



WISCONSIN DEPARTMENT
of HEALTH SERVICES



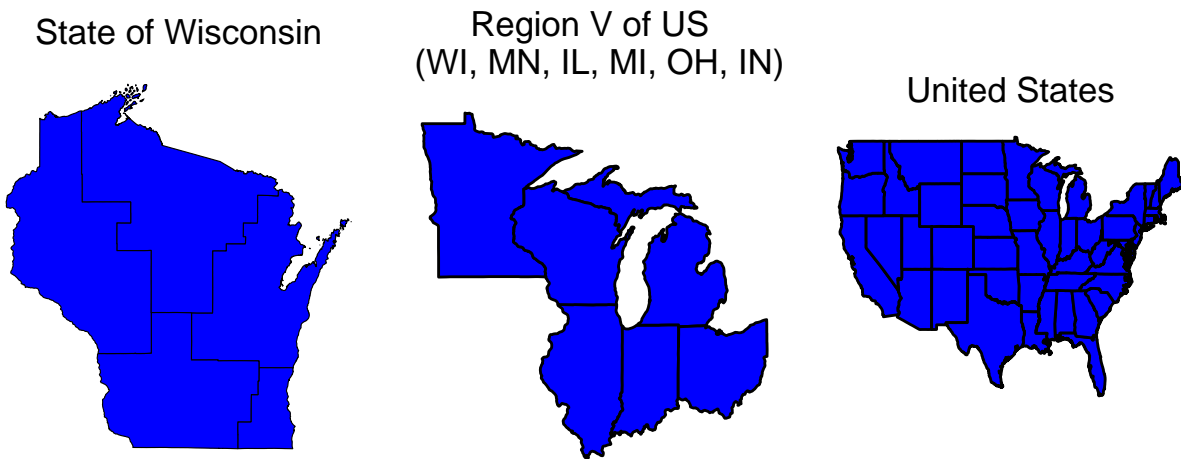
Respiratory Virus Surveillance Report

Week 18, Ending May 3, 2025

Wisconsin Department of Health Services | Division of Public Health |
Bureau of Communicable Diseases | Communicable Diseases Epidemiology Section |
www.dhs.wisconsin.gov/dph/bcd.html | dhsdphbcd@dhs.wi.gov

Influenza-like Illness (ILI) Activity*

CDC data not available for national ILI activity



ILI: High Levels ILI: Moderate Levels ILI: Below Baseline ILI: Insufficient Data

*Wisconsin map data comes from Wisconsin DHS, regional and country-wide data use baselines calculated by CDC.

Weekly Respiratory Virus Data, At-A-Glance

Predominant virus of the week:

Rhinovirus/Enterovirus

Key Findings:

- Statewide influenza-like illness activity is low.
- Influenza, and RSV activity levels are low based on emergency department, laboratory testing, and wastewater data. COVID-19 activity is minimal.
- Influenza B makes up almost all of the influenza currently circulating.
- Parainfluenza virus and rhinovirus/enterovirus activity are increasing. HMPV and seasonal coronavirus activity remains elevated but is decreasing.

Influenza-associated pediatric deaths reported:

	Week 18, 2025	Since Sep 1, 2024
Wisconsin	0	4
Nationwide	10	226

For National US influenza surveillance statistics visit: www.cdc.gov/flu/weekly/

Respiratory Virus and Pneumonia-Associated Mortality

Percent of deaths associated with influenza, RSV, COVID-19, or pneumonia by week, Vital Records

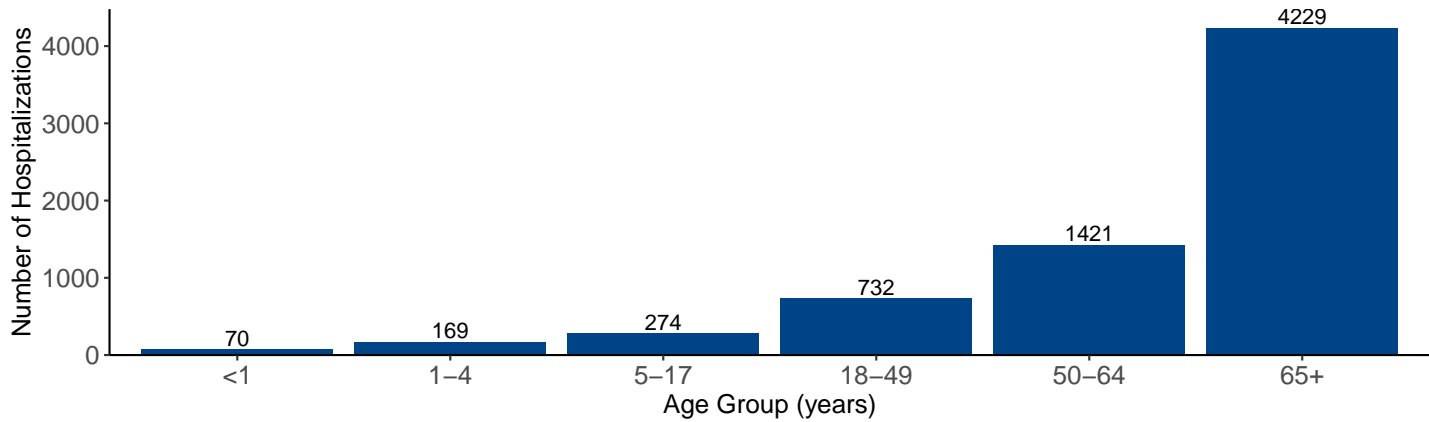


Respiratory virus and pneumonia associated deaths by most recent 3-week period, Vital Records

