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**MEMORANDUM CIRCULAR**

No: 49  
Series of 2023

**SUBJECT : GUIDELINES ON TARGETED VACCINATION AS A COMPLEMENTARY TOOL FOR THE CONTROL OF AVIAN INFLUENZA**

**WHEREAS**, High Pathogenicity Avian Influenza (HPAI) is a highly contagious viral disease that can cause severe clinical signs and possible high mortality rates to both domestic and wild birds, and has been also recorded to affect humans. To date, HPAI has been detected in more than fifty (50) countries and territories in the world and has resulted in the death and mass slaughter of more than three hundred sixteen (316) million poultry worldwide;

**WHEREAS**, as of 31 July 2023 the provinces with confirmed cases of Avian Influenza and have not yet recovered their AI-free status are the provinces of Bulacan, Pampanga, Nueva Ecija, Tarlac, Laguna, Sultan Kudarat, Benguet, North Cotabato, Maguindanao, Isabela, Pangasinan, Kalinga, Aurora, Ilocos Norte, Cagayan, Quezon and Bataan;

**WHEREAS**, the first case of HPAI H5N1 in the province of Bulacan affecting a commercial duck farm was detected last January 2022 and has since been continuously affecting the Philippine poultry industry;

**WHEREAS**, reported cases of HPAI to date have affected avian species such as ducks, chickens (breeders, layers, broilers, gamefowls, free range and native), quails, pigeons, geese, pet birds and turkeys;

**WHEREAS**, the outbreak of HPAI in the country has been causing significant economic impact on the poultry industry due to high mortalities, large-scale culling of the infected birds as well as the impediment of local and international trade, and movement restrictions on poultry products and by-products. Such have caused disruptions in the supply chain that contributed to rising cost of poultry products and by-products;

**WHEREAS**, under Section 3 of Act 3639, the Bureau of Animal Industry shall promote the development of the livestock industry through the control and eradication of dangerous communicable diseases of domestic animals;

**WHEREAS**, in order to effectively control HPAI, a combination of proactive efforts must be continuously implemented such as a strong surveillance and monitoring program, active participative reporting of stakeholders in cases of suspected disease outbreaks, and adherence to strict biosecurity protocols. Vaccination is also a valuable complementary tool to control HPAI outbreaks through designing a strategic vaccination program using quality, effective and safe vaccines in accordance with the World Organisation for Animal Health (WOAH) Terrestrial Code;

**NOW THEREFORE, I, DOMINGO F. PANGANIBAN**, Senior Undersecretary of the Department of Agriculture, by the power vested upon me, do hereby issue the following guidelines on vaccination for the control of Avian Influenza:

## **SECTION I. GOAL OF THE PHILIPPINE HPAI VACCINATION CAMPAIGN**

The following are the goals of the vaccination campaign against HPAI in the Philippines:

- A. Complement the existing preventive and control measures of the Philippine government with the goal of reducing the risk of further spread of the virus from affected areas and consequently its eventual eradication;
- B. Pre-empt any potential outbreaks in highly vulnerable areas that may result to significant economic losses;
- C. Preserve the country's gene pool and consequently the ability to restart production in cases of severe HPAI outbreak.
- D. Reduce the risk of human exposure to AI viruses with zoonotic potential and the consequent human cases;

## **SECTION II. DEFINITION OF TERMS**

**Animal Disease Diagnosis and Reference Laboratory (ADDRL)** – formerly the Philippine Animal Health Center (PAHC), a section under the Veterinary Laboratory Division (VLD) of the Bureau of Animal Industry (BAI) that provides various laboratory services

**Animal Health and Welfare Division (AHWD)** – a division of the BAI that develops and implements surveillance systems for the early detection and warning of local and foreign animal diseases. It is composed of four sections: Animal and Disease Control Section, Veterinary Epidemiology Section, Animal Facilities Regulation Section, and the Animal Information and Advocacy Services Section

**Animal Feeds Veterinary Drugs and Biologics Division (AFVDBCD)** – a division of the BAI that is responsible for the regulation and control of the manufacture, importation, exportation, advertising, distribution and sale of livestock, poultry, aquaculture and special feeds, feed ingredients and additives as mandated in the Republic Act 1556 also known as Livestock and Poultry Feeds Act of 1956

**Autogenous vaccine** – any immunological veterinary medicinal products manufactured for the purpose of producing active immunity from pathogenic organisms obtained from an animal or animals from the same herd that have been inactivated and used for the treatment of this animal or of animals from this herd

**Avian Influenza (also known as Bird Flu)** – an infection of any domestic and wild avian species caused by any influenza A virus

**Avian Influenza Protection Program (AIPP)** – this refers to the manual of procedures outlining the government protocols to be undertaken in the prevention of entry of HPAI in the country as well as protocols to be undertaken in case of an outbreak

**Avian Influenza Type A Virus** – belongs to the Orthomyxoviridae family under Genus Influenza

**Biosecurity** – refers to a systematic series of procedures/protocols aimed at preventing entry and spread of a disease-causing agent within a defined area

**Broiler** – poultry raised for meat purposes only

**Bureau of Animal Industry (BAI)** – is an attached agency of the Department of Agriculture. It promotes the development of the livestock industry and investigates the causes of dangerous communicable diseases from animals so their spread could be prevented.

