## **Mpox-Infection Control and Prevention**

## Healthcare Personnel (HCP) Exposure Risk Assessment

Feb 2024

Any healthcare worker who has cared for a mpox patient should be alert to the development of symptoms that could suggest mpox infection, especially within the 21-day period after the last date of care, and should notify infection control, occupational health, and the local health department to be guided about a medical evaluation. This healthcare personnel exposure risk assessment will assist in determining the degree of exposure and provide recommendations. Once the degree of exposure is determined, refer to the right columns for recommendations.

	Exposure Risk Assessment	Symptom Monitoring	Post Exposure Prophylaxis (PEP)	Additional Recommendations
Exposure Risk-HIGH	<ul> <li>Unprotected skin or mucous contact to the patients skin, lesions, body fluid, or contaminated materials. (This may include sexual contact, inadvertent splashes of patient saliva to eyes or oral cavity, ungloved contact with patient linens, clothing, etc.).</li> <li>Inside the patient's room or within 6 feet of patient during procedures that may create aerosols from oral secretions, skin lesions, or resuspension of dried exudates (shaking linen) without wearing an N95 or equivalent respirator (or higher) and eye protection.</li> </ul>	<ul> <li>Monitor symptoms for 21 days following last exposure including:</li> <li>Fever (greater than or equal to 100.4°F or 38°C)</li> <li>New lymphadenopathy (periauricular, axillary, cervical, inguinal)</li> <li>New skin rash</li> <li>Self-isolate if any symptoms occur.</li> <li>Persons who report only chills or lymphadenopathy should remain at their residence, self-isolate for 24 hours, and monitor their temperature for fever; if fever or rash do not develop and chills or lymphadenopathy persist, the person should be evaluated by a</li> </ul>	Prophylaxis (PEP) Vaccine should be given within 4 days from the date of exposure for the best chance to prevent onset of the disease. May be given between 4 and 14 days after the date of exposure to help reduce the symptoms of disease but may not prevent the disease. Contact your LHD for eligibility and availability.	RecommendationsIf symptoms develop and mpox is suspected, immediately notify your local health department. If you are unable to reach your local health department, call 304-558-5358 Ext. 2.HCP should notify their infection control staff and occupational health if exposed.Asymptomatic HCP <b>do not</b> need to be excluded from work.Avoid contact with immunosuppressed people, individuals with a history of
	If you did not check any of the boxes, proceed to the next section.	clinician for the potential cause. Prior to reporting to work, screen/interview HCP regarding symptoms or rash.		atopic dermatitis or eczema, those that are pregnant or breastfeeding, and children under 8 years old where possible.

				Remain close to home during the monitoring period, however, if planning to leave West Virginia during the monitoring period, please notify the local health department in advance of travel. Include dates of travel, out of state address, phone number, and any air travel with flight information.
Other Exposure	<ul> <li>Were within 6 feet of an unmasked patient for 3 hours or more without wearing, at a minimum, a surgical mask.</li> <li>Performed activities resulting in contact between your sleeves or other parts of your clothing and the patient's skin lesions, bodily fluid, or their soiled linens while you were wearing gloves but not a gown.</li> <li>Entered the patient room without wearing eye protection on one or more occasions, regardless of duration of exposure</li> <li>During all entries in the patient care area or room (except for during any procedures listed above in the high-risk category), wore gown, gloves, eye protection, and at minimum, a surgical mask.</li> <li>Were within 6 feet of an unmasked patient for less than 3 hours without wearing at minimum, a surgical mask.</li> </ul>	<ul> <li>Monitor symptoms for 21 days following last exposure including:</li> <li>Fever (greater than or equal to 100.4°F or 38°C)</li> <li>New lymphadenopathy (periauricular, axillary, cervical, inguinal)</li> <li>New skin rash</li> <li>Self-isolate if any symptoms occur.</li> <li>Persons who report only chills or lymphadenopathy should remain at their residence, self-isolate for 24 hours, and monitor their temperature for fever; if fever or rash do not develop and chills or lymphadenopathy persist, the person should be evaluated by a clinician for the potential cause.</li> </ul>	No recommendation.	If symptoms develop and mpox is suspected, immediately notify your local health department. If you are unable to reach your local health department, call 304-558-5358 Ext. 2. HCP should notify their infection control staff and occupational health if exposed. Asymptomatic HCP <b>do not</b> need to be excluded from work. Avoid contact with immunosuppressed people, individuals with a history of atopic dermatitis or eczema, those that are pregnant or breastfeeding, and children

	If any of the above are checked, please follow the guidance.	Prior to reporting to work, screen/interview HCP regarding symptoms or rash.		under 8 years old where possible. Remain close to home during the monitoring period, however, if planning to leave West Virginia during the monitoring period, please notify the local health department in advance of travel. Include dates of travel, out of state address, phone number, and any air travel with flight information.
No Risk	Exposure that public health authorities deemed did not meet criteria for other risk categories.	None recommended.	None.	No additional recommendations.