



Maryland Cold-Related Illness Surveillance Report

Week of December 7 – December 13, 2025 (MMWR 2025 Week 50)

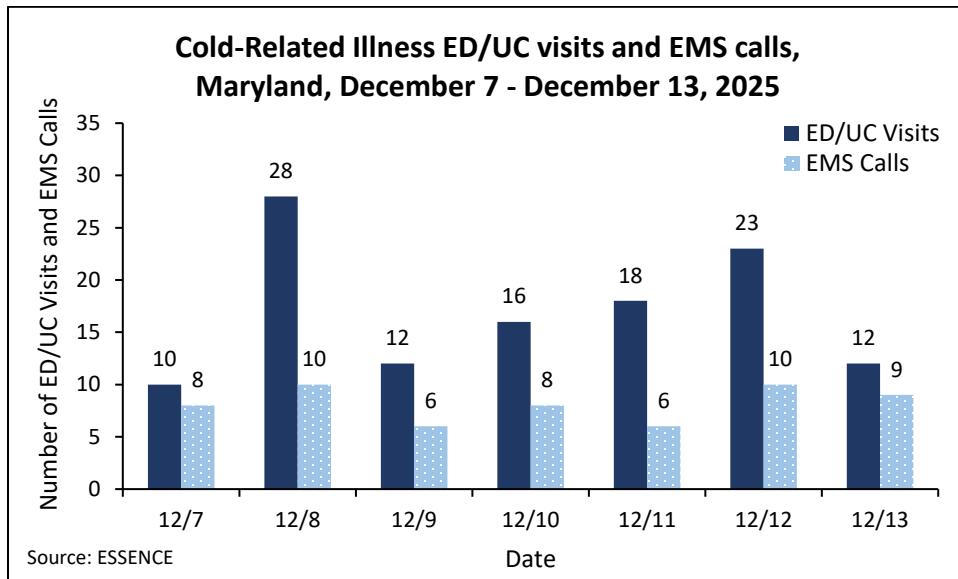
Report Date: December 17, 2025

Background

The weekly Cold-Related Illness Surveillance Report is published from November through March. The report focuses on cold-related illness, carbon monoxide exposure and cold-related deaths in Maryland. Data is presented by the Centers for Disease Control and Prevention (CDC) Morbidity and Mortality Weekly Report (MMWR) week.

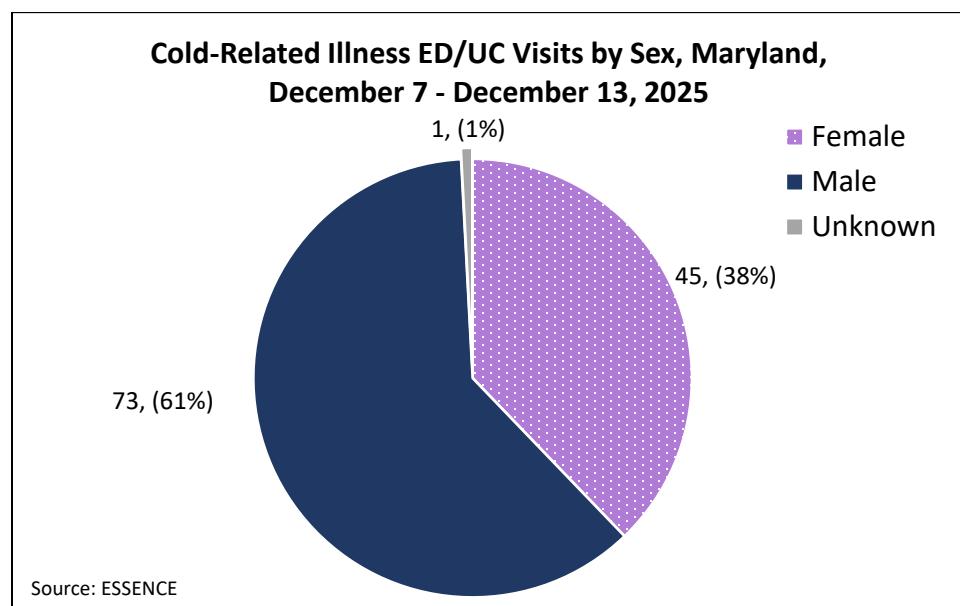
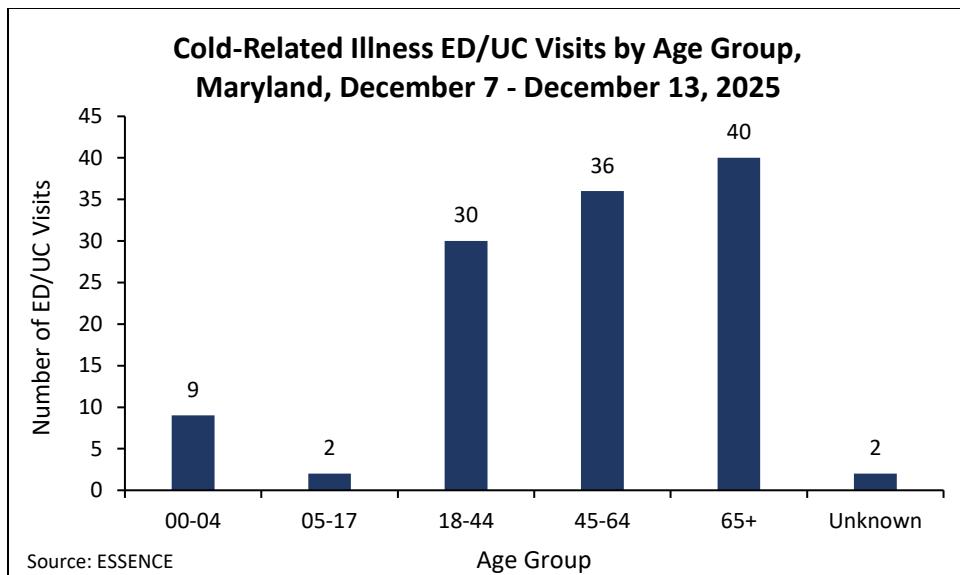
Weekly Cold-Related Illness