**Clade** – a group of organisms that have evolved from a common ancestor

**Commercial Poultry Farm** – refers to any poultry farm which satisfies the following conditions as defined by the Philippine Statistics Authority Board Resolution No. 04 series of 2022 “Approving And Adopting The Revision In The Classification Of Livestock And Poultry Farms From Backyard And Commercial To Smallhold, Semi-Commercial And Commercial Farms, And The Definitions By Animal Type”

Broiler: raising 10 001 heads and above

Colored chicken/Free-range/Improved: 5 001 heads and above

Layer/Duck: 5 001 heads and above

Quail: 10 001 heads and above

**Compartment** – means an animal subpopulation contained in one or more establishments, separated from other susceptible populations by a common biosecurity management system, and with a specific animal health status with respect to one or more infections or infestations for which the necessary surveillance, biosecurity and control measures have been applied for the purposes of international trade or disease prevention and control in a country or zone (WOAH)

**Day-Old Chick (DOC)** – a bird aged not more than 72 hours after hatching

**Data Dashboard** – contains the data on HPAI cases that is updated by the BAI regularly

**Duck** – general term for waterfowl belonging to the family Anatidae of either sex

**Efficacy** – refers to the specific ability of the biological product to produce the result for which it is offered when used under the conditions recommended by the manufacturer (WOAH, 2023)

**Epidemiological Unit** – a group of animals with a defined epidemiological relationship that share approximately the same likelihood of exposure to a pathogenic agent. This could be sharing a common environment (e.g. animals in a pen), or common management practices. However, an epidemiological unit may also refer to groups such as animals belonging to residents of a community, or animals sharing a communal animal handling facility. The epidemiological relationship may differ from disease to disease, or even strain to strain of the pathogenic agent (WOAH, 2019).

**Epidemiological risk assessment** – refers to the process of predicting the likelihood that a problem will occur by evaluating the potential for adverse effects from exposures, identifying or Setting as a safe guideline for each route of exposure, identifying exposure points and estimate exposure levels, and predicting the adverse outcome from exposure to the chemical, pathogen, or physical condition (CDC, 2019)

**Heterologous vaccine** – refers to vaccines that protects against pathogenic antigens that cross-react with antibodies induced by antigens in the vaccine

**Homologous vaccine** – refers to vaccines composed of suspension of microorganisms of one type that have been killed or modified so as to be safe, given to promote the production of specific antibodies

**Gamefowl** – domesticated chicken, regardless of breed, age and sex, raised solely for game or recreation purposes

**Inactivated vaccine (also known as Killed Vaccine)** – refers to a vaccine that contains inactivated but previously virulent microorganisms that have been destroyed with chemicals, heat, or radiation. It may contain: 1) Cultures of microorganisms that have been inactivated by chemical or physical means; 2) Inactivated toxins; or 3) Subunits (antigenic parts of microorganisms) that have been extracted from cultures or that have been produced through rDNA procedures (WOAH, 2022)

**Infected Premises** – any site with avian population in which reportable Avian Influenza (AI) is confirmed to exist

**Layer** – a female chicken, regardless of age, raised mainly for table egg production

**Local Government Unit (LGU)** – are political units composed of provinces, cities, municipalities and barangays. They have long been existing with their own legislative bodies which are endowed with specific powers as defined in the Revised Administrative Code and individual local government unit (LGU) charters.

**Multi-avian farm** – refers to a facility or farm raising more than one avian type

**Native Chicken** – refers to chicken found in one geographical location that developed a set of unique physical characteristics, behavior, product attributes, adapted to the local environment

**Non-poultry** – refers to any species of birds that does not fall under the definition of poultry such as birds that are kept in captivity for any reason other than those reasons referred to in the poultry definition, including those that are kept for shows, races, exhibitions, competitions or for breeding or selling these categories of birds as well as pet birds, are not considered to be poultry (WOAH, 2019).

Moreover, non-poultry, as per WOA 2022, are birds that are kept in a single household, the products of which are used within the same household exclusively, provided that they have no direct or indirect contact with poultry or poultry facilities.

**Outbreak** – refers to the occurrence of cases of disease in excess of what would normally be expected in a defined community, geographical area or season (WHO)

**Poultry** – refers to all domesticated birds, including backyard poultry, used for the production of meat or eggs for consumption, for the production of other commercial products, for restocking supplies of game, or for breeding these categories of birds, as well as gamefowl used for any purpose (WOAH, 2019)

**Poultry by-products** – include used litter, offal, feathers, culls, hatchery by-products and manure

**Poultry products** – include meat, eggs (table, embryonated, and hatching eggs), and day-old-chicks

**Recombinant Vaccine** – is a type of vaccine produced by recombinant DNA technology which enables the combination of DNA from two or more sources by insertion of a segment of the respective viral gene into the gene of a yeast cell or virus

**Regional Animal Disease Diagnostic Laboratory (RADDL)** – laboratories that are under the regional field offices of the Department of Agriculture

**Prophylactic** – a medicine or a course of action that is intended to prevent disease

**Safety** – refers to the freedom from properties causing undue local or systemic reactions when used as recommended or suggested by the manufacturer and without known hazard to in-contact animals, humans and the environment (WOAH, 2023)

**Sector** – refers to the classification of farming system based on the level of biosecurity, as defined by the FAO:

**Sector 1:** Industrial integrated system with high level biosecurity and birds/products marketed commercially (e.g. farms that are part of an integrated broiler production enterprise with clearly defined and implemented standard operating procedures for biosecurity);

**Sector 2:** Commercial/semi-commercial poultry production system with moderate to high biosecurity and birds/products usually marketed commercially (e.g. farms with birds kept indoors continuously; strictly preventing contact with other poultry or wildlife);

**Sector 3:** Commercial/semi-commercial poultry production system with low to minimal biosecurity and birds/products entering live bird markets (e.g. a caged layer farm with birds in open sheds; a farm with poultry spending time outside the shed; a farm producing chickens and waterfowl);

**Sector 4:** Village or backyard/smallhold production system with minimal biosecurity and birds/products consumed locally.

