TEXAS Health and Human Services | Texas Department of State Health Services

Texas Respiratory Virus Surveillance Report
2026-2027 Season 2026 MMWR Week 41

(October 11, 2026 – October 17, 2026)
Report produced on October 23, 2026

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Summary

Compared to the previous week, the percentage of specimens testing positive for influenza reported by hospital laboratories has increased. The percentage of patient visits due to influenza-like illness (ILI) has decreased. There were no influenza-associated pediatric deaths reported, and no influenza-associated outbreaks reported in Week 41.

Table 1: Summary of Texas Influenza (Flu) and Influenza-like Illness (ILI) Activity for the Current Week

Texas Surveillance Component	Change from Previous Week	Current Week	Previous Week†	Page of Report
Statewide ILINet Activity Indicator assigned by CDC (intensity of influenza-like illness)	No Change	Minimal	Minimal	-
Percentage of specimens positive for influenza by hospital laboratories	▲ 0.59%	9.43%	8.84%	2
Percentage of visits due to ILI (ILINet)	▼ 0.04%	2.43%	2.47%	4
Number of variant/novel influenza infections	No Change	0	0	7
Number of ILI/influenza outbreaks	No Change	0	0	7
Number of pediatric influenza deaths	No Change	0	0	8
Number of regions reporting increased flu/ILI activity	▼1	6	7	8
Number of regions reporting decreased flu/ILI activity	No Change	0	0	8

†Data displayed have been updated since last week's report with any new data received.

Laboratory Results

Influenza

Hospital laboratories across Texas voluntarily report influenza tests (antigen, culture, and PCR) to the National Respiratory and Enteric Virus Surveillance System (NREVSS). Providers throughout Texas also submit specimens for influenza testing (PCR) to Texas public health laboratories, including the Texas Department of State Health Services (DSHS) state laboratory in Austin and the nine Texas Laboratory Response Network (LRN) laboratories. The results reported by Texas NREVSS participants and public health laboratories for the current week are summarized in the two tables below (Tables 2 and 3). Additional influenza test results (antigen tests, culture, and PCR) and ILI activity were reported from providers and public health departments throughout the state (see county map in figure 5).

Table 2: Influenza Testing Performed by Texas Hospital Laboratories for the Current Week

	Week 41	Season to Date Week Ending October 17, 2026
Number of labs reporting flu tests	15	
Number of specimens tested	3,414	8,197
Number positive specimens (%)	**322 (9.43%)**	**745 (9.09%)**
Percentage of total tests that were antigen detection tests	3.81%	
Positive specimens by type/subtype [n (%)]		
Influenza A	**315 (97.83%)**	**724 (97.18%)**
Subtyping performed	77 (24.44%)	149 (20.58%)
A (H1N1)	77 (100.00 %)	149 (100.00 %)
A (H3N2)	0 (0.00%)	0 (0.00%)
Subtyping not performed	238 (75.56%)	575 (79.42%)
Influenza B	**7 (2.17%)**	**21 (2.82%)**

Figure 1: Number and Percentage of Tests (Antigen, Culture, PCR) Positive for Influenza by Type and Subtype Reported by Texas Hospital Laboratories, 2026-2027 Season

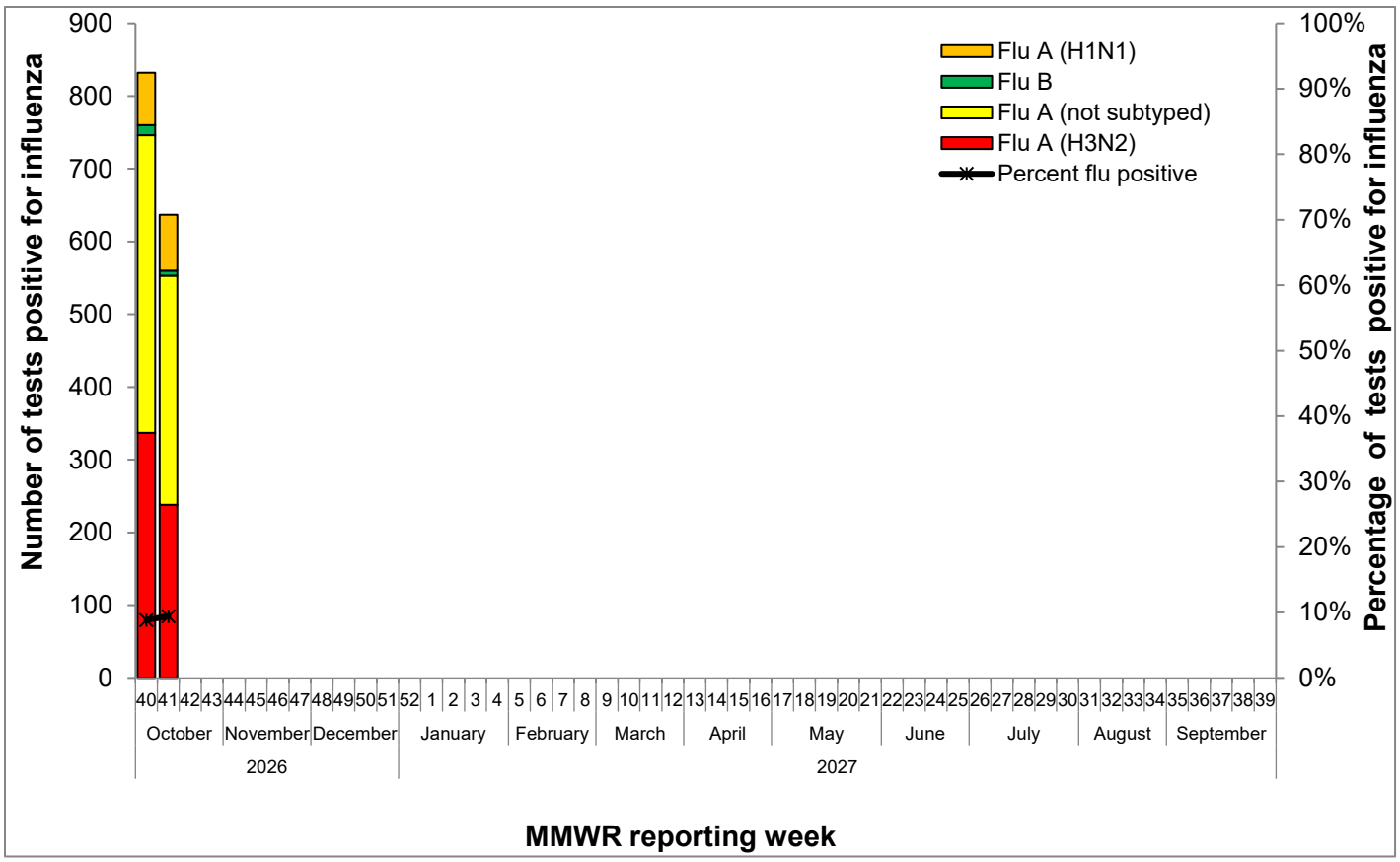
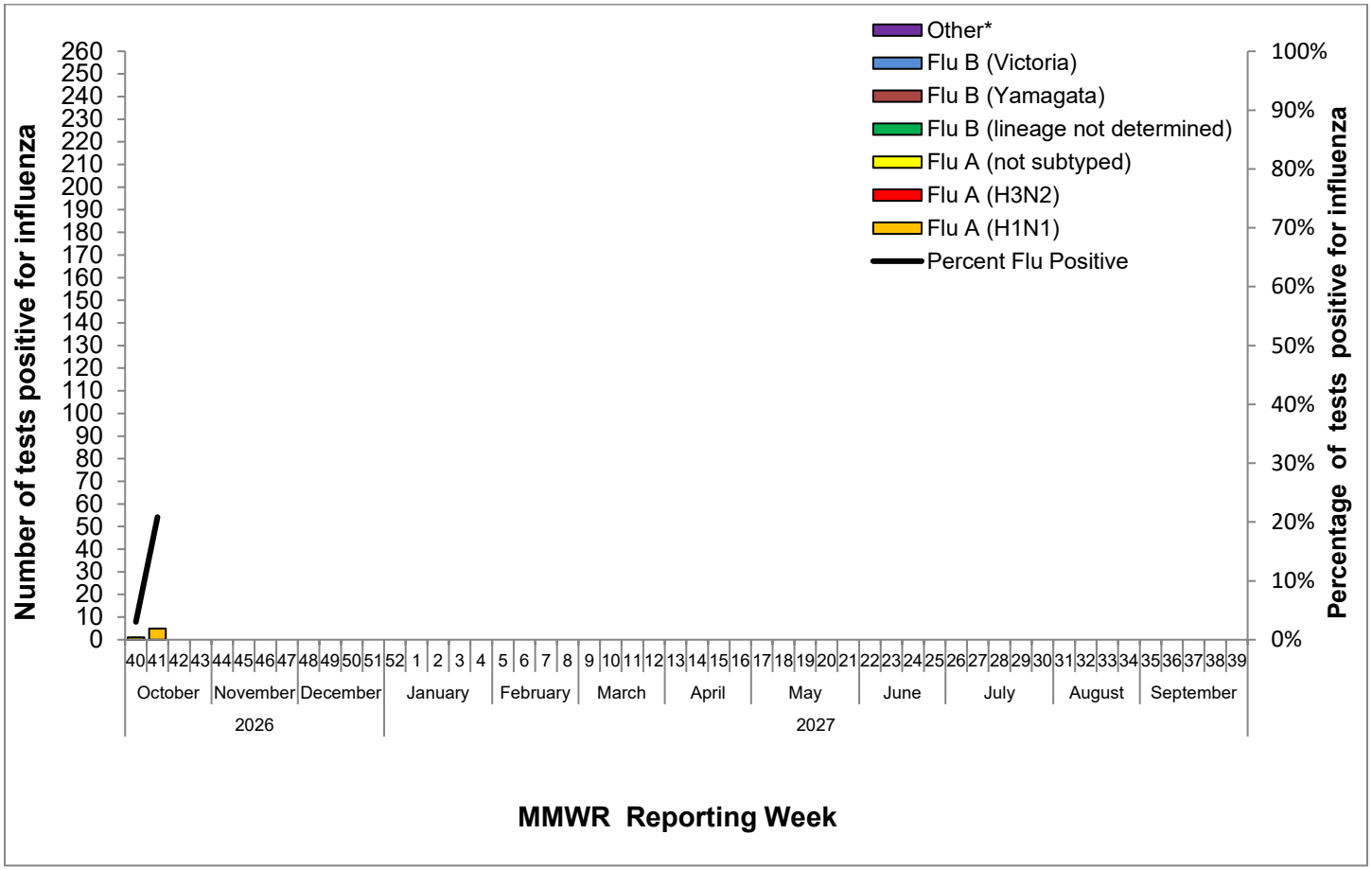


Table 3: Influenza Testing Performed by Texas Public Health Laboratories for the Current Week

	Week 41	Season to Date Week Ending: October 17, 2026
Number of labs reporting flu tests	2	
Number of specimens tested	24	57
Number of positive specimens (%)	**5 (20.83%)**	**6 (10.53%)**
Positive specimens by type/subtype/lineage [n (%)]		
Influenza A	**5 (100.00%)**	**6 (100.00%)**
Subtyping performed	5 (100.00%)	6 (100.00%)
A (H1N1)	5 (100.00%)	6 (100.00%)
A (H3N2)	0 (0.00%)	0 (0.00%)
Subtyping not performed	0 (0.00%)	0 (0.00%)
Influenza B	**0 (0.00%)**	**0 (0.00%)**
Lineage testing performed	0 (0.00%)	0 (0.00%)
B/Victoria	0 (0.00%)	0 (0.00%)
B/Yamagata	0 (0.00%)	0 (0.00%)
Lineage testing not performed	0 (0.00%)	0 (0.00%)
Other*	**0 (0.00%)**	**0 (0.00%)**

*Other denotes specimens with coinfections (i.e. one specimen was positive for both influenza A (H1N1) and influenza A (H3N2)

Figure 2: Number of Tests (PCR) Positive for Influenza by Type, Subtype, and Lineage Reported by Texas Public Health Laboratories, 2026-2027 Season



Subtype Final/Antigenic Characterization
Since October 4, 2026, CDC has reported subtype final/antigenic characterization results from zero (0) Influenza A (H1N1), zero (0) Influenza A (H3N2), and zero (0) Influenza B virus received from the Texas Department of State Health Services (DSHS) Laboratory and the City of Houston Department of Health. The DSHS Laboratory and participating LRN Laboratories send a representative sample of influenza viruses to the CDC throughout the flu season.

