Testing Virginia Residents for Zika Virus

**2,294** Virginia Residents being Tested for Zika Virus Infection between 1/29/2016 and 1/25/2017*

### Virginia Residents being Tested by Region

- Central: 9%
- Eastern: 4%
- Northern: 15%
- Northwest: 16%
- Southwest: 56%

### Sex and Pregnancy Status§

<table>
<thead>
<tr>
<th>Sex and Pregnancy Status §</th>
<th>Num</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>263</td>
<td>11</td>
</tr>
<tr>
<td>Female</td>
<td>2,031</td>
<td>89</td>
</tr>
<tr>
<td>Pregnant</td>
<td>1,782</td>
<td>88</td>
</tr>
<tr>
<td>Non-pregnant</td>
<td>249</td>
<td>12</td>
</tr>
</tbody>
</table>

### Disease Case Status†

<table>
<thead>
<tr>
<th>Disease Case Status †</th>
<th>Num</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Confirmed/Probable Case</td>
<td>113</td>
<td>5</td>
</tr>
<tr>
<td>Not a case</td>
<td>1,943</td>
<td>85</td>
</tr>
<tr>
<td>Test results pending</td>
<td>238</td>
<td>10</td>
</tr>
</tbody>
</table>

* This excludes 125 (5%) Virginia residents who were approved for, but then declined testing
† Case status is based on [CSTE’s revised interim case definitions](https://www.cste.org/)
§ If pregnancy status was unknown, then pregnancy status was classified as non-pregnant.
Mosquito Testing

<table>
<thead>
<tr>
<th>County/City</th>
<th>Total Pools Tested</th>
<th>Total Mosquitoes Tested</th>
<th>Zika Positive Pools</th>
<th>Mosquito Species Tested</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accomack Co.</td>
<td>2</td>
<td>83</td>
<td>0</td>
<td>Aedes albopictus</td>
</tr>
<tr>
<td>Alexandria</td>
<td>212</td>
<td>6,435</td>
<td>0</td>
<td>Aedes albopictus</td>
</tr>
<tr>
<td>Chesapeake</td>
<td>98</td>
<td>3,675</td>
<td>0</td>
<td>Aedes albopictus</td>
</tr>
<tr>
<td>Chesterfield Co.</td>
<td>17</td>
<td>742</td>
<td>0</td>
<td>Aedes albopictus</td>
</tr>
<tr>
<td>Fairfax Co.</td>
<td>459</td>
<td>12,275</td>
<td>0</td>
<td>Aedes albopictus</td>
</tr>
<tr>
<td>Hampton</td>
<td>72</td>
<td>2,571</td>
<td>0</td>
<td>Aedes albopictus</td>
</tr>
<tr>
<td>Hanover Co.</td>
<td>2</td>
<td>58</td>
<td>0</td>
<td>Aedes albopictus</td>
</tr>
<tr>
<td>Henrico Co.</td>
<td>123</td>
<td>5,434</td>
<td>0</td>
<td>Aedes albopictus</td>
</tr>
<tr>
<td>Newport News</td>
<td>38</td>
<td>1,512</td>
<td>0</td>
<td>Aedes albopictus</td>
</tr>
<tr>
<td>Norfolk</td>
<td>109</td>
<td>4,418</td>
<td>0</td>
<td>Aedes albopictus</td>
</tr>
<tr>
<td>Northampton Co.</td>
<td>1</td>
<td>25</td>
<td>0</td>
<td>Aedes albopictus</td>
</tr>
<tr>
<td>Orange Co.</td>
<td>2</td>
<td>66</td>
<td>0</td>
<td>Aedes albopictus</td>
</tr>
<tr>
<td>Portsmouth</td>
<td>19</td>
<td>745</td>
<td>0</td>
<td>Aedes albopictus</td>
</tr>
<tr>
<td>Prince William Co.</td>
<td>201</td>
<td>8,130</td>
<td>0</td>
<td>Aedes albopictus</td>
</tr>
<tr>
<td>Richmond City</td>
<td>29</td>
<td>1,223</td>
<td>0</td>
<td>Aedes albopictus</td>
</tr>
<tr>
<td>Suffolk</td>
<td>120</td>
<td>5,873</td>
<td>0</td>
<td>Aedes albopictus</td>
</tr>
<tr>
<td>Virginia Beach</td>
<td>109</td>
<td>3,620</td>
<td>0</td>
<td>Aedes albopictus</td>
</tr>
<tr>
<td>Winchester</td>
<td>1</td>
<td>28</td>
<td>0</td>
<td>Aedes albopictus</td>
</tr>
<tr>
<td>York Co.</td>
<td>29</td>
<td>892</td>
<td>0</td>
<td>Aedes albopictus</td>
</tr>
<tr>
<td><strong>Total <em>Ae. albopictus</em> tested</strong></td>
<td><strong>1643</strong></td>
<td><strong>57,805</strong></td>
<td>0</td>
<td></td>
</tr>
<tr>
<td><em><em>Other Mosquito Species (Cx. salinarius</em>) Tested</em>*</td>
<td><strong>2</strong></td>
<td><strong>68</strong></td>
<td>0</td>
<td></td>
</tr>
</tbody>
</table>

