

# MLS Laboratory Update: Guidance for Highly Pathogenic Avian Influenza (HPAI) Testing

APRIL 19TH, 2022

## Purpose of this Message:

To help clinical laboratories and hospitals understand the pathogenic route of HPAI for humans, patient symptoms and criteria for testing. Specimens should not be submitted to MDH PHL for testing without contacting the HPAI Monitoring Surveillance Line.

## Action Item:

Please review the information below. If a patient has influenza-like symptoms and has exposure to poultry, MDH may request specimens from that individual for testing. Clinicians should contact the HPAI Monitoring Surveillance Line at 651-201-5921 to coordinate submission to MDH-PHL, if necessary.

## Background:

The Minnesota Board of Animal Health announced on March 25, 2022, that commercial turkey flocks in Minnesota tested positive for a highly pathogenic avian influenza (HPAI) virus, H5N1. Since then, HPAI has been detected in more than 40 commercial and backyard flocks, as well as in migratory wild birds. Among poultry, this virus spreads quickly and has a high fatality rate. The risk for human illness is very low, as is the risk of person-to-person transmission.

Currently no human cases have been reported in the United States and no instances of human-to-human transmission of this HPAI H5N1 strain.

HPAI H5N1 is only spread to humans via direct contact with infected poultry. If infection occurs in humans, it will most likely be among individuals who work closely with affected poultry.

## Testing information:

- If you have a physician requesting avian influenza testing on a patient, they should work through the HPAI Monitoring Surveillance Line (651-201-5921) to approve and coordinate testing at the MDH Public Health Laboratory, if necessary
- MDH epidemiologists will provide proper submission form documents and coordinate specimen collection with local health care providers
- Specimens requested may include nasopharyngeal and conjunctival swabs, depending on symptoms
  - Swabs should be made of a synthetic material (e.g., Dacron) with a plastic or aluminum shaft. Swabs should be put into tubes containing viral transport media.

- Nasopharyngeal swabs are the preferred specimen type for results reporting
- Conjunctival swabs may be requested by MDH to better understand spread of HPAI, but these results will not be reported back to the submitter
- Testing at MDH-PHL will include screening for SARS-CoV-2 and influenza A and B
  - Specimens that test positive for influenza A at MDH-PHL will be subtyped to determine lineage, including influenza A(H5)
  - Specimens that are negative for influenza are considered negative for avian influenza. No further testing is required.
- Commercial assays may be able to detect avian influenza; review manufacturer's instructions for use to determine sensitivity for influenza A(H5)
- Remember, COVID-19 and seasonal influenza are still circulating in Minnesota. Individuals presenting with influenza like illness (ILI) in the community are most likely infected with COVID-19, seasonal influenza, or other circulating respiratory illnesses.

For more information, please visit:

<https://www.health.state.mn.us/diseases/flu/current/novel.html>

or call the Minnesota Department of Health at 651-201-5414 or 1-877-676-5414.

**Questions:** Please contact:

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