Antiviral Resistance
No antiviral resistance testing data for Texas specimens is available presently.

U.S. Outpatient Influenza-like Illness Surveillance Network (ILINet)

Table 4: Texas ILINet Reporting and Patient Visit Summary for the Current Week

	Week 41
Number of providers reporting	41
Number of providers reporting patient visits	39
Number (%) of providers with at least one ILI case	33 (84.6%)
Percentage of all visits due to ILI	2.43%
Texas ILINet baseline‡, 2026-2027	4.65%

‡The baseline is the mean percentage of patient visits for ILI during non-influenza weeks for the previous three seasons plus two standard deviations. A "non-influenza week" is defined as a week that accounted for less than 2% of the season's total number of specimens that tested positive for influenza.
Special Note: The case definition was changed to capture respiratory pathogens causing illness, including CoVID-19, through the ILINet. The Influenza-like Illness (ILI) case definition is a patient with fever (≥ 100°F, 37.8°C) AND cough and/or sore throat.

Table 5: Percentage of Visits for Influenza-like Illness Reported by Texas ILINet Providers (as of 10/22/2026 12:00 PM)

Week	Providers Reporting	Number of ILI Cases by Age Group (Years)					Total ILI (all ages)	Total Patients	% ILI
		0-4	5-24	25-49	50-64	65+			
202640	27	69	119	25	16	12	241	9745	2.47%
202641	41	275	327	250	88	47	987	40622	2.43%

Note: ILI percentages are not static from week to week. ILI percentages can change based on when the providers enter the ILI patient visits as providers can enter patient visits after the initial report week.

Figure 3: Percentage of Visits Due to Influenza-like Illness Reported by Texas ILINet Participants, 2026-2027 Season

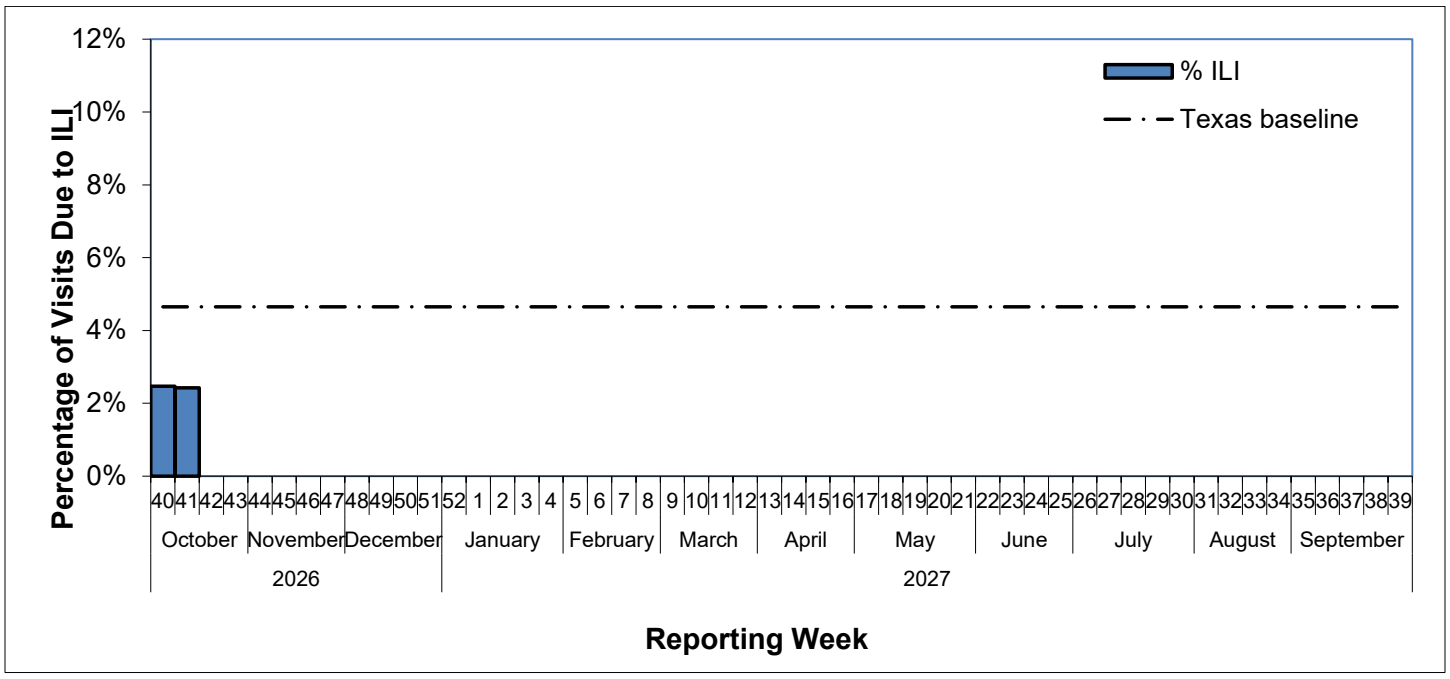
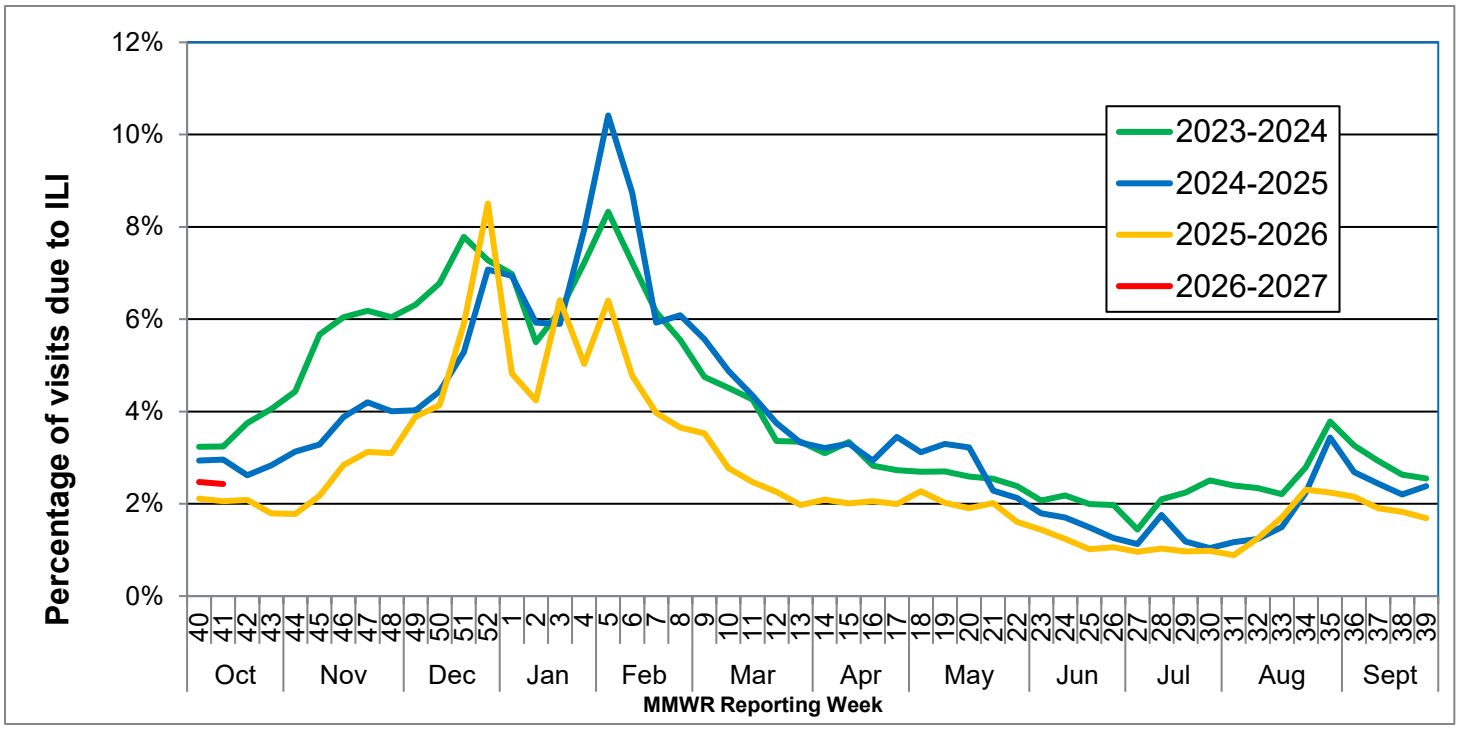


Figure 4: Percentage of Visits Due to Influenza-like Illness Reported by Texas ILINet Participants, 2023–2027 Seasons



Note: The 2025-2026 Flu Season contains MMWR week 202553. For graphical display compatibility with seasons containing 52 weeks, average values were generated using MMWR week 52 and 1.

Variant Influenza Viruses

No (0) novel/variant influenza viruses have been detected in Texas during the 2026-2027 season.

Influenza/ILI Outbreaks and School Closures

No (0) influenza or ILI outbreaks were reported in Week 41.

P&I Mortality Surveillance Data

Pneumonia and influenza (P&I) death data are obtained from death certificates of Texas residents whose underlying or contributing cause(s) of death is reported as pneumonia or influenza. P&I deaths are identified based on ICD-10 multiple cause of death codes for pneumonia and influenza related mortality.

One hundred and nineteen (119) P&I Deaths have been reported to date in Texas for the 2026-2027 season.

Table 6: Texas P&I Deaths[+] Occurring October 4, 2026 – October 17, 2026* by Age.

Age Category (years)	Number of P&I Deaths[++]	Mortality Rate (per 100,000)
0-4	<10	<10
5-17	<10	<10
18-49	<10	<10
50-64	17	0.31
65+	93	1.79
Total	119	0.37

*NOTE: Data are provisional and subject to change, errors, and duplicates
+Deaths due to COVID-19 may be classified as pneumonia deaths or influenza deaths (deaths due to “flu” or “flu-like illnesses”) in the absence of positive SARS-CoV-2 test results.
++ If the cell count is less than 10, the number of P&I deaths is suppressed and <10 is written in the cell.

Table 7: Texas P&I Deaths[+] Occurring October 4, 2026 – October 17, 2026* by Public Health Region (PHR).

PHR	Number of P&I Deaths[++]	Mortality Rate (per 100,000)
1	<10	<10
2/3	24	0.24
4/5N	14	0.93
6/5S	32	0.37
7	21	0.50
8	<10	<10
9/10	<10	<10
11	<10	<10
Total	119	0.37

*NOTE: Data are provisional and subject to change, errors, and duplicates
+Deaths due to COVID-19 may be classified as pneumonia deaths or influenza deaths (deaths due to “flu” or “flu-like illnesses”) in the absence of positive SARS-CoV-2 test results.
++ If the cell count is less than 10, the number of P&I deaths is suppressed and <10 is written in the cell.

Influenza-Associated Pediatric Mortality

No (0) influenza-associated pediatric mortalities were reported in Week 41.

Zero (0) influenza-associated pediatric mortalities have been reported in Texas during the 2026-2027 Influenza season.

Cases of influenza-associated pediatric mortality (children <18 years of age) are reportable year-round by law in Texas.