*Note: Cx. salinarius has never been associated with Zika virus transmission*

*This data represents mosquito pool testing that is conducted by three different laboratories including Virginia’s Division of Consolidated Laboratory Services (DCLS), the Fairfax County Health Department’s Public Health Laboratory, and a laboratory at George Mason University. These tested mosquito pools were collected as part of mosquito surveillance efforts at sites throughout the state either by local mosquito control programs, or by the Virginia Department of Health mosquito surveillance personnel. These results do not represent statewide mosquito surveillance efforts, and are only representative of mosquito activity detected at the surveyed sites. The Division of Environmental Epidemiology (DEE) compiles data received from its partners*
Task Force Members

- Deputy Chief of Staff, Office of the Governor
- Secretary of Veterans’ and Military Affairs
- Department of Emergency Management
- Department of Health
- Department of Health Professions
- Department of Behavioral Health & Developmental Services
- Department of Agriculture and Consumer Services
- Department of Environmental Quality
- Department of Education / State Council of Higher Education for Virginia
- Department of General Services - Division of Consolidated Laboratory Services
- Department of Transportation
- Departments of Conservation and Recreation/Forestry/Game and Inland Fisheries
- Virginia Mosquito Control Association
- Virginia Hospital and Healthcare Association / 6 regional coalitions
- Medical Society of Virginia
- City, Town and County Governments
  - Virginia Municipal League
  - Virginia Association of Counties
- American Red Cross / Virginia Blood Services
- Others, situationally dependent, as required
Zika Task Force Initiatives

- Human surveillance & epidemiological investigations
- Amplified vector surveillance & control activities
- ArboNET reporting coordination
- Screening & monitoring of travelers or local transmission cases
- Clinician outreach enhancements
- Risk communications support
- Management of mosquito abatement districts
- Clinical lab specimen transport
- Laboratory testing, diagnostics, supplies, training
- Biosafety & security enhancements
- Coordination of partnerships with maternal/fetal & birth defects organizations
Task Force / Incident Management Team Activities

- **Task Groups:**
  - Maternal / Fetal Health
  - Vector Surveillance / Control
  - External Communications
  - Human Surveillance
  - Laboratory Diagnostics
  - Blood Supply Security
  - Clinician Outreach

- **Ongoing Actions**
  - Blood Supply: all collections must be tested
  - Draft Emergency Order: Access to property
  - State Funding Access / No additional federal funding announced to date.
  - State Plan Posted on VDH Zika page.
  - Three Zika Exercises conducted at the state and local levels
  - Situation Reports 2X month (on-hold until situation warrants)
  - State and local Playbooks developed citing immediate actions if local transmission is identified
Additional Progress

• Lab Capability / increased capacity at DCLS, Fairfax Health Department, George Mason University
  – DCLS supporting OH and WV
  – Weekly test result reporting
• Weekly reporting of human and mosquito surveillance
• Mosquito Control Contracting with private vendors
• MOU with VA. Tech for vector surveillance and resistance
• Distributed 10K Education Tool Kits (literature, repellant, condoms); prepared to distribute additional repellant to target groups.
• Monthly Meetings with State Zika task Force and Clinician Outreach Work Group
• Establishment / maintenance of State Pregnancy Registry
• Communications Progress: Airports, Locally Distributed Printed Materials, Social Media, VDH Zika Web Page / Dark Site, Radio, Bus Signage, Direct Mailing, etc.
Chikungunya, Dengue, and Zika Cases in Virginia

