

COVID-19 Monitor

COVID-19 cases, variants, vaccines, hospitalisations and deaths

10 February 2022

Table 1: NSW key indicators, as at 6 February 2022*

Key indicators	Date: 6 Feb (change from: 30 Jan)
7-day average daily COVID-19 cases, week to 6 Feb	10,263 (-5,238)
Growth factor for cases	0.94
7-day average daily COVID-19 deaths, week to 6 Feb	22 (-9)
COVID-19 patients under the care of NSW Health, as at 6 Feb	6,318 (-3,602)
COVID-19 patients in hospital, as at 6 Feb**	2,099 (-680)
Percentage who were unvaccinated	26.5%
Percentage with two or more doses	70.7%
COVID-19 patients in intensive care units (ICUs), as at 6 Feb	137 (-48)
Percentage who were unvaccinated	36.3%
Percentage with two or more doses	61.6%
Percentage of total occupied adult ICU beds with COVID-19 patients	27.0% (-8.9%)
Rates per million	
7-day average daily COVID-19 cases, week to 6 Feb	1,219.6 (-622.5)
COVID-19 patients under the care of NSW Health, as at 6 Feb	750.8
COVID-19 patients in hospital, as at 6 Feb	249.5
Hospital rate among unvaccinated / two dose vaccinated population (aged 12+)	1,446.9 / 268.6
COVID-19 patients in ICU, as at 6 Feb	16.3
ICU rate among unvaccinated / two dose vaccinated population (aged 12+)	123.8 / 15.7
COVID-19 vaccination, as at 6 Feb	
Percentage of population aged 16+ with two or more doses	94.1%
Percentage of population aged 12-15 with two or more doses	78.6%
Percentage of total population with two or more doses	79.4%

*See [NSW key indicators: notes and sources](#) at the end of this document. Please note: The definition of a hospitalised COVID-19 case changed on 3 Feb 2022, reducing the maximum time between symptom onset and admission date from 28 to 14 days. This rule has not yet been applied to all indicators in this report.

International reflections

- Cases of COVID-19 are increasing in Japan; decreasing in Australia, Canada, Denmark, Israel, the United Kingdom and the United States.
- The [US death toll from COVID-19 reached 900,000](#) last week, less than two months after passing 800,000. New cases and hospitalisations are declining across the country.¹
- In the UK, [COVID-19 reinfections](#) are now being included in the daily reported case numbers for England, Northern Ireland and Wales. In England, possible reinfections account for about 10% of new cases reported each week.²
- Preliminary UK data has shown that although [the proportion of paediatric hospitalisations has increased](#) during the Omicron wave, children have required fewer medical interventions, including ventilators and supplemental oxygen.³

Table 2: Summary of public health, healthcare and vaccination measures (select countries, Canadian provinces and NSW), as at 6 February 2022*

	7-day average confirmed cases	7-day average confirmed cases (per million)	7-day average deaths (per million)	% total population with two or more doses	COVID-19 patients in hospital	COVID-19 patients in hospital (per million)	COVID-19 patients in ICU	COVID-19 patients in ICU (per million)
NSW**	10,263	1,219.6	2.6	79.4%	2,099	249.5	137	16.3
Australia	20,752	804.7	2.7	78.7%	3,853	149.4	292	11.3
Belgium	34,302	2,948.8	3.3	76.4%	4,248	365.2	430	37.0
Canada	12,819	336.8	3.7	79.7%	8,505	223.4	1,044	27.4
Ontario	3,555	239.8	4.0	79.8%	2,155	145.4	486	32.8
Quebec	3,095	359.7	4.8	80.8%	2,425	281.8	178	20.7
Denmark	41,365	7,115.6	3.5	81.4%	1,156	198.9	34	5.8
Israel	52,341	5,633.5	7.0	65.7%	2,817	303.2	374	40.3
Japan	90,262	716.1	0.7	79.2%	22,653	179.7	1,440	11.4
Singapore	5,963	1,093.4	0.4	87.8%	1,063	194.9	11	2.0
United Kingdom	69,874	1,024.4	3.1	71.2%	14,634	214.6	478	7.0
United States	291,998	877.1	7.4	63.9%	107,767	323.7	20,591	61.9

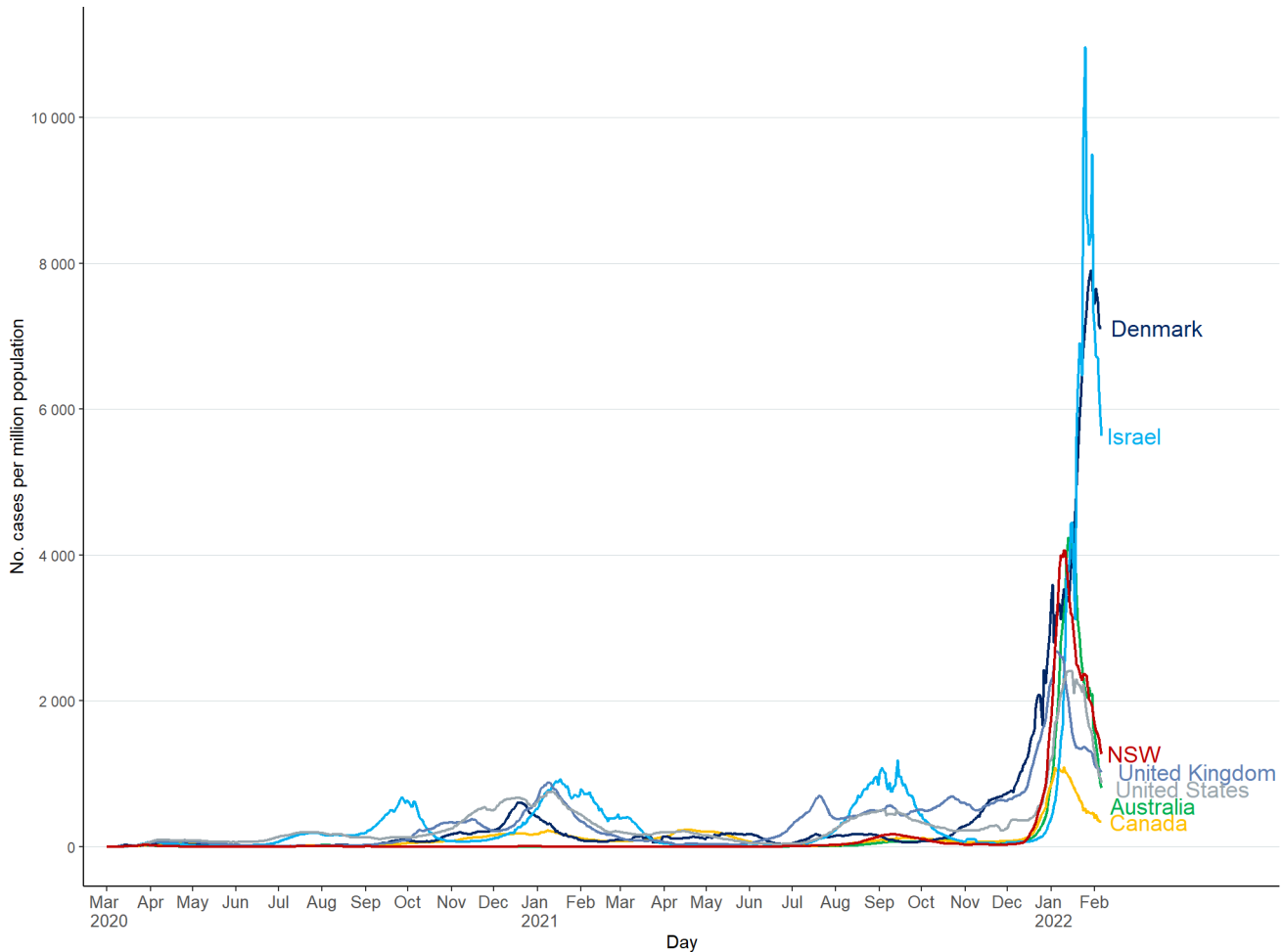
*See [Summary of public health: notes and sources](#) at the end of this document.

** Please note: The definition of a hospitalised COVID-19 case changed on 3 Feb 2022, reducing the maximum time between symptom onset and admission date from 28 to 14 days. This rule has not yet been applied to all indicators in this report.

COVID-19 daily rates of confirmed cases

Figure 1 shows the daily rate per million population (rolling seven-day average) of confirmed COVID-19 cases in NSW, Australia, United Kingdom, United States, Canada, Denmark and Israel, from March 2020 to February 2022.

Figure 1: Daily rates of COVID-19 cases (select countries and NSW), March 2020 – February 2022

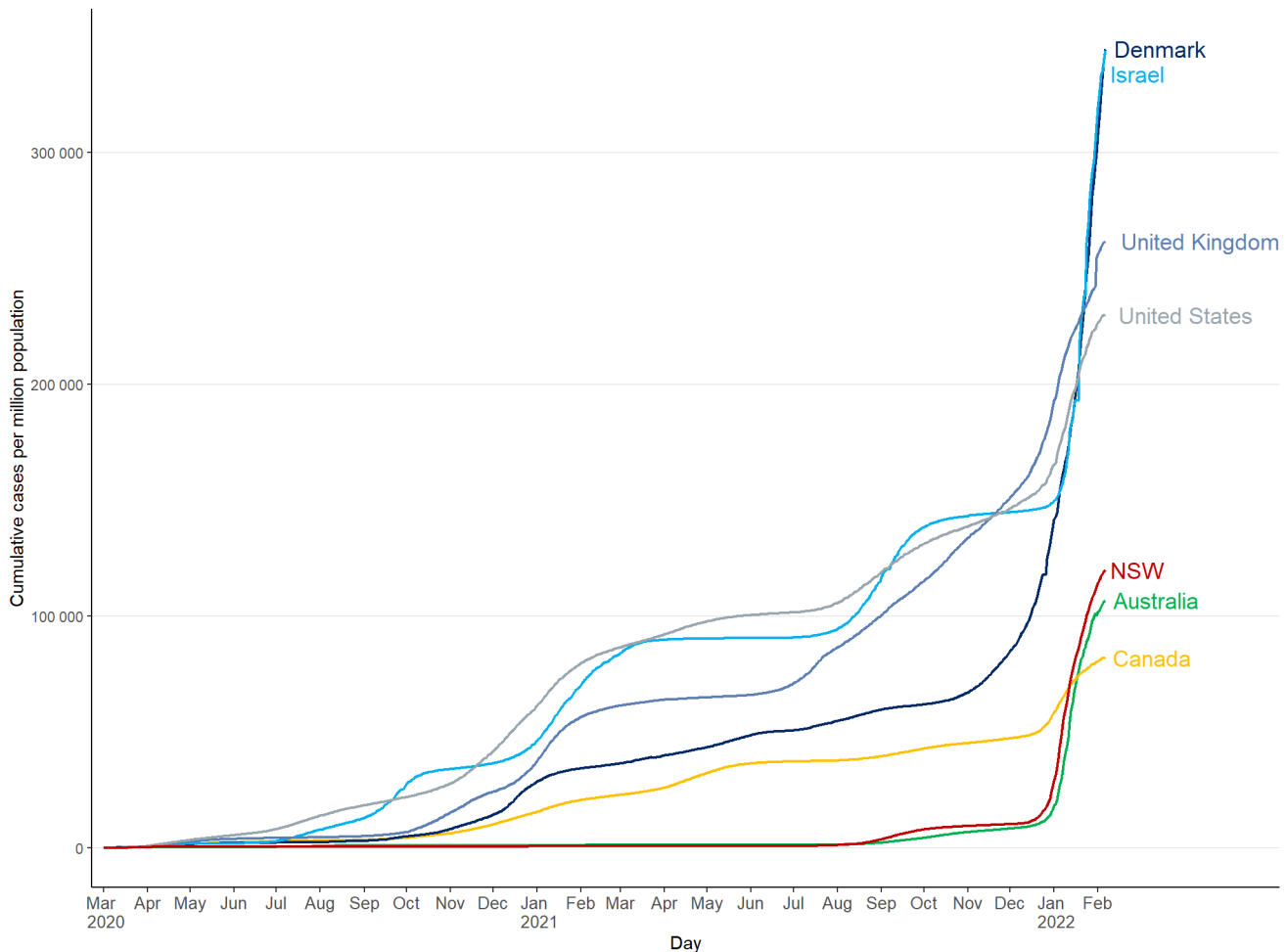


Note: See [COVID-19 daily rates: notes and sources](#) at the end of this document.