Table 8: Influenza-associated Pediatric Deaths Reported in Texas during the 2026-2027 Season

Month of Pediatric Death	Influenza A (H1N1)	Influenza A (H3N2)	Influenza A (Not Subtyped)	Influenza B	Influenza, Not Typed / Not Differentiated	Influenza virus co-infection: A (not subtyped) and B	Total, All Influenza Types / Subtypes
2026							
October	0	0	0	0	0	0	**0**
Total	0	0	0	0	0	0	**0**

*Total count of typed cases may be adjusted as lab testing and case investigation are completed; this does not alter total count of all cases (final column).

Reports from Public Health Regions

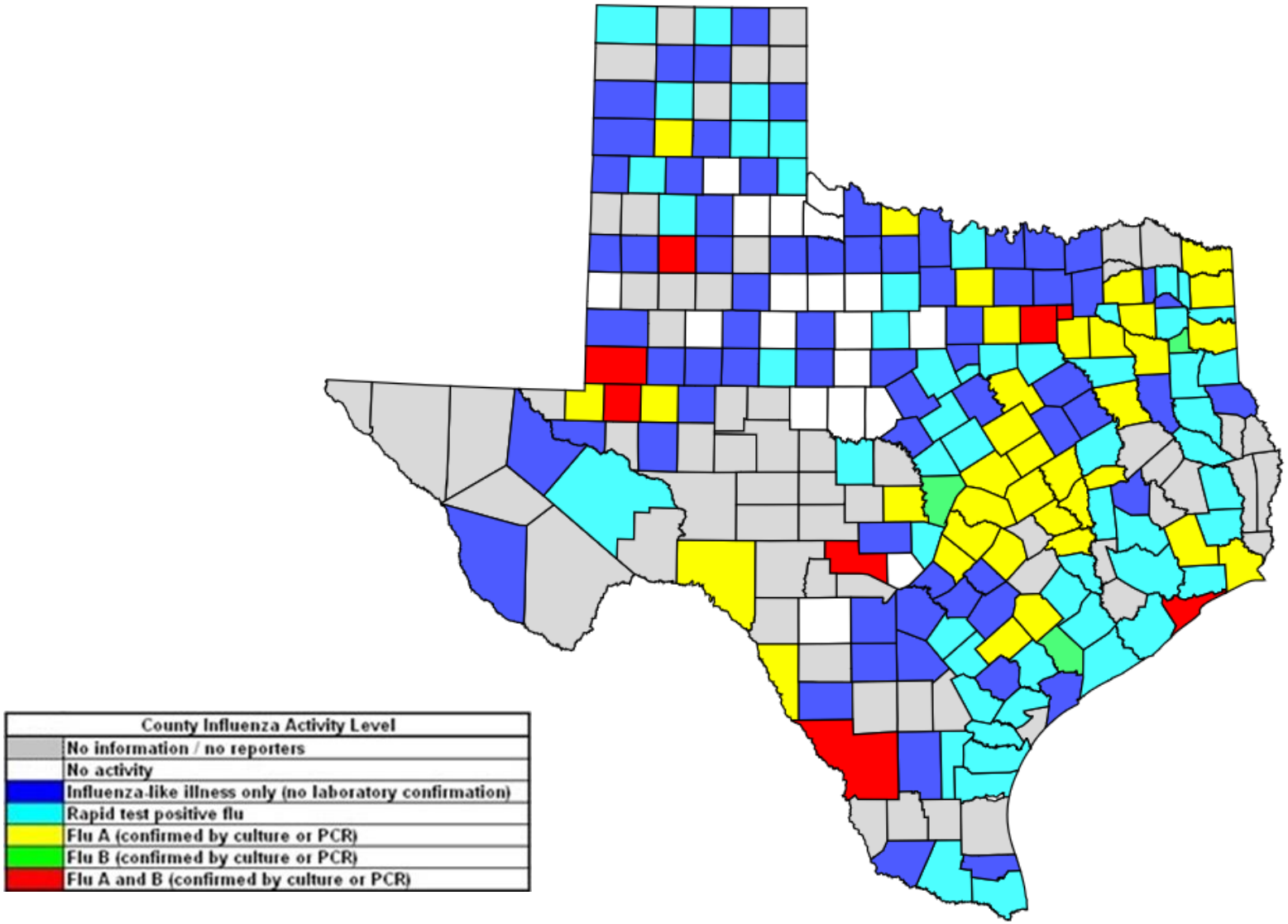
Reports were received from Public Health Regions (PHRs) during Week 41.

Table 9: Influenza Activity compared to Week 40 by Public Health Regions (PHRs).

Influenza Activity Comparison	
Increased	1, 2/3, 4/5N, 7, 8, 9/10
Same	11
Decreased	
Unsure	6/5S

Statewide Influenza Activity Map

Figure 5: Texas Map Displaying the Highest Level of Influenza or ILI Activity Reported by County for the Week Ending October 17, 2026 (MMWR Week 41)



Please note: The majority of influenza cases are not reportable by law in Texas. This map contains data from sentinel sites and only displays influenza and ILI cases that were reported to public health. Positive laboratory results are reported according to specimen collection date, or date received in the laboratory if the former is unknown.

Respiratory Syncytial Virus (RSV) Surveillance

Respiratory Syncytial Virus (RSV) surveillance in Texas utilizes passive surveillance and is based on data submitted by providers and facilities to the National Respiratory and Enteric Virus Surveillance System (NREVSS). Data is reported in aggregate and is utilized by DSHS to produce the weekly surveillance graphs statewide and by health service regions. Some providers report RSV data directly to DSHS. As such, the weekly surveillance graphs may differ from NREVSS data. For a review of available RSV data by region, please see the addendum found at the end of this report.

Figure 6: Number and Percent of Antigen Tests Positive for Respiratory Syncytial Virus in the State of Texas, 2026-2027 Season

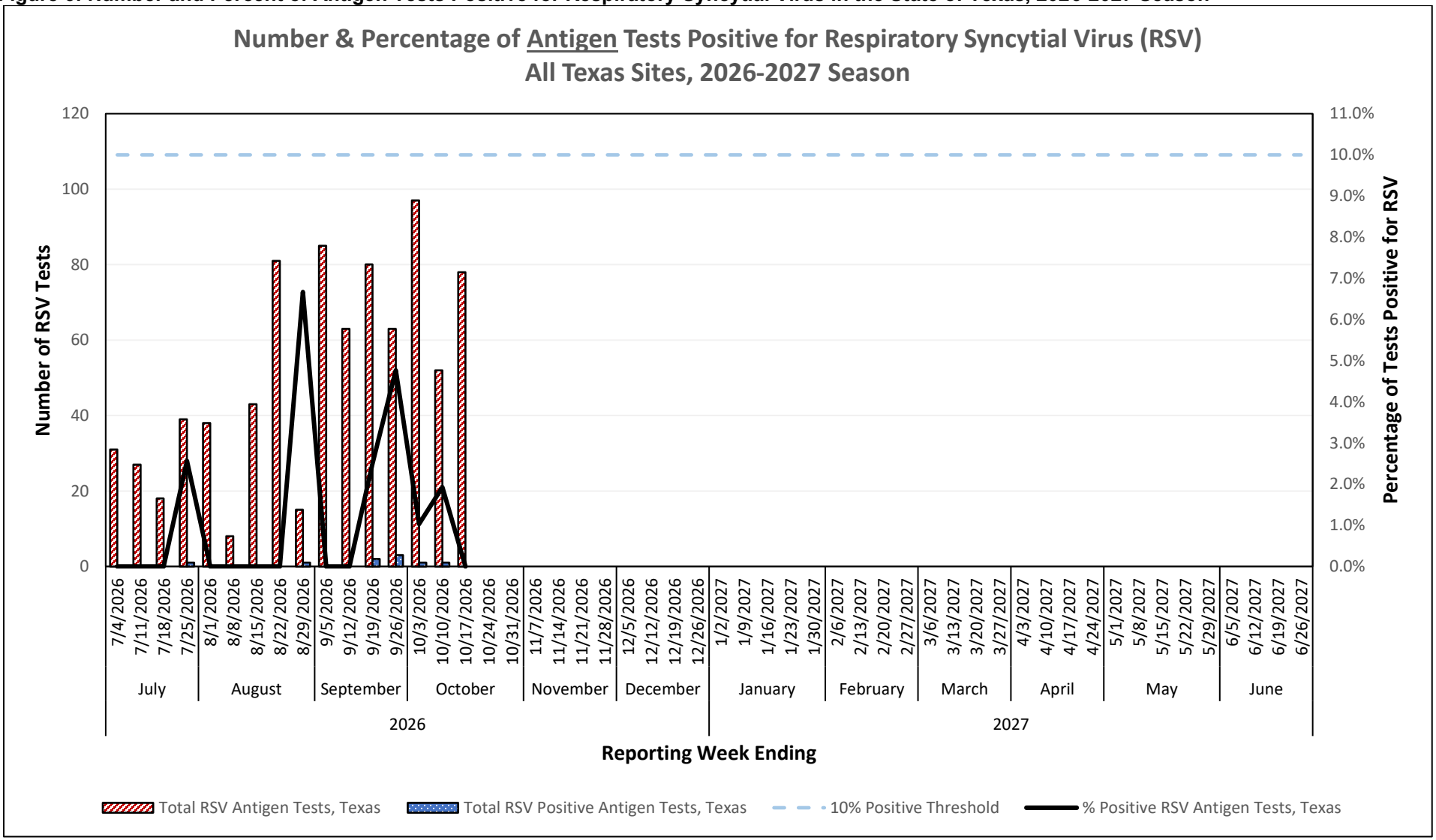
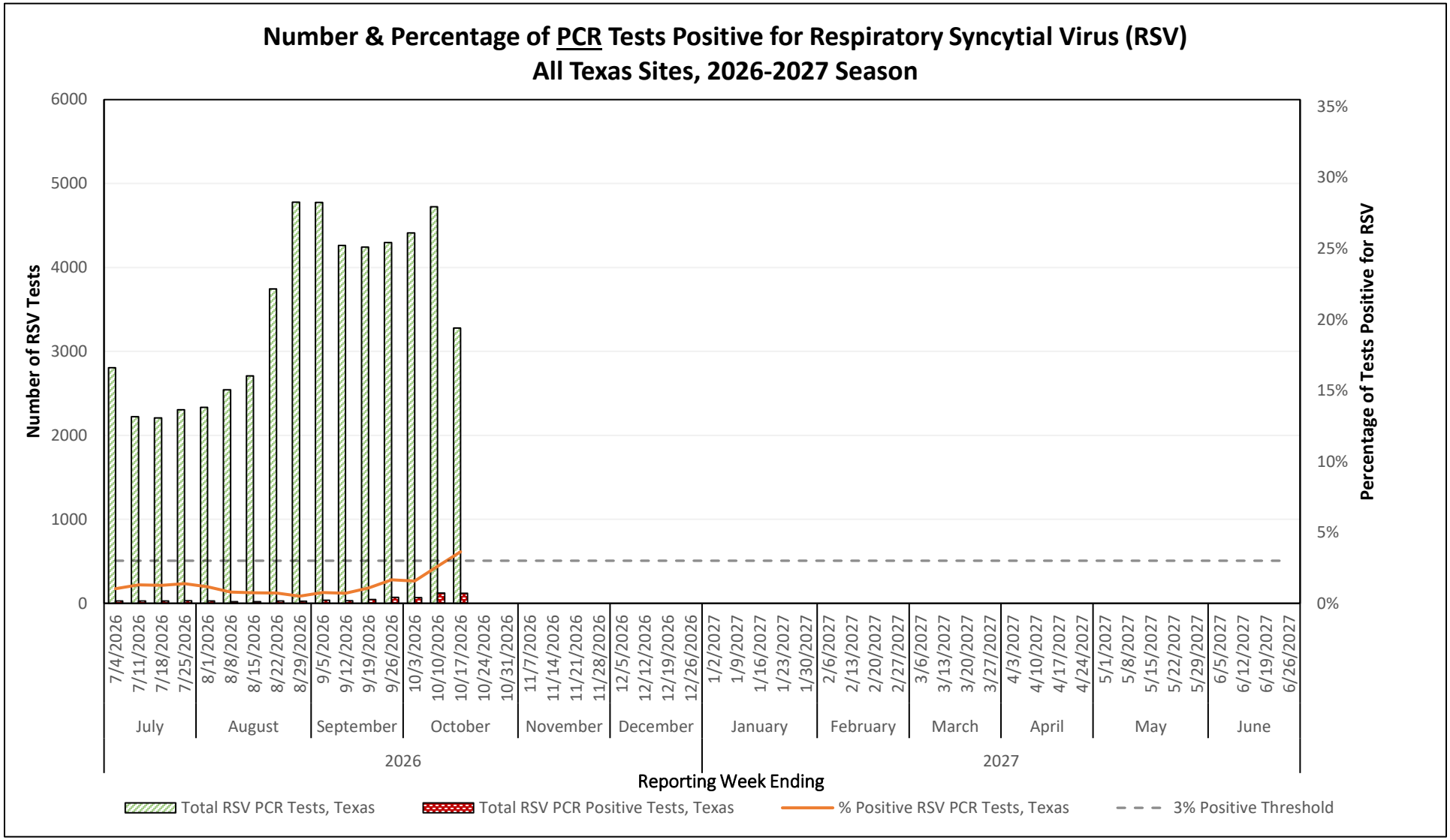


Figure 7: Number and Percent of PCR Tests Positive for Respiratory Syncytial Virus in the State of Texas, 2026-2027 Season



Other Respiratory Viruses

The NREVSS system collects information on a variety of respiratory viruses in addition to influenza including parainfluenza virus, respiratory syncytial virus (RSV), rhinovirus, human metapneumovirus (HMPV), SARS-CoV-2 (COVID-19), seasonal coronavirus, and respiratory adenovirus. The results for the current week are summarized below.

