

Yale Campus Health Surveillance Report

ALLERGIES

TREE POLLEN	RAGWEED	MOLD	GRASS	DUST AND DANDER
LOW	LOW	LOW	LOW	EXTREME

WEEKLY AQI: FAIR to POOR

Risk of Heat-Related Illness	Who is at risk and what to do?
Little to no risk 0	Minimal elevated risk. Learn more about what to do when it gets hot .
Minor 1	People extremely sensitive to heat, such as older adults with underlying health conditions, should take breaks and drink plenty of fluids.
Moderate 2	People sensitive to heat and healthy individuals working or playing outdoors should take more frequent breaks and drink plenty of fluids.
Major 3	Everyone can be affected and should take breaks and drink plenty of fluids. People sensitive to heat should adjust activities.
Extreme 4	Dangerous for everyone. Everyone should adjust activities, monitor health symptoms, and spend more time in air conditioning.

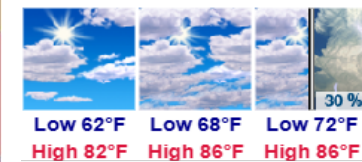
Potential Heat Risks:

Tue	Wed	Thu	Fri
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NWS Forecast:



Sat	Sun	Mon
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WASTEWATER VIRAL ACTIVITY LEVEL IN CONNECTICUT

COVID-19

Very Low
No Change

Flu

Very Low
Decreasing ↘

RSV

Very Low
No Change

EMERGENCY DEPARTMENT VISITS IN NEW HAVEN COUNTY

COVID-19

Low

Flu†

Very Low

RSV

Very Low

Current Health Risks

Yale Health Respiratory Surveillance Data

CT COVID-19

US COVID-19

CT - Influenza

US - Influenza

CT - RSV

Measles

News and Updates



1 July 2025
As of 1200 Hours EDT

YNHH

COVID

- 8 COVID+ INPATIENTS
 - 3 IN THE ICU
 - 0 IN THE ED

RSV

- 1 INPATIENTS
 - 1 IN THE ICU

INFLUENZA

- 0 INPATIENTS
 - 0 IN THE ICU

Respiratory virus
conditions are **LOW**
based on local/regional public health indicators



Masking is
optional
for all staff
and patients.

Masking is
required
for those with
respiratory
symptoms.

Yale HEALTH

LINKS

US FEDERAL GOVERNMENT

- [CDC – COVID-19](#)
- [CDC A\(H5N1\) BIRD FLU RESPONSE UPDATE](#)
- [CDC- TICKS](#)
- [CDC HEALTH RISKS](#)
- [CDC HEAT AND HEALTH TRACKER](#)
- [CDC MEASLES](#)
- [CDC MPOX](#)
- [CDC STACKS REPORTS](#)
- [CDC RESPIRATORY ILLNESSES DATA CHANNEL](#)
- [USDA - AVIAN INFLUENZAS](#)
- [FEMA – FEMA](#)
- [NWS – HEATRISK](#)

PORTALS, BLOGS, AND RESOURCES

- [CIDRAP](#)
- [FORCE OF INFECTION](#)
- [KHN](#)
- [MEDPAGE TODAY](#)
- [OUTBREAK](#)
- [GCHS](#)
- [CENTER FOR THE STUDY OF TRAUMATIC STRESS](#)
- [YLE](#)
- [NYS GLOBAL HEALTH UPDATE REPORT](#)

NEWS SOURCES

- [NEW YORK TIMES](#)
- [WASHINGTON POST](#)
- [REUTERS](#)
- [CNN](#)
- [NBC CT](#)
- [INSIDE HIGHER ED](#)
- [OUTBREAK NEWS TODAY](#)

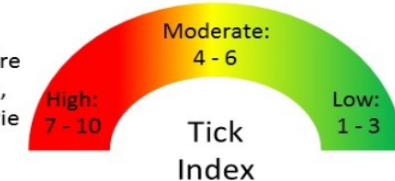
FORDHAM TRI-STATE TICK RISK

10 out of 10: HIGH RISK

[TICK INDEX FOR WEEK OF 6/27/2025](#)

Ticks are fairly abundant.
Use caution.

Limit exposure and use extreme caution. If you're thinking of taking a hike, consider going to a movie instead.



Enjoy the outdoors,
but take precautions.

Current Health Risks

- COVID

- **Nationally:** COVID-19 wastewater activity, emergency department visits and laboratory percent positivity are at very low levels. However, there are indicators that the summer wave is about to begin.
- **Connecticut wastewater levels for COVID-19** are **very low**.
- **Connecticut Covid cases:** Over the past two weeks, there have been:
 - **121** reported cases. This is an increase in cases.
 - **55** reported cases required hospitalization.
 - **0** over the past two weeks. (**351** for the season)
- **YNHH:** On July 1, there were **7** hospitalized cases, with **3** in the ICU

