

### Sheila Hogan, Director

Children/Families
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Coronavirus Disease 2019 (COVID-19)

Analysis of COVID-19 Cases in Montana as of 06/26/2020

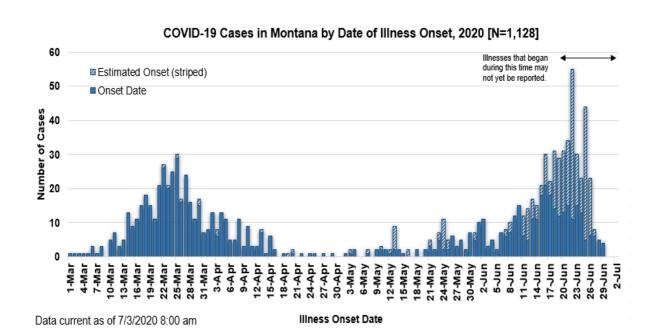
### Archive of COVID-19 Montana Analyses



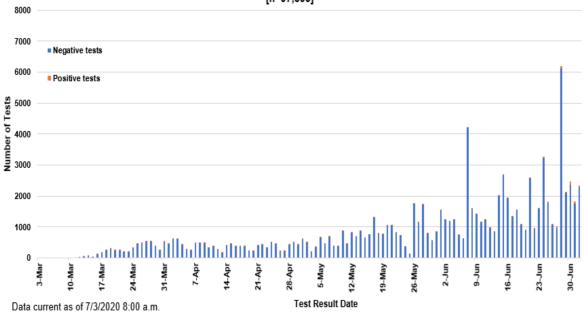
## **Demographic Information on Confirmed Cases**

COVID-19 Cases in Montana	
Total Number of Cases	1128
- Number of Deaths	23

<sup>\*</sup> Tables and charts are updated by 10 am every morning.



# SARS-Cov-2 Testing at Montana Public Health Laboratory and Reference Laboratories, Montana 2020 [n=97,503]



County of Residence	Number of Cases	Number of Deaths	Community Transmission*
Beaverhead	1		
Big Horn	86	4	Yes
Broadwater	5		
Carbon	26		
Cascade	34	2	Yes
Custer	30		
Dawson	8		
Deer Lodge	4		
Fergus	2		
Flathead	62	2	Yes
Gallatin	282	1	Yes
Glacier	22		
Golden Valley	3		
Granite	4		
Hill	1		
Jefferson	3		
Lake	18		
Lewis and Clark	30		Yes
Liberty	1		
Lincoln	8	1	
Madison	13	1	
Meagher	2		
Missoula	105	1	Yes

County of Residence	Number of Cases	Number of Deaths	Community Transmission*
Musselshell	1		
Park	12		
Pondera	3		
Ravalli	33		Yes
Richland	18		
Roosevelt	7		
Rosebud	10	1	
Sheridan	1		
Silver Bow	18		
Stillwater	6		
Teton	5		
Toole	31	6	
Treasure	2		
Valley	4		
Wheatland	1		
Yellowstone	203	4	Yes
Total	1128	23	

<sup>\*</sup> Community transmission - a community has identified cases who are unable to be linked with other known cases or travel. This status has been determined after consultation between state and local health departments.

<b>Hospitalization Status</b>	Number of Cases (percent of total)
Ever hospitalized	109 (10%)
Not hospitalized	978 (87%)
Under Investigation	40 (3%)
Total	1128

Age Group	Number of Cases (percent of total)
o-9 years	45 (4%)
10-19	93 (8%)
20-29 years	244 (22%)
30-39 years	200 (18%)
40-49 years	143 (12%)
50-59 years	154 (13%)
60-69 years	147 (13%)

	Age Group	Number of Cases (percent of total)
	70-79 years	73 (6%)
	80+ years	29 (2%)
	Total	1128
Ī	N	umber of Cases (nercent

Sex	Number of Cases (percent of total)
Female	557 (49%)
Male	570 (51%)
Total	1128

Race and Ethnicity	Number of Cases (percent of total)
White	762 (67%)
American Indian, Alaska Native, Native Hawaiian, and Pacific Islander	136 (12%)
Asian	2 (<1%)
Black or African American	6 (<1%)
Other Race	18 (1%)
Undetermined/Under investigation	204 (18%)
Total	1128
Among those with ethnicity specified:	
Hispanic/Latino	76 (8%)
Not Hispanic/Latino	838 (92%)
Total	914

Current Status of Cases	Number of Cases (percent of total)
Hospitalized	17 (1%)
Deceased	23 (2%)
Recovering	411 (36%)
Recovered and released from isolation	678 (60%)
Total number of cases	1128

# Location (at time of testing) of individuals diagnosed but not residing or counted in Montana:

County	Number of Cases (percent of total)
Carbon	1 (1.7%)

County	Number of Cases (percent of total)
Cascade	5 (8.3%)
Custer	3 (5.0%)
Dawson	1 (1.7%)
Deer Lodge	1 (1.7%)
Fergus	2 (3.3%)
Flathead	6 (10.0%)
Gallatin	15 (25.0%)
Lake	5 (8.3%)
Lewis and Clark	1 (1.7%)
Lincoln	1 (1.7%)
Missoula	3 (5.0%)
Park	2 (3.3%)
Ravalli	7 (11.7%)
Silver Bow	2 (3.3%)
Toole	1 (1.7%)
Yellowstone	4 (6.7%)
Total	60

Cases reported in the tables above include 13 residents of other states who were tested, isolated and/or hospitalized in Montana during the early phases of the pandemic. As COVID-19 is now widespread across the United States, data no longer include out-of-state residents who test positive in Montana in order to align with Council of State and Territorial Epidemiologists guidelines that classify cases by the individual's usual state of residence. This is standard practice for all communicable diseases to ensure accurate case reporting for Montana and the US. Additional individuals were diagnosed in Montana but are not included due to residency and/or the transient nature of their visit to the state: data for these individuals are reflected in the table immediately above.



# Communicable Disease Epidemiology Staff Listing

Questions & Comments

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The DPHHS CDEpi Section mission is to create, maintain, support, and strengthen routine surveillance and detection systems and epidemiological investigation processes, as well as to expand these systems and processes in response to incidents of public health significance.

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