Zika Virus Testing Algorithm 2: NEW YORK CITY RESIDENTS Seen in <u>Sites in NYC</u> that EITHER Do Not Utilize NYP Laboratories OR that Cannot Get Specimens to NYP Laboratory Within 4 hours of Collection

Criteria for Testing

 Pregnant women who (a) traveled while pregnant to an area with Zika transmission* OR (b) had unprotected sex with a partner who spent time in an area with Zika transmission*
Non-pregnant persons who developed compatible symptoms¹ during or within 4 weeks of <u>travel</u> to an area with Zika transmission*
Persons who developed compatible symptoms¹ within 4

weeks of <u>possible sexual exposure</u> to Zika virus (e.g., sexual contact with a partner with symptomatic Zika virus disease or with history of travel to an area with active Zika transmission*)

Approval NOT required. Testing should be conducted at a commercial lab. (Note: DOH will provide testing for patients whose insurance does not cover the cost of testing at a commercial laboratory. In such cases, follow algorithm on the right-hand side of this page.)

Order Zika virus testing

- In general, **rRT-PCR testing of both serum AND urine** is recommended.
- Serologic testing (i.e., IgM antibody testing) is also generally recommended because the level of viremia and viruria declines over time and thus a negative rRT-PCR result does not exclude Zika virus infection.
- For more guidance about Zika virus testing refer to: <u>http://www1.nyc.gov/assets/doh/downloads/pdf/cd/zika</u> <u>-testing-guidance-for-providers.pdf</u>

Collect samples as specified by commercial laboratory

- 1. Blood
- 2. Urine

Send specimens to commercial laboratory for testing

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Report ALL positive Zika virus test results to local Department of Health

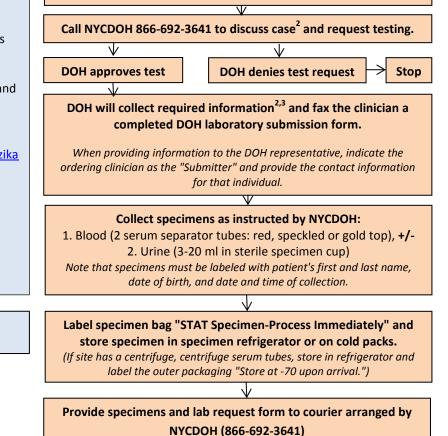
Criteria for Testing

4. **Neonates** with suspected or confirmed microcephaly or intracranial calcifications born to women who (a) traveled to an area with Zika transmission* while pregnant or (b) had unprotected sex during pregnancy with a partner who spent time in an area with Zika transmission* AND neonates without microcephaly or intracranial calcifications whose mother has positive or inconclusive Zika virus testing.

5. **Placental/fetal tissues** collected at delivery or pregnancy termination (elective or spontaneous) for women with laboratory evidence of Zika virus infection during pregnancy

6. Anyone who developed **Guillain-Barre syndrome** or other neurologic manifestation after spending time in an area with active Zika transmission* or who had unprotected sex with a partner who spent time in an area with Zika transmission*

7. Possible **unusual modes of Zika virus transmission** (e.g., transfusion, organ transplantation)



* For up-to-date information about areas with Zika transmission, refer to CDC website: http://www.cdc.gov/zika/geo/index.html
¹Symptoms compatible with Zika virus infection include: fever, maculopapular rash, arthralgia, conjunctivitis
²Be prepared to provide patient demographic information, travel, and symptom information (e.g., dates and locations of travel, date of symptom onset), submitter information (i.e., NYP Laboratory - see #3 below), ordering provider information.

More information is available on the NYP Infonet: <u>https://infonet.nyp.org/EPI/Pages/ZikaVirus.aspx</u>