Table 1: Outcomes among children aged ≥1 year from pregnancies with any laboratory evidence of confirmed or possible Zika virus infection (n = 1,450) and with nucleic acid test–confirmed Zika virus infection (n = 943) and with reported follow-up care* — U.S. Zika Pregnancy and Infant Registry (USZPIR), U.S. territories and freely associated states, February 1, 2017–June 1, 2018

Footnotes (Table 1):

*Any clinical care >14 days reported to the USZPIR.
† Includes maternal, placental, or infant laboratory evidence of confirmed or possible Zika virus infection during pregnancy based on presence of Zika virus RNA by a positive nucleic acid test (e.g., reverse transcription–polymerase chain reaction [RT-PCR]), serologic evidence of a Zika virus infection, or serologic evidence of an unspecified flavivirus infection.
§ Includes maternal, placental, or infant laboratory evidence of confirmed Zika virus infection during pregnancy based on presence of Zika virus RNA by a positive nucleic acid test (e.g., RT-PCR).
¶ Includes Zika-associated birth defect detected from birth to age 2 years with or without neurodevelopmental abnormality possibly associated with congenital Zika virus infection. Zika-associated birth defects include selected congenital brain anomalies (intracranial calcifications; cerebral atrophy; abnormal cortical formation; corpus callosum abnormalities; cerebellar abnormalities; porencephaly; hydranencephaly; ventriculomegaly/hydrocephaly); selected congenital eye anomalies (microphthalmia or anophthalmia; coloboma; cataract; intraocular calcifications; chorioretinal anomalies involving the macula, excluding retinopathy of prematurity; and optic nerve atrophy, pallor, and other optic nerve abnormalities); and/or microcephaly at birth (birth head circumference <3rd percentile for infant sex and gestational age based on INTERGROWTH-21st online percentile calculator [http://intergrowth21.ndog.ox.ac.uk/]).
** Includes neurodevelopmental abnormality possibly associated with congenital Zika virus infection detected from birth to age 2 years, with or without Zika-associated birth defect. Neurodevelopmental abnormalities possibly associated with congenital Zika virus infection include hearing abnormalities; congenital contractures; seizures; body tone abnormalities; movement abnormalities; swallowing abnormalities; possible developmental delay; possible visual impairment; and/or postnatal-onset microcephaly (two most recent head circumference measurements reported from follow-up care <3rd percentile for child’s sex and age based on World Health Organization child growth standards; downward trajectory of head circumference percentiles with most recent <3rd percentile. Age at measurement was adjusted for gestational age in infants born at <40 weeks’ gestational age, through age 24 months chronological age).
†† Microcephaly at birth is a subset of Zika-associated birth defects and was defined as birth head circumference <3rd percentile for infant sex and gestational age based on INTERGROWTH-21st online percentile calculator (http://intergrowth21.ndog.ox.ac.uk/).
§§ Postnatal-onset microcephaly is a subset of neurodevelopmental abnormalities possibly associated with congenital Zika virus infection and was defined as two most recent head circumference measurements reported from follow-up care <3rd percentile for child’s sex and age based on World Health Organization child growth standards; downward trajectory of head circumference percentiles with most recent <3rd percentile. Age at measurement was adjusted for gestational age of infants born at <40 weeks gestational age through age 24 months chronological age.