This report describes current trends in suburban Cook County for COVID-19, influenza, and RSV. Selected graphics are presented on pages 2-4. For complete surveillance data on these pathogens, please visit our respiratory dashboard.

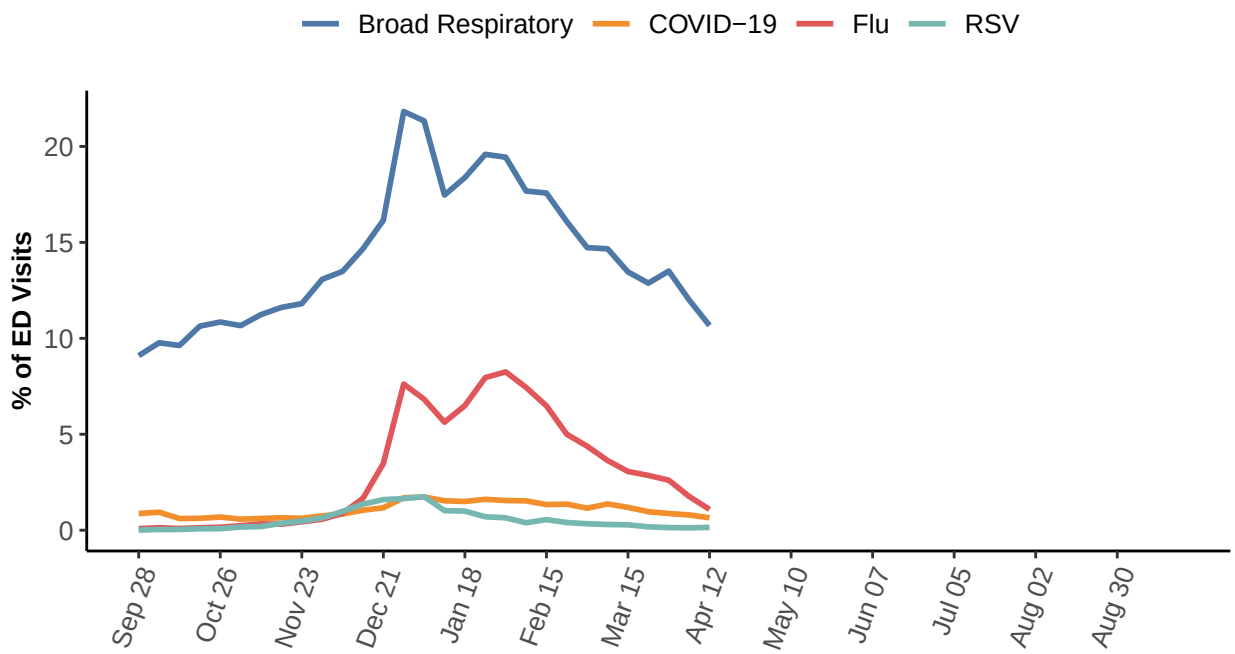
Key Points

COVID-19 activity is **minimal** and decreasing. **Influenza** activity is **low** and decreasing. **RSV** activity is **low** and stable.

