**FOR CHILDREN AND ADULTS**

**IS THERE A HISTORY OF POSSIBLE ZIKA EXPOSURE?**

**YES**
- Recent travel to an area with risk of Zika virus (see list of areas with risk of Zika virus*)
- OR
- Recent unprotected sexual contact with:
  - A male who has traveled in the past 6 months to an area with risk of Zika virus
  - A female who has traveled in the past 8 weeks to an area with risk of Zika virus

**NO**

**DOES THE PATIENT HAVE SYMPTOM(S) OF ZIKA VIRAL DISEASE?**

**YES**

**SYMPTOMATIC INDIVIDUALS**
- NAT testing of serum <2 weeks and urine <3 weeks since symptom onset
- IgM antibody testing <12 weeks since symptom onset
- If non-negative IgM and Zika virus NAT negative, confirm with PRNT

**NO**

**ASYMPTOMATIC PREGNANT WOMEN WITH AN EPISODE OF ZIKA EXPOSURE**
- Do not routinely test, but instead assess carefully for factors that increase the likelihood of Zika infection. See California Updated Guidance (www.bit.ly/CDPHGuidance) for a list of risk factors to consider.
- A patient’s risk tolerance and decision-making regarding the pregnancy may be sufficient justification for Zika virus testing.
- If choosing to test, follow testing instructions for Symptomatic Pregnant Women.

**IS ONGOING (DAILY OR WEEKLY) ZIKA EXPOSURE OCCURRING?**

**YES**

**ASYMPTOMATIC PREGNANT WOMEN WITH ONGOING POSSIBLE ZIKA EXPOSURE**
- NAT testing on serum and urine 3 times during pregnancy starting with the initiation of prenatal care. Testing each trimester may be considered.
- IgM testing may be considered concurrent with NAT testing but may lead to difficult interpretation of results depending on exposure history.

**NO**

**ASYMPTOMATIC PREGNANT WOMEN WITH AN EPISODE OF ZIKA EXPOSURE**
- If choosing to test, follow testing instructions for Symptomatic Pregnant Women.

**ASYMPTOMATIC PREGNANT WOMEN WITH ONGOING POSSIBLE ZIKA EXPOSURE**
- NAT testing on serum and urine 3 times during pregnancy starting with the initiation of prenatal care. Testing each trimester may be considered.
- IgM testing may be considered concurrent with NAT testing but may lead to difficult interpretation of results depending on exposure history.

**F OR INFANTS**

**INFANT ZIKA VIRUS TESTING FOR SUSPECTED CONGENITAL ZIKA VIRUS INFECTION**

**Indications for testing include maternal exposure history plus any of the following:**
- Maternal laboratory evidence of Zika virus infection
- Infant findings consistent with congenital Zika syndrome regardless of maternal test results

**Newborn specimen collection:**
- Zika virus NAT testing on infant serum and urine and Zika virus IgM antibody testing on infant serum. If non-negative IgM and negative Zika virus NAT, confirm with PRNT.
- If CSF is collected for other purposes, NAT and IgM antibody testing should be performed on CSF.
- For infants with findings consistent with congenital Zika syndrome with unknown etiology, consider CSF for Zika virus NAT and IgM antibodies.

**Birthing hospitals may consider collecting infant specimens for concurrent Zika virus testing if maternal testing is being done:** www.bit.ly/CAiInfantZika