Guidance for veterinary clinics managing suspected H5N1 avian influenza cases in wildlife and poultry

This document provides practical guidance for veterinarians and veterinary clinic staff managing suspected H5 highly pathogenic avian influenza (H5 bird flu) cases in wildlife and poultry. It supports the National H5 high pathogenicity avian influenza guidelines for veterinarians.

Clinical signs

Avian influenza should be considered as a possible cause if a high proportion of a flock or group of birds become ill very quickly – progressing from normal to severe illness or death within 24 to 48 hours.

Clinical signs may include:

- sudden death
- respiratory signs (dyspnoea, tachypnoea, coughing, sneezing, increased nasal secretions)
- swelling and purple discoloration of the head, comb, wattles and neck
- rapid drop in feed intake, water intake and egg production
- typical “sick bird” signs – ruffled feathers, depression, closed eyes
- diarrhoea
- neurological signs (twisted neck, inability to stay upright, inability to fly, uncoordinated movement, walking or swimming in circles, partial or full paralysis).

How to report

Avian influenza is a notifiable disease. If a veterinarian suspects avian influenza, call the Emergency Animal Disease hotline on 1800 675 888.

Report clusters of 5 or more sick or dead wild birds of any species, anywhere in Victoria.

Report even one sick or dead:

- wild seabird, waterbird, shorebird or bird of prey
- marine mammal (e.g. seal, dolphin).

Before clients arrive with a bird

If members of the public or wildlife carers are willing to transport wildlife or poultry to your clinic, advise them of the zoonotic risk associated with avian influenza and encourage they wear suitable PPE to protect themselves.

Provide clear instructions before arrival:

- Do not enter the clinic with birds.
- Park in a designated car park and call reception.
- Remain with the animal and wait for a staff member wearing appropriate PPE to collect it.
- Double-bag deceased birds.
- If the bird is alive, keep it securely contained in a box or carrier.

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Prepare your clinic

Adopt the same simple infection control approach you would use for other infectious disease cases, such as kennel cough or parvovirus.

Before a bird arrives:

- Identify an outdoor triaging area or isolation space that can be used for assessing suspect cases.
- Display clear signage with instructions for clients to remain outside and contact the clinic on arrival.
- Consider an outdoor drop-off point for double-bagged deceased birds.
- Examine and handle birds outdoors where possible, in a well-ventilated area.
- Plan your PPE use and disinfection procedures

If an outdoor area is not available, move the bird directly to an isolation or quarantine room to examine and sample. Do not bring suspected H5 bird flu cases through reception or hospital areas.

In general, if staff have handled wildlife suspected of having H5 bird flu, they should avoid contact with backyard poultry and other captive birds for 48 hours. This stand-down period may potentially be reduced with appropriate PPE and disinfection practices, for example not re-using PPE. The industry standard stand-down period of at least 72 hours should be used before the person comes into contact with commercial poultry.

Triaging

Obtain a history before the bird is brought to the clinic. Ask about:

- where the bird was found (exact location for wild birds, if possible), including any exposure to wetlands, shorelines, poultry or known H5-affected areas
- the species and management status (wild, captive, domestic)
- the number of birds affected or dead, particularly if there are clusters or high mortality
- clinical signs, such as neurological signs, nasal discharge, inability to walk or fly, or evidence of trauma
- any contact with poultry
- how long the bird has been unwell, as sudden onset may increase suspicion of HPAI.

For galliform poultry (e.g. chickens, turkeys, guineafowl), also consider:

- housing and contact with wild birds, including potential contamination of feed and water
- recent flock introductions or bird movements, including poultry shows
- flock health history
- morbidity and mortality rates
- the timeframe of symptoms, including when signs first appeared

Ask the client for photos and videos of affected birds where possible. Consider whether the birds can be assessed at its residence to avoid unnecessary transport.

