Zika Testing Procedures for Healthcare Providers
Updated 2/14/18

As of January 10, 2018 the California Department of Public Health has made changes to the recommendations for Zika testing.

Zika testing will be done at commercial clinical labs, as for other infectious diseases, using your usual clinical testing protocol. There is no need to contact our agency. Please ensure that you request the appropriate test based on the symptom status and timing of exposure. A CDPH Guide to testing is available HERE. Public Health Labs will conduct only confirmatory Zika IgM testing by PRNT on non-negative IgM test reports with a negative NAT.

Pregnant Women:

1. Any pregnant woman that HAS had Zika symptoms (fever, rash, painful joints, or conjunctivitis) with possible Zika exposure during this pregnancy, should be tested as soon as possible with concurrent Zika virus nucleic acid test (NAT) in serum and urine and IgM antibody if <12 weeks since symptom onset.

2. Pregnant women with NO symptoms and an ongoing Zika exposure risk (frequent trips to Zika endemic countries) should be offered testing with NAT on serum and urine three times during pregnancy starting with first prenatal visit. IgM testing may be considered but is not routinely recommended. If done, IgM testing may be performed concurrently with NAT testing.

3. Pregnant women with NO symptoms and with a single exposure event (not ongoing exposure), are not routinely tested but should be carefully assessed for factors that might increase the likelihood of Zika infection (factors are listed at https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Zika.aspx). Testing may be considered if desired and/or at the discretion of the provider.

4. Pregnant women carrying a fetus with ultrasound findings consistent with Congenital Zika Syndrome should be tested to assist in determining the cause of the possible birth defects.

Newborns: Testing is recommended for the following infants:

1. Infants with mothers that have tested positive during this pregnancy.

2. Infants with congenital findings that suggest possible Zika Syndrome, and possible maternal Zika exposure during pregnancy regardless of mom’s prior test results.