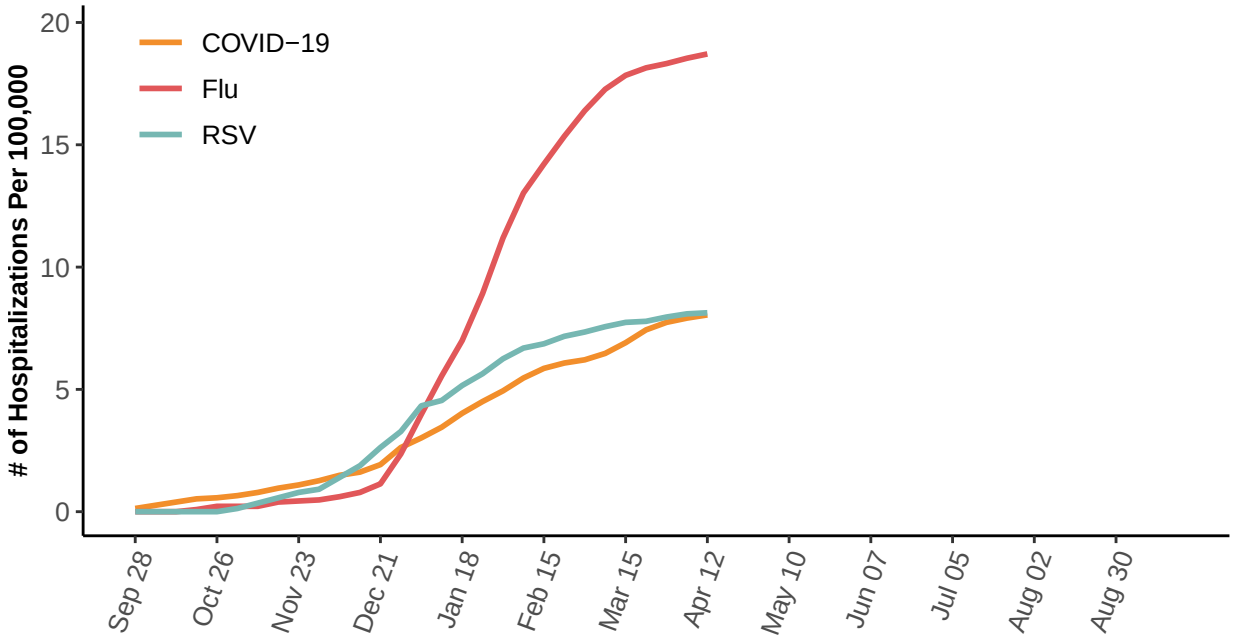
- Flu is low and continues to trend down. RSV activity is also low and COVID-19 activity is minimal.
- Emergency room visits and hospital admissions for all three monitored pathogens are trending down and are on par with levels seen at this time last season.
- ICU admissions for flu, COVID-19 and RSV are starting to approach baseline levels. The rate of ICU admissions for COVID-19 and influenza is highest in adults over 65, followed by children under 5.
- Percent positivity for flu decreased from 7.6% last week to 5.2% this week. Of specimens tested for RSV, 1.2% were positive, and 3.4% of COVID-19 specimens were positive.
- This season, among positive flu A specimens with influenza subtype available, 65% were pandemic 2009 H1N1 and 35% were H3N2. Detections of flu B increased in February and March, but are now decreasing.
- Wastewater detections for all monitored pathogens are either stable or decreasing.
- Wastewater sequencing data for SARS-CoV-2 indicate a variety of JN.1 sub-lineages are co-circulating, primarily LP.8.1.
- CDC's core recommendations for *individuals* include staying up to date with all recommended respiratory virus vaccines, practicing good respiratory hygiene (covering your cough, washing your hands), taking steps for cleaner air, and using precautions to prevent the spread of respiratory viruses when you are sick. This means staying home until you've been fever-free for 24 hours and your symptoms are getting better. CDC also recommends individuals are familiar with treatment options for flu and COVID-19, especially if you are at high risk for severe outcomes.
- CDC's core recommendations for *organizations* include supporting vaccination efforts (like hosting a clinic or providing time off for vaccination and recovery), encouraging good respiratory hygiene with posters and adequate hand-washing supplies, taking steps for cleaner air, and supporting time off for individuals to stay home when sick or to seek treatment.
- Respiratory activity has likely peaked for the season, though core strategies to prevent illness should be practiced year-round. Other viruses that cause cold-like symptoms, such as rhinovirus and human metapneumovirus, often have increased spread during the spring.

We would like to thank all of our surveillance partners for their help in collecting this information! Additional details on our methods can be found here.