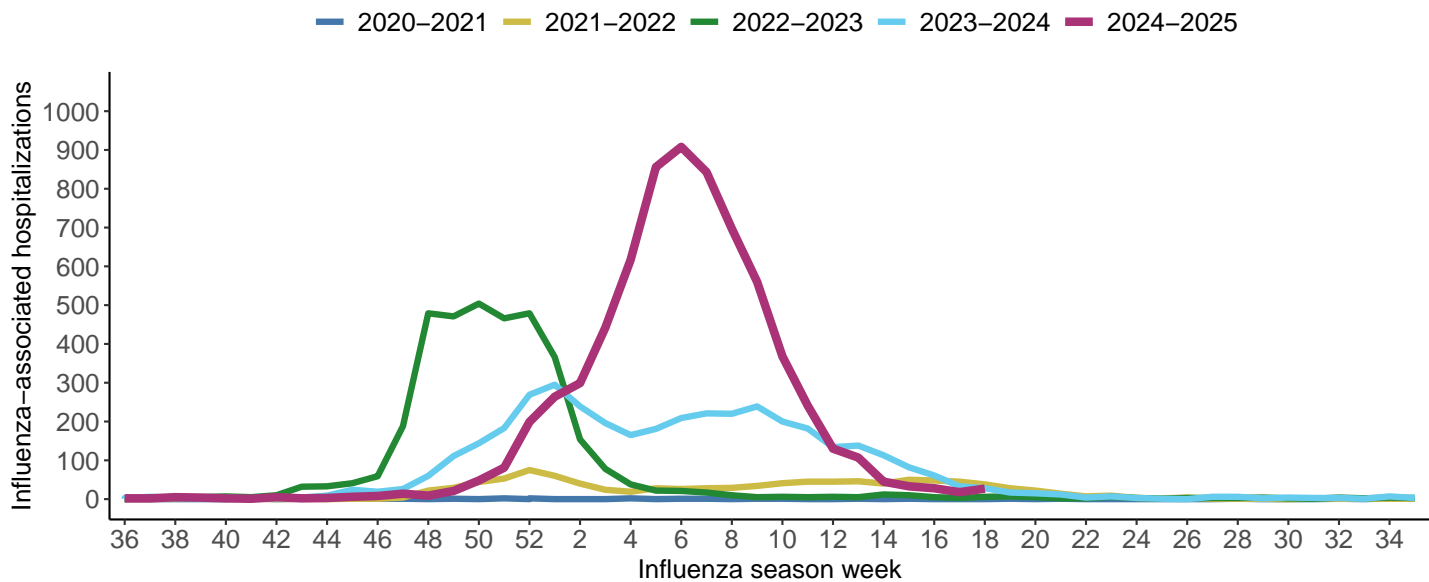
Season week	Pneumonia (P)	Influenza (I)	COVID-19 (C)	RSV (R)	P, I, C or R	Percent PICR of all
16	61	3	7	1	69	6%
17	51	1	6	0	58	6%
18	44	1	3	1	45	6%

Influenza-Associated Hospitalizations

Influenza-associated hospitalizations by age group, WEDSS
September 1, 2024 to present



Weekly influenza-associated hospitalizations by influenza season, WEDSS

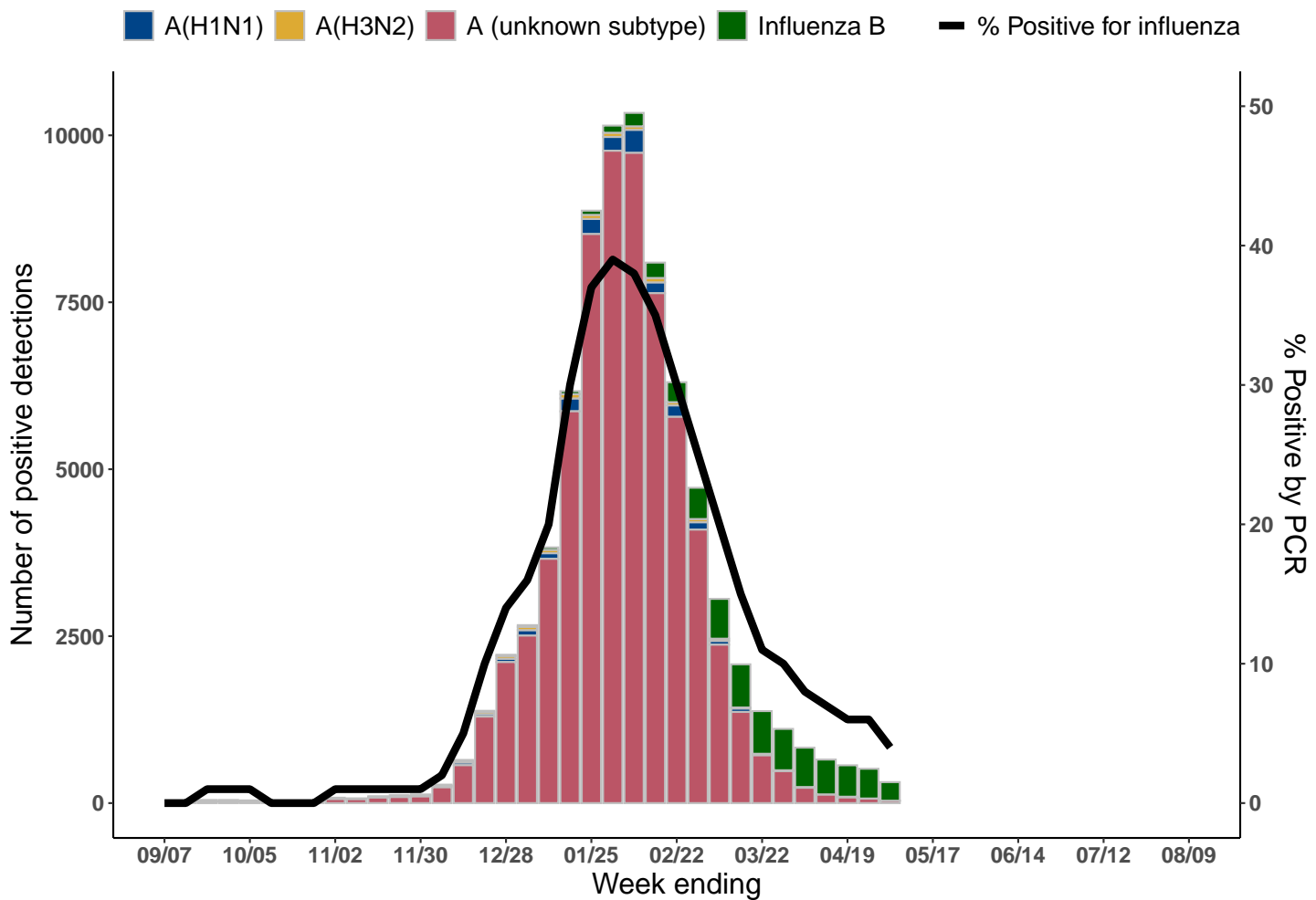


Influenza Season	Cumulative Hospitalizations Through Week 18	Entire Season
2020-2021	21	28
2021-2022	923	1021
2022-2023	3555	3610
2023-2024	3807	3901
2024-2025	6895	-

These data are preliminary and subject to change as more information is received.

