August 24, 2016

Dear Colleague,

Since January 2016, we have identified 64 cases of lab-confirmed Zika virus infection in travelers returning to Maryland from Zika endemic areas, including Miami, Florida. To date, we have not identified any cases of locally transmitted mosquito-borne Zika virus infections in Maryland.

Today, we are writing to notify you of two new documents recently released by the Centers for Disease Control and Prevention (CDC) that contain important Zika-related information, which your patients may ask you about:

1) **Updated Interim Guidance for the Evaluation and Management of Infants with Possible Congenital Zika Virus Infection — United States, August 2016**

This document provides important information for clinicians providing care to infants born to women who have possibly been exposed to Zika virus while pregnant and who will be followed as part of the United States Zika Pregnancy Registry (USZPR). We encourage you to read the document, available at [http://www.cdc.gov/mmwr/volumes/65/wr/pdfs/mm6533e2.pdf](http://www.cdc.gov/mmwr/volumes/65/wr/pdfs/mm6533e2.pdf) in full.

In response to this updated guidance, we are changing the following processes with regard to evaluation of infants with possible congenital Zika virus infection:

- For infants whose mothers have completed Zika testing, including PRNT, and have been found to have confirmed Zika virus infection or unspecified flavivirus infection:
  - The infant should have a peripheral serum sample and urine collected **within 2 days of birth** and sent to DHMH Laboratories Administration for Zika testing.
  - Cord blood should no longer be collected for testing.
  - The infant should have a head ultrasound performed prior to discharge, regardless of any infant testing results or prior prenatal imaging results.
  - The infant should have routine hearing screening performed prior to discharge.

- For infants whose mothers have not yet completed Zika testing, including PRNT:
  - Placenta and infant serum and urine specimens should be collected **within 2 days of birth** and held by the collecting facility until the mother’s results are available.
  - Cord blood should no longer be collected for testing.
  - Head ultrasound can be deferred until the mother’s results are available.
The need for additional vision and hearing testing **within 2 weeks of birth** will depend on the infant’s Zika test results.

For infants with abnormalities consistent with congenital Zika virus infection, regardless of whether the mother has a known Zika exposure, infant serum and urine should be submitted to DHMH. These can be submitted even if the mother’s results are not yet available. Additional infant testing is recommended as outlined in the guidance document.

Pregnant women who have confirmed Zika virus infection will no longer need to have placental specimens collected at the time of delivery. Women who have been classified as having unspecified flavivirus infection will **still need placental testing performed to aid in a maternal Zika diagnosis**.

2) **HAN-00394: CDC Expands Guidance for Travel and Testing of Pregnant Women, Women of Reproductive Age, and Their Partners for Zika Virus Infection Related to Mosquito-borne Zika Virus Transmission in Miami-Dade, Florida**

On Friday, August 19, 2016, the CDC released a Health Advisory in response to the identification of five new cases of Zika virus infection likely transmitted locally by mosquitoes in a 1.5-square-mile section of Miami Beach, Florida. We encourage you to read the full text of the advisory, available at [http://emergency.cdc.gov/han/han00394.asp](http://emergency.cdc.gov/han/han00394.asp). Recommendations in the advisory include the following:

- Pregnant women should avoid travel to the designated area of Miami Beach ([http://www.cdc.gov/zika/intheus/florida-update.html](http://www.cdc.gov/zika/intheus/florida-update.html)), in addition to the previously designated area of Wynwood, both located in Miami-Dade County.

- Women and men who have traveled to the designated area of Miami Beach since July 14, 2016, should be aware of active Zika virus transmission, and those who have a pregnant sex partner should consistently and correctly use condoms or other barriers to prevent infection during sex or not have sex for the duration of the pregnancy.

- Pregnant women and partners of pregnant women who are concerned about potential Zika virus exposure may also consider postponing nonessential travel to all parts of Miami-Dade County.

In Maryland, pregnant women regardless of symptoms and non-pregnant symptomatic persons with travel to Florida since June 15, 2016 will be considered for Zika virus testing according to previously released testing algorithms. We continue to advise all Maryland residents to follow recommendations to avoid mosquito bites and to protect themselves from sexually transmitted infections, including Zika virus, by using condoms or other barrier methods during sex.

Please continue to contact the DHMH Zika Team at (410) 767-6700 with any questions or concerns. We appreciate your attention to this evolving and important matter.
Sincerely,

Richard B. Brooks, MD, MPH
Maryland Department of Health and Mental Hygiene
Epidemic Intelligence Service Officer, Centers for Disease Control and Prevention