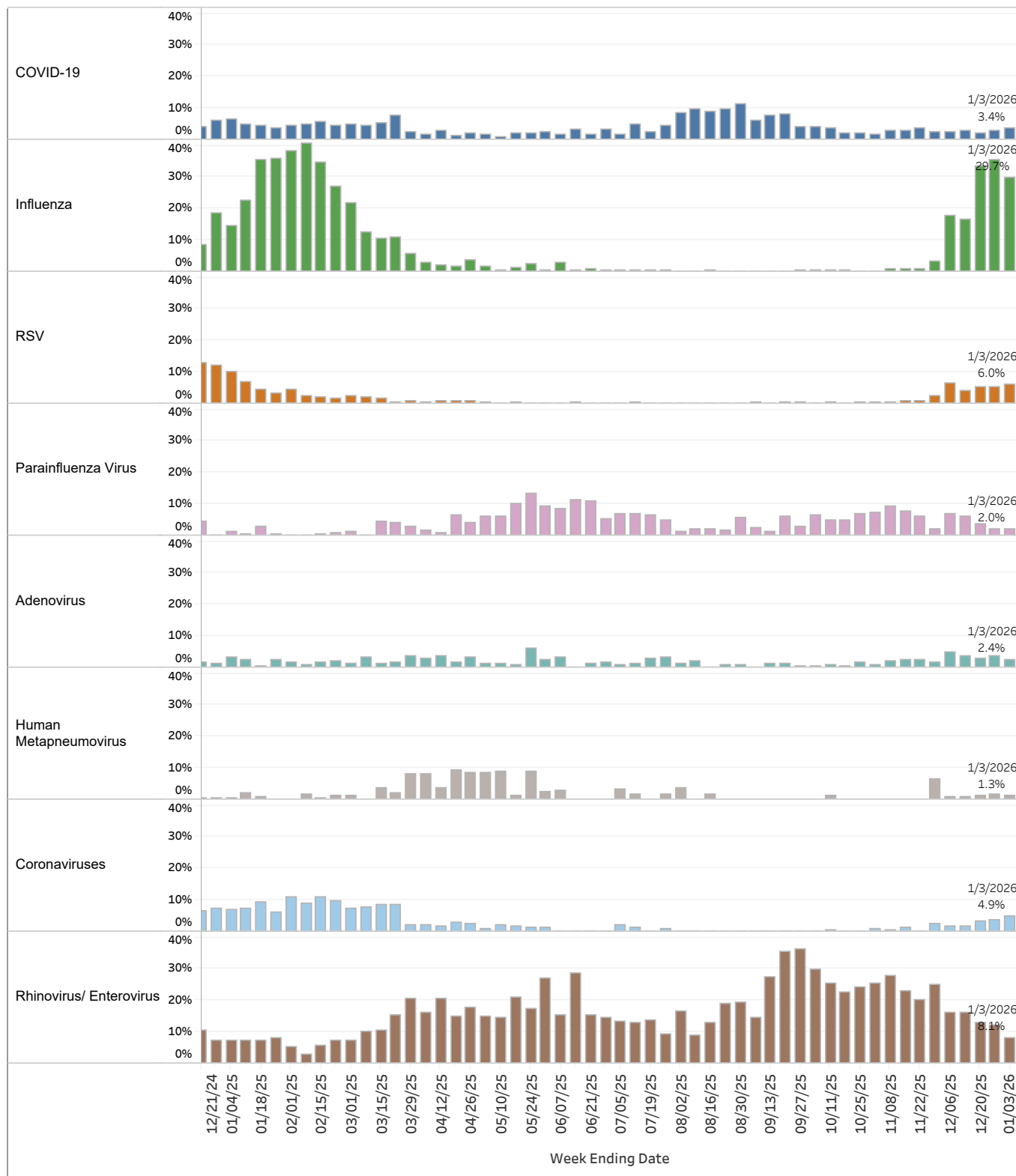
## Respiratory Trends

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.



