

Health Advisory

Updates Related to Highly Pathogenic Avian Influenza (H5N1) March 3, 2025

SUMMARY POINTS

- Highly pathogenic avian influenza A(H5N1) continues to be identified in wild birds, poultry, and dairy cows along with other animals.
- Multiple birds in Philadelphia have tested positive for influenza A(H5).
- Hospital labs should develop strategies to enhance testing for influenza (H5) whether through direct testing or sending respiratory viral panels that are positive for influenza A and negative for seasonal subtypes for further testing.
- Contact the Philadelphia Department of Public Health (PDPH) Division of Disease Control (DDC) at (215) 685-6741 during business hours and (215) 686-4514 after hours for assistance with testing coordination for patients with concerning animal exposures.

Summary:

A panzootic of highly pathogenic avian influenza A(H5N1) viruses is currently affecting wild birds. Since 2022, the USDA has reported avian influenza A(H5) detections in more than 10,000 wild birds, although most infected wild birds are not tested. As indicated through in-state testing and observed deaths of wild birds, avian influenza A(H5) is currently widespread among wild birds regionally. In Philadelphia, detections have been made in both wild birds and in domestic poultry in a live bird market.

In the United States, there also have been outbreaks with these viruses among poultry and dairy cows, as well as infections among other animals. All states have experienced outbreaks in poultry, and 17 states have experienced outbreaks in dairy herds. Since 2024, there have been 70 confirmed human cases of avian influenza A(H5) in the United States, with once fatality in Louisiana. There has been no identified person to person transmission currently.

On January 16, 2025, CDC issued a [health advisory](#) recommending that clinicians and laboratories expedite subtyping of influenza A positive specimens from hospitalized patients, especially those in the ICU. Hospitals in Philadelphia that need assistance or have questions about this additional testing should contact the Philadelphia Department of Public Health (PDPH) Acute Communicable Disease program via email at ACD@phila.gov.

Most commonly ordered influenza tests, including all point of care testing, that are ordered in clinical settings can identify influenza A or B but cannot differentiate avian influenza A(H5) from seasonal viruses. Many extended respiratory viral panels will identify common subtypes of influenza A. If a test has resulted as influenza A, but negative for all common subtypes, the specimen should be prioritized for shipment to the Pennsylvania Department of Health Bureau of Laboratories (PADOH BOL) for additional testing.

Major commercial laboratories are also now offering influenza A H5 subtyping in the clinical setting. These tests are typically orderable as influenza testing with reflex to H5 subtyping. Additionally, the Food and Drug Administration offers a list of influenza A typing and subtyping tests.

Recommendations for Clinicians:

- In all patients with influenza like illness or conjunctivitis:

- Take a thorough history and ask about exposure to wild and domestic animals, including poultry, dairy cows, wild birds and cats, exposure to animal products such as raw milk, and raw meat-based pet food.
 - If exposure is not present, proceed as usual regarding influenza testing.
 - For patients with concerning animal exposures notify the Philadelphia Department of Public Health (PDPH) Division of Disease Control (DDC) at (215) 685-6741 during business hours and (215) 686-4514 after hours for assistance with influenza subtype testing coordination.
 - Start influenza antivirals immediately, prior to obtaining test results for patients with concerning animal exposures.
- In hospitalized patients with influenza like illness who do not have concerning animal exposures:
 - Order whatever influenza panel is most readily available.
 - Consider options to enhance subtype testing, including extended respiratory panels or H5 specific testing.
 - If the test detects Influenza A, not H1 or H3, send a specimen to PABOL for further testing. For instructions on forwarding specimens to PADOH BOL, see: <https://www.pa.gov/content/dam/copapwp-pagov/en/health/documents/topics/documents/laboratories/Viral%20Testing%20Respiratory%20Swab%20Collection%20and%20Shipping%20Instructions.pdf>.
 - If at any point Influenza H5 is detected, call PDPH immediately.
 - In outpatients with influenza like illness or conjunctivitis:
 - Take a thorough history and ask about exposure to wild and domestic animals, including poultry, dairy cows, wild birds and cats, exposure to animal products such as raw milk, and raw meat-based pet food.
 - Notify the Philadelphia Department of Public Health (PDPH) Division of Disease Control (DDC) at (215) 685-6741 during business hours and (215) 686-4514 after hours for assistance with influenza subtype testing coordination for patients with concerning animal exposures.
 - If exposure is not present, proceed as usual regarding influenza testing.

The risk of influenza A H5 viruses to the public remains low, but the situation is being monitored closely.

Recommendations for Clinical Laboratories

- Enhance subtyping influenza A results.
- If influenza A virus subtyping is not available at the hospital or the clinical laboratory of the treating facility, public health officials should be notified, and arrangements made for influenza A virus-positive respiratory specimens to be subtyped at a public health laboratory or a commercial laboratory with this testing capability. Specimens should be clearly linked to clinical information from the patient to ensure specimens from severely ill and ICU patients are prioritized.
- Immediately contact PDPH (or appropriate local health department) of any positive result for influenza A H5 by calling the Division of Disease Control (DDC) at (215) 685-6741 during business hours and (215) 686-4514 after hours.