**Semi-commercial Poultry Farm** – refers to any poultry farm which satisfies the following conditions as defined by the Philippine Statistics Authority Board Resolution No. 04 series of 2022:

- Broiler: raising 501 to 10 000 heads
- Colored chicken/Free-range/Improved: 251 to 5 000 heads
- Layer/Duck: 251 to 5 000 heads
- Quail: 2 501 to 10 000 heads

**Smallhold Poultry Farm** – previously known as backyard farm; refers to any poultry farm which satisfies the following conditions as defined by the Philippine Statistics Authority Board Resolution No. 04 series of 2022:

- Broiler: raising 500 heads and below
- Colored chicken/Free-range/Improved: 250 heads and below
- Layer/Duck: 250 heads and below
- Quail: 2500 heads and below

**Standing Candidate Population** – refers to the initially identified existing population for vaccination

**Surveillance** – the systematic ongoing collection, collation, and analysis of information related to animal health and the timely dissemination of information so that action can be taken

**Viral shedding** – refers to the release of a virus in the environment following successful replication of the virus in the host cell

**Virus transmission** – refers to the process of virus spread between hosts either horizontally or vertically

**Wild birds** – refer to wild forms and varieties of avian species, in all developmental stages, such as local and migratory birds; this will also include those which are being bred or propagated in captivity

**Vaccination**- refers to the administration of a vaccine, in accordance with the manufacturer's instructions and the WOAHP Terrestrial Manual, when relevant, with the intention of inducing immunity in an animal or group of animals against one or more pathogenic agents (WOAHP, 2022)

**Vaccine**- refers to all products designed to stimulate active immunisation of animals against disease, without regard to the type of microorganism or microbial component or toxin from which they may be derived or that they contain (WOAHP, 2022)

**Vaccination Zone** – for this document, vaccination zone refers to the identified area where vaccination is to be deployed

**Vectored vaccine** – refers to vaccine that uses a nonpathogenic virus to insert pathogen genes in the body to produce specific antigens, such as surface proteins, to stimulate an immune response

**Veterinary Client Patient Relationship (VCPR)** - is a written agreement between the client and veterinarian wherein the following conditions have been met:

- a. The veterinarian has assumed the responsibility for making clinical judgments regarding the health of animal(s) and the need for medical treatment, and the client has agreed to follow the veterinarian's instructions;
- b. The veterinarian has sufficient knowledge of the animal(s) to initiate at least a general or preliminary diagnosis of the medical condition of the animal(s). This means that the veterinarian has recently seen and is personally acquainted with the keeping and care of the animal(s) by virtue of examination of the animal(s) or by medically appropriate and timely visits to the premises where the animal(s) are kept;
- c. Veterinary Drug Order is a written instruction (prescription) to pharmacist or of veterinary drug establishment to fill a veterinary prescription of large quantities a specific veterinary drug and product provided that there is an accompanying VCPR letter from the prescribing veterinarian. VCPR is required when prescribing for ten (10) or more animal units.

**World Organisation for Animal Health (WOAH)** - founded as Office International des Epizooties (OIE), is an intergovernmental organisation working across borders to improve the health of animals

### **SECTION III. IDENTIFICATION OF HIGH PRIORITY AREAS FOR VACCINATION**

Controlled elimination of infected poultry in combination with vaccination may be implemented in the Philippines through a combination of the following strategies:

#### **A. PROTECTIVE EMERGENCY VACCINATION**

1. The areas to be prioritized for Protective Emergency Vaccination are those with detection of HPAI of significant number of cases based on the official and most recent Avian Influenza Data Dashboard of the Bureau of Animal Industry;
2. The cities/municipalities with continuing detection of HPAI, even on an intermittent or nonsequential frequency shall be prioritized for vaccination;
3. Standing candidate population and planned additional candidate population in the next 3 months shall be vaccinated; and
4. Protective Emergency vaccination may be implemented through the following:
  - 4.1. **RING VACCINATION** is the administration of vaccines of all susceptible poultry in a prescribed area around an outbreak to bring the outbreak under control as quickly as possible.

Ring vaccination is the recommended approach in newly infected areas and regions where HPAI infection has not yet spread widely.

Vaccination shall commence in the poultry population within a 1km radius of an officially confirmed poultry holding facility. The involved radius can be expanded should serological / virological evidence indicate presence of HPAI outside 1 km radius. (Reactive Ring Vaccination – prioritizing farms closest to the infected premises)

- 4.2. **TARGETED VACCINATION** is the administration of vaccines to defined categories of birds, sectors or compartments that are highly vulnerable to massive outbreak, which will be identified by:
- a. epidemiological risk assessment;
  - b. biosecurity levels of the target species, sector or compartments;
  - c. the economic value of the target species, sector or compartments;
  - d. the extent of infection in the target species, sector or compartments.

**B. PREVENTIVE (PROPHYLACTIC) VACCINATION:**

1. This strategy will be applied when there is evidence that a region/province/city/municipality or compartment face significant risk of HPAI outbreak;
2. Provinces that were identified as AI High Risk Areas as listed in Annex 6b of the 2020 Avian Influenza Protection Program – Manual of Procedures (AIPP MOP) are candidates for Preventive (Prophylactic) vaccination;
3. Areas with high density of domestic poultry without confirmed cases of HPAI but with high risk of infection because of its epidemiological link to areas with ongoing HPAI infection are candidates for Preventive (Prophylactic) Vaccination; and
4. Preventive (Prophylactic) Vaccination will also be performed in areas without confirmed cases of HPAI but once infected will result in food insufficiency and supply chain problems (i.e. areas with high concentration of Grandparent, Parent Stock, Breeder and Layer Flocks);

Prophylactic vaccination will be carried out as long as the risk of infection exists subject to the conditions and limitations of the Exit Strategy.

Annex A provides the vaccination strategy of provinces. The strategy that will be implemented for each province may change upon periodic evaluation of their AI status.



