

**Ministry of Health**

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April 25, 2023

**MEMORANDUM**

**TO: Vice Presidents, Clinical  
Ontario Health**

**FROM: Dr. Kieran Michael Moore,  
Chief Medical Officer of Health, Public Health**

**RE: Avian Influenza Surveillance in Hospitalized Patients**

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Dear colleagues,

Since 2022, a highly pathogenic strain of avian influenza (HPAI; H5N1) has been circulating in Canada and internationally among domestic and wild birds. This strain is highly pathogenic to birds and has caused an unprecedented global outbreak in its size and duration. Commercial poultry farms and backyard flocks are impacted, and seabirds, waterfowl, raptors, and corvids are the wild bird species mainly affected. More recently, there have been occasional detections of this H5N1 strain in wild and domestic mammals that have had exposure to infected birds, including domestic cats and dogs. While rare, human cases of HPAI (H5N1) have been reported internationally. These detections highlight the importance of ongoing surveillance and vigilance for potential infections in humans who have had contact with an infected animal.

According to WHO and PHAC, the risk to humans continues to be low, but any individual coming into direct contact with an animal infected with HPAI or contaminated environmental surfaces is advised to self-monitor for signs and symptoms and to seek medical assessment if they develop any respiratory symptoms within the 10 days following the last date of potential exposure (or 14 days if exposure to other animals with influenza).

**We are asking for your cooperation in maintaining a heightened index of suspicion for individuals ADMITTED to hospital with influenza as part of enhanced surveillance for avian influenza.** This includes:

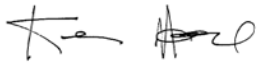
- Obtaining a history regarding **potential exposures to infected birds or to their contaminated environmental surfaces**, or to mammals that may have been infected by birds, in the past 14 days prior to illness onset.
  - Notify your hospital infection prevention and control AND your local public health unit if a relevant exposure is identified.
  - Further information for health professionals is available from the Public Health Agency of Canada.
- Ensuring that all positive influenza A samples (non-H3/non-H1 samples, if known) from **all admitted patients are forwarded to PHOL for sub-typing**. For more information on laboratory testing, see test information from the Public Health Ontario Laboratory (PHOL).

At this time, due to the overall low risk of transmission to humans, we are not recommending sub-typing for all individuals (e.g., out-patients or patients in the Emergency Department) positive for influenza A. However, any ill patient with a history of potential exposure to an infected bird or animal should be notified to the local public health unit for further evaluation and testing, including sub-typing if influenza A positive.

We will continue to monitor the epidemiology of avian influenza and provide updates as the outbreak evolves.

Thank you for your cooperation, and for more information on Avian Influenza, please visit the [Ontario frequently asked questions webpage](#).

Sincerely,



Dr. Kieran Michael Moore, MD, CCFP(EM), FCFP, MPH, DTM&H, FRCPC, FCAHS  
Chief Medical Officer of Health and Assistant Deputy Minister, Public Health

cc: Dr. Wajid Ahmed, Associate Chief Medical Officer of Health  
Dr. Fiona Kouyoumdjian, Associate Chief Medical Officer of Health  
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