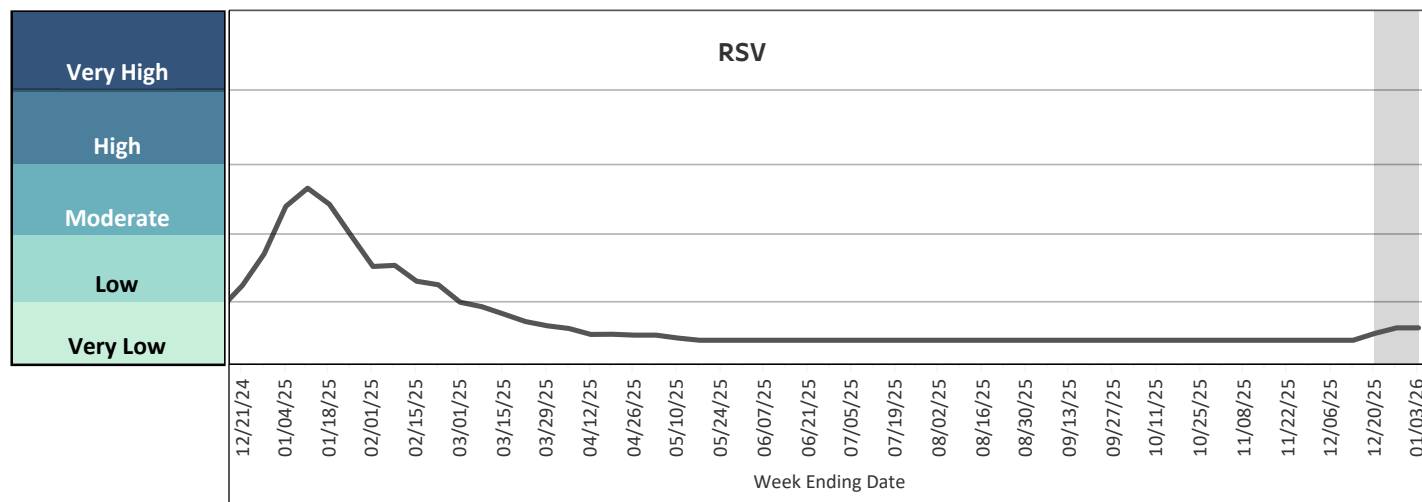
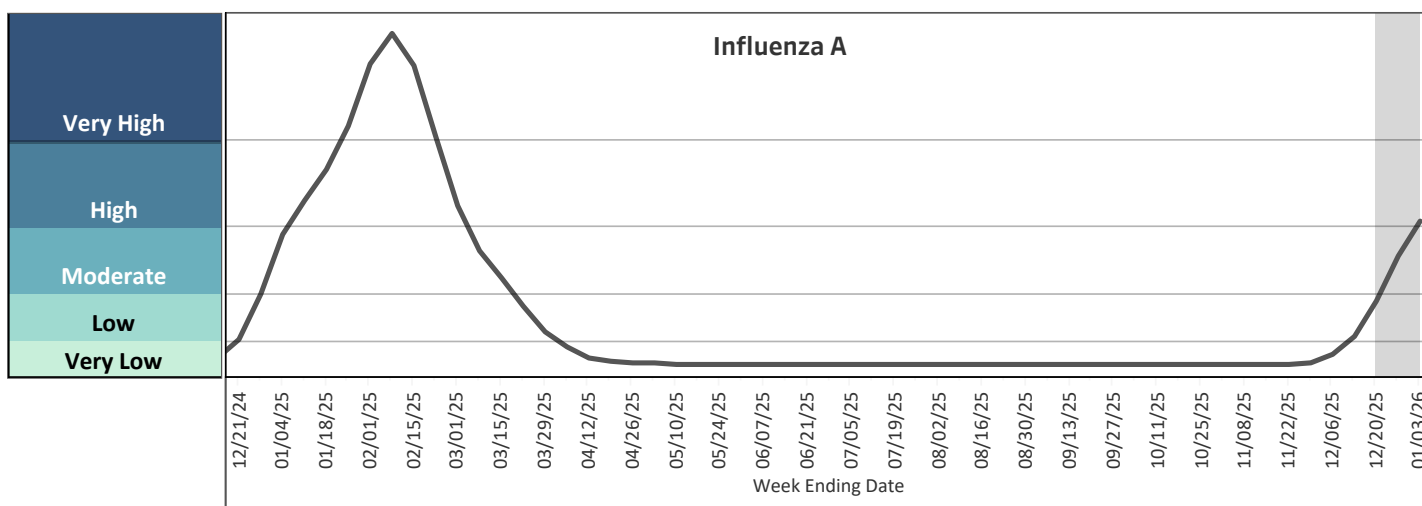
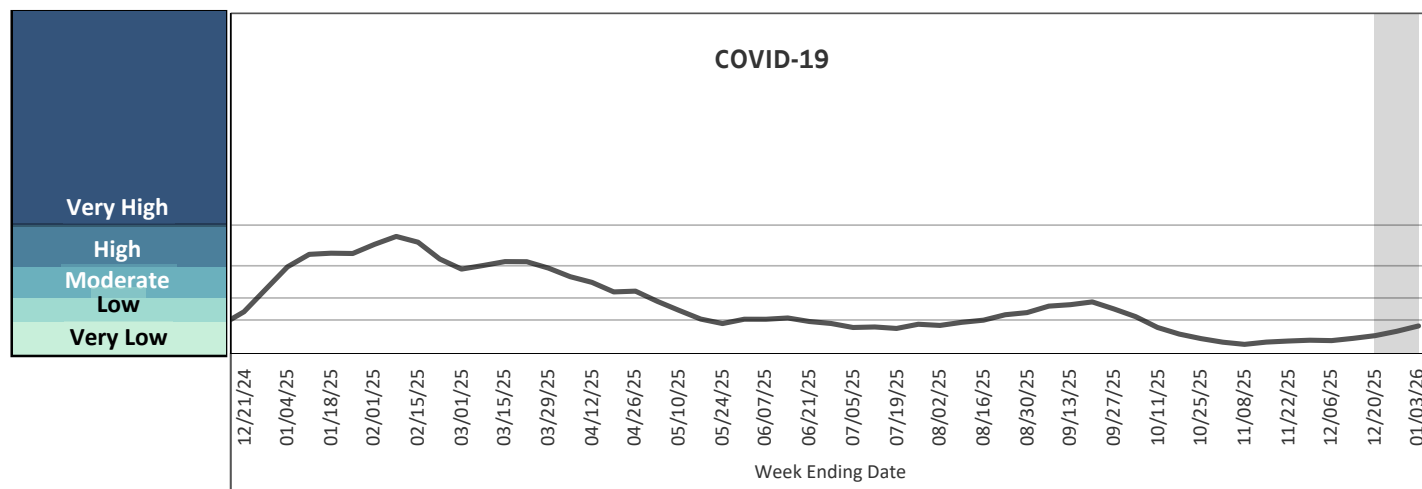
## Respiratory Virus Test Positivity