COVID-19 cumulative confirmed cases

Figure 2 shows the cumulative rate per million population of confirmed COVID-19 cases in NSW, Australia, United Kingdom, United States, Canada, Denmark and Israel, from March 2020 to February 2022.

Figure 2: Cumulative confirmed COVID-19 cases per million population, (select countries and NSW), March 2020 – February 2022

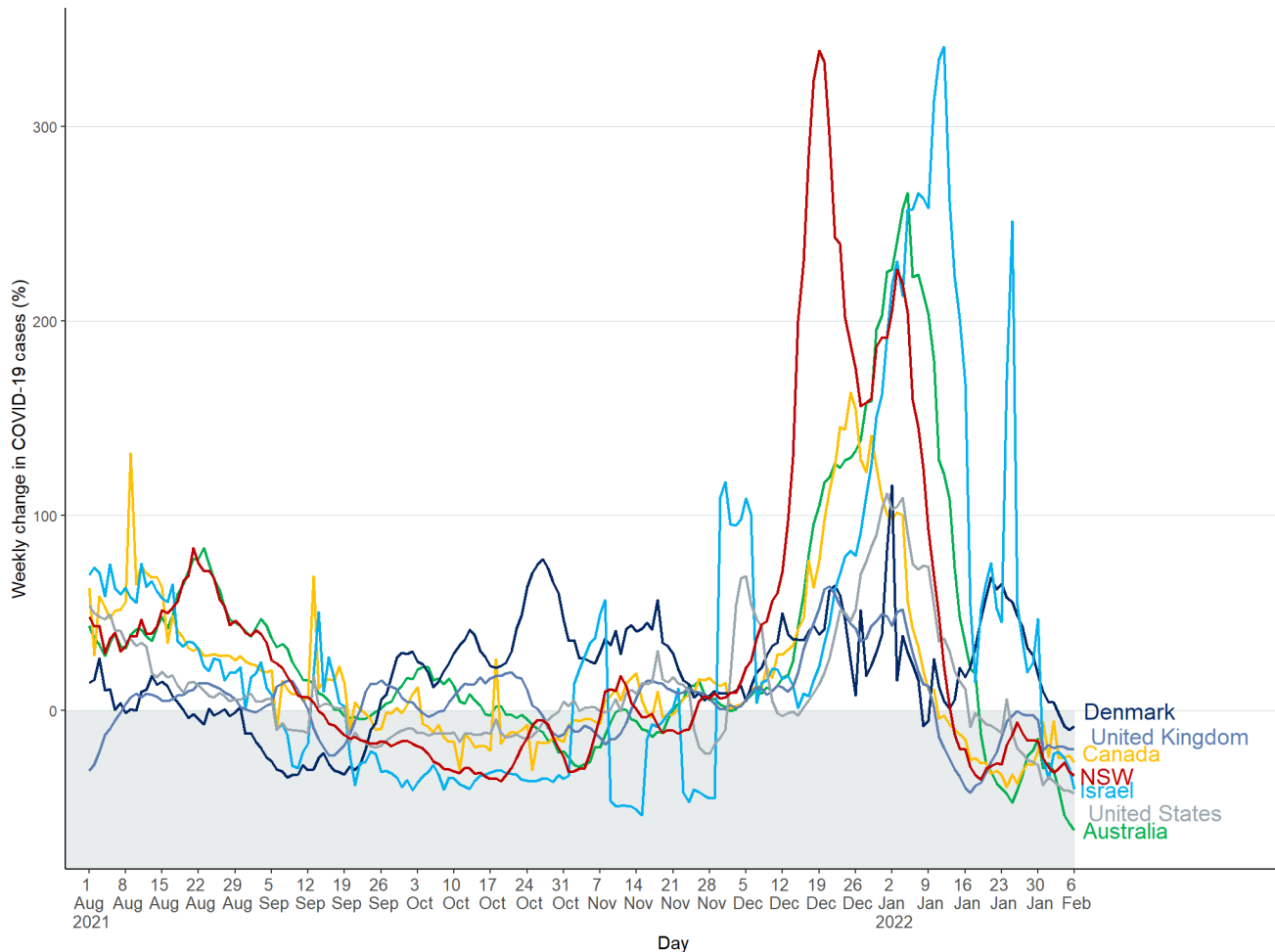


Note: See [COVID-19 daily rates: notes and sources](#) at the end of this document.

Weekly change in COVID-19 confirmed cases

Figure 3 shows the weekly percentage change of COVID-19 cases for NSW, Australia, United Kingdom, United States, Canada, Denmark and Israel, from August 2021 to February 2022. The weekly change of COVID-19 cases on any given day is measured as the percentage change in the number of confirmed cases in the last seven days, compared with the number in the previous seven days.

Figure 3: Weekly change in COVID-19 cases (select countries and NSW), August 2021 – February 2022

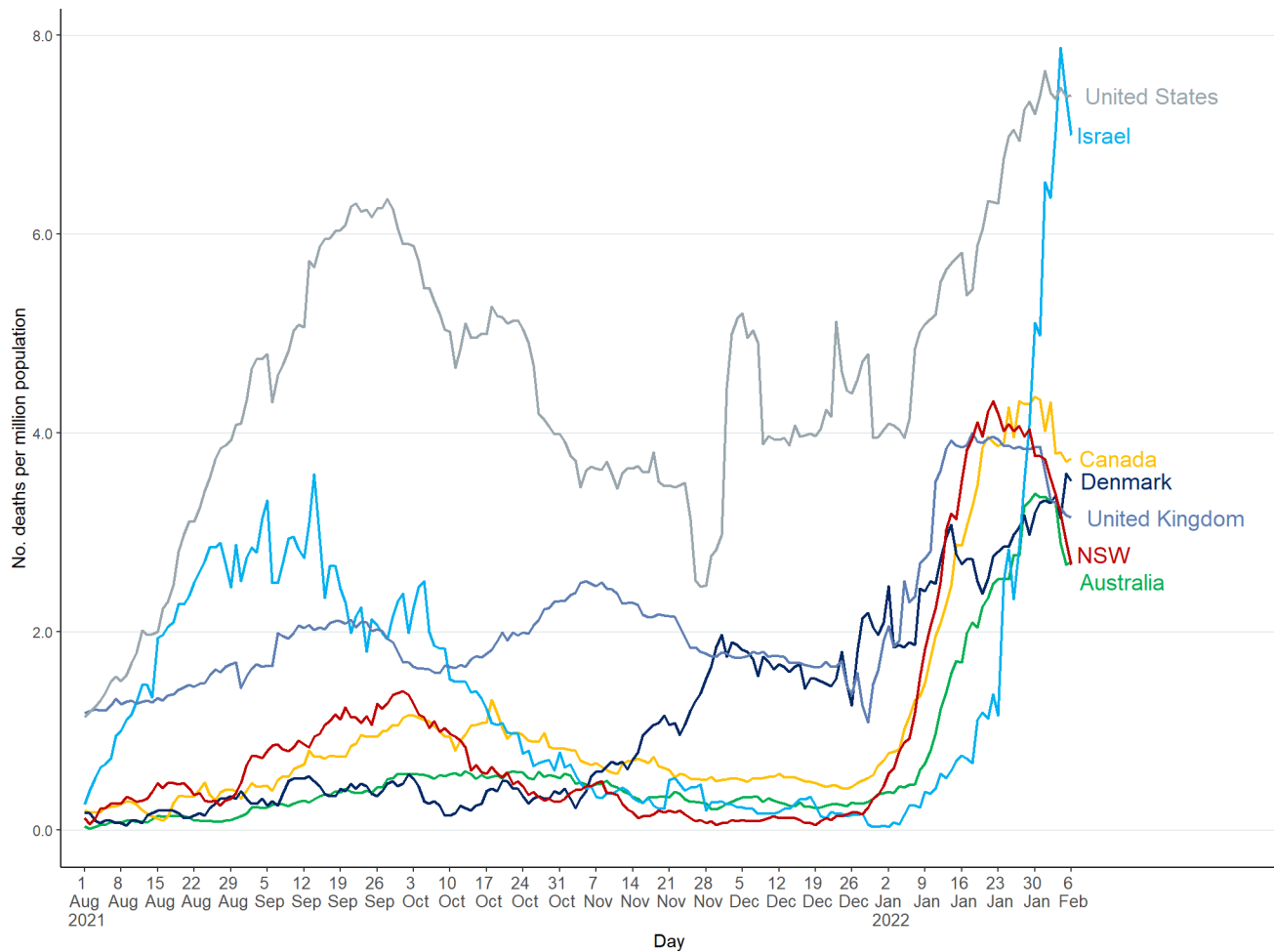


Note: See [COVID-19 daily rates: notes and sources](#) at the end of this document.

COVID-19 daily mortality rates

Figure 4 shows the daily mortality rate per million population (rolling seven-day average) in NSW, Australia, United Kingdom, United States, Canada, Denmark and Israel, from August 2021 to February 2022.

Figure 4: Daily mortality rates (select countries and NSW), August 2021 – February 2022

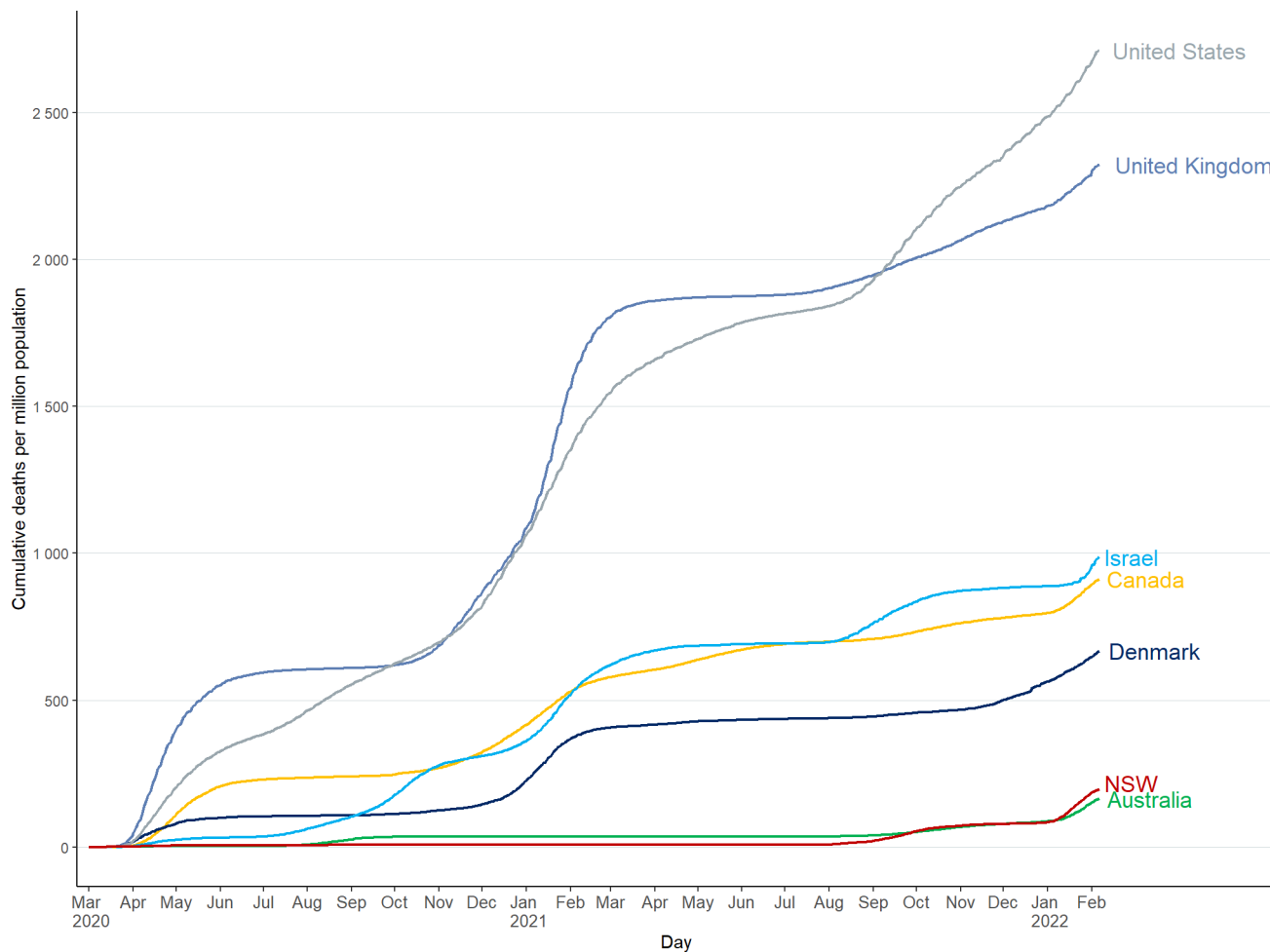


Note: See [COVID-19 daily rates: notes and sources](#) at the end of this document.

