

Note: this document was published in 2016 and is not being maintained or updated.

Zika Virus Planning Considerations for Healthcare Facilities and Coalitions

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Introduction

The intent of this document is to highlight some of the anticipated hospital and healthcare system planning issues essential to caring for suspect Zika cases, complicated Zika cases, pregnancies associated with Zika virus infection, and children born to Zika-infected mothers who have birth defects that may be associated with Zika virus infection.

This document will be best utilized in conjunction with [appropriate education for providers on recognition and treatment of Zika virus and its complications](#), and information for the public regarding prevention and recognition of Zika virus infection. This document addresses diagnostic and acute care needs; the long term consequences and management of children and families with Zika-related complications will involve ongoing, specialized inpatient and outpatient resources. Hospitals and healthcare facilities should consider the following issues when developing a Zika virus plan and responding to potential or confirmed Zika virus cases.

Sporadic travel-associated cases in a community may require a nominal response by a healthcare coalition (HCC) but sustained local transmission of cases will require enhanced coordination activities between public health and the healthcare system.

Facility Planning Considerations:

- Ensure all health care personnel follow Standard Precautions for all patient care.
<http://www.cdc.gov/hicpac/pdf/isolation/Isolation2007.pdf>
- Ensure health care providers caring for pregnant women are aware of the requirement for Standard Precautions to be used for labor and delivery care; provide ongoing education and training for health care personnel on the principles and rationale for use of Standard Precautions and use of specific PPE help ensure that infection control policies and procedures are understood and followed.
<http://www.cdc.gov/mmwr/volumes/65/wr/mm6511e3.htm>
- Assure health plan telephone support ('triage') lines are prepared to refer potentially infected patients to their primary care or obstetrics provider for further evaluation.

- Create referral algorithm for suspect cases presenting to outpatient and emergency department settings.
- Assure protocol is in place for sample collection and submission of samples to health laboratory.
- Assess Zika risk for all pregnant patients, and ensure clinicians know how and where to get Zika testing done for their patients.
 - Ensure that pregnancies with positive testing are considered for inclusion in the US Zika Pregnancy Registry (for more information, refer to CDC's US Zika Pregnancy Registry website located at <http://www.cdc.gov/zika/hc-providers/registry.html>).
- In high risk areas, be alert to patients with signs and symptoms consistent with Zika virus infection, both in inpatient areas and in the ED/Urgent Care setting ([Sample Hospital Protocol for Suspected Zika Virus](#)).
- Assure discharge instructions include recommendations for safe sexual practices for suspect cases and the need for evaluation of any pregnant sexual partners.
- Ensure the ability to meet increased demand for the following healthcare services in parallel with cases in the area:
 - Testing and counseling of pregnant women with Zika virus infection.
 - Increased need for serial ultrasound and other perinatal testing and counseling.
 - A surge in babies born to women with Zika virus infection, if there are a significant number of cases in your area.
 - Babies born with microcephaly or acute neurological needs.
 - Psychological care of women/families who give birth to a child with complications related to Zika virus.
 - Guillain-Barre Syndrome.
- Ensure planning to meet increased demand on the following services during periods of local transmission (for at-risk areas):
 - Information about testing and treatment.
 - Increased presentations of patients with minor viral syndromes requesting evaluation/testing that may place surge demands on clinics and emergency departments depending on local circumstances.
 - Increased demand for contraceptives / family planning services.
 - Information for providers and patients about home actions that can be taken to control vectors / safely prevent bites.
 - Increased demand on perinatal / obstetric provider outpatient appointments.

- Access ASPR/TRACIE [Maternal-Fetal Health Planning Resource](#).
- Access ASPR/TRACIE [Guillain-Barre Syndrome and other Neurological Deficits Planning Resource](#).

Consultation and Referral Considerations:

- Ensure awareness of symptoms and access to consultation and referral centers.
- Ensure availability, either on site or by referral, of key resources needed for children born with possible congenital Zika virus infection:
 - Otoacoustic emissions testing equipment and/or auditory brainstem response testing equipment
 - Computerized tomography scan
 - Magnetic resonance imaging
 - Electroencephalogram
 - Cranial Ultrasound
 - Ophthalmologic evaluation
 - Social services consultation to facilitate on-going care requirements, whether at home or facility-based
 - Pediatric specialty care consultations and referrals, including neurology, rehabilitation, and neurocognitive testing and evaluation capabilities, neuro-ophthalmology, genetics, etc.

Coalition Planning Considerations:

- Utilize healthcare coalitions (HCCs), and other existing networks, to facilitate regional dissemination of guidance documents, identify local subject matter experts (SMEs) and coordinate risk communications among the HCC's members.
 - Promote consistency of information and talking points to the media.
 - Promote consistency of information, patient education, and testing (including sample handling) by healthcare entities.
 - Identify indicators that would prompt the establishment of an incident action plan focused on the coordination of Zika response in the community, such as local transmission of cases.
- Assess availability of essential assets and services.
 - Optimize referral coordination for the management of complications of Zika virus infection (e.g., consider specialty center referral or regionalization of care delivery).
 - Access ASPR/TRACIE [Supporting Children with Special Healthcare Needs Planning Resource](#).

- During periods of local transmission:
 - Provide information coordination.
 - Assist with common language and referral for telephone inquiries by suspect cases.
 - Support hotline and additional information dissemination needs of the population.
 - Assure augmented capacity for testing.
 - Develop situational assessments based on case reporting and engage in information sharing with:
 - Other health care organizations within the HCC or other networks.
 - Public health agencies.
 - Emergency management agencies.
 - Clinician communications, with an emphasis placed on ensuring that all staff are aware of the [current protocols](#) used for Zika virus diagnosis, referral, and precautions.