District 2 Public Health

Zachary Taylor, M.D., M.S., District Health Director
1280 Athens Street • Gainesville, Georgia 30507
PH: 770-535-5743 • FAX: 770-535-5958 • www.phdistrict2.org

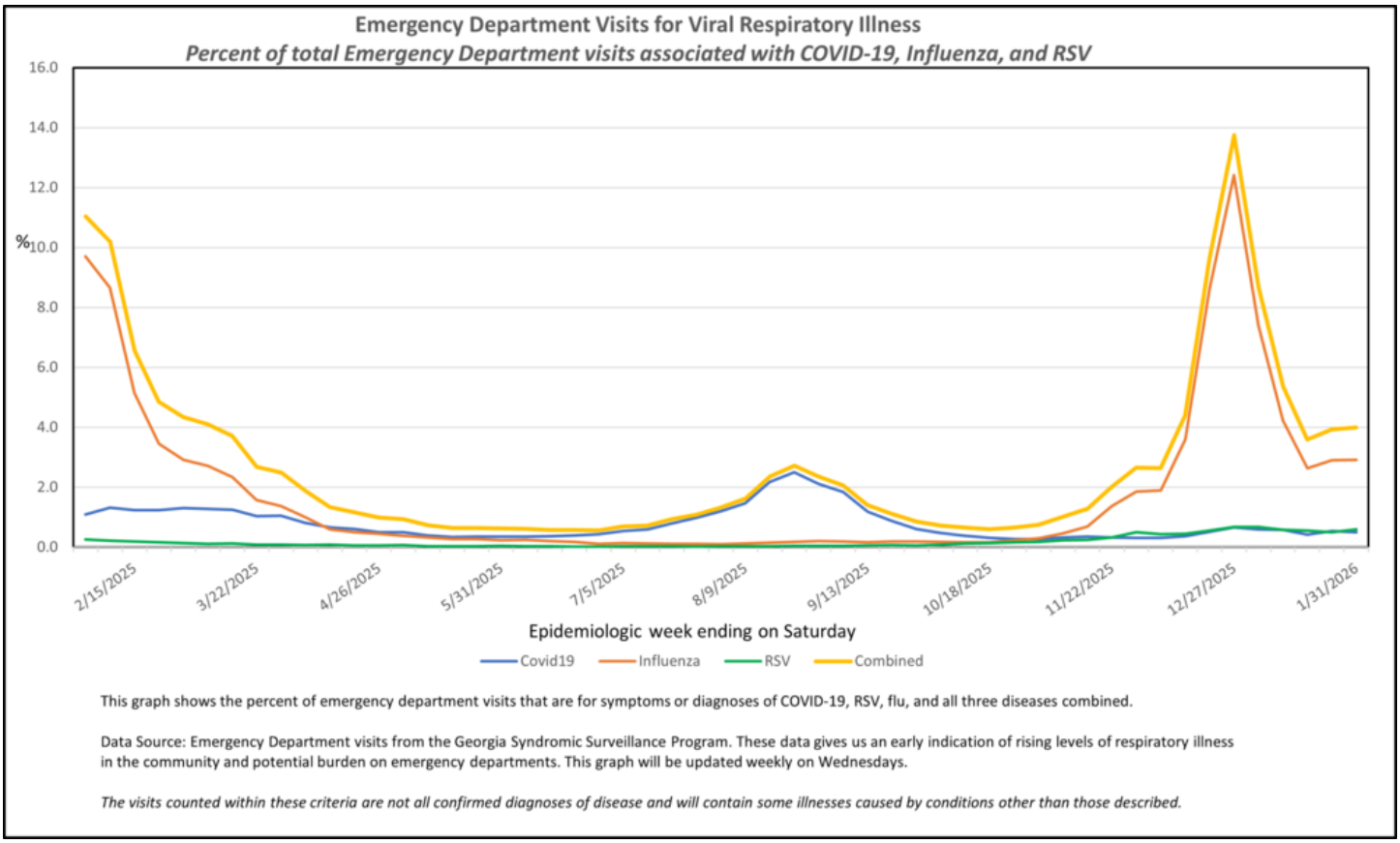
Banks, Dawson, Forsyth, Franklin, Habersham, Hall, Hart, Lumpkin, Rabun, Stephens, Towns, Union and White Counties

