

This summary was provided by the Centers for Disease Control and Prevention to state health officials, state epidemiologists, state maternal and child health leads, and key local health department officials in the continental United States and Hawaii on Friday, June 10, 2016 to introduce the *CDC Zika Response Plan*.

### Summary of Interim CDC Zika Response Plan (CONUS and Hawaii) (as of June 9, 2016)

#### Purpose

The purpose of the CDC Zika Response Plan (response plan) document is to describe the Centers for Disease Control and Prevention (CDC) response activities for the first locally acquired cases of Zika virus infection in the continental United States and Hawaii.

The Zika virus is spread to people primarily through the bite of an infected mosquito (*Aedes aegypti* or *Aedes albopictus* species). The response activities outlined in the plan are based on currently available knowledge about Zika virus and its transmission; these activities may change as more is learned about Zika virus infection. Much of the current plan focuses on response activities that would occur after locally acquired Zika virus transmission is suspected or confirmed.

CDC's Zika response plan is based on key assumptions:

- Travel-associated and sexually-transmitted cases will continue to occur and are likely to increase.
- Local transmission (spread) of Zika virus in US territories and affiliated Pacific Island countries is ongoing.
- Neither vaccines nor proven clinical treatments are expected to be available to treat or prevent Zika virus infections before local transmission begins within CONUS or Hawaii.
- The ability for mosquito control efforts to reduce infection risks may be limited, as has been the case with similar viruses, such as dengue and chikungunya.

#### Description of the Response Plan

CDC supports state and local efforts to prepare and respond to local transmission of Zika. CDC guidance to state and local jurisdictions recommends that Zika action plans be developed to guide response activities through a phased approach based on:

- Preparation for local transmission
- Initial detection of local transmission (a single locally acquired case or cases in a single household)
- Ongoing local transmission in a limited area
- Ongoing local transmission in a more widespread area

In each phase, CDC and other federal partners will coordinate closely with state and local health authorities on a defined set of activities aimed to reduce risk of local transmission.

The response plan includes detailed guidance for states, supported by federal government partners, on critical areas:

- **Protocol for Initial Response to Local Transmission of Zika:** Outlining steps that CDC and states will take when there is a suspected case of locally transmitted Zika virus infection.
- **Defining a Zika Transmission Area:** Assisting state, local, and tribal public health officials in defining the geographic boundaries of a "Zika transmission area" where local transmission of Zika virus has occurred, and communicating the defined area to the public so that they can take appropriate action to protect themselves. The recommendations are consistent with our guidance to individuals traveling to or living in countries or territories with Zika (i.e. for pregnant women to avoid travel to the area, and if they must travel, to consult with their healthcare provider and strictly follow steps to avoid mosquito bites and to take personal protective measures to reduce the risk of infection through sexual contact).

- ***Pregnancy and Birth Defects:*** The top priority for the Zika public health response is to protect pregnant women and their fetuses. CDC will support states to ensure that training and educational materials reach pregnant women and their healthcare providers, and to ensure that any Zika-infected pregnant women identified are entered into the CDC Zika pregnancy registry for monitoring and follow-up of births. We need to monitor and report cases of Zika and use what we learn to create guidelines to inform testing and treatment as well as disseminating findings on the association between Zika, microcephaly, and other health outcomes.
- ***CDC Emergency Response Team (CERT):*** CDC is prepared to deploy multi-disciplinary Rapid Response Teams to provide on-the-ground technical, epidemiologic, risk communication, laboratory, and vector control expertise, in addition to logistical support. CDC anticipates sending CERT teams to support state and local authorities for most suspected or confirmed single cases of local transmission and all suspected or confirmed clusters in an area.
- ***Communication:*** An important step will be to communicate the risk to the public, with timely and appropriate information to increase awareness, encourage action, and maintain trust. State and local authorities are the leads for information releases and media outreach, with toolkits and support from CDC and other federal partners.
- ***Surveillance:*** Monitoring cases and maintaining heightened awareness for suspect cases, to minimize spread of infection, with an emphasis on appropriate testing in health care facilities, reporting and prompt investigations.
- ***Vector Control:*** Many states and localities have existing mosquito control programs. CDC provides additional technical expertise on monitoring for mosquito resistance to insecticides and mosquito control strategies, whether advising on spraying around homes or community wide or aerial spraying and how to monitor effectiveness. Expanded capacity will also be available to states through Epidemiology and Laboratory Capacity for Infectious Diseases (ELC), Public Health Emergency Preparedness (PHEP), and federal vector control contracts to extend mosquito surveillance and control.
- ***Blood Safety:*** Describing plans to ensure the safety and adequacy of the US blood supply, developed in conjunction with the Food and Drug Administration (FDA), the Council of State and Territorial Epidemiologists (CSTE), major blood safety groups, and other partners.

Strong collaboration with states and local partners is critical for an effective response. To facilitate this, CDC is making additional funds available and is assisting states to assess and expand capacity. These resources are critical to support short-term activities while we continue to work with the Congress to fund Zika efforts. We are also engaging a wide variety of stakeholders including healthcare providers, blood banks, vector control organizations, medical associations, schools, employers, and others. We are continuously refining and improving our recommendations based on issues identified during the CDC-hosted Zika Action Plan Summit for state and local health officials and continued feedback from states.