June 28, 2016

Dear Colleagues,

We are writing with an important request about expanded surveillance for Zika virus infection in your patient populations. With the onset of mosquito season in Maryland, we need your help in preventing and detecting local transmission of Zika virus by mosquitoes.

We strongly encourage you to consider Zika virus infection in your differential diagnosis for any patients, including those who have not traveled to Zika endemic areas, with any combination of the four major symptoms of Zika virus infection: fever, rash (particularly if maculopapular and pruritic), non-purulent conjunctivitis, and arthralgias.

Given that these symptoms, even in combination, are relatively non-specific, we are aware that this guidance could lead to significant increases in requests for Zika testing. Therefore, we urge you to exercise your clinical judgment in deciding whether to request additional Zika virus testing for such patients. For example, febrile rash illnesses are much more common in children than in adults and are thus less likely to represent Zika virus infection. Similarly, if alternative, more likely explanations for an adult patient’s symptoms exist, there is likely no need to pursue Zika virus testing as part of a first-line diagnostic workup. If you think further diagnostic testing for Zika virus infection is warranted, please contact your local health department to request testing approval. We are available and very willing to discuss specific cases with you if needed.


Please don’t hesitate to contact the DHMH Zika Team at (410) 767-6700 with any questions or concerns.

Sincerely,

Richard B. Brooks, MD, MPH
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