

IN THIS ISSUE: Zika Virus Series #7: Zika Update (7) – Recent Updates on Zika

Zika Update (7) – Zika Active Transmission Areas, Diagnostic Tests, and CDC’s Web Tool for Testing Pregnant Women

INTRODUCTION

Between January 1, 2015 and December 14, 2016, there were 4,617 cases of Zika Virus Disease (ZVD) reported in the United States and DC. This does not include cases reported in US territories. A total of 185 cases of locally acquired mosquito-borne ZVD have been reported in Florida and Texas, accounting for 4% of cases reported in the United States. The majority of cases in the US territories are locally acquired. Approximately one quarter of US cases are among pregnant women and 38 cases (~1%) were sexually transmitted. Eighteen cases have been reported in Nevada as of December 14, 2016 and five of them are Washoe County residents. All of them were travel associated. To date, 51 individuals in Washoe County have been tested. This issue of Epi-News will provide a summary of recent updates including the following components:

- 1) Recent updates from CDC regarding changes of designation of Zika active transmission areas in the US;
- 2) Introduction of CDC’s web tool for making decisions in testing pregnant women for Zika;
- 3) Available tests in commercial labs and the Nevada State Public Health Laboratory and updates on laboratory testing from CDC.

ZIKA ACTIVE TRANSMISSION AREAS IN THE UNITED STATES

On August 1 and November 28, 2016, Florida and Texas respectively reported cases of locally acquired mosquito-borne Zika virus infection. As of December 19, 2016, per CDC, all areas previously designated as a “Zika Active Transmission area (Red Area)” are now downgraded to “Zika Cautionary Area (Yellow Area)”. These areas are:

1. Miami-Dade County, Florida
2. Brownsville, Texas

Yellow areas are still considered a risk to pregnant women. Therefore, CDC recommends that pregnant women should consider postponing travel to yellow areas. Pregnant women who lived in, traveled to, or had sex without a condom with someone who lived in or traveled to Yellow Areas after August 1 (FL) or on or after October 29 (TX) should be tested for Zika virus.^{1 2}

CDC’S WEB TOOL – PREGNANCY AND TESTING

In mid-November, CDC developed a web tool which is intended to help public health officials and healthcare providers (HCPs) apply the CDC’s updated recommendations for Zika virus testing,

¹ <https://www.cdc.gov/zika/intheus/florida-update.html>

² <https://www.cdc.gov/zika/intheus/texas-update.html>

interpretation of results, and clinical management for a pregnant woman with possible exposure to Zika virus. The web tool is easy to follow and use. HCPs are highly encouraged to use this web tool to make their decision. If interested, HCPs can add this web tool to their existing institutional website by adding this code: `<div data-cdc-widget="zikaAndPregnancy"></div>` `<script src="https://tools.cdc.gov/1M1B"></script>`. HCPs can also use this link <https://www.cdc.gov/zika/hc-providers/pregnant-woman.html> and simply follow the steps. If you cannot obtain a clear answer for your patient using this web tool, please feel free to consult with Washoe County Health District (WCHD) staff by calling 775-328-2447 or email to Epicenter@washoecounty.us.

AVAILABLE LABORATORY TESTS AT COMMERCIAL LABS AND THE STATE LAB

Test Name	Specimen	LabCorp	Quest	NSPHL
MAC-ELISA	Serum	Yes	Yes	Yes
Zika virus RNA Testing, RT-PCR	Serum, Urine	Yes	Yes	Yes
Plaque-reduction neutralization test (PRNT)	Serum	No	No	Yes (via CDC)
Tests for other specimens such as whole blood, CSF, amniotic fluid, placenta tissue, umbilical cord, etc.				Yes (via CDC)

From February to date, 51 individuals have been tested for Zika virus in Washoe County. Of these, 47 have been approved by WCHD and tested through the Nevada State Public Health Laboratory (NSPHL). HCPs do not have to use the state lab for diagnostic purpose; however, any tests done at NSPHL must be pre-approved by WCHD. **The attached form** must be filled out in order to receive a free test. Even if commercial labs are used, it is still important for HCPs to collect critical epidemiological information. The attached form can be used as an example on what information should be collected.

Three rules of thumb to remember:

- 1) **DO NOT** test any asymptomatic non-pregnant persons even if they have legitimate exposures.
- 2) **DO TEST** all pregnant women with risk exposures regardless of symptoms.
- 3) **DO FAX** test results along with the epidemiological information for pregnant patients to WCHD at 775-328-3764. **DO THIS** even if the result is negative. It is important for WCHD to have a complete list to track.

TEST WILL ONLY BE PERFORMED IF FORM IS FILLED OUT COMPLETELY



WASHOE COUNTY HEALTH DISTRICT
Zika Testing Intake Form
(FOR TESTS PERFORMED BY STATE LAB ONLY)

WCHD CD Program Staff use only
 Patient ID# _____
 Met criteria for testing Y N
 Authorized by _____
 Date ____/____/____

BACKGROUND

Last Name: _____ First: _____
 DOB: ____/____/____ Age: ____ Y Sex: M F U
 Address: _____ City: _____
 State: NV Zip: 89 Phone: (H) _____ (W / C) _____
 PREGNANT? Y N U If patient PREGNANT, how many weeks? _____
 Has the case ever been vaccinated against yellow fever before Y N U
 If YES, date of vaccination? ____/____/____

Race:
 American Indian/Alaskan Native
 Asian/Pacific Islander
 Black
 White
 Other: _____
 Unknown
Ethnicity:
 Hispanic
 Non-Hispanic
 Unknown

CLINICAL AND DIAGNOSTIC INFORMATION

ORDERING CLINICIAN: _____ PHONE #: _____ FAX#: _____

Does the person have symptoms? Y N U
 Symptom onset date: ____/____/____
 Signs and Symptoms: (check all that apply)
 Fever > 37.8C (100F) _____ T max
 Feverish but temperature not taken
 Myalgia (Muscle aches / muscle pain)
 Conjunctivitis (pink eye)
 Arthralgia (joint pain)
 Rash
 Other, specify: _____

Rash details
 (location, itchy, how long did it last)

EPIDEMIOLOGIC RISK FACTORS

Did the patient recently travel (list all the countries visited and dates)?
 Y N U

Which country/countries?	from:	Dates	to:
1. _____	____/____/____	____/____/____	____/____/____
2. _____	____/____/____	____/____/____	____/____/____
3. _____	____/____/____	____/____/____	____/____/____
4. _____	____/____/____	____/____/____	____/____/____
5. _____	____/____/____	____/____/____	____/____/____

Did the patient experience mosquito bites during travel?
 Y N U
 Did the patient have unprotected sex with a person who became symptomatic within 14 days of returning from an endemic country?
 Y N U
 If YES, when (date(s)) did the exposure occur?

If the patient is pregnant, did they have unprotected sex with a person who has traveled to an endemic country? Y N U
 If YES, last date of sexual exposure

Partner's last date of travel and country traveled to?

Does the patient work in a medical or dental field involving direct contact with human blood?
 Y N U

LABORATORY -
 IN ORDER TO RECEIVE THE FREE SCREENING TEST THROUGH THE STATE LAB, PATIENTS CAN GO TO EITHER RENOWN (MAIN LAB) OR SAINT MARY'S FOR SPECIMEN COLLECTION. PLEASE INDICATE WHICH LAB THEY PLAN TO GO TO BELOW AND WHEN.

Renown Saint Mary's
 Date for specimen collection: _____

ALL AREAS MUST BE COMPLETED FOR APPROVAL!!!!