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>



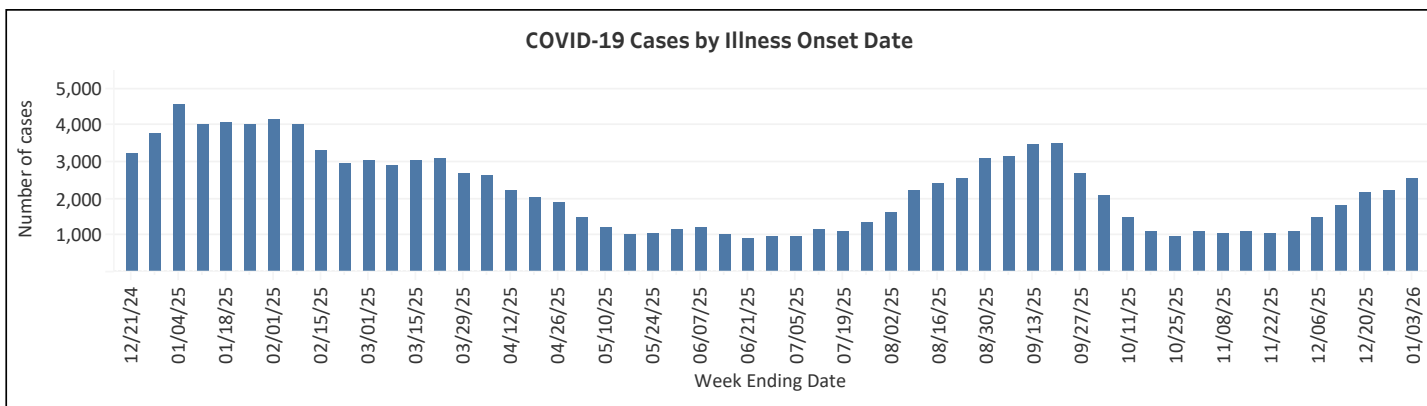
## Wastewater Surveillance

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>.



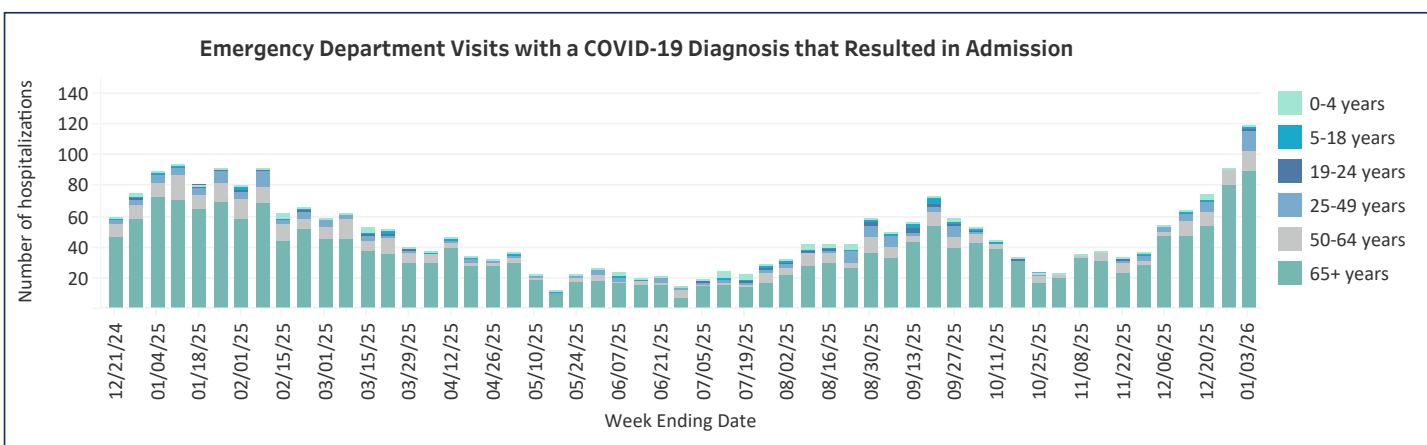
## COVID-19: Cases

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.



