



District 2 Public Health

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Banks, Dawson, Forsyth, Franklin, Habersham, Hall, Hart, Lumpkin, Rabun, Stephens, Towns, Union and White Counties

09/15/2025

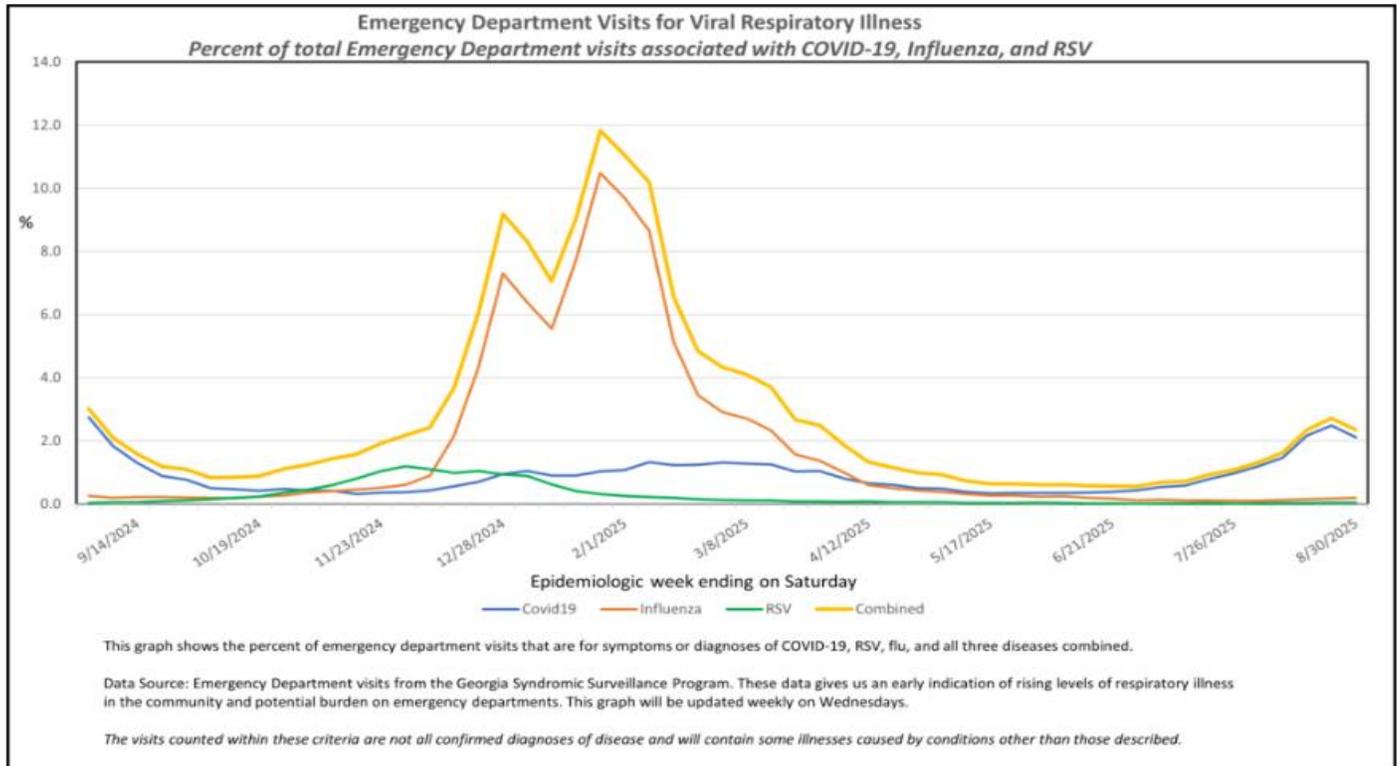
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Viral Respiratory Diseases Surveillance

Pan-Respiratory Virus Surveillance (Georgia - Last Updated 08/30/25)

