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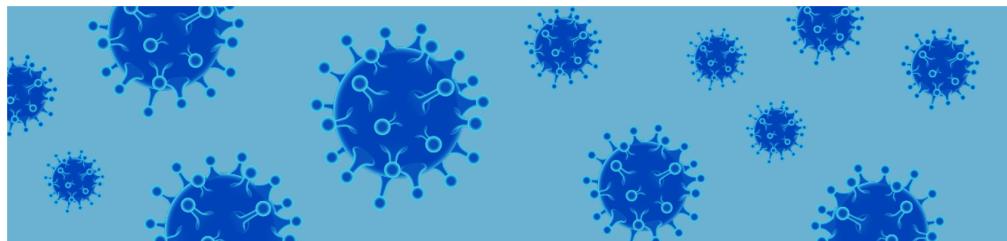
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# Monitoring of COVID-19

Find the latest listings and follow the evolution of COVID-19 on this page.

Last edited on May 21, 2020

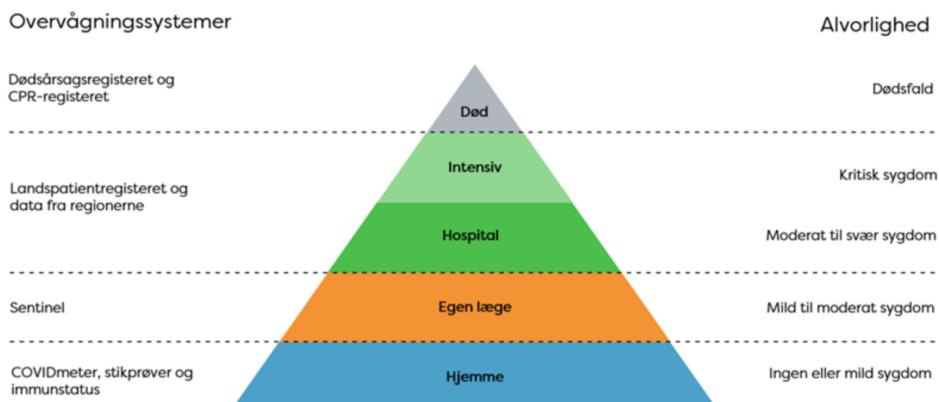


Statens Serum Institut monitors COVID-19 via [the Danish Microbiology Database \(MiBa\)](#). MiBa COVID-19 data is linked to other health records and laboratory data from the country's clinical microbiology departments (KMA).

In addition, the prevalence of infection in the community is monitored via [COVID meters](#), by testing people with mild symptoms in the population and via samples in groups of randomly selected healthy citizens. In addition, the population's immune status will be examined in cooperation with the blood banks. Mortality in Denmark is monitored via [EuroMOMO](#), which also contains data for a number of other European countries.

Here you can see the monitoring pyramid, which shows which registers linked to MiBa are used to calculate data on COVID-19 in terms of severity.

## COVID-19-monitoring pyramid



[Download monitoring data file](#) (zip csv file updated on weekdays at 2pm). The file contains data on the number of infected and tested by municipality, number of infected by sex and age, death over time and number of new admissions.

See also our [archive of previously published data](#).

[Read more about the outbreak with COVID-19](#), infection [hygiene](#) guidelines, model calculations for scenarios when reopening Denmark, and find the weekly Trend and Focus reports from SSI.

## Today's COVID-19 figures for Denmark

Number of tests, people tested, confirmed cases, number of infections and deaths in Denmark as well as change since yesterday. Figures are updated daily at 14th

	Number of samples	Number tested	Confirmed cases	Over infection	Deaths (%)
Number today	504266	425101	11182	9643	561 (5.0)
Change since yesterday	15775	13050	65	107	7

*Obs. number of deaths is calculated on May 21, 2020 at 10:15. It is approx. three hours later than usual and therefore the number may be higher than expected.*

Total number of inpatients and on intensive and intensive ventilators respectively. Updated daily at 14th

	hospitalized	Of which hospitalized in intensive care	Of which hospitalized on intensive and in respirator
Number today	122	23	18
Change since yesterday	-5	-2	2

*Obs. figures from the Region of Southern Denmark have not been updated since 20 May 2020, at 17. The total figures for admissions may therefore differ from the above table.*

Explanations for the table



## Today's COVID-19 figures for the Faroe Islands and Greenland

Number of tests, people tested, confirmed cases, number of infections and deaths in Denmark as well as change since yesterday. Updated daily at 14

	Number tested	Confirmed cases	Over infection	Deaths (%)
Faroe Islands	9084	187	187	0
Greenland	1803	11	11	0

## Epidemiological explanation

From the end of February to March 11, people with both mild and more severe respiratory symptoms traveled primarily to Denmark from countries with high COVID-19 infection spread. This happened as part of the containment phase.

From March 12, Denmark switched to the mitigation strategy, which initially tested people with hospitalization symptoms of COVID-19, and then the test strategy has been continuously adjusted. In addition to people with inpatient symptoms of COVID-19, people with deterioration over time are tested, persons belonging to the group of particularly vulnerable individuals incl. pregnant women with symptoms of COVID-19.

As of April 1, 2020, extended testing has been carried out, including: patients with mild symptoms as well as employees in the health and elderly sector with mild symptoms and who have close contact with citizens or patients can be tested. In addition, after assessing patients with mild symptoms, GPs may also refer these to testing.

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As of April 21, 2020, testing has been extended to include all people with mild symptoms, but also groups without symptoms of COVID-19, such as people expected to be hospitalized for over a day, residents and staff at institutions, such as residences and care centers are offered testing.

These changes to the test strategy mean that the number of confirmed cases cannot be compared over time.

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