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Governor

# **Coccidioidomycosis in California Provisional Monthly Report**

## **January - June 2024**

(as of June 30, 2024)

Center for Infectious Diseases  
Division of Communicable Disease Control  
Infectious Diseases Branch  
Surveillance and Statistics Section

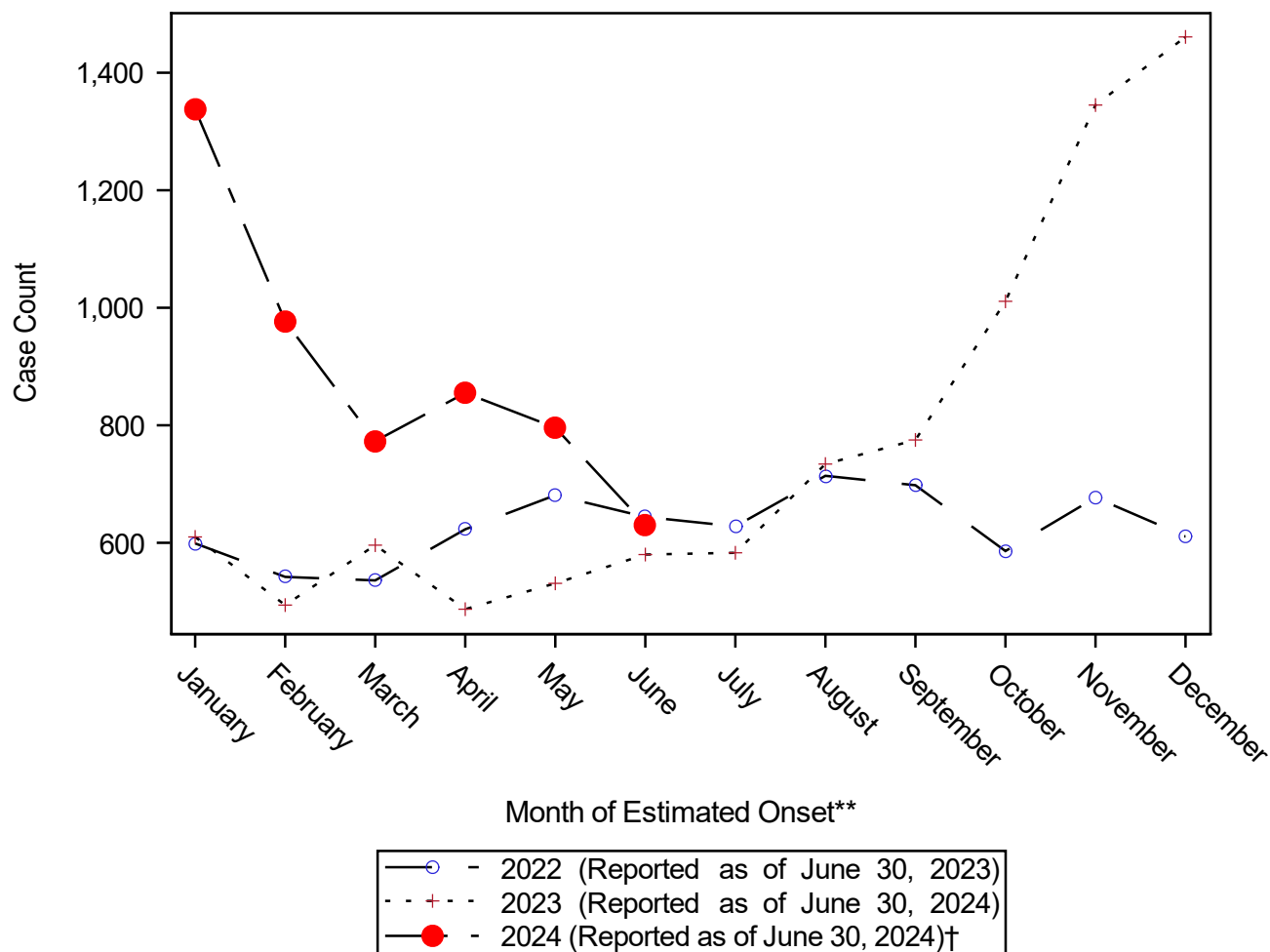
An accessible Excel file version of the  
[June 2024 Coccidioidomycosis in California  
Provisional Monthly Report](#)  
is available for download

