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Coronavirus Disease 2019 (COVID-19)

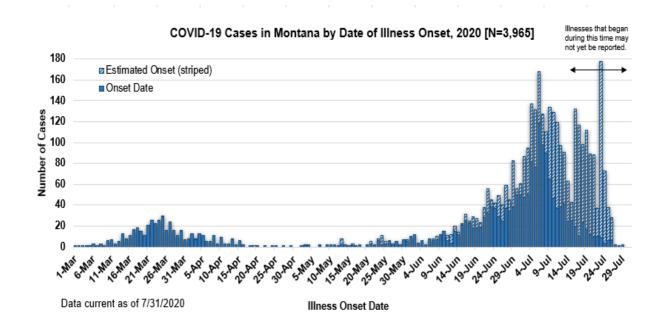
Analysis of COVID-19 Cases in Montana as of 07/24/2020 Archive of COVID-19 Montana Analyses



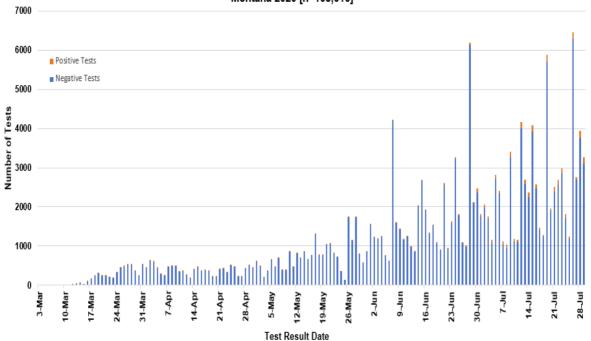
Demographic Information on Confirmed Cases

COVID-19 Cases in Montana	
Total Number of Cases	3965
- Number of Deaths	60

^{*} Tables and charts are updated by 10 am every morning.



SARS-Cov-2 PCR Testing at Montana Public Health Laboratory and Reference Laboratories, Montana 2020 [n=168,616]



County of Residence	Number of Cases	Number of Deaths	Community Transmission*
Beaverhead	45		
Big Horn	312	9	Yes
Blaine	7		
Broadwater	10		
Carbon	57		
Cascade	136	2	Yes
Choteau	6		
Custer	52	2	
Daniels	2		
Dawson	14		
Deer Lodge	20		
Fallon	2		
Fergus	6		
Flathead	237	2	Yes
Gallatin	849	2	Yes
Garfield	12		
Glacier	53	1	
Golden Valley	3		
Granite	6		
Hill	43		
Jefferson	22		
Judith Basin	3		

County of Residence	Number of Cases	Number of Deaths	Community Transmission*
Lake	165	1	
Lewis and Clark	122	1	Yes
Liberty	1		
Lincoln	68	2	
Madison	73	1	
McCone	1		
Meagher	4		
Missoula	247	1	Yes
Musselshell	2		
Park	47		
Pondera	9		
Powder River	1		
Powell	2		
Ravalli	65	1	Yes
Richland	45	1	
Roosevelt	17		
Rosebud	22	1	Yes
Sanders	9		
Sheridan	3		
Silver Bow	61		
Stillwater	18		
Sweet Grass	4	1	
Teton	15		
Toole	31	6	
Treasure	2		
Valley	11		
Wheatland	3		
Wibaux	1		
Yellowstone	1022	26	Yes
Total	3965	60	

^{*} 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.

Hospitalization Status	Number of Cases (percent of total)
Ever hospitalized	230 (6%)
Not Hospitalized	3732 (94%)
Under Investigation	3 (<1%)
Total	3965

Age Group	Number of Cases (percent of total)
0-9 years	157 (4%)
10-19	308 (8%)
20-29 years	1059 (27%)
30-39 years	651 (16%)
40-49 years	486 (12%)
50-59 years	481 (12%)
60-69 years	428 (11%)
70-79 years	243 (6%)
80-89	117 (3%)
90-99	35 (1%)
Total	3965
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Sex	Number of Cases (percent of total)	
Female	1982 (50%)	
Male	1983 (50%)	
Total	3965	

Race and Ethnicity	Number of Cases (percent of total)
White	2129 (54%)
American Indian, Alaska Native, Native Hawaiian, and Pacific Islander	459 (12%)
Asian	9 (<1%)
Black or African American	21 (<1%)
Other Race	33 (<1%)
Undetermined/Under investigation	1314 (33%)
Total	3965
Among those with ethnicity specified:	
Hispanic/Latino	165 (6%)
Not Hispanic/Latino	2422 (94%)
Total	2587

Current Status of Cases	Number of Cases (percent of total)
Hospitalized	71 (2%)
Deceased	60 (1%)
Recovering	1503 (38%)
Recovered and released from isolation	2331 (59%)
Total number of cases	3965

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

County	Number of Cases (percent of total)
Beaverhead	3 (2%)
Big Horn	1 (1%)
Carbon	3 (2%)
Cascade	18 (9%)
Custer	3 (2%)
Dawson	1 (1%)
Deer Lodge	1 (1%)
Fallon	1 (1%)
Fergus	2 (1%)
Flathead	38 (20%)
Gallatin	40 (21%)
Glacier	1 (1%)
Granite	1 (1%)
Lake	8 (4%)
Lewis and Clark	4 (2%)
Lincoln	3 (2%)
Madison	21 (11%)
Meagher	1 (1%)
Missoula	5 (3%)
Park	7 (3%)
Powell	1 (1%)
Ravalli	8 (4%)
Silver Bow	4 (3%)
Sweet Grass	1 (1%)
Toole	2 (1%)
Yellowstone	13 (7%)
Total	191

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



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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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