

NEW Arbovirus Case Investigation Form (ACIF) 2016 !!!!!

The Arbovirus Case Investigation Form (ACIF) takes the place of the Dengue Case Investigation Form (DCIF); the ACIF must be filled out completely by the physician when referring patients for arbovirus testing (dengue, chikungunya, or Zika) to insure proper testing of the patient and faster processing of the lab sample. The patient should take the completed ACIF to the laboratory to be tested. Once tested, the ACIF should be sent with the lab sample to the Puerto Rico Department of Health. Summary of changes made to the form and reasons for making the changes are as follows:

- Dengue Case Investigation Form (DCIF) is now called the Arbovirus Case Investigation Form (ACIF) – the form is used to test not only for dengue, but also for chikungunya and Zika.
- Individual sections on the form are numbered with corresponding numbered instructions on the back page. This makes it easier for health care providers to quickly find answers to questions about filling out the form.
- Sections are color coded. Section headings 1-5 are color-coded in maroon and must be filled out in order for the sample to be processed and for the results to be provided to the health care provider. Section headings 6-8 are color-coded in charcoal gray and should also be filled out to maximize quality of the arbovirus surveillance system that provides critical information about arboviral disease in Puerto Rico, information which is critical for prevention efforts.
- Boxed left upper corner – Check boxes have been added for the health care provider to indicate the suspected arbovirus infection(s). This will insure that the proper arboviral test(s) is (are) conducted.
- Section 2. More detailed information about the patient’s address is requested to better define geographical aspects of arboviral transmission.
- Section 3. “Estimate Date of Delivery” has been added to provide another means of estimating fetal gestational age in pregnant women. Gestational age provides an important indicator of severity of risk for Zika transmission to infants of Zika-infected pregnant women.
- Section 4. A question has been added about whether the patient is symptomatic. The answer to that question in addition to the date of onset of symptoms provides important information needed by the laboratory to determine which type of arboviral test to perform.
A space has been added to allow providers to specify the type of sample submitted if different from serum.
- Section 5. Contact information is now requested for both the doctor who ordered the lab test and the patient’s primary care provider if different from the doctor who ordered the test. Added contact information such as the National Provider Identifier, name of hospital, clinic, or laboratory, and specialty type will allow the laboratory to more easily report results back to not only the health care provider who ordered the test, but also to the primary care provider. For pregnant women diagnosed with Zika, it is especially important that the obstetrician be informed of the test results.
- Section 7. This section has been shortened.
- Section 8. Encephalitis and meningitis have been added to the list of potential signs and symptoms. For infants, microcephaly, intracranial calcifications, and other congenital defects have been added to the list of signs and symptoms as well. There are early indications that these signs and symptoms may be associated with Zika infection.
- Sections 9 -10 are for lab use only and have been moved to the end of the form to avoid confusion as to which sections need to be filled out by the health care provider and which have to be filled out by the laboratory.