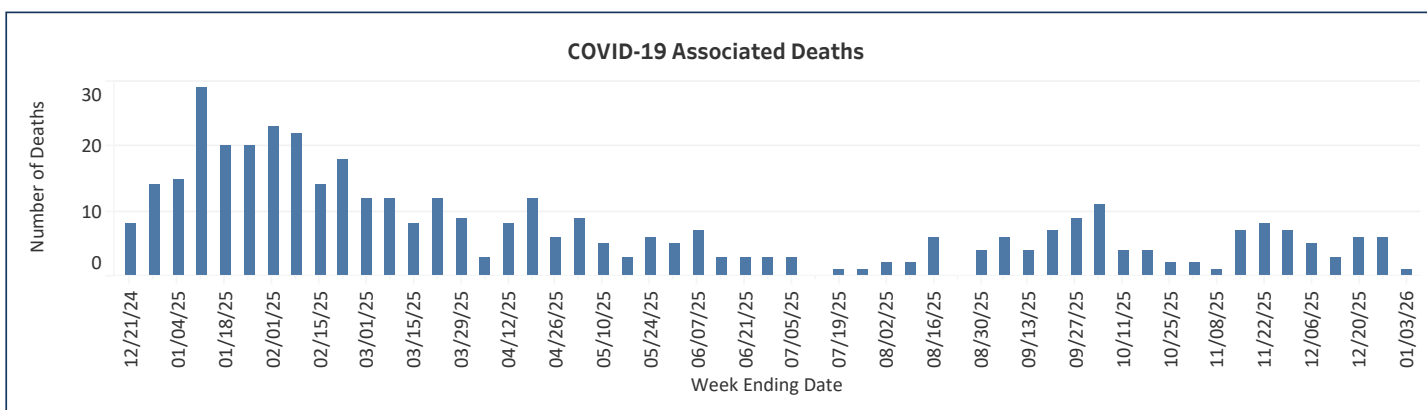
## COVID-19: Hospitalizations

NJDOH uses syndromic surveillance data to monitor trends associated with visits to emergency departments for COVID-19. Data shows the number of emergency department visits with a COVID-19 diagnosis that resulted in hospitalizations by age group.



## COVID-19: Deaths

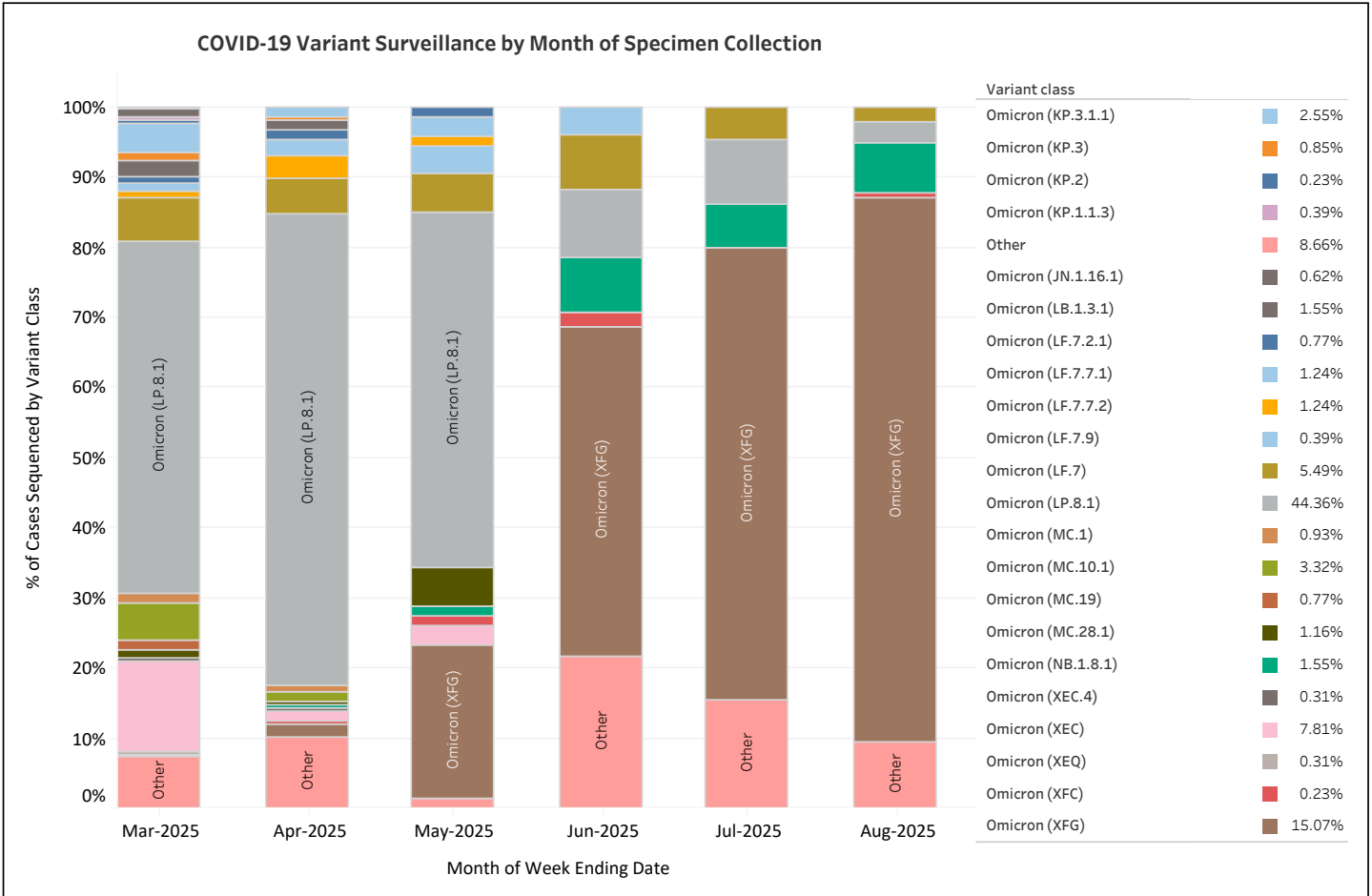
Data from CDRSS and the NJ Electronic Death Registration System (EDRS) are used to provide information on the number of COVID-19 associated deaths. COVID-19 associated deaths are based on the CSTE Revised COVID-19 associated Death Classification Guidance for Public Health Surveillance Programs.



