Mpox (monkeypox)
Preventing the Spread in Healthcare

Who Is at Risk for Mpox?

Anyone who has been in close, personal contact with a person or an animal that has Mpox over a period of time is at risk.

How Does Mpox Spread?

1. Close contact with a person with mpox, including sexual and intimate contact
2. Direct contact with mpox-infected animals
3. Direct contact with mpox-contaminated materials
4. Passing from a pregnant person with mpox to the fetus or newborn during and after birth

Find full details at bit.ly/mpoxtransmission

Mpox (formerly known as monkeypox) is a disease caused by infection with a virus, known as monkeypox virus (MPXV). This virus is part of the same family as the virus that causes smallpox. Mpox is not related to chickenpox.

JYNNEOS is a 2-dose vaccine developed to protect against MPXV and smallpox. Currently, CDC does not recommend routine immunization against mpox for the general public. JYNNEOS is not recommended as a routine vaccination for healthcare personnel unless sexual risk factors are present. Full recommendations are available at bit.ly/acipvaccines.

What Are Steps for Monkeypox Infection Control and Prevention in Healthcare?

In addition to Standard Precautions, if a patient seeking care is suspected to have mpox, infection prevention and control personnel should be notified immediately, and additional infection control precautions should be implemented:

Patient Placement

A patient with suspected or confirmed mpox should be placed in a single-person room. Transport and movement of the patient outside of the room should be limited to medically essential purposes. If the patient is transported outside of their room, they should use well-fitting source control and have any exposed skin lesions covered with a sheet or gown and should have a dedicated bathroom and keep the door to the room closed if safe to do so.

Isolation

Those with suspected mpox should have recommended isolation precautions maintained until mpox is ruled out. Those with confirmed mpox should have recommended isolation precautions maintained until all lesions have crusted, those crusts have separated, and a fresh layer of healthy skin has formed underneath.

Monitoring Healthcare Providers (HCPs)

Ultimately, the person's exposure risk level, reliability in reporting symptoms that might develop, the number of persons needing monitoring, time since exposure, receipt of PEP, and available resources, are all factors when determining the type of monitoring to be used for HCPs. Decisions on how to monitor exposed HCPs are at the discretion of the occupational health program and public health authorities. Find full details at https://bit.ly/4hEofPw.

Waste Management

Waste management (i.e., handling, storage, treatment, and disposal of soiled PPE, patient dressings, etc.) should be performed in accordance with U.S. Department of Transportation (DOT) Hazardous Materials Regulations.

PPE

Healthcare workers should use personal protective equipment (PPE) when entering the patient's room. These include gown, gloves, eye protection, and NIOSH-approved particulate respirator equipped with N95 filters or higher.

Cleaning & Disinfection

Use standard cleaning and disinfection procedures using an EPA-registered hospital-grade disinfectant with an emerging viral pathogen claim, which may be found on EPA's List Q. Wet cleaning methods are preferred. Avoid activities such as dry dusting, sweeping, or vacuuming.

Soiled laundry should be handled in accordance with recommended standard practices, avoiding contact with lesion material that may be present, and be gently and promptly contained in an appropriate laundry bag (never be shaken or handled in manner that may disperse infectious material). Management of food service items should also be performed in accordance with routine procedures.

References at bit.ly/cdcreferences

PROJECT FIRSTLINE · NHMA National Hispanic Medical Association · Salud America! · UT Health San Antonio Institute for Health Promotion Research