02/16/2026

District 2 Public Health- Epidemiology Department
Phone: 770-535-5864 **Fax:** 770-535-5848
Web: https://phdistrict2.org/epidemiology/

Viral Respiratory Diseases Surveillance

Pan-Respiratory Virus Surveillance (Georgia - Last Updated 02/11/2026)

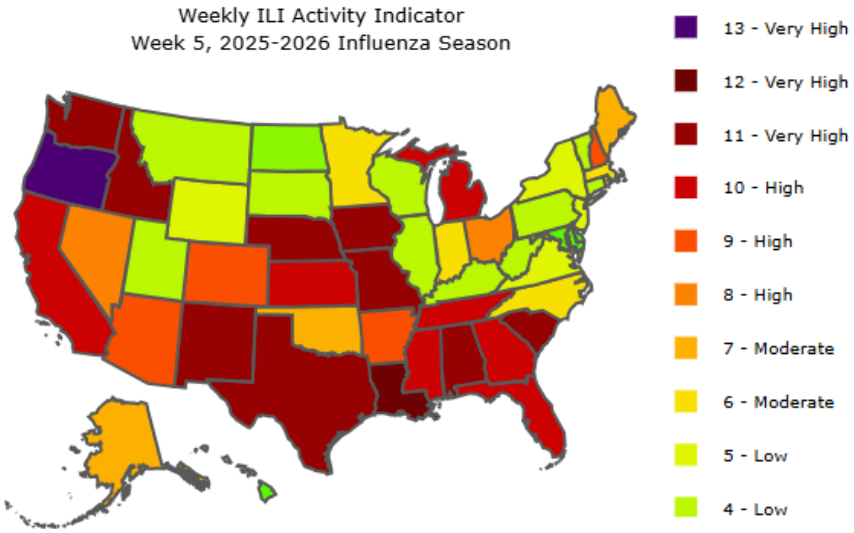


The graph above shows the percentage of emergency department visits that are for symptoms or diagnoses of COVID-19, RSV, Flu, and all three combined. The data gives us an early indication of trends in respiratory illnesses in the community and potential burden on emergency departments in Georgia. As of 02/11/2026, the graph shows increasing levels of influenza and all respiratory illnesses combined.

Georgia Flu Surveillance Update: Week 5 (Ending 02/07/2026)

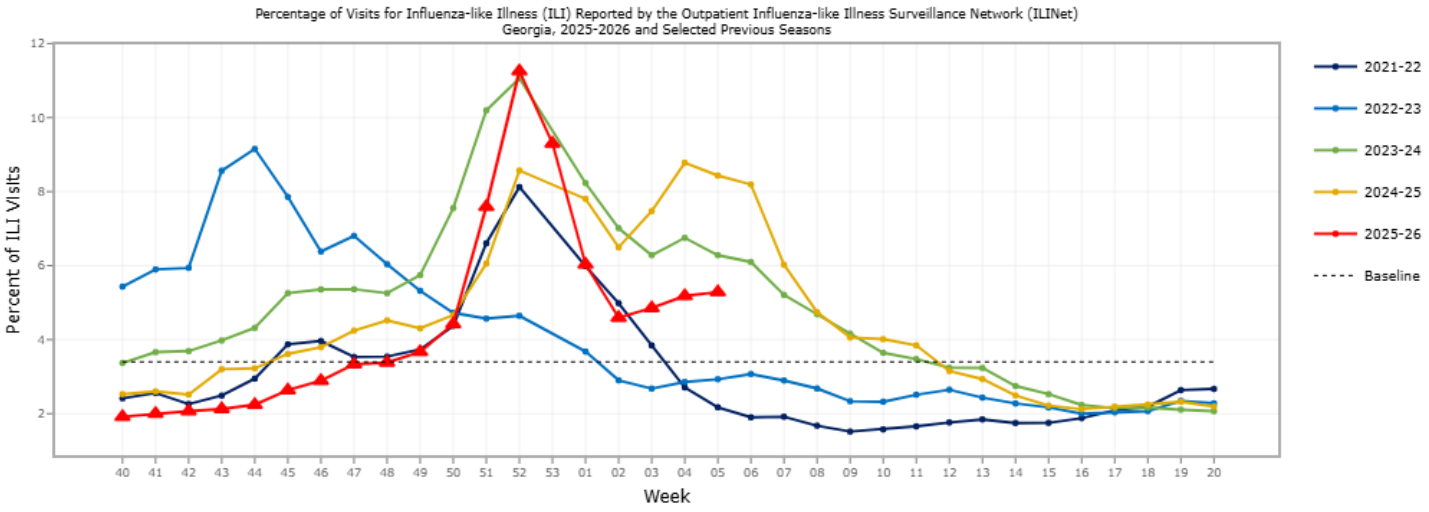
As of Week 5, Georgia flu activity was **high** (10 on the scale of 1-13). Activity levels are based on the percent of outpatient visits in Georgia due to influenza-like illness (ILI) during this timeframe.

