



Monkeypox Infection Prevention Talking Points

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Background

- Monkeypox is a disease that causes a sometimes-painful rash and can also cause fever, headaches and muscle pains, and respiratory symptoms like a cough or sore throat.
- Most people who get monkeypox recover on their own, but some people are more likely to become seriously ill, including people who are pregnant, immunocompromised, and children under 8. People with eczema or dermatitis may also be at higher risk of severe illness.
- Resources:
 - [Clinician FAQs | Monkeypox | Poxvirus | CDC](#)

Transmission

- Monkeypox is primarily spread by direct skin-to-skin contact with lesions or fluid from the lesions.

- It can also be spread through contact with items such as clothing or bedding that had contact with monkeypox lesions, or by respiratory secretions during prolonged (i.e., greater than 3 hours) face-to-face contact.
- Activities involving direct skin-to-skin contact pose the highest risk for monkeypox transmission.
- Individuals are contagious until all scabs have fallen off and a fresh layer of intact skin has formed underneath.
- Resources:
 - [How it Spreads | Monkeypox | Poxvirus | CDC](#)
 - [Safer Sex, Social Gatherings, and Monkeypox | Monkeypox | Poxvirus | CDC](#)
 - [Preventing Spread to Others | Monkeypox | Poxvirus | CDC](#)
 - [Notifying Close Contacts | Monkeypox | Poxvirus | CDC](#)

Exposures

- People should be monitored for 21 days following their last exposure to monkeypox for symptoms consistent with the disease, including fever, chills, lymphadenopathy, and rash.
- Anyone who develops symptoms consistent with monkeypox after exposure should follow the steps outlined in the [CDC guidance](#).
- Contacts who are asymptomatic can continue normal activities, such as attending work and school, but should not donate blood, organs, or any other fluids/tissues during this period of time.
- Exposure risk assessment guidelines:
 - [Healthcare providers](#)
 - [Community](#)
- Resources:
 - [Monitoring People Who Have Been Exposed | Monkeypox | Poxvirus | CDC](#)

Personal Protective Equipment (PPE)

- **Healthcare settings:**
 - When caring for a person with monkeypox, healthcare personnel should wear a gown, gloves, eye protection, and a NIOSH-approved N95 or higher level respirator.
 - Ensure all personnel have been appropriately trained on donning (putting on) and doffing (taking off) PPE, including the appropriate sequence to don and doff equipment.
 - Resources:
 - [Infection Control: Healthcare Settings | Monkeypox | Poxvirus | CDC](#)
 - [Instructions on Safely Donning and Doffing PPE | CDC](#)
- **Non-healthcare settings:**
 - Ideally, people with monkeypox should perform tasks such as environmental cleaning/disinfection and changing bandages themselves.
 - If people who do not have monkeypox must assist with these activities, wear disposable gloves and a well-fitting mask or respirator and follow CDC guidance to minimize the risk of exposure.
 - Resources:

- [Disinfecting Home and Other Non-Healthcare Settings | Monkeypox | Poxvirus | CDC](#)
 - [Isolation and Infection Control: Home | Monkeypox | Poxvirus | CDC](#)
- **Other interactions:**
 - People with monkeypox should avoid interacting with others as much as possible during their isolation period. If they must interact with others, they should wear a well-fitting face mask for source control and ensure that all lesions are covered.
 - If the interaction will be more than a brief encounter, the people interacting with the person with monkeypox should also wear a well-fitting face mask or respirator.
 - If the interaction may involve physical contact, both parties should wear gloves.
 - Resources:
 - [Isolation and Infection Control: Home | Monkeypox | Poxvirus | CDC](#)
- **Patient privacy:**
 - When interacting with people with monkeypox outside of a healthcare facility (e.g., if visiting a private residence or hotel), healthcare providers and health department staff should don and doff PPE in a way that maintains patient confidentiality and does not publicly identify individuals with monkeypox.
 - When providing clinical care outside of the healthcare setting, necessary PPE should be donned discreetly just before entering the isolation area in an area out of view from others. If such an area is not available, consider donning PPE immediately after entering the isolation area before having any contact with the patient or environment.
 - For brief interactions outside of the healthcare setting in which no clinical care is provided, full PPE is not required and the recommendations from the “Other interactions” section above should be followed.