COVID-19 cumulative mortality rates

Figure 5 shows the cumulative mortality rate per million population in NSW, Australia, United Kingdom, United States, Canada, Denmark and Israel, from March 2020 to February 2022.

Figure 5: Cumulative mortality rates (select countries and NSW), March 2020 – February 2022

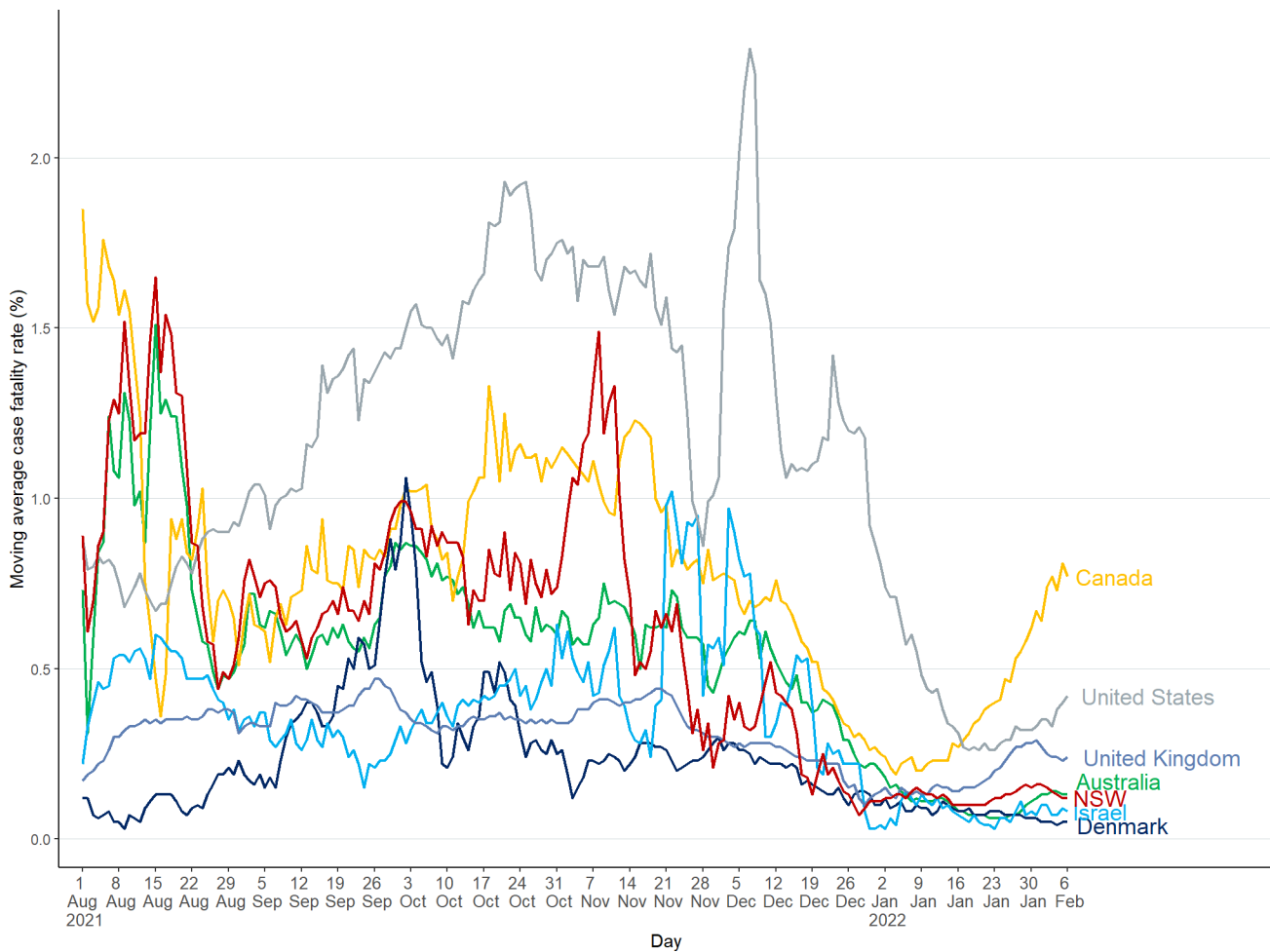


Note: See [COVID-19 daily rates: notes and sources](#) at the end of this document.

Case fatality rate for COVID-19

Figure 6 shows the case fatality rate (moving average) of COVID-19 in NSW, Australia, United Kingdom, United States, Canada, Denmark and Israel, from August 2021 to February 2022. The moving average case fatality rate on any given day is calculated as the ratio between the 7-day average number of confirmed deaths and the 7-day average number of confirmed cases 10 days earlier.

Figure 6: Case fatality rate of COVID-19 (select countries and NSW), August 2021 – February 2022

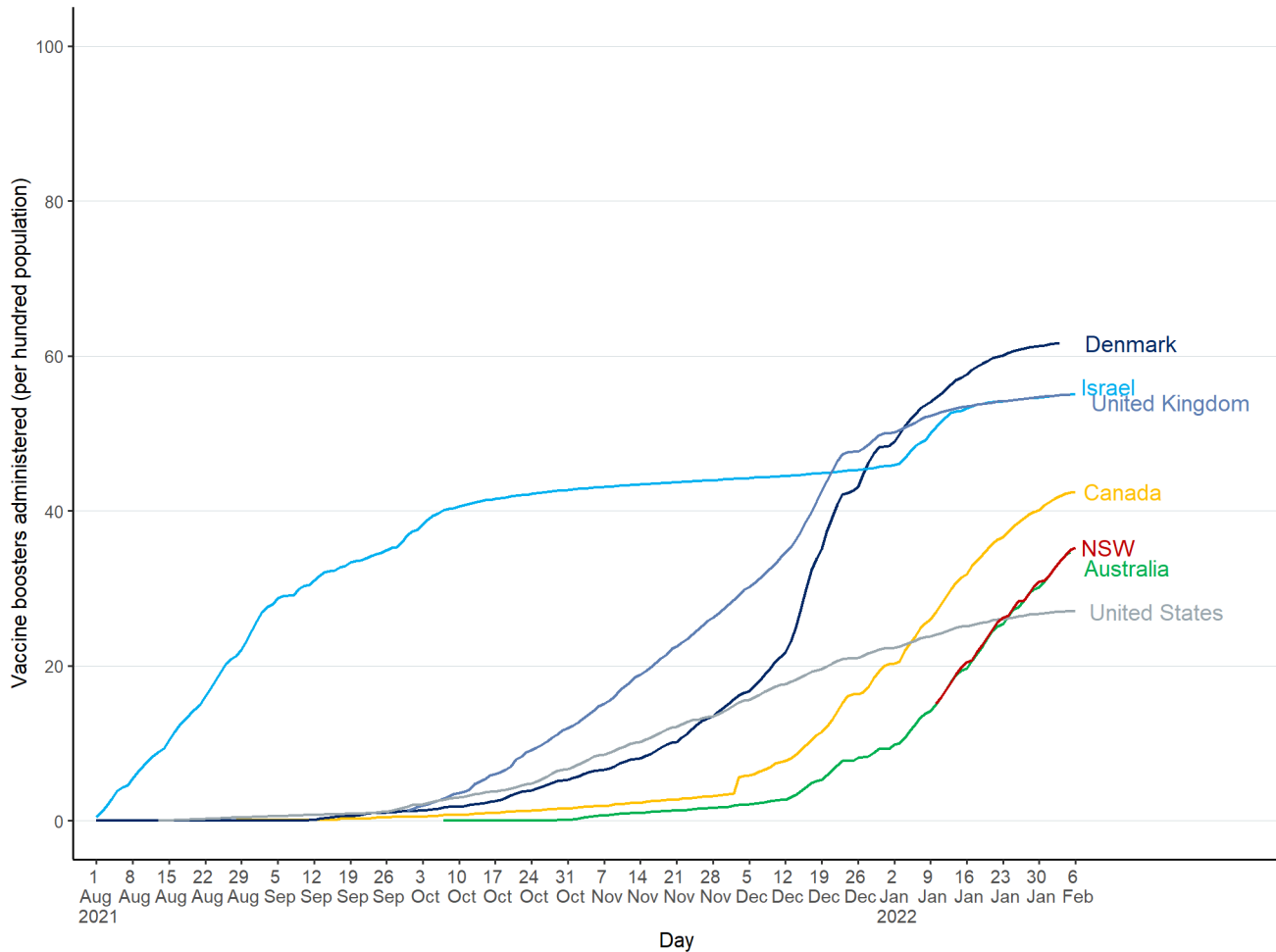


Note: See [COVID-19 daily rates: notes and sources](#) at the end of this document.

COVID-19 vaccine boosters

Figure 7 shows the total number of COVID-19 vaccine booster doses administered per hundred population in NSW, Australia, United Kingdom, United States, Canada, Denmark and Israel, from August 2021 to February 2022. Booster doses are defined as doses administered in addition to the original vaccination protocol of two doses.

Figure 7: Number of COVID-19 vaccine boosters administered (select countries), August 2021 – February 2022

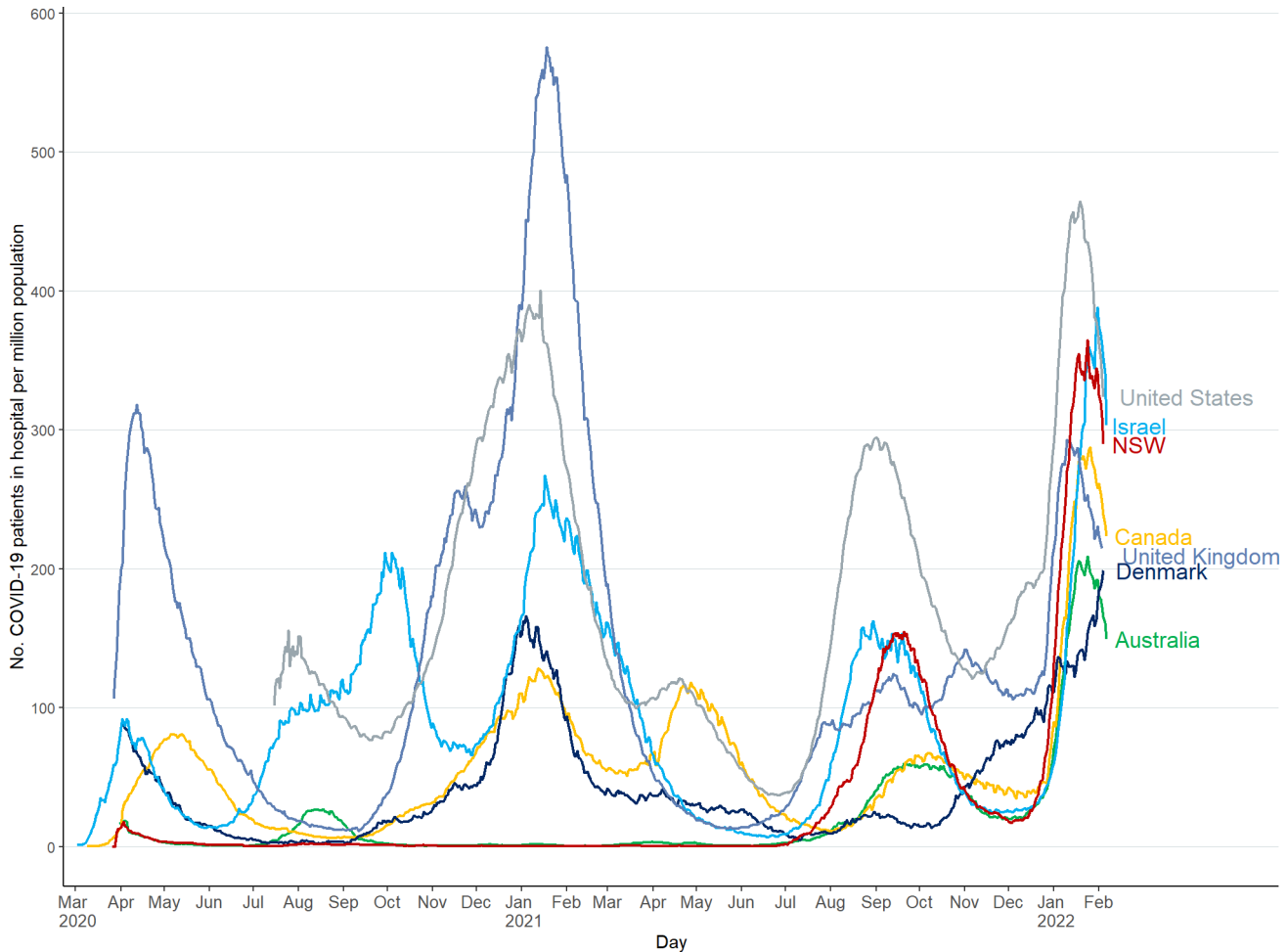


Note: See [COVID-19 daily rates: notes and sources](#) at the end of this document.

