To: Wisconsin Clinicians, Clinical Laboratory Managers, Infection Preventionists, Tribal Health Centers, and Local Health Departments

From: Jeffrey P. Davis, M.D.
Chief Medical Officer and State Epidemiologist for Communicable Diseases

Updated Guidance for Zika Testing in Pregnant Women

PLEASE DISTRIBUTE WIDELY

Clinicians should be aware that the Centers for Disease Control and Prevention (CDC) has recently issued updated interim clinical guidance for health care providers caring for pregnant women with possible Zika virus exposure.

This interim guidance provides several key recommendations, some of which represent a significant change from previous recommendations. Some of these important changes are highlighted below. Please review the interim guidance document in full for additional details.

- Pregnant women with possible Zika virus exposure and symptoms of Zika virus disease (fever, rash, arthralgia, or conjunctivitis) should be tested using concurrent Zika virus nucleic acid test (NAT) and IgM antibody testing as soon as possible within 12 weeks after symptom onset to diagnose the cause of their illness.

- Asymptomatic pregnant women with ongoing possible Zika virus exposure (i.e., reside in or travel daily or weekly to areas with a risk of Zika) should be offered Zika virus NAT testing three times during pregnancy. IgM antibody testing is no longer recommended.

- Asymptomatic pregnant women with recent possible Zika virus exposure but without ongoing possible exposure are not routinely recommended to have Zika virus testing. However, testing should be considered using a shared patient-provider decision-making model.

Based on these updated recommendations, effective immediately the Wisconsin Division of Public Health (DPH) will no longer approve fee-exempt testing at the Wisconsin State Laboratory of Hygiene (WSLH) for asymptomatic pregnant women without ongoing possible Zika virus exposure. After careful consideration and discussion with patients, if Zika testing is desired for asymptomatic pregnant women without ongoing exposure, please consult your clinical laboratory manager to pursue Zika virus testing using concurrent NAT and IgM tests as soon as possible within 12 weeks of last possible exposure through a private laboratory.

DPH will continue to approve fee-exempt testing for symptomatic pregnant women with possible exposure to Zika virus and asymptomatic pregnant women with ongoing possible Zika virus exposure.
CDC continues to recommend that all pregnant women be asked about possible Zika virus exposure before and during the current pregnancy, at every prenatal care visit. Recommendations for the prevention of Zika virus infection during pregnancy have not changed, and DPH still encourages pregnant women and couples planning to conceive to avoid nonessential travel to areas with a risk of Zika virus. To prevent further transmission, persons with a possible exposure to Zika virus should also continue to avoid mosquito bites and unprotected sexual contact.

Thank you for your cooperation in this matter. For questions and to obtain Zika virus testing approval, please contact the Bureau of Communicable Diseases at (608) 267-9003.