

Date:



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SRHD.org



Letter to Employee who may have been exposed to mpox virus (MPXV)

You are receiving this letter because you were recently around someone with mpox virus infection. Mpox is a virus that can be transmitted to humans from animals and from human to human. These instructions are based on the Centers for Disease Prevention & Control (CDC) guidance, which can be found here:

[Mpox Infection Prevention and Control in Healthcare Settings | Mpox | CDC](#)

Correct and consistent use of personal protective equipment (PPE) when caring for a patient with MPXV infection is highly protective and prevents transmission to healthcare providers (HCP). However, unrecognized errors during the use of PPE (e.g., self-contaminating when removing contaminated PPE) may create opportunities for transmission to HCP. Therefore, in the absence of an exposure described below, HCP who enter a contaminated patient room or care area while wearing recommended PPE should be aware of the [signs and symptoms of MPXV](#). If any signs or symptoms of MPXV occur, HCP should notify occupational health services for further evaluation and should not report to work (or should leave work, if signs or symptoms develop while at work).

Your degree of exposure is considered:

Degree of Exposure	Post-Exposure Prophylaxis (PEP)*	Monitoring
High Risk <ul style="list-style-type: none">Unprotected contact between an exposed individual's <u>broken skin or mucous membranes</u> and the skin lesions or bodily fluids from a person with mpox (e.g., inadvertent splashes of infected person's saliva to the eyes or mouth of a person, sharps injury with contaminated sharp), or their materials (e.g., linens, clothing) visibly contaminated with body fluids, dried lesion exudate, or crusts.	PEP, which is JYNNEOS vaccine, recommended within 14 days after last exposure. However no additional doses are recommended if the exposed individual previously received all recommended doses of mpox vaccine .	Symptom monitor 21 days from exposure.
Intermediate Risk Absence of exposures above AND any of the following: <ul style="list-style-type: none">Unprotected contact between an exposed individual's <u>intact skin or clothing</u> and the skin lesions or bodily fluids from a person with mpox or their materials (e.g., linens, clothing) visibly contaminated with body fluids, dried lesion exudate, or crusts -OR-Being inside the person with mpox's room without wearing all recommended PPE while the person with mpox is receiving any medical procedures that may create aerosols from oral secretions (e.g., cardiopulmonary resuscitation, intubation) or during activities that may resuspend dried lesion exudates or crusts (e.g., shaking of soiled linens) -OR-Examining the oral cavity of a person with mpox with oral or laryngeal lesions while not wearing all recommended PPE	PEP, which is JYNNEOS vaccine, may be recommended within 14 days after last exposure. Informed clinical decision-making recommended on an individual basis to determine whether benefits of PEP outweigh risks of transmission or severe disease** No additional doses are recommended if the exposed individual previously received all recommended doses of mpox vaccine	Symptom monitor 21 days from exposure

Uncertain to Minimal Risk Absence of exposures above AND <ul style="list-style-type: none"> Unprotected contact with a person with mpox who has completely covered lesions (e.g., bandaged, covered with clothing), AND no contact with their skin lesions, bodily fluids, or any materials (e.g., linens or clothing) visibly contaminated with body fluids, dried lesion exudate, or crusts 	PEP not recommended	Consult with Infection Prevention team and SRHD.
No Identifiable Risk Absence of exposures above AND <ul style="list-style-type: none"> No contact with the person with mpox, their potentially contaminated surfaces or materials, and at most only transient time spent around the person with mpox 	PEP not recommended	none

* JYNNEOS® and ACAM2000® are available for PEP: [Interim Clinical Considerations for Use of Vaccine for Mpox Prevention in the United States | Mpox | CDC](#)

**Factors that may increase the risk of MPXV transmission include (but are not limited to): the person with MPXV infection had clothes that were soiled with bodily fluids or secretions (e.g., discharge, skin flakes on clothes) or was coughing while not wearing a mask or respirator, or the exposed individual is not previously vaccinated against smallpox or MPXV. People who may be at increased risk for severe disease include (but are not limited to): young children (<8 years of age), individuals who are pregnant or immunocompromised, and individuals with a history of atopic dermatitis or eczema.

How to Monitor and Report Symptoms

- For 21 days after your exposure to MPXV, watch for these symptoms of concern:
 - Fever
 - Chills
 - Headache
 - Rash
 - Flat or raised bumps, sometimes filled with fluid, or may be scabbed
 - Can be on any part of body, in any distribution
 - Muscle aches and backache
 - Swollen lymph nodes/glands/tonsils
 - Sore throat/nasal congestion/cough
 - Exhaustion
- Employee Health must monitor HCP for 21 days after the date of last exposure. Your organization may use the Daily Symptom Monitoring Attestation Form at the end of this document.
 - Your level of monitoring is at your organizations discretion, but should follow: [Mpox Infection Prevention and Control in Healthcare Settings | Mpox | CDC](#)
- If you develop any of the above symptoms during the 21-day monitoring period, please FIRST ISOLATE, then call SRHD Epidemiology at 509-324-1449.** (This is a confidential voicemail that is monitored 24/7.)
 - SRHD Duty Officer is available 7 days a week. SRHD and/or employee health will help coordinate testing and/or medical evaluation at a hospital/clinic to reduce exposures to other people.
 - Note:** special precautions in the healthcare facility are required. Please call ahead to the hospital/clinic and disclose that you are ill after a MPXV exposure so that precautions may be taken ahead of your arrival.

- Isolate away from other people and pets; avoid close face to face contact and sharing items like drinks.
- If isolation is not possible, wear a surgical mask at all times when around others and do NOT engage in any skin-to-skin contact with others.
- Do not use public transportation (like buses or taxis, including rideshare services like Uber).
- Employers should follow return to work guidance: [Mpox Infection Prevention and Control in Healthcare Settings | Mpox | CDC](#)

If you need emergency medical assistance, call 911 or go to the emergency department. If possible, please call ahead or notify EMS that you are ill after an MPXV exposure.

If you have any questions or develop any symptoms of concern, immediately call SRHD at 509-324-1442 (during business hours) or 509-324-1449 (24/7 confidential voicemail).

DAILY SYMPTOM MONITORING ATTESTATION FORM

Employee Name:			
Start date for symptom check:		Last date for symptom check:	

Day	Date	Temperature #1	Temperature #2	Signs and Symptoms
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
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