## SECTION IV. FARM QUALIFICATIONS

### A. General Protocol for Protective Emergency Vaccination

1. All poultry holding premises in the identified Vaccination Zone (Targeted Vaccination) or kilometer radius (Ring Vaccination) shall be listed with the details of standing population, poultry type/s and ages.
2. The poultry company (representative/legal representative or owner), through its authorized veterinarian/ LGU veterinarian, must formally request for authorization for Protective Emergency vaccination against HPAI, through a letter addressed to the BAI Director.
3. The detailed list of poultry holding premises shall be consolidated by the LGU veterinarian for accounting of the number of doses of vaccines to be prepared.
4. The following shall signify in written application their concurrence to participate in the vaccination through:
  - 4.1 Corporation: Authorized Representative and Veterinarian;
  - 4.2 Commercial Farm: Owner and Veterinarian; and
  - 4.3 Smallhold: Owner and LGU Veterinarian/Private Veterinarian.

Annexed to the letter are the required details as stated above (standing population, poultry type/s and ages).

5. The application must include the geo-referenced (GPS coordinates) location of the poultry farm/s, copy of PRC license of the LGU veterinarian/Authorized Veterinarian, and Veterinary Client-Patient Relationship (VCPR) (refer to Annex B) for authorized veterinarian.
6. It shall be the legal responsibility and non-transferrable obligation of the LGU veterinarian/authorized veterinarian to:
  - 6.1 Fill out the HPAI Vaccination Certificate Form (refer to Annex C) and submit it electronically in PDF format to DA BAI. The original certificate must be kept by the company or owner for technical audits.
  - 6.2 The Vaccination Certificate should include the following minimum information:
    - 6.2.1 Name and Type of Vaccine;
    - 6.2.2 Lot Number;
    - 6.2.3 Date of Administration;
    - 6.2.4 Site of Administration; and
    - 6.2.5 Doses Administered.

6.3 It will be the responsibility of the LGU veterinarian/ Authorized Veterinarian to submit 30 serum samples from an equal number of animals before vaccination and post-vaccination according to the vaccine manufacturer's recommendation to BAI for vaccine efficacy monitoring. Booster shots will be required whenever the antibody titer of vaccinated birds in the same batch fails in routine surveillance.

6.4 Random sampling of oropharyngeal and cloacal swabs from vaccinated birds will be conducted by the LGU veterinarian/ Authorized Veterinarian according to regular HPAI surveillance protocol as stated in the AIPP MOP.

6.5 Any movement of vaccinated flocks should be checked for freedom from infection following WOH protocols before the birds are transported.

7. Category of facilities to be vaccinated:

7.1 Commercial and Semi-commercial Poultry Farms;

7.2 Smallholder Poultry Farms; and

7.3 Multi-avian species Farms.

**B. General Protocol for Preventive/Prophylactic Vaccination**

1. The poultry company (representative/legal representative or owner), through its authorized veterinarian/ LGU veterinarian, must formally request for authorization for Preventive/Prophylactic vaccination against HPAI, through a letter addressed to the BAI Director.

2. Poultry companies or owners with a request to vaccinate their flocks, must meet and provide the following requirements:

2.1 Registered Farms/Facilities:

2.1.1 Animal Facility Registration (License to Operate as Animal Facility/ AWA Certificate);

2.1.2 Valid Animal Disease Monitoring Compliance Certificate (ADMCC);

2.1.3 Veterinary Health Certificate (VHC); and

2.1.4 Certificate of Free Status on Avian Influenza (CFS-AI).

2.2 Non-Registered Farms/Facilities:

2.2.1 Veterinary Health Certificate (VHC) issued by private veterinarian or LGU veterinarian;

2.2.2 Certificate of Free Status on Avian Influenza (CFS-AI) from DA RFO/BAI;

2.2.3 Newcastle Disease Vaccination Certificate; and

2.2.4 Registry System for the Basic Sectors in Agriculture (RSBSA) Enrollment.

3. The application must include the geo-referenced (GPS coordinates) location of the poultry farm/s, copy of PRC license of the LGU veterinarian/Authorized veterinarian, Veterinary Client-Patient Relationship (VCPR) for authorized veterinarian, number of birds and age, as well as a justification for the preventive/prophylactic HPAI vaccination.
4. Authorization for Preventive/Prophylactic Vaccination will be subject to the availability of HPAI vaccines in the market and vaccination coverage from priority high risk areas to non-priority lower risk areas.
5. It shall be the legal responsibility and non-transferrable obligation of the LGU veterinarian/authorized veterinarian to:
  - 5.1 Fill out the HPAI Vaccination Certificate Form and submit it electronically in PDF format to DA BAI. The original certificate must be kept by the company or owner for technical audits.
  - 5.2 The HPAI Vaccination Certificate should include the following minimum information:
    - 5.2.1 Name and Type of Vaccine;
    - 5.2.2 Lot Number;
    - 5.2.3 Date of Administration;
    - 5.2.4 Site of Administration; and
    - 5.2.5 Doses Administered.
  - 5.3 It will be the responsibility of the LGU veterinarian/ Authorized Veterinarian to submit 30 serum samples from an equal number of animals before vaccination and post-vaccination according to the vaccine manufacturer's recommendation to BAI for vaccine efficacy monitoring. Booster shots will be required whenever the antibody titer of vaccinated birds in the same batch failed in routine surveillance.
  - 5.4 Random sampling of oropharyngeal and cloacal swabs from vaccinated birds will be conducted by the LGU veterinarian/ Authorized Veterinarian according to regular HPAI surveillance protocol as stated in the AIPP MOP.
  - 5.5 Any movement of vaccinated flocks should be checked for freedom from infection following WOH protocols before the birds are transported.
6. Category of facilities to be vaccinated:
  - 6.1.1 Commercial and Semi-commercial poultry facilities in Major Economic Poultry Centers;
  - 6.1.2 Areas with high concentration of Parent Stock and Grandparent Stock;
  - 6.1.3 Commercial poultry facilities around migratory hotspots.

