Newly Reported COVID-19 Cases in Appleton
by Week, with an Average per Week

New Cases Last 7 Days — Weekly Average New Cases

80 + 55 = 135 *(2 week case counts)*

135 / 75,000 = .000180 *(Appleton population 75,000)*

.000180 x 100,000 = 180 *(equals burden)*

Low less than or equal to 10 per 100,000 people

Moderate greater than 10 but less than 50 per 100,000 people

**Moderately High** greater than 50 but less than 100 per 100,000 people

High is greater than 100 per 100,000 people

Very High is greater than 350 per 100,000 people

Critically High is greater than 1,000 per 100,000 people

Table 1. Two indicators being based on confirmed cases: Burden and Trajectory. A third indicator maps Burden and Trajectory indicators into one composite indicator.

B

T

$T = 0\ (p)$

$B \leq 10$

$10 < B \leq 50$

$50 < B \leq 100$

$100 < B$

$T \leq -10\%$

$p < 0.025$

$10\% \leq T$

$p < 0.025$

| Indicator	Definition	Classes			
Burden	Total number of cases per 100,000 in the last two weeks ( )	Low			
		Moderate			
		Moderately High			
		High	≤ 350		
		Very High	350 < B ≤ 1000		
		Critcally High	1000 < B		
Trajectory	Percent change in the last two weeks ( ), p-value from a test against	Shrinking	and		
		Growing	and		
		Not changing (No Call)	Otherwise		
Case status indicator(Composite of burden and trajectory)	Summary concern based on Burden and Trajectory classifications		Shrinking	No Call	Growing
		Low	Low	Low	Medium
		Moderate	Medium	Medium	High
		Moderately High	Medium	High	High
		High	High	High	High
		Very High	Very High	Very High	Very High
		Critically High	Critcally High	Critcally High	Critcally High
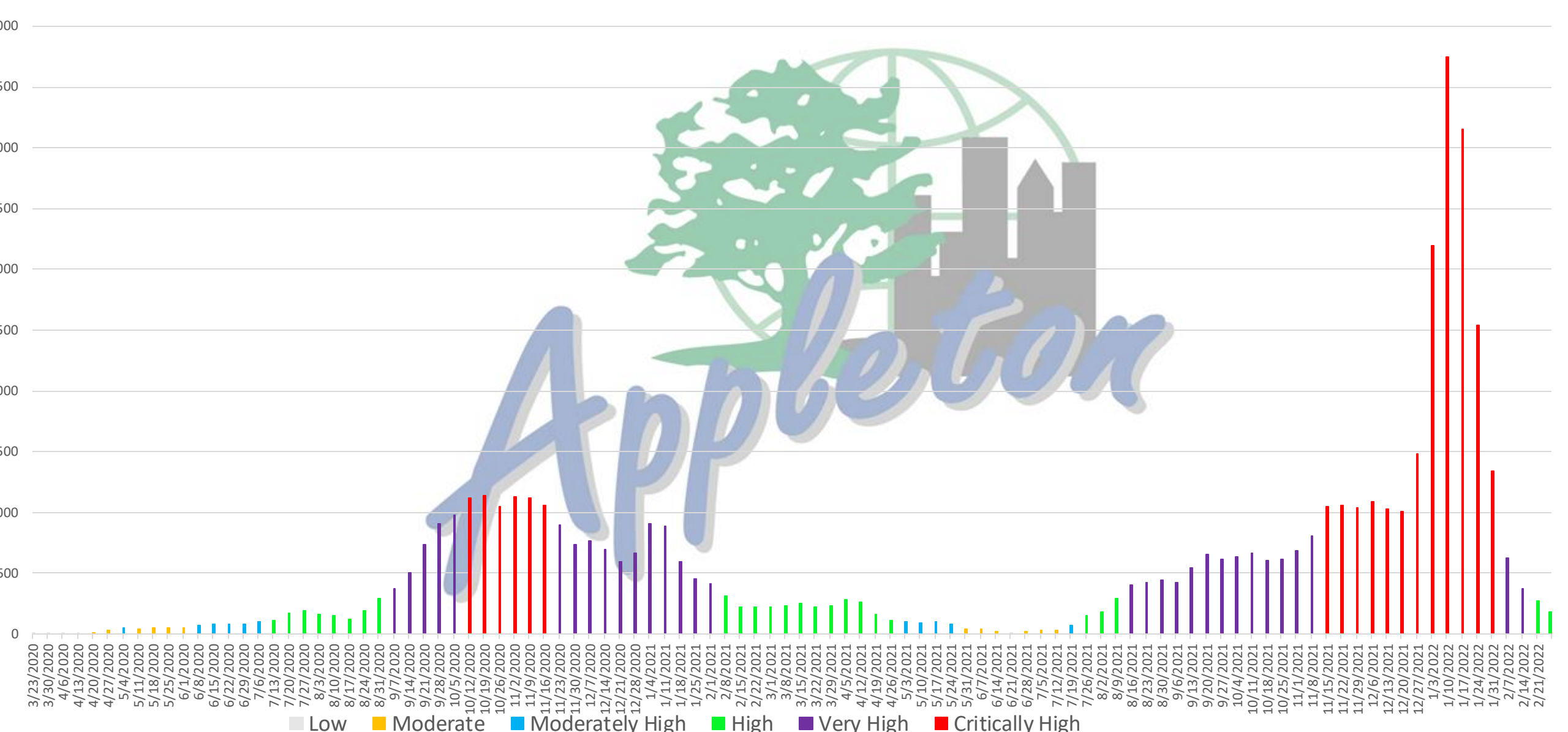
Two Week Total New COVID-19 Cases in Appleton,
Rate per 100,000 Population, Risk Level Assessments per WDHS