## COVID-19: Variants

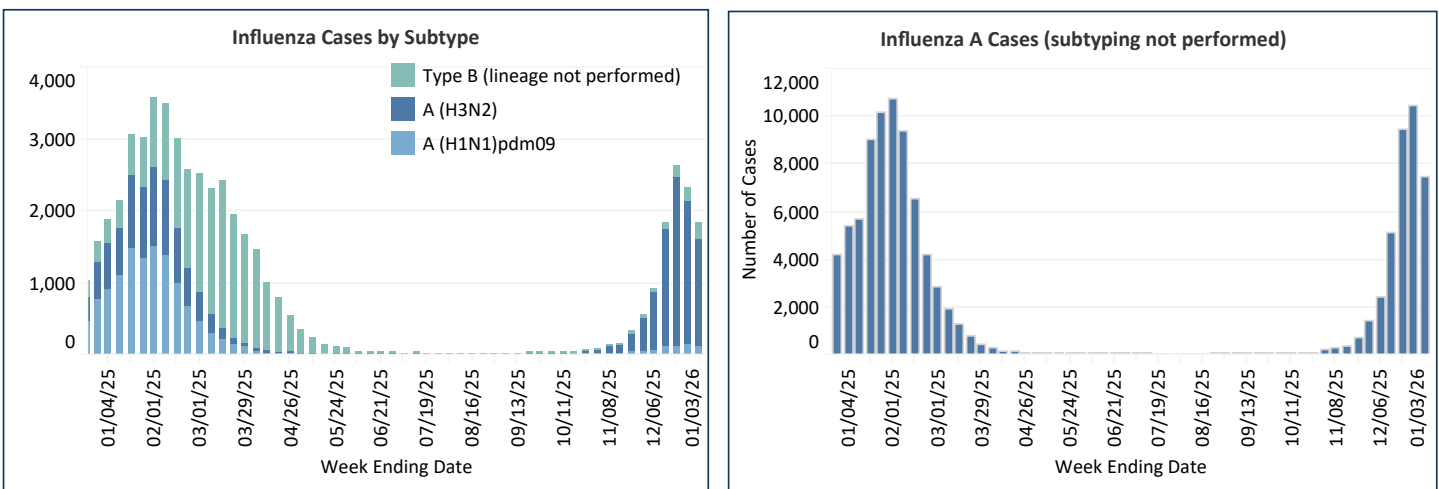
The chart depicts a summary of COVID-19 variant surveillance by month of specimen collection. Data includes sequencing results reported by selected commercial Labs and the NJ Public Health and Environmental Laboratories that have been submitted for surveillance purposes. Percentages represent the proportion 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>