Table 10: Non-Influenza Respiratory Virus Testing Performed by Texas NREVSS Laboratories for the Current Week

Virus	Number of Laboratories Testing	Tests Performed	Positive Tests	Percentage of Tests Positive
Adenovirus (respiratory)	12	1645	239	14.53%
HMPV	12	1645	21	1.28%
Parainfluenza virus	12	1645	87	5.29%
Rhino/enterovirus	12	1786	697	39.03%
RSV†	14	3354	119	3.55%
SARS-CoV-2 (COVID-19)	15	3478	104	2.99%
Seasonal coronavirus (does not include MERS-CoV or COVID-19)	11	1608	18	1.12%

† RSV tests displayed in the table are a combination of antigen detection, PCR, and culture tests. Some non-NREVSS reporters also contribute to the RSV data.

COVID-19 Mortality

Note: As of March 8, 2024, individual, confirmed, and probable COVID-19 cases are no longer required to be reported to the Texas Department of State Health Services. Thus, as of October 16, 2026, COVID-19 testing will only be reported with the other non-influenza respiratory viruses in Table 10. COVID-19 hospitalization data is available in the respiratory dashboard at https://texas-respiratory-illness-dashboard-txdshsea.hub.arcgis.com/.

COVID-19 mortality data in this report are obtained from death certificates of Texas residents whose underlying or contributing cause(s) of death is reported as COVID-19. Reporting of deaths occurs up to three weeks following date of death. Data is provisional until data close out occurs.

NOTE: Due to the three-week delay in COVID-19 mortality reporting, updated COVID-19 mortality data is not yet available for the 2026-2027 respiratory season. Reporting will resume in MMWR week 43.

Zero (0) COVID-19 Associated Deaths have been reported in Texas for the 2026-2027 season.

Table 11: Texas COVID-19 Deaths+* by Age.

Age Category (years)	Number of COVID-19 Deaths++	Mortality Rate (per 100,000)
0-4	NA	NA
5-17	NA	NA
18-49	NA	NA
50-64	NA	NA
65+	NA	NA
Unknown	NA	NA
Total	NA	NA

*NOTE: Data are provisional and subject to change, errors, and duplicates
++ Deaths due to COVID-19 may be classified as pneumonia deaths or influenza deaths (deaths due to “flu” or “flu-like illnesses”) in the absence of positive SARS-CoV-2 test results.
+ If the cell count is less than 10, the number of COVID-19 deaths is suppressed and <10 is written in the cell.

Table 12: Texas COVID-19 Deaths+* by Public Health Region (PHR).

PHR	Number of COVID-19 Deaths++	Mortality Rate (per 100,000)
1	NA	NA
2/3	NA	NA
4/5N	NA	NA
6/5S	NA	NA
7	NA	NA
8	NA	NA
9/10	NA	NA
11	NA	NA
Unknown	NA	NA
Total	NA	NA

*NOTE: Data are provisional and subject to change, errors, and duplicates
+ Deaths due to COVID-19 may be classified as pneumonia deaths or influenza deaths (deaths due to “flu” or “flu-like illnesses”) in the absence of positive SARS-CoV-2 test results.
++ If the cell count is less than 10, the number of COVID-19 deaths is suppressed and <10 is written in the cell.

Surveillance Components and Measures

Texas Influenza Surveillance Components and Measures

Activity codes (see http://www.cdc.gov/flu/weekly/overview.htm)

Statewide influenza activity level

A code reported weekly by states and territories to CDC indicating the geographic spread of influenza in the state. Levels are no activity, sporadic, local, regional, and widespread.

Morbidity

Novel/variant influenza

Thorough investigations are performed on all cases of novel/variant influenza. *This condition is reportable by law in Texas.*

Texas ILINet

Providers voluntarily report weekly to CDC's ILINet system on the number of outpatient visits for ILI and total outpatient visits. Providers may submit up to 5 specimens per month for influenza testing. **See http://www.dshs.state.tx.us/idcu/disease/influenza/surveillance/ILINet/ for information on how to become an ILINet provider.**

ILI activity

Non-ILINet providers report ILI or influenza data weekly to local or regional health departments.

Outbreaks

Healthcare, schools, childcare, and correctional facilities report ILI and influenza outbreaks to health departments in Texas. *This condition is reportable by law in Texas.*

Mortality

Pneumonia and Influenza (P&I) Mortality Surveillance

The DSHS Vital Statistics Unit collects death certificate information for all deaths on Texas residents from various partners such as funeral homes and local registrars around the state. The death certificates are then sent to the National Center for Health Statistics (NCHS) where the cause of death and underlying causes of death on the death certificates are coded with ICD-10 mortality codes. Once death certificates are coded, the information is sent back to DSHS Center for Health Statistics (CHS). CHS produces a Weekly Pneumonia and Influenza (P&I) Death Report and sends it to the State Influenza Surveillance Coordinator for inclusion in the Texas Weekly Flu Report. P&I deaths are identified based on ICD-10 multiple cause of death codes, and in particular, pneumonia and influenza mortality codes. Delays inherent in death reporting and coding practices may cause the number of reported P&I deaths to vary considerably each week.

Influenza-associated pediatric deaths

Deaths that are associated with influenza in children < 18 years of age are reported to health departments in Texas. *This condition is reportable by law in Texas.* http://www.dshs.state.tx.us/idcu/disease/IAPM/

Laboratory

DSHS Austin laboratory

Providers voluntarily submit specimens to the DSHS Austin laboratory for influenza PCR testing throughout the season. Providers sign up for this program through their local health departments.

Laboratory Response Network (LRN) laboratories

Providers voluntarily submit specimens to one of the 9 Texas LRNs for influenza PCR testing throughout the season. Providers sign up for this program through their local health departments.

NREVSS

Laboratories voluntarily report influenza and other respiratory virus data weekly through the CDC's online NREVSS reporting system. **Laboratories sign up for this program by contacting DSHS.** http://www.cdc.gov/surveillance/nrevss/

Recommended Resources

Texas Department of State Health Services

DSHS influenza page: http://www.texasflu.org/
Influenza surveillance data and reports: https://www.dshs.texas.gov/influenza-flu/influenza-flu-surveillance
Texas Health Service Regions: http://www.dshs.state.tx.us/regions/state.shtm

Centers for Disease Control and Prevention

National FluView weekly flu report: https://www.cdc.gov/fluview/index.html
Variant influenza viruses: http://www.cdc.gov/flu/swineflu/variant.htm
Avian influenza viruses: http://www.cdc.gov/flu/avianflu/index.htm
Swine influenza viruses: http://www.cdc.gov/flu/swineflu/index.htm
Infection Control in Healthcare Facilities: http://www.cdc.gov/flu/professionals/infectioncontrol/
Seasonal Flu Information for Schools and Childcare Providers:
https://archive.cdc.gov/#/details?url=https://www.cdc.gov/flu/school/index.htm

Texas Respiratory Syncytial Virus (RSV) Surveillance Components and Measures

Technical Notes

The start of RSV season is the first of two consecutive weeks with ≥10% of tests positive, and the end is the last of two consecutive weeks with ≥10% of tests positive.

"The percentage of positive detections reflects test ordering practices and might not directly reflect disease burden." Centers for Disease Control and Prevention. Respiratory Syncytial Virus-United States, July 2007-June 2011. Morbidity and Mortality Weekly Report (MMWR). September 2011; 60 (35):1203-1206.

National and state RSV analyses typically rely on antigen test data; however PCR testing is also becoming more common.

Regional-level results may not be reliable if the number of RSV tests performed each week is small or if reporting is inconsistent. There is currently insufficient data/ participating RSV reporters to properly present trends for the following regions:

PHR 10 (Upper Rio Grande/El Paso)

RSV is not a notifiable condition in Texas. Sentinel laboratories voluntarily enter their RSV data weekly into the CDC National Respiratory and Enteric Virus Surveillance System (NREVSS), and these data are compiled to create the Texas Weekly RSV Report

Texas COVID-19 Surveillance Components and Measures

Mortality

Due to constraints related to COVID-19 funding, updates to the COVID-19 fatality data may be delayed, and some information might be missing or not aligned with the latest MMWR report.

COVID-19-associated Deaths in Texas Residents.
Death certificates must be filed with Texas DSHS within 10 days of the date of death but may be amended at a later date. COVID-19-associated deaths are deaths for which COVID-19 is listed as a cause of death on the death certificate. A medical certifier, usually a doctor, determines the cause(s) of death. DSHS does not include deaths of people who had COVID-19 but died of an unrelated cause. Fatalities are reported by where the person lived as listed on the death certificate. Fatality data may include both confirmed and probable cases. **Data is considered provisional and subject to update as additional information becomes available until annual data has been finalized.**

Appendix

Appendix 1: COVID-19 Data Sources and Limitations

Data sources for this report are Texas DSHS Vital Statistics, COVID-19-associated Fatalities.

Limitations

Vital Statistics

- Delay in reporting of COVID-19-associated fatalities of 10-14 days on average from date of death.

Appendix 2: COVID-19 Data Cleaning Procedures

This report is generated on a weekly cycle, with reports generated on Fridays and covering a one-week period beginning and ending the previous MMWR week.

For the fatality data file, out of state data was removed and residency is determined based on zip code of residence.

