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GAVIN NEWSOM
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TO: All California Healthcare Providers

SUBJECT: Healthcare Provider Advisory: Guidance for Safe Specimen Collection From Monkeypox (MPX) Lesions: Reminder to NOT De-roof Lesions and NOT Use Sharps

This Advisory reminds California healthcare providers of Centers for Disease Control and Prevention (CDC) recommendations to reduce risk of MPX virus transmission to healthcare personnel (HCP) during collection of specimens from lesions for laboratory diagnosis of MPX.

The risk of MPX virus transmission from infected patients to HCP is very low; however, cases of occupationally-acquired MPX infection among HCP have been rarely described during the current outbreak. To date, CDPH has received reports of two California HCP who acquired MPX infection during specimen collection; among eight other cases reported worldwide, transmission was also associated with specimen collection, via: sharps injury (n=3); contact with body fluids (n=3); and contact with contaminated surfaces or items in the home of a patient with MPX (n=2). Additionally, a recent report found that HCP caring for patients with MPX had low adherence to use of the recommended personal protective equipment (PPE).

CDPH recommends HCP adhere to all CDC [recommended infection prevention and control](#) measures to reduce the risk of MPX virus transmission in healthcare settings, including [recommended PPE](#) and the following [guidance](#) for safe collection of MPX



lesion specimens for diagnostic testing, as well as specimen collection [print outs](#):

1. At triage, screen patients by asking questions about presence of MPX risk factors and if they have any new lesions concerning for infection on their body. If they answer yes to either question, place the patient in a single occupancy room and flag the encounter for the HCP to ensure use of recommended PPE.
2. Before entering the room of a person who may need to be tested for MPX or when the decision to perform testing is made for a patient who was not flagged, perform hand hygiene, and don the recommended PPE: N95 respirator, eye protection (goggles or face shield), gown, and gloves.
3. Explain to the patient the process of specimen collection to ensure cooperation and minimize unexpected movement.
4. Vigorously swab each lesion, avoiding contamination of gloved hands, to ensure adequate viral DNA is collected. **Do NOT de-roof or aspirate the lesion. Do NOT use sharps.** Vigorous swabbing of lesions maximizes the probability of achieving accurate diagnostic results. **Use of sharps, (e.g., needles, scalpels, lancets) is not necessary and has a risk of a sharps injury to the HCP.**
5. Insert each swab into a sterile container. Do not use glass containers. Carefully bend to break the swab's shaft to fit inside the sterile container (if applicable or place the entire swab into the container). After completely securing the lid, wipe the container with an Environmental Protection Agency (EPA)-approved disinfectant for emerging viral pathogens. Placing parafilm around the lid of the container is recommended for additional leak-proof protection, but not required. Remove gloves, perform hand hygiene, and don a new pair of gloves.
6. Cover all exposed lesions, (e.g., hands, arms, face) with gloves, bandages or dressings. Cover any draining lesions that may not be exposed, (e.g., genital, feet) with a dressing.
7. After the patient leaves the room, wipe down the exam table and other high touch surfaces using an EPA-registered disinfectant (List Q).

Resources

Guidelines for Collecting and Handling Specimens for Monkeypox Testing

(www.cdc.gov/poxvirus/monkeypox/clinicians/prep-collection-specimens.html)

Infection Prevention and Control of Monkeypox in Healthcare Settings

(www.cdc.gov/poxvirus/monkeypox