When determining whether to test a pregnant woman for Zika virus and what the test results mean:

- It is important to ascertain whether a woman had exposure to Zika virus before the current pregnancy because Zika virus immunoglobulin M (IgM) antibodies can be detected for months after an infection. A positive Zika virus IgM result could indicate antibodies from infection before the current pregnancy, thus limiting the ability to distinguish between an infection that occurred before the current pregnancy and one that occurred during the current pregnancy.
- It is important to ascertain whether a woman had exposure to flaviviruses other than Zika virus before the current pregnancy because a positive IgM result might have been caused by cross-reactivity from a previous flavivirus exposure.
- Obstetrician-gynecologists and other health care providers and counselors should provide appropriate pretest counseling to inform decisions on whether to test; Zika virus test results should be interpreted within the context of known limitations.
- A negative Zika virus IgM test result, if performed during the recommended time frame, in the setting of a negative Zika virus nucleic acid test (NAT) result, provides some reassurance of absence of Zika virus infection during the current pregnancy. However, a negative Zika virus IgM test result should be interpreted within the context of the limitations of the assay.
- When plaque reduction neutralization testing (PRNT) is indicated and performed during the recommended time frame, a negative PRNT result in the setting of a negative NAT result indicates that there is no laboratory evidence of Zika virus infection.