Wisconsin Laboratory Surveillance

Wisconsin positive influenza results and subtypes by PCR, NREVSS

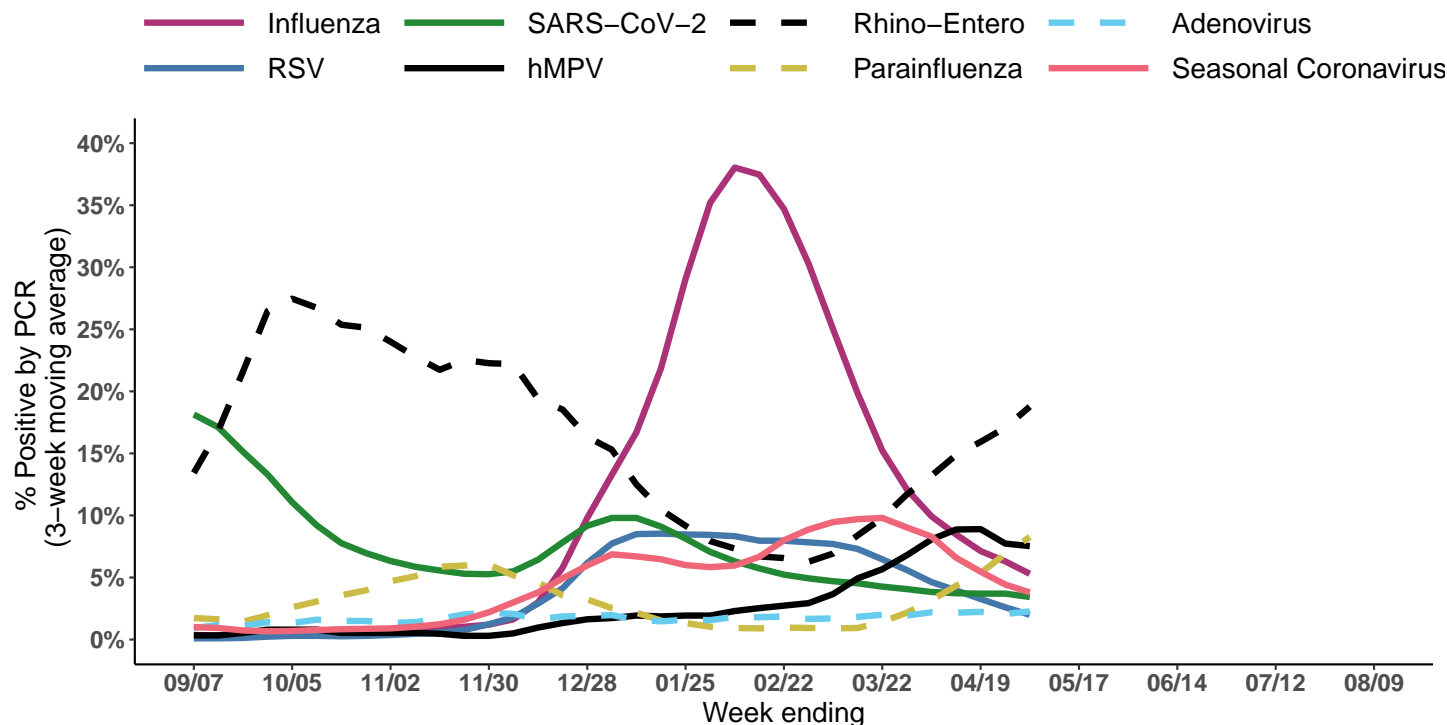


Cumulative number of positive influenza PCR tests by subtype, NREVSS
September 1, 2024 to present

Measure	Influenza A(H1N1)pdm2009	Influenza A(H3N2)	Influenza A Unknown	Influenza B	Total
Total positive (n)	1929	711	67804	6481	76925
% of total positive	3%	1%	88%	8%	100%

Wisconsin Laboratory Surveillance for Respiratory Viruses

Percent positivity of respiratory viruses tested by PCR, NREVSS



Number and percent positivity of respiratory viruses tested by PCR, NREVSS

Week 18, Ending on May 03, 2025

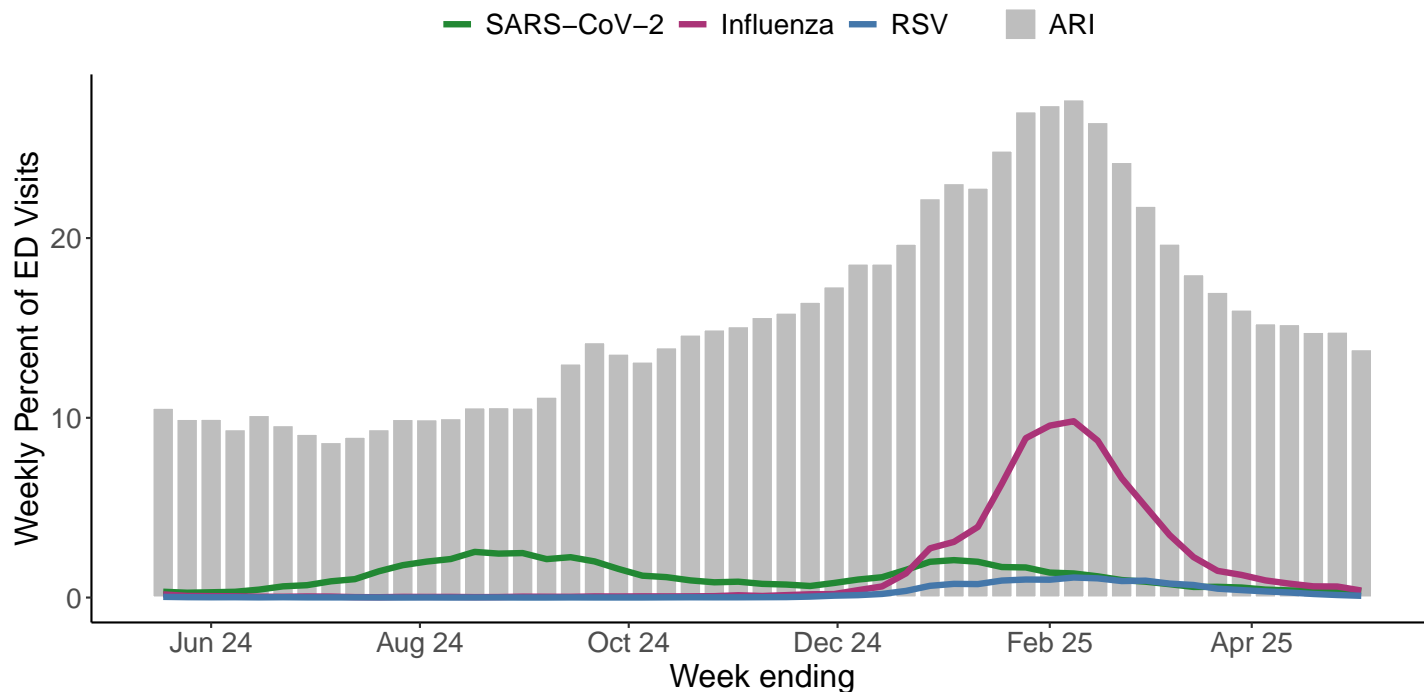
Respiratory virus	Tested	Positive (n)	Positive (%)	H3N2	2009 H1N1	A Unknown	Influenza B
Influenza	7,873	314	4%	0	1	35	278
Respiratory virus	Tested	Positive (n)	Positive (%)	Parainfluenza 1	Parainfluenza 2	Parainfluenza 3	Parainfluenza 4
Parainfluenza	1,167	114	9.8%	6	2	105	1