COVID-19 patients in hospital

Figure 8 shows the daily number of COVID-19 patients in hospital per million population in NSW, Australia, United Kingdom, United States, Canada, Denmark and Israel, from March 2020 to February 2022.

Figure 8: Number of COVID-19 patients in hospital (select countries and NSW), March 2020 – February 2022

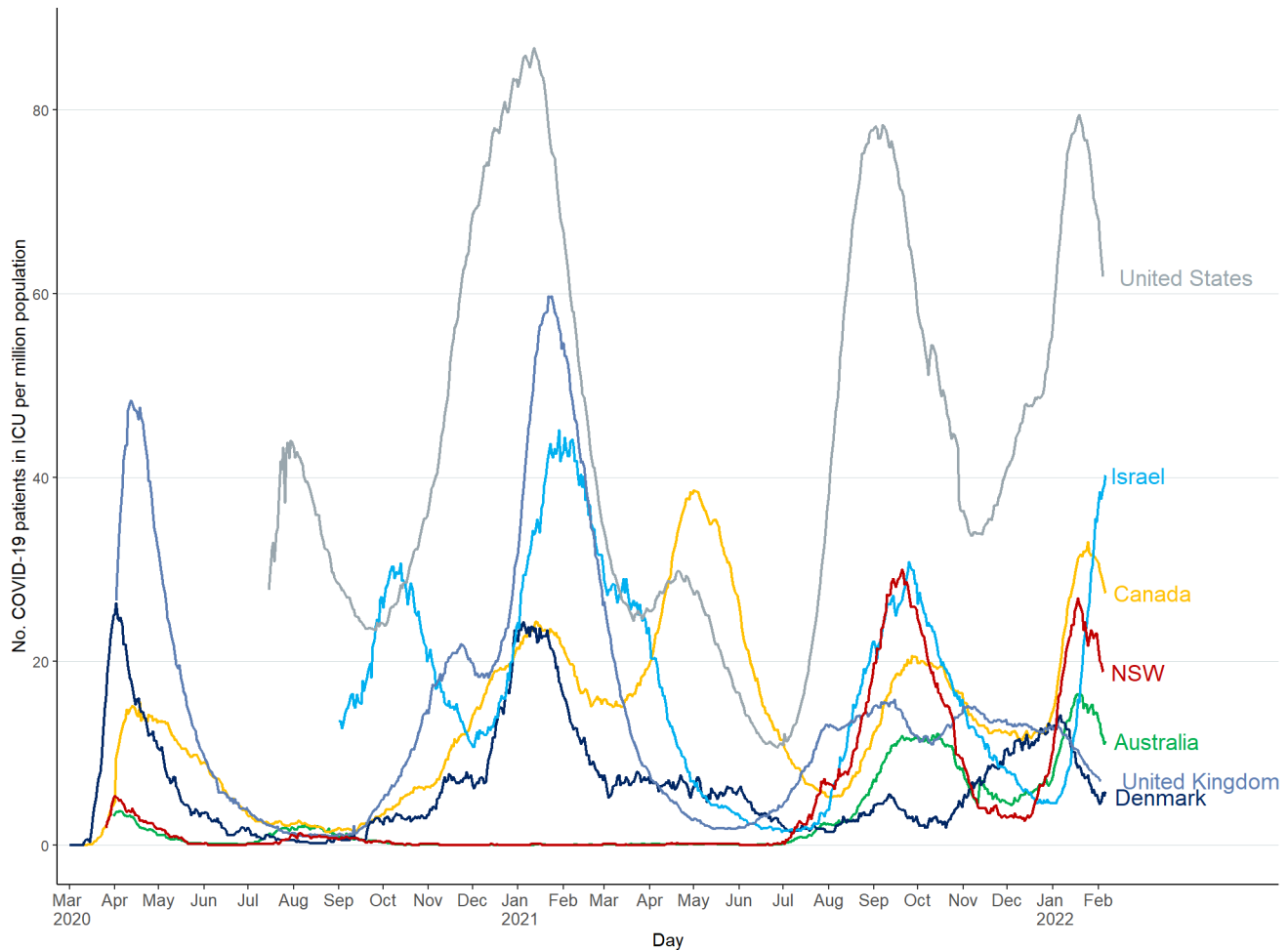


Note: See [COVID-19 daily rates: notes and sources](#) at the end of this document. The definition of a hospitalised COVID-19 case changed on 3 Feb 2022, reducing the maximum time between symptom onset and admission date from 28 to 14 days. This rule has not yet been applied to all indicators in this report.

COVID-19 patients in intensive care units

Figure 9 shows the daily number of COVID-19 patients in intensive care units per million population in NSW, Australia, United Kingdom, United States, Canada, Denmark and Israel, from March 2020 to February 2022.

Figure 9: Number of COVID-19 patients in intensive care units (select countries and NSW), March 2020 – February 2022



Note: See [COVID-19 daily rates: notes and sources](#) at the end of this document. Please note: The definition of a hospitalised COVID-19 case changed on 3 Feb 2022, reducing the maximum time between symptom onset and admission date from 28 to 14 days. This rule has not yet been applied to all indicators in this report..

COVID-19 cases, testing, variants, vaccines, hospitalisations and deaths*

The following graphs (figures 10 to 16) show COVID-19 cases and vaccination rates; hospitalisation and death rates; and the variant distribution for NSW, Australia, United Kingdom, United States, Canada, Denmark and Israel.

Series a: COVID-19 cases and vaccinations

The graphs in series 'a' show COVID-19 cases and vaccination rates for NSW and each of these countries from March 2020 to February 2022. They include the:

- daily rate per million population (rolling seven-day average) of confirmed COVID-19 cases
- cumulative number of people with one or more vaccine doses (per 100 population)
- cumulative number of people with two or more vaccine doses (per 100 population).

These graphs should be interpreted with caution as there are other factors that may influence the number of cases in addition to vaccination rates, including the level of social restrictions.

The cumulative number of people vaccinated per hundred population (one or more doses or two or more doses) is based on the full population (all ages) for all locations and countries, including NSW, to enable accurate comparability.

Note, there is variation in both 'x' axis and 'y' axis scales, and some gaps in time series across these graphs due to missing data.

Series b: COVID-19 hospitalisation and death rates

The graphs in series 'b' show COVID-19 hospitalisation and death rates for NSW and each of these countries. Specifically, they show the daily number of hospitalised patients (per million population) and the daily number of new deaths (rolling seven-day average and per million population), from March 2020 to February 2022.

Note, there is variation in both 'x' axis and 'y' axis scales and some gaps in time series across these graphs due to missing data.

Series c: COVID-19 variant distribution

The stacked area graphs in series 'c' show the COVID-19 variant distribution for each of these countries. Specifically, they show COVID-19 variant distribution for cases that have been sequenced, and the percentage of total COVID-19 cases that have been sequenced, from August 2021 to February 2022.

For most countries, weekly counts are shown; however, only monthly counts are available for Canada.

Note, there is variation in both 'x' axis and 'y' axis scales and some gaps in time series across these graphs due to missing data.

*See further [COVID-19 cases: notes and sources](#) at the end of this document.

NSW

Figure 10a: COVID-19 cases and vaccinations, NSW, March 2020 – February 2022

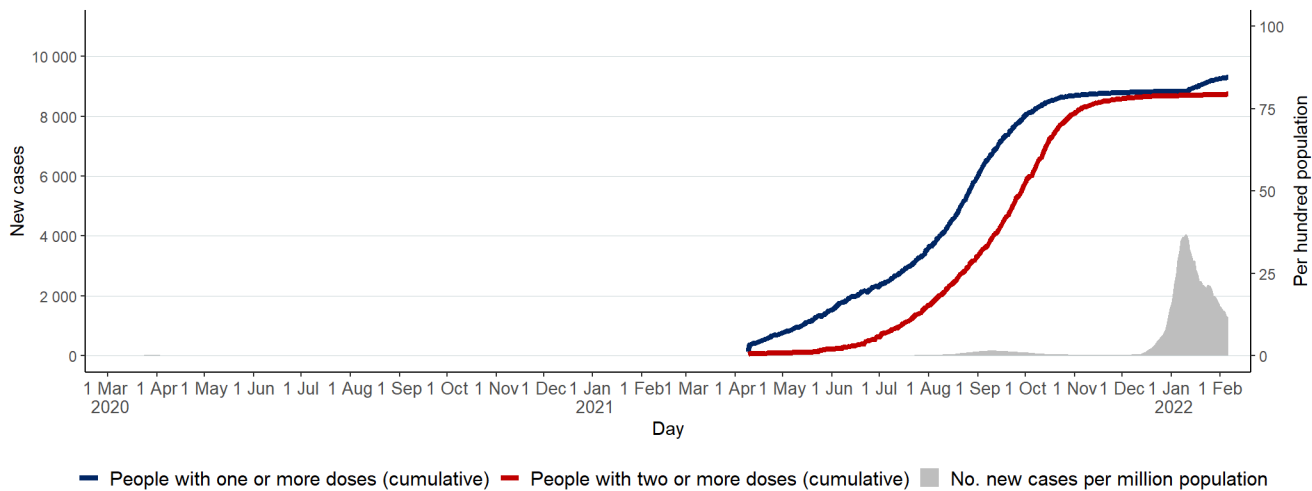
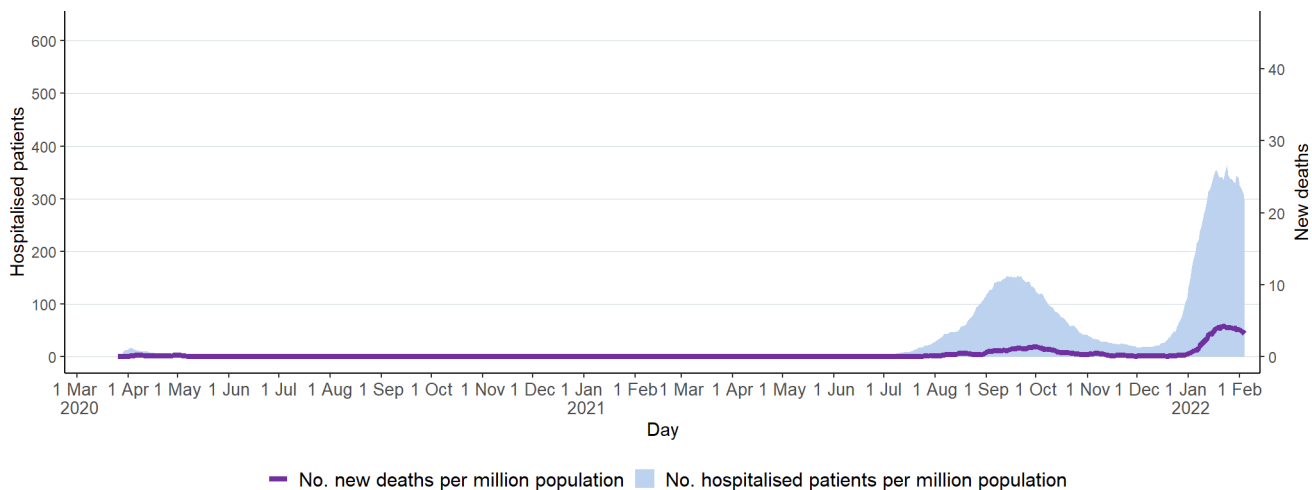


