

## Mpox (previously known as Monkeypox) suspected and confirmed At-a-Glance

**This now applies to both Clade I and II strains.**

<b>DEFINITION</b>	<p>Mpox is caused by infection with the monkeypox virus. Spread is through close contact with an animal, human, or materials contaminated with the virus. The virus enters the body through broken skin (even if not visible), the respiratory tract, or the mucous membranes (eyes, nose, mouth, genitals) <b>Person-to-person spread is very uncommon, but may occur through:</b></p> <ul style="list-style-type: none"> <li>• <b>contact with clothing or linens used by an infected person</b></li> <li>• <b>direct contact with mpox skin lesions or scabs</b></li> <li>• <b>coughing or sneezing of an individual with an mpox rash</b></li> </ul> <p>See <a href="#">Eolas Medical</a> for case definition and samples for diagnosis</p> <p><b>Any suspected cases/contacts should be discussed with ID Micro team</b> (Bleep 5885 during working hours and Infectious diseases SpR or Consultant through switchboard overnight/weekends).</p>
<b>MANAGEMENT</b>	<p><b>The environmental risk is greatest from clothing and linens used by an infected person, for example in bedrooms and bathrooms.</b></p> <p><b>Isolate in a negative or neutral pressure side room with en-suite facilities</b> – use OUH ‘Airborne Precautions’ isolation poster. Door must remain closed. Patients are allowed to use the toilet facilities within their isolation room.</p> <p>Where possible, pregnant women and severely immunosuppressed individuals (as outlined in the <a href="#">Green Book</a> <a href="#">Green Book Chapter 29 Smallpox and monkeypox (publishing.service.gov.uk)</a> should not assess or clinically care for individuals with suspected or confirmed mpox.</p> <p><b>Personal Protective Equipment (PPE)</b></p> <p><b>Mild symptoms (including localised rash) with no evidence of respiratory symptoms</b></p> <ul style="list-style-type: none"> <li>• Disposable aprons (long sleeved gowns if risk of splashing/blood/body fluid exposure) /gloves/wipe clean shoes</li> <li>• Fluid repellent surgical masks (FRSM)</li> </ul> <p><b>Possible, Probable and Confirmed – Where symptomology includes respiratory symptoms, widespread rash AND/OR clinically deteriorating as a direct result of mpox AND/OR prolonged close contact with a patient and their environment for example an overnight inpatient admission stay.</b></p> <ul style="list-style-type: none"> <li>• Long sleeved fluid repellent gowns/gloves (single pair)/wipe clean shoes</li> <li>• FFP3 masks</li> <li>• Eye and face protection (visor)</li> </ul> <p><b>Linen</b></p> <ul style="list-style-type: none"> <li>• Do not shake linen</li> <li>• Bag linen in the room carefully, <b>before the room is cleaned</b></li> <li>• Use alginate bag, seal or tie bag and place inside an impermeable bag for transport to the laundry facility</li> </ul> <p><b>Waste</b></p> <ul style="list-style-type: none"> <li>• Waste should be disposed of in an orange bag and managed as standard clinical waste. Sharps should be disposed of in appropriate sharp bins.</li> </ul> <p><b>Equipment</b></p> <ul style="list-style-type: none"> <li>• Single use/single patient use if possible</li> </ul> <p><b>Movement around the Hospital – Patient transport</b></p> <ul style="list-style-type: none"> <li>• If the patient is transferred, please inform the receiving staff of patients’ infection status, including radiology, theatres, or other hospital/health care settings. Patient should wear a surgical (FRSM) mask</li> <li>• If the patient requires ambulance transport, all requests should go through the 999 Control Room. The patient should wear a surgical (FRSM) mask and any lesions should be covered.</li> </ul> <p><b>Staff contact tracing</b></p>

	<p><a href="#">Mpox (monkeypox) contact tracing guidance: classification of contacts and advice for vaccination and follow-up: version 17 (23 January 2023) (publishing.service.gov.uk)</a> will be undertaken by the IPC and Occupational Health Teams</p>
<p style="writing-mode: vertical-rl; transform: rotate(180deg);"><b>CLEANING</b></p>	<ul style="list-style-type: none"> <li>• All equipment used <b>MUST</b> be decontaminated using Green Clinell Wipes before being brought out of the patent room and after every patient use</li> <li>• All frequently touched surfaces should be clutter free and cleaned 3 times a day</li> </ul> <p><b>Inpatient Room with AGPs</b></p> <ul style="list-style-type: none"> <li>• <b>PPE</b> (FP3 mask, gown, gloves, face and eye protection (visor))</li> <li>• <b>Daily enhanced cleaning</b> of the side room/bed space of all patients with acute respiratory illness should be requested via the Help Desk, and a <b>terminal clean</b> (including mattress) on discharge (Disinfection with 1000ppm available chlorine)</li> </ul> <p><b>Outpatient Setting/Cleaning of common areas</b></p> <ul style="list-style-type: none"> <li>• <b>PPE</b> (FRSM, face and eye protection (visor or goggles), disposable gloves, and apron)</li> <li>• Clean surfaces with Green Clinell wipes</li> <li>• Steam clean carpets</li> </ul>