For the corresponding week, the percentage of outpatient visits for influenza-like illness was 5.3% (which is above the regional baseline of 3.4%), the number of influenza-associated deaths was 1 (167 total for the current ILI season); the number of Metro Area Influenza Hospitalizations was 83 (3,341 total for current flu season); and the number of influenza outbreaks was 10 (135 total for current flu season).



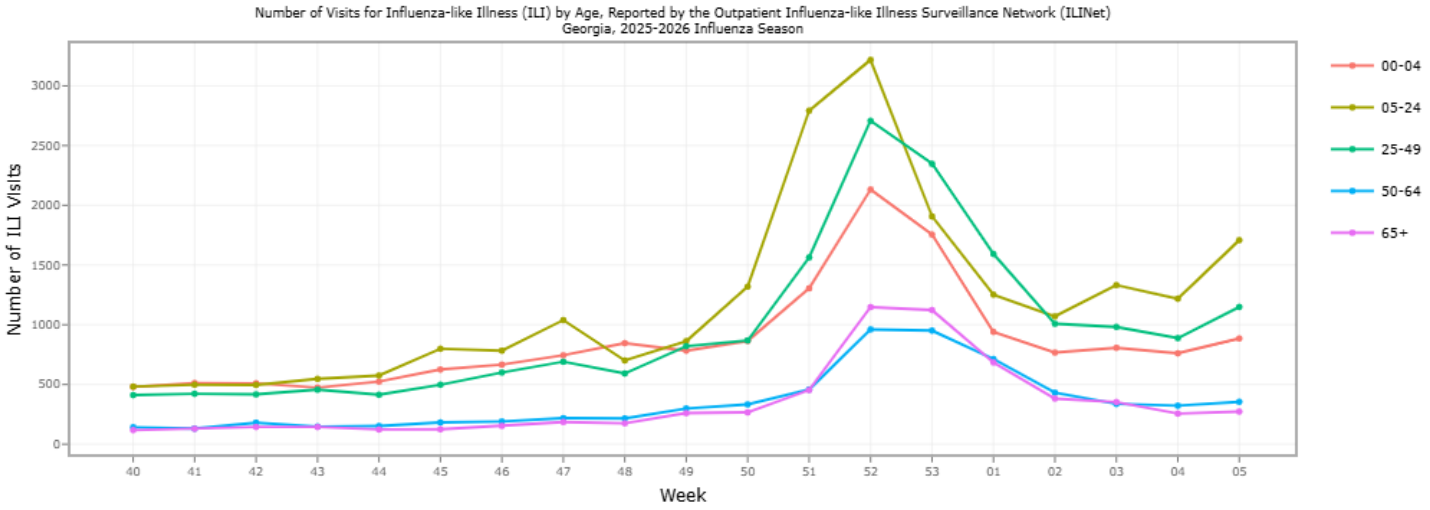
The map shows influenza-like cases in the southern US region. Georgia activity indicator level is at 10 (**high**) on week 5, as shown in bright red above.

