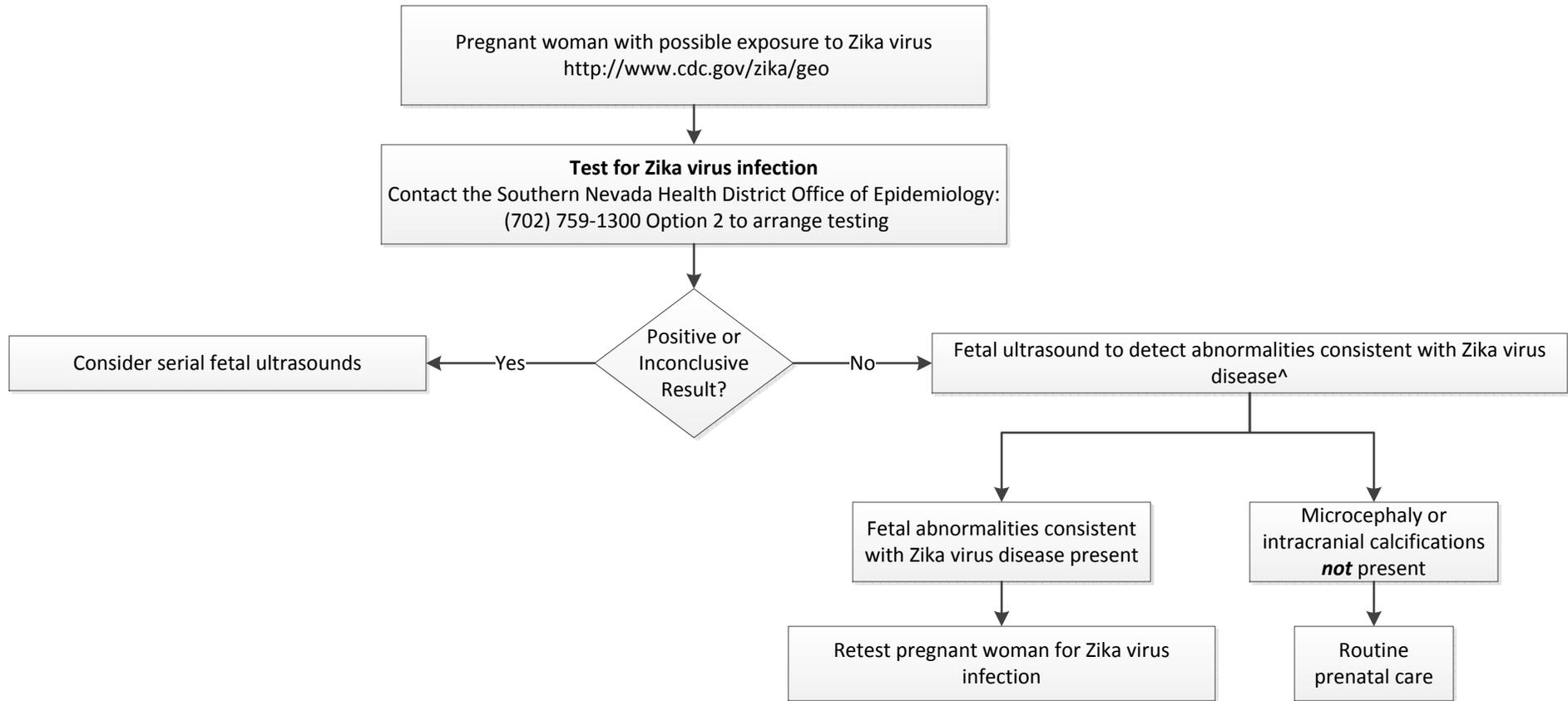




Interim CDC guidance: Zika virus exposure testing algorithm^{*,†,§,¶} for a pregnant woman with possible exposure^{**,***} to Zika virus, not residing in an area with active Zika virus transmission. Updated April 5, 2016.



*Testing is recommended for pregnant women with clinical illness consistent with Zika virus disease, which includes two or more of the following signs or symptoms: acute onset of fever, maculopapular rash, arthralgia, or conjunctivitis during or within 2 weeks of travel. Testing includes Zika virus reverse transcription-polymerase chain reaction (RT-PCR), and Zika virus immunoglobulin M (IgM) and neutralizing antibodies on serum specimens <http://www.cdc.gov/zika/pdfs/denvchikvzikkv-testing-algorithm.pdf>.

†Testing can be offered to pregnant women without clinical illness consistent with Zika virus disease. If performed, testing should include Zika virus IgM, and if IgM test result is positive or indeterminate, neutralizing antibodies on serum specimens. Testing should be performed 2-12 weeks after travel.

§Laboratory evidence of maternal Zika virus infection: 1) Zika virus RNA detected by RT-PCR in any clinical specimen; or 2) positive Zika virus IgM with confirmatory neutralizing antibody titers that are ≥4-fold higher than dengue virus neutralizing antibody titers in serum. Testing is considered inconclusive if Zika virus neutralizing antibody titers are <4-fold higher than dengue virus neutralizing antibody titers.

¶Fetal ultrasounds might not detect microcephaly or intracranial calcifications until the late second or early third trimester of pregnancy.

**Possible exposure to Zika virus includes travel to an area with active transmission of Zika virus (<http://wwwnc.cdc.gov/travel/notices/>) or sex without a condom with a man who traveled to, or resided in, an area with ongoing transmission of Zika virus.

***Testing is not currently recommended for pregnant women with possible sexual exposure to Zika virus if both partners are asymptomatic.

^Fetal abnormalities consistent with Zika virus disease include microcephaly, intracranial calcifications, and brain or eye abnormalities until late second or early third trimester of pregnancy.