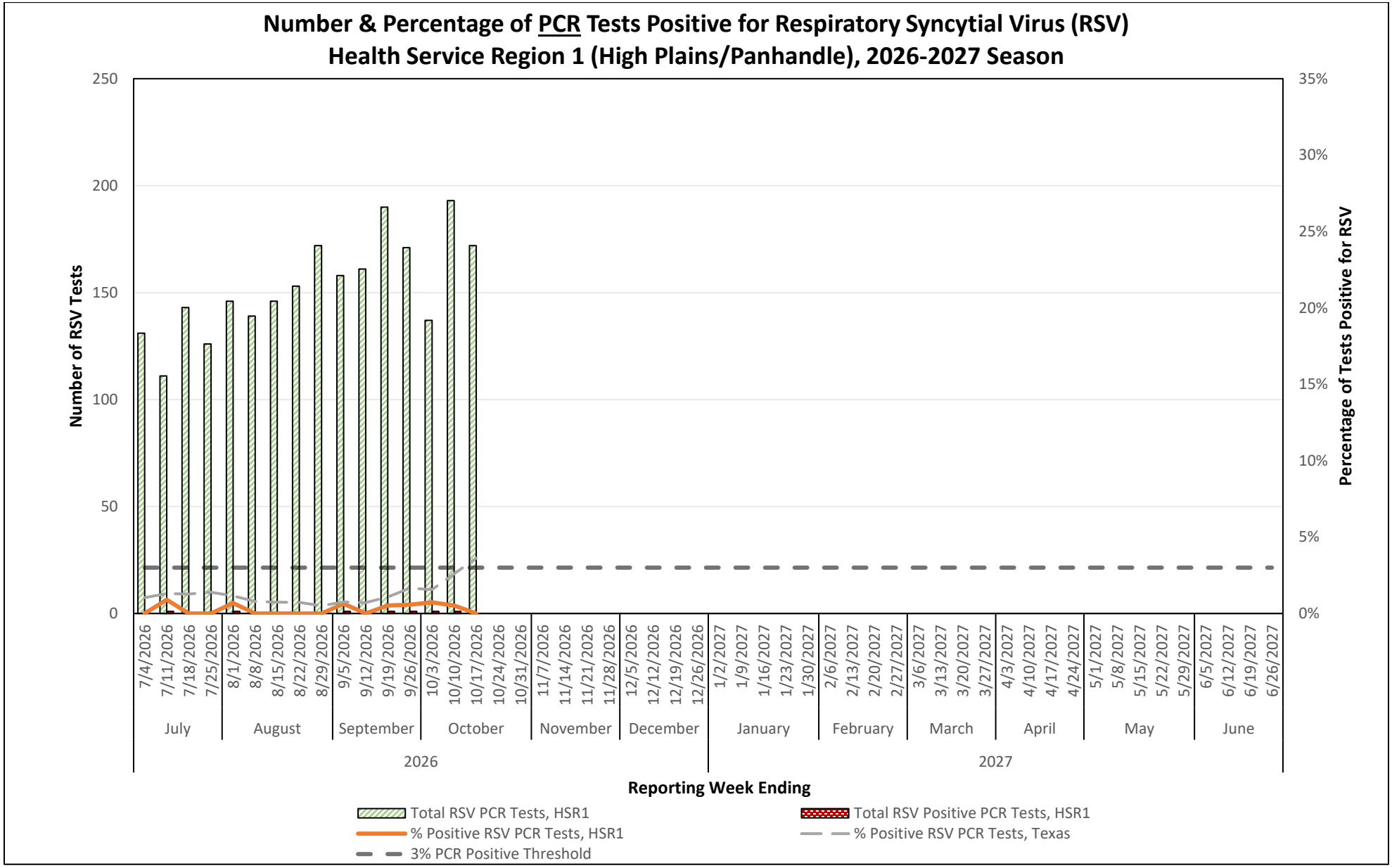
Appendix 3: MMWR Weeks

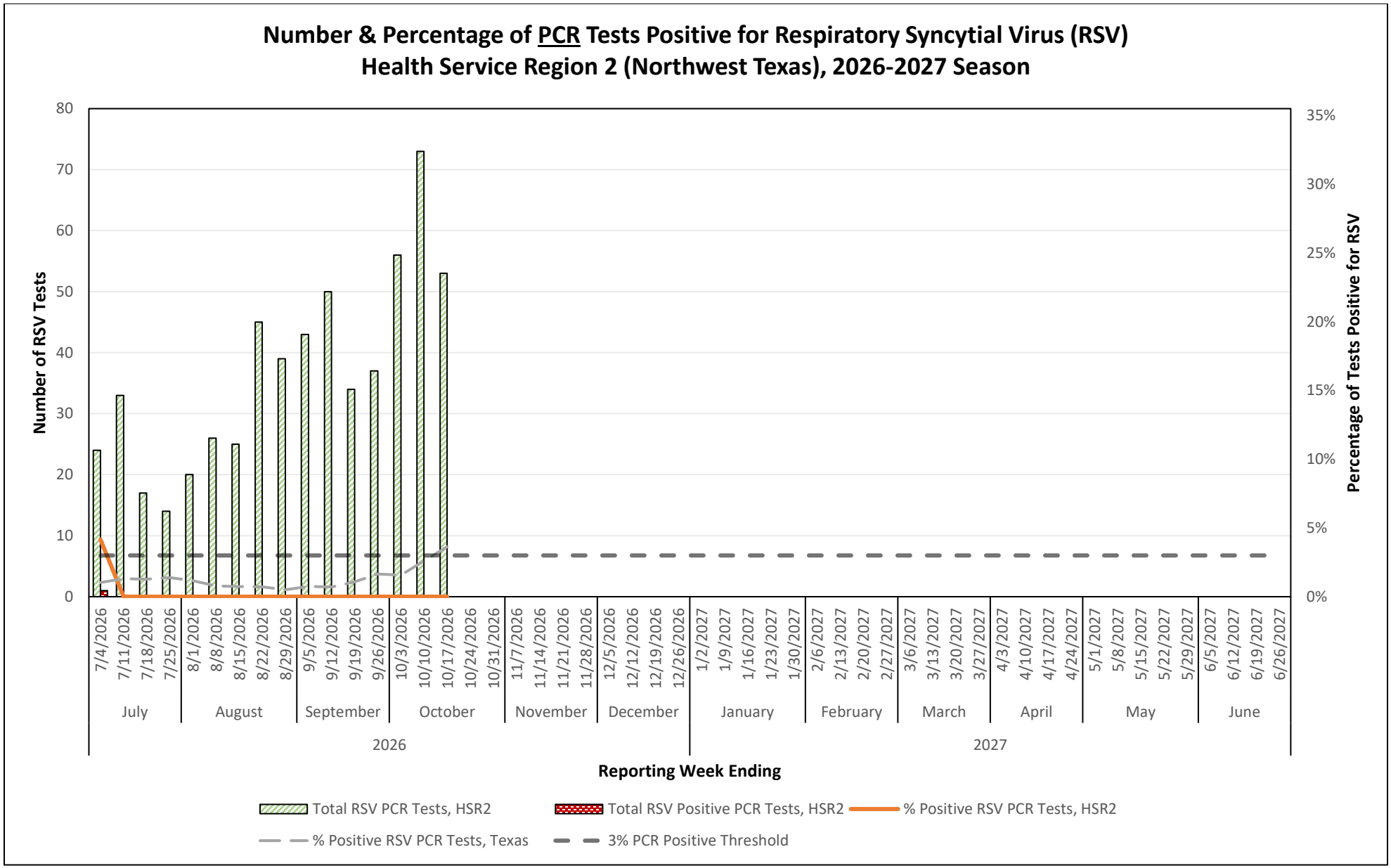
For a full list of MMWR Week dates please visit: https://ndc.services.cdc.gov/wp-content/uploads/MMWR-Week-Log-2025-2026.pdf

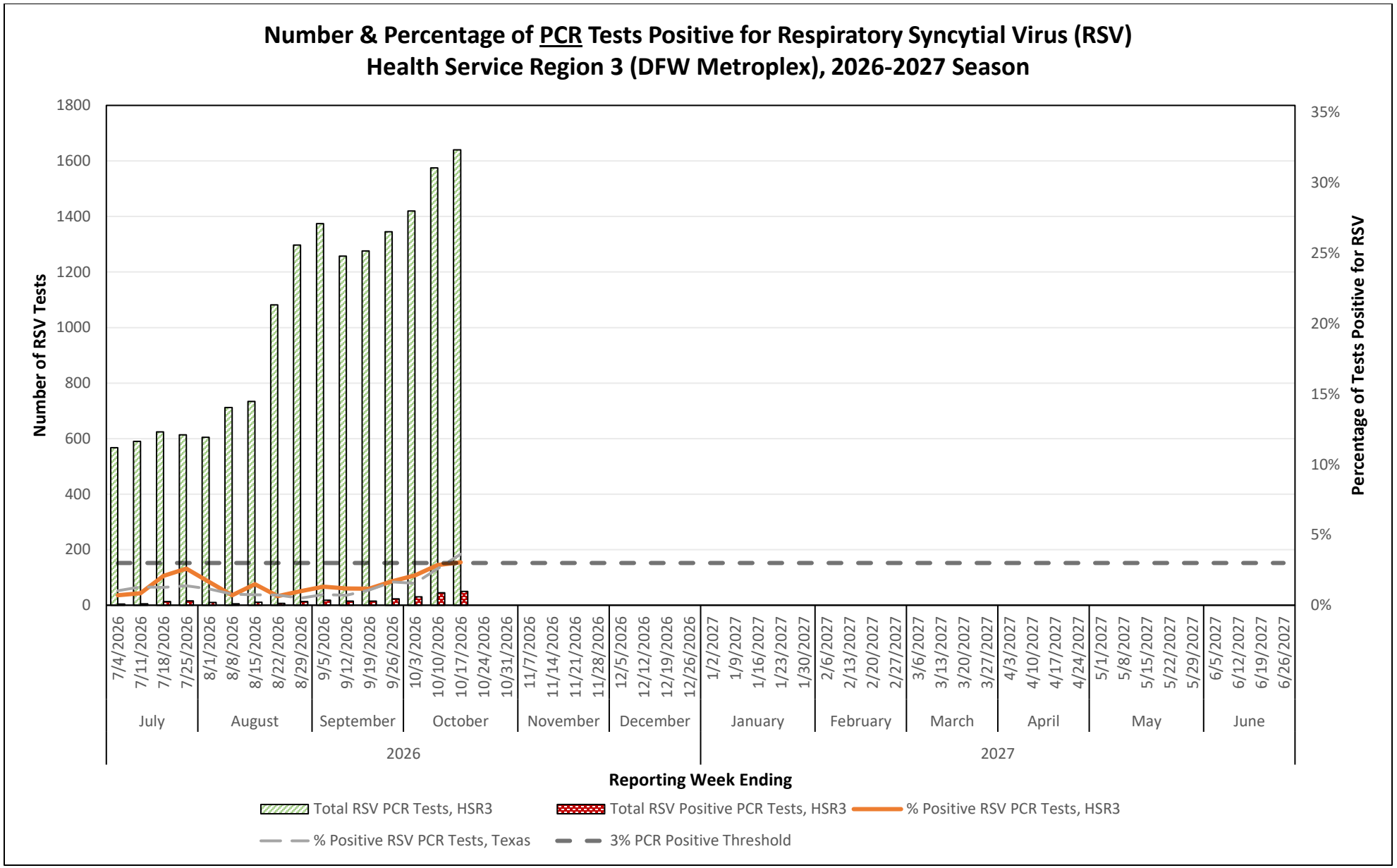
Appendix 4: COVID-19 Texas Demographic Center