Respiratory virus	Tested	Positive (n)	Positive (%)
Respiratory Syncytial Virus	6,970	109	1.6%
Adenovirus	1,195	32	2.7%
Seasonal Coronavirus	1,138	29	2.5%
HMPV	1,201	87	7.2%
Rhinovirus/Enterovirus	1,607	329	20.5%
COVID-19	8,297	245	3%

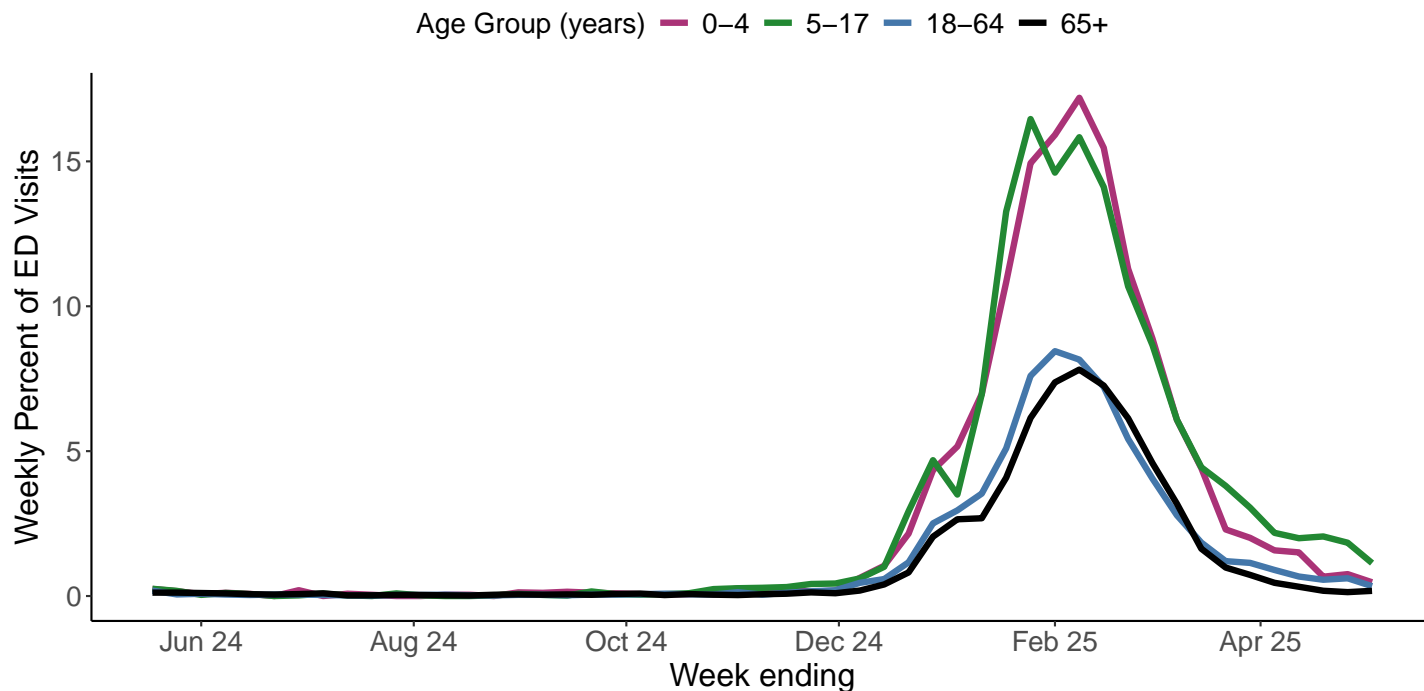


Respiratory Virus Activity in the Emergency Department (ED)

