Michigan Flowchart: Authorization of Specimens for Zika Virus (ZIKV) Testing

START

Did patient travel to an area with documented Zika virus transmission per CDC’s website? www.cdc.gov/zika

YES

DO NOT test for ZIKV*

NO

Is the patient pregnant?

YES

Did the pregnant patient travel within the past 2-12 weeks (period when IgM testing is indicated)?

YES

Monitor pregnancy according to CDC “Interim Guidelines for Health Care Providers Caring for Pregnant Women and Women of Reproductive Age with Possible Zika Virus Exposure” www.cdc.gov/zika

NO

Travel was > 12 wks ago

YES

Proceed with ZIKV testing.
- Collect serum sample for MDHHS testing

NO

Did the pregnant patient travel within the past 2-12 weeks (period when IgM testing is indicated)?

NO

Travel was > 12 wks ago

YES

Monitor pregnancy according to CDC “Interim Guidelines for Health Care Providers Caring for Pregnant Women and Women of Reproductive Age with Possible Zika Virus Exposure” www.cdc.gov/zika

NO

Was the male partner diagnosed with Zika virus disease or have an illness consistent with Zika*?

YES

NO

*Are one or more of the following present?
- Fever
- Conjunctivitis
- Rash
- Arthralgia
- Guillian-Barre Syndrome (with no known etiology)

YES

NO

Current or recent symptoms* with onset date less than 2-weeks after travel?

YES

NO

Did the patient have unprotected sex with a male partner who had possible Zika exposure?

YES

NO

Did the patient travel to an area with documented Zika virus transmission per CDC’s website? www.cdc.gov/zika

MDHHS, April 2016 (Version 3.0). Adapted from Indiana State Department of Health Flowchart, 02/16.