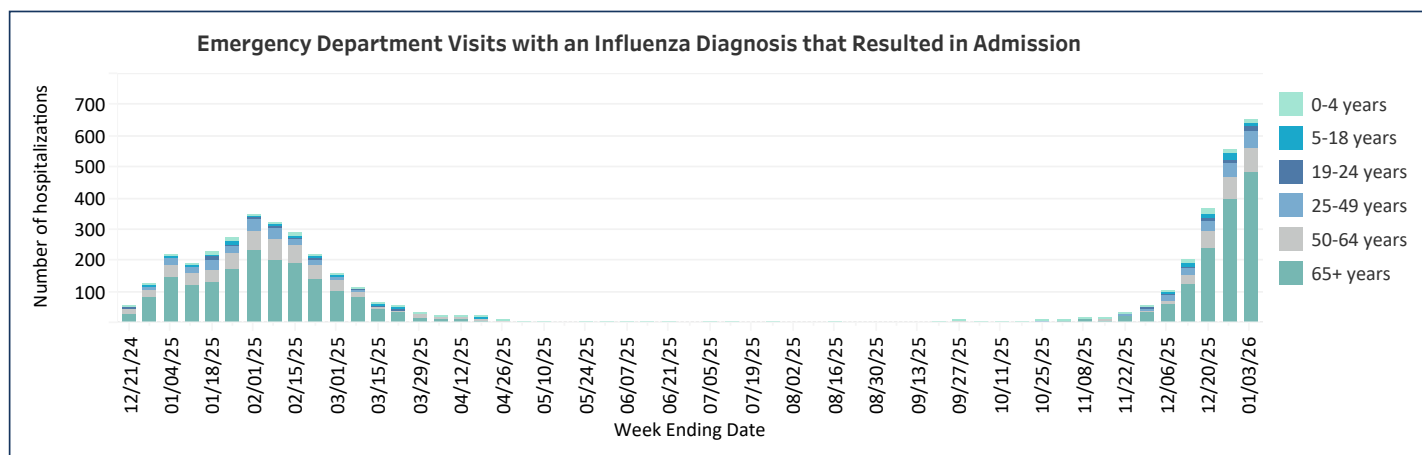
## Influenza: Cases

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



## Influenza: Hospitalizations

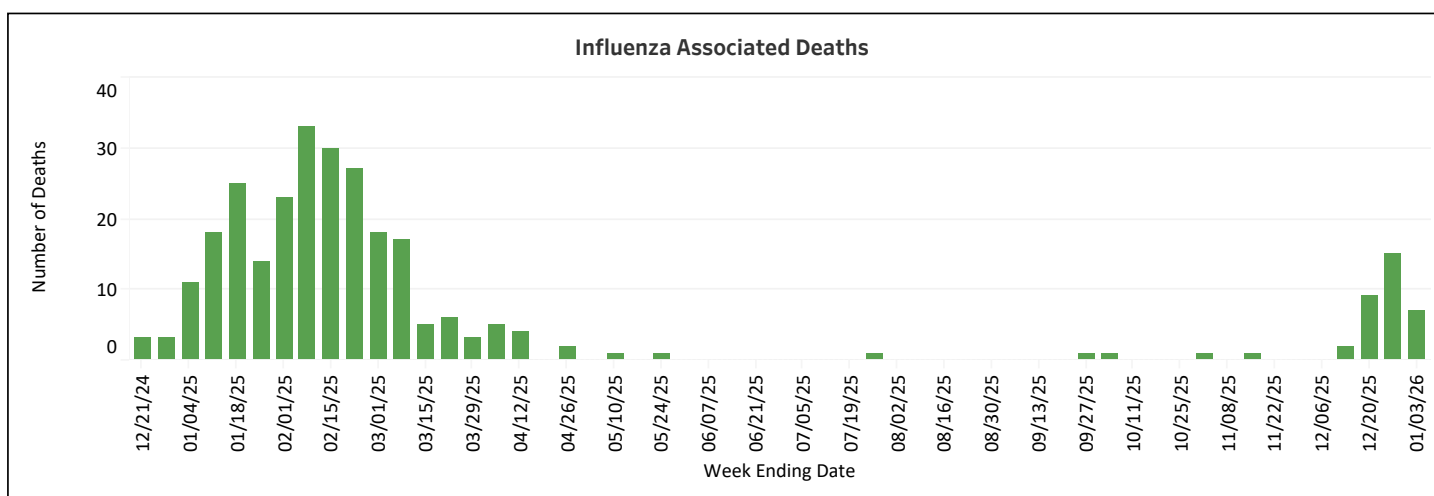
NJDOH uses syndromic surveillance data to monitor trends associated with visits to emergency departments for influenza. Data shows the number of emergency department visits with an influenza diagnosis that resulted in hospitalization by age group.



## Influenza: Deaths

Data from CDRSS and EDRS is used to 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.

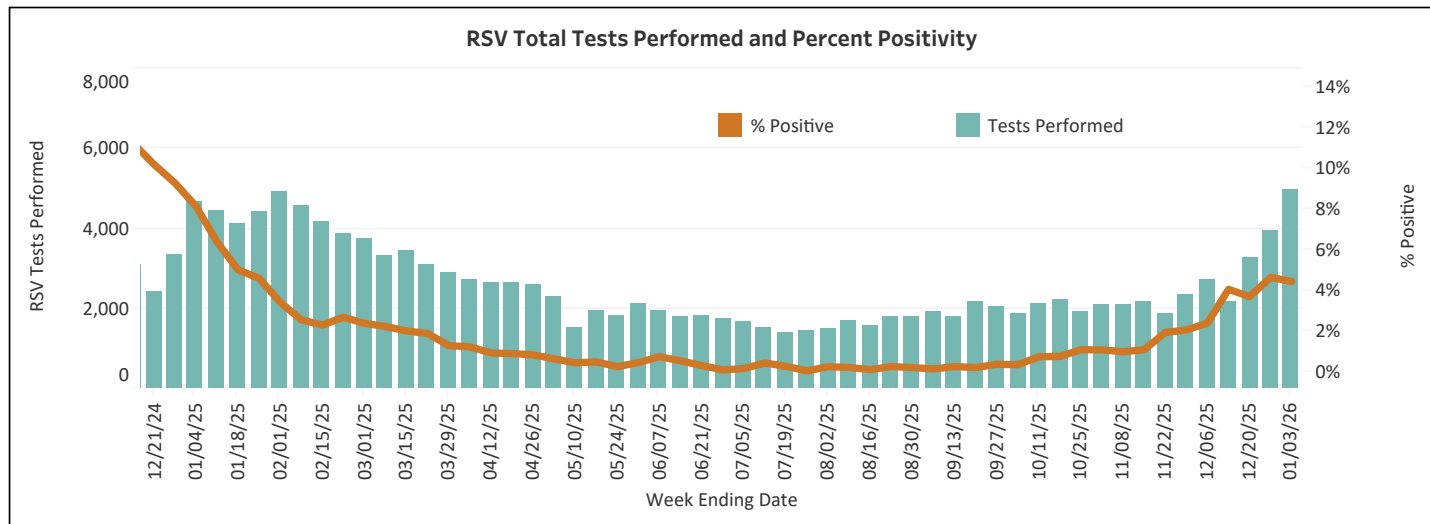


### Pediatric Influenza Deaths and Severe Cases

| Influenza Season | US (fatal) | NJ (fatal) | NJ (severe cases) |
|------------------|------------|------------|-------------------|
| 2021-2022        | 49         | 0          | 19                |
| 2022-2023        | 187        | 4          | 95                |
| 2023-2024        | 210        | 2          | 100               |
| 2024-2025        | 287        | 5          | 149               |
| 2025-2026        | 9          | 0          | 60                |