- INFLUENZA

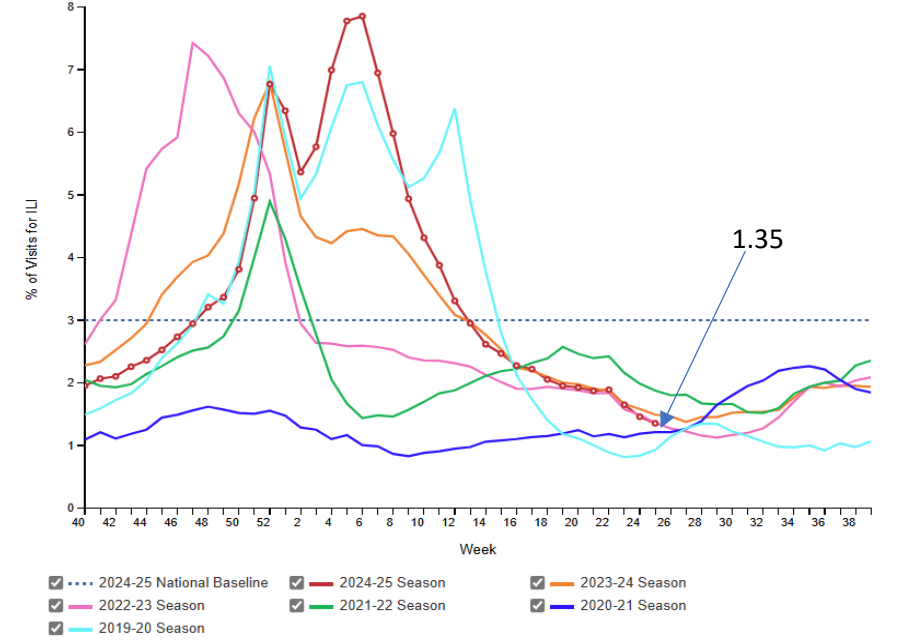
- **Nationally:** Seasonal influenza activity is low. Outpatient visits for influenza-like illness last week were down to 1.35% of all visits.
- **Connecticut wastewater levels for influenza** are **very low** and decreasing.
- **Connecticut influenza cases:** Over the past two weeks, there have been:
 - **44** reported cases
 - **3** hospitalizations
 - **1** deaths (**216** for the season)
- **YNHH:** On July 1, there was **1** hospitalized case, with **0** in the ICU

- RSV

- **Nationally:** RSV activity is very low..
- **Connecticut wastewater levels for RSV** are **very low** and declining.
- **Connecticut RSV cases:** Over the past two weeks, there have been:
 - **5** reported cases
 - **2** hospitalizations
 - No deaths
- **YNHH:** On July 1, there was **1** hospitalized case, with **1** in the ICU

MEASLES - Americans planning to travel outside the country should ensure they're vaccinated against measles, regardless of their destination.

Percentage of Outpatient Visits for Respiratory Illness Reported by The U.S. Outpatient Influenza-like Illness Surveillance Network (Week 25, Ending (6/21/2025))



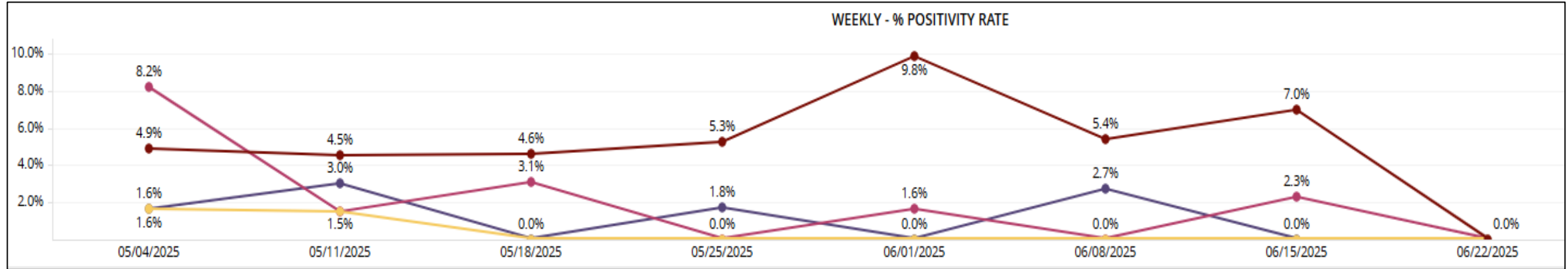
- The CDC has classified the 2024-2025 flu season as a high-severity season for all age groups. This is the first high-severity season since the 2017-2018 season.
- **251 pediatric deaths are associated with seasonal influenza this year.** This exceeds the previous high reported for a regular (non-pandemic) season. The previous high of 207 was reported during the 2023-2024 season. 90% of those who died had not received the flu shot.

Influenza Season Metrics, CDC, 2024-2025 Season			
Estimated Infections	Estimated Hospitalizations	Estimated Deaths	Pediatric Deaths
47 Million	610,000	27,000	251

Yale Health Respiratory Surveillance Data

Yale Health Surveillance Data – May 4, 2025, through June 28, 2025

The following test positivity data represents trends for patients seen at Yale Health in the past 8 weeks and may not reflect trends and positivity rates of the general population outside of Yale Health. Data for the current week are incomplete and subject to change.



POC CHPHEID Components: ■ SARS COV-1 (Covid-19) | ■ RSV | ■ Influenza A | ■ Influenza B

What to Know for the Summer Virus Season

Respiratory viruses like flu, COVID-19, and respiratory syncytial virus (RSV), remain important public health threats. CDC estimates that there have been at least 40 million illnesses, 520,000 hospitalizations, and 22,000 deaths from flu so far this season. Additionally, RSV is a leading cause of infant hospitalization in the United States.

Vaccination is a core strategy for lowering your risk of hospitalization, long-term health impacts, and death from these viruses. The good news is that you can get these vaccines at the same time.

Home tests for both COVID-19 and flu are available, including some that can test for both flu and COVID-19. Treatments for flu and for COVID-19 can lessen symptoms and shorten the time you are sick

Contact your primary health care provider to ask about available vaccinations or treatment options.

Yale Health

Respiratory Virus Conditions

Based on local/regional public health indicators

LOW

Recommendations

Masking is optional for all staff and patients. Individuals with respiratory symptoms must still wear a mask and may be asked to do so.

Employees in all departments are still required to wear masks when interacting directly with patients who have respiratory symptoms or a chief complaint. Masking is recommended but not required for other patient-facing interactions. Staff should also consider wearing masks if the patient wears one, regardless of their chief complaint.

