

RESPIRATORY VIRUS SURVEILLANCE REPORT

Week 21: May 24-May 30, 2026



Cook County DEPT. of Public Health

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Purpose: 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, Influenza, RSV

- COVID-19 and flu activity remain minimal, and RSV activity remains low.
- RSV indicators continued to decline this week. Most metrics are now at or below the levels they were at this time last year.
- All flu indicators are nearing summer baseline levels, although an ICU admission was reported for the past week.
- Most COVID-19 indicators remain low, but there has been a slight increase in emergency department visits, hospitalizations, and positive lab tests. ICU admissions continue to be reported.

Is anything else going around?

- Percent positivity for [rhinovirus/enterovirus](#), common cold viruses, continues to be elevated higher than values seen in the fall and in the past few seasons. It is typical for these viruses to have a fall wave and a spring wave.
- [Parainfluenza viruses](#) have a similar seasonality, and lab detections have increased since the beginning of the spring. These viruses are typically mild; some types are associated with croup in young children.
- Detections of [human metapneumovirus](#) (HMPV) are still elevated above baseline, but continue to decrease. HMPV causes symptoms similar to other respiratory viruses but may linger longer.

Recommendations

- Some steps for protection from respiratory viruses should be practiced year-round, regardless of the current activity level. These steps include staying up to date with all recommended respiratory [vac-cines](#), practicing good respiratory hygiene (covering your cough, washing your hands), taking steps for cleaner [air](#), and staying home when you're sick until you've been fever-free for 24 hours and your symptoms are getting better. People who are at [high risk](#) for severe outcomes should be familiar with treatment options for flu and COVID-19. Organizations can support these recommendations by offering time off when employees are sick, hosting vaccination clinics, maintaining adequate ventilation systems, and encouraging good respiratory hygiene with posters and adequate hand-washing supplies. (Note that CDC offers separate, specific guidance for healthcare settings for reducing transmission of [flu](#), [COVID-19](#), and other [pathogens](#)).
- The respiratory season for our primary monitored pathogens - COVID-19, flu, and RSV - is winding down; however, several "common cold" viruses are still circulating above baseline. Residents should continue to focus on year-round prevention activities, such as washing your hands and staying home when sick.

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](#).

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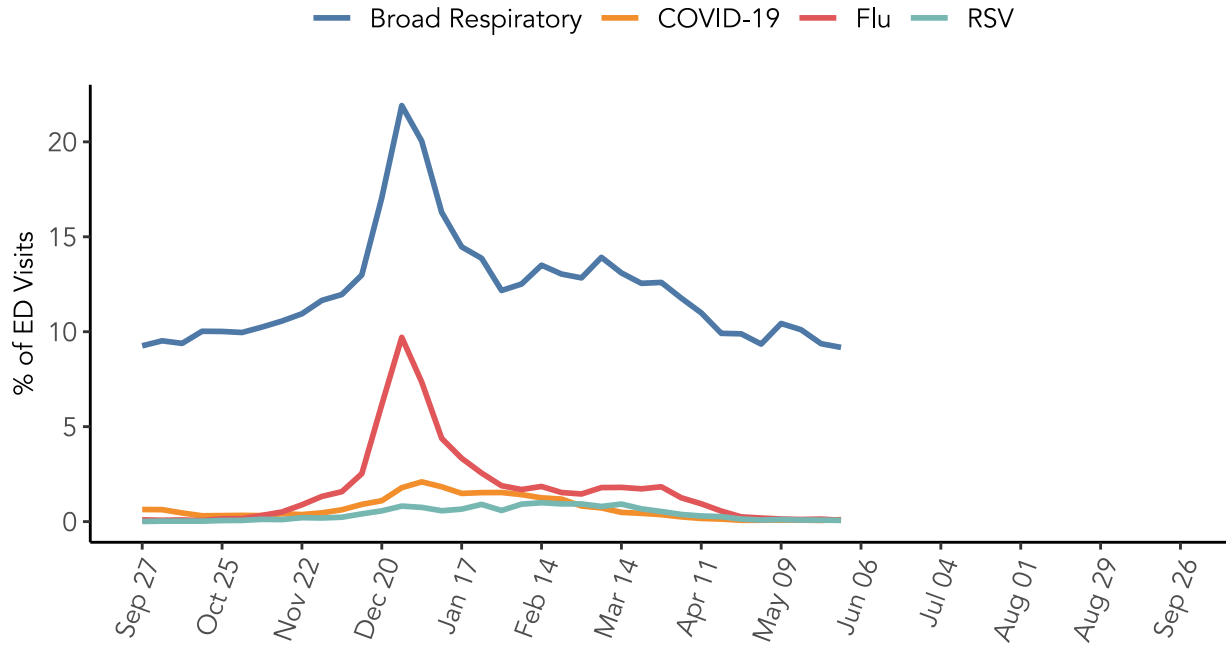
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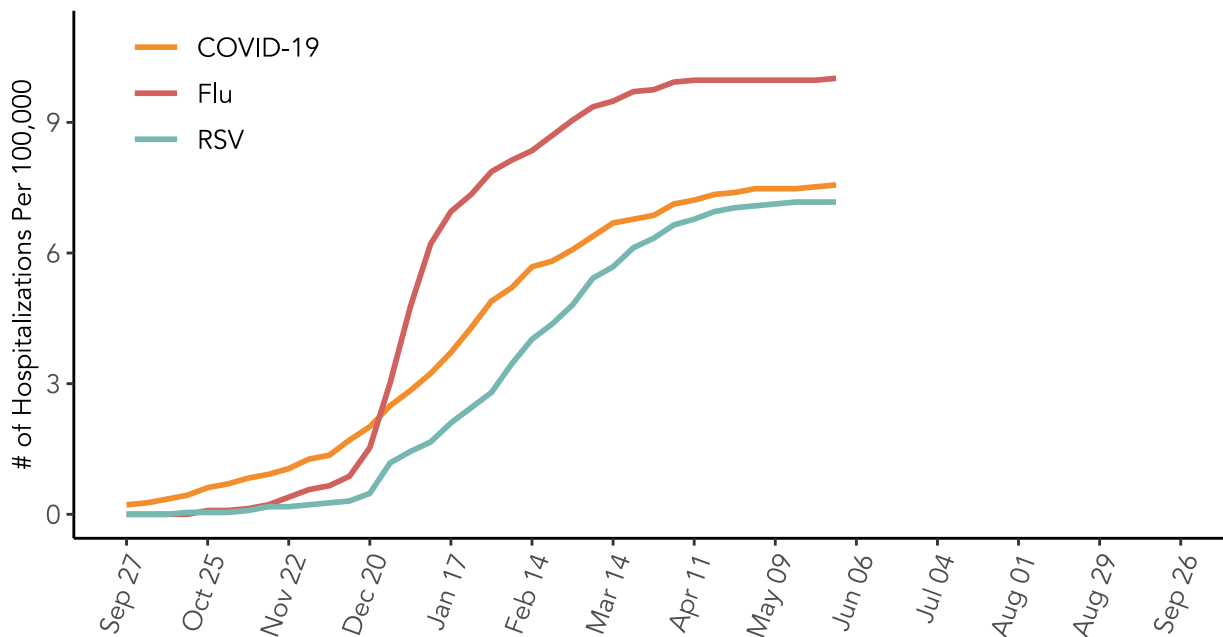
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Emergency Rooms Visits by Respiratory Diagnosis