Figure 10b: COVID-19 hospitalisation and mortality rates, NSW, March 2020 – February 2022



Australia

Figure 11a: COVID-19 cases and vaccinations, Australia, March 2020 – February 2022

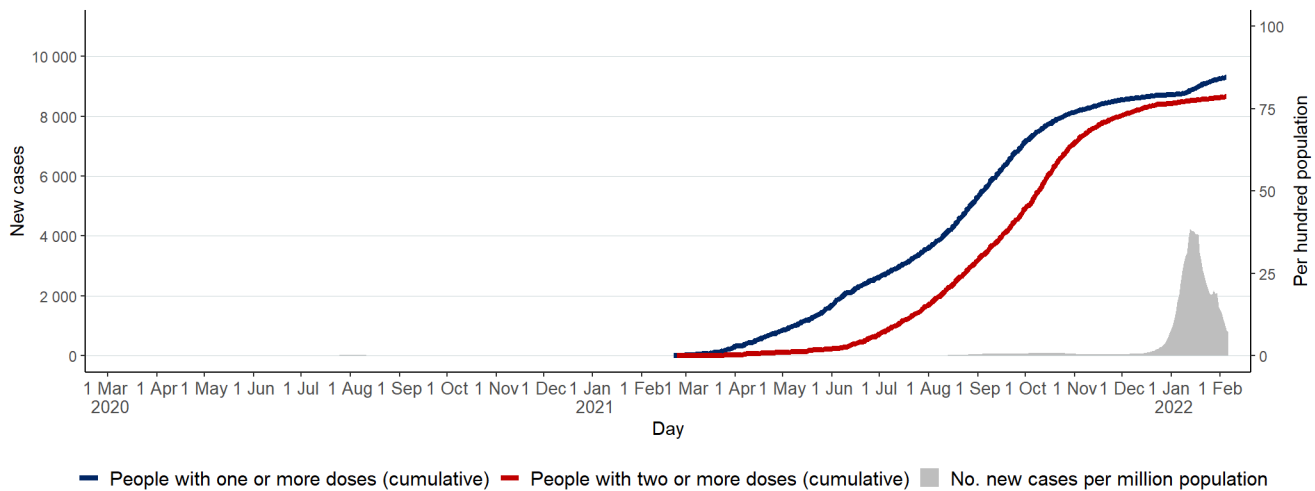


Figure 11b: COVID-19 hospitalisation and mortality rates, Australia, March 2020 – February 2022

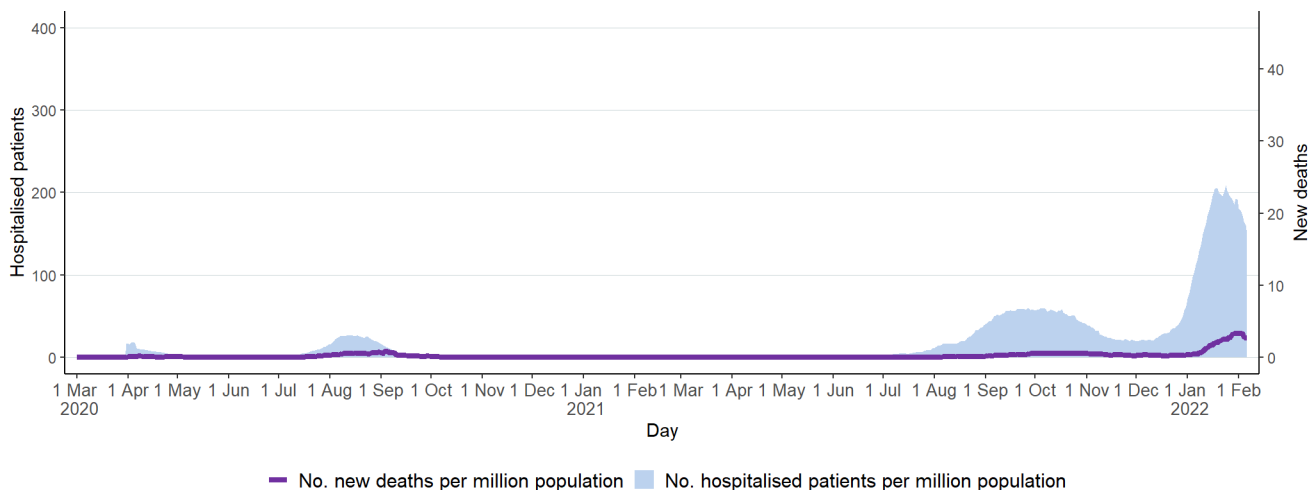
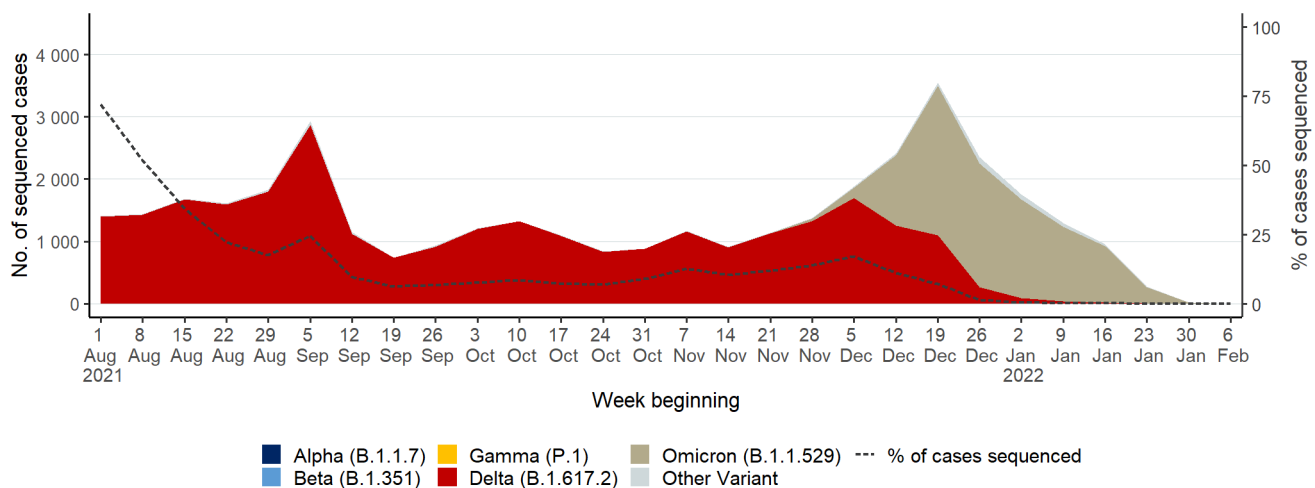


Figure 11c: COVID-19 variant distribution for a sample of cases that have been sequenced, Australia, August 2021 – February 2022



United Kingdom

Figure 12a: COVID-19 cases and vaccinations, United Kingdom, March 2020 – February 2022

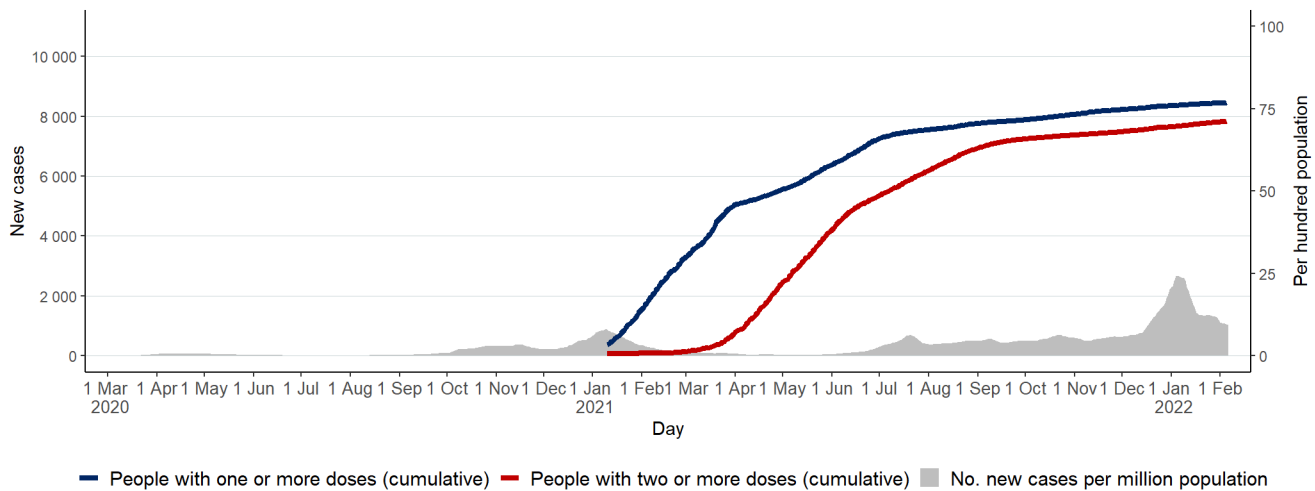


Figure 12b: COVID-19 hospitalisation and mortality rates, United Kingdom, March 2020 – February 2022

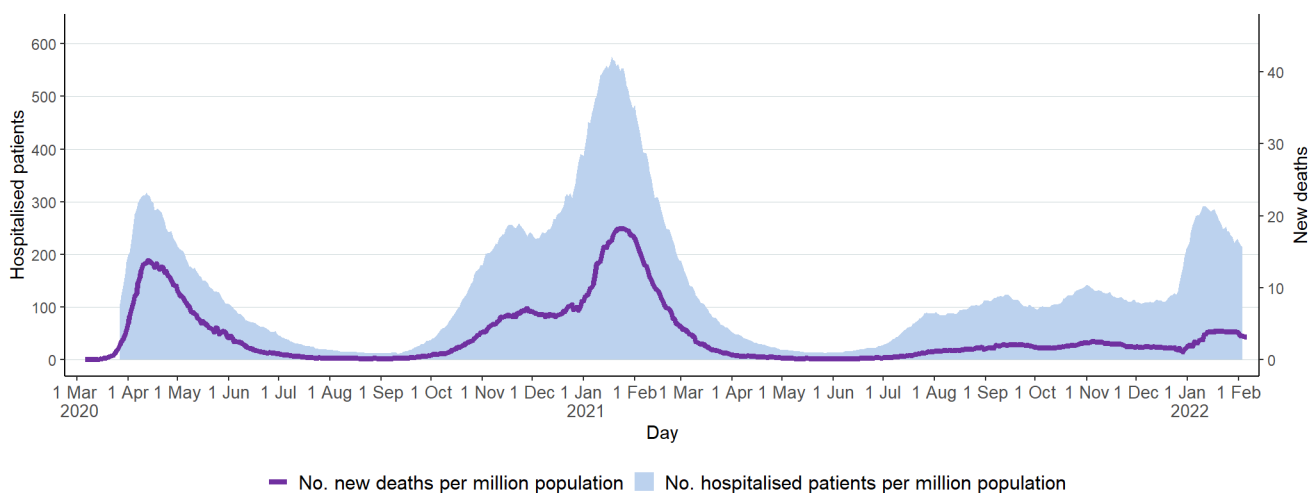
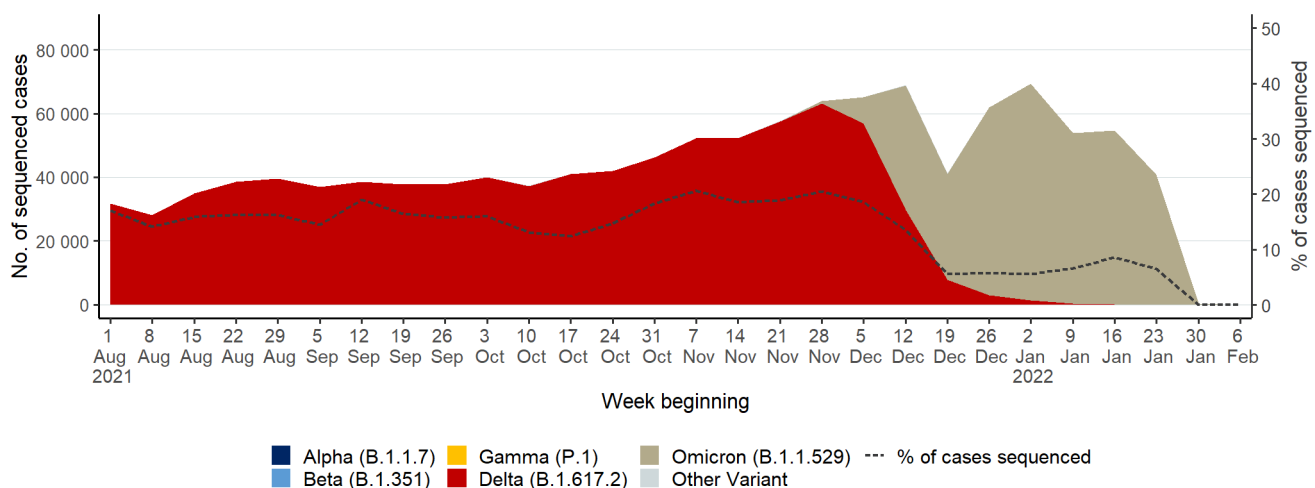