Total Cold-Related Illness ED/UC visits for MMWR Week 50: 119

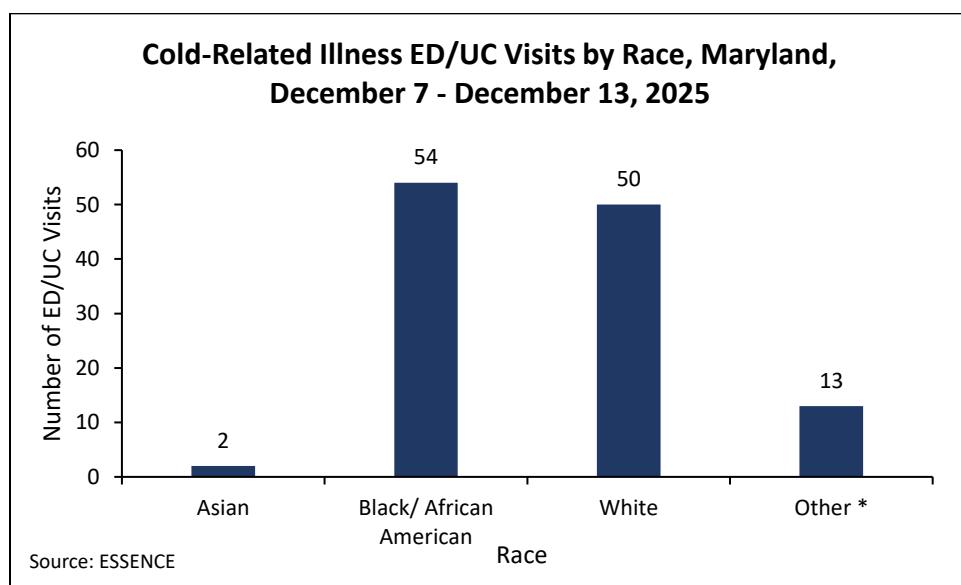


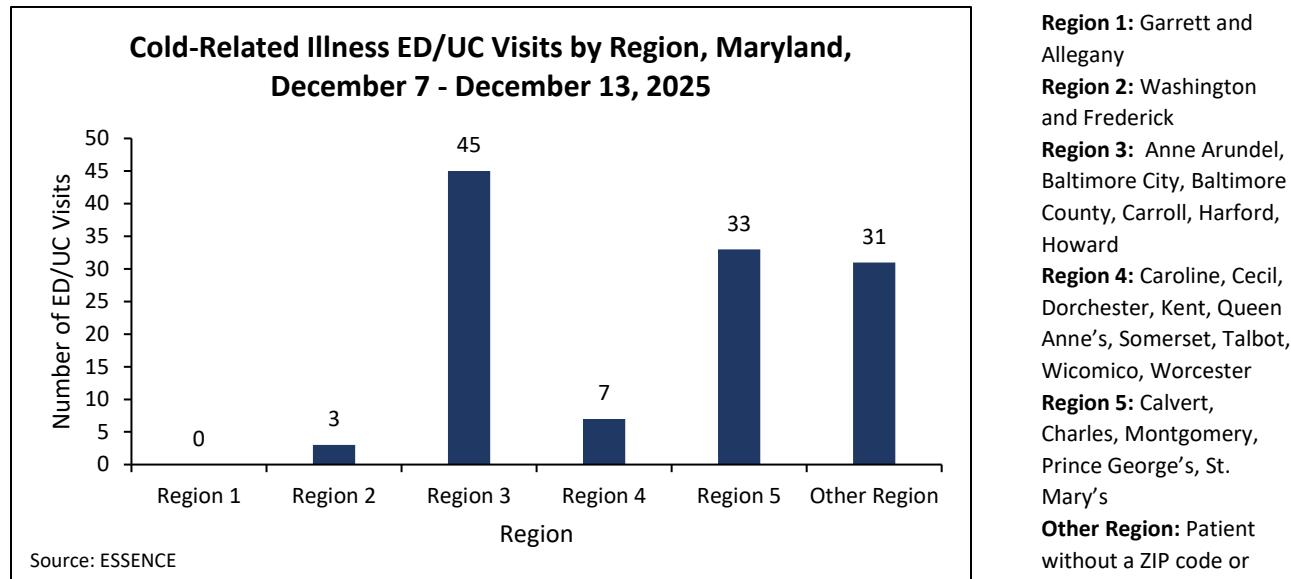
Note on Emergency Department (ED) Data: The results from the query used in ESSENCE, an electronic biosurveillance system, to track cold-related illnesses may be an overestimation of the actual burden of illness related to the cold weather. This overestimation is due to the nature of the query, which includes the term hypothermia and frostbite. As of November 2019, visit data from 23 urgent care centers are now included in ESSENCE emergency department visit data.

