

Monkeypox: Clinic Instructions

If you encounter a patient with symptoms consistent with Monkeypox or have had exposure to Monkeypox.

Standard Precautions should be implemented for all patient care. All healthcare personnel including administrative staff should be masked as Infection Prevention and Control for COVID-19.

Placement of Patient:

If possible, patients to notify clinic ahead of time regarding any rash evaluation

Ideally health centers should utilize initial virtual evaluation for such cases if possible

Do not place suspect patient in general waiting area.

Patient should be placed in a single-person room. Door kept closed if able to do so safely. Again, do not put the patient in the general waiting area.

Patient should have a dedicated restroom.

Limit movement of patient throughout facility. If patient must leave private room, patient should be wearing source control including mask, and a sheet or gown to cover any exposed skin lesions.

Any procedures that are likely to spread oral secretions should be performed in an AIIR.

Healthcare Personnel: Any healthcare personnel that encounter a patient suspected of Monkeypox infection.

Gown

Gloves

Eye Protection

NIOSH – approved N95 filtering facepiece of equivalent, or higher – level respirator.

Pregnant or immune-compromised staff should avoid interacting with suspect patients

Patient History and Presentation

Determine if, in the last 21 days, they have:

Had contact, including sexual, with anyone with a rash or confirmed/probable monkeypox

Traveled outside the US or to a state with monkeypox cases

Had contact with a dead or live wild animal or exotic pet endemic to Africa

Examine patient for deep-seated and well-circumscribed lesions, often with central umbilication (Photo credit: UK Health Security Agency as displayed on [CDC's website](#))



Take a picture of the rash if possible

Contact your local health department immediately to discuss best way to:

Collect lab specimens

Isolation guidance for the patients

Process for obtaining post exposure prophylaxis and treatment if needed

If the rash is characteristic or the patient meets any of the exposure criteria above and has symptoms of monkeypox, contact your local health department prior to collecting diagnostic specimens.

Additional Precautions:

In addition to isolating infectious patients and use of PPE when caring for patients, other standard precautions can limit the transmission of monkeypox virus.

Proper hand hygiene after all contact with an infected patient and/or their environment during care.

Correct containment and disposal of contaminated waste (e.g., dressings) in accordance with facility-specific guidelines for infectious waste or local regulations pertaining to household waste.

Care when handling soiled laundry (e.g., bedding, towels, personal clothing) to avoid contact with lesion material. Soiled laundry should never be shaken or handled in manner that may disperse infectious particles.

Care when handling used patient-care equipment in a manner that prevents contamination of skin and clothing. Ensure that used equipment has been cleaned and reprocessed appropriately.

Ensure procedures are in place for cleaning and disinfecting environmental surfaces in the patient care environment. Any EPA-registered hospital disinfectant currently used by healthcare facilities for environmental sanitation may be used. Follow the manufacturer's recommendations for concentration, contact time, and care in handling.

How it spreads: Monkeypox is spread between people mainly through direct skin to skin contact with infectious sores, scabs, or body fluids. It can also spread by respiratory secretions during prolonged face-to-face contact. It can spread during intimate contact between people, including during sex, kissing, cuddling, or touching parts of the body with monkeypox lesions.

What are the signs and symptoms of Monkeypox?

- Early signs for monkeypox include Flu-like symptoms
 - Fever
 - Chills
 - Headache
 - Muscle Aches
 - Fatigue
 - Lymphadenopathy: swollen lymph nodes
- In one to three days, a rash with raised bumps develops. The rash will start out as flat, red bumps and then turn in to blisters which fill with pus. After several days, the blisters will crust and fall off.

- The rash associated with monkeypox involves vesicles or pustules that are deep-seated, firm or hard, and well-circumscribed; the lesions may umbilicate or become confluent and progress over time to scabs.

Testing:

- Real-time PCR may be used on lesion material to diagnose a potential infection with monkeypox virus. Consultation with the local and state health departments and Centers for Disease Control and Prevention (CDC) should be performed prior to collecting specimens.

Collection of specimens for monkeypox diagnosis:

- Personnel who collect specimens should use personal protective equipment (PPE) in accordance with recommendations for healthcare personnel. Specimens should be collected in the manner outlined below. When possible, use plastic rather than glass materials for specimen collection.
- More than one lesion should be sampled, preferably from different locations on the body and/or from lesions with differing appearances. Refer to the Poxvirus Molecular Detection and Poxvirus Serology tests on the CDC Test Directory for specimen storage, packaging, and shipping instructions.

For more information, visit: <https://www.cdc.gov/laboratory/specimen-submission/>

Reporting:

- Healthcare providers should report by telephone to their local health departments immediately.

Environmental Infection Control:

- Standard cleaning and disinfection procedures should be performed using an EPA-registered hospital-grade disinfectant with an emerging viral pathogen claim. Products with Emerging Viral Pathogens Claim can be found on EPA's list Q. Be sure to follow manufacturer's directions for concentration, contact time (dwell time, kill time), care and handling of product.
- Wet cleaning methods are preferred. Avoid dusting, sweeping or vacuuming.
- Soiled laundry including but not limited to bedding, towels, clothing, should be handled in accordance with standard practices. Avoid contact with lesion material that may be present on the soiled laundry. Soiled laundry should be appropriately bagged and never shaken or handled that may disperse infectious material.

Monitoring Exposed Healthcare Professionals:

- Healthcare workers who have cared for a monkeypox patient should be alert to the development of symptoms that could suggest monkeypox infection, especially within the 21-day period after the last date of care, and should notify infection control, occupational health, and the health department to be guided about a medical evaluation.
- Healthcare workers who have unprotected exposures (i.e., not wearing PPE) to patients with monkeypox do not need to be excluded from work duty, but should undergo active surveillance for symptoms, which includes measurement of temperature at least twice daily for 21 days following the exposure. Prior to reporting for work each day, the healthcare worker should be interviewed regarding evidence of fever or rash.
- Healthcare workers who have cared for or otherwise been in direct or indirect contact with monkeypox patients while adhering to recommended infection control precautions may undergo self-monitoring or active monitoring as determined by the health department.
- Transmission of monkeypox requires prolonged close contact with a symptomatic individual. Brief interactions and those conducted using appropriate PPE in accordance with Standard Precautions are not high risk and generally do not warrant PEP. See the link below and/or contact your local or state health department for information.
- Local health departments should request the monkeypox vaccine from the Strategic National Stockpile (SNS) through their emergency preparedness and response procedures.

Helpful links:

Exposure risk assessment and public health recommendations for individuals exposed to a patient with monkeypox:

<https://www.cdc.gov/poxvirus/monkeypox/clinicians/monitoring.html>

Information For Healthcare Professionals

<https://www.cdc.gov/poxvirus/monkeypox/clinicians/index.html>