DC HEALTH
GOVERNMENT OF THE DISTRICT OF COLUMBIA

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MURIEL BOWSER, MAYOR

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Health Awareness Notice for District of Columbia Healthcare Providers

Detection of Influenza A(H5) in Canada Goose in the District of Columbia

SUMMARY

The DC Department of Health issues this Health Alert Network (HAN) Health Notice to share information on the recent detection of avian influenza in the District and provide recommendations for prevention, diagnosis, treatment, and reporting. H5 is a subtype of the highly pathogenic avian influenza A virus, which is widespread in wild birds and can cause severe disease and high mortality in poultry. On December 17, 2025, DC Health was notified of a detection of H5 avian influenza in a wild Canada goose. While H5 is known to have caused human infections, the current public health risk is low. No human cases of influenza A(H5) have occurred in the District. DC residents should avoid handling dead or sick birds and seek medical care if compatible symptoms develop following an exposure event. Three or more dead or sick birds identified in one location should be reported to animal.info@dc.gov.

BACKGROUND

H5 is a highly pathogenic avian influenza (HPAI) A virus subtype, which is widespread in wild birds worldwide.[1] Wild birds may not show signs of illness but can carry the disease to new areas when migrating.[1,3] HPAI can cause outbreaks in domestic poultry resulting in severe disease and high mortality and mild to moderate illness in dairy cattle.[1,2,3]

Since 2024, 71 laboratory-confirmed human cases of H5 avian influenza have been documented in the United States, including two deaths. The majority of cases were infected following exposure to infected animals including dairy herds (58%), poultry farms and culling (euthanizing) operations (34%), or other animals (4%). The exposure source was unknown in 3 (4%) cases.[2] Infections in humans can be asymptomatic or cause mild symptoms including fever, cough, sore throat, congestion, muscle aches, headaches, fatigue, or conjunctivitis. Most H5N1 bird flu infections in humans in the United States have resulted in clinically mild illness, but a few hospitalizations and two deaths have been reported. Moderate to severe disease is characterized by high fever, shortness of breath or difficulty breathing, altered consciousness, seizures, and death. While person-to-person spread has not been detected in the United States, limited spread has occurred in other countries. Risk factors for HPAI infection primarily include exposure to sick or dead animals or exposure to surfaces contaminated with animal secretions/excretions. Eating undercooked or uncooked poultry or eggs, and consuming unpasteurized milk from infected dairy cows could also pose an exposure risk.[4]

On December 17, 2025, DC Health was notified of the detection of H5 avian influenza in a Canada goose. While the current public health risk is low, DC residents should take precautions to avoid exposure to H5. Residents should avoid handling dead or sick birds and seek medical care if symptoms compatible with H5 infection develop following exposure. Three or more dead or sick birds identified in any given location should immediately be reported to DC Health by email at animal.info@dc.gov or by phone at 202-535-2323.

RECOMMENDATIONS FOR HEALTHCARE PROVIDERS

Healthcare providers should consider the possibility of influenza A(H5N1) virus infection in people showing signs or symptoms of acute respiratory illness or conjunctivitis who have a relevant exposure history **(i.e. exposure to infected animals) within 10 days before symptom onse**t. Symptoms include but are not limited to:

- Mild illnesses include cough, sore throat, eye redness or discharge (such as conjunctivitis), fever or feeling feverish, rhinorrhea, fatigue, myalgia, arthralgia, and headache.
- Moderate to severe illness includes shortness of breath or difficulty breathing, altered mental status, and seizures.
- Complications include pneumonia, respiratory failure, acute respiratory distress syndrome, multi-organ failure (respiratory and kidney failure), sepsis, and meningoencephalitis.

If H5 infection is suspected, healthcare providers should:

- Isolate the patient and follow infection control recommendations, including using PPE.
- Initiate empiric antiviral treatment as soon as possible. Oral or enterically administered oseltamivir (twice daily for five days) is recommended regardless of the time since symptom onset. Do not delay treatment while awaiting laboratory results.
- Notify DC Health at doh.epi@dc.gov to arrange testing for the influenza A(H5N1) virus.