Note on Emergency Medical Services (EMS) Data: These data are based on EMS pre-hospital care reports where the EMS provider has selected hypothermia as a primary or secondary impression of a patient's illness. This impression is solely based on the signs and symptoms seen by the provider, not on any diagnostic tests. Since these numbers do not include all primary or secondary impressions that may be seen with cold exposure, the actual numbers may be low. These data are reported for trending purposes only.



*Other includes American Indian/ Alaskan Native, Native Hawaiian/ Other Pacific Islander, Other, and Not Reported

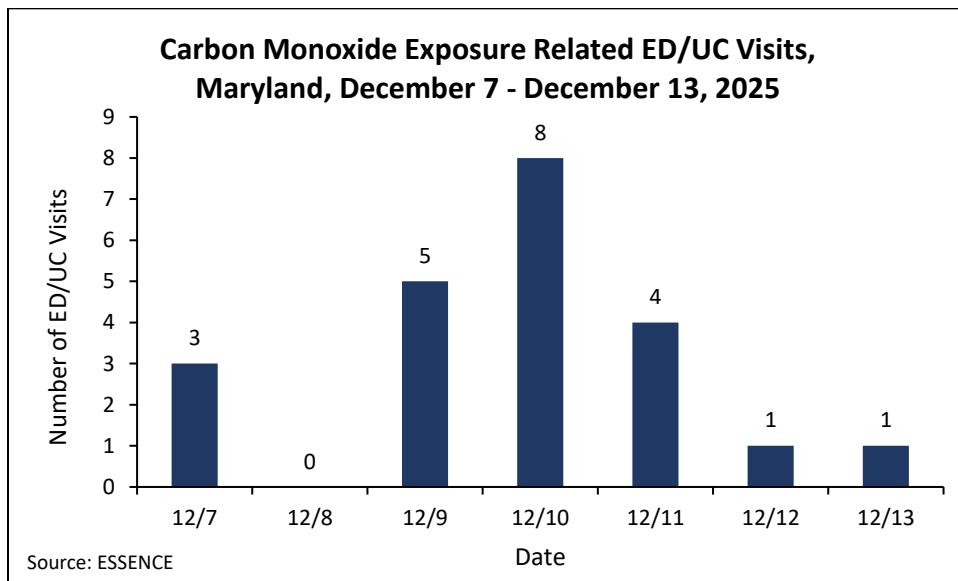




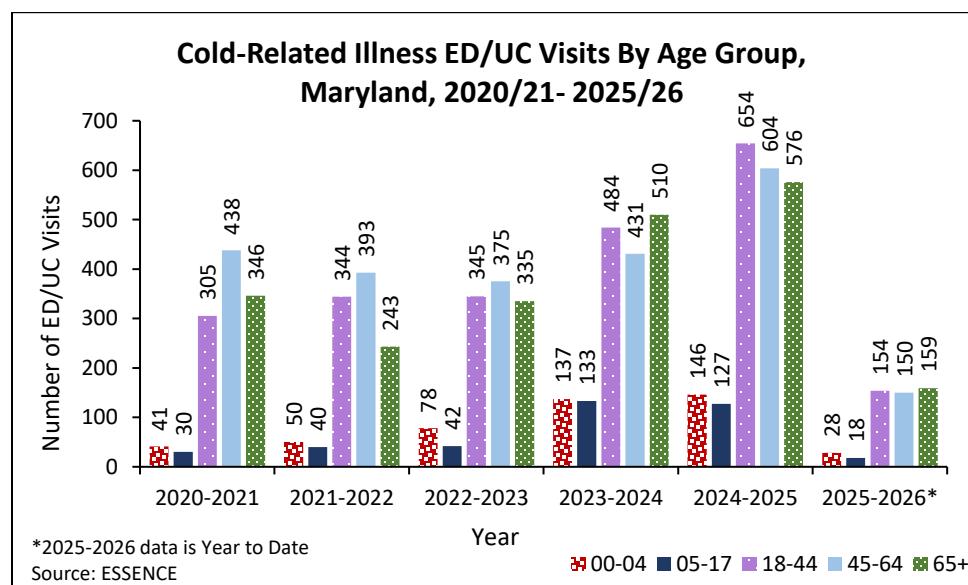
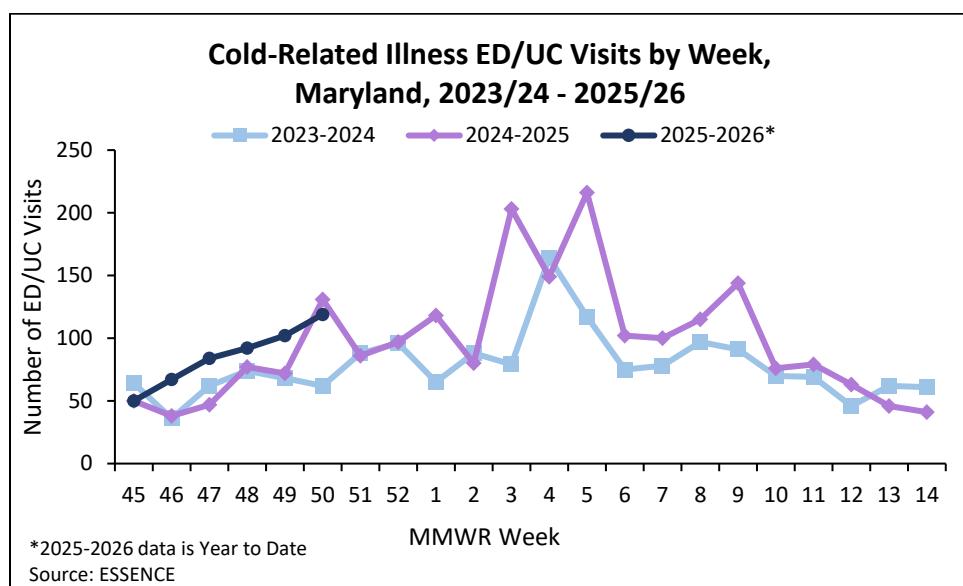
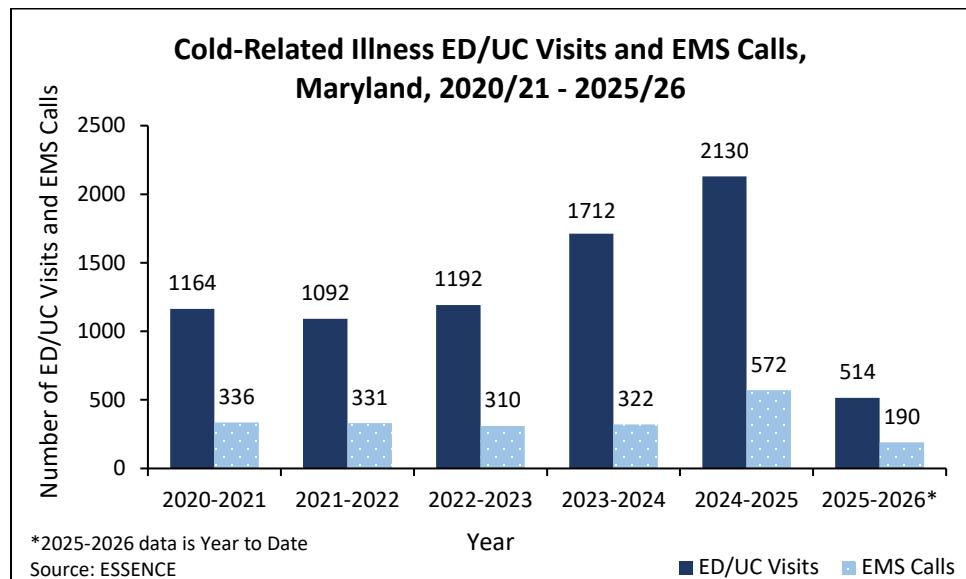
Note: Geographical distribution of ED visits is based on patients' jurisdiction of residence.