## SECTION V. VACCINATION PROGRAM

### A. Vaccination Program for Protective Emergency Vaccination

1. Vaccination shall not be mandatory.
2. Facilities with comprehensive biosecurity protocols located in the Vaccination Zone has the option not to pursue vaccination of their stocks. These poultry holding premises, when with serological and/or virological indications of presence of HPAI shall be completely stamped out.
3. Prescribed vaccine to be used in different species:

*Table 1. Prescribed Vaccine Platform According to Avian Type.*

Avian Type	Eligibility for vaccination	Inactivated Vaccine	Vectored Vaccine /Recombinant Vaccine
Commercial Layer Chicken	Yes	Yes	Yes
Commercial Layer Breeder	Yes	Yes	Yes
Commercial Broiler Breeder	Yes	Yes	Yes
Commercial Colored/Free-range Breeder	Yes	Yes	Yes
Commercial Grandparent Broiler Breeder	Yes	Yes	Yes
Commercial Broiler Chicken	No		
Smallhold Layer/Native Chicken	Yes	Yes	Yes
Smallhold Broiler	No		
Duck	Yes	Yes	Yes/No*
Quail	No		
Gamefowl	Yes	Yes	Yes
Pigeon	No		
Turkey	Yes	Yes	Yes
Goose	Yes	Yes	Yes/No*
Exotic Birds	No		

\*Efficacy claims for vectored vaccine in ducks and goose must be published in a peer-reviewed scientific journal.

4. All standing candidate population in the identified Vaccination Zone shall be administered with an inactivated vaccine.
5. In any succeeding placement of candidate poultry population, the type of vaccine shall follow the guideline as listed in Table 2 and Table 3.

Table 2. Prescribed Vaccination Program\* for Protective Emergency Vaccination.

Avian Type	Initial Vaccination	Booster Vaccination	Succeeding Placements
Commercial Layer Chicken	Inactivated Vaccine**	Inactivated Vaccine	Inactivated Vaccine, Vectored or Combination
Commercial Layer Breeder	Inactivated Vaccine	Inactivated Vaccine	Inactivated Vaccine, Vectored or Combination
Commercial Broiler Breeder	Inactivated Vaccine	Inactivated Vaccine	Inactivated Vaccine, Vectored or Combination
Commercial Colored/Free-range Breeder	Inactivated Vaccine	Inactivated Vaccine	Inactivated Vaccine, Vectored or Combination
Commercial Grandparent Broiler	Inactivated Vaccine	Inactivated Vaccine	Inactivated Vaccine, Vectored or Combination
Smallhold Layer/Native Chicken	Inactivated Vaccine	Inactivated Vaccine	Inactivated Vaccine, Vectored or Combination
Duck	Inactivated Vaccine	Inactivated Vaccine	Inactivated Vaccine, Vectored*** or Combination
Gamefowl	Inactivated Vaccine	Inactivated Vaccine	Inactivated Vaccine, Vectored or Combination

\*Vaccines to be used should have documented proof of cross clade protection against circulating strains of HPAIV in the Philippines. Schedule of vaccination should follow recommendation of the vaccine manufacturer.

\*\*Inactivated Vaccine – Clade-specific Autogenous/ Genetically-matched homologous inactivated vaccine

\*\*\*Efficacy claims for vectored vaccine in ducks and goose must be published in a peer-reviewed scientific journal.

#### B. Vaccination Program for Preventive/Prophylactic Vaccination

1. Vaccination shall not be mandatory.
2. Farms authorized for Preventive/Prophylactic HPAI vaccine may be given an inactivated vaccine (according to level of priority), vectored vaccine or combinations.

Table 3. Prescribed Vaccination Program\* for Preventive (Prophylactic) Vaccination.

Avian Type	Initial Vaccination		Booster Vaccination	Succeeding Placements
	Inactivated Vaccine**	Vector Vaccine		
Commercial Layer Chicken	Yes	Yes	Inactivated Vaccine	Inactivated Vaccine, Vectored or Combination
Commercial Layer Breeder	Yes	Yes	Inactivated Vaccine	Inactivated Vaccine, Vectored or Combination
Commercial Broiler Breeder	Yes	Yes	Inactivated Vaccine	Inactivated Vaccine, Vectored or Combination
Commercial Colored/Free-range Chicken Breeder	Yes	Yes	Inactivated Vaccine	Inactivated Vaccine, Vectored or Combination
Commercial Grandparent Broiler	Yes	Yes	Inactivated Vaccine	Inactivated Vaccine, Vectored or Combination
Duck	Yes	Yes/No***	Inactivated Vaccine	Inactivated Vaccine, Vectored*** or Combination
Gamefowl	Yes	Yes	Inactivated Vaccine	Inactivated Vaccine, Vectored or Combination

\*Vaccines to be used should have documented proof of cross clade protection against circulating strains of HPAIV in the Philippines. Schedule of vaccination should follow recommendation of the vaccine manufacturer.

\*\*Inactivated Vaccine – Clade-specific Autogenous/Genetically-matched Homologous inactivated vaccine

\*\*\* Efficacy claims for vectored vaccine in ducks and goose must be published in a peer-reviewed scientific journal.

#### C. Vaccination of other animal population

It is highly recommended that swine and equine population within the area of the vaccinated avian type be administered their respective influenza vaccine strains.

#### D. Human Vaccination

As per the AIPP, human flu vaccine should be given to high risk population.

### SECTION VI. VACCINE DISTRIBUTION AND DEPLOYMENT

When vaccine supplies are limited, priority of vaccination will depend on the following, to wit: (a) epidemiological risk assessment; (b) vaccination strategy to be employed; (c) demonstrated vaccine efficacy in the target avian species; (d) economic impact; (e) biosecurity level of the identified premises.

## **SECTION VII. VACCINE UTILIZATION AND MONITORING**

### **A. Importation**

The vaccines to be imported should be strictly limited to the specifications indicated under Section V of this circular.