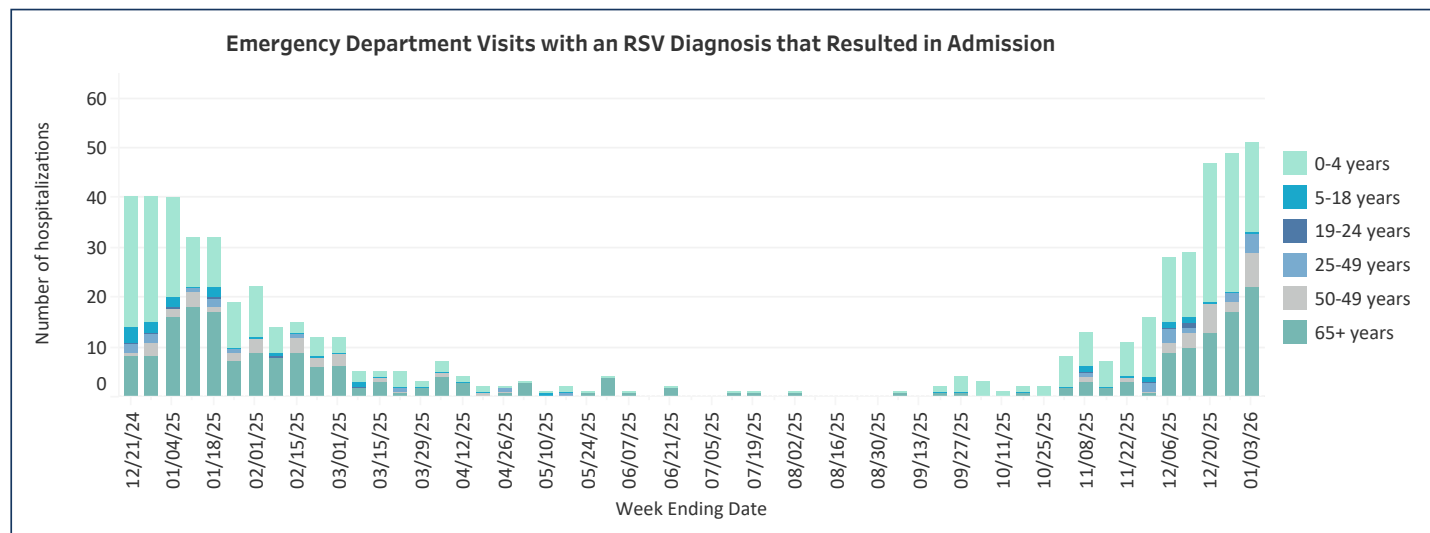
## RSV: Test Positivity

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



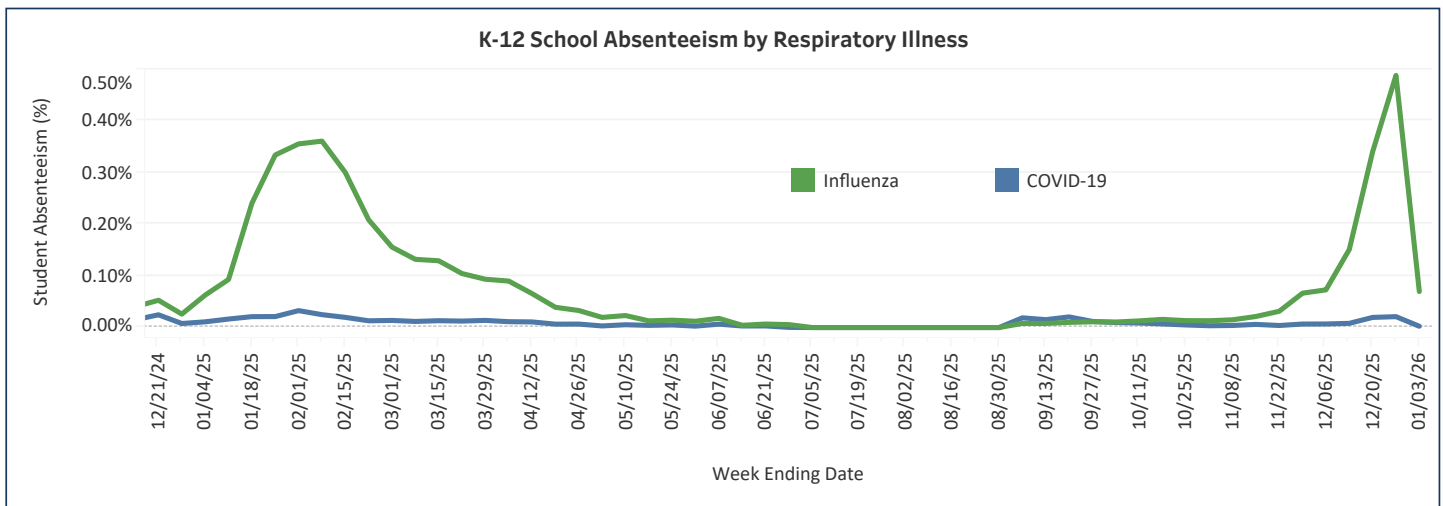
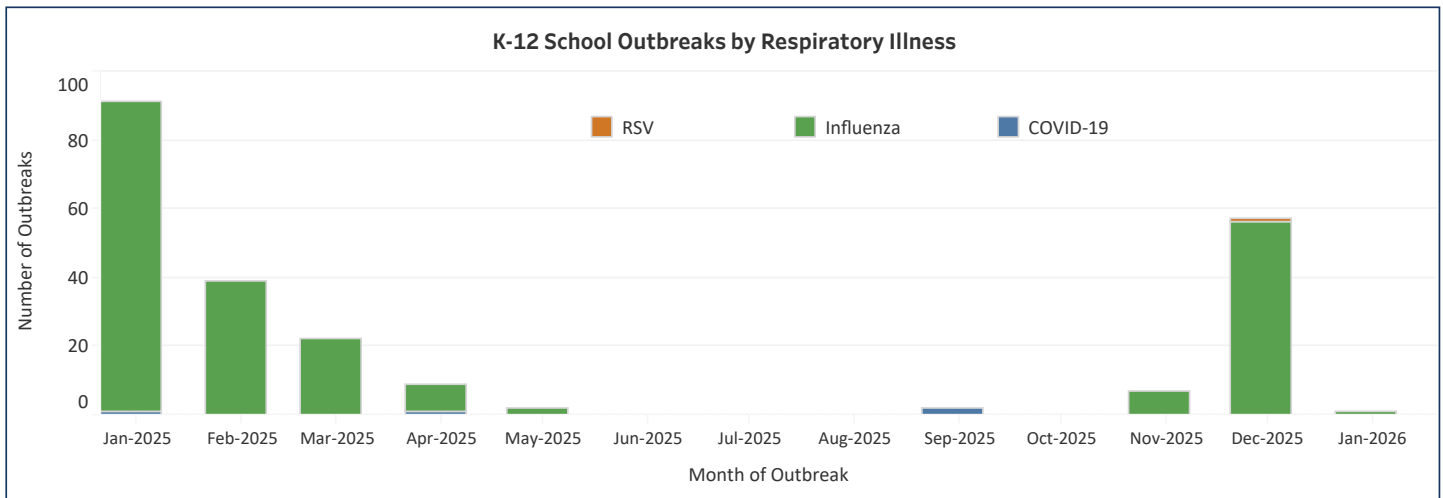
## RSV: Hospitalizations

NJDOH uses syndromic surveillance data to monitor trends associated with visits to emergency departments for RSV. Data