Emergency Rooms Visits by Respiratory Diagnosis

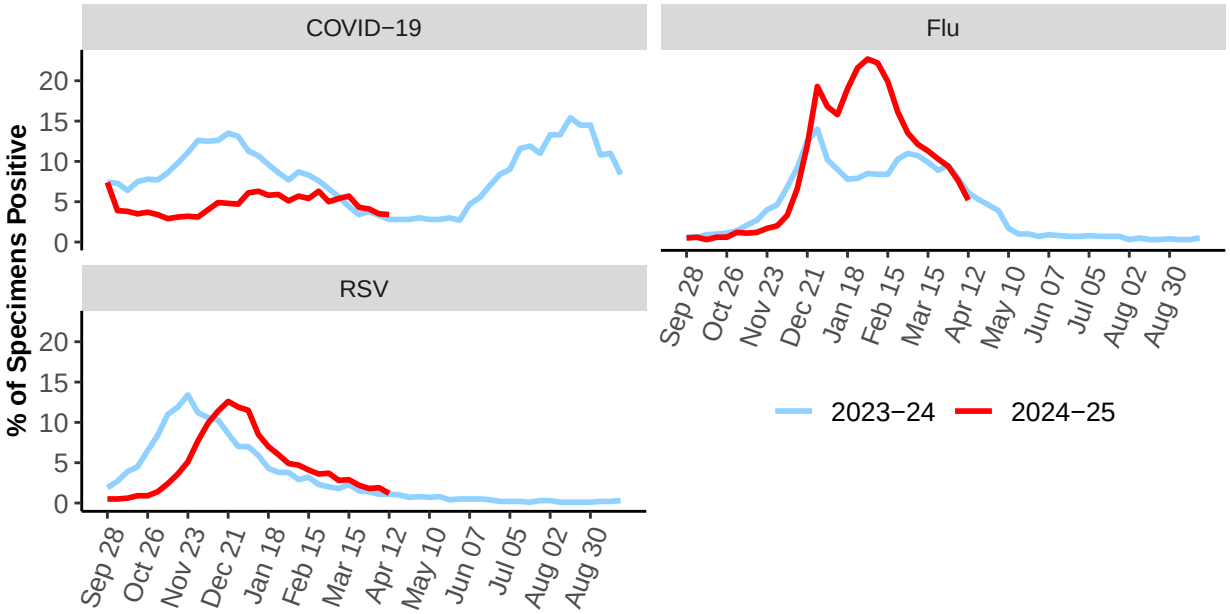


Cumulative ICU Admission Rate for Reportable Respiratory Viruses



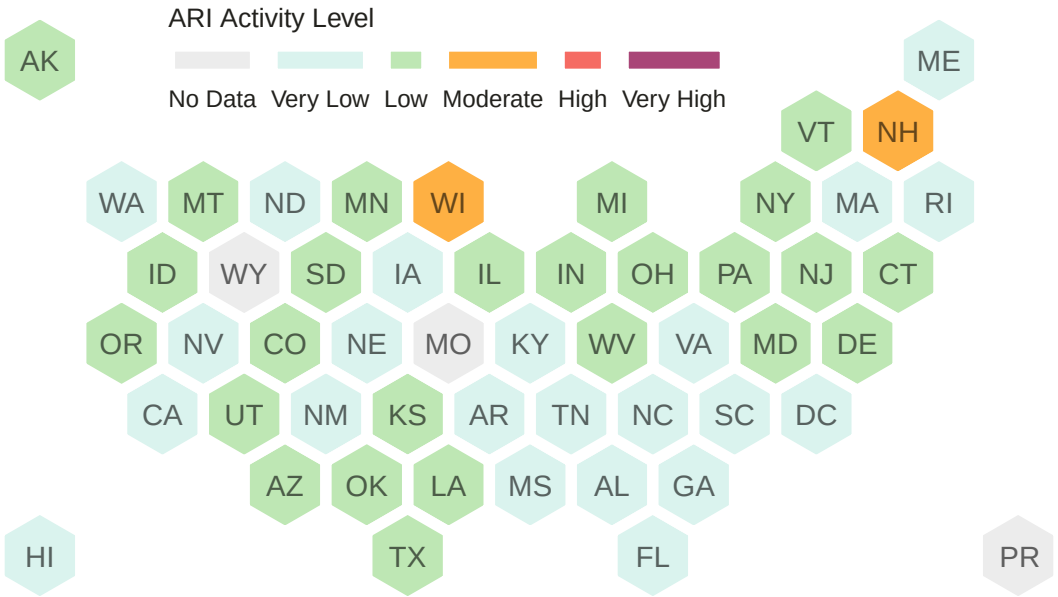
Percent Positivity by Respiratory Virus

Laboratories contributing data differ by pathogen. Lab data may not be comparable between