NON-IMMEDIATE NOTIFICATION

EPIDEMIOLOGY PROGRAM

Event Name:	ZIKA					
Event Time Period:	Lifelong					
Zika Status:	Non-Conger	ngenital Disease				
Clinical criteria (CSTE 2023):	Acut puruGuil	ith one or more of the following not explained by another etiology: atte onset of one or more of the following symptoms: fever (measured or reported), generalized rash, arthralgia, or non- ulent conjunctivitis, illain-Barré syndrome, as of a fetus at greater or equal to 20 weeks gestation.				
Epidemiologic linkage criteria (CSTE 2023):	28 de Labo Rece preg risk o Sexu	sided in or traveled to an area with a risk of Zika virus transmission in the 14 days before the onset of symptoms, in the days before the onset of Guillain-Barré syndrome, or during pregnancy; OR boratory exposure to Zika virus before onset of symptoms or during pregnancy; OR ceipt of blood, blood products, organ transplant, or tissue transplant within 30 days of symptom onset or during egnancy from a person who has either been diagnosed with Zika virus infection or returned from traveling to an area with k of Zika virus transmission; OR xual contact, within 14 days of symptom onset or during pregnancy, with a person who in the last 90 days has either been egnosed with Zika virus infection or has returned from traveling to an area with a risk of Zika virus transmission.				
CSTE Event	Confirmed	Meets clinical criteria AND meets the following laboratory criteria:				
Classification (2023):		 Detection of Zika virus, viral antigen, or viral RNA in a body fluid or tissue; OR Detection of anti-Zika virus IgM antibodies in blood or CSF, with positive Zika virus-specific neutralizing antibody titers and negative neutralizing antibody titers against dengue or other flaviviruses endemic to the region where exposure occurred. 				
		AND has at least one of the epidemiologic linkages above.				
	Probable	 Meets clinical criteria AND meets the following laboratory criteria: Detection of anti-Zika virus IgM antibodies in blood or CSF with a negative anti-dengue virus IgM antibody test in the same specimen with no neutralizing antibody testing performed; OR Four-fold or greater rise in anti-Zika virus-specific neutralizing antibody titers in paired blood specimens; OR In the setting of a Zika virus outbreak with minimal circulation of other endemic flaviviruses, detection of anti-Zika virus IgM antibodies in blood or CSF AND has at least one of the epidemiologic linkages above. 				
Massachusetts Event		Follows the CSTE event classification				
Classification (2016):	Probable	bable Follows the CSTE event classification				
	Suspect Individual who would otherwise meet the confirmed or probable Zika non-congential disease case definition a confirmed or probable Dengue event exists which has been determined to be the primary cause of illness.					

ZIKA VIRUS (continued)

Zika Status:	Congenital Disease				
Clinical Description (CSTE 2023):	To meet the clinical criteria for congenital Zika virus disease, the liveborn infant must not have an identified genetic or other cause for the findings, including a positive test for another likely etiology, and should have one or more of the following brain or eye anomalies or neurological sequelae specific for congenital Zika virus disease and typically identifiable in the neonatal period:				
	 microcephaly (occipital frontal circumference >2 standard deviations below the mean for age and sex) at birth or postnatal onset, 				
	cortical hypoplasia or abnormal gyral patterns (polymicrogyria, lissencephaly, heterotopia),				
	• increased volume of cerebrospinal fluid (CSF) (hydrocephalus ex vacuo, unspecified hydrocephalus, ventriculomegaly) due to loss of brain parenchyma,				
	intracranial calcifications (most commonly between the cortex and subcortex),				
	congenital contractures of major joints (arthrogryposis) associated with structural brain anomalies,				
	congenital paralysis of the diaphragm associated with structural brain anomalies,				
	corpus callosum agenesis/hypoplasia,				
	• cerebellar hypoplasia,				
	• scarring of the macula with coarse deposits of pigment in the retina (focal retinal pigmentary mottling),				
	other structural eye anomalies (microphthalmia, cataracts, chorioretinal atrophy, optic nerve hypoplasia).				
Epidemiologic linkage criteria (CSTE 2023):	• Resided in or traveled to an area with a risk of Zika virus transmission in the 14 days before the onset of symptoms, in the 28 days before the onset of Guillain-Barré syndrome, or during pregnancy; OR				
, , ,	Laboratory exposure to Zika virus before onset of symptoms or during pregnancy; OR				
	 Receipt of blood, blood products, organ transplant, or tissue transplant within 30 days of symptom onset or during pregnancy from a person who has either been diagnosed with Zika virus infection or returned from traveling to an area with risk of Zika virus transmission; OR 				
	• Sexual contact, within 14 days of symptom onset or during pregnancy, with a person who in the last 90 days has either been diagnosed with Zika virus infection or has returned from traveling to an area with a risk of Zika virus transmission.				

MDPH Case Classification Manual Zika virus infections

CSTE Event	Confirmed	An infant that meets the clinical criteria AND				
Classification (2023):		 meets one of the following laboratory criteria Detection of Zika virus, viral antigen, or viral RNA in infant CSF, blood, urine, or postmortem tissue; OR Detection of anti-Zika virus IgM antibodies in infant CSF or blood, with positive anti-Zika virus-specific neutralizing antibody titers. 				
		 AND whose gestational parent meets epidemiologis linkage criteria, OR confirmatory laboratory criteria for non-congential Zika virus disease during this pregnancy. 				
Probable		An infant that meets the clinical criteria AND meets one of the following laboratory criteria • Detection of Zika virus, viral antigen, or viral RNA in amniotic fluid, placenta, umbilical cord, or cord blood;				
		 OR Detection of anti-Zika virus IgM antibodies in infant CSF or blood with no neutralizing antibody testing performed. 				
		 AND whose gestational parent meets epidemiologis linkage criteria, OR confirmatory laboratory criteria for non-congential Zika virus disease during this pregnancy. 				
Massachusetts Event Classification (2016):		CSTE event classification				

ZIKA VIRUS (continued)

Report Type	Test Type	Source	Result	New event or beyond report period?	Data Entry				
Laboratory report for Zika virus	PCR	Serum, urine, CSF, tissue, amniotic fluid, semen or	Positive	Yes	New event SUSPECT				
	7:1 DNA	saliva		NO	Same event				
	Zika RNA xxx Ql PCR								
Laboratory report for Zika virus	Plaque Reduction Neutralization	Serum or CSF	Positive (if value given, note in Result Value field)	Yes	New event SUSPECT				
	Test (PRNT)			No	Same event				
	Zika AB xxx	Zika AB xxx Ql Nt							
Laboratory report for	ELISA	Serum or	Positive	Yes	New event				
Zika virus		CSF			SUSPECT				
				No	Same event				
Select (IgM specific):	Zika IgM Titr xxx ELISA								
Select (IgG specific):	Zika IgG Titr xxx ELISA								
Laboratory report	NAT or	Whole	Zika virus reactive, Positive		New event				
these are seen on	Transcription	blood or	·	Yes	SUSPECT				
American Red Cross	mediated	serum							
results	amplification (TMA) assay			No	Same event				
	Transcription mediated amplification (TMA) assay								

Data entry note: When entering Zika virus test results, also include any results (positive, negative, indeterminate, inconclusive or equivocal) listed for Dengue and Chikungunya virus.