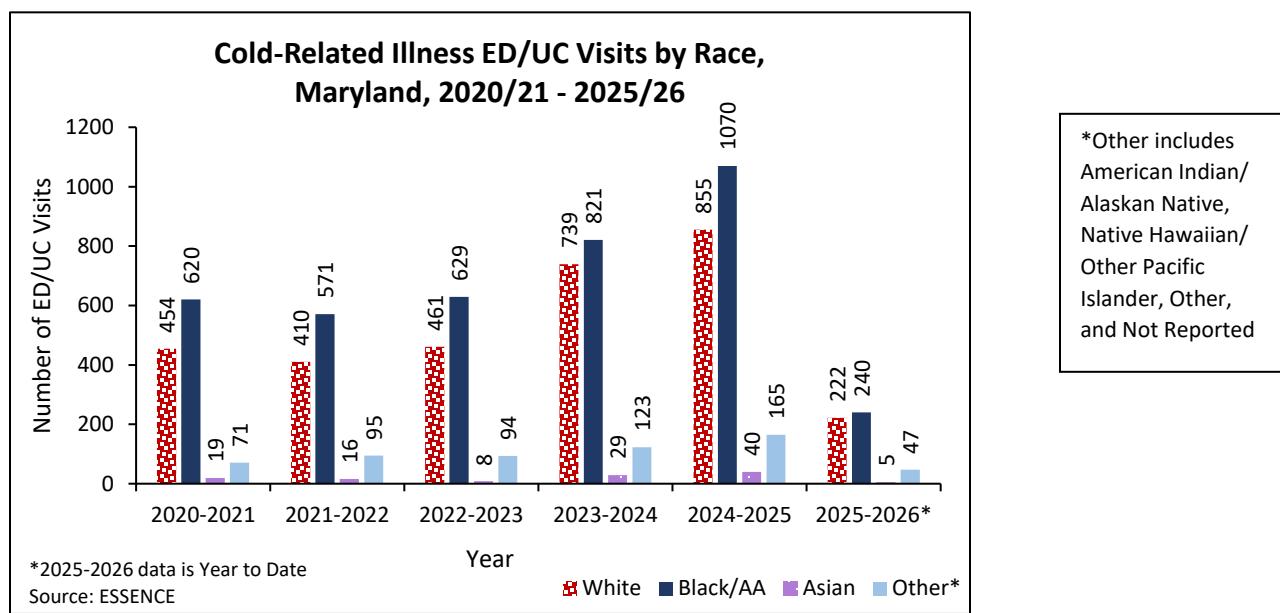
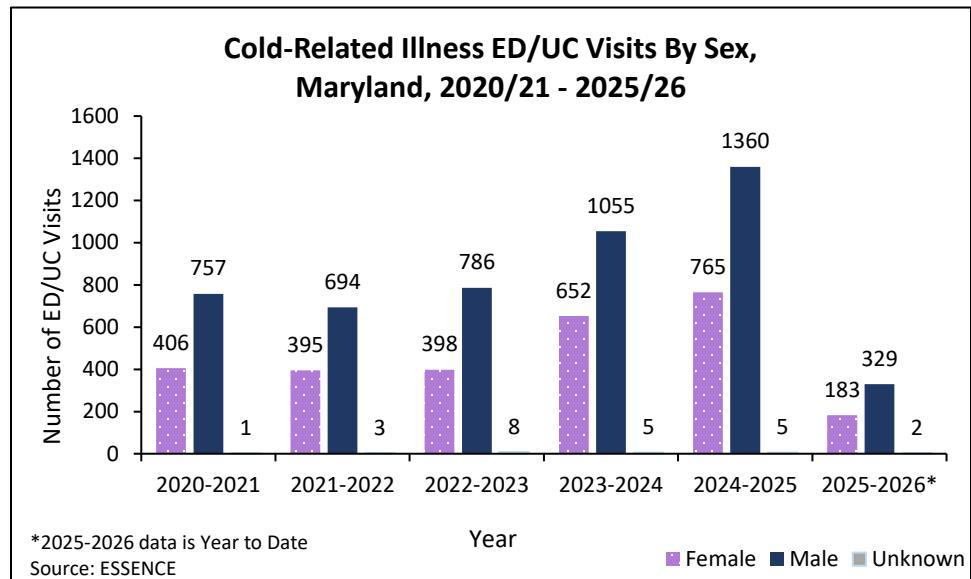
Carbon Monoxide

