

NJDOH Testing Criteria for Zika Virus – August 2017

Clinicians should consult CDC recommendations for Zika testing at <u>www.cdc.gov/zika</u>. Testing for Zika is widely available at most commercial laboratories. This document provides current eligibility criteria and procedures for requesting testing for Zika virus at the New Jersey Public Health and Environmental Laboratories (PHEL). Placental/fetal tissue and amniotic fluid testing is only available through NJDOH. NJDOH will not provide testing for asymptomatic pregnant women with recent possible Zika exposure unless extenuating circumstances exist.

Eligible for testing at PHEL:

- 1. Persons who developed at least one Zika compatible symptom within 2 weeks of last exposure. Zika compatible symptoms include fever, rash, joint pain, and conjunctivitis.
- 2. Pregnant women with fetal abnormalities suggestive of congenital Zika syndrome detected on ultrasound.
- 3. Asymptomatic pregnant women who have ongoing exposure (daily or weekly travel to an area with Zika). PCR testing is recommended three times during pregnancy
- 4. Infants born to mothers with laboratory evidence of Zika virus infection, or who have abnormalities suggestive of congenital Zika virus syndrome, regardless of maternal test results
- 5. Apparently normal infants born to mothers with Zika exposure, if newborn assessments suggest congenital Zika syndrome
- 6. Instances of fetal loss or infant death where mother had Zika exposure
- 7. Persons who may have been exposed to Zika virus through other less common routes, such as blood transfusion, organ transplant, laboratory or healthcare setting exposures, or suspected local transmission.

Exposure Criteria (last exposure must be within 12 weeks of specimen collection date):

- 1. Travel to an area (or relocation from an area) with risk of Zika or designated by CDC as a "US Zika Cautionary Area, as posted online at <u>https://wwwnc.cdc.gov/travel/page/zika-information</u> and <u>https://www.cdc.gov/zika/geo/index.html.</u>
- 2. Sexual exposure (i.e. unprotected vaginal, anal, or oral sex, or sharing of sex toys) with a partner who traveled to or resides in a Zika-affected area, or who was confirmed to be infected with Zika
- 3. Suspected congenital transmission
- 4. Laboratory or healthcare setting exposure
- 5. Blood transfusion or organ transplant recipient
- 6. Suspected local transmission
- 7. Other novel route of exposure

<u>Symptoms:</u> Common Zika-compatible symptoms include fever, rash, arthralgia, and conjunctivitis. Other symptoms include headache, myalgia, and retro-orbital pain. Rarely, neurological symptoms have also been reported, including Guillain-Barre syndrome.

<u>Available Zika Virus Tests</u>: For information on Zika virus testing at PHEL, refer to the Diagnostic Testing Algorithm for Zika: <u>http://www.state.nj.us/health/phel/</u>.

Timeframe for Testing:

Due to the limitations of available testing methodologies, test requests will only be approved for specimens drawn within 12 weeks of the last potential Zika virus exposure.

Timeframe for Calculating Sexual Exposure:

When considering testing eligibility, a man with a Zika exposure is considered potentially infectious for 6 months from his last exposure. As such, unprotected sexual contact with a male partner for 6 months after the partner's travel to an area with Zika would be considered a Zika sexual exposure. Unprotected sexual contact with a female partner would meet timeframe criteria if contact occurred within 8 weeks after the female partner's last exposure.

For example, if a man returned from a Zika affected area on January 20th, the semen would be potentially infectious for 6 months, through July 20th. If there was an unprotected sexual contact on May 15th, the man's sexual partner would be eligible for Zika virus testing if specimens were collected 12 weeks after May 15th, assuming other testing criteria are met.

Testing Approval Steps:

Except for newborn testing at the time of delivery, providers should contact the local health department where the patient resides during routine business hours to discuss Zika virus testing. A directory of local health departments in New Jersey can be found at <u>http://localhealth.nj.gov.</u>

Providers may choose to complete and fax the Zika Virus Patient Information Worksheet (<u>http://www.nj.gov/health/cd/topics/zika.shtml</u>) to the local health department to expedite testing requests.

If the patient is eligible for testing, the local health department will provide the PHEL SRD-1 specimen submission form and PHEL Technical Bulletin to the provider. The patient must bring the physician's test order/script and the approved SRD-1 form to **a hospital-based clinical laboratory** for specimen collection. Serum and urine specimens are required. Test results will be faxed by PHEL to the provider (using the fax number on the SRD-1 form) and provided to the local health department through CDRSS. Providers should contact PHEL with questions on pending laboratory test results at <u>zika.phel@doh.nj.gov</u> or 609-530-8516. There is no charge for testing done through PHEL (although the hospital-based clinical laboratory may charge a drawing fee).

If patients are not eligible for testing at PHEL, providers may consider testing through commercial laboratories. Patients who go to a commercial laboratory may be charged a fee.

<u>Newborn Testing Procedures:</u> Birthing hospitals should refer to the NJDOH Zika Delivery Packet <u>http://www.nj.gov/health/cd/documents/topics/zika/njdoh_zika_delivery_packet.pdf</u> for recommended assessments and/or testing requests.