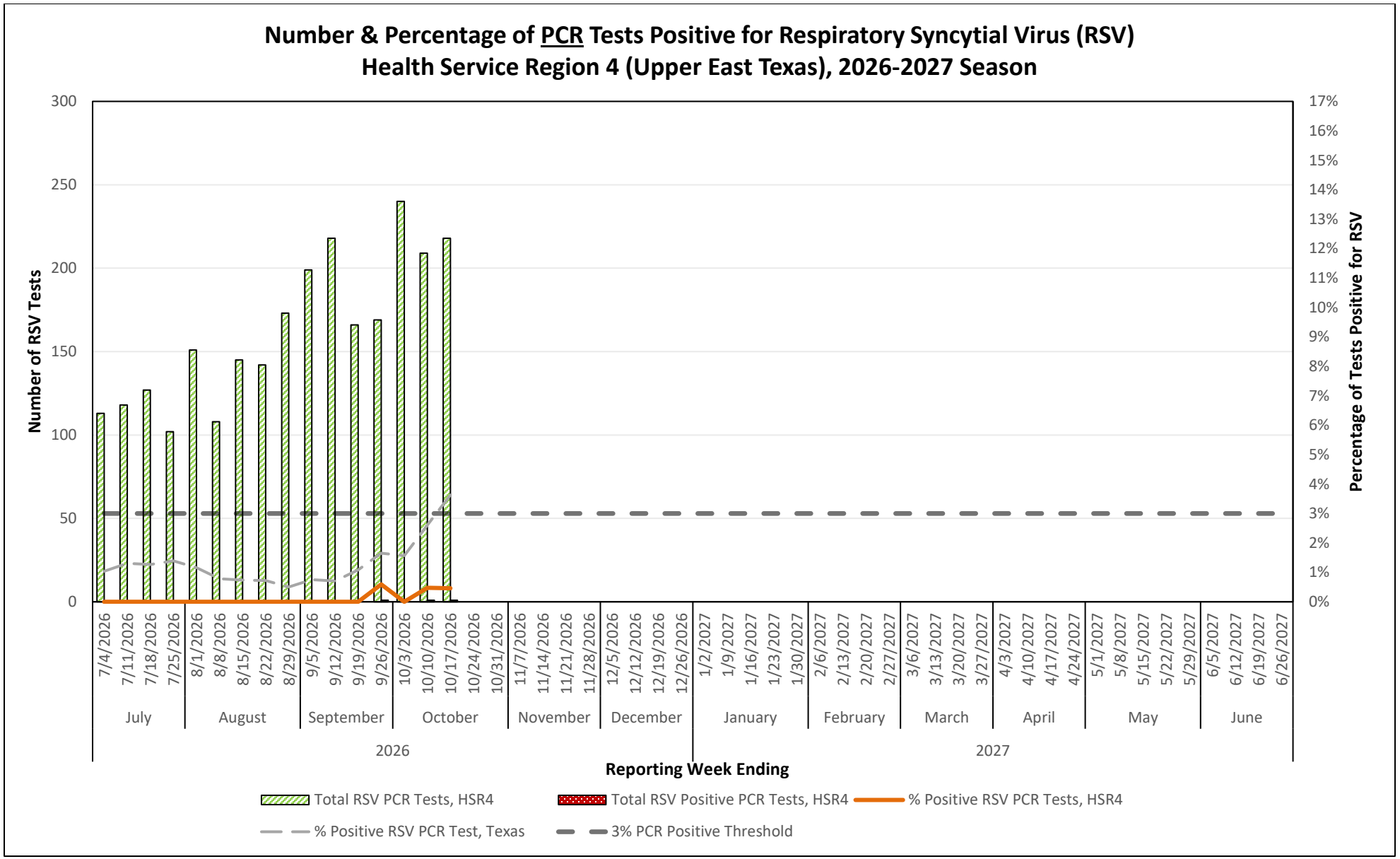
For population projections in Texas by county, please visit: https://demographics.texas.gov/Projections/

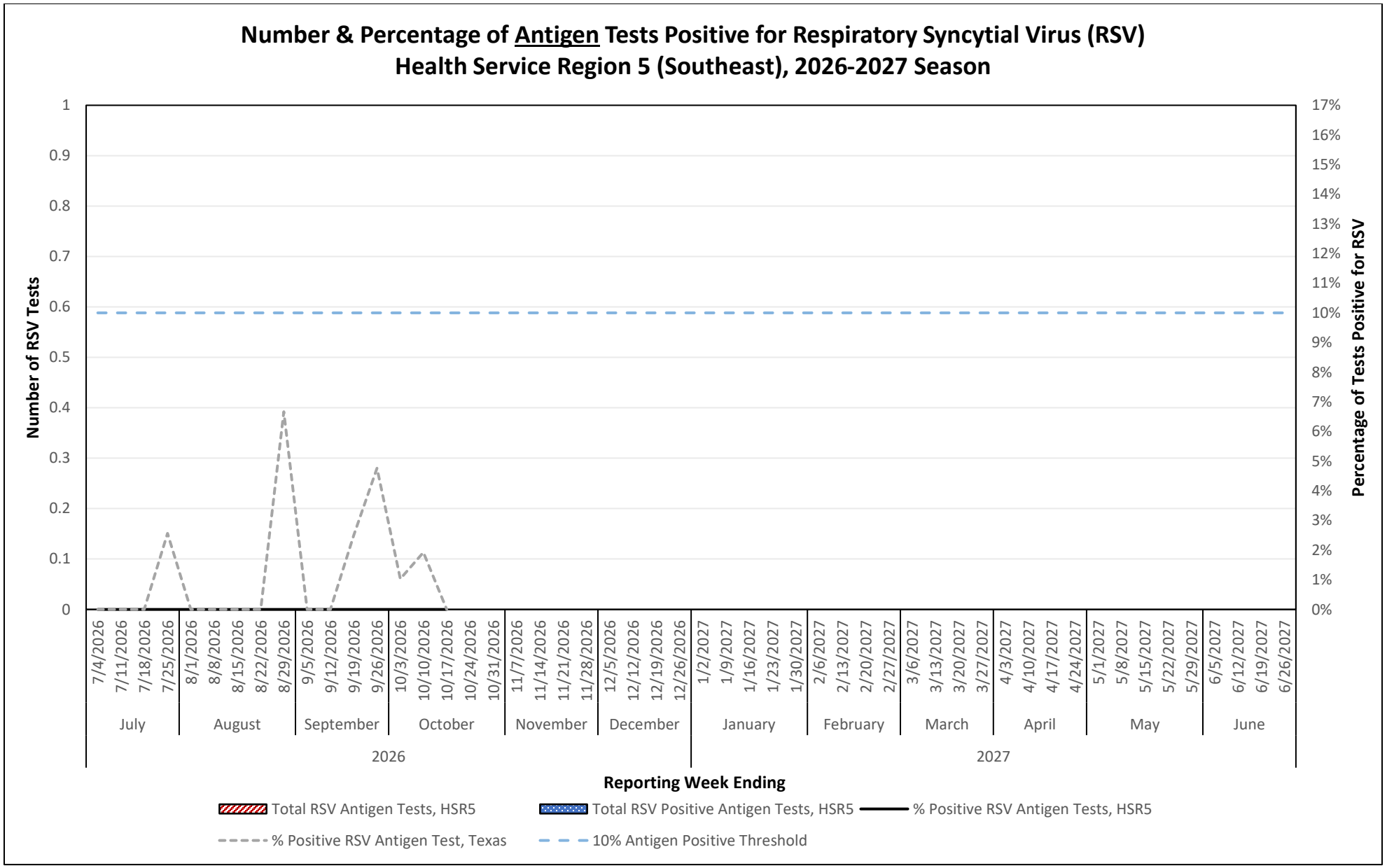
Appendix 5: Texas Respiratory Syncytial Virus (RSV) Surveillance by Health Service Region

