Attachment 1: FDOH; CHD Guidance on Testing Pregnant Women for Zika Virus Infection

**CHD Guidance on Testing Pregnant Women for Zika Virus Infection**

Version 1.0 (August 5, 2016)

**Florida Health**

****Florida Department of Health

Pregnant women reporting to the CHD for Zika testing, whether by referral from another provider or by self-referral, should be tested in accordance with the most current DOH and CDC guidance. This includes an assessment for possible Zika virus exposure and evaluation for signs and symptoms of Zika virus disease.

- Detailed testing guidance and algorithm is available at: [http://www.cdc.gov/mmwr/volumes/65/wr/mm6529e1.htm?s_cid=mm6529e1_e](http://www.cdc.gov/mmwr/volumes/65/wr/mm6529e1.htm?s_cid=mm6529e1_e)

- DOH guidance on testing pregnant women who live in or travel to areas of local active Zika virus transmission (currently, a limited area in the city of Miami) is attached.

- Additional guidance is available in the August 1, 2016 CDC Health Advisory (CDCHAN-00393): [http://emergency.cdc.gov/han/han00393.asp](http://emergency.cdc.gov/han/han00393.asp).

Pregnant women without exposure to Zika virus (e.g., no travel history to areas with active transmission, no sexual contact with a partner who lives in or traveled to an area with active transmission, etc.) and without symptoms of disease should be counseled on the risks and benefits of testing (e.g., false positives and negatives) and be reassured that testing is unnecessary at this time.

- False positives in serology testing may be due to infection from another virus that is in the same family as Zika (e.g., Dengue virus). Thus, confirmatory testing by the CDC may be required and can take many weeks.

- False negatives for PCR may be due to collecting the specimen after the relatively short window of viremia (e.g., < 2 weeks). Similarly, there is a window of detecting IgM antibodies and false negatives may occur due to collecting the specimen before or after that timeframe.

- For details on interpretation of Zika virus antibody test results, see: [http://www.cdc.gov/mmwr/volumes/65/wr/mm6521e1.htm](http://www.cdc.gov/mmwr/volumes/65/wr/mm6521e1.htm)

The woman should be counseled on how to prevent Zika virus infection and to seek testing if she becomes exposed in the future and/or develops symptoms of disease.

- If the pregnant woman insists on testing, then the CHD will provide it at no cost to the patient.

- CHDs may require appointments to be made for testing, however they must be timely, within a week of the request.

- Testing is available for all pregnant women who request a test regardless of residence.

- There is no limit to the number of tests a pregnant woman can receive; and there is no requirement to verify pregnancy status.

**Interim Guidance for Specimen Collection and Testing**

- Ask for symptoms within the last 14 days.
  - Collect information on one of the Zika specific symptoms: fever, rash, joint pain/arthralgia, or reddened eyes/conjunctivitis.
  - You will be prompted to enter symptoms within the eLab order upon selecting the "Validate Order" button.

- Ask for travel history outside the continental US or in the Miami area of active transmission (see file 'Zika Testing Update' for map) in the last 14 days and last 6 months.
  - Complete entry of travel history in HMS.
- Collect name of countries. US territories (US Virgin Islands and Puerto Rico and if return to FL was 1) in past 2 weeks – 6 months or 2) in past 2 weeks. If travel was to Miami area of interest, indicate Miami and the dates of visit to the area.
- You will be prompted to enter travel history within the eLab order upon selecting the “Validate Order” button.

- Ask for information about week of pregnancy and anticipated due date.
- Collect BOTH specimens:
  - Urine specimen (1-3ml) paraffin to seal urine cup; ship up right if possible and on cold packs.
  - Serum specimen in tiger or red top tube 1-2ml (spin before sending); ship on cold packs after separating.

- Each sample should be in its own Ziplock bag.
- An updated detailed guidance document on Zika specimen collection and shipping is attached and will be posted on the DOH intranet soon.
- Complete ordering though HMS for testing at BPHL (Tampa or Jacksonville) until further guidance is provided.
- Order ZIKV PCR and ZIKV IgM antibody.
- All samples should be submitted to the State Public Health Lab.
- Use Program Code 37 (Adult Health) for time and service coding.

Interim HMS Guidance for Zika Ordering

- All Zika tests are to be ordered via Emdeon/Change Healthcare from the Bureau of Laboratories. The tests are now present and orderable in the Emdeon test compendium for BOL – Jacksonville and BOL – Tampa exclusively. Include your printed paper requisition along with the specimen when sending to the lab.
- The orderable test codes in question are 1537 (Arbo ZIKA RT-PCR) and 1539 (Arbo ZIKA IgM ELISA). Both tests should be ordered simultaneously and together, as part of a single order each time an order is placed, but should not be combined with any other tests (i.e., Amplified GC/CT, RPR, etc.).
- Lab Tests and Service Descriptions for these tests need to be set up in your local HMS tables immediately so that services can be created and results can go into the patient’s EHR.
- All Zika tests should be ordered under Program Component 37 exclusively.
- The Department will be billed directly for these tests. For this reason, the Bill Type in Emdeon should always be set to Client and no patient insurance information should be included within the order.
- Example of correct Bill Type: bill type: Client
- The appropriate ICD-10 diagnosis codes to use are Z11.59 (special screening examination for other viral diseases) and/or Z33.1 (pregnant state, incidental).
- The below questions are ALL to be answered via the Emdeon AOE Question screen (where the program component specimen source/type information is answered for state lab tests). This information is both for the Lab and for the Epidemiology office for the purposes of tracking/reporting, so it is extremely important that these questions be answered when appropriate and in the exact format given below:
  - Pregnancy Status (Yes/No)
  - Travel History –
    - List the name of countries and US Territories visited (including US Virgin Islands and Puerto Rico). If travel was to Miami area of interest, indicate
Miami and the dates of visit to the area. The format should be “Countries =” followed by the name(s) of the countries (or US Territories)
- Indicate if return to Florida was:
  - In past 2 weeks-6 months
  - In past 2 weeks or less
- Format should be “Returned to Florida = MM/DD/YYYY” when relevant

- An example would be:

<table>
<thead>
<tr>
<th>Symptoms</th>
<th>Countries = Mexico, Puerto Rico; Returned to Florida = In past 2 weeks 6 months</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- Symptoms - Limit only to the following experienced within the last 14 days and enter all as appropriate. The format should be “Symptoms =” followed by the relevant values below:
  - Fever
  - Rash
  - Joint pain/arthralgia
  - Reddened eyes/conjunctivitis
  - Other
  - None
  - Unknown

- In addition to the actual symptoms, the number of weeks the patient is pregnant at the time of testing, as well as the estimated delivery date must also be placed within the symptoms field. That format should be as follows: “Number of weeks pregnant = X” and “Estimated Date of Delivery = MM/DD/YYYY”

- If symptoms and pregnancy information are all known, an example would be:

<table>
<thead>
<tr>
<th>Symptoms</th>
<th>Symptoms = Fever, rash, conjunctivitis, Number of weeks pregnant = 22; Estimated Date of Delivery = 11/25/2016</th>
</tr>
</thead>
<tbody>
<tr>
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- Contact DL HMS Support if you have any questions regarding these instructions.