Cumulative ICU Admission Rate for Reportable Respiratory Viruses



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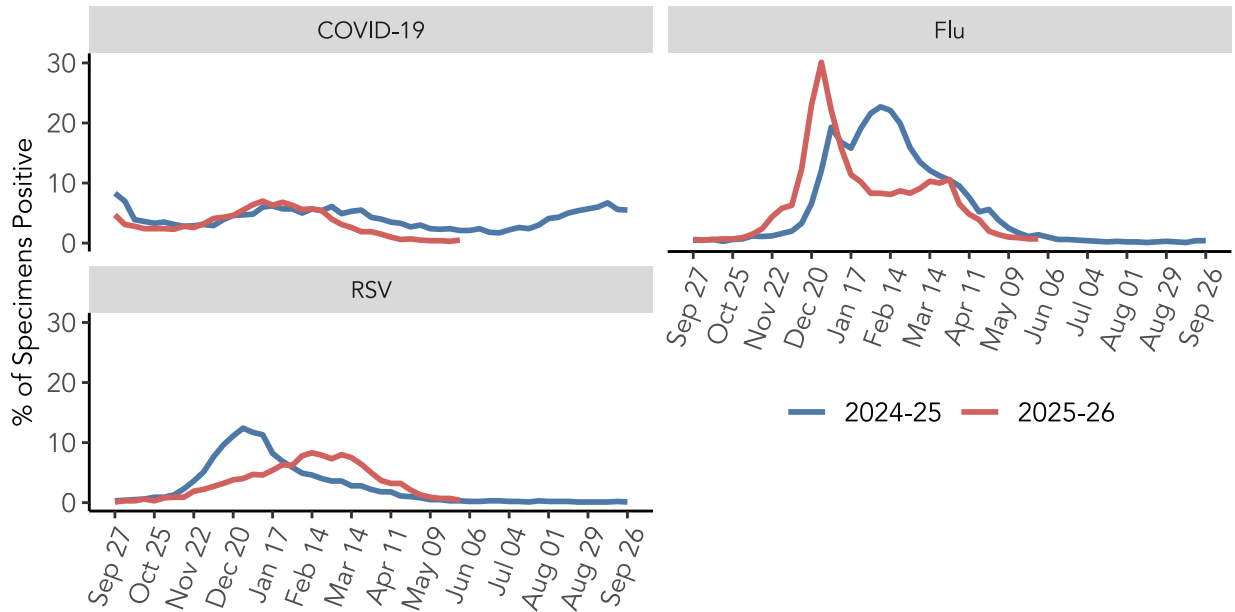