### **B. Distribution and Monitoring**

1. The vaccine company shall provide an inventory of all vaccines that they shall import to the BAI. The inventory must include at least the following information:
  - 1.1 Brand name and manufacturer, country of origin;
  - 1.2 Batch number and/or Lot number;
  - 1.3 Manufacturing date; and
  - 1.4 Expiration date.
2. The vaccine company shall also provide to the BAI a directory of all the stakeholders that received their product using a standard form issued by BAI. The directory must include at least the following information:
  - 1.1 Name of Farm/Owner;
  - 1.2 Type of farm operation;
  - 1.3 Complete address with GPS coordinates of the Farm;
  - 1.4 Contact details of the farm/owner;
  - 1.5 Current farm population;
  - 1.6 Number of bottles and doses for each farm, and their respective batch/lot number and expiration date; and
  - 1.7 Date of receipt of the intended farm.
3. The vaccine company shall record all withdrawals from their cold storage facility (Template Withdrawal Form, see Annex D).
4. The BAI shall be allowed by the vaccine company and/or authorized distributor to randomly inspect the cold storage facility for proper monitoring.
5. The vaccine company shall collect and collate all HPAI Vaccination Certificates under their accountability.
6. The vaccine company shall maintain a database of these HPAI Vaccination Certificates, and shall furnish a copy to the AFVDBCD in coordination with AHWD every second Wednesday of every month. A copy will be furnished to the AHWD.

## **SECTION VIII. DISPOSAL**

Used vaccine vials and syringes shall be treated as medical waste and shall be disposed according to manufacturer's recommendations and existing guidelines on medical wastes disposal.

## SECTION IX. SURVEILLANCE IN VACCINATED FLOCKS

### A. Protective Emergency Vaccination

1. Sample population and frequency of sampling:
  - 1.1 All farms within the 1KM zone from the HPAI index case will be tested.
  - 1.2 A minimum of 30 oropharyngeal and cloacal swab samples from an equal number of animals randomly selected per farm (commercial/semi-commercial) or per barangay (smallhold) shall be submitted by the farm to the ADDRL/RADDL or BAI-recognized diagnostic laboratory for testing before vaccination.
  - 1.3 Farms that test positive for H5 and/or H7 will be culled.
  - 1.4 Farms that test negative will be considered for emergency vaccination with HPAI vaccine.
2. After vaccination, farms with unusually high mortalities in the flock with clinical signs and/or symptoms indicative of HPAI, swab samples from these animals shall be collected and submitted for PCR testing. Farms that test positive for H5 and/or H7 will be culled.
3. Vaccine suppliers shall select three (3) farms in a high priority area that are using their vaccine and submit serum samples for testing for serological profiling. The minimum number of 30 samples per farm shall apply.
4. Serum sampling shall be conducted four (4) weeks after initial vaccination and every 8 weeks thereafter until end of cycle.

### B. Preventive (Prophylactic) Vaccination

1. Sample population and frequency of sampling:

For farms in areas where preventive prophylactic HPAI vaccination is to be implemented:

- 1.1 A minimum of 30 serum, oropharyngeal and cloacal swab samples from an equal number of animals randomly selected per farm (commercial/semi-commercial) shall be submitted by the farm to the ADDRL/RADDL or BAI-recognized diagnostic laboratory for testing before vaccination.
  - 1.2 Farms that test positive for H5 and/or H7 will be culled.
  - 1.3 Farms that test negative will be considered for preventive vaccination with HPAI vaccine.
2. After vaccination, farms with unusually high mortalities in the flock with clinical signs and/or symptoms indicative of HPAI, swab samples from these animals shall be collected and submitted for PCR testing. Farms that test positive for H5 and/or H7 will be culled.





3. Vaccine suppliers shall select minimum three (3) farms in the identified priority area that are using their vaccine and submit serum samples for testing for serological profiling for vaccine antibody response. The minimum sampling of 30 birds per farm shall apply.
4. Serum sampling in commercial/semi-commercial farms shall be conducted four (4) weeks after initial vaccination and every 8 weeks thereafter until end of cycle.

## **SECTION X. SURVEILLANCE IN WILD BIRDS**

Surveillance of avian influenza in wild birds (in situ and captive wild bird facilities) shall be supervised by the Department of Environment and Natural Resources (DENR) through the Biodiversity Management Bureau (BMB) and conducted in coordination with the Bureau of Animal Industry. The surveillance activities shall follow the BMB *Technical Bulletin* on Guidelines in the Conduct of Wildlife Disease Surveillance (Non-Lethal Collection of Samples for Laboratory Examination). For the detailed guidelines for surveillance in wildlife, refer to the AIPP MOP.

## **SECTION XI. LABORATORY TESTING FOR MONITORING OF VACCINATED FLOCKS**

### **A. Testing for post vaccination antibody titer monitoring**

1. Serum samples from vaccinated flocks will be tested for antibodies to AI Virus Type A using nucleoprotein enzyme linked immunosorbent assay (ELISA) in the RADDL/ADDRL or BAI-recognized private diagnostic laboratory.
2. Flocks with unusually high titer levels relative to the standard provided by the test kit manufacturer will be subject to further evaluation. Oropharyngeal and cloacal swabs from the identified flock/s will be collected and tested with Quantitative Reverse Transcription Polymerase Chain Reaction (qRT-PCR) for further confirmatory testing.
3. Samples that tested positive using qRT-PCR shall be stored and kept by the ADDRL for submission to the AI Reference Laboratory for further characterization.

### **B. Testing of clinical cases from vaccinated flock**

1. Serum, oropharyngeal and cloacal swabs shall be collected from flock with unusually high mortalities with clinical signs and/or symptoms indicative of HPAI will be tested using qRT-PCR.
2. Samples that tested positive using qRT-PCR shall be stored and kept by the ADDRL for submission to the AI Reference Laboratory for further characterization.

### **C. Genetic Sequencing of HPAIVs as part of monitoring**

1. H5 or H7 RT-PCR positive samples will be submitted for genetic sequencing bi-annually to determine/monitor circulating field viruses.