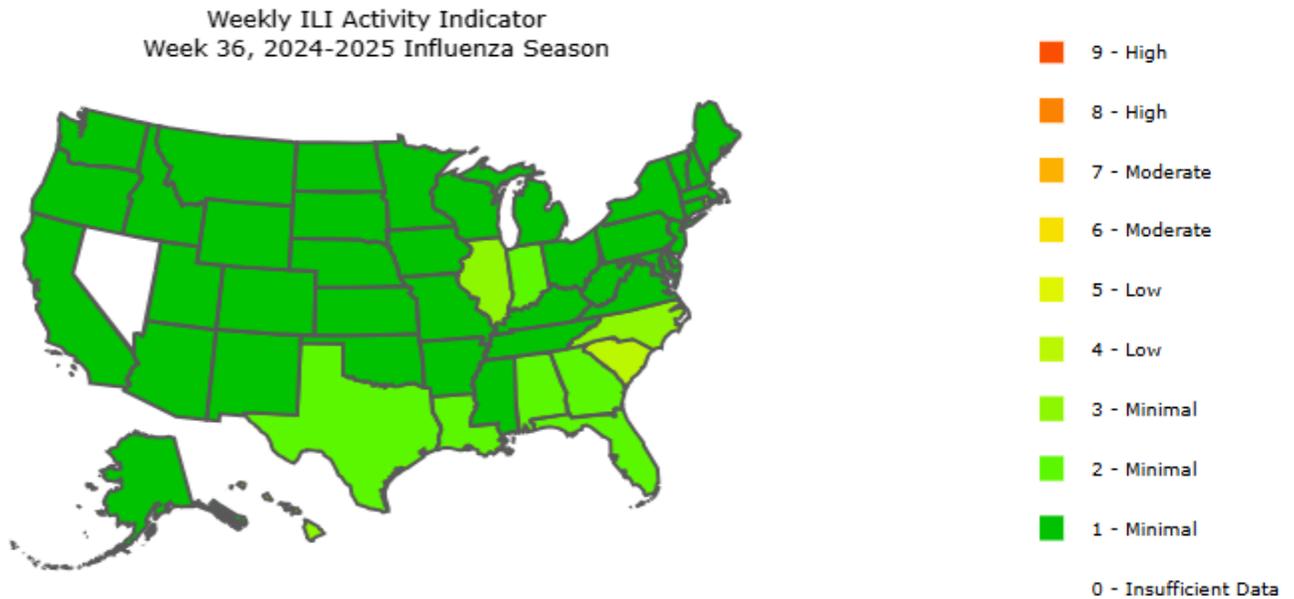


The graph above shows the percentage of emergency department visits that are for symptoms or diagnoses of COVID-19, RSV, Flu, and all three combined. The graph shows slight decline in number of COVID-19 cases and all ILI cases combined.

Georgia Flu Surveillance Update: Week 35 (Ending September 6, 2005)

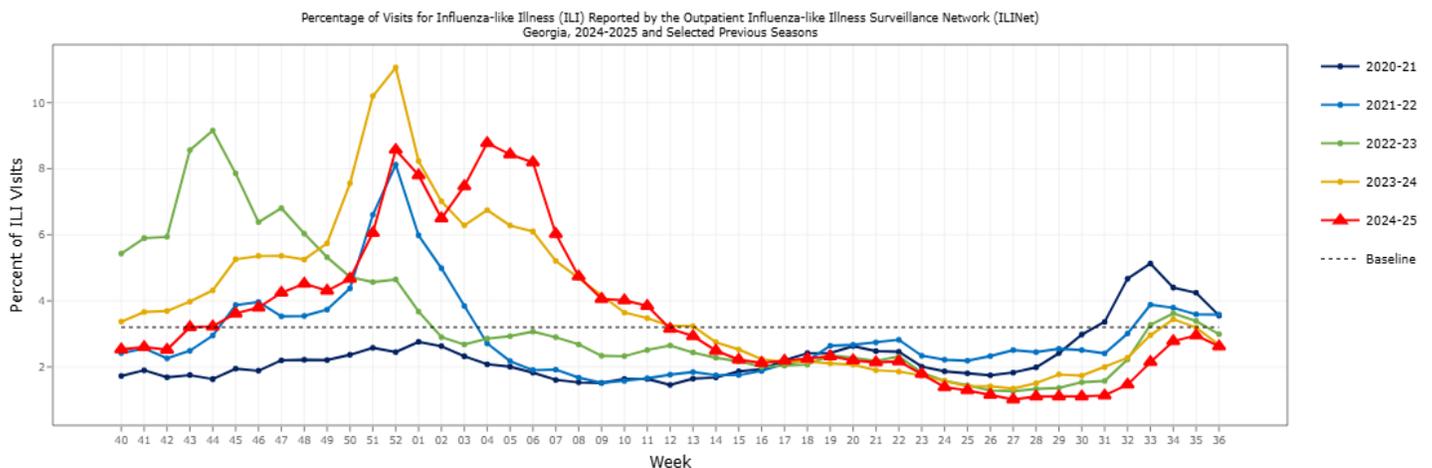
As of Week 36, Georgia flu activity was minimal (2 on the scale of 1-13). Activity levels are based on the percent of outpatient visits in Georgia due to influenza-like illness (ILI) during this timeframe.

