

# Highly Pathogenic Avian Influenza (HPAI) H5N1 Dairy Farm or Commercial Poultry Outbreak Response Protocol

December 2024

In the event of an HPAI H5N1 outbreak in Oregon dairy cattle or commercial poultry, the local public health authority (LPHA) will be asked to deploy to the affected farm by the Oregon Department of Agriculture (ODA). Public health personnel should defer to ODA as the lead agency and should not deploy to farms without an invitation from the agency. The LPHA's role is to collect demographic and symptom information from all people exposed to infected animals (i.e., persons under monitoring or PUMs) and instruct PUMs on how to monitor themselves for symptoms. ODA will provide all personal protective equipment (PPE) to farmworkers. Oregon Health Authority (OHA) will be engaged in all dairy cattle and commercial poultry outbreaks and available to provide support on-site as needed.

## **Required materials** (available [here](#))

1. H5N1 person under monitoring data collection form: due to biosafety concerns, this form should be printed and manually completed on-site. Laptops should not be taken to farms with active outbreaks.
2. Person under monitoring 'Exposure to animals infected with bird flu' educational handout: double-sided English and Spanish.

## **Strongly recommended materials**

1. Specimen collection kits:
  - a. Influenza diagnostic testing should be offered to all PUMs with symptoms. *Consent is needed only from the individual being tested. Nasal + oropharyngeal swabs should be collected.* If conjunctivitis is present, a [conjunctival swab](#) should be collected as well.
  - b. Influenza screening testing may be offered to all PUMs without symptoms *if consent for testing is obtained from ODA, the farm, and the PUM.* Nasal + oropharyngeal swabs should be collected.
2. Oseltamivir treatment packs:
  - a. Consider carrying oseltamivir treatment packs to be dispensed under an actively licensed medical professional with prescribing authority. *We have not had success in rapidly obtaining oseltamivir for suspect novel influenza cases leveraging the healthcare system.*

## **HPAI H5N1 dairy cattle and commercial poultry outbreak response steps**

1. In collaboration with ODA, OHA will notify the LPHA of HPAI H5N1 dairy cattle and commercial poultry outbreaks. Farm location, languages spoken, and the estimated number of people exposed will be communicated at that time.

2. LPHAs meet ODA on-site during a time designated by ODA to collect demographic, symptom, and risk information from all PUMs and provide symptom-monitoring education.
  - a. All PUMs should be documented in Orpheus as a “Person Under Monitoring (HPAI)” within 24 hours.
    - i. Note: **all symptom monitoring information must be documented in the PUM tab of the case record** (i.e., not in the notes field).
3. Any PUMs with symptoms should be treated with oseltamivir and tested for influenza as soon as possible (see below).

### **Prescribing and dispensing oseltamivir**

Rapid access to oseltamivir is essential because avian influenza has historically been associated with severe disease during human spillover events. **Ideally, oseltamivir will be dispensed directly by public health rather than through the traditional health care system.**

The LPHA Health Officer should prescribe oseltamivir following consultation with the symptomatic PUM. Please note that OHA has a no-cost supply of oseltamivir available to dispense to local public health authorities. If there is no Health Officer available to support, please contact Dr. Melissa Sutton and Dr. Paul Cieslak immediately at [Melissa.Sutton@oha.oregon.gov](mailto:Melissa.Sutton@oha.oregon.gov) and [Paul.R.Cieslak@oha.oregon.gov](mailto:Paul.R.Cieslak@oha.oregon.gov).

As a last resort, the LPHA may facilitate access to oseltamivir through health care system. The LPHA should reach out to the primary care provider or local urgent care to explain the exposure risk and need for urgent oseltamivir (note: please *do not* ask PUMs to simply present for evaluation as this may lead to unnecessary exposure to others and is unlikely to result in an oseltamivir prescription because many clinicians are unfamiliar with the risk of avian influenza).

### **Testing for influenza**

Symptomatic PUMs should be tested as soon as possible. Because we want to limit exposure to suspected novel influenza and ensure that the most appropriate specimen type is obtained, we ask that the LPHA obtain the specimen whenever possible.

Options for performing testing, in order of preference, include:

1. LPHA collects specimens (preferably at PUM’s residence to limit exposure to others) and sends to the Oregon State Public Health Laboratory (OSPHL) for testing.
2. OHA collects specimens and sends to OSPHL for testing. If the LPHA is unable to collect specimens, please contact Dr. Melissa Sutton and Amanda Faulkner immediately at [Melissa.Sutton@oha.oregon.gov](mailto:Melissa.Sutton@oha.oregon.gov) and [amanda.e.faulkner@oha.oregon.gov](mailto:amanda.e.faulkner@oha.oregon.gov).

## **Specimen Submission**

Specimens should be collected per [CDC Influenza Specimen Collection](#) protocol and submitted to OSPHL for [influenza subtyping](#).

- In the comment field at the bottom of the [OSPHL Virology/Immunology Request form](#) write in “Suspect novel influenza”
- Viral transport media (preferred), universal transport media, and sterile saline are accepted
- If OSPHL courier support is needed, fill out this [form](#)

When submitting suspect novel influenza specimens to OSPHL please notify the following individuals:

- OSPHL Testing Team, [acd.p.approvals@odhsoha.oregon.gov](mailto:acd.p.approvals@odhsoha.oregon.gov)
- Melissa Sutton, Medical Director, Respiratory Viral Pathogens; [melissa.sutton@oha.oregon.gov](mailto:melissa.sutton@oha.oregon.gov)
- Amanda Faulkner, [amanda.e.faulkner@oha.oregon.gov](mailto:amanda.e.faulkner@oha.oregon.gov)