Figure 12c: COVID-19 variant distribution for a sample of cases that have been sequenced, United Kingdom, August 2021 – February 2022



United States

Figure 13a: COVID-19 cases and vaccinations, United States, March 2020 – February 2022

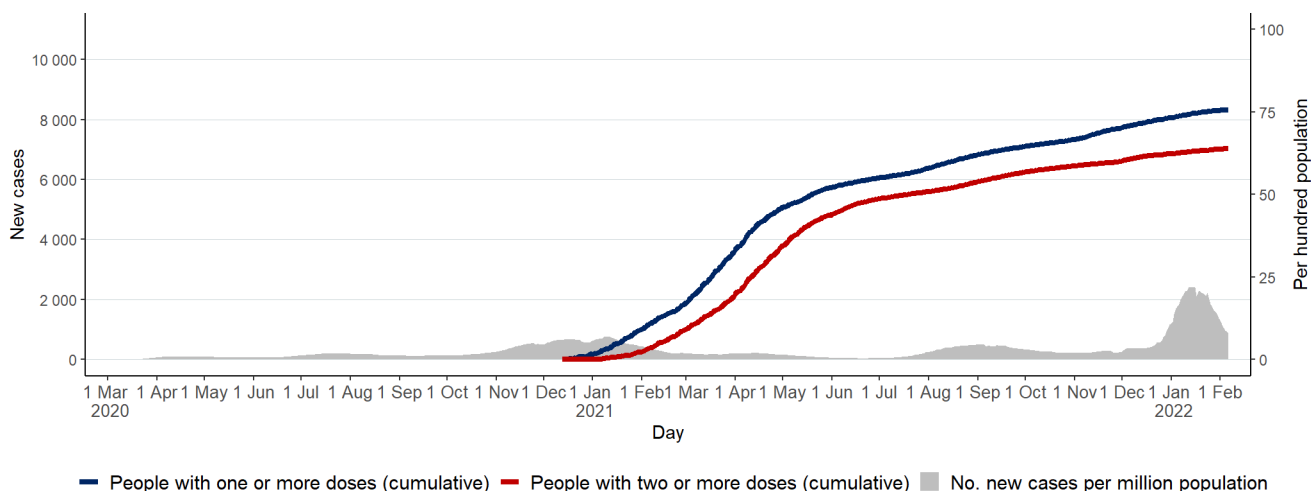


Figure 13b: COVID-19 hospitalisation and mortality rates, United States, March 2020 – February 2022

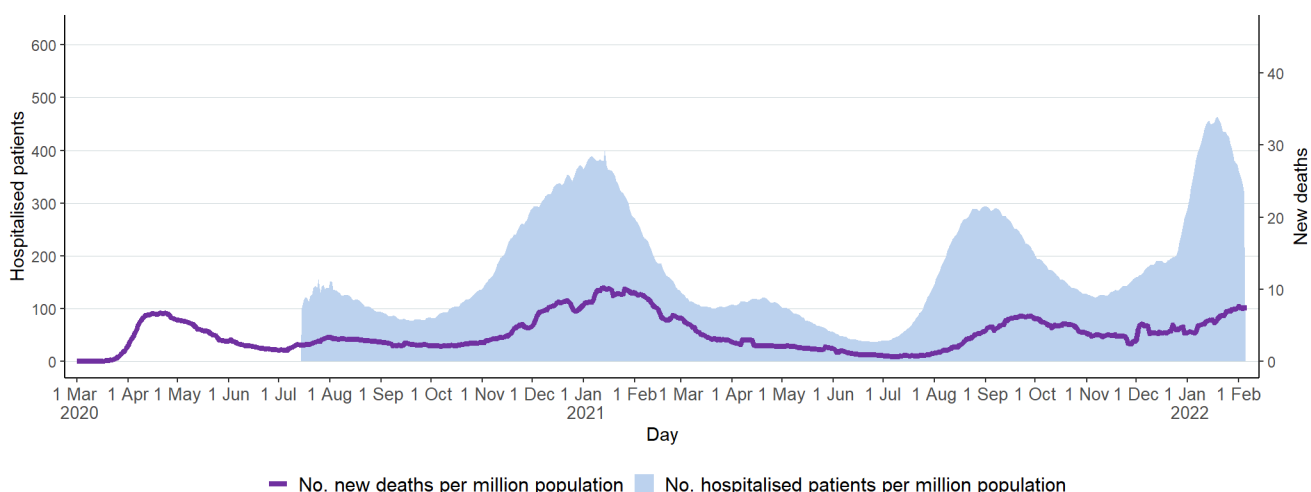
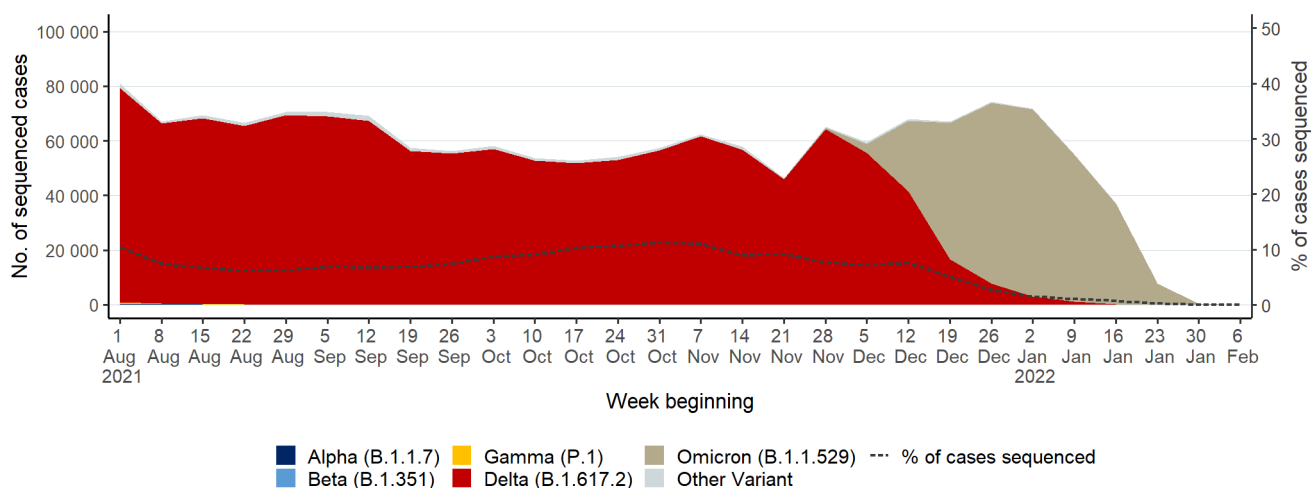


Figure 13c: COVID-19 variant distribution for a sample of cases that have been sequenced, United States, August 2021 – February 2022



Canada

Figure 14a: COVID-19 cases and vaccinations, Canada, March 2020 – February 2022

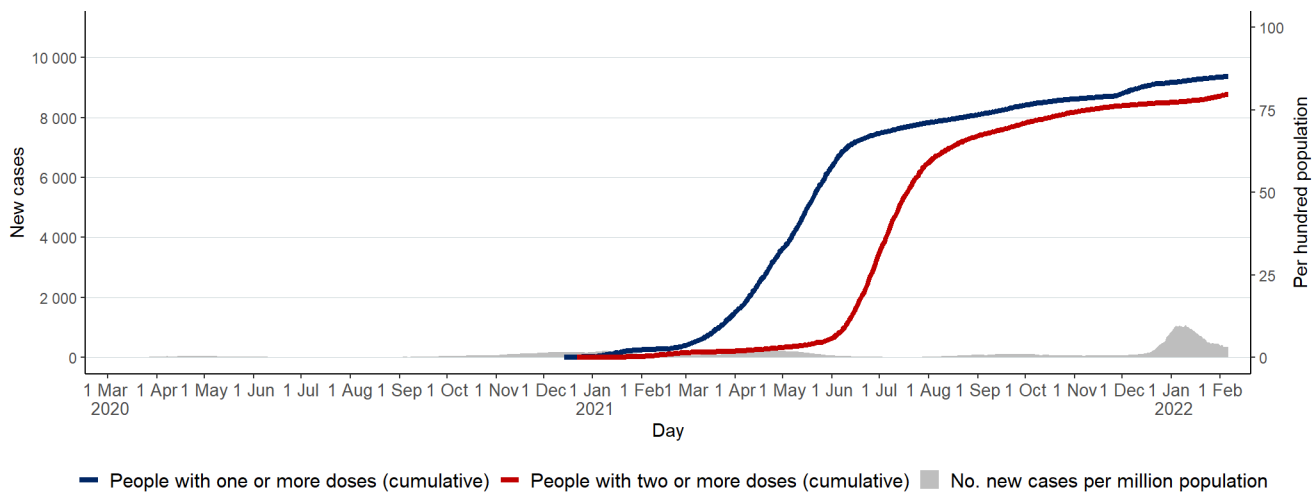


Figure 14b: COVID-19 hospitalisation and mortality rates, Canada, March 2020 – February 2022

