Provider Health Advisory (Update #3)
August 15, 2022
Monkeypox (MPX) Virus Infection in the United States

Summary:
As of August 12, there are >30,000 suspected or confirmed cases of monkeypox (MPX) from 82 non-endemic countries. In the US, there have been >10,000 cases, including 1,945 California residents from 32 local health jurisdictions. Of the California cases, 48 have required hospitalization but there have been no deaths. Contra Costa County has had 40 confirmed or probable cases to date. No cases in healthcare professionals (HCPs) to date underscores the importance of appropriate personal protective equipment (PPE) use and the prompt identification and follow-up of potential healthcare exposures.

Actions Requested of Healthcare Professionals:
1. **IDENTIFY** patients with suspected monkeypox infection
2. **PROTECT** staff with appropriate PPE and infection control practices as soon as possible (as described in previous advisory)
3. **TEST** suspected MPX patients
   - Most patients should be tested by a commercial lab. Follow commercial lab specimen collection instructions as they may differ from the CDPH VRDL.
   - Test the following patients using the CDPH VRDL, complete the VRDL submission form (see Additional Resources below), and notify Contra Costa Public Health (PH):
     - Pediatric
     - Pregnant/breastfeeding
     - Anyone hospitalized or presenting with severe disease
     - Any death due to MPX
     - Any case linked to an event, cluster of cases, or settings such as bathhouses
     - Living in a homeless encampment
     - In a detention/correctional facility or lives in a congregate setting
     - Uninsured
4. **NOTIFY** Contra Costa Public Health (PH) immediately via telephone (925-313-6740, 1, 2) during business hours or faxed CMR to (925) 313-6465 or secure email to CoCoCD@cchealth.org of the following situations:
   - Patients needing CDPH VRDL testing as described above in #3
   - Healthcare professionals (HCPs) with potential MPX exposure in the healthcare setting, especially higher- and intermediate-level exposure risk and any exposed HCPs who become symptomatic
   - Patients and HCPs with positive orthopoxvirus PCR and/or positive monkeypox virus PCR result(s)
   - Patients hospitalized due to MPX
   - Patients with suspected, probable, or confirmed MPX who are receiving tecovirimat (TPOXX) antiviral treatment (continues)
**Actions Requested of Healthcare Professionals (continued):**

5. **INFORM** patients with suspected MPX infection:
   - To isolate until a negative result obtained or if positive for MPX, continue isolation until lesions fall off and skin is fully healed. Share English [home isolation instructions](#) or [Spanish](#).
   - Of their MPX test result. PH will contact positive patients but PH does not routinely contact patients with negative test results.
   - To delay MPX vaccination until MPX test results are available. Patients with MPX infection are not recommended to receive MPX vaccine during or after infection as vaccine is unlikely to alter disease course and recovery from infection likely confers long-term immunity.

**Additional Resources:**

- [Contra Costa Health Monkeypox Information](#)
  - [Confidential Morbidity Report Form](#) for reporting MPX cases

- [Contra Costa Health Vaccination Request Form](#) for close contacts and other community members in the high priority vaccination group due to high exposure risk

- [CDPH VRDL Monkeypox Testing Instructions](#) for patients described in #3-TEST above

- [CDPH Monkeypox Information](#), including case counts and data

- [CDC Monkeypox Information](#)
  - [CDC Clinical Recognition](#)
  - [CDC Infection Control](#)
  - [CDC Treatment Guidance](#)
  - [CDC Considerations for Vaccination](#)