

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.