ILI (Influenza-Like Illness) Percentages by Season



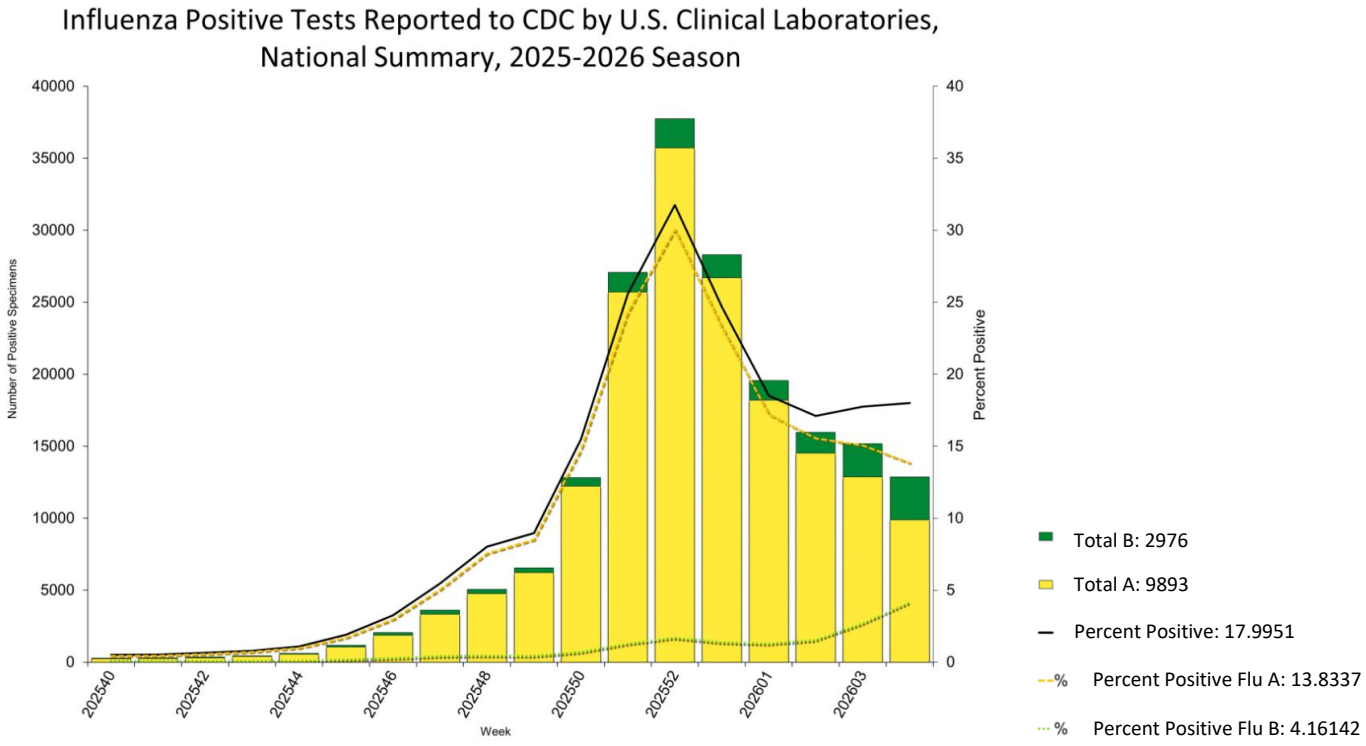
The graph shows a snapshot of flu in Georgia compared to previous years. The graph shows a slight increase in ILI percentage during week 5 compared to the previous week 4 in the current season. The percentage of ILI visits for week 5 is also higher compared to the same time in 2021-2022 and 2022-2023 but lower than the same time in 2023-2024 and 2024-2025.

ILI (Influenza-like Illness) Percentages by Age



Between week 4 and week 5, the graph above now shows an increase in ILI cases for all age groups, with the highest increases appearing to be in age groups 5-24 and 25-29.