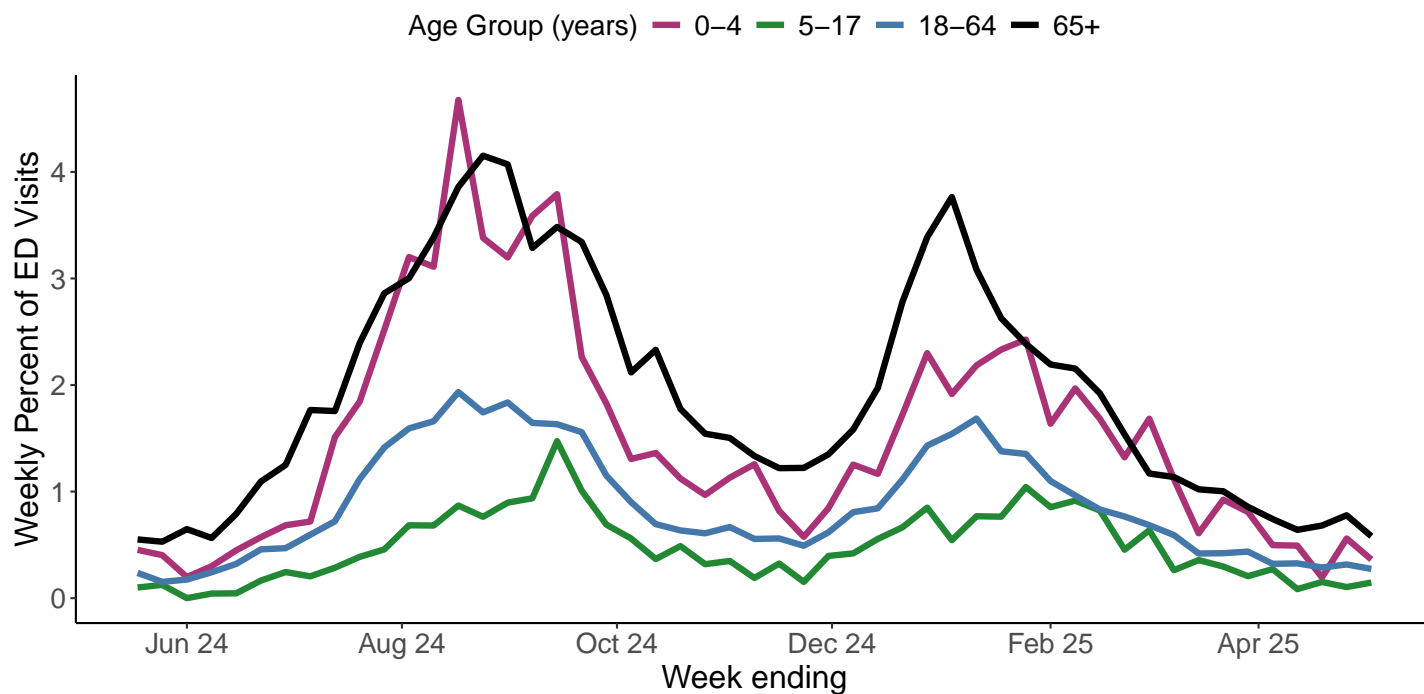
Percent of ED visits with a diagnosis for a respiratory virus or acute respiratory infection (ARI), NSSP



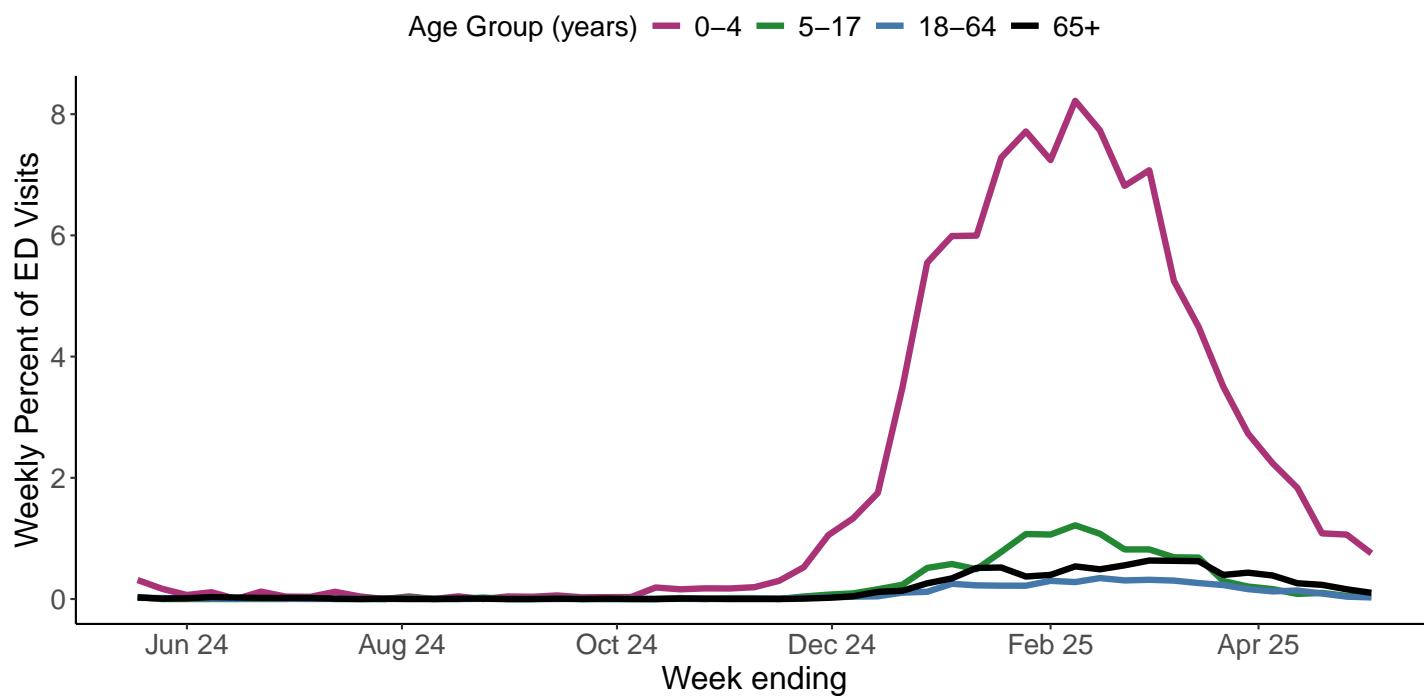
Percent of ED visits with a diagnosis for influenza by age group, NSSP