Isolation

- CDC recommends that anyone with monkeypox should stay home until all scabs have fallen off and a new layer of skin has grown in the area, which can take 2-4 weeks.
- Current data suggest people can spread monkeypox from the time symptoms start until all symptoms have resolved, including full healing of the rash with formation of a fresh layer of skin.
- Ideally, people with monkeypox would remain in isolation for the duration of illness. However, if a person with monkeypox is unable to remain fully isolated throughout the illness, they should do the following:
 - Keep lesions covered and contained at all times with bandages, long pants, and/or long sleeves. Lesions are infectious until fully resolved with a new layer of skin in the area.
 - Wear gloves while performing any activities involving skin-to-skin contact with others, even if there are no visible lesions on hands.
 - Avoid activities that involve close physical contact with others such as intimate/sexual activities, contact sports, and playing with pets.
 - Wear a well-fitting mask at all times.
 - If a lesion or lesion fluid touches any shared surface, the item should immediately be laundered or disinfected with a [disinfectant that is active against monkeypox](#). Make sure

to follow directions on the disinfectant label, including contact time, to ensure the virus is inactivated.

- Avoid sharing any personal items such as utensils, cups, or towels. If used, such items should be cleaned and disinfected before use by others.
- Avoid contact with people who are at increased risk for severe illness as much as possible, including pregnant or immunocompromised people and children under 8.
- Consider the following additional criteria if individuals with monkeypox are unable to avoid interacting with people at higher risk for severe disease:
 - Lesions on exposed skin areas are healing (i.e., scabs are starting to form and no new lesions are forming).
 - Person with monkeypox has obtained clearance from a healthcare provider to interact with people outside of their household.
- People with monkeypox **MUST** remain in isolation and may not work if they have a fever or any respiratory symptoms (e.g., sore throat, cough, nasal congestion).
- Resources:
 - [Isolation and Prevention Practices for People with Monkeypox | Monkeypox | Poxvirus | CDC](#)
 - [Isolation and Infection Control: Home | Monkeypox | Poxvirus | CDC](#)
 - [Disinfecting Home and Other Non-Healthcare Settings | Monkeypox | Poxvirus | CDC](#)

Environmental Cleaning

- Monkeypox can be inactivated by products on [EPA's List Q \(Emerging Viral Pathogens\)](#).
- When cleaning an area where an individual with monkeypox spent significant time, avoid using techniques that may resuspend dried lesion material in the air, including use of portable fans, sweeping, and dry dusting. If vacuuming, use a vacuum with a high-efficiency air filter or wear a well-fitting mask while cleaning. Wet cleaning methods are preferred.
- Medical facilities should treat waste in the same manner as other potentially infectious waste such as soiled dressings (Category B waste). Waste does not require special storage or treatment prior to disposal.
- Non-medical facilities do not need any special handling of waste. Individuals with monkeypox should have a dedicated trash can that they empty themselves, or caregivers should wear gloves when emptying it.
- Resources:
 - [Infection Control: Healthcare Settings | Monkeypox | Poxvirus | CDC](#)
 - [Disinfecting Home and Other Non-Healthcare Settings | Monkeypox | Poxvirus | CDC](#)
 - [Disinfectants for Emerging Viral Pathogens \(EVPs\): List Q | US EPA](#)

Laundry

- Laundry from individuals with monkeypox should be laundered separately from other clothes/linens. When possible, affected individuals should do their own laundry. If others are

doing the laundry of an individual with monkeypox, they should wear, at minimum, gloves and a well-fitting face mask.

- Clothes and linens should never be shaken, as this can disperse infectious material into the air.
- Soiled laundry should be placed in an impermeable container that can be disinfected after use, or a cloth bag that can be laundered with the soiled laundry.
- Laundry can be washed according to label instructions.
- Resources:
 - [Disinfecting Home and Other Non-Healthcare Settings | Monkeypox | Poxvirus | CDC](#)

Safe Injection Practices (for Vaccines)