For the corresponding week, the percentage of outpatient visits for influenza-like illness was 2.6% (which is below the regional baseline of 3.2%), the number of influenza-associated deaths was 0 (168 total for the current ILI season- Oct. 2024 to present); the number of Metro Area Influenza Hospitalizations was 0 (5,250 total for current flu season); and the number of influenza outbreaks was 0 (276 total for current flu season).



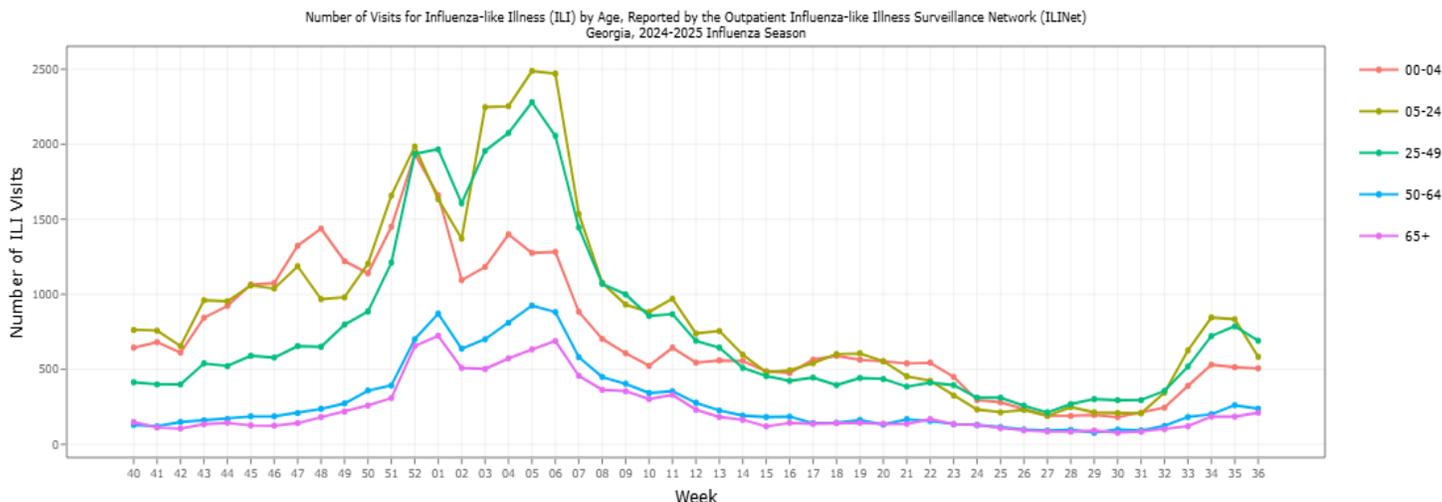
The map shows influenza-like cases in the southern US region. Georgia activity indicator level is at 2 (minimal) on week 36, as shown in green above.

ILI (Influenza-like Illness) Percentages by Season



The graph shows a snapshot of flu in Georgia compared to previous years. Although the graph shows cases are currently declining as of week 36, percentages are still higher when compared to the same time in previous years.

ILI (Influenza-like Illness) Percentages by Age



For week 36, the graph shows slight increase in ILI cases for age group 65+, decrease in groups 05-24, 24-49, 50-64 and age group 00-04 remains stable from the previous week (week 35).