Percent of ED visits with a diagnosis for SARS-CoV-2 by age group, NSSP

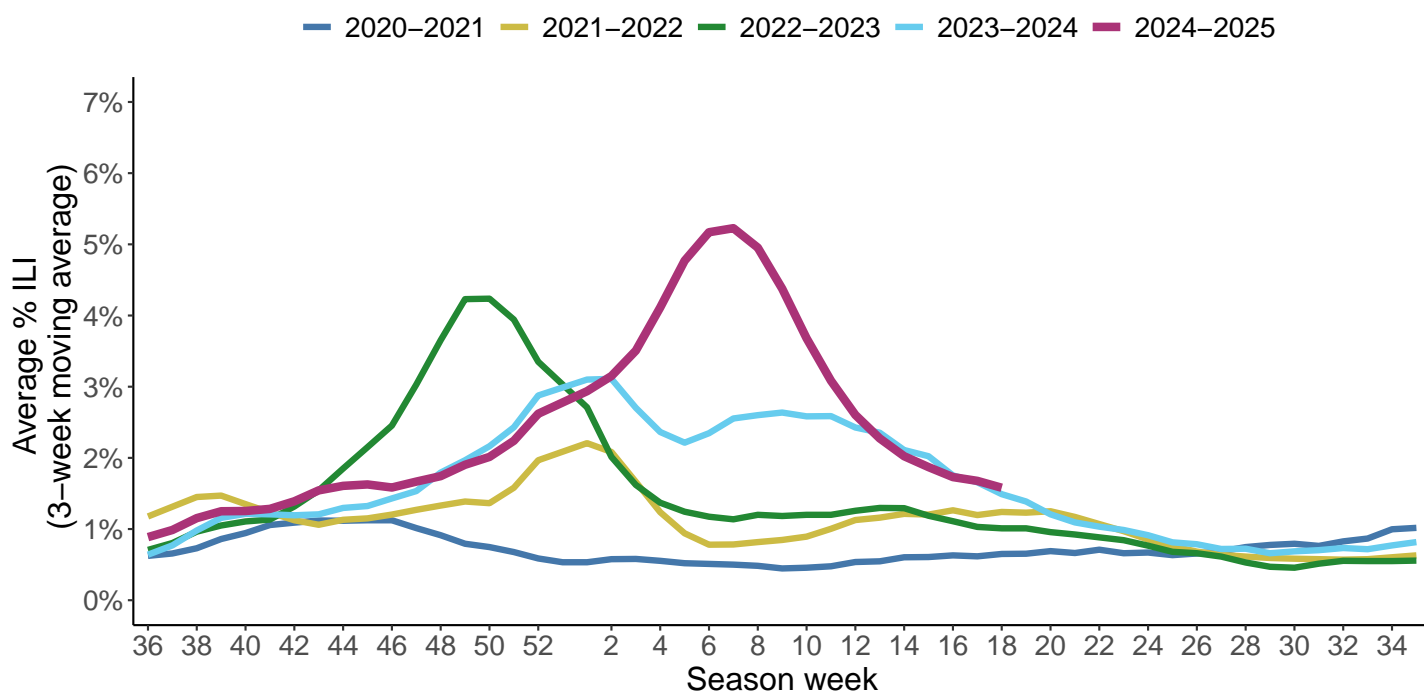


Percent of ED visits with a diagnosis for RSV by age group, NSSP



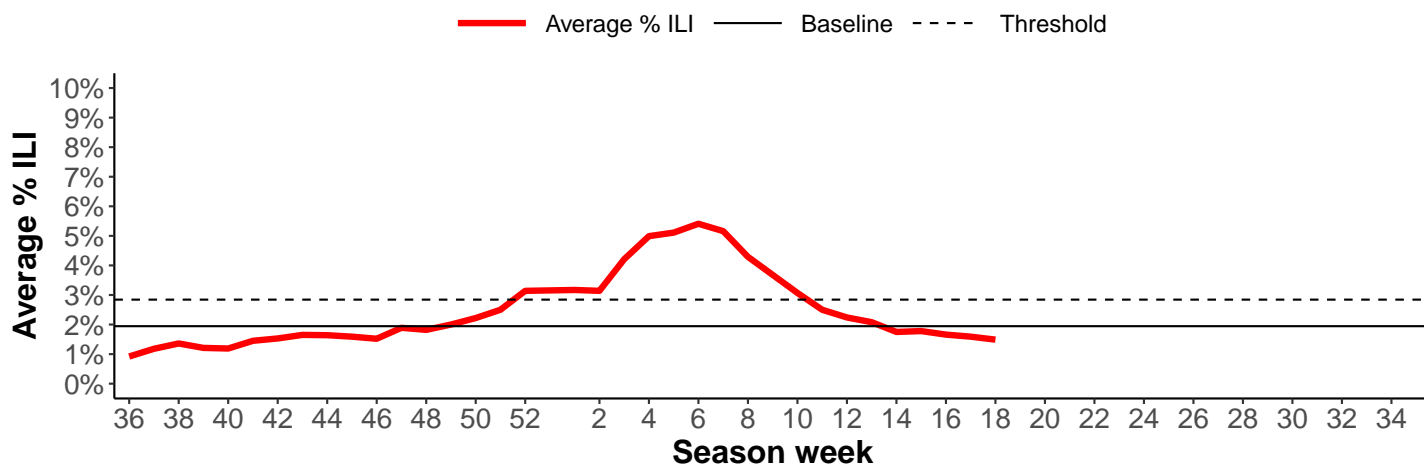