US Cases: COVID-19

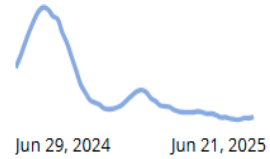
For Week Ending 6/21/2025

Test Positivity >

% Test Positivity

3.0%

Week ending June 21, 2025
Previous week 2.9%

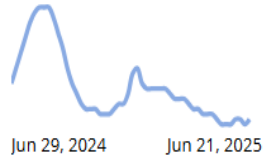


Emergency Department Visits >

% Diagnosed as COVID-19

0.4%

Week ending June 21, 2025
Previous week 0.3%

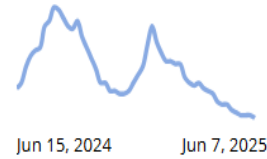


Hospitalizations >

Rate per 100,000 population

0.8

Week ending June 7, 2025
Previous week 0.9

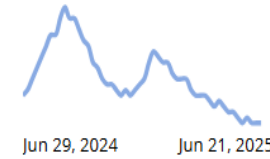


Deaths >

% of All Deaths in U.S. Due to COVID-19

0.3%

Week ending June 21, 2025
Previous week 0.3%



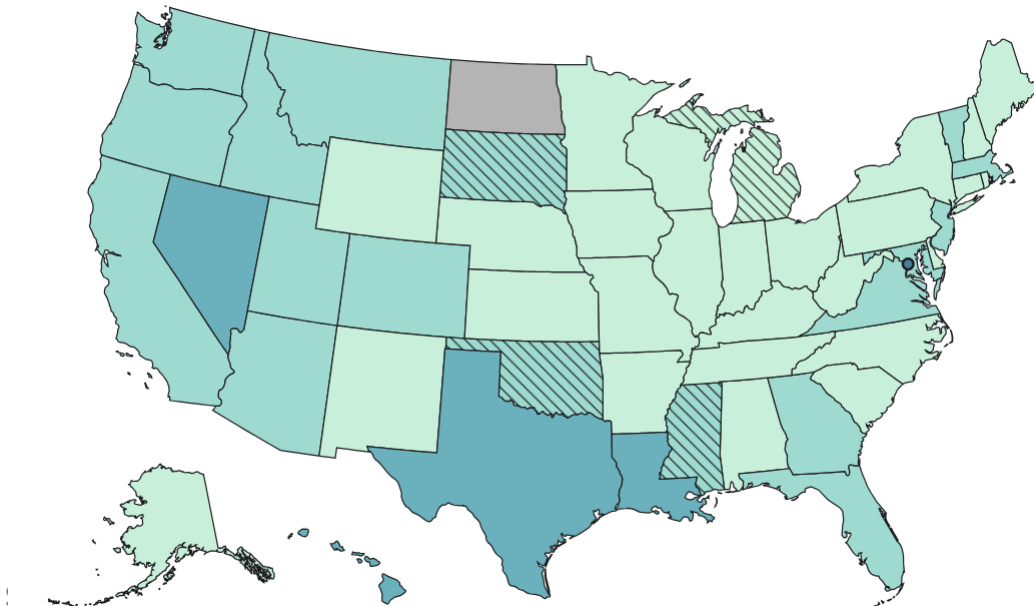
VARIANTS

USA

WHO label	Lineage #	%Total	95%PI	
Omicron	NB.1.8.1	43%	22–67%	
	LP.8.1	31%	22–42%	
	XFG	14%	3–41%	
	XFC	5%	3–8%	
	LF.7.9	3%	2–5%	
	XEC	1%	0–1%	

[CDC](#)

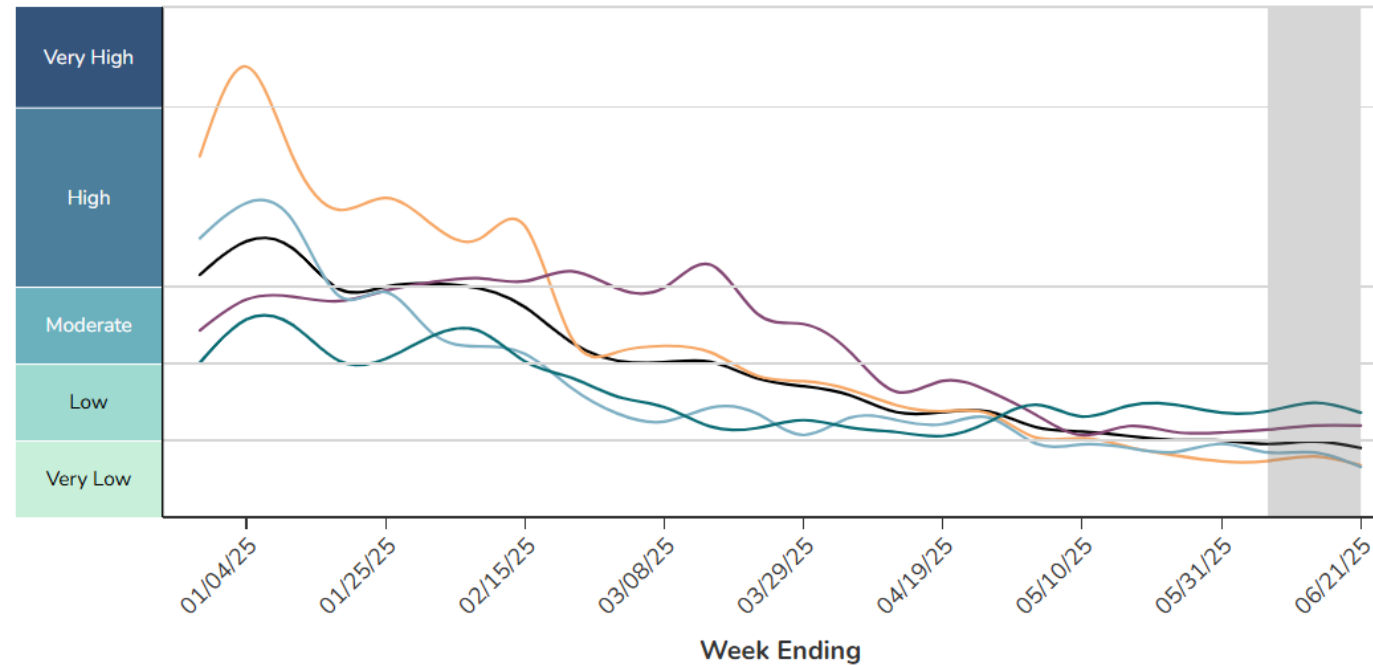
COVID-19 CURRENT WASTEWATER VIRAL ACTIVITY LEVELS MAP 15-21 JUNE



Select a level to add or remove from map.