COVID-19 Snapshot

Early Indicators and Hospitalizations for COVID-19 in the United States

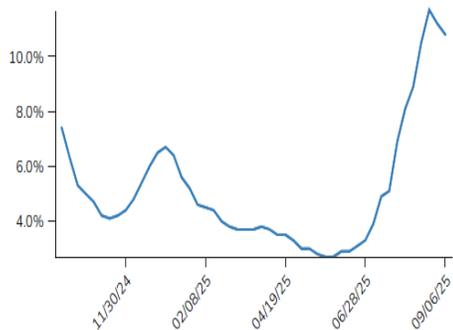


Figure 1: Percent Test Positivity - 10.8%

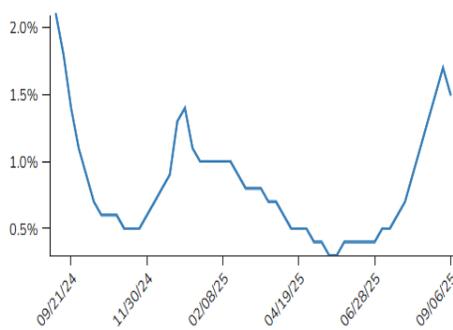


Figure 2: Percent ED Visits Diagnosed as COVID-19 - 1.5%

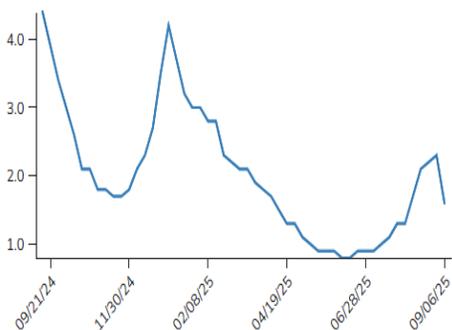
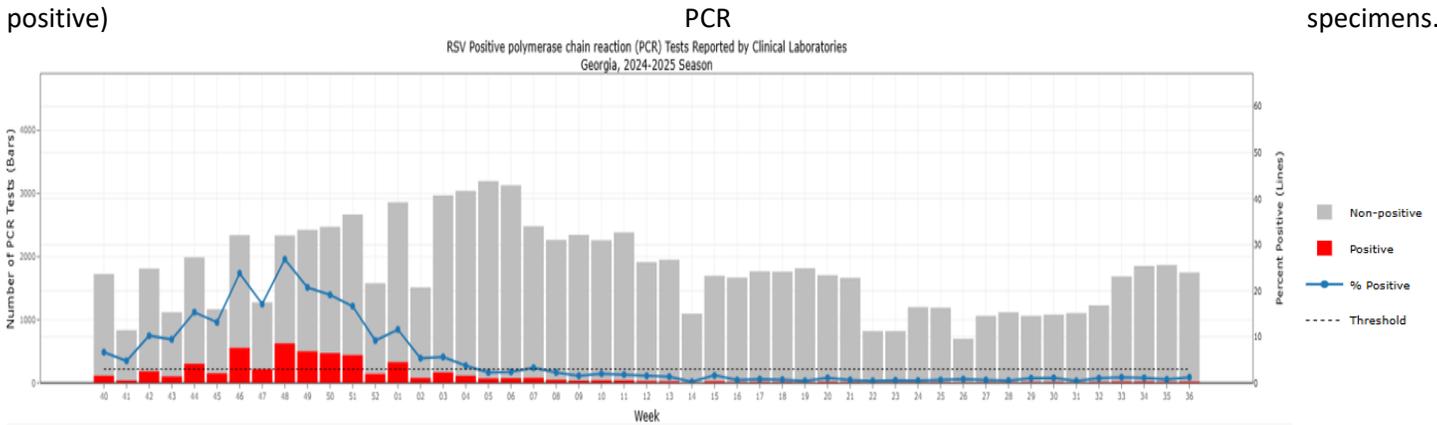


Figure 3: Hospitalization Rate per 100,000 Population- 1.6%

Figure 1 (percent test positivity) and Figure 2 (percentage of total emergency department visits due to COVID-19) represent the current impact of COVID-19 on communities across the United States. These metrics act as early indicators of potential increases in COVID-19 activity. Figure 3 (hospitalization rate per 100,000 people) assesses severity and disease burden of COVID-19. For the period of 08/03/2025 – 08/30/2025, the SARS-CoV-2 subvariant Omicron XFG was responsible for 78% of all cases in the U.S., followed by the subvariant NB.1.8.1 with 14%.

Respiratory Syncytial Virus Infection (RSV) Surveillance

Data from NREVSS are also analyzed to measure RSV seasonality. Antigen and polymerase chain reaction (PCR) tests are analyzed separately to determine the start and end of RSV season. Season onset is defined as the first week of two consecutive weeks when the percent positive of ALL laboratory confirmed tests are greater than or equal a certain threshold. The end is defined as the first week of two consecutive weeks when the percent positive of ALL lab confirmed tests are less than a certain threshold. For antigen-based testing, the threshold is 10% and for PCR the threshold is 3%. During week 36, clinical laboratories in Georgia reported testing 2,009 (0.3% positive) antigen specimens and 1,751 (1.3% positive) PCR specimens.



For week 36, the PCR detections graph shows slight increase in RSV PCR positive test results/cases (1.3%) compared to the previous week (0.8%).

Getting vaccinated is the best thing you can do to protect yourself and others.

District 2 health departments have vaccines available. Please contact your local health department for information on how to get your vaccine at http://phdistrict2.org/?page_id=597.

To learn more about how to protect yourself against flu and other respiratory diseases, visit DPH website at <https://dph.georgia.gov/epidemiology/acute-disease-epidemiology/viral-respiratory-diseases> and CDC website at <https://www.cdc.gov/flu/>

All Georgia physicians, laboratories, and other health care providers are required by law to report notifiable diseases. Instructions, including notifiable conditions and the timeframe in which they are reportable can be found at <https://dph.georgia.gov/epidemiology/disease-reporting>. Georgia tracks the listed conditions statewide using multiple overlapping surveillance systems, especially in the case of viral respiratory diseases as some are not reportable at the individual case level.