Influenza-Positive Tests Reported to CDC by Clinical Laboratories, HHS Region 4, 2025-2026 Season, Week Ending 01/31/2026*



The above graph shows influenza tests reported to CDC in HHS Region 4 (which includes Georgia) for the week ending in 01/31/2026. Total A was 9893 (13.8337% positive shown in dotted yellow), Total B was 2976 (4.16142% positive shown in dotted green), and total number tested was 71,514 (17.9951% positive shown in black line).

COVID-19 Snapshot (01/10/2026)*

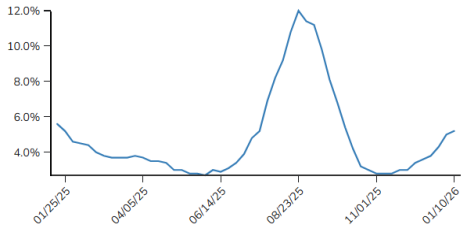


Figure 1: Percent Test Positivity - 5.2%

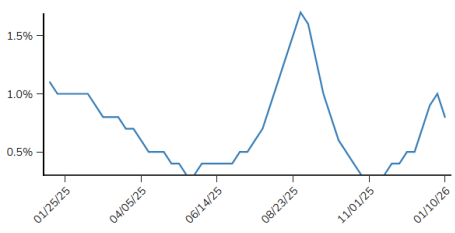


Figure 2: Percent ED Visits Diagnosed as COVID-19 – 0.8%

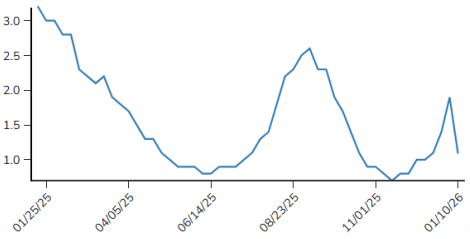
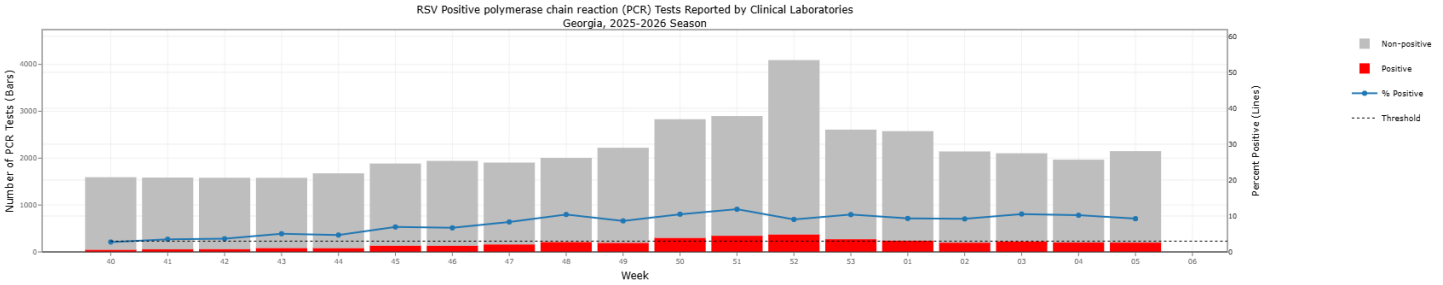


Figure 3: Hospitalization Rate per 100,000 Population – 1.1%

Figures 1 (percent test positivity) and 2 (percentage of total emergency department visits) 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 01/18/2026 to 02/14/2026, the SARS-CoV2 subvariant Omicron XFG was responsible for 29% of all cases in the U.S., followed by the subvariant Omicron NB.1.8.1 with 21%.**

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 5, clinical laboratories in Georgia reported testing 4 (25% positive) antigen specimens and 2,150 (9.3% positive) PCR specimens.



For week 5 ILI reporting, the graph above shows 199 (9.3%) positive detections for RSV polymerase chain reaction (PCR) tests reported by clinical laboratories**.** In other words, **of the 2,150 specimens used to test for RSV via PCR in week 5, 199 (9.3%) of those specimens came back positive for RSV**.

***These graphs were last updated in January due to lapses in government funding.**

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.