● Very High ● High ● Moderate ● Low ● Minimal ● No Data ● *Limited Coverage

NATIONAL AND REGIONAL TRENDS



Connecticut Cases: Influenza

For the Week Ending 6/28/2025

Flu Current Week Case Count (Incomplete)

5

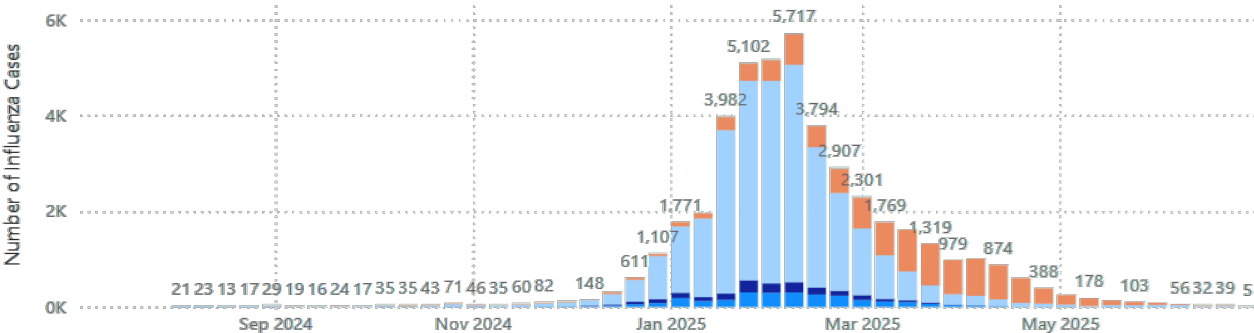
Flu Previous Week Case Count

39

Number of Influenza Cases by Virus Type by Week

Current Week is Incomplete

● A H1N1 ● A H3N2 ● A Unspecified ● B Seasonal ● Unknown



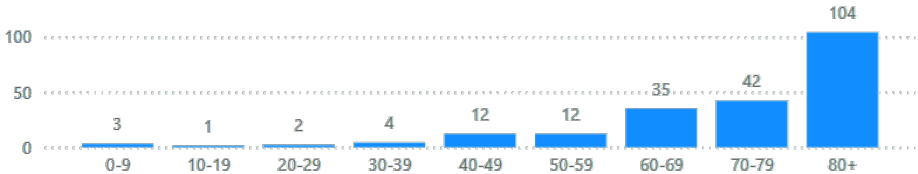
Influenza-Associated Deaths

For the 2024-2025 Viral Respiratory Disease Season

215

Number of Influenza-Associated Deaths by Age Group

● Preliminary Report of Death



Influenza Hospitalizations

Current Week (Incomplete)

0

Previous Week

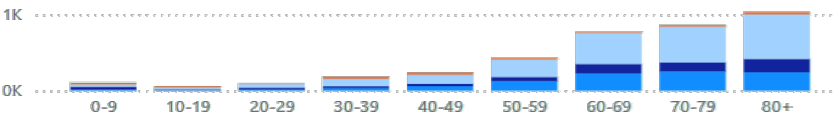
3

Season Total

3,769

Number of Patients Hospitalized with Laboratory-Confirmed Influenza by Age Group and Virus Type

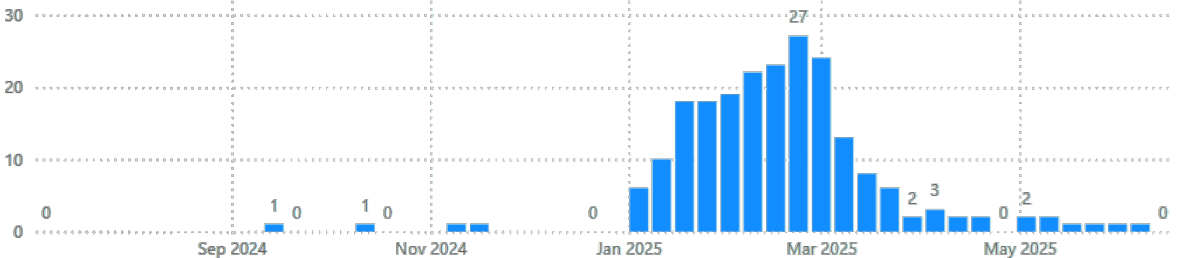
● A H1N1 ● A H3N2 ● A Unspecified ● B Seasonal ● Unknown



Number of Influenza-Associated Deaths per Week

Current Week is Incomplete

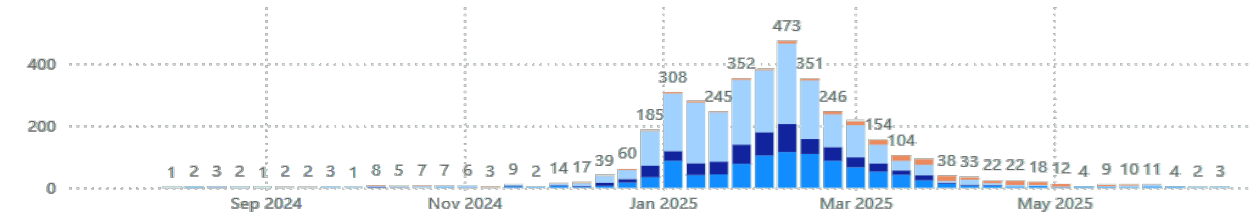
● Preliminary Report of Death



Number of Patients Hospitalized with Laboratory-Confirmed Influenza Virus by Type per Week