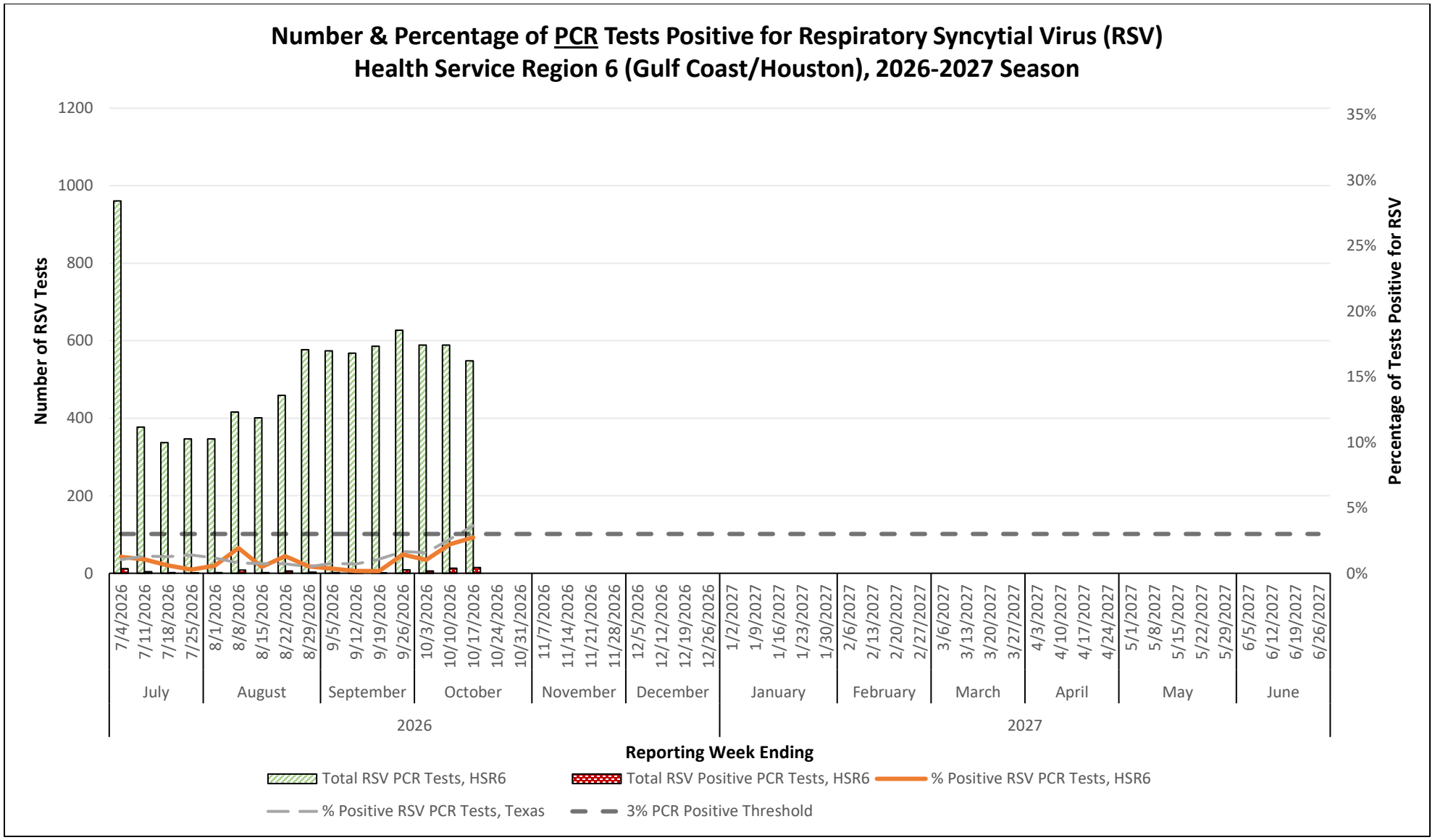


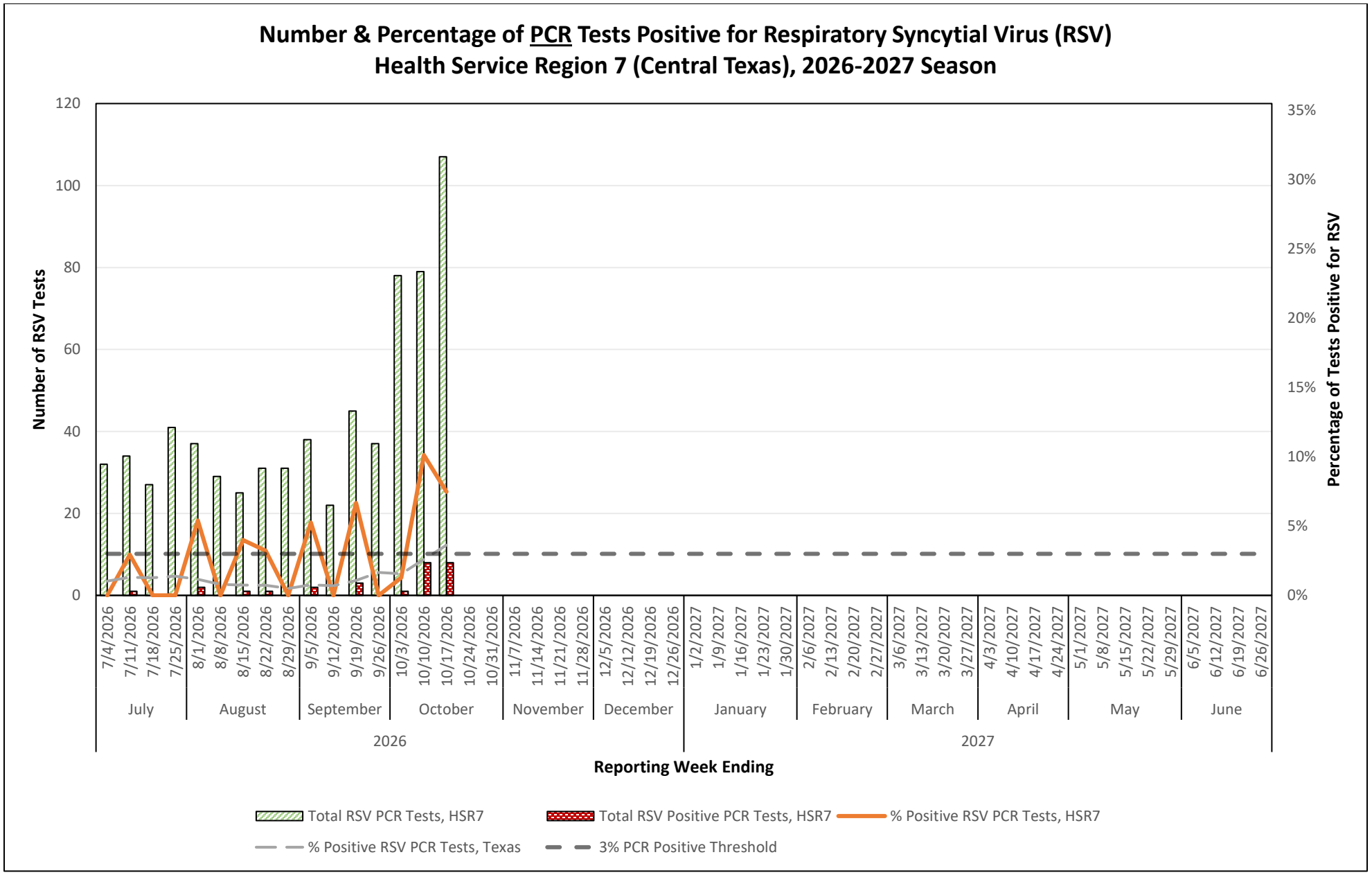

Number & Percentage of PCR Tests Positive for Respiratory Syncytial Virus (RSV)
Health Service Region 2 (Northwest Texas), 2026-2027 Season
Number of RSV Tests
Percentage of Tests Positive for RSV
Reporting Week Ending
2026
2027
July
August
September
October
November
December
January
February
March
April
May
June
Total RSV PCR Tests, HSR2
Total RSV Positive PCR Tests, HSR2
% Positive RSV PCR Tests, HSR2
% Positive RSV PCR Tests, Texas
3% PCR Positive Threshold

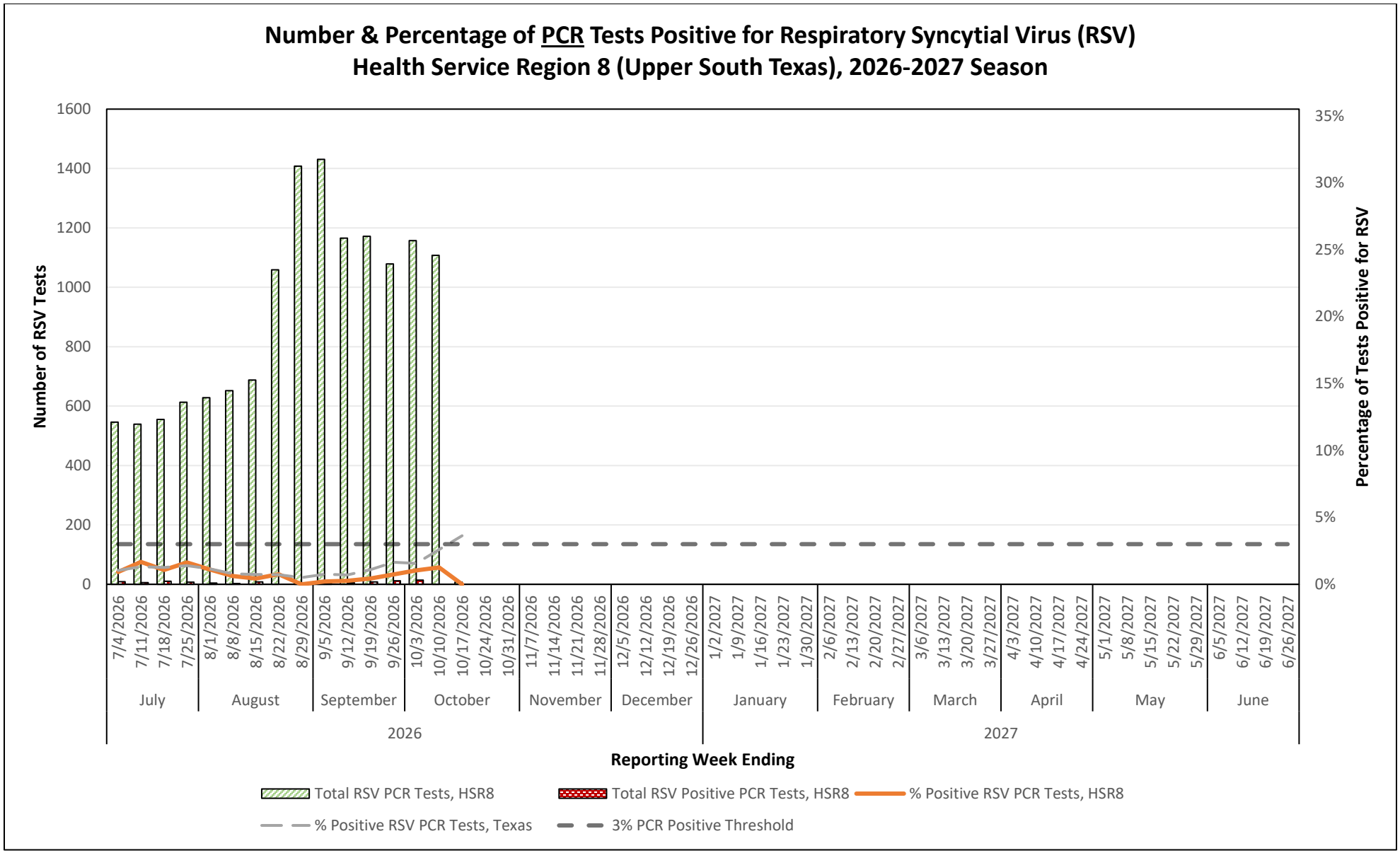

Number & Percentage of PCR Tests Positive for Respiratory Syncytial Virus (RSV)
Health Service Region 3 (DFW Metroplex), 2026-2027 Season
Number of RSV Tests
Percentage of Tests Positive for RSV
1800
1600
1400
1200
1000
800
600
400
200
0
35%
30%
25%
20%
15%
10%
5%
0%
7/4/2026
7/11/2026
7/18/2026
7/25/2026
8/1/2026
8/8/2026
8/15/2026
8/22/2026
8/29/2026
9/5/2026
9/12/2026
9/19/2026
9/26/2026
10/3/2026
10/10/2026
10/17/2026
10/24/2026
10/31/2026
11/7/2026
11/14/2026
11/21/2026
11/28/2026
12/5/2026
12/12/2026
12/19/2026
12/26/2026
1/2/2027
1/9/2027
1/16/2027
1/23/2027
1/30/2027
2/6/2027
2/13/2027
2/20/2027
2/27/2027
3/6/2027
3/13/2027
3/20/2027
3/27/2027
4/3/2027
4/10/2027
4/17/2027
4/24/2027
5/1/2027
5/8/2027
5/15/2027
5/22/2027
5/29/2027
6/5/2027
6/12/2027
6/19/2027
6/26/2027
July
August
September
October
November
December
January
February
March
April
May
June
2026
2027
Reporting Week Ending
Total RSV PCR Tests, HSR3
Total RSV Positive PCR Tests, HSR3
% Positive RSV PCR Tests, HSR3
% Positive RSV PCR Tests, Texas
3% PCR Positive Threshold

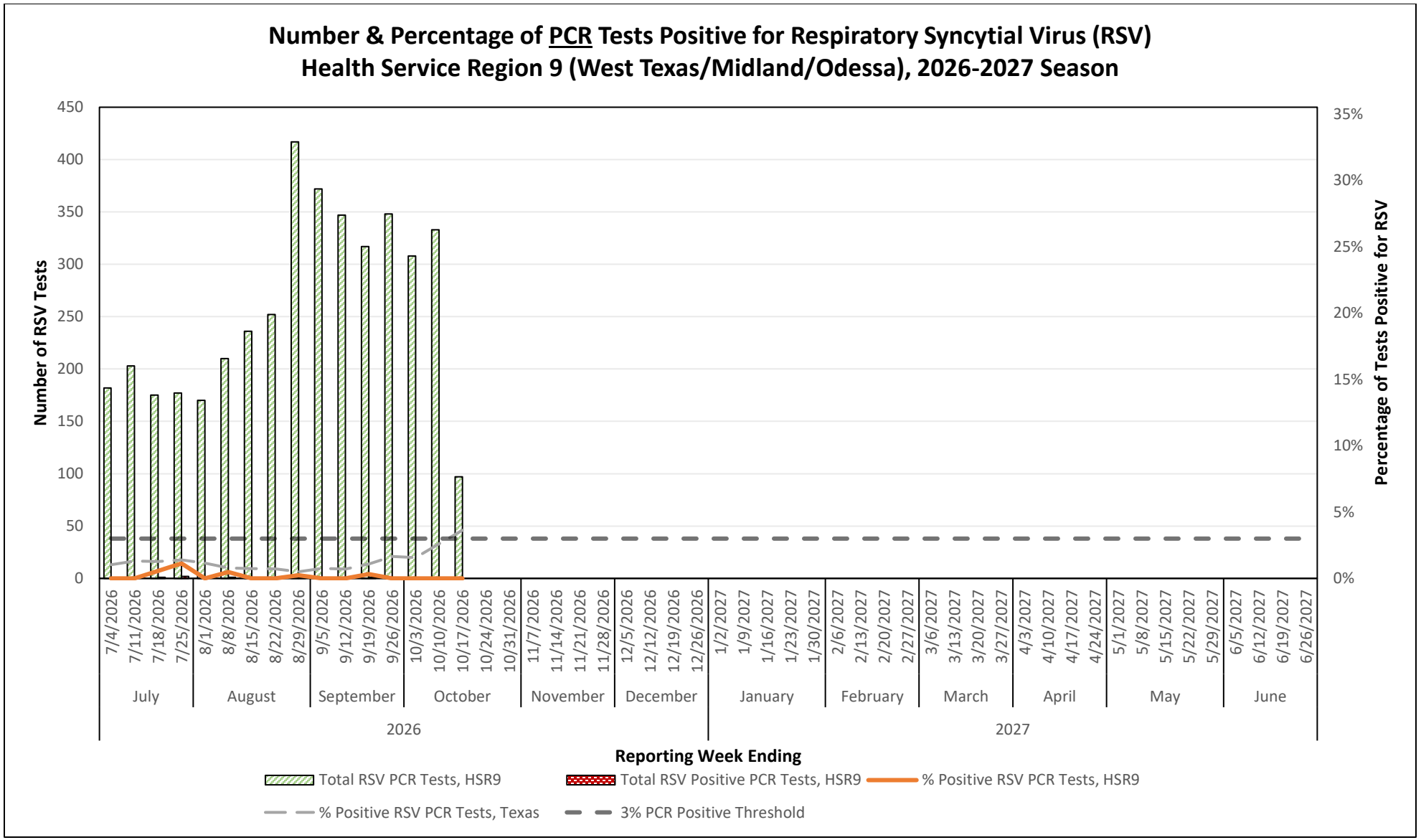

Number & Percentage of PCR Tests Positive for Respiratory Syncytial Virus (RSV)
Health Service Region 4 (Upper East Texas), 2026-2027 Season
Number of RSV Tests
Percentage of Tests Positive for RSV
300
250
200
150
100
50
0
17%
16%
15%
14%
13%
12%
11%
10%
9%
8%
7%
6%
5%
4%
3%
2%
1%
0%
7/4/2026
7/11/2026
7/18/2026
7/25/2026
8/1/2026
8/8/2026
8/15/2026
8/22/2026
8/29/2026
9/5/2026
9/12/2026
9/19/2026
9/26/2026
10/3/2026
10/10/2026
10/17/2026
10/24/2026
10/31/2026
11/7/2026
11/14/2026
11/21/2026
11/28/2026
12/5/2026
12/12/2026
12/19/2026
12/26/2026
1/2/2027
1/9/2027
1/16/2027
1/23/2027
1/30/2027
2/6/2027
2/13/2027
2/20/2027
2/27/2027
3/6/2027
3/13/2027
3/20/2027
3/27/2027
4/3/2027
4/10/2027
4/17/2027
4/24/2027
5/1/2027
5/8/2027
5/15/2027
5/22/2027
5/29/2027
6/5/2027
6/12/2027
6/19/2027
6/26/2027
July
August
September
October
November
December
January
February
March
April
May
June
2026
2027
Reporting Week Ending
Total RSV PCR Tests, HSR4
Total RSV Positive PCR Tests, HSR4
% Positive RSV PCR Tests, HSR4
% Positive RSV PCR Test, Texas
3% PCR Positive Threshold