viruses. Graphics are better used to look at trajectory for a given virus over time.

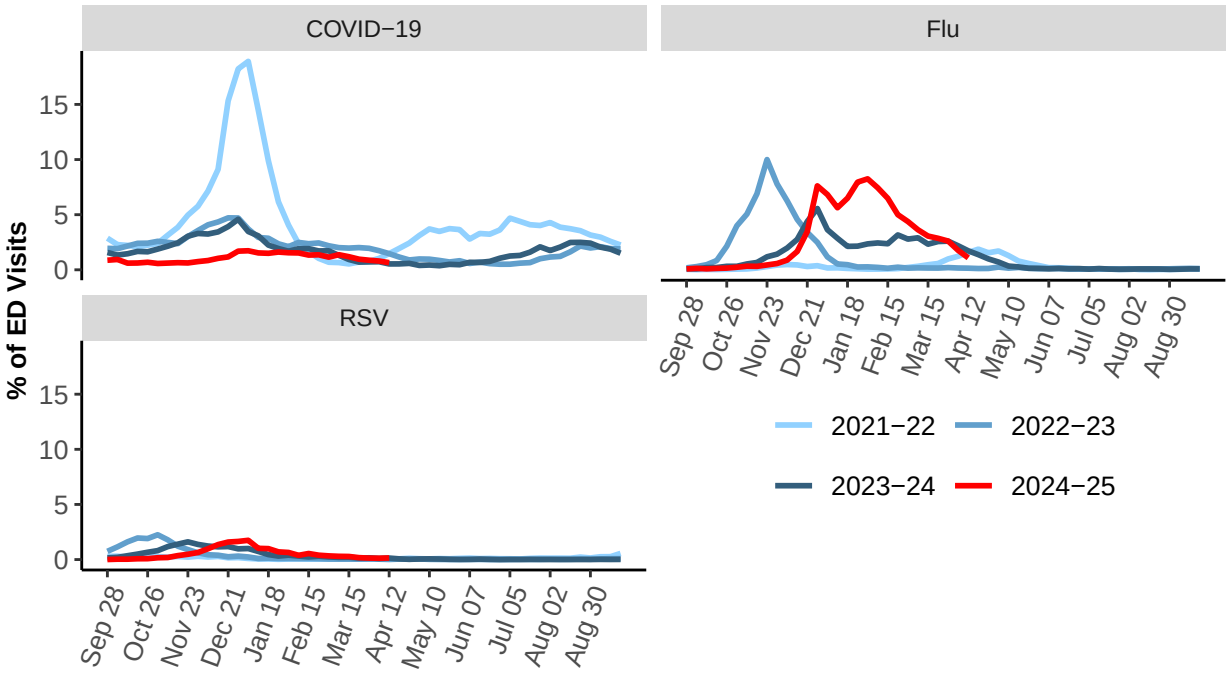


CDC Acute Respiratory Illness Activity Levels by State

Data for the week ending 2025-04-12, most recent CDC data available



Emergency Rooms Visits by Season and Diagnosis



Emergency Room Visits by Age and Diagnosis