- Under normal circumstances, single dose vials may only be accessed once, and any remaining medication must be discarded. Due to the public health emergency, FDA has [authorized](#) an alternate regimen for the JYNNEOS vaccine where a smaller dose is injected intradermally to increase the number of available doses. Single dose vials may be accessed multiple times for intradermal administration of the JYNNEOS vaccine while following the safety and storage requirements outlined in the EUA.
- Single dose vials do not contain a preservative, which increases the risk of contamination or infection, highlighting the importance of using safe injection practices when administering any vaccine.
- In order to safely administer multiple doses from a JYNNEOS vaccine vial, the following guidance must be followed:
 - Doses from a JYNNEOS vaccine vial must be given within 8 hours of opening the vial. Any remaining medication must be discarded after 8 hours.
 - If the entire vial is not used immediately, the remaining medication must be stored at +2°C to +8°C (+36°F to +46°F) for up to 8 hours after initial access. After thawing, the total time at +2°C to +8°C (+36°F to +46°F) must not exceed 12 hours.
 - If there is not enough medication remaining in the vial for a 0.1 mL dose, the remaining medication must be discarded. Do not mix medication from multiple vials in a single dose.
- All other standard injection safety practices must still be followed when administering multiple doses from a single-dose vial, including:
 - A new sterile needle and new sterile syringe must be used each time a dose is drawn from the vial and administered, regardless of updates to dosing technique. Syringes may never be reused, even if the needle is changed.
 - Disinfect the vial's rubber septum with alcohol prior to drawing up every dose, even if it is a new vial.
 - Perform hand hygiene prior to preparing or administering any vaccine dose, between patients, when changing gloves, and anytime hands are visibly soiled. Gloves must be changed between patients.
- To reduce the risk of needle stick injuries, providers should ensure they are familiar with intradermal injection technique prior to administration.
- Resources:

- [JYNNEOS Vaccine | Monkeypox | Poxvirus | CDC](#)
 - Guidance includes images and [video](#) on intradermal administration
- [JYNNEOS Health Care Provider Fact Sheet | FDA](#)
- [Injection Safety | CDC](#)
- [Interim Clinical Considerations for Use of JYNNEOS and ACAM2000 Vaccines during the 2022 U.S. Monkeypox Outbreak | Monkeypox | Poxvirus | CDC](#)

Considerations for Specific Populations/Settings

Childcare and Schools

- Resources:
 - [Schools, Early Care and Education Programs, and Other Settings Serving Children or Adolescents | Monkeypox | Poxvirus | CDC](#)
 - [Disinfecting Home and Other Non-Healthcare Settings | Monkeypox | Poxvirus | CDC](#)
 - [What You Need to Know about Monkeypox if You are a Teen or Young Adult | Monkeypox | Poxvirus | CDC](#)

Healthcare Settings

- Resources:
 - [Infection Control: Healthcare Settings | Monkeypox | Poxvirus | CDC](#)
 - [Monkeypox and Smallpox Vaccine Guidance | Monkeypox | Poxvirus | CDC](#)

Congregate Settings

Note: This guidance only pertains to congregate settings where healthcare is not provided. Congregate living settings can include correctional and detention facilities, homeless shelters, group homes, dormitories at institutes of higher education, seasonal worker housing, residential substance use treatment facilities, and other similar settings. Long-term care facilities should follow the guidance for healthcare facilities.

- Resources:
 - [Congregate Living Settings | Monkeypox | Poxvirus | CDC](#)

Contact Sports

- People with monkeypox should refer to the [isolation guidance](#) and should not participate in contact sports until they meet the criteria for discontinuing isolation..
- General recommendations to reduce the risk of potential monkeypox exposure include:
 - Avoid sharing items that come in contact with skin such as towels, clothes, and utensils.
 - Perform frequent hand hygiene with soap and water or alcohol-based hand sanitizer.
 - Disinfect shared equipment and surfaces with appropriate product (see [EPA List Q](#)).
 - Watch for any new skin lesions. If a new lesion or rash develops, see a healthcare provider before participating in contact sports.
- Consider reviewing CDC's documents [MRSA for Athletes](#) and [MRSA for Coaches/Athletic Directors](#) for additional recommendations that are also helpful for preventing the spread of

monkeypox. (Due to the fact that MRSA is also spread by physical contact, many of the same invention prevention practices apply.)

Pregnant People

- Resources:
 - [Clinical Considerations for Monkeypox in People Who are Pregnant or Breastfeeding | Monkeypox | Poxvirus | CDC](#)