Current Week is Incomplete

● A H1N1 ● A H3N2 ● A Unspecified ● B Seasonal ● Unknown

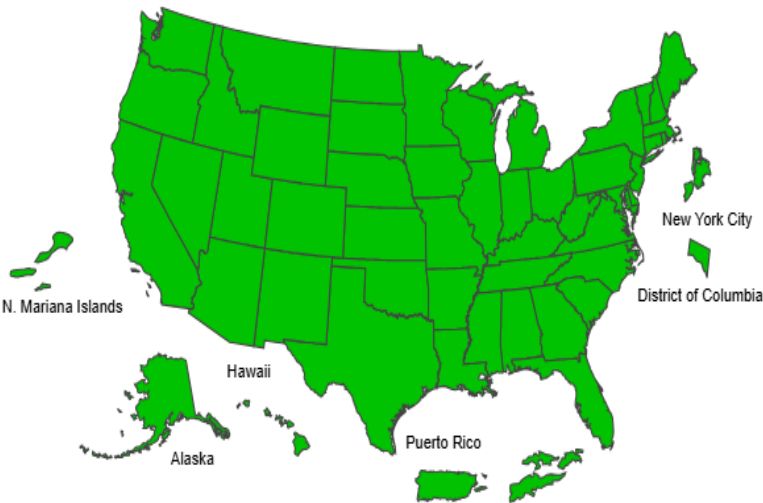
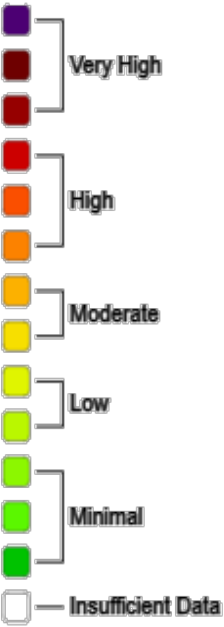


US Cases: Influenza (Week 25)

For the Week Ending 6/21/2025

2024-25 Influenza Season - Week 25 Ending 6/21/2025

ILI Activity Level



[CDC](#)

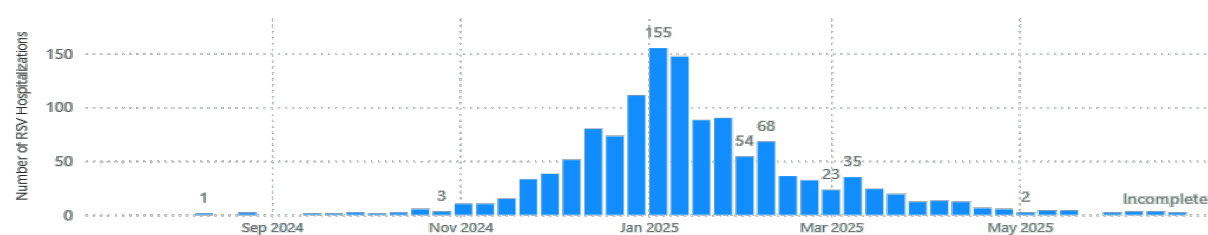
Key Points

- Seasonal influenza (flu) activity is low.
- This season is classified as a high severity season overall and for all age groups (children, adults, older adults) and is the first high severity season since 2017-2018.
- During Week 25, the percentage of visits for respiratory illness reported in ILINet was 4.5% among those 0-4 years, 1.7% among those 5-24 years, 1.1% among those 25-49 years, 0.8% among those 50-64 years, and 0.6% among those 65 years and older.
- No new influenza A(H5) cases were reported to the CDC this week. To date, human-to-human transmission of avian influenza A(H5) virus (H5 bird flu) has not been identified in the United States.
- Nationwide during Week 25, 1.4% of patient visits reported through ILINet were due to respiratory illness that included fever plus a cough or sore throat, also referred to as ILI. Multiple respiratory viruses are co-circulating, and the relative contribution of influenza virus infection to ILI varies by location.
- Based on data from FluSurv-NET, the cumulative hospitalization rate for this season is the highest observed since the 2010-2011 season.
- Five pediatric deaths associated with seasonal influenza virus infection were reported this week, bringing the 2024-2025 season total to **253 pediatric deaths**. So far this season, among children who were eligible for influenza vaccination and with known vaccine status, 90% of reported pediatric deaths have occurred in children who were not fully vaccinated against influenza.

Clinical Labs	Public Health Labs
1.2% (Trend↓) Positive for influenza this week	Influenza A(H1N1)pdm09, A(H3N2), and B viruses were the predominant viruses reported this week.
Outpatient Respiratory Illness	Outpatient Respiratory Illness
1.4% (Trend↓) The number of visits to a healthcare provider this week for respiratory illness	0 moderate jurisdiction 0 high or very high jurisdiction
FluSurv-NET	National Healthcare Safety Network (NHSN) Hospital Respiratory Data
0.4 per 100,000 Current hospitalization rate.	1,228 (Trend↓) Patients admitted to hospitals with influenza this week.
NCHS Mortality	Pediatric Deaths
0.1% (Trend→) Deaths attributed to influenza this week	3 Influenza-associated deaths were reported this week, for a total of 253 deaths this season .