Use of alternative heating sources such as portable back-up generators can produce poison gas and carbon monoxide (CO). CO is an odorless, colorless gas that kills without warning. Warning signs of CO poisoning include shortness of breath, headache, confusion, nausea, dizziness, and loss of consciousness.



Historical Cold-Related Illness Visits (Note: 2025-26 data is Year to Date)





Region 1: Garrett and Allegany

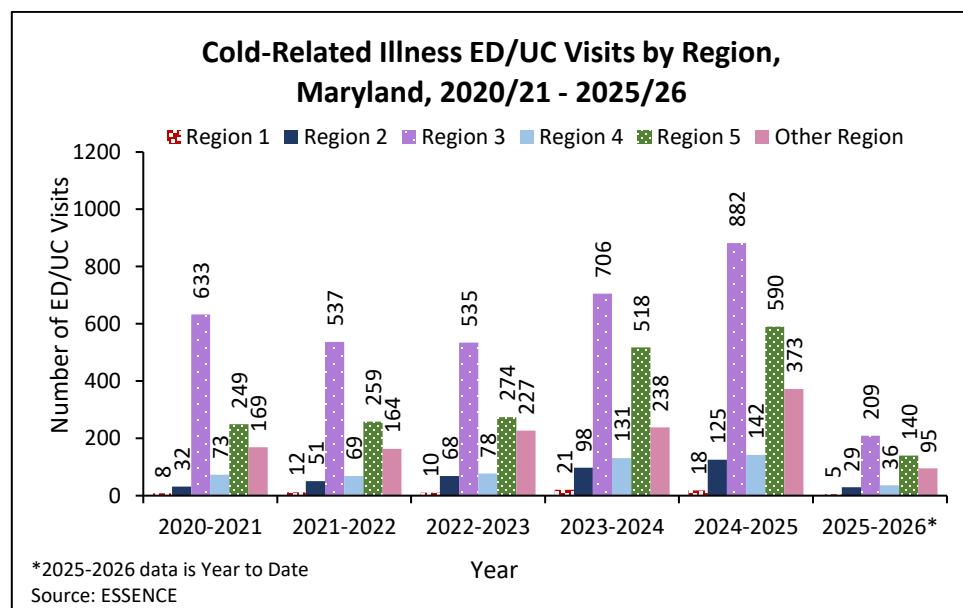
Region 2: Washington and Frederick

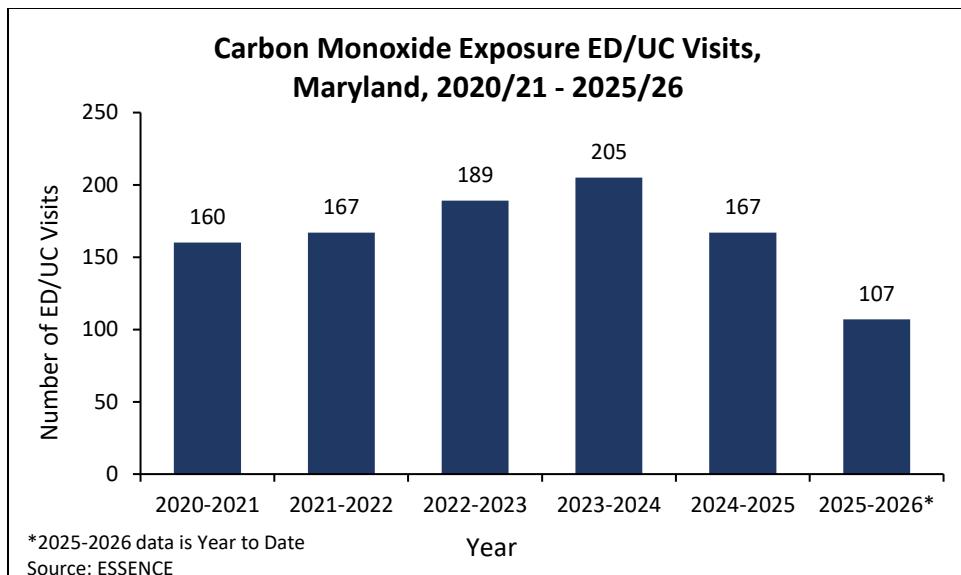
Region 3: Anne Arundel, Baltimore City, Baltimore County, Carroll, Harford, Howard

Region 4: Caroline, Cecil, Dorchester, Kent, Queen Anne's, Somerset, Talbot, Wicomico, Worcester

Region 5: Calvert, Charles, Montgomery, Prince George's, St. Mary's

Other Region: Patient without a ZIP code or resides outside of MD.