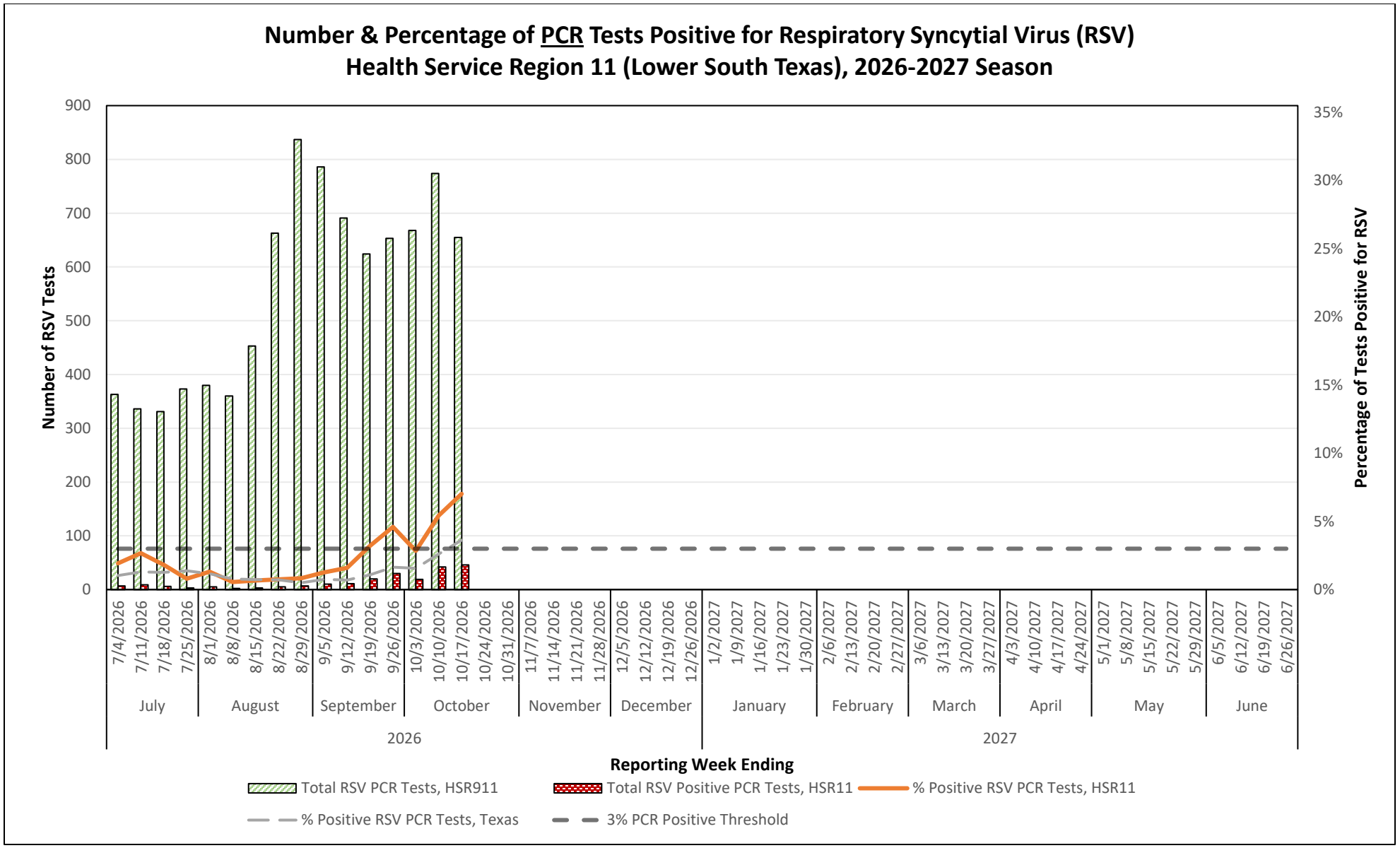

Number & Percentage of Antigen Tests Positive for Respiratory Syncytial Virus (RSV)
Health Service Region 5 (Southeast), 2026-2027 Season
Number of RSV Tests
Percentage of Tests Positive for RSV
1
0.9
0.8
0.7
0.6
0.5
0.4
0.3
0.2
0.1
0
17%
16%
15%
14%
13%
12%
11%
10%
9%
8%
7%
6%
5%
4%
3%
2%
1%
0%
7/4/2026
7/11/2026
7/18/2026
7/25/2026
8/1/2026
8/8/2026
8/15/2026
8/22/2026
8/29/2026
9/5/2026
9/12/2026
9/19/2026
9/26/2026
10/3/2026
10/10/2026
10/17/2026
10/24/2026
10/31/2026
11/7/2026
11/14/2026
11/21/2026
11/28/2026
12/5/2026
12/12/2026
12/19/2026
12/26/2026
1/2/2027
1/9/2027
1/16/2027
1/23/2027
1/30/2027
2/6/2027
2/13/2027
2/20/2027
2/27/2027
3/6/2027
3/13/2027
3/20/2027
3/27/2027
4/3/2027
4/10/2027
4/17/2027
4/24/2027
5/1/2027
5/8/2027
5/15/2027
5/22/2027
5/29/2027
6/5/2027
6/12/2027
6/19/2027
6/26/2027
July
August
September
October
November
December
January
February
March
April
May
June
2026
2027
Reporting Week Ending
Total RSV Antigen Tests, HSR5
Total RSV Positive Antigen Tests, HSR5
% Positive RSV Antigen Tests, HSR5
% Positive RSV Antigen Test, Texas
10% Antigen Positive Threshold


Number & Percentage of PCR Tests Positive for Respiratory Syncytial Virus (RSV)
Health Service Region 6 (Gulf Coast/Houston), 2026-2027 Season
Number of RSV Tests
Percentage of Tests Positive for RSV
Reporting Week Ending
Total RSV PCR Tests, HSR6
Total RSV Positive PCR Tests, HSR6
% Positive RSV PCR Tests, HSR6
% Positive RSV PCR Tests, Texas
3% PCR Positive Threshold


Number & Percentage of PCR Tests Positive for Respiratory Syncytial Virus (RSV)
Health Service Region 7 (Central Texas), 2026-2027 Season
Number of RSV Tests
Percentage of Tests Positive for RSV
120
100
80
60
40
20
0
35%
30%
25%
20%
15%
10%
5%
0%
7/4/2026
7/11/2026
7/18/2026
7/25/2026
8/1/2026
8/8/2026
8/15/2026
8/22/2026
8/29/2026
9/5/2026
9/12/2026
9/19/2026
9/26/2026
10/3/2026
10/10/2026
10/17/2026
10/24/2026
10/31/2026
11/7/2026
11/14/2026
11/21/2026
11/28/2026
12/5/2026
12/12/2026
12/19/2026
12/26/2026
1/2/2027
1/9/2027
1/16/2027
1/23/2027
1/30/2027
2/6/2027
2/13/2027
2/20/2027
2/27/2027
3/6/2027
3/13/2027
3/20/2027
3/27/2027
4/3/2027
4/10/2027
4/17/2027
4/24/2027
5/1/2027
5/8/2027
5/15/2027
5/22/2027
5/29/2027
6/5/2027
6/12/2027
6/19/2027
6/26/2027
July
August
September
October
November
December
January
February
March
April
May
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2026
2027
Reporting Week Ending
Total RSV PCR Tests, HSR7
Total RSV Positive PCR Tests, HSR7
% Positive RSV PCR Tests, HSR7
% Positive RSV PCR Tests, Texas
3% PCR Positive Threshold


Number & Percentage of PCR Tests Positive for Respiratory Syncytial Virus (RSV)
Health Service Region 8 (Upper South Texas), 2026-2027 Season
Number of RSV Tests
Percentage of Tests Positive for RSV
Reporting Week Ending
Total RSV PCR Tests, HSR8
Total RSV Positive PCR Tests, HSR8
% Positive RSV PCR Tests, HSR8
% Positive RSV PCR Tests, Texas
3% PCR Positive Threshold


Number & Percentage of PCR Tests Positive for Respiratory Syncytial Virus (RSV)
Health Service Region 9 (West Texas/Midland/Odessa), 2026-2027 Season
Number of RSV Tests
Percentage of Tests Positive for RSV
450
400
350
300
250
200
150
100
50
0
35%
30%
25%
20%
15%
10%
5%
0%
7/4/2026
7/11/2026
7/18/2026
7/25/2026
8/1/2026
8/8/2026
8/15/2026
8/22/2026
8/29/2026
9/5/2026
9/12/2026
9/19/2026
9/26/2026
10/3/2026
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10/17/2026
10/24/2026
10/31/2026
11/7/2026
11/14/2026
11/21/2026
11/28/2026
12/5/2026
12/12/2026
12/19/2026
12/26/2026
1/2/2027
1/9/2027
1/16/2027
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5/1/2027
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5/22/2027
5/29/2027
6/5/2027
6/12/2027
6/19/2027
6/26/2027
July
August
September
October
November
December
January
February
March
April
May
June
2026
2027
Reporting Week Ending
Total RSV PCR Tests, HSR9
Total RSV Positive PCR Tests, HSR9
% Positive RSV PCR Tests, HSR9
% Positive RSV PCR Tests, Texas
3% PCR Positive Threshold


Number & Percentage of PCR Tests Positive for Respiratory Syncytial Virus (RSV)
Health Service Region 11 (Lower South Texas), 2026-2027 Season
Number of RSV Tests
Percentage of Tests Positive for RSV
900
800
700
600
500
400
300
200
100
0
35%
30%
25%
20%
15%
10%
5%
0%
7/4/2026
7/11/2026
7/18/2026
7/25/2026
8/1/2026
8/8/2026
8/15/2026
8/22/2026
8/29/2026
9/5/2026
9/12/2026
9/19/2026
9/26/2026
10/3/2026
10/10/2026
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12/26/2026
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1/16/2027
1/23/2027
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3/6/2027
3/13/2027
3/20/2027
3/27/2027
4/3/2027
4/10/2027
4/17/2027
4/24/2027
5/1/2027
5/8/2027
5/15/2027
5/22/2027
5/29/2027
6/5/2027
6/12/2027
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6/26/2027
July
August
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October
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December
January
February
March
April
May
June
2026
2027
Reporting Week Ending
Total RSV PCR Tests, HSR911
Total RSV Positive PCR Tests, HSR11
% Positive RSV PCR Tests, HSR11
% Positive RSV PCR Tests, Texas
3% PCR Positive Threshold