6/21/2025

SOURCE: [CT PH](#)



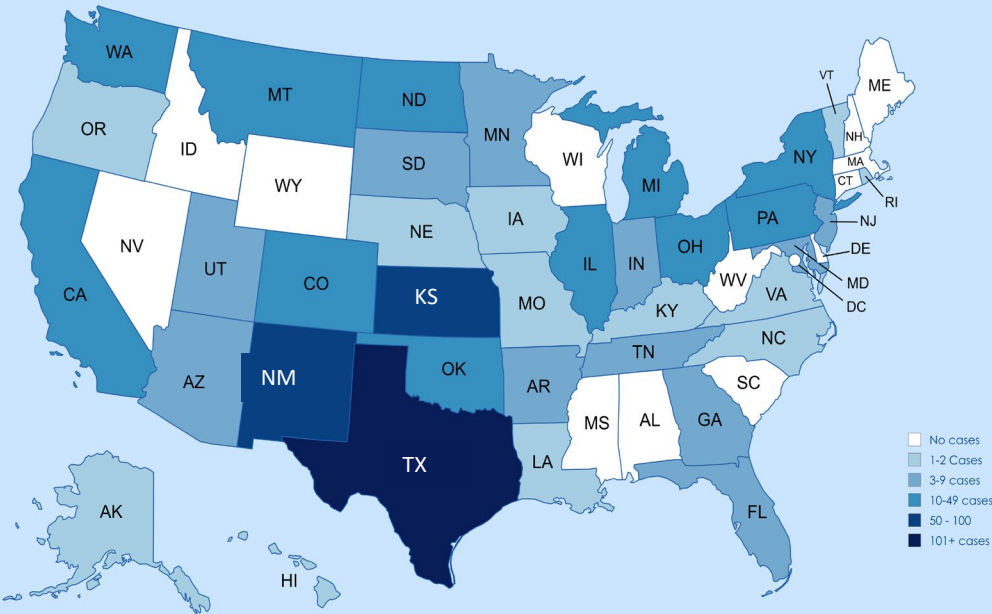
Very High High Moderate Low Very Low No Data *Limited Coverage

CDC

US Measles Outlook

* **NOTE:** The information on this page has been gathered by reviewing data from state and local health departments, news media sources, and the [Center for Outbreak Response Innovation \(CORI\)](#)

1,244*



The increase in measles cases can be attributed to falling vaccination rates and increased importation of travel-related cases, which occur when unvaccinated people acquire measles abroad and bring it back to the U.S.

STATE	CASES
TEXAS **	784
NEW MEXICO	86
KANSAS	80
OHIO	35
NORTH DAKOTA	34
MONTANA	23
OKLAHOMA	20
CALIFORNIA	17
COLORADO	16
MICHIGAN	16
PENNSYLVANIA	15
NEW YORK	13
ILLINOIS	10
WASHINGTON	10
ARKANSAS	8
INDIANA	8
UTAH	7
GEORGIA	6
IOWA	6
KENTUCKY	6
TENNESSEE	6
MINNESOTA	5
ARIZONA	4
SOUTH DAKOTA	4
FLORIDA	3
MARYLAND	3
NEW JERSEY	3
VIRGINIA	3
ALASKA	2
HAWAII	2
LOUISIANA	2
MISSOURI	2
NEBRASKA	1
NORTH CAROLINA	1
OREGON	1
RHODE ISLAND	1
VERMONT	1
TOTAL	1,244

OUTBREAKS

- SMALL OUTBREAK (3-9)
- MEDIUM OUTBREAK (10 - 49)
- LARGE OUTBREAK (50 OR MORE)

An outbreak of measles is defined as three or more laboratory-confirmed cases that are temporally related and epidemiologically or virologically linked.

As of 1800 hours on June 20, 2025, EDT, there are approximately 1,214 measles cases (including confirmed and suspected cases) across 35 states.

This year, there have been at least 23 measles outbreaks. Some listed below:

1. **Texas**, involving [35 counties](#)
2. **New Mexico**, [6 counties](#)
3. **Oklahoma**, and the [Cherokee Nation](#) in Oklahoma
4. [9 counties](#) in **Kansas**
5. Ashtabula and Knox **Counties, Ohio**
6. Erie County, **Pennsylvania**
7. Allen County, **Indiana**
8. Bergen County, **New Jersey**
9. metro Atlanta, **Georgia**
10. Gallatin County, **Montana**
11. Montcalm County, **Michigan** (linked to Ontario Outbreak)
12. Upper Cumberland region, **Tennessee**
13. Williams County, Grand Rapids, **North Dakota**
14. Faulkner County, **Arkansas**

** TEXAS CASES NOT ASSOCIATED WITH OUTBREAK: 34

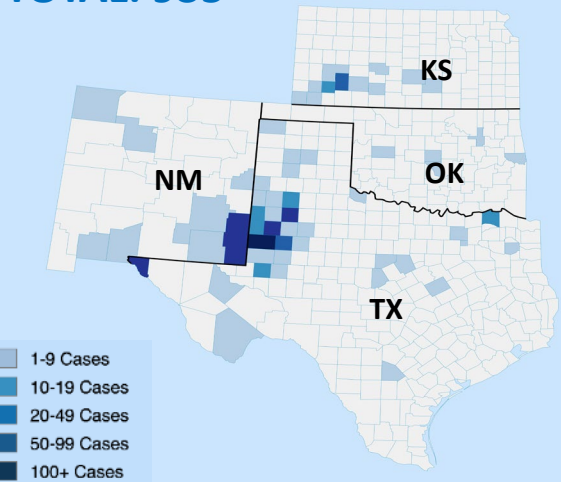
- 1 case – Bell County
- 1 case – Brazoria County
- 3 cases – Collin County
- 1 case – Dallas County
- 2 case – Denton County
- 2 cases – El Paso County
- 1 case – Adult, Fort Bend (travel-related)
- 3 cases – Harris County
- 1 case – Harrison County.
- 1 case – Hays County
- 2 case – Randall County
- 1 case – Adults, Rockwall County (travel-related)
- 1 Case – Scurry County
- 1 case – Shackelford
- 4 cases – Tarrant
- 2 case – Travis County
- 6 cases - Williamson