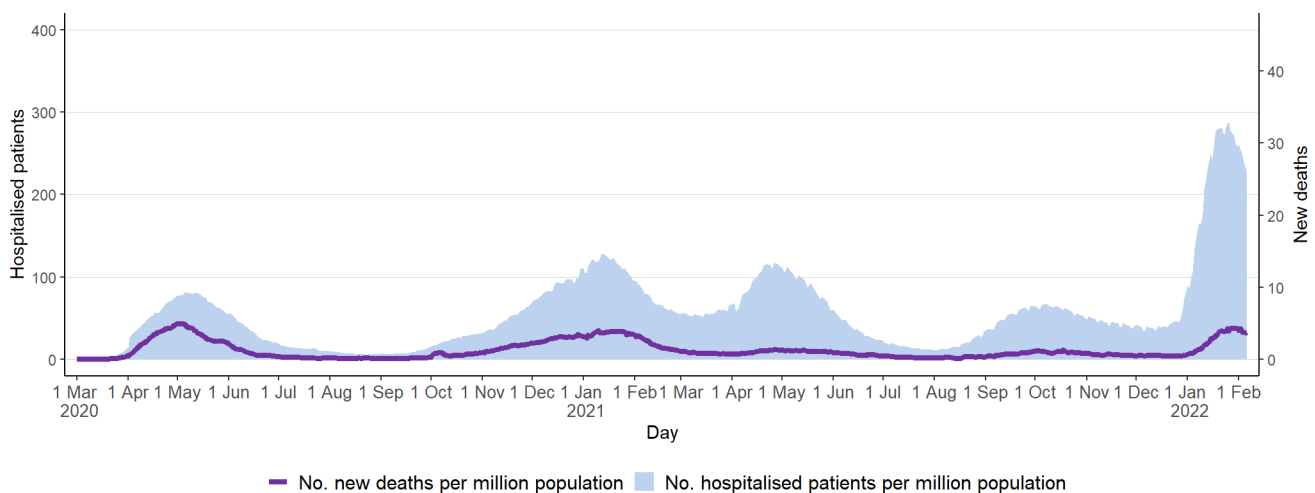
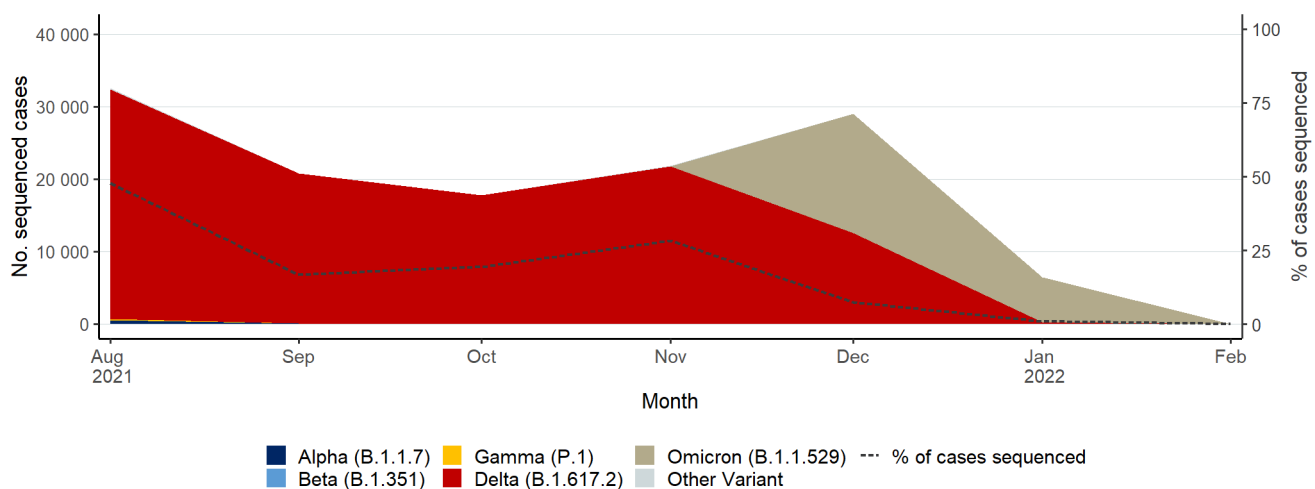


Figure 14c: COVID-19 variant distribution for a sample of cases that have been sequenced, Canada, August 2021 – February 2022



Denmark

Figure 15a: COVID-19 cases and vaccinations, Denmark, March 2020 – February 2022

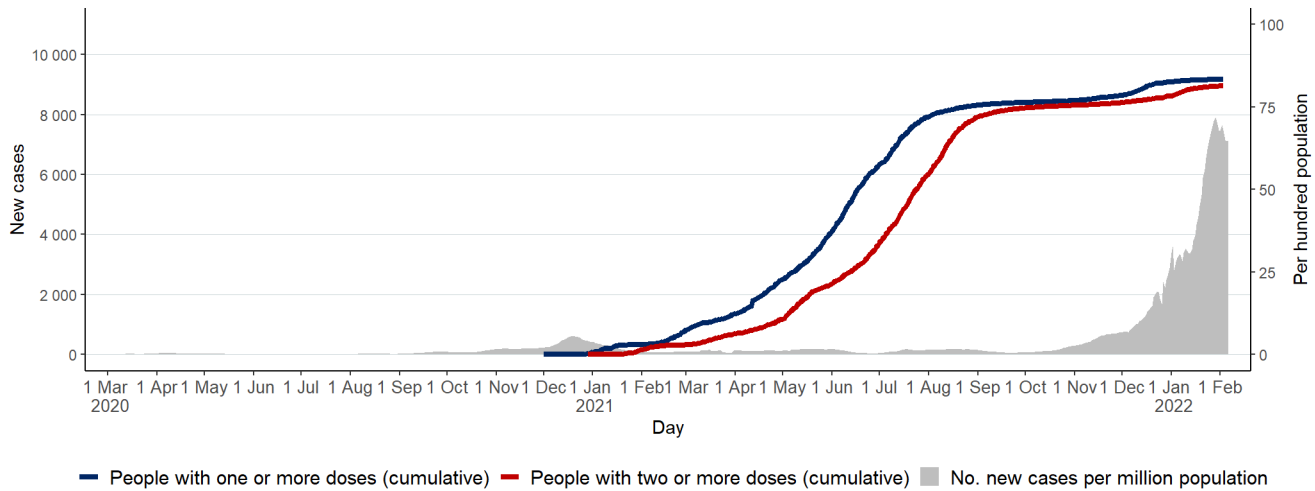


Figure 15b: COVID-19 hospitalisation and mortality rates, Denmark, March 2020 – February 2022

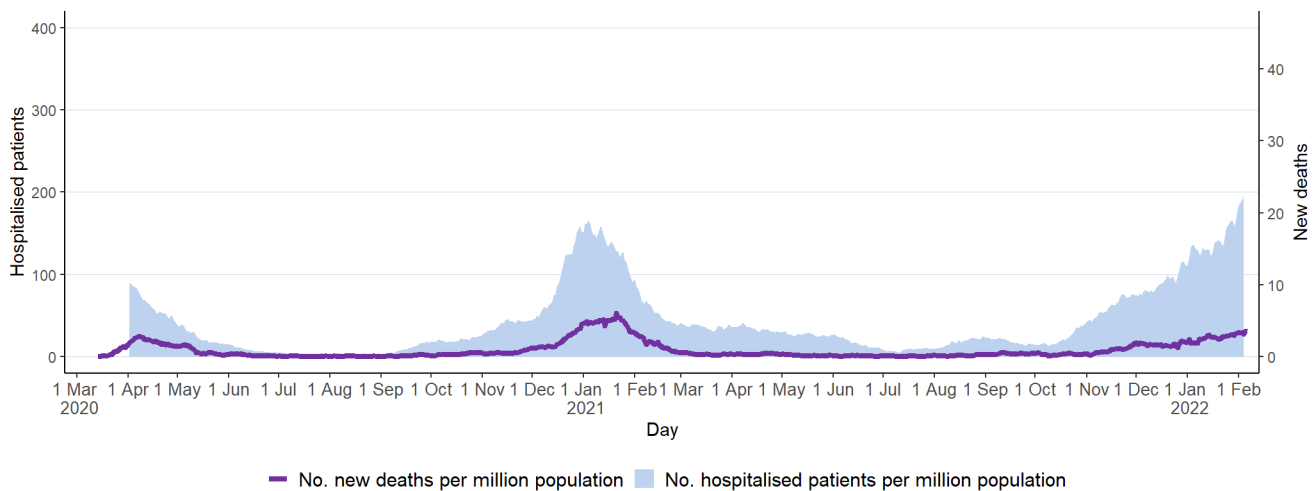
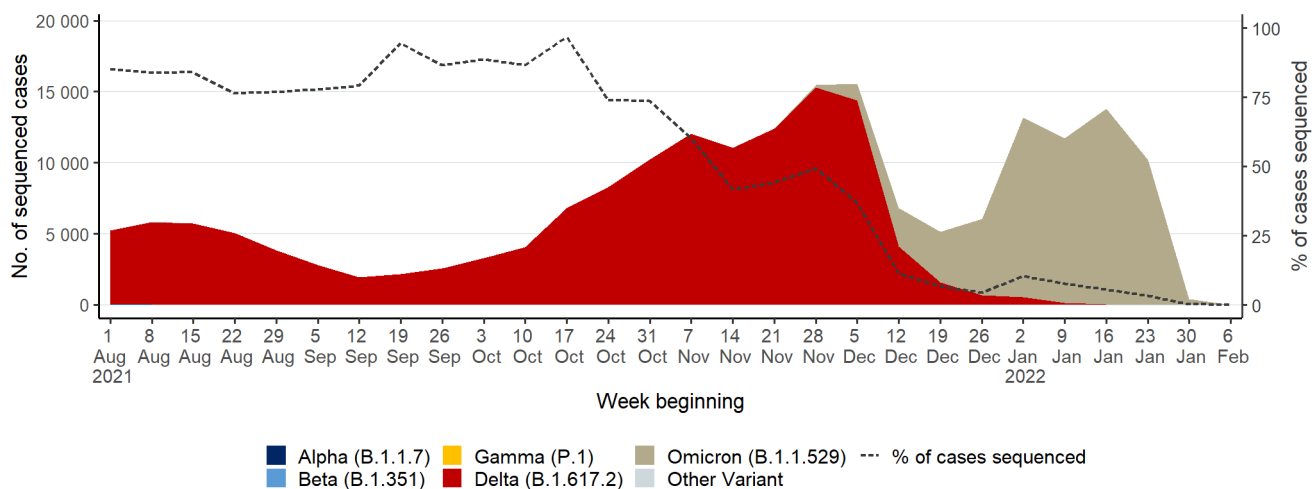


Figure 15c: COVID-19 variant distribution for a sample of cases that have been sequenced, Denmark, August 2021 – February 2022



Israel

Figure 16a: COVID-19 cases and vaccinations, Israel, March 2020 – February 2022

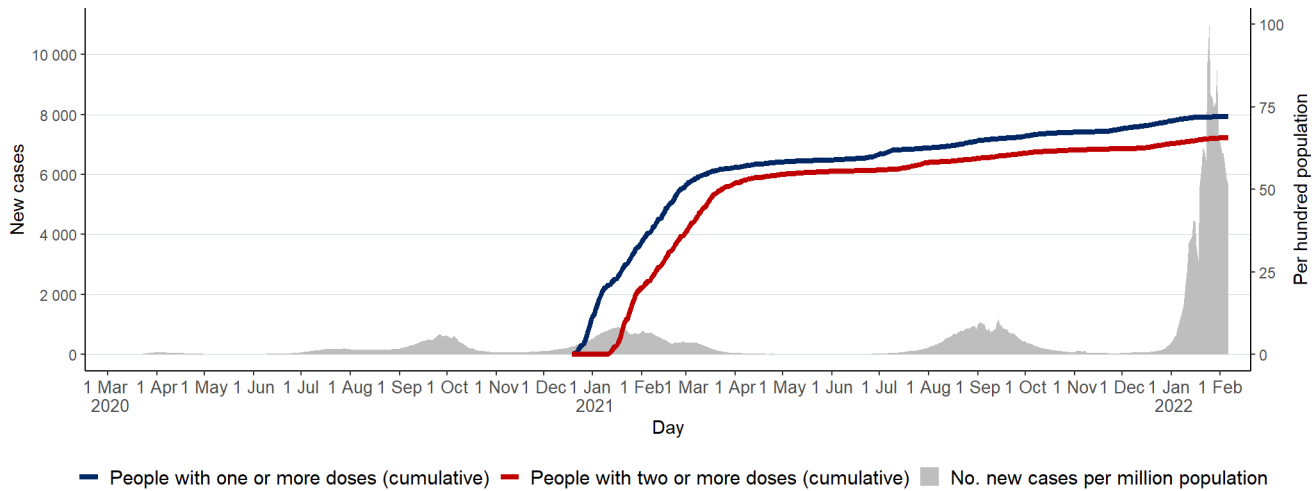


Figure 16b: COVID-19 hospitalisation and mortality rates, Israel, March 2020 – February 2022

