

Indications for Zika Testing	RT-PCR (serum, urine, or other)	IgM¹ (serum)
Pregnancy-associated		
Symptomatic ² pregnant woman <i>with</i> travel ³ or sexual ⁴ exposure history	ASAP Serum & Urine < 12 weeks of onset	Concurrent with PCR
Symptomatic pregnant woman <i>without</i> travel or sexual exposure history	Not recommended	Not recommended
Pregnant woman with travel or sexual exposure history and ultrasound evidence of fetal microcephaly and/or calcifications OR fetal loss, regardless of symptom status	ASAP Serum & Urine < 12 weeks after possible exposure (amniotic fluid if amniocentesis preformed)	Concurrent with PCR
Pregnant woman with ongoing exposure (lives in or frequently travels to Zika risk area or ongoing unprotected sexual activity with potentially infected partner)	Serum & Urine Test 3 times during pregnancy	Consider concurrent with PCR but not routinely recommended
Asymptomatic pregnant traveler	Not routinely recommended**	Not routinely recommended
Non-Pregnant Individuals		
Symptomatic individual <i>with</i> travel or sexual exposure history	Serum < 2 weeks of onset Urine < 3 weeks of onset	< 12 weeks of onset
Asymptomatic individual <i>with</i> travel or sexual exposure history	Not recommended	Not recommended
Asymptomatic traveler with pregnant partner	Not routinely recommended	Not routinely recommended
Traveler with Guillain-Barre Syndrome diagnosis	Not recommended	2-12 weeks after possible exposure
Asymptomatic <i>without</i> travel or sexual exposure	Not Recommended	Not Recommended
Infants*		
Infant with microcephaly and/or calcifications, and maternal Zika virus exposure regardless of maternal test results	Serum & Urine (CSF if available***) < 2 DAYS after birth	Concurrent with PCR (CSF if available)
Infant with no apparent defect and evidence of maternal Zika virus infection (IgM), or exposure history and awaiting maternal lab results (PRNT)	Serum & Urine (CSF if available) < 2 DAYS after birth	Concurrent with PCR (CSF if available)
Infant with no apparent defect, and no evidence of maternal Zika virus infection or exposure history	Not Recommended	Not Recommended

* Cord blood is not recommended for testing

¹ With PRNT confirmation specimen sent to State Lab (VRDL)

² Two or more of fever, maculopapular rash, arthralgia, non-purulent conjunctivitis

³ Travel to a Zika risk area within the past 12 weeks

⁴ Unprotected sexual contact with a partner who has recently travelled (within 6 months) to a Zika risk area

** Consider based on shared patient-provider decision making and patient preferences after individual risk assessment and pre-test counselling

*** For infants with clinical findings consistent with congenital Zika syndrome, CSF for PCR and IgM should be considered especially if serum & urine are negative and other etiology has not been identified