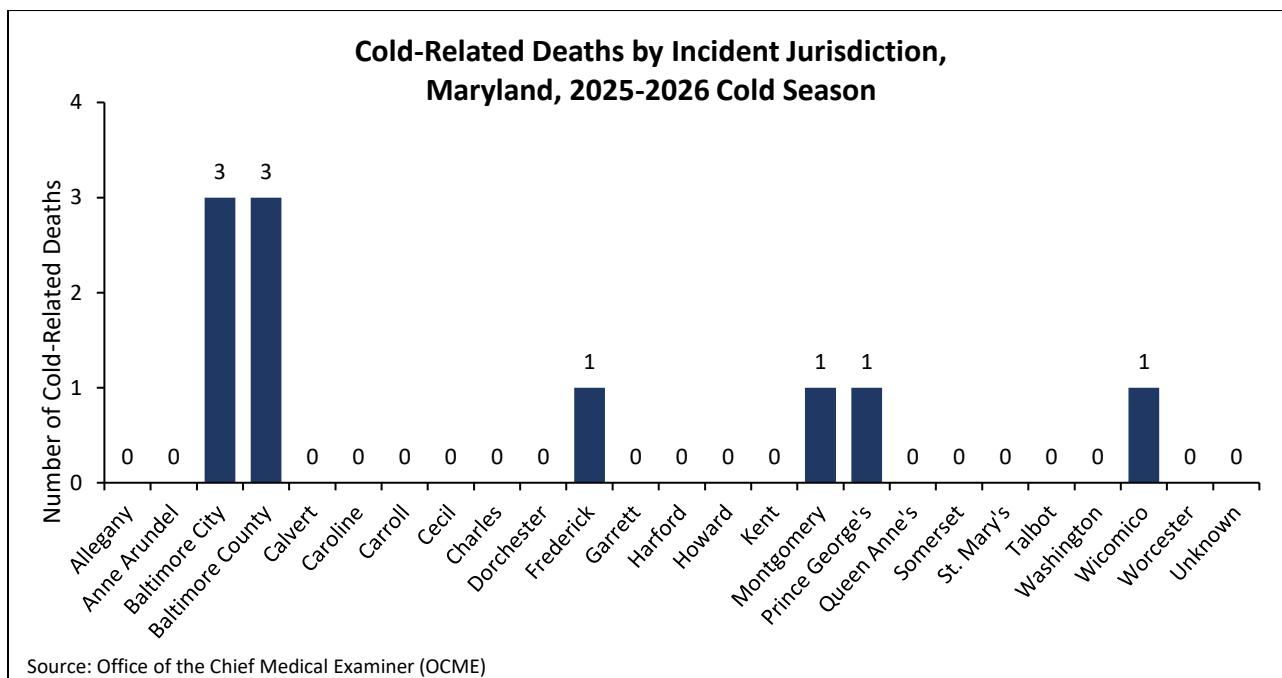


Cold-Related Deaths

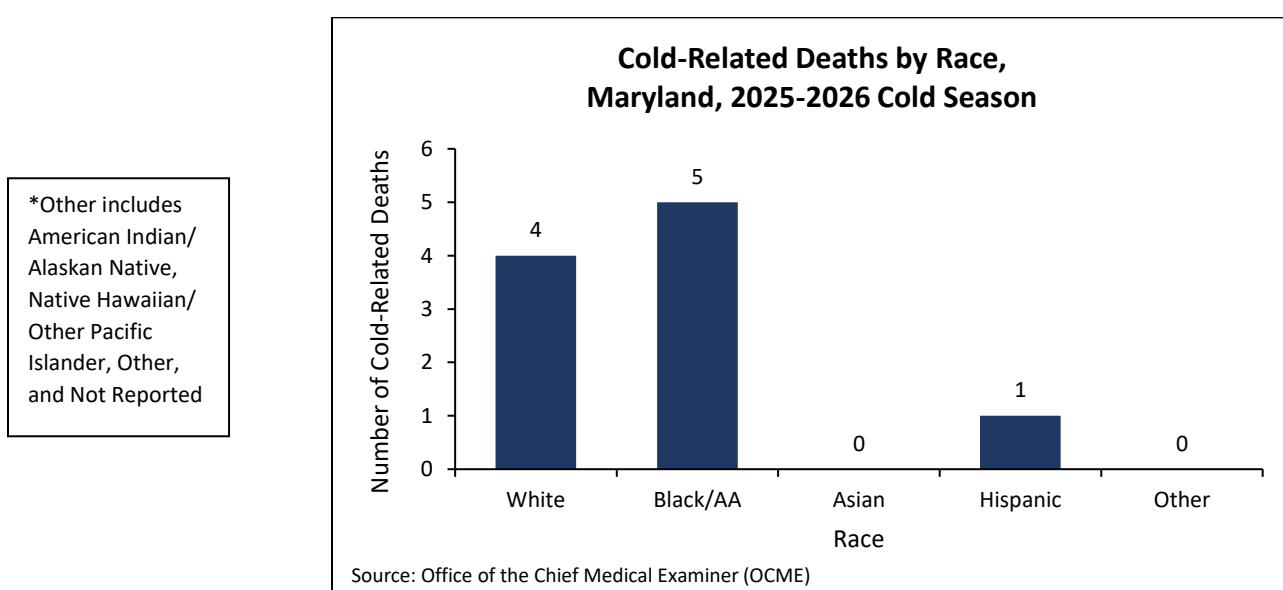
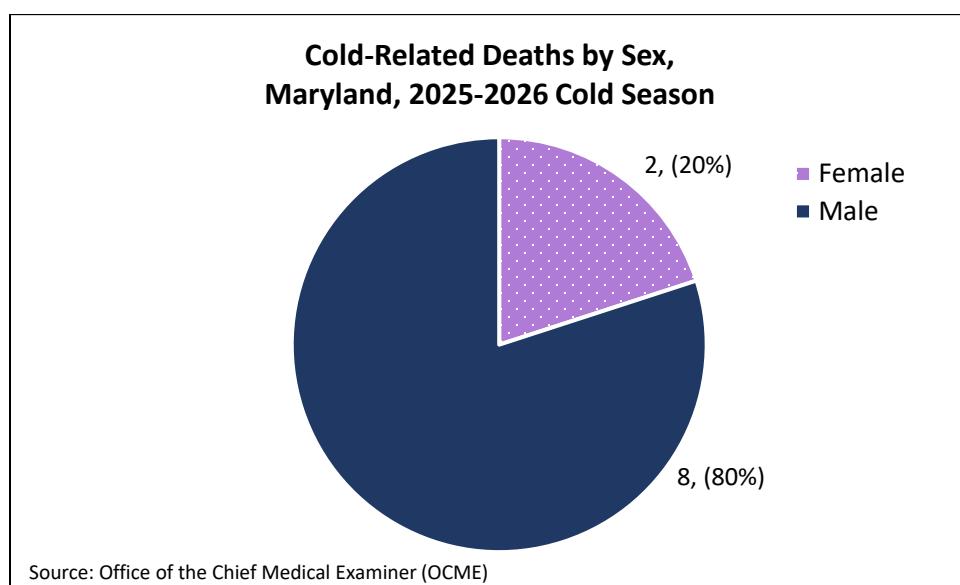