2. Samples will be submitted to a third party veterinary diagnostic laboratory.

D. Current vaccine strain being used shall be evaluated against emerging strain.

## **SECTION XII. BIOSECURITY**

Vaccination does NOT guarantee absolute protection thus all facilities are strongly encouraged to practice biosecurity measures to highest level possible.

## **SECTION XIII. MOVEMENT OF VACCINATED FLOCKS**

Live birds, products and by-products from vaccinated flocks that fully complied with all the requirements for monitoring and demonstrated absence of infection with Avian Influenza shall be cleared by the BAI for local movement in accordance and consistent with the existing DA-BAI national guidelines and international standards.

## **SECTION XIV. MANAGEMENT OF AFFECTED VACCINATED FLOCKS**

Vaccinated flocks that tested positive for Avian Influenza using Real time PCR will be depopulated and shall follow the protocol set in the AIPP for affected flocks.

## **SECTION XV. INFORMATION, EDUCATION AND COMMUNICATION**

The BAI in coordination with DA RFO and LGU and in partnership with private poultry stakeholders shall conduct awareness campaign that will focus on knowledge dissemination, addressing vaccine information and misinformation, ensuring success of vaccination efforts, among others.

## **SECTION XVI. EXIT STRATEGY**

A clear exit strategy should be instituted before conducting any vaccination campaigns. Prolonged vaccination programs are not sustainable, and an exit strategy should be planned so that the Philippines can regain its HPAI-free without vaccination status.

Exit from the HPAI vaccination campaign is recommended to be performed gradually through a Progressive Island Group Exit Strategy. The island group shall be Mainland Luzon, MIMAROPA, Visayas and Mindanao.

### **1. Protective Emergency Vaccination**

No new vaccination will be given more than 63 days (3 times the 21-day WOAHI-incubation period for Avian Influenza) after all Avian Influenza-affected provinces in a major affected island (i.e. Mindanao) have recovered their Avian Influenza-free status, even if HPAI cases are being detected in other major islands (i.e. Luzon) in the Philippines.

## 2. Preventive/Prophylactic Vaccination

Preventive/Prophylactic vaccination will cease once the risk of infection of a particular province has been evaluated to be reduced based on epidemiological risk assessment.

All vaccination should stop after all outbreaks have been contained and HPAI is eliminated.

The Director of BAI as the Chief Veterinary Officer (CVO) shall declare Philippines HPAI-free without vaccination status once all vaccinated birds have been removed from the Philippine poultry population.

### **SECTION XVII. REPEALING CLAUSE**

All existing orders, circulars, rules and regulations or parts thereof that are inconsistent with the administrative order's provisions are hereby repealed or modified accordingly.

### **SECTION XVIII. EFFECTIVITY**

This Memorandum Circular shall take effect immediately following the completion of its publication in the Official gazette and/or in a newspaper of general circulation.

### **SECTION XIX. ACKNOWLEDGEMENT**

Warmest recognition is extended to the Avian Influenza Technical Working Group (TWG) of the Philippine College of Poultry Practitioners (PCPP) who labored in the formulation of this MC through numerous small-group meetings and consultations, where salient inputs and contribution were consolidated and developed.

Done this 3rd of November 2023, in Quezon City, Philippines.

**DOMINGO F. PANGANIBAN**  
Senior Undersecretary



DA-CO-USECL-MC20230928-00003

## ANNEX A. HPAI VACCINATION PRIORITY GROUPS

Priority Group	Priority Areas	Eligible Areas		Vaccination Strategy
		Region	Province	
A	Areas with extensive HPAI Cases	Region III	Whole of Region 3	Protective Emergency Vaccination (Targeted Vaccination)
		Region XII	Sultan Kudarat	Protective Emergency Vaccination (Targeted Vaccination)
			North Cotabato	Protective Emergency Vaccination (Targeted Vaccination)
			South Cotabato	Protective Emergency Vaccination (Targeted Vaccination)
		CAR	Benguet	Protective Emergency Vaccination (Targeted Vaccination)
			Kalinga	Protective Emergency Vaccination (Targeted Vaccination)
	Major Economic Poultry Centers (Poultry Baskets and Areas with GP and PS)	Region IV-A	Batangas	Preventive/Prophylactic Vaccination (Targeted Vaccination)
			Quezon	Preventive/Prophylactic Vaccination (Targeted Vaccination)
			Rizal	Preventive/Prophylactic Vaccination (Targeted Vaccination)
			Cavite	Preventive/Prophylactic Vaccination (Targeted Vaccination)
			Laguna	Preventive/Prophylactic Vaccination (Targeted Vaccination)
		Region X	Bukidnon	Preventive/Prophylactic Vaccination (Targeted Vaccination)
			Misamis Oriental	Preventive/Prophylactic Vaccination (Targeted Vaccination)
		Region I	Pangasinan	Preventive/Prophylactic Vaccination (Targeted Vaccination)
		Region II	Isabela	Preventive/Prophylactic Vaccination (Targeted Vaccination)
		Region VI	Bacolod	Preventive/Prophylactic Vaccination (Targeted Vaccination)
		Region VII	Cebu (except Cebu City)	Preventive/Prophylactic Vaccination (Targeted Vaccination)
Region XI	Davao del Sur (except Davao City Poblacion Area - Poblacion, Buhangin, Talomo and Agdao)	Preventive/Prophylactic Vaccination (Targeted Vaccination)		
B	Areas with moderate HPAI Cases	Region V	Camarines Sur	Protective Emergency Vaccination (Targeted Vaccination)
		Region I	Ilocos Sur	Protective Emergency Vaccination (Targeted Vaccination)
			Ilocos Norte	Protective Emergency Vaccination (Targeted Vaccination)
		BARMM	Maguindanao	Protective Emergency Vaccination (Targeted Vaccination)
C	Areas with intermittent/ sporadic HPAI Cases	Region II	Cagayan	Protective Emergency Vaccination (Targeted Vaccination)
		Region VI	Capiz	Protective Emergency Vaccination (Targeted Vaccination)
D	HPAI High Risk Areas in Luzon (Based on 2020 AIPP MOP)	Region II	Nueva Vizcaya	Preventive/Prophylactic Vaccination (Targeted Vaccination)
		Region IV-B	Oriental Mindoro	Preventive/Prophylactic Vaccination (Targeted Vaccination) (Around Migratory Hot Spots: Bongabong, Calapan, Naujan)
		Region V	Masbate	Preventive/Prophylactic Vaccination (Targeted Vaccination) (Around Migratory Hot Spots: Ticao Island)
			Camarines Sur	Preventive/Prophylactic Vaccination (Targeted Vaccination) (Around Migratory Hot Spots: Cabusao Wetland)
			Camarines Norte	Preventive/Prophylactic Vaccination (Targeted Vaccination) (Around Migratory Hot Spots: Tabugon, Sta. Elena)
E	HPAI High Risk Areas Outside Luzon (Based on 2020 AIPP MOP)	Region VI	Iloilo	Preventive/Prophylactic Vaccination (Targeted Vaccination) (Around Migratory Hot Spots: Ajuy, Dumangas, Sara)
			Antique	Preventive/Prophylactic Vaccination (Targeted Vaccination) (Around Migratory Hot Spots: Sibalom)
			Guimaras	Preventive/Prophylactic Vaccination (Targeted Vaccination) (Around Migratory Hot Spots: Bugnay Coastal, Jordan)
			Negros Oriental	Preventive/Prophylactic Vaccination (Targeted Vaccination) (Around Migratory Hot Spots: Sipalay)
		Region VIII	Southern Leyte	Preventive/Prophylactic Vaccination (Targeted Vaccination) (Around Migratory Hot Spots: St. Bernard Wetlands, Hinunangan)
		Region IX	Zamboanga	Preventive/Prophylactic Vaccination (Targeted Vaccination) (Around Migratory Hot Spots: Naga)
		Region XIII	Agusan Del Norte	Preventive/Prophylactic Vaccination (Targeted Vaccination) (Around Migratory Hot Spots: Butuan, Santiago, Jabonga, Kitcharao)
			Agusan Del Sur	Preventive/Prophylactic Vaccination (Targeted Vaccination) (Around Migratory Hot Spots: San Francisco, Sta Josefa, Talacogon, Bunawan, Rosario, Vuelala, La Paz, Loreto)
			Surigao Del Norte	Preventive/Prophylactic Vaccination (Targeted Vaccination) (Around Migratory Hot Spots: Alegria, Mainit)

