

Infection Prevention and Control (IPC) Quick Reference on Mpox for Healthcare Settings

Activity	Recommendations for Mpox Infection Prevention and Control
Patient Evaluation and Management	<p>There are no mpox-designated healthcare facilities. All Pennsylvania healthcare facilities and providers should actively develop their readiness to safely evaluate, test, and treat patients with the proper infection prevention and control precautions in place.</p>
Communication	<p>Provide clear information to healthcare personnel, patients, and visitors about mpox prevention, including the potential for transmission through close, sustained physical contact, including sexual activity.</p> <ul style="list-style-type: none"> • Keep messages fact-based to avoid introducing stigma.
Transmission	<p>Mpox can spread to anyone through close, personal, often skin-to-skin contact, including:</p> <ul style="list-style-type: none"> • Direct contact with mpox rash, scabs, or body fluids from a person with mpox, as well as contact with their saliva, respiratory secretions, and areas around the anus, rectum, and vagina. This may occur during sexual or intimate contacts, hugging, kissing, massages, or prolonged face-to-face contact. • Touching objects (sex toys), fabrics (clothing, bedding, or towels), and surfaces that have been used by someone with mpox. <p>Other modes of transmission:</p> <ul style="list-style-type: none"> • A pregnant person can spread the virus to their fetus through the placenta or to the newborn by close contact during and after birth. • It's also possible for people to get mpox from infected animals, either by being scratched or bitten by the animal. People with mpox can also spread it to animals.
Isolation Precautions	<p>Any individual with suspected or confirmed mpox should be isolated, and if admitted should be placed in a single-patient room.</p> <ul style="list-style-type: none"> • Infection Prevention and Control staff should be notified immediately. • People with mpox should remain in isolation for the duration of illness, and until all lesions have crusted, those crusts have separated, and a fresh layer of healthy skin has formed. Many patients have been experiencing mild illness and have not required hospitalization. • More information can be found here: Infection Prevention and Control of Mpox in Healthcare Settings • Questions about isolation should be directed to the local or state health department as needed.
Patient Placement	<ul style="list-style-type: none"> • Single-patient room with dedicated bathroom. Keep door closed, if safe to do so. Also, portable fans should be avoided as they can disperse dried materials from lesions.

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Air Handling	No special air handling required.
Intubation/Extubation	Any procedures likely to spread oral secretions (e.g., open suctioning of airway secretions, sputum induction, etc.) should be performed in an airborne infection isolation room (AIIR) if available.
Personal Protective Equipment (PPE)	<ul style="list-style-type: none"> • Gown • Gloves • Eye protection (e.g., goggles or face shield that covers front and sides of face) • NIOSH-approved particulate respirator equipped with N95 filters or higher <p>Recommendations for donning and doffing: CDC's Sequence for PPE</p> <p>Ensure signage is posted on the patient's door to inform the healthcare personnel of the PPE that is required.</p>
Healthcare Personnel Management	<p>Any healthcare personnel caring for an mpox patient or entering mpox care areas should self-monitor and look for symptoms consistent with mpox infection. Monitoring should continue for 21 days from the last interaction.</p> <p>Healthcare personnel who have unprotected exposures (i.e., not wearing PPE and a known breach) to patients with mpox do not need to be excluded from work, however they should undergo active surveillance for symptoms, which includes temperature measurement at least twice daily for 21 days following the exposure. Prior to reporting for work, exposed healthcare personnel should be surveyed for symptoms including fever and rash. Your Occupational Health designee will provide return-to-work guidance if mpox infection is suspected or confirmed.</p>
Patient Transport	Limit transport to only medically necessary. If patient is transported out of their room, use source control (e.g., medical mask) on patient and cover any exposed skin lesions with a dressing, sheet, or gown.
Visitation	Visitation should be limited to those essential for the wellbeing of the patient. Also, visitors must be educated on infection prevention measures including hand hygiene and appropriate PPE prior to entering the room.
Waste Management	<p>Clinical waste containing mpox material of either clade (Clade I or II) may be transported as UN3291 Regulated Medical Waste (RMW) in the same manner as other potentially infectious waste (e.g., soiled dressings, contaminated sharps)</p> <ul style="list-style-type: none"> • Exception to the rule: Any waste including Clade I viral cultures are classified as Category A <p>Facilities should also comply with state and local regulations for handling, storage, treatment, and disposal of waste, including RMW. DOT has provided clarifications about enforcement of mpox waste management on their website.</p>

Activity

Recommendations for Mpox Infection Prevention and Control

Environmental Cleaning

Facilities should ensure the protection of environmental services staff by implementing PPE and other protocols in compliance with OSHA standards.

Standard cleaning and disinfection procedures should be performed using an EPA-registered hospital-grade disinfectant with an emerging viral pathogen claim (**List Q**). Activities that could resuspend dried material from lesions (e.g., use of portable fans, dry dusting, sweeping, or vacuuming) should be avoided; wet cleaning methods are preferred.

Testing

Providers should consider testing any patient who presents with a rash or lesions that are consistent with mpox or presents with a rash or lesions and an epidemiologic risk factor for mpox.

Multiple commercial laboratories are currently offering testing. Clinicians seeking testing at a commercial diagnostic laboratory do not need to report or obtain approval from PA DOH prior to ordering the test. As an additional support, testing will also continue to be available through the Pennsylvania Department of Health's Bureau of Laboratories (BOL) with approval from the Pennsylvania Department of Health or a local health department. Testing at BOL requires approval.

Treatment

All treatment requests must come through a provider. Providers should contact the local health department or the Pennsylvania Department of Health, Bureau of Epidemiology at 717-787-3350.

Vaccine

Persons who have been exposed or have participated in activities that put them at risk of exposure should contact their healthcare provider, their local health department, or 1-877-PA-HEALTH to seek evaluation of the risk.

Persons interested in mpox vaccine can also use the [mpox vaccine locator](#) to find vaccine providers. Mpox vaccine is free. You need two doses of the vaccine for the best protection.

More vaccine information can be found by reviewing [mpox vaccination basics](#).

Public Health Reporting

Consultations are available from PA DOH, Division of Infectious Disease Epidemiology, at 717-787-3350 or their local health department should clinicians have specific questions about the evaluation and treatment of mpox cases or if clinicians want to obtain testing through the state public health laboratory. Clinicians do not need to notify PA DOH of suspected or confirmed cases as results from diagnostic labs are sent to PA-NEDSS, Pennsylvania's reportable disease database.

VISUAL EXAMPLES OF MPOX RASH



Photo Credit: NHS England High Consequence Infectious Diseases Network



[CDC Mpox Info](#)



[PADOH Mpox Info](#)



For More Info Call

1-877-PA-HEALTH
(1-877-724-3258)