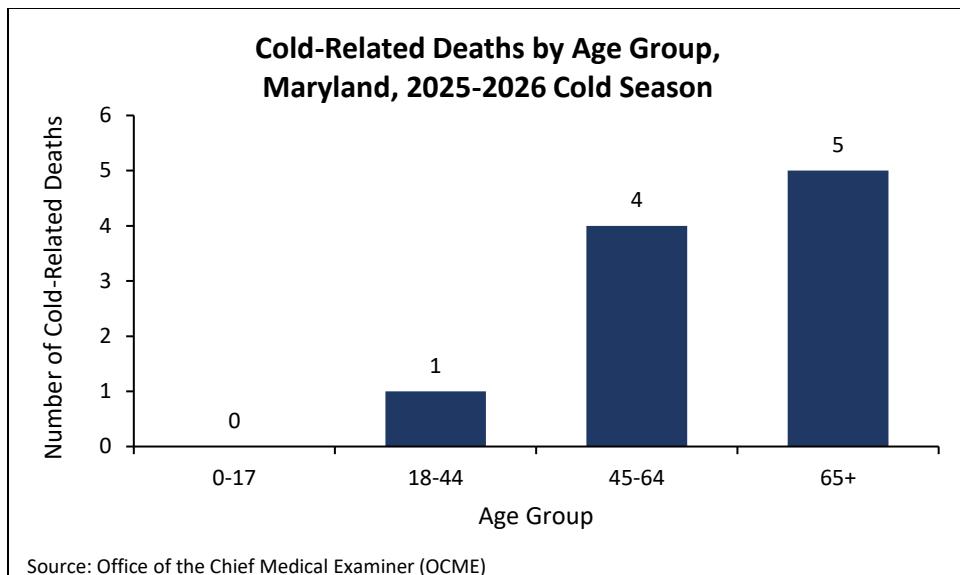
Total Reported Cold-Related Deaths This Season: **10**

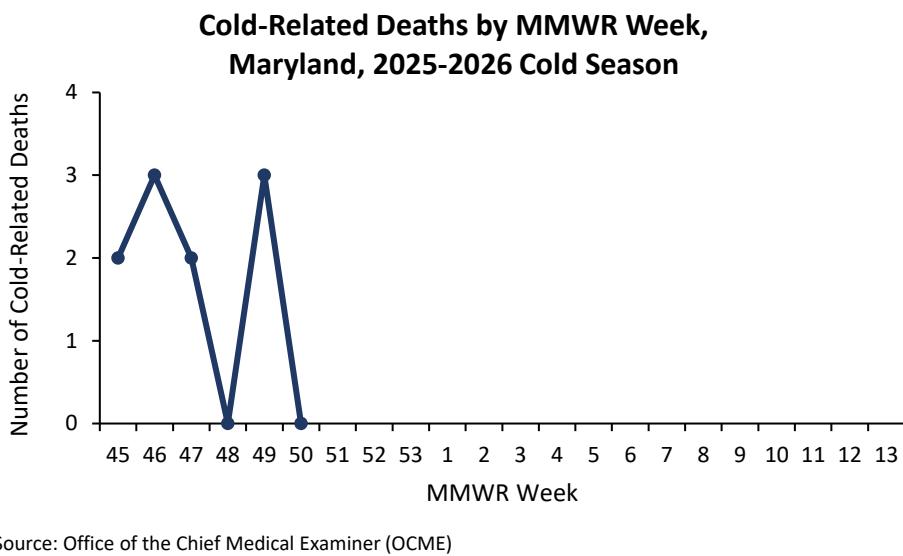
Historical Total Reported Cold-Related Deaths