shows the number of emergency department visits with an RSV diagnosis that resulted in hospitalization by age group.



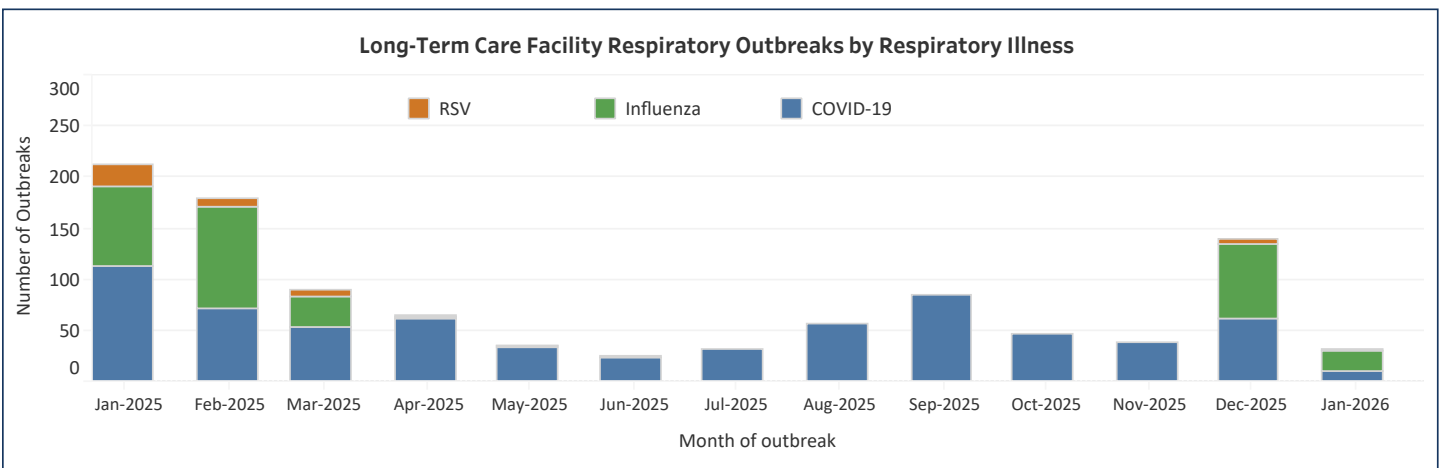
## K-12 Schools

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/](http://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](http://www.nj.gov/health/ltc/home/dashboard.shtml)