* 43 cases of Zika for 2015 and 2016 as of 7/19/16

All cases are Travel-Associated
Virginia Jurisdictions with Mosquito Surveillance Capability, Medicaid Births by County and Weighted Population Density

- Mosquito Surveillance and Arboviral Testing
- Mosquito Surveillance Only

2014 Medicaid Births
- 5 - 137
- 138 - 423
- 424 - 776
- 777 - 1682
- 1683 - 3323

Population Weighted by Census Tract
- Very Low
- Low
- Below Average
- Average
- Above Average
- High
- Very High
Mosquito Control/Surveillance In Virginia

Local Programs whose efforts are driven by mosquito surveillance and arboviral testing:

• Alexandria City (Environmental Health)
• Fairfax County (Environmental Health)
• Prince William County (Public Works)
• Henrico County (Public Works)
• Chesapeake
• Hampton (Public Works)
• Norfolk (Environmental Health)
• Suffolk (Public Works)
• Virginia Beach (Public Works)

Localities with some mosquito control actions/some mosquito surveillance but do NOT do arboviral testing:

• Gloucester County (Public Works)
• Portsmouth City (Public Works)
• Newport News (Public Works)
• Poquoson City (Public Works)
• York County (Public Works)

Military installations that have mosquito control capabilities and conduct some surveillance:

• Fort Belvoir (Fairfax Co.)
• Fort Myer (Arlington Co.)
• The Pentagon (Arlington Co.)
• Fort Eustis (Newport News)
• Langley Air Force Base (Hampton)
Planned actions for response to local mosquito-borne transmission

- Notify SHHR and Governor’s Office
- Initiate public health actions:
  - Establish limits of affected area
  - Communicate the area of risk to the public (may include establishing a “travel guidance area” and/or testing and prevention recommendations)
  - Enhance human illness case surveillance
  - Intensify mosquito surveillance (and control if indicated by surveillance)
  - Notify vector control partners; initiate Vector control as indicated by mosquito data
  - Notify blood services partners to assure blood safety
  - Governors Press Briefing
  - Intensify public education/communications – focus to ensure pregnant women and health care providers caring for pregnant women are informed
- Coordinate CDC support
- Executive action
Zika Pregnancy Registry

Purpose of registry:
Monitor pregnancy and infant outcomes following Zika virus infection during pregnancy and inform clinical guidance and public health response

How it works:
Supplemental surveillance effort coordinated by CDC and dependent on voluntary collaboration of state, tribal, local, and territorial health departments

Who is included:
Pregnant women with lab evidence of Zika virus infection and exposed infants born to these women; infants with laboratory evidence of congenital Zika virus infection and their mothers
The Zika Clinician Outreach Task Group will be composed of clinician specialists, including obstetrician/gynecologists, neurologists, pediatricians and infectious disease specialists who will collaborate with the Virginia Department of Health on the investigation and reporting of pregnant women and infants with laboratory evidence of Zika virus infection and work to assure regional capacity to diagnosis and manage adults, particularly pregnant women, and infants with Zika virus infection.
Virginia Jurisdictions with Mosquito Surveillance Capability and Medicaid Birth Rates per 1,000 Females Ages 15-45 Years

Legend
- Mosquito Surveillance and Arboviral Testing
- Mosquito Surveillance Only

2014 Medicaid Birth Rates
- 0.00 - 10.00
- 10.01 - 20.00
- 20.01 - 30.00
- 30.01 - 40.00
- 40.01 - 50.00
- 50.01 - 60.00

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Public Messaging/Communication

VDH VIRGINIA DEPARTMENT OF HEALTH
To promote and protect the health of all Virginians

ZIKA VIRUS
What You Need to Know
LEARN MORE

For more Information contact your local health department.
www.ZikaVA.org
Roanoke Airport

Traveling to an area with Zika?
Learn how to protect yourself from Zika.
Visit ZikaVA.org
Bon Voyage!

VDH VIRGINIA DEPARTMENT OF HEALTH
Zika Prevention Kits