**ANNEX B. VETERINARIAN-CLIENT-PATIENT-RELATIONSHIP (VCPR) FORM FOR AVIAN INFLUENZA (AI) VACCINATION**

**VETERINARIAN-CLIENT-PATIENT-RELATIONSHIP (VCPR) FORM FOR AVIAN INFLUENZA (AI) VACCINATION**

I, \_\_\_\_\_, the manager / owner of \_\_\_\_\_  
(name of establishment)  
located at \_\_\_\_\_ have contracted  
(address)  
Dr. \_\_\_\_\_ of \_\_\_\_\_  
(name of veterinarian) (address)

to provide/administer Avian Influenza Vaccine of the birds described as follows:

1. Type of Avian Species: \_\_\_\_\_
2. Breed (if applicable): \_\_\_\_\_
3. No. of birds: \_\_\_\_\_
4. Type of Vaccination Strategy Employed:  Protective Emergency Vaccination  
 Preventive Prophylactic Vaccination

I agree to follow the veterinarian's instructions and directions including withdrawal period.

I, Dr. \_\_\_\_\_ have agreed to assume the responsibility for making clinical judgments regarding the health of the avian species described above and their need for vaccination. I further agree to be readily available for monitoring, follow-up and evaluation in the event of adverse reactions or failure of the vaccination.

\_\_\_\_\_  
Owner

\_\_\_\_\_  
Veterinarian

TIN: \_\_\_\_\_

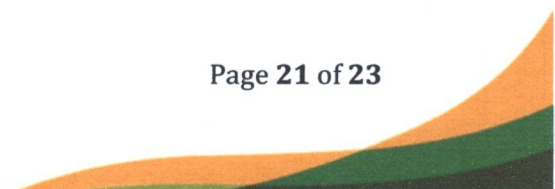
PRC No. \_\_\_\_\_

PTR: \_\_\_\_\_

TIN: \_\_\_\_\_

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date



## ANNEX C. CERTIFICATE OF AVIAN INFLUENZA VACCINATION

FARM INFORMATION			
FARM NAME:			
ADDRESS:			
	Longitude:	Latitude:	
TYPE OF FARM:	<input type="checkbox"/> Small-hold	<input type="checkbox"/> Semi-commercial	
	<input type="checkbox"/> Commercial	<input type="checkbox"/> Multi-avian species	
TYPE OF AVIAN SPECIES:			
	<u>Population</u>	<u>Age</u>	<u>No. of birds Vaccinated</u>
<input type="checkbox"/> Chicken	_____	_____	_____
<input type="checkbox"/> Duck	_____	_____	_____
<input type="checkbox"/> Quail	_____	_____	_____
<input type="checkbox"/> Gamefowl	_____	_____	_____
<input type="checkbox"/> Turkey	_____	_____	_____
<input type="checkbox"/> Others:	_____	_____	_____
NAME OF OWNER:			
CONTACT DETAILS:			

VACCINE INFORMATION	
PRODUCT NAME:	MANUFACTURER:
TYPE OF VACCINE:	LOT NUMBER:
DATE VACCINATED:	SITE OF ADMINISTRATION:
DATE OF NEXT VACCINATION:	DOSES ADMINISTERED (in ml):
ISSUING VETERINARIAN	
NAME:	
PRC NO:	CONTACT NO.:
VALID UNTIL:	EMAIL ADDRESS:
COMPANY/OFFICE NAME:	
SIGNATURE:	DATE:

