

February 3, 2025

Dear Colleagues,

On January 17, 2025, Oregon Health Authority (OHA) released a HAN titled, "Accelerated Subtyping of Influenza A in Hospitalized Patients" in response to a CDC HAN released on January 16, 2025.

**We have received a number of questions related to this HAN and would like to clarify that OHA's recommendations for influenza A surveillance for the 2024-25 season have not changed:**

- 1. Oregon Health Authority asks all Oregon hospital laboratories to submit all influenza A-positive specimens from all hospitalized patients for subtyping** to the Oregon State Public Health Laboratory (OSPHL) to bolster surveillance for seasonal and novel influenza, including highly pathogenic avian influenza A(H5N1) or 'bird flu.' **Specimens submitted for influenza surveillance will undergo additional characterization as Oregon State Public Health Laboratory (OSPHL) capacity allows.** Ideally, specimens should be submitted at least weekly for timely surveillance testing. Please review the [Guidance for Submitting Specimens for 2024-25 Influenza Surveillance](#) for additional specimen submission details.
- 2. Inpatient providers should consider retesting severely ill influenza-positive patients with a molecular assay to allow for subtyping** if their initial specimen (e.g., a rapid influenza test) was not subtyped.
- 3. Under Oregon Administrative Rule 333-018-0015, all laboratories in Oregon are required to report all influenza-positive specimens exhibiting atypical features (i.e., 'unsubtypeable' specimens) to OHA by phone immediately, day or night, at 971-673-1111.** Unsubtypeable specimens are influenza A-positive specimens which were tested with an assay designed to provide an influenza subtyping result but are negative for all subtyping targets. These specimens must be submitted to OSPHL, ideally within 24 hours.

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**In the absence of a known exposure to an animal or person infected with avian influenza, subtyping results are not necessary to inform infection prevention or clinical care.** Avian influenza remains rare in humans and patients hospitalized with influenza A should be assumed to have seasonal influenza. Patients hospitalized with confirmed avian influenza require additional infection prevention and control measures.

If you are submitting a specimen for urgent subtyping rather than for general surveillance because of an exposure to sick animals or animals known to be infected with avian influenza, please call the Oregon Health Authority (OHA) On-call Epidemiologist at 971-673-1111 for approval.

Thank you for your participation in influenza A surveillance! Please reach out with questions or concerns to Dr. Melissa Sutton, Medical Director for Respiratory Viral Pathogens at [Melissa.Sutton@oha.oregon.gov](mailto:Melissa.Sutton@oha.oregon.gov).