

AT A GLANCE

Infection Prevention and Control (IPAC) Recommendations for Monkeypox in Health Care Settings

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Transmission

Monkeypox virus can be transmitted from animals-to-humans (i.e., zoonotic transmission) or person-to-person by contact with infected lesions, skin scabs, body fluids or respiratory secretions. It can also be transmitted by contact with materials contaminated with the virus (e.g., clothing, bedding).¹⁻⁴

Historically, there has been limited person-to-person transmission.^{3,4} The primary mode of person-to-person transmission has been through respiratory secretions and direct contact with skin lesions or a patient's items that have been contaminated.^{2,4} However, given the respiratory system involvement during infection, the possible transmission during the prodromal period and similarities to variola virus (smallpox), the potential for airborne transmission has been suggested.¹⁻⁴

The incubation period averages 7 to 14 days (range 5 to 21 days). A person is most commonly contagious from the onset of initial lesions (typically on the tongue and in the mouth), until scabs have fallen off and new skin present. Some cases may be contagious during their early set of symptoms (prodrome) such as fever, malaise, headache before the rash develops.²

IPAC Precautions in All Health Care Settings

In addition to Routine Practices, the following Additional Precautions - Airborne/Droplet/Contact Precautions are to be used.¹

Room Placement:

- Airborne isolation rooms (AIR) with negative pressure ventilation.^{1,5}
- When AIRs are not available, the patient can be placed in a single room with the door closed with dedicated toileting facility.
- If neither option is feasible, then precautions should be taken to minimize exposure to surrounding individuals such as having the patient don a medical mask over their nose and mouth as tolerated and covering exposed skin lesions with clothing, sheet or gown as best as possible.

Hand hygiene as per the [Four Moments of Hand Hygiene](#).⁶

Personal Protective Equipment (PPE) for health care workers:

- Fit-tested and seal checked N-95 respirator (or equivalent); perform seal check after donning N95 respirator.
- Gloves
- Gown
- Eye protection (e.g., face shields or goggles)

Duration: Additional Precautions are maintained until all scabs have fallen off and new skin is present.

Patient Transport: Have the patient wear clean clothes/gown, wash their hands, wear a medical mask and cover their lesions to the best extent possible for transport.

Laundry: Special handling of linen from patients on Additional Precautions is not required. Care should be taken in the handling of soiled linen to prevent dispersal of microorganisms.^{1,5}

Waste disposal: Containment and disposal of contaminated waste (e.g., dressings) in accordance with facility-specific guidelines for infectious waste.

Environmental cleaning: Healthcare-grade cleaning and disinfecting agents, with a Drug Identification Number (DIN) are appropriate for cleaning and disinfection of environmental surfaces and shared equipment in the patient care environment. Follow the manufacturer's recommendations for dilution and contact time.^{1,5}

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