

**Mission:**

To protect, promote & improve the health of all people in Florida through integrated state, county & community efforts.



**Rick Scott**  
Governor

**Celeste Philip, MD, MPH**  
Surgeon General and Secretary

**Vision:** To be the Healthiest State in the Nation

**FLORIDA DOH Zika Testing Update**  
**August 11, 2017**

On July 24, 2017, the Centers for Disease Control and Prevention (CDC) updated their interim guidance for health care providers caring for pregnant women with possible Zika virus exposure (<https://www.cdc.gov/mmwr/volumes/66/wr/mm6629e1.htm>). The major change in this guidance was that routine Zika testing was no longer recommended for asymptomatic pregnant women without ongoing risk of Zika virus exposure. However, CDC clarified that variations in these guidelines may occur based on jurisdiction and emphasized a shared decision-making model for testing and screening of pregnant women and infants. **The Florida Department of Health continues to recommend that all pregnant women with potential Zika virus exposure be tested.** Please see below for information on the rationale behind CDC’s guidance change and Florida’s rationale for retaining prior recommendations.

Revised CDC Guidance	Florida Department of Health Guidance
<p>CDC no longer recommends routine Zika virus testing for asymptomatic pregnant women with recent possible Zika virus exposure but without ongoing exposure.</p>	<p><b>Continue to test both asymptomatic and symptomatic pregnant women with possible Zika virus exposure.</b></p> <ul style="list-style-type: none"> <li>• If testing occurs within two weeks of exposure or symptom onset, both PCR and IgM testing should be conducted. IgM testing is recommended for samples collected 2-12 weeks after possible exposure. While testing of samples collected more than 12 weeks after the last probable exposure is possible, a negative Zika IgM result may not rule out Zika virus infection earlier in the pregnancy.</li> <li>• For pregnant women with ongoing risk of Zika virus exposure: IgM testing is recommended in the 1st and 2nd trimesters and is recommended in the third trimester if previous testing has not been conducted or at the clinician’s discretion. Consider concurrent Zika virus PCR testing at least once per trimester to provide additional clinical information to determine whether a positive IgM test result indicates a recent infection.</li> </ul>
<p>Rationale #1: The number of people with Zika virus infection in the Americas is declining. Testing at times of low disease prevalence can increase the likelihood of false-positive test results.</p>	<ul style="list-style-type: none"> <li>• Travel to and from Zika virus-affected areas in the Americas increases in the summer. The Florida Department of Health continues identifying recent Zika disease cases in travelers.</li> <li>• There is an increased risk of local Zika virus transmission during the summer months as well. Please see advice for people living or traveling to South Florida. <a href="https://www.cdc.gov/zika/intheus/florida-update.html">https://www.cdc.gov/zika/intheus/florida-update.html</a>.</li> <li>• While the potential for false positive IgM and PCR testing is increased, further testing at DOH Bureau of Public Health Laboratories (BPHL) can help to resolve many of these situations. Please contact your local County Health Department if you have concerns about the possibility of false positive test results.</li> </ul>
<p>Rationale #2: Emerging data indicate that Zika virus IgM antibodies can</p>	<p><b>It is important for providers to consider their patient’s clinical and exposure history when interpreting laboratory results.</b></p> <ul style="list-style-type: none"> <li>• Consider the timing of exposure in relation to pregnancy. While the date of last possible exposure is important, it is also helpful to know how long</li> </ul>

<p>persist beyond 12 weeks of infection. This may make it difficult to determine if Zika virus infection occurred during or before pregnancy.</p>	<p>the potential exposure period was. Health care providers should continue to ask pregnant women at each prenatal visit about possible Zika virus exposure.</p> <ul style="list-style-type: none"> <li>• Please note that a woman is considered to be pregnant for testing and CDC Pregnancy Registry purposes if she had potential Zika virus exposure during pregnancy or within the 8-week pre-conception period.</li> </ul>
<p>CDC has extended the timeframe for Zika virus PCR testing in symptomatic pregnant women from 2 weeks to up to 12 weeks after symptom onset.</p>	<p>The Florida Department of Health continues to use previous guidance recommending PCR testing on pregnant women.</p> <ul style="list-style-type: none"> <li>• If testing is performed at the Bureau of Public Health Laboratories, PCR will be performed up to 2 weeks after symptom onset. Pregnant women outside of the 2-week window will be tested by PCR if they have a positive Zika IgM result.</li> <li>• Providers ordering commercial testing should order both PCR and IgM testing up to 12 weeks after symptoms onset.</li> </ul>
<p>Infants born to mothers with possible Zika virus exposure during pregnancy but who did not receive Zika testing, should receive a comprehensive physical examination, including standardized measurement of head circumference and newborn hearing screen, as part of routine pediatric care. Based on the level of possible Zika virus exposure, the provider should consider whether further evaluation of the newborn for possible congenital Zika virus infection is warranted, in which case, a head ultrasound, and ophthalmologic assessment should be considered. Based on results of the evaluation, testing of the infant for Zika virus infection could be considered.</p>	<p><b>It is important for pediatricians to inquire about possible Zika virus exposure in the mother during pregnancy.</b></p> <ul style="list-style-type: none"> <li>• All infants born to mothers who have laboratory evidence of Zika virus infection during pregnancy should receive a comprehensive physical exam, neurologic assessment, neuroimaging, hearing assessment, and Zika virus testing.</li> <li>• Testing is recommended for infants born to mothers who have laboratory evidence of Zika virus infection during pregnancy. Infant testing may also be performed even if the mother has not previously been tested.</li> <li>• Testing is also recommended for infants who have abnormal clinical findings suggestive of congenital Zika syndrome and a maternal epidemiologic link suggesting possible exposure during pregnancy, regardless of maternal test results.</li> <li>• A Zika virus RNA NAT test should be performed on both infant serum and urine, and Zika virus IgM antibody should be performed on infant serum.</li> <li>• Specimens should ideally be collected within 2 days after birth; however, testing specimens collected within the first few weeks to months after birth may still be useful, especially among infants born in areas without risk of Zika.</li> </ul>
<p>Testing of placental tissues for Zika virus infection is not routinely recommended for asymptomatic pregnant women who have recent Zika virus exposure but without ongoing possible exposure and who have a live born infant without evidence of possible Zika virus-associated birth defects.</p>	<p><b>Florida Department of Health has updated their guidelines to align with CDC guidance.</b></p> <ul style="list-style-type: none"> <li>• Placenta testing is not needed for pregnant women with confirmatory Zika results. This includes those with positive Zika virus PCR results at a reference laboratory or those with a positive Zika IgM result and PRNT results that are positive for Zika and negative for dengue.</li> <li>• Symptomatic pregnant women not meeting laboratory criteria above can have their placenta tested.</li> <li>• Placenta testing should also occur if an abnormality is present in the fetus/infant. Placenta testing may also be offered on a case by case basis following fetal loss or infant death.</li> </ul>

**As a reminder, both Zika virus PCR and antibody testing are commercially available.** Pregnant women with insurance should be tested through the commercial laboratory. Zika virus testing is available at Florida Department of Health for patients who are uninsured, infants potentially exposed to Zika virus during pregnancy, and suspect locally acquired cases. Contact your county health department first if testing is needed through [Florida Department of Health Local Epidemiology Contact List](#). The most current Zika testing guidance is also posted on the Department’s website: <http://www.floridahealth.gov/diseases-and-conditions/zika-virus/> under the tab Guidance for Health Care Providers.