



## **Government of the Republic of Trinidad and Tobago**

### **Ministry of Health**

OFFICE OF THE MEDICAL DIRECTOR, HEALTH PROGRAMMES AND TECHNICAL SUPPORT SERVICES  
63 PARK STREET, PORT OF SPAIN, TRINIDAD W.I.  
T: (868)-627-0010/12/14 EXT. 533; 529 F: (868)-624:2242

### **LABORATORY REQUIREMENTS**

Laboratory testing by CARPHA will only be carried out on samples which meet the suspected case definition and the following criteria:

- Hospitalized individuals
- Pregnant women
- Children under 5 years
- Persons over 65 years

In view of the above guidelines practitioners are advised to be very selective with their requests.

All blood samples must be clearly labelled and accompanied by a Trinidad Public Health Laboratory (TPHL) request form with the following information clearly documented for testing to be initiated:

1. Patient's name, age, address and other relevant demographic details
2. Name of the institution
3. Name of the referring doctor
4. Clinical features (relevant signs and symptoms with date of onset)
5. Date of collection of sample
6. Whether patient is pregnant
7. Additional tests which may have been performed and results, if any

TPHL will forward those samples that meet the criteria for testing to CARPHA.

Line listings for suspected cases should continue to be submitted **daily** to the National Surveillance Unit, Insect Vector Control Division and the County Medical Office of Health for follow up action.

Yours respectfully,

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**Dr. Kumar Sundaraneedi**  
**Medical Director**  
**Health Programmes and Technical Support Services**



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**MEMORANDUM**

**FROM:** Medical Director, Health Programmes & Technical Support Services

**TO:** Chief Medical Officer  
Principal Medical Officer, Environmental Health  
Directors of Health  
Medical Chiefs of Staff  
Specialist Medical Officer, Insect Vector Control Division  
Director, Trinidad Public Health Laboratory  
Director, Health Education Division  
County Medical Officers of Health  
Chief Public Health Inspector  
Epidemiologist, National Surveillance Unit  
Private Practitioners, Primary Care Physicians

**DATE:** June 24, 2016

**SUBJECT:** Updated Guidelines for surveillance of Zika virus (ZIKV) disease

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All Counties and Hospitals are reminded to submit a 5ml serum sample, collected within the first 3 days of onset for all suspected cases which meet the following updated surveillance guidelines for ZIKV:

**REVISED CASE DEFINITION FOR ZIKV**

**Suspected case:** Patient with rash\* with at least **two or more** of the following signs or symptoms:

- Fever, usually  $< 38.5^{\circ}\text{C}$
- Conjunctivitis (non-purulent/hyperemic)
- Arthralgia
- Myalgia
- Peri-articular edema

\*usually maculopapular and pruritic

**Confirmed Case:** A suspected case with a laboratory positive result from the Caribbean Public Health Agency (CARPHA) for Zika virus