

Avian Influenza H5N1 – Risk Summary



SAFETY INFORMATION 007/26

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Content reviewed by:	Health Protection NSW; HCID Specialist Service; CEC IPAC
Distributed to:	Chief Executives; Directors of Clinical Governance; Director, Regulation and Compliance Unit.
KEY MESSAGE:	H5N1 avian influenza has been detected in a bird near Hawks Nest, NSW. Further infected birds may be identified. Human infection is rare and generally only occurs after close contact with infected birds or animals. The current risk for human avian influenza in Australia is very low, however this advice may change. Currently, winter respiratory viruses are more likely to be the cause of influenza-like illness presentation. Consider avian influenza in patients who have had contact with unwell birds or animals and compatible symptoms. Isolate the patient immediately and contact your local public health unit (PHU) on 1300 066 055 for guidance on testing. If further clinical advice is required, the Public Health Unit may refer clinicians to the High Consequence Infectious Disease (HCID) Specialist Service (1800 424 300). Implement required infection prevention and control measures early with contact and respiratory airborne precautions with negative pressure if possible. Some patients may experience mental distress associated with animal deaths, cultural, or socioeconomic impacts.
ACTION REQUIRED BY:	Clinicians
REQUIRED ACTION:	1. Distribute this Safety Information to all relevant clinicians and clinical departments to increase awareness of H5 avian influenza risk in NSW. 2. Ensure clinical staff have the skills and knowledge to implement clinical recommendations.
We recommend you also inform:	Directors, Managers and Staff of: Medical and Nursing/Midwifery services, Emergency Departments, Intensive Care Units, Units, Public Health Units, Respiratory, Infectious Disease/Infection Prevention and Control, Ophthalmology, and Mental Health. All other relevant staff, departments and committees
Website:	https://www.health.nsw.gov.au/sabs/Pages/default.aspx http://internal.health.nsw.gov.au/quality/sabs/index.html
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i SI: 007/26

Situation

H5N1 avian influenza has been reported in NSW for the first time in a bird near Hawks Nest on the mid-north coast (Hunter New England LHD). While risk of transmission from animals-to-humans is low, when it occurs avian influenza infection in humans is considered a high consequence infectious disease (HCID).

Note: This advice may change if the epidemiology or risk of avian influenza in Australia changes.

Background

- Avian influenza (bird flu) is caused by influenza A viruses. Some strains cause no or mild disease in birds while others can cause severe disease.
- The strain of avian influenza, H5N1 clade 2.3.4.4b has been spreading globally in wild birds, poultry and some mammals since 2021. It was detected for the first time on mainland Australia in June 2026 and has been detected in NSW for the first time on the mid-north coast.
- While other clades of H5N1 are associated with severe human illness and high case fatality rates, clade 2.3.4.4b appears to have a much lower case-fatality rate. This is based on very small human case numbers.
- Although the seasonal human influenza vaccine will not protect against H5N1 influenza, it reduces the risk of co-infection with seasonal influenza. Co-infection can lead to risk of viral reassortment, which may increase transmissibility to humans.

Assessment

- The risk to human health in NSW remains low.
- Avian influenza is not easily transmissible to people from birds. Sustained human-to-human transmission has not been reported.
- Patients with recent contact with unwell birds or animals (either overseas or in Australia) may be at higher risk of avian influenza.
- Patients presenting with influenza-like illness are more likely to have seasonal influenza than avian influenza, even if they have had contact with sick birds.
- Clinical symptoms include common influenza-like illness (such as fever, cough, coryza, myalgia etc). Conjunctivitis appears to be a particular feature of H5N1 clade 2.3.4.4b.
- Symptoms will usually appear between 1 and 10 days following exposure.

Current recommendations

Consider avian influenza in patients with:

- Influenza-like illness **AND** contact with unwell birds or animals in the 10 days before onset of symptoms.

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SI: 007/26

- Be aware birds and animals can be sick for many reasons and that H5 avian influenza animal-to-human transmission is rare.
- Avian influenza is notifiable on clinical suspicion. If you suspect avian influenza, **isolate the patient immediately** and **contact your local public health unit (PHU) on 1300 066 055**. If further clinical advice is required, the public health unit may refer clinicians to the HCID Specialist Service (1800 424 300).
- Known contacts of confirmed cases of animal avian influenza are assessed by the public health unit in accordance with the [NSW Avian Influenza Control Guidelines](#). These known contacts are instructed to contact the PHU for further guidance and testing if they become symptomatic.

Arrange testing

- Your local PHU will advise on testing and whether subtyping is indicated. Arrange specimen referral if advised.
- Standard influenza testing (respiratory PCR) can detect this strain of influenza A.

Implement infection prevention and control (IPC) on early suspicion

- Refer to the [HCID Infection Prevention and Control Principles Guideline](#).
- Isolate patients under standard plus transmission-based IPC measures (contact and respiratory airborne precautions) using negative pressure if available.
- Use the following Level 1 PPE (based on risk assessment)
 - fit checked/tested, fluid-resistant disposable P2/N95 respirator
 - long-sleeved fluid-resistant gown
 - eye protection such as goggles or a face shield
 - single pair of non-sterile gloves.
- Patient to wear surgical mask when not isolated and notify the local IPC lead for your facility.

Mental health and emotional wellbeing

- Spread of avian influenza might result in many wildlife deaths causing psychological distress.
- This may be a particular concern for First Nations communities as some cultural practices frequently involve interactions with wild birds and animals. These animals often hold deep cultural, spiritual and social significance, often serving as totems. Any loss or impacts on animals can cause significant psychosocial distress.
- Ensure patients who express distress are referred to appropriate mental health care and / or cultural, social and emotional wellbeing supports based on the acuity of their needs.

Further information

[NSW Health Avian Influenza Factsheet](#)