The first local mosquito-borne Zika virus transmission in the continental United States has recently been identified in a specific region in Miami, FL (delineated area: http://www.cdc.gov/zika/intheus/florida-update.html). The Illinois Department of Public Health (IDPH) is issuing guidance put forth by the Centers for Disease Control and Prevention (CDC) for travel and testing of pregnant women and women of reproductive age who lived in, or traveled to, this area after June 15, 2016. The travel and testing recommendations are detailed below.

**Recommendations for Testing Pregnant Women and Women of Reproductive Age who Traveled to Miami-Dade County, FL**

- Pregnant women should avoid non-essential travel to the area with active Zika virus transmission identified by the Florida Department of Health (FL DOH).

- Pregnant women and their partners living in, or traveling to, the area with active Zika virus transmission identified by the FL DOH should follow steps to prevent mosquito bites (http://www.cdc.gov/zika/prevention/prevent-mosquito-bites.html).

- Women and men who live in, or who have traveled to, the area with active Zika virus transmission identified by the FL DOH (Miami, FL) and 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.

- Women and men with limited risk and who do not report signs or symptoms consistent with Zika virus disease should wait at least eight weeks after last possible exposure to attempt conception.
• All pregnant women in the United States should be assessed for possible Zika virus exposure during each prenatal care visit. Women with ongoing risk of possible exposure include those who live in or frequently travel to the area with active Zika virus transmission identified by the FL DOH. Women with limited risk include: 1) those who traveled infrequently to the area with active Zika virus transmission identified by the FL DOH, or 2) had sex with a partner who lives in or traveled to the area with active Zika virus transmission without using condoms or other barrier methods to prevent infection. Each evaluation should include an assessment of signs and symptoms of Zika virus disease (acute onset of fever, rash, arthralgia, conjunctivitis) and travel histories, as well as sexual partners’ potential Zika virus exposures AND history of any illness consistent with Zika virus disease, to determine whether Zika virus testing is indicated.

• Pregnant women with possible exposure to Zika virus and signs or symptoms consistent with Zika virus disease should be tested for Zika virus infection based on time of evaluation relative to symptom onset in accordance with CDC guidance (http://www.cdc.gov/mmwr/volumes/65/wr/mm6529e1.htm?s_cid=mm6529e1_e).

Local health departments can approve Zika testing at IDPH’s Chicago Laboratory for pregnant women who traveled, or had sex with someone who traveled, to the specified area in Florida after June 15, 2016. Authorization for testing also can be given for symptomatic persons (2 or more symptoms), male or female, who traveled to this area during the specified time frame. Commercial laboratory testing for Zika virus is also available for this and other circumstances where Zika testing is indicated.

As the CDC learns more about the epidemiologic trends in distribution, transmission, and effects of mosquito abatement efforts, these recommendations are subject to change, and new areas of active Zika virus transmission may be identified. For updated information on locally acquired cases, please check the CDC website (http://www.cdc.gov/zika/geo/united-states.html).