2020-2021 Deaths	2021-2022 Deaths	2022-2023 Deaths	2023-2024 Deaths	2024-2025 Deaths
62	52	45	70	75

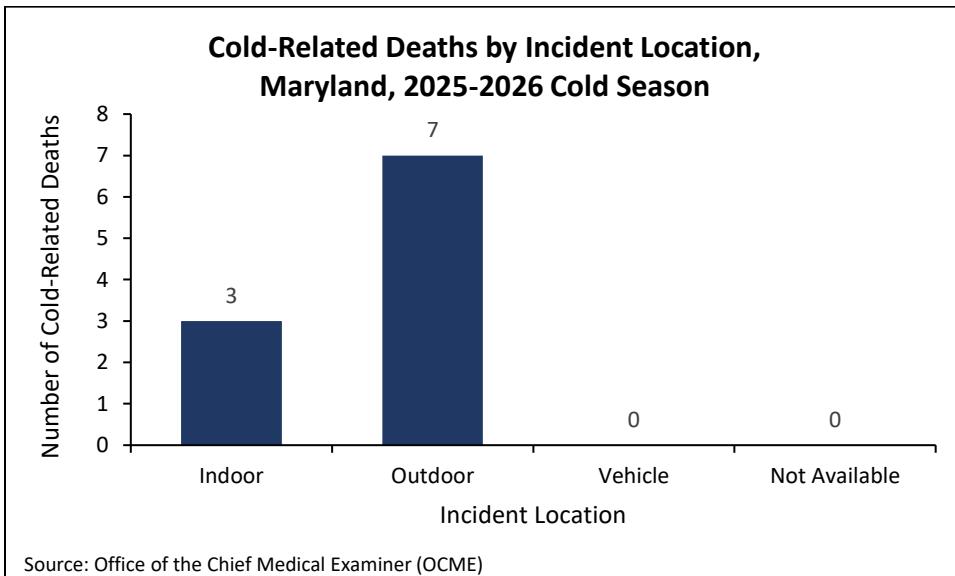


Note: Cold-Related Deaths are reported by the Office of the Chief Medical Examiner (OCME) and do not include deaths not evaluated by the OCME. Cold-Related deaths are those that the OCME has indicated "hypothermia" as a cause of death or a contributing factor. Classification as a Cold-Related death does not mean that extreme temperatures were the only factor that caused or contributed to the death, as pre-existing medical conditions can significantly increase an individual's susceptibility to temperature changes.





Note: Cold-Related deaths are counted based on the week the death occurred.



Note: Incident locations are classified based on data presented within the death reports. **Indoor** locations are areas protected from exposure to weather. **Outdoor** locations are exposed to weather. **Not Available** indicates that no incident location information was provided. The classifications presented here may not correspond directly with those defined by the OCME.

References

ESSENCE

The Maryland Electronic Surveillance System for the Early Notification of Community-based Epidemics (ESSENCE) program is an electronic biosurveillance system that uses non-traditional data sources to quickly identify disease outbreaks and other patterns of illness.

Data Sources

MDH analyzes chief complaints and discharge diagnoses of ED and UC visits to identify and monitor issues of public health concern across Maryland. The chief complaint is a free-text field capturing the patient's primary reason for seeking medical care as interpreted by the ED registration staff. The discharge diagnosis is a coded field that uses standardized values outlined by the International Classification of Diseases (ICD) 10th Revision and SNOMED Clinical Terms (CT) code sets.

Case Definitions

ED and UC visits for cold-related illness were identified based on the [Cold-Related Illness Syndrome Query](#) definition published by the Council of State and Territorial Epidemiologists (CSTE) using Chief Complaint and Discharge Diagnosis.

For more information about extreme cold and emergency preparedness, follow the Office of Preparedness and Response on [Twitter](#) and [Facebook](#).

For media inquiries, please contact the Office of Communications: [410-767-6490](#)

Prepared by:

Office of Preparedness and Response
Maryland Department of Health
7462 Candlewood Rd
Hanover, MD 21076

<http://preparedness.health.maryland.gov>

Yvonne Romero, MPH
Biosurveillance Epidemiologist, Biosurveillance Program
Email: yvonne.romero1@maryland.gov

Kurt Seetoo, MPH
Biosurveillance/Data Integration Manager, Biosurveillance Program
Email: kurt.seetoo@maryland.gov

Peter Fotang, MD, MPH
Biosurveillance Epidemiologist, Biosurveillance Program
Email: peter.fotang@maryland.gov

Johanna Gregory Belssner
Special Projects Coordinator
Email: johanna.belssner@maryland.gov