TEXAS CASES ASSOCIATED WITH THE OUTBREAK: 752

Measles: The Southwest Outbreak

As of 6/27/2025

TOTAL: 935

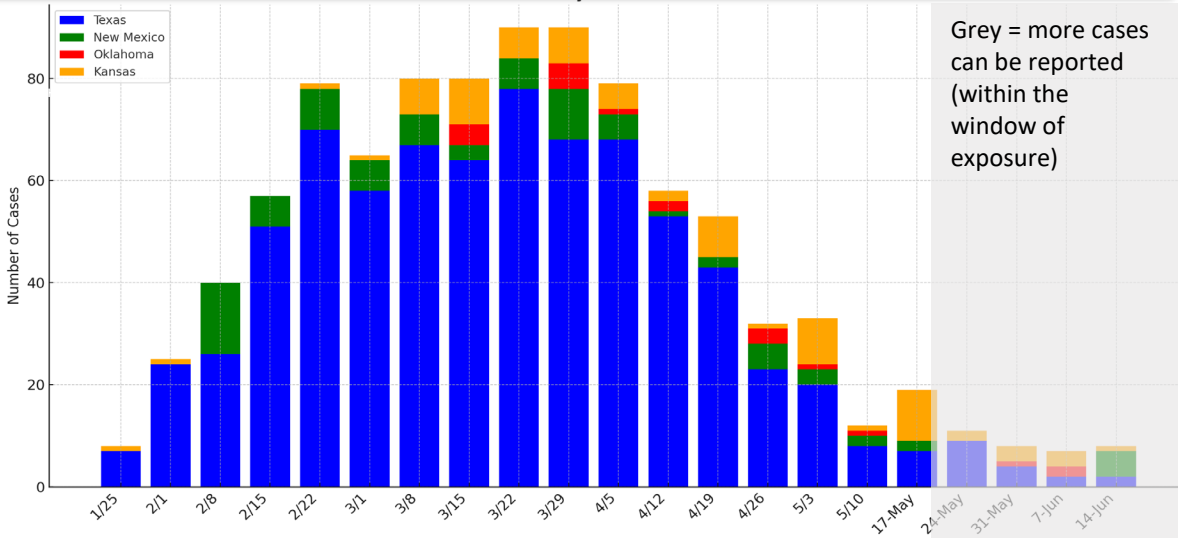


MORBIDITY AND MORTALITY

STATE	CASES	HOSPITALIZATIONS	DEATHS
TX	752 (+2)	97	2
NM	86 (+5)	7	1
OK	20	0	0
KS	77 (+1)	3	0
TOTAL	935 (+8)	107	3

The outbreak in Texas has slowed down. Health officials said less than 1%, or fewer than 10, of the confirmed cases are considered “actively infectious.”

SOUTHWEST MEASLES OUTBREAK – EPI CURVE (WEEK ENDING 6/27/25)



AGE OF CASES

WEST TEXAS OUTBREAK

0-4 Years	5-17 Years	18+ Years	Pending	Total
220 (29%)	284 (38%)	244 (32%)	4 (0.5%)	752

NEW MEXICO OUTBREAK

0-4 Years	5-17 Years	18+ Years	Pending	Total
24 (30%)	20 (25%)	42 (46%)	0	86

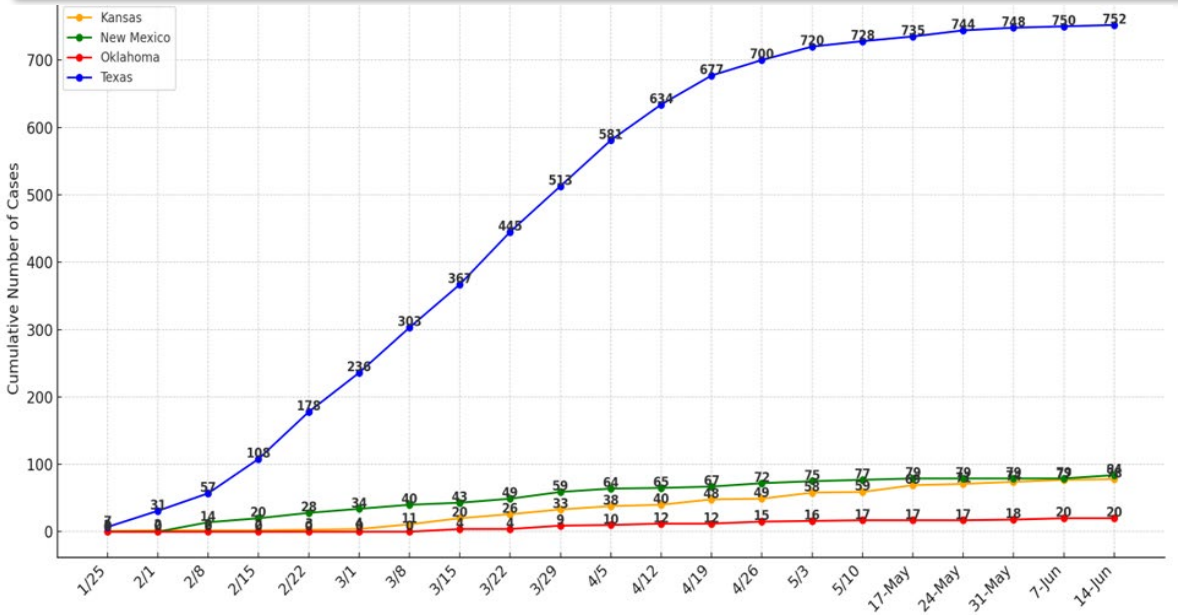
KANSAS OUTBREAK

0-4 Years	5-17 Years	18+ Years	Pending	Total
31 (39%)	34 (45%)	12 (16%)	0	77

OKLAHOMA OUTBREAK

0-4 Years	5-17 Years	18+ Years	Pending	Total
17 Cases Confirmed, 3 Probable – no ages provided			3	20

SOUTHWEST MEASLES OUTBREAK TOTALS OVER TIME (WEEK ENDING 6/27/2025)