COVID-19 Community Levels – Use the Highest Level that Applies to Your Community				
New COVID-19 Cases Per 100,000 people in the past 7 days	Indicators	Low	Medium	High
Fewer than 200	New COVID-19 admissions per 100,000 population (7-day total)	<10.0	10.0-19.9	≥20.0
	Percent of staffed inpatient beds occupied by COVID-19 patients (7-day average)	<10.0%	10.0-14.9%	≥15.0%
200 or more	New COVID-19 admissions per 100,000 population (7-day total)	NA	<10.0	≥10.0
	Proportion of staffed inpatient beds occupied by COVID-19 patients (7-day average)	NA	<10.0%	≥10.0%

Data provided by CDC
Updated: March 3, 2022

Reset Zoom
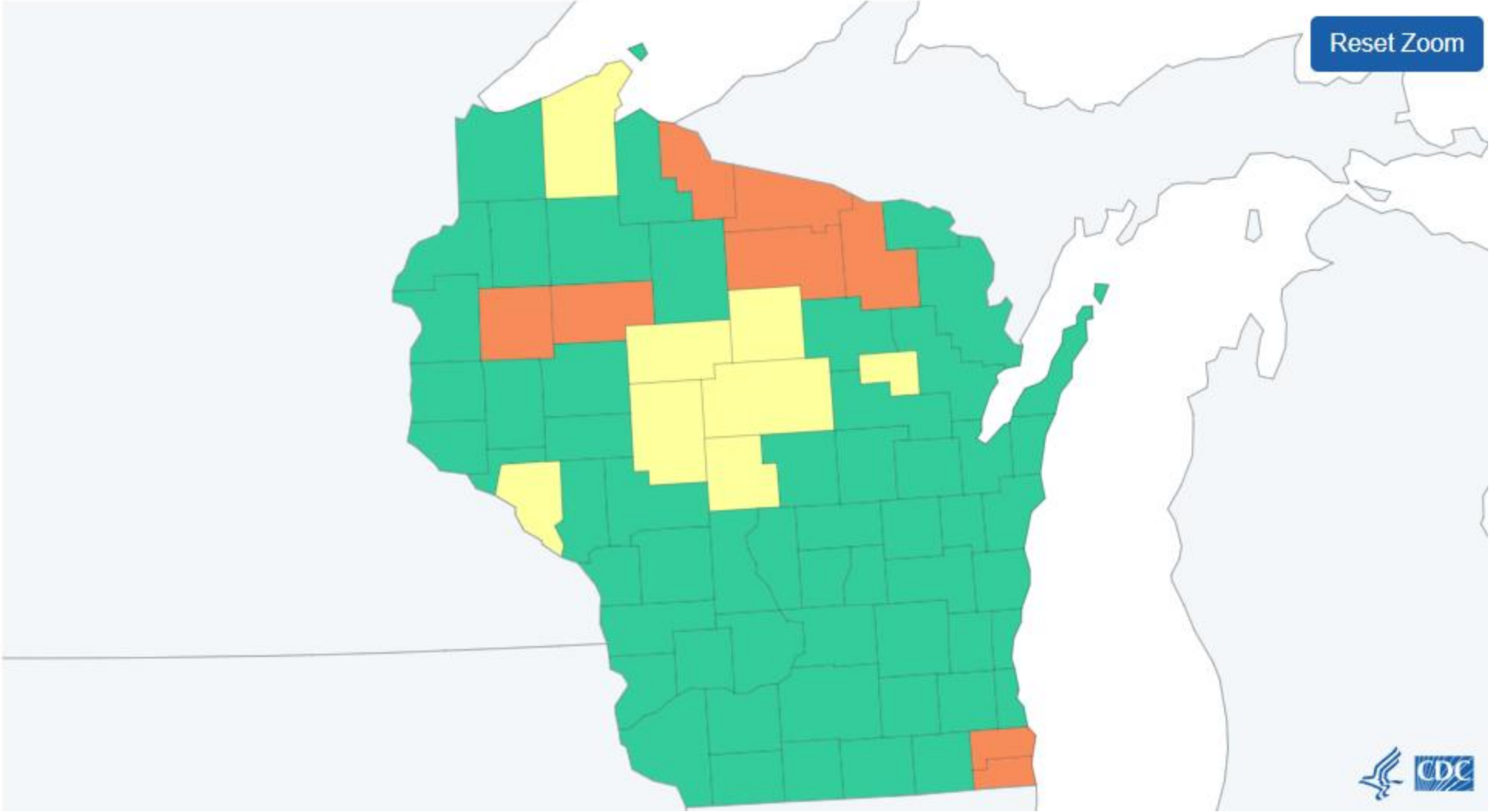
VACCINATIONS TO DATE (03/07/22)

	FULLY VACCINATED	AT LEAST ONE SINGLE DOSE
UNITED STATES	65.1%	76.5%
WISCONSIN	60.5%	64.0%
CALUMET COUNTY	54.5%	56.8%
WINNEBAGO COUNTY	58.9%	62.1%
OUTAGAMIE COUNTY	61.1%	64.0%
CITY OF APPLETON (total pop.)	71.8%	72.9%
APPLETON 12-17 YEARS	64.6%	69.7%
APPLETON 5-11 YEARS	28.5%	33.9%
** 27,485 boosters and/or additional doses of COVID vaccines have been given		

Case Investigation Recommendations

Case investigation can be an effective stand-alone activity to identify and understand cases, clusters, and outbreaks that require health department intervention, and to inform the need for further epidemiologic studies.

Health departments should prioritize investigation of COVID-19 cases, clusters, and outbreaks involving:

- High-risk congregate settings such as long-term care facilities, correctional facilities, and homeless shelters.[1] Investigations should focus on cases with symptom onset or positive test in the preceding 5 days. Cases in these settings should be prioritized to prevent large-scale transmission and severe health outcomes. Case investigation may complement other strategies such as broad-based notification of potential exposure, and support testing and vaccination.
- Unusual clusters of cases, especially if the transmission dynamics, disease course, and disease severity are concerning and not fully understood.
- STLT health department-led case investigation may also be warranted for novel or emerging variants that may pose significant risks for severe disease, hospitalization, or death.

Contact Tracing Recommendations

Contact tracing can be used to interrupt transmission and identify at-risk people for notification and referral to supportive services.

Health departments should prioritize elicitation and notification of close contacts with exposure in the previous 5 days who are identified during the priority investigations listed above, if such information is available, especially:

- People recommended for quarantine (for example those not up to date with COVID-19 vaccines or unvaccinated)
- People at increased risk of severe health outcomes and death, such as those with underlying health conditions, pregnant people, and older adults, as well as those who are in disproportionately affected communities for whom testing and treatment may be indicated

Contact tracing in some of these settings can be challenging. Other strategies such as broad-based notification of potential exposure and testing may be more effective for responding to outbreaks and controlling transmission.