



Kentucky Public Health
Prevent. Promote. Protect.

Instructions for Zika IgM Specimen Collection and Shipping

Call 502-564-3261 during business hours to receive an approval number. Please order Zika IgM test for a patient with a travel history to a [Zika-affected area](#) two to twelve weeks prior to the specimen collection date, regardless of symptoms. If you have questions regarding appropriate testing, please call 502-564-3261.

If you have access to OUTREACH, please order Zika IgM by ordering MVS. (Preferred method) Please enter approval number as the chart number in OUTREACH. Please send print out copy of requisition and submit with the specimen.

If you do not have access to OUTREACH, please complete the [Viral Isolation and Immunology Submission Form](#) and submit with specimen. Please write the approval number at the top of the page.

For Zika IgM test, patient should have possible exposure to Zika virus two to twelve weeks prior to specimen collection:

- Please write 'ZIKV' in Box titled "Other" located under the title header of "Serology" and under ARBOVIRUSES enter the collection date of specimen in the line to the right of "Serum"
- Under CLINICAL DATA Box - "Purpose of request" – Mark "antibody status"

Please send the requisition from OUTREACH or completed submission form with the specimens to Division of Laboratory Services.

Results for Zika typically take one week if all testing can be performed at Division of Laboratory Services (DLS) in Frankfort.

Please do not send specimens to arrive at DLS on weekends. CDC does not accept specimens on the weekend and DLS prefers to receive specimens during business hours in order to maintain integrity of the specimen. **It is preferred to collect labs, spin down the blood, and refrigerate until approval is obtained during business hours.** Also, remember to check the expiration dates on the blood tubes. DLS has recently received specimens in expired tubes.

Collect and send two tubes of blood.

- **Collect two SST tubes, spin down the blood, and ship the tubes on cold pack** to state lab (address below)

Overnight blood and completed OUTREACH/LAB Submission form to following address:

**Kentucky Division of Laboratory Services
ATTN: Virology
100 Sower Blvd Ste # 204
Frankfort KY 40601**

If you have any questions please contact Shelley @ 502-564-3261 EXT 4242 @ KDPH or Matthew or Leigh Ann @ DLS 502-564-4446.