Monkeypox: What Clinicians Need to Know

- Monkeypox is a rare disease caused by the monkeypox virus.
- Monkeypox can spread to anyone through close, personal, often skin-to-skin contact including:
  - Direct contact with monkeypox rash, sores or scabs
  - Contact with objects, fabrics (clothing, bedding, or towels), and surfaces that have been used by someone with monkeypox
  - Through respiratory droplets or oral fluids from a person with monkeypox
  - During close intimate or sexual contact

Clinical Signs and Symptoms

- Typically starts with fever, swollen lymph nodes, and often other non-specific symptoms such as malaise, headache, chills, and muscle aches. Symptoms start between 5-21 days after exposure (usually 7-14 days).
- The characteristic rash develops shortly after prodrome and often begins on the face and spreads to other parts of the body. Lesions typically progress through four stages - macular, papular, vesicular, to pustular - over a period of 2-3 weeks before scabbing over and falling off.
- The illness typically lasts for 2-4 weeks. Patients are considered infectious when symptoms are present.
- Some recently reported cases presented with characteristic, monkeypox-like lesions in the genital and perianal region in the absence of subjective fever and other prodromal symptoms.
- Other common infections should be considered.

If You Suspect Monkeypox

- Patients with symptoms consistent with monkeypox virus infection should be screened for the following epidemiologic risk factors in the 21 days prior to start of symptoms:
  - Travel history to an outbreak-affected or endemic country.
  - Contact with a person with confirmed or suspected monkeypox or who has a similar appearing rash.
  - Close or intimate in-person contact with individuals in a social network experiencing monkeypox activity, this includes men who have sex with men (MSM).
  - Contact with dead/live animal that is an African endemic species or used a product derived from such animals.

- Follow infection control recommendations (N95 mask and eye protection in addition to gown and gloves) when entering the patient’s room.
- A Suspect Case is a patient with at least one epidemiologic risk factor and/or new rash with high clinical suspicion for monkeypox virus infection. If a suspect case is identified:
  - Acquire digital photos of the lesions, with patient consent.
  - Notify KDPH at 888-9REPORT (888-973-7678) to authorize testing and for instructions on specimen collection and shipping.