

H5N1 Avian Influenza Tip Sheet

When to consider avian influenza?

Consider avian influenza if your patient has BOTH of the following:

- signs or symptoms of acute respiratory illness or conjunctivitis
- relevant exposure: direct or close exposure to poultry, wild birds, or dairy cows; or ingestion of raw milk



If you are concerned for avian influenza or avian influenza exposure, immediately call Infection Prevention:

Business Hours, Mon-Fri 8a-4p

Main Line: (415) 353-4343 Adult Voalte: (415) 353-1964

Pediatric Voalte: (415) 502-0728

After Hours and Weekends

Parnassus Hospital Supervisor: (415) 353-

8036 or (415) 353-1964

MB Adult Resource RN: (415) 502-0562

BCH-SF Hospital Supervisor: (415) 502-0728

Patient Placement, Isolation, PPE

- 1. **Mask patient immediately** with a surgical mask. For pediatric patients that cannot tolerate being masked, put a blanket loosely over their heads during transport.
- 2. Place patient in an **Airborne Infection Isolation Room (AIIR)** with the door closed. In Ambulatory settings, place patient in a private exam room and keep the door closed for the entire visit.
- 3. Place signage and an order for **Airborne, Contact, and Droplet Isolation**.
- 4. Staff entering the patient's room must wear a fit-tested **N95/eye protection** (or PAPR), **gown**, and **gloves**.

How to test?

- Contact HEIP to determine if testing is indicated. If so, HEIP will help coordinate testing through the public health laboratory.
- Order an Influenza A/B/RSV RNA PCR (ambulatory/ED) or respiratory viral panel (inpatient). If the specimen is influenza A-positive, but not consistent with seasonal influenza, it will be sent to a public health lab for H5N1 testing.
- If the patient has conjunctivitis, order the "Microbiology Test Not Listed" (LAB5088) and obtain conjunctival swabs. In the order comments, write "conjunctival swab for avian flu testing at SFDPH."