

NJ Public Health and Environmental Laboratories Recommendations

NJ Public Health and Environmental Laboratories (PHEL) is forwarding this notification to all clinical and commercial laboratories in the state to stay alert to the possibility of novel influenza A specimens due to recent detections of influenza A(H5N1) viruses. NJ PHEL does perform testing for novel influenza A viruses including A(H5N1) in clinical specimens.

If you have any questions regarding clinical testing for HPAI A(H5N1) viruses at PHEL, please contact Phel.influenza@doh.nj.gov

Background

On Friday, April 5, 2024, the Centers for Disease Control and Prevention (CDC) released a Health Alert Network (HAN) notification regarding Highly Pathogenic Avian Influenza (HPAI) A(H5N1) virus. This Health Alert is in response to a reported human case of Influenza A(H5N1) infection in an individual in Texas following exposure to presumably infected dairy cattle.

CDC maintains that the current risk these viruses pose to the public remains low. However, they have updated relevant recommendations, including that clinicians consider the possibility of avian influenza A(H5N1) virus infection in people who have symptoms of influenza and relevant exposure history.

The full health alert, including a summary of guidance changes is available here: [CDCHAN-00506 Highly Pathogenic Avian Influenza A\(H5N1\) Virus: Identification of Human Infection and Recommendations for Investigations and Response](#)

NJ PHEL requests influenza specimens be sent to the public health lab for testing in the following circumstances:

Unsubtypeable Influenza A

- Immediately submit any influenza sample that is **UNSUBTYPEABLE** with a molecular influenza assay that can detect currently circulating influenza A virus subtypes (i.e., “seasonal influenza” subtypes)
 - For example, results that indicate “influenza A positive”, but with **subtype not identified**.
 - Do **not** submit specimens which are not tested for influenza subtype, or specimens which are inconclusive for influenza infection.
 - Positive influenza A specimens that are subtyped as seasonal strains such as H1N1 or H3N2 **do not** need to be routinely submitted.

- An example printout from an instrument of an unsubtypeable influenza result would look similar to this (result reports will vary depending on test method used):

✓ Influenza A	Detected
Influenza A H1	Not Detected
Influenza A H1-2009	Not Detected
Influenza A H3	Not Detected
Influenza B	Not Detected

- There is no need for prior authorization to submit an unsubtypeable influenza specimen. To submit:
 - 1) Contact phel.influenza@doh.nj.gov to notify the lab of an incoming specimen notifying us of the specimen, including specimen identifier and expected delivery, as well as any previous test results.
 - 2) Select the test choice 'Respiratory Virus Surveillance (Influenza + COVID-19), either online through our electronic ordering portal or on the SRD-1 form.
 - 3) Indicate in the comments that this specimen was tested as unsubtypeable influenza A
- Submission of residual specimen volume is acceptable from any of the specimen types below:
 - PHEL accepts: Nasopharyngeal (NP) swabs, **Conjunctival swabs, Oropharyngeal (OP) swab, Combined Nasopharyngeal and Oropharyngeal swabs**, Nasal mid turbinate swabs, Anterior nasal swabs, Nasopharyngeal wash/aspirate, nasal wash/aspirate, Bronchoalveolar lavage, tracheal aspirate, pleural fluid
- Store residual specimens refrigerated (2-8°C) for no longer than 72 hours from time of collection. If specimen submission and receipt at NJ PHEL will take more than 72 hours, freeze specimens at -70°C or below and ship on dry ice.
 - Specimens frozen at -20°C will be accepted if -70°C is not available.
 - **Storage temperature must be maintained during specimen transport** (via courier or overnight shipping). If not able to maintain frozen temperature during entire transport (i.e. on dry ice), keeping specimen refrigerated (2-8°C) and shipping on frozen cold packs is acceptable. Avoid freeze-thaw cycles.

Testing Recommended for HPAI Suspect Cases

- Testing should be performed on persons who meet Epidemiologic criteria **AND either** Clinical **OR** Public Health Response criteria as outlined in the [Highly Pathogenic Avian Influenza A\(H5N1\) Virus in Animals: Interim Recommendations for Prevention, Monitoring, and Public Health Investigations](#)
- Before sending samples to PHEL, contact the local health department or communicable disease service to obtain testing authorization. PHEL will not test specimens received without authorization.
- For persons with suspected HPAI A(H5N1) virus infection, the following specimens should be collected as soon as possible after illness onset or when deemed necessary:
 - A nasopharyngeal swab **and** a nasal swab combined with an oropharyngeal swab (e.g., two swabs combined into one viral transport media vial).
 - If these specimens cannot be collected, a single nasopharyngeal or oropharyngeal swab is acceptable.

- **If the person has conjunctivitis (with or without respiratory symptoms), both a conjunctival swab and nasopharyngeal swab should be collected.**
- Patients with severe respiratory disease also should have lower respiratory tract specimens (e.g., an endotracheal aspirate or bronchoalveolar lavage fluid) collected, if possible.

General Laboratory Guidance:

- Collect specimens aseptically as soon as possible after symptom onset.
- For detailed instructions on how to collect respiratory specimens see here: [Respiratory Specimen Collection Quick Guide](#)
- Proper [infection control practices](#) should be followed during specimen collection.
- Use only synthetic fiber swabs with plastic shafts. Do not use calcium alginate swabs or swabs with wooden shafts.
- **Specimen Storage:**
 - Refrigerate specimens at 2-8°C for no longer than 72 hours from time of collection.
 - If specimen submission and receipt at NJ PHEL will take more than 72 hours, freeze specimens at -70°C or below and ship on dry ice.
 - Specimens frozen at -20°C will be accepted if -70°C is not available.
- **Storage temperature must be maintained during specimen transport** (via courier or overnight shipping). If not able to maintain frozen temperature during entire transport (i.e. on dry ice), keeping specimen refrigerated (2-8°C) and shipping on frozen cold packs is acceptable. Avoid freeze-thaw cycles.
- **Acceptable Specimen Types**
 - All swabs should be placed in a transport tube containing 1-3mL viral transport Media (VTM)
 - PHEL accepts: Nasopharyngeal (NP) swabs, **Conjunctival swabs, Oropharyngeal (OP) swab, Combined Nasopharyngeal and Oropharyngeal swabs**, Nasal mid turbinate swabs, Anterior nasal swabs, Nasopharyngeal wash/aspirate, nasal wash/aspirate, Bronchoalveolar lavage, tracheal aspirate, pleural fluid
 - Sputum and lung biopsy specimens may be accepted but cannot be tested at PHEL and will need to be forwarded to CDC for testing

Links to Additional Information

[NJ DOH: Respiratory Virus Testing at NJ PHEL](#)

[CDC: Highly Pathogenic Avian Influenza A\(H5N1\) Virus in Animals: Interim Recommendations for Prevention, Monitoring, and Public Health Investigations](#)

[CDC: Highly Pathogenic Avian Influenza A \(H5N1\) Virus Infection Reported in a Person in the U.S.](#)

[CDC: H5N1 Bird Flu: Current Situation Summary](#)

[USDA: Highly Pathogenic Avian Influenza \(HPAI\) Detections in Livestock](#)