

# Follow-up report No.: 1

Report reference: , OIE Ref: 5916, Report Date: 16/08/2007, Country: Czech Republic

## Report Summary

|                               |   |                              |   |
|-------------------------------|---|------------------------------|---|
| Disease                       | Highly pathogenic avian influenza                       | Animal type                  | Terrestrial                               |
| Causal Agent                  | Highly pathogenic avian influenza virus                 | Serotype(s)                  | H5N1                                      |
| Clinical Signs                | No  | Reason                       | Reoccurrence of a listed disease          |
| Date of confirmation of Event | 28/06/2007  | Date of Start of Event       | 26/06/2007                                |
| Date of report                | 16/08/2007  | Diagnosis                    | Laboratory (basic), Laboratory (advanced) |
| Date of last occurrence       | 06/2006   | Number of reported outbreaks | Submitted= 1, Draft= 0                    |
| Name of Sender of the report  | Mr Josef Vitásek  | Address                      | Slezska 7, CZ-120 56 Praha 2 PRAGUE       |
| Position                      | Director of the Department of Animal Health and Welfare | Telephone                    | (420) 227 010 144                         |
| Fax                           | (420) 227 010 195                                       | Email                        | j.vitasek@svscr.cz                        |
| Entered by                    | Mrs Françoise Ricordel                                  |                              |   |

## Outbreak (other report - submitted)

| Province                   | District        | Sub-district  | Unit Type      | Location | Latitude  | Longitude   | Start      | End        |
|----------------------------|-----------------|---|----------------|----------|-----------|-------------|------------|------------|
| JIHOMORAVSKÝ               | Breclav         |   | Not applicable | Lednice  | 48,7843   | 16,8295     | 26/06/2007 | 29/07/2007 |
| Species                    | Measuring units | Susceptible   | Cases          | Deaths   | Destroyed | Slaughtered |            |            |
| Wild species               | Animals         | ...   | 1              | 1        | 0         | 0           |            |            |
| <b>Affected Population</b> |                 | a mute swan found dead on a pond; the carcass was sent to the National Reference Laboratory |                |          |           |             |            |            |

## Outbreak summary: Total outbreaks = 1 (Submitted)

| Species      | Susceptible | Cases | Deaths | Destroyed | Slaughtered |
|--------------|-------------|-------|--------|-----------|-------------|
| Wild species |             | 1     | 1      | 0         | 0           |

## Epidemiology

|                          |                     |                           |
|--------------------------|---------------------|---------------------------|
| Epidemiological comments | Source of Infection | • Unknown or inconclusive |
|--------------------------|---------------------|---------------------------|

## Control Measures

|                 |   |                        |                               |
|-----------------|---|------------------------|-------------------------------|
| Applied         | <ul style="list-style-type: none"> <li>• Screening</li> <li>• Control of wildlife reservoirs</li> <li>• Zoning</li> </ul> | To be applied          | • No Planned Control Measures |
|                 |   | Vaccination Prohibited | Yes                           |
| Animals treated | No  |                        |                               |

## Country / Zone

|                 |                       |
|-----------------|-----------------------|
| Country or zone | a zone or compartment |
|-----------------|-----------------------|

## Diagnostic test results

| Laboratory Type | Name of Laboratory | Species | Test Type | Date Results Provided | Result |
|-----------------|--------------------|---------|-----------|-----------------------|--------|
|-----------------|--------------------|---------|-----------|-----------------------|--------|

## Future Reporting

|   |   |
|---|---|
| What further reports will be submitted in relation to this event? | The event is resolved. No more reports will be submitted. |
|---|---|

## Outbreak map