1. Collect respiratory specimens from the patient to test for influenza A(H5N1) virus. If the exposed person has conjunctivitis, with or without respiratory symptoms, both a conjunctival swab and a nasopharyngeal swab should be collected for testing.
2. Encourage patients to isolate at home away from their household members and not go to work or school until it is determined they do not have avian influenza A(H5N1) virus infection.

RECOMMENDATIONS FOR FARMERS, POULTRY WORKERS, BACKYARD BIRD FLOCK OWNERS, LIVESTOCK WORKERS, VETERINARIANS, AND ANIMAL HEALTH RESPONDERS

To reduce the risk of influenza A(H5) virus infection, poultry farmers and poultry workers, backyard bird flock owners, livestock farmers and workers, veterinarians and veterinary staff, and animal health responders in medium and high exposure settings should perform hand hygiene and use

personal protective equipment (PPE) including respirators, goggles, face shields, and outer garments (See Personal Protective Equipment for Avian Influenza A Viruses in the Workplace). People who are not wearing PPE in these settings should avoid direct or close physical contact with:

- Any animals that are or might be sick, including birds, dairy cows, cats, and other livestock, and their feces, urine, litter, or raw (unpasteurized) milk.
- Any animals that have died.
- Internal organs or udders from lactating dairy cows.
- Surfaces and water (e.g. ponds, waterers, buckets, pans, troughs) that might be contaminated with feces, urine, or waste milk from potentially infected animals.

Avian influenza causes severe disease and death in poultry. Symptoms in poultry include sudden death, low energy or appetite, nasal discharge, coughing, sneezing, reduced egg production or misshapen eggs, loss of coordination, and diarrhea. Backyard flock owners who suspect avian influenza should contact their veterinarian immediately for an evaluation. Veterinarians and animal owners should report suspected HPAI infection in animals to DC Health immediately by email at animal.info@dc.gov or by phone at 202-535-2323.

RECOMMENDATIONS FOR THE PUBLIC

The current public health risk of H5 avian influenza infection to the public is low. However, Washington, DC, residents should take precautions to prevent potential exposure. The public should:

- Avoid handling sick or dead animals or surfaces contaminated with the animal's feces, litter, raw milk, or other byproducts.
- Avoid consuming raw (unpasteurized) milk from infected dairy cows.
- Cook poultry, eggs, and beef to a safe internal temperature.

The discovery of three or more dead or sick birds in any given location should immediately be reported to DC Health by email at animal.info@dc.gov or by phone at 202-535-2323.

REPORTING REQUIREMENTS

Cases of novel influenza A virus infection must be reported immediately by telephone at (844) 493-2652 upon provisional diagnosis or the appearance of suspicious symptoms, and confirmed by submission of a case report form within 24 hours.

ADDITIONAL RESOURCES

- Highly Pathogenic Avian Influenza A(H5N1) Virus: Interim Recommendations for Prevention, Monitoring, and Public Health Investigations

- NIOSH Alert: Protecting Poultry Workers from Avian Influenza (Bird Flu)
- Reducing Exposure for Workers to Avian Influenza A Viruses
- Information for Workers Exposed to H5N1 Bird Flu
- Personal Protective Equipment for Avian Influenza A Viruses in the Workplace

REFERENCES

1. "Avian Influenza Type A." *Avian Influenza (Bird Flu)*, Centers for Disease Control and Prevention, 20 Dec. 2024, www.cdc.gov/bird-flu/about/avian-influenza-type-a.html.
2. "H5 Bird Flu: Current Situation." *Avian Influenza (Bird Flu)*, Centers for Disease Control and Prevention, 12 Dec. 2025, www.cdc.gov/bird-flu/situation-summary/index.html.
3. "Detections of Highly Pathogenic Avian Influenza in Wild Birds." *Animal and Plant Health Inspection Service*, U.S. Department of Agriculture, 16 Dec. 2025, www.aphis.usda.gov/livestock-poultry-disease/avian/avian-influenza/hpai-detections/wild-birds.
4. "About Bird Flu." *Avian Influenza (Bird Flu)*, Centers for Disease Control and Prevention, 30 Dec. 2024, www.cdc.gov/bird-flu/about/index.html.

Please contact the DC Health Division of Epidemiology-Disease Surveillance and Investigation at:
Phone: 844-493-2652 | Fax: (202) 442-8060 | Email: doh.epi@dc.gov