**Cumulative Reported Suspect, Probable, and Confirmed Cases of Coccidioidomycosis in January through June by  
Local Health Jurisdiction and Year of Estimated Onset, California, 2022-2024**  
(reported as of June 30 of each year\*)

	Year of Estimated Onset**		
County	2024	2023	2022
California Total	5,370	3,183	3,483

	Year of Estimated Onset**		
Local Health Jurisdiction	2024	2023	2022
Alameda County Total	59	29	49
Alameda	59	28	49
Berkeley	0	1	0
Alpine	0	0	0
Amador	0	SC	SC
Butte	4	3	2
Calaveras	SC***	SC	SC
Colusa	0	0	SC
Contra Costa	74	42	48
Del Norte	0	SC	0
El Dorado	5	1	3
Fresno	402	157	197
Glenn	SC	SC	SC
Humboldt	1	1	3
Imperial	5	9	11
Inyo	SC	0	SC
Kern	1,841	1,016	1,114
Kings	155	64	74
Lake	SC	SC	SC
Lassen	SC	0	0
Los Angeles County Total	776	665	714
Long Beach	40	23	25
Los Angeles	733	640	684
Pasadena	3	2	5
Madera	50	21	26
Marin	8	4	1
Mariposa	SC	SC	SC
Mendocino	SC	SC	SC
Merced	90	27	28
Modoc	0	0	0
Mono	0	0	0
Monterey	140	39	64
Napa	3	0	0
Nevada	SC	0	SC
Orange	137	156	120
Placer	3	6	5
Plumas	0	0	0
Riverside	181	206	173
Sacramento	47	34	32
San Benito	SC	SC	SC
San Bernardino	152	1	109
San Diego	154	219	202
San Francisco	51	10	11
San Joaquin	208	47	59
San Luis Obispo	161	49	65
San Mateo	24	16	9
Santa Barbara	55	17	19
Santa Clara	54	45	41
Santa Cruz	8	4	7
Shasta	4	2	0
Sierra	0	0	0
Siskiyou	SC	0	0
Solano	17	14	15
Sonoma	10	7	7
Stanislaus	79	26	26
Sutter	1	0	0
Tehama	0	SC	0
Trinity	0	0	0
Tulare	265	128	120
Tuolumne	SC	SC	0
Ventura	108	99	109
Yolo	6	5	4
Yuba	SC	0	0

# Reported Suspect, Probable, and Confirmed Cases of Coccidioidomycosis by Month and Year of Estimated Onset, California, 2022-2024



	Month of Estimated Onset**											
Year of Estimated Onset**	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
2024 (Reported as of June 30, 2024)†	1,338	977	773	855	796	631						
2023 (Reported as of June 30, 2024)	610	494	596	487	531	580	583	734	775	1,011	1,345	1,461
2022 (Reported as of June 30, 2023)	599	542	536	623	681	644	628	714	698	586	677	611

## Technical Notes

In interpretation of the numbers in this report, please consider the following points:

\* Data presented in this report may differ from previously published data due to delays inherent to case reporting, laboratory reporting, and epidemiologic investigation.

\*\* Estimated onset date is the date closest to the time when symptoms first appeared. For cases which date of onset was not recorded, the estimated onset date can range from the date of first appearance of symptoms to the date the report was made to the California Department of Public Health.

\*\*\* SC Case counts have been suppressed due to small numbers based on Publication Scoring Criteria published in <https://www.dhcs.ca.gov/dataandstats/Documents/DHCS-DDG-V2.0-120116.pdf>.

† Due to reporting delays, counts for January - June 2024 (reported as of June 30 of same year) are likely to increase and not directly comparable to counts for January - June 2023 and January - June 2022 (reported as of June 30 of the following year) as presented.

Because coccidioidomycosis can occur as a chronic condition and be reported more than once, we included only the first report of coccidioidomycosis per person using a probabilistic de-duplication method spanning multiple reporting years.

Local health jurisdictions reviewed cases and determined whether surveillance case definitions were met to classify cases as Confirmed, Probable, or Suspect according to established clinical and laboratory criteria. All cases classified as Confirmed, Probable, and Suspect are included in this report.

Combined provisional Suspect, Probable, and Confirmed case counts in this report may differ from counts of Confirmed cases that CDPH will eventually publish in final year-end surveillance reports.

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