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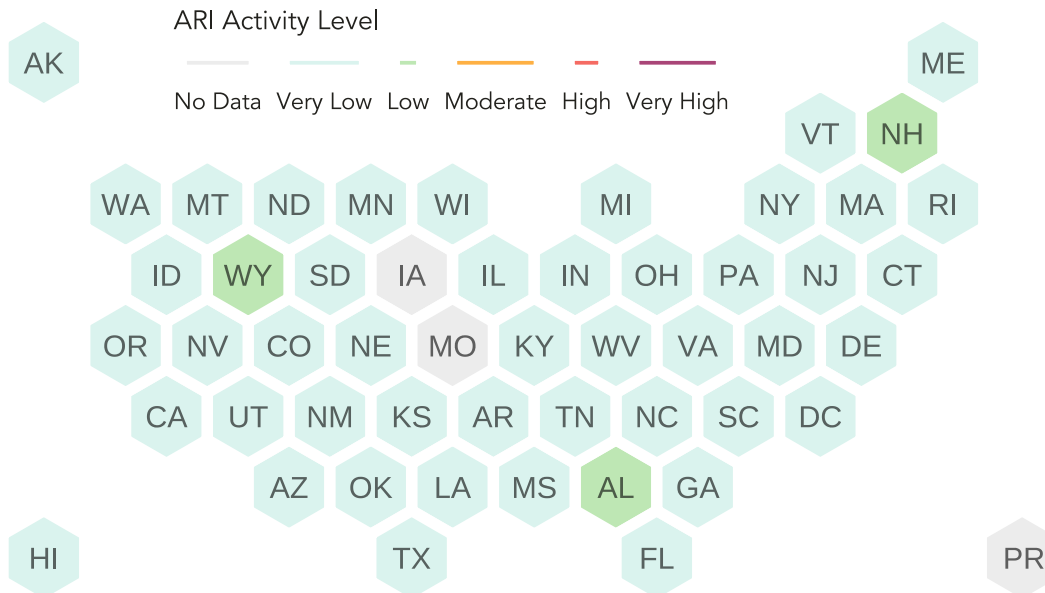
Percent Positivity by Respiratory Virus

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 2026-05-30, most recent CDC data available



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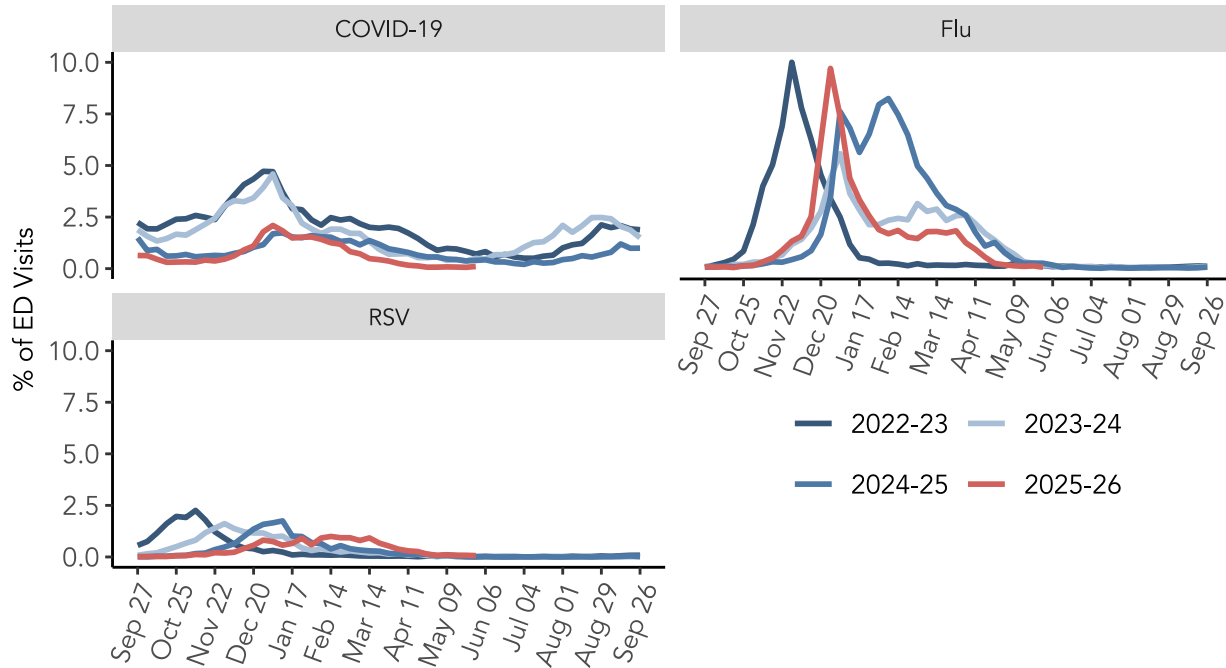
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Emergency Rooms Visits by Season and Diagnosis



Emergency Room Visits by Age and Diagnosis

