



New York City COVID-19 Cases Caused by SARS-CoV-2 Variants Report (3.23.2021)

Data pulled 3/23/21 from GISAID; variants available in GISAID for NYC residents, cumulative*

Variants of concern that are being monitored by CDC	
B.1.1.7	590
B.1.351	2
B.1.429	105
B.1.427	44
P.1	1
Other variants being monitored by NYC	
B.1.526	1800
B.1.525	10
P.2	11
Number of genome sequences from specimens from NYC residents in GISAID, cumulative*	7078

* [GISAID](#) is a global science repository for open-access to genomic data of SARS-CoV2. Cumulative refers to January 2021 – present. All sequences noted as “available in GISAID” have passed critical quality control checks and are publicly available.

For national figures, see the CDC’s US COVID-19 Cases Caused by Variants: <https://www.cdc.gov/coronavirus/2019-ncov/transmission/variant-cases.html>

Trends based on a sample of specimens submitted to Pandemic Response Lab, as of 3/21

Specimen collection date, week	Total specimens sequenced by PRL	B.1.1.7 (N, %)	B.1.351 (N, %)	B.1.429 (N, %)	B.1.427 (N, %)	P.1 (N, %)	B.1.526 (N, %)		B.1.525 (N, %)	P.2 (N, %)
							S:E484K+ (N, %)	S:E484K- (N, %)		
Feb 8 - 14	734	52 (7.1%)	0 (0%)	9 (1.2%)	4 (0.5%)	0 (0%)	111 (15.1%)	103 (14%)	1 (0.1%)	3 (0.4%)
Feb 15 - 21	826	69 (8.4%)	2 (0.2%)	5 (0.6%)	8 (1.0%)	0 (0%)	133 (16.1%)	121 (14.6%)	1 (0.1%)	0 (0%)
Feb 22 - 28	990	118 (11.9%)	0 (0%)	12 (1.2%)	4 (0.4%)	0 (0%)	207 (20.9%)	178 (18%)	4 (0.4%)	2 (0.2%)
March 1 - 7	715	125 (17.5%)	0 (0%)	14 (2.0%)	3 (0.4%)	0 (0%)	168 (23.5%)	153 (21.4%)	1 (0.1%)	0 (0%)
March 8 - 14	1481	141 (9.5%)	0 (0%)	13 (0.9%)	2 (0.1%)	1 (0.1%)	227 (15.3%)	254 (17.2%)	0 (0%)	0 (0%)

** Estimates are derived from a subset of specimens submitted to the New York City Pandemic Response Laboratory (PRL) for diagnostic testing and may not be completely representative of all NYC COVID cases. The rate of variants in these samples may not be generalizable to all NYC COVID infections, and generalizability may vary week to week. PRL receives specimens from New York City Health and Hospitals outpatient and inpatient facilities, including community Test & Trace Corps sites, as well as private providers. Specimens are eligible for sequence analysis if they are from a New York City resident and meet specific virologic thresholds.