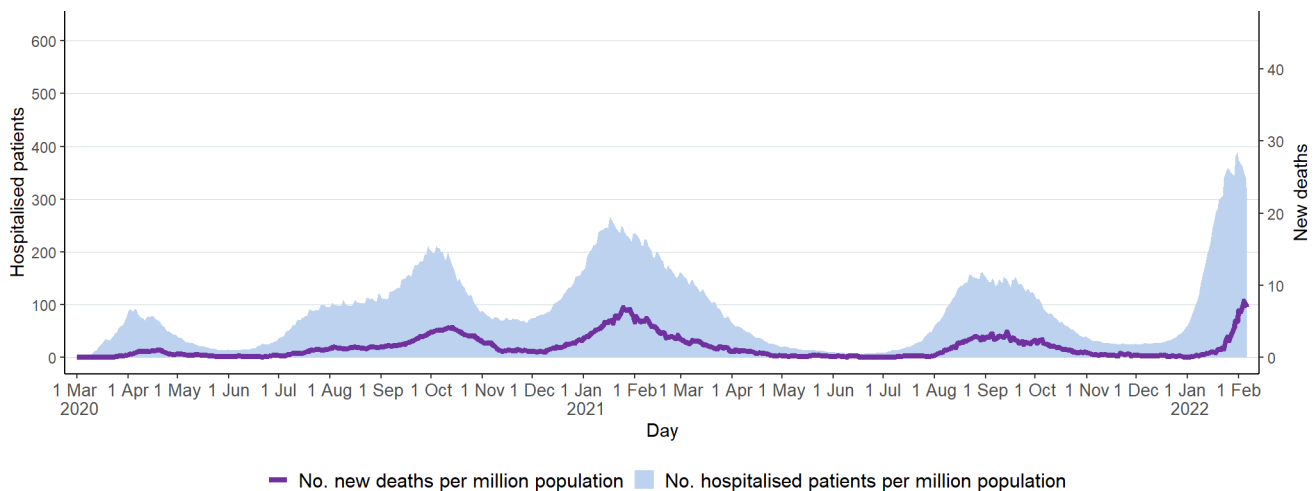
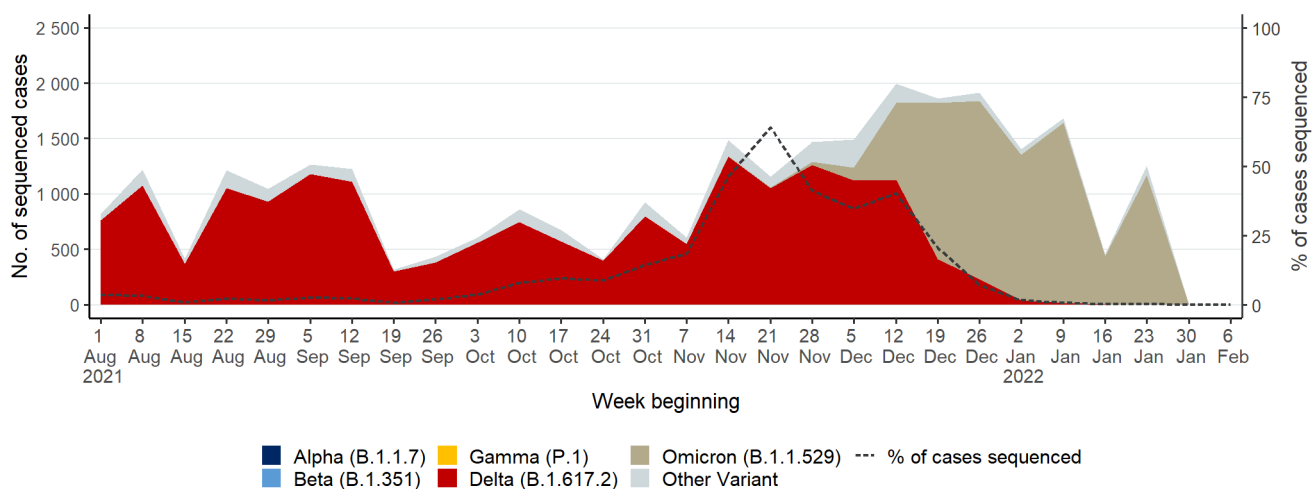


Figure 16c: COVID-19 variant distribution for a sample of cases that have been sequenced, Israel, August 2021 – February 2022



NSW key indicators

Notes

- Data are presented for all indicators as at 6 February 2022 (previous week, 30 January 2022)
- Cases identified via rapid antigen tests (RATs) are included from 21 January 2022 onwards; comparisons with historical data should be made with care.
- Average daily cases and average daily deaths are based on the seven days to 6 February 2022 (previous week, seven days to 30 January 2022).
- For any given day, the growth factor for COVID-19 cases is a ratio of cases notified in the seven days ending that day, to the cases notified in the seven days ending the day before.
- Patients in hospital include cases on the ward and in ICUs.
- Vaccination rates for the total population are estimated using the number of second doses available through public sources. This figure may be underestimated by up to 1% from that reported elsewhere due to differences in timing of reporting.
- Estimated per million population rates for all indicators, other than vaccination, are calculated using population estimates at 30 June 2021. For vaccination, population estimates at 30 June 2020 are used. This is based on the Australian Bureau of Statistics estimated resident population and population projections, based on data from the NSW Department of Planning, Industry and Environment.⁴
- The rate of hospitalisation and ICU admission (per million) among the unvaccinated population is calculated as the number of unvaccinated COVID-19 cases in hospital against the estimated total number of the unvaccinated population. The rate of hospitalisation and ICU admission (per million) among the vaccinated population is calculated as the number of COVID-19 cases in hospital who have received two or more vaccine doses, against the estimated total number of the population with two or more doses. Rolling seven-day average was applied. Rates were age-standardised to NSW 2021 population estimates.

Sources

- New cases for NSW sourced from NSW Health via Notifiable Conditions Information Management System; accessed 8 February 2022.⁵
- Vaccination data sourced from Australian Government Department of Health [vaccination numbers and statistics](#); accessed 8 February 2022.⁶
- Data for hospital capacity, admissions and proportion of vaccinated cases are sourced from NSW Health via the Patient Flow Portal and taken from a 7pm snapshot, 6 February 2022; accessed 8 February 2022.⁷

Summary of public health, healthcare and vaccination measures (select countries, Canadian provinces and NSW)

Notes

- Data are presented for all indicators as at 6 February 2022. If unavailable, the latest available data are shown.
- Data on confirmed COVID-19 cases may include both cases identified via PCR tests and cases identified via RAT, depending on differences in reporting procedures in the selected locations. For NSW, cases identified via RATs are included from 21 January 2022 onwards; comparisons with historical data should be made with care.
- Average daily confirmed cases and average daily deaths are based on a seven-day average.

- Proportions for the population with two or more doses are based on the full population.
- For NSW, estimated per million population rates for all indicators other than vaccination are calculated using population estimates at 30 June 2021. For vaccination, population estimates at 30 June 2020 are used. This is based on the Australian Bureau of Statistics estimated resident population and population projections, based on data from the NSW Department of Planning, Industry and Environment.⁴
- Patients in hospital include both cases on the ward and in ICUs. For Ontario and Quebec, patients in hospital may be lower than patients in ICU, as the in-hospital numbers only include people still testing positive for COVID-19, while patients in ICU also include those who are in ICU due to COVID-19 but have since tested negative.
- Cell colouring has been applied according to the following criteria:
 - For 7-day average cases per million, rates over 3,000 per million are highlighted in red, and the lowest three rates highlighted in green.
 - For 7-day average deaths per million, rates over 4.0 per million are highlighted in red, and rates under 0.5 per million are highlighted in green.
 - For percentage of total population with two or more doses, percentages greater than or equal to 80% are highlighted in green.
 - For patients in hospital per million, rates over 300 per million are highlighted in red, and the lowest three rates highlighted in green.
 - For patients in ICU per million, rates over 30 per million are highlighted in red, and the lowest three rates highlighted in green.

Sources

- New cases for selected countries sourced from [Our World in Data](#).⁸ New cases for NSW sourced from NSW Health via the Notifiable Conditions Information Management System.⁵ New cases for Ontario and Quebec sourced from [COVID-19 Tracker Canada](#).⁹ All accessed 8 February 2022.
- COVID-19 deaths for selected countries sourced from [Our World in Data](#).⁸ COVID-19 deaths for NSW sourced from NSW Health via the Notifiable Conditions Information Management System.⁵ COVID-19 deaths for Ontario and Quebec sourced from [COVID-19 Tracker Canada](#).⁹ All accessed 8 February 2022.
- Vaccination data for selected countries sourced from [Our World in Data](#).⁸ Vaccination data for NSW sourced from Australian Government Department of Health [vaccination numbers and statistics](#).⁶ Vaccination data for Ontario and Quebec sourced from [COVID-19 Tracker Canada](#).⁹ All accessed 8 February 2022.
- Data on the number of COVID-19 patients in hospital and ICUs were sourced on 1 February 2022 from:
 - [Our World in Data](#) for all countries⁸
 - NSW Health via the Patient Flow Portal for NSW, taken from a 7pm snapshot, 6 February 2022⁷
 - [COVID-19 Tracker Canada](#) for Ontario and Quebec.⁹

COVID-19 daily rates of cases, deaths, hospitalisations and vaccination

Notes

- Limited testing and delayed reporting likely result in underestimated actual number of confirmed cases.
- Data on confirmed COVID-19 cases may include both cases identified via PCR tests and cases identified via RATs, depending on differences in reporting procedures in the selected locations. For NSW, cases identified via RATs are included from 21 January 2022 onwards; comparisons with historical data should be made with care.

- Challenges in the attribution of the cause of death means the number of confirmed deaths may not be an accurate count of the true number of deaths from COVID-19.
- Patients in hospital include cases on the ward and in ICUs. The definition of a hospitalised COVID-19 case changed on 3 Feb 2022, reducing the maximum time between symptom onset and admission date from 28 to 14 days. This rule has not yet been applied to all indicators in this report.
- Data for some countries may appear unstable at times (e.g. over the Christmas and New Year period) due to reasons such as reduced testing and unavailability of accurate data from the various countries.

Sources

- Cases and deaths data for selected countries sourced from [Our World in Data](#).⁸ Cases and deaths data for NSW sourced from NSW Health via the Notifiable Conditions Information Management System.⁵ Both accessed 8 February 2022.
- Vaccination data for selected countries sourced from [Our World in Data](#); accessed 8 February 2022.⁸ Vaccination data for NSW sourced from [COVID Live](#), which verifies data against Australian State and Territory Government Health Departments.¹⁰
- Hospital and ICU data for selected countries sourced from [Our World in Data](#).⁸ Hospital and ICU data for NSW sourced from NSW Health via the Patient Flow Portal.⁷ Both accessed 8 February 2022.

COVID-19 cases, variants, vaccines, hospitalisations and deaths

Notes

- Data on confirmed COVID-19 cases may include both cases identified via PCR tests and cases identified via RATs, depending on differences in reporting procedures in the selected locations. For NSW, cases identified via RATs are included from 21 January 2022 onwards; comparisons with historical data should be made with care.
- With regards to the figures on COVID-19 variants, all severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) sequences were downloaded from the [GISAID EpiCOV™ Database](#). PANGO lineage (variant) classification for each individual sequence was provided by GISAID.¹¹
- Dates are based on the sample collection date. Sequences with dates specifying the year only were excluded, while collection dates specifying the year and month were assigned to the 15th of that month.
- Sequences with lengths $\leq 20,000$ base pairs were removed from the analysis, as were non-human hosts.
- Only a non-random sample of cases are sequenced. For many countries, the proportion of cases sequenced and submitted to GISAID may be very low. As a result, this report does not indicate the true prevalence of the variants but rather a best estimate currently available. Furthermore, variant frequencies may differ from numbers reported in media releases which may be based on detection of the variant using faster alternate methodologies (such as PCR testing).
- All data used to generate these graphs is subject to the GISAID [terms and conditions](#).¹²

Sources

- Data on variants enabled by [GISAID](#); accessed 8 February 2022.¹¹
- Data on total number of cases and vaccinations for the selected countries are sourced from [Our World in Data](#).⁸ Data on total number of cases for NSW are sourced from NSW Health via the Notifiable Conditions Information Management System.⁵ Vaccination data for NSW sourced from [COVID Live](#), which verifies data against Australian State and Territory Government Health Departments.¹⁰ All accessed 8 February 2022.

- Data on the number of hospitalisations and new deaths for the selected countries were sourced from [Our World in Data](#).⁸ Data on the number of hospitalisations for NSW were sourced from NSW Health via the Patient Flow Portal.⁷ Data on the number of deaths for NSW are sourced from NSW Health via the Notifiable Conditions Information Management System.⁵ All accessed 8 February 2022.

Method

The NSW Health COVID-19 Critical Intelligence Unit maintains living evidence tables on [COVID-19 vaccines](#) and [SARS-CoV-2 variants](#).^{13, 14} To inform this brief, a review of the daily evidence digest and Google searches were undertaken on 7 and 8 February 2022.

Countries were chosen based on contemporary relevance with regards to the variables of interest in the NSW and Australian context (cases, variants, vaccines and patient outcomes).

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