Wisconsin ILI Activity

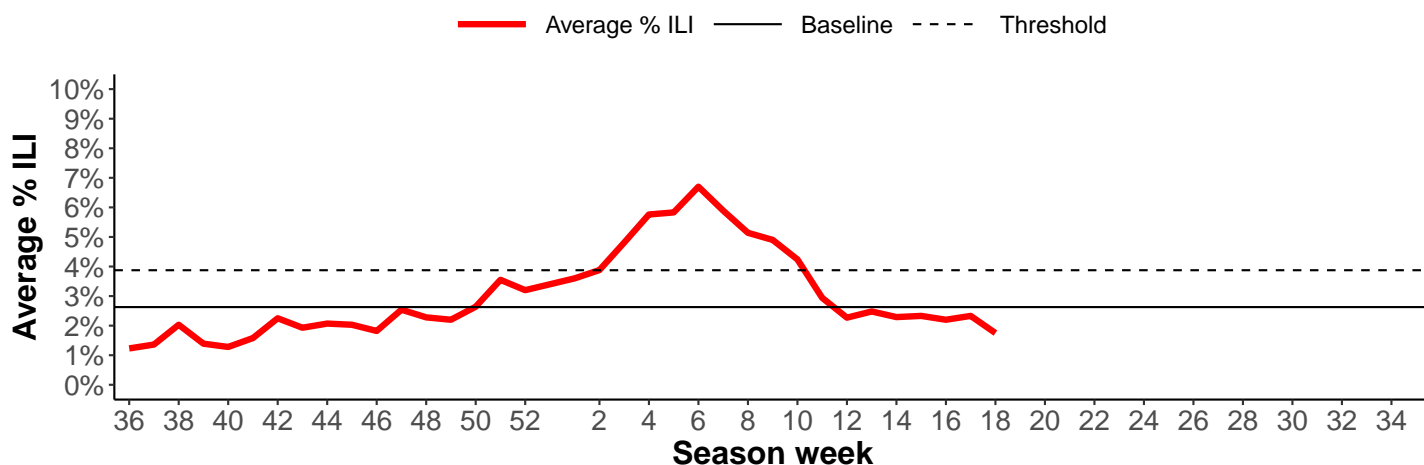
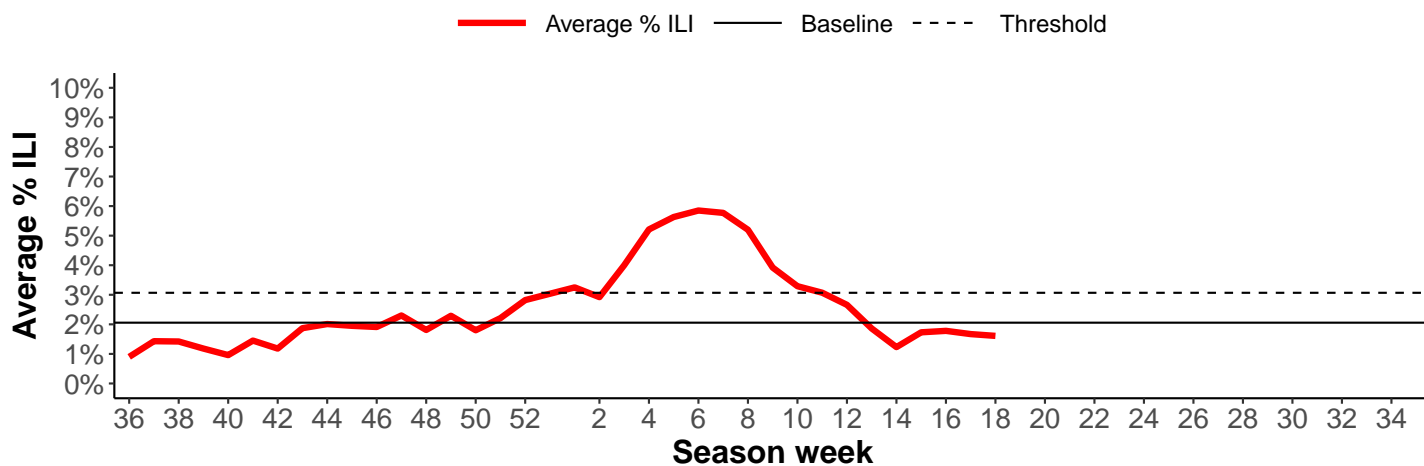
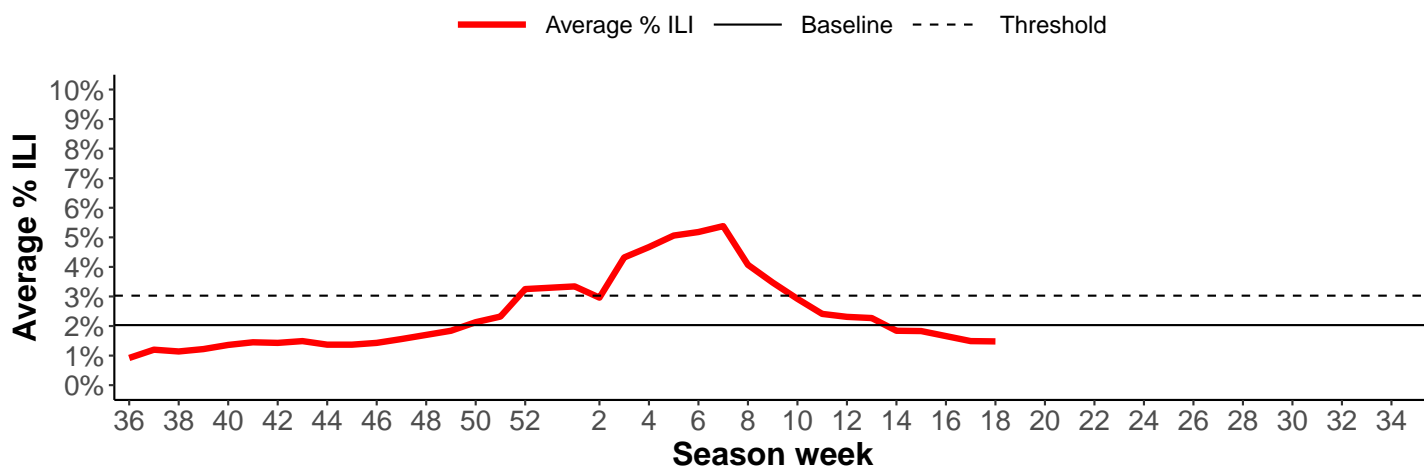
Three-week average percent of visits for ILI by influenza season, ILINET