Personal protective equipment (PPE)

Assess your situation and use appropriate PPE. Example:

For sampling a single, small bird outdoors (bird smaller than a chicken):

- Disposable gloves (double glove if sampling), consider heavy duty rubber gloves for handling some species
- P2 (N95) mask
- Eye protection (goggles or, if available, a face shield)
- Disposable shoe covers or washable shoes (i.e. rubber boots)

For sampling large birds or multiple birds outdoors or for sampling birds indoors, add:

- Protective clothing: e.g. coveralls or gown

Testing and sampling

Before sampling, contact Agriculture Victoria for notification and guidance. For approved cases, Agriculture Victoria will assist with sample submission, cover laboratory testing costs and provide a veterinary clinic subsidy of $220 (GST inclusive) to support the cost and time for sampling suspect birds and other susceptible animals.

Samples can be collected from sick or fresh dead animals (preferably less than 48 hours after death). Animals that can be sampled include pets, free-living wildlife, small-holder livestock and commercial animals. One oropharyngeal and cloacal swab is sufficient to perform PCR for HPAI.

Equipment checklist:
☐ VTM (Viral Transport Media) or 1ml Sterile saline in small sterile container
☐ Sterile swabs
☐ Triple packaging materials, including ziplock bags and absorbent material (e.g. paper towels, nappies)
☐ Lab submission form
☐ Garbage bags
☐ PPE
☐ Detergent and an approved disinfectant

Steps for testing and sampling

1. Remove vials of VTM (Viral Transport Media) from freezer to defrost (supplied by Agriculture Victoria). Alternatively, you can use 1mL sterile saline in a small sterile container.
2. Don PPE
3. Using a plain swab, swab the oropharyngeal/tracheal area for 5-10 seconds. The choana (slit in the upper beak in the mouth) can also be swabbed, especially in smaller or younger birds
4. Using the same swab, swab the cloaca for 5-10 seconds
5. Place swab into labelled VTM (you will need to snap/cut handle of swab to fit)
6. Keep VTM sample chilled either in fridge or in esky with ice bricks (4^{o}C)
7. Triple pack samples (e.g. VTM container, in a ziplock, into an esky) Download - record of disease event form

Cleaning and disinfection

Line work surfaces with a rubbish bag opened lengthways to simplify cleaning.

Clean surfaces with detergent to remove contamination, then apply an approved disinfectant according to the manufacturer's instructions and contact time (for example bleach, F10, Virkon, Viraclean or another virucidal veterinary disinfectant).

Dispose of contaminated waste by double bagging within the isolation area.

Isolation and quarantine areas

As with any isolation or quarantine area, consider:

- Use of footbaths and clear entry/exit areas to don and doff PPE
- Consider separate ventilation, areas away from other patients

- Keep the door closed
- Minimise the number of staff involved with handling and care of birds
- Ensure the area has dedicated equipment and disposal facilities
- Ensure adequate signage on the door

Managing sick birds and carcasses while awaiting results

If the bird is receiving treatment:

- Hold in quarantine in isolation area until a negative avian influenza result is received. Employ barrier nursing.
- Do not release suspect animals until guidance has been received from Agriculture Victoria.

If the bird is dead or has been euthanised:

- Sample the bird. If the bird cannot be sampled immediately, store the bird in a freezer, double bagged and labelled until it can be sampled, then dispose.
- If the result is positive, Agriculture Victoria will contact you.

If the bird is alive, it may need to be euthanised. Other birds that have had contact with the infected bird may need to be euthanised to prevent further spread of the virus.

- Agriculture Victoria will advise on whether further testing is required and disposal.
- Double bagged carcasses can be disposed via general waste after sampling.

Summary of process for suspect avian influenza bird presentation

1. Client contacts clinic	
Triage risk based on: • Clinical signs • Species • Number of sick or dead birds • Location where found	Advise client to: • Avoid direct contact • Wear gloves, eye protection and a mask • Double bag the bird if dead • Wait outside on arrival
2. Bird arrives at clinic	
• Staff wear PPE • Retrieve bird from client outside	• Take bird directly to isolation • Avoid reception and treatment areas
3. Collect samples	
• Oropharyngeal swab in VTM • Cloacal swab in VTM • Triple package samples	
4. Clean and biosecurity measures	
• Clean and disinfect all contact areas	• Staff apply appropriate stand-down period from poultry and other birds – see above

More information

- For more information, visit agriculture.vic.gov.au/birdflu
- Call your local District Veterinary Officer on 136 186