News Updates

MEASLES

MEASLES OUTBREAKS: UPDATES ON CASE COUNTS ACROSS THE US - AP: Michigan has its second measles outbreak of the year. Utah has seven cases, and health workers in New Mexico are rushing to contain an outbreak in a county jail. But for the first time in months, Texas confirmed no additional measles cases this week tied to a major outbreak that raged through the late winter and spring. There have been 1,227 confirmed measles cases this year, the Centers for Disease Control and Prevention said Wednesday. (Shastri, 6/27)

COVID

COVID ORIGINS REMAIN A MYSTERY AFTER WHO EXPERT INVESTIGATION - AP: An expert group charged by the World Health Organization to investigate how the COVID-19 pandemic started released its final report Friday, reaching an unsatisfying conclusion: Scientists still aren't sure how the worst health emergency in a century began. At a press briefing on Friday, Marietjie Venter, the group's chair, said that most scientific data supports the hypothesis that the new coronavirus jumped to humans from animals. (Cheng, 6/27)

WHO ADDS XFG TO SARS-COV-2 VARIANTS UNDER MONITORING- CIDRAP: The World Health Organization (WHO) Technical Advisory Group on Virus Evolution (TAG-VE) on June 25 added the XFG to its SARS-CoV-2 variants under monitoring (VUM) list, as global proportions increase rapidly. In its initial risk assessment, the experts said the public health risk is currently low. XFG is one of many offshoots of the JN.1 subvariant, and the earliest sample was collected at the end of January. (Schnirring, 6/27)

VACCINES

CHILDHOOD IMMUNIZATION COVERAGE HAS STALLED GLOBALLY, REPORT REVEALS – CIDRAP: A **new study** of country-level childhood vaccination data for 204 countries and territories worldwide finds that, while overall vaccine coverage doubled against diphtheria, tetanus, pertussis (whooping cough), measles, polio, and tuberculosis from 1980 to 2023, measles vaccination declined in 100 of 204 countries from 2010 to 2019. Furthermore, the study, published yesterday in *The Lancet*, reveals that the COVID-19 pandemic exacerbated challenges to childhood vaccination coverage, especially in certain regions. Global rates for several vaccines declined sharply in 2020 and had not returned to pre-COVID-19 pandemic levels as of 2023. (Soucheray, 6/25/2025)

MODERNA ANNOUNCES PROMISING EFFICACY RESULTS FROM MRNA FLU VACCINE TRIAL – CIDRAP: Moderna reported promising relative vaccine efficacy (rVE) findings from a phase 3 trial of its seasonal mRNA flu vaccine candidate compared to a standard-dose licensed flu vaccine in adults ages 50 years and older. In a **press release**, the company said its candidate flu vaccine, called mRNA 1010, showed superior results, with an rVE of 26.6% in the overall study population (95% confidence interval, 16.7% to 35.4%). Moderna also reported strong rVE against each of the three individual strains: H1N1 (29.6%), H3N2 (22.2%), and B/Victoria (29.1%). It added that subgroup analysis showed a consistently strong rVE point estimate across all age-groups, risk factors, and previous vaccination status. Also, the rVE in people ages 65 years and older was 27.4%. (Schnirring, 6/30/2025)

EXTREME HEAT

[HOW EXTREME HEAT IMPACTS PEOPLE WITH MENTAL ILLNESS - ABC NEWS:](#)

As triple-digit temperatures hit the East Coast, individuals with a mental illness -- specifically those who take prescribed medication -- are at risk for heat intolerance, with psychiatric hospitalizations peaking in the summer months, according to experts. During heat waves or especially warm days, there is often an uptick in the frequency of psychiatric hospitalizations, with one study finding that "higher temperatures may trigger bipolar disorder relapses that require hospital admission, and higher exposures to sunlight may increase the risk of manic episodes."(Forrester, 6/24/2025)

[EXTREME HEAT IS EXACERBATING AIR POLLUTION, A 'DOUBLE WHAMMY' FOR HEALTH – NYT:](#) The heat dome that is scorching [more than 90 million people](#) across the United States this week also threatens to deliver polluted air, something that scientists say is a growing problem on a warming planet. Researchers are increasingly worried about the twin health hazards of extreme heat and pollution, which can amplify each other. As climate change drives up [global temperatures past record](#) levels, the frequency of days when it is [both hot and polluted](#) has also been increasing. Several factors are converging to amplify health risks during sweltering days. Extreme heat can trap polluted air in place, so it does not dissipate. Climate change is making wildfires [more frequent and intense](#), pumping smoke into the atmosphere and contributing to the reversal of [a decades-long trend of air quality improvement](#) in some parts of the United States. Brown, Kelso, 6/24/2025)

TICKS

[HOW BAD ARE TICKS THIS YEAR? DON'T ASK. – NYT:](#) The [Fordham Tick Index](#), which gauges the risk of encountering ticks outdoors in the New York area, redlined last week. It put the risk at 10 on its 10-point scale and added this advice: "If you're thinking of taking a hike, consider going to a movie instead. The tick situation this summer really is that bad, said [Thomas Daniels](#), the director of [Louis Calder Center](#) in Armonk, N.Y., a division of Fordham University. And it was predictable, said [Joellen Lampman](#) of the [Cornell Integrated Pest Management](#) program, because there was a bumper crop of acorns in 2023, more than acorn-eaters like deer, mice and squirrels could gobble up. The rich diet carried them into 2024, when "they had more litters and larger litters," she said, citing research by Richard Ostfeld of the Cary Institute of Ecosystem Studies in Millbrook, N.Y., "so we had more mice running around, more deer and all the things that love to eat the acorns." And the year after that? "An explosion of the things that eat the things that eat the acorns — ticks," Lampman said, adding: "This is that year." Which is why health officials are bracing for more reports of symptoms of tick-borne infections. More than 1,800 new cases of Lyme disease were reported in New York City last year, and another 1,031 people tested positive for the disease after having reported symptoms in earlier years. The city's health department said there were also 143 reports of two other diseases spread by ticks, babesiosis and anaplasmosis, among New York City residents last year.(Barron, 6/23/2025)