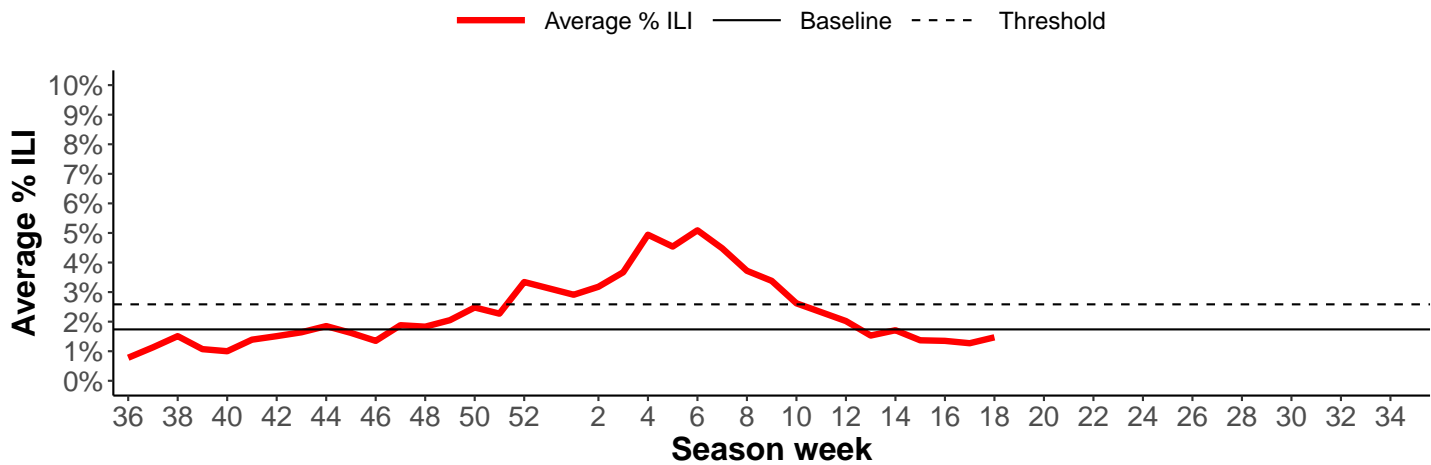
Average percent of visits for ILI by public health region, ILINET

Wisconsin

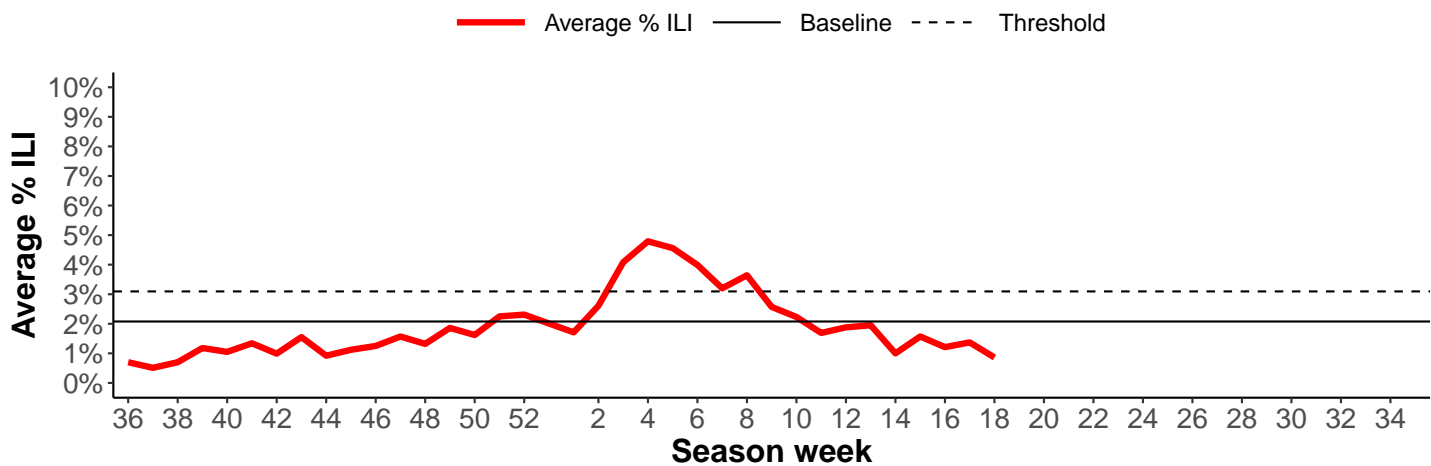


Northeastern Region**Northern Region****Southeastern Region**

Southern Region



Western Region



Understanding the Data

Surveillance Report Description

Influenza-like Illness (ILI)	Patients who present to a clinician with a fever ≥ 100 degrees F and either a cough or sore throat.
Influenza-like Illness (ILI) Activity	Using baseline (expected value data used for comparison) in each of the public health regions in Wisconsin (https://www.dhs.wisconsin.gov/lh-depts/counties/index.htm), ILI below baseline is considered low activity, ILI between baseline and threshold levels is considered moderate activity and above threshold is considered high activity. (1)
Acute Respiratory Illness (ARI)	ARI is a broad definition designed to capture all diagnoses related to respiratory illness, including SARS-CoV-2, influenza, pneumonia, and cough
Predominant virus of the week	These data are compiled from over 40 laboratories in Wisconsin that perform rt-PCR testing, and shows the viruses that have the highest percentage of positive tests.(2)
Influenza-Associated Pediatric Mortality	Deaths among children <18 years old, with influenza as the cause of associated cause of death. This is a state and nationally reportable condition. (3)
Deaths Due to Pneumonia, SARS-CoV-2, Influenza and RSV	Proportion of deaths due to pneumonia, RSV, influenza, and SARS-CoV-2 are extracted from Vital Records managed by the Office of Health Informatics through ICD-10 codes and death certificate text searches. (4)
Respiratory Viruses by PCR	A molecular laboratory method used to detect nucleic acid (DNA/RNA) in viruses, including influenza and RSV.
Influenza-Associated Hospitalizations	Patients hospitalized for >24 hours with a laboratory-identified (by rapid antigen or rt-PCR tests) influenza.(3)
Emergency Department Data	These data are from the National Syndromic Surveillance Program or NSSP. Visit information from almost all EDs in Wisconsin are reported from hospital electronic medical records to NSSP in near-real-time. Diagnoses used included the CDC Broad Acute Respiratory DD v1, the CDC COVID-Specific DD v1, CDC Influenza DD v1, and the CDC Respiratory Syncytial Virus DD v1.(5)

Additional Resources

- The CDC Influenza Homepage (<https://www.cdc.gov/flu/>)
- The National Respiratory and Enteric Virus Surveillance System (NREVSS) (<https://www.cdc.gov/surveillance/nrevss/index.html>)

Data Sources

1. CDC Outpatient Influenza-like Illness Surveillance Network (ILINet)
2. Wisconsin Laboratory Information Network and CDC National Respiratory and Enteric Virus Surveillance System (NREVSS)
3. Wisconsin Electronic Disease Surveillance System (WEDSS)
4. Division of Public Health, Office of Health Informatics, Vital Records
5. National Syndromic Surveillance Program (NSSP) data from ESSENCE (Electronic Surveillance System for Early Notification of Community Based Epidemics).

