

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

(415) 353-4343 (Main Line)

(415) 353-1964 (Adult Voalte)

(415) 502-0728 (Pediatric Voalte)

After Hours

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 infection prevention and the San Francisco Department of Health (415-554-2830) to determine if testing is indicated and, if so, to coordinate testing through the public health laboratory.
- Order a **respiratory viral panel (RVP)**. If influenza A-positive but not consistent with seasonal influenza, the specimen will be sent to a public health lab for H5N1 testing.

For more information, see [UCSF Avian Influenza Guidance and Resources](#).