Case definition of suspected "cluster" of ZIKV infection met (See Table 3) First level (initial screening) Collect detailed epidemiological and clinical information in a line list and check for the warning signs (See Table 2) such as: Cluster of acute febrile syndrome with conjunctivitis and maculopapular rash (see Table 1) Positive travel history in majority of cases Unusual deaths with history of fever and conjuctivities in some of the Cluster of AFP (in excess) Cluster of Congenital Zika Syndrome in pregnant women (in excess and not seen before in the area) None of the above warning signs are seen/observed Some of the warning signs are met Triangulate the information by verifying the information Check for other indices such as: collected through other sources such as: endemicity of the area to other arboviruses is the area known to have established Aedes and/or other diseases with similar overlapping population signs and symptoms entomological surveillance data to rule out any information available on density of Aedes mosquitoes. If not available, collect some mosquitoes existence of high density competent vectors from the areas reporting the cluster to detect Aedes for malaria and also for Aedes populations species and its density Collect blood samples from febrile cases (within 5 days of Conduct further field investigation and collect onset illness) and do the following: blood sample to do the laboratory test for: check for ZIKV RNA using RT-PCR other arboviral diseases, including if blood samples are collected after 5 days onset malaria illness, then check for IgG and IgM antibodies and if measles found positive follow up with Plaque Reduction typhoid fever Neutralization Test leptospirosis if facilities are available for testing, collect urine and influenza, and serum specimens from pregnant women, newborns, other viral haemorrhagic fever symptomatic GBS patients and patient with positive travel history and test for ZIKV using molecular detection assay Confirm the diagnosis following positive test result and scale up Establish a diagnosis other than ZIKV infection or vector control measures: rule out any pathological cause associated with repeat the test by collecting more good quality samples the cluster

think of sending the samples to a reference laboratory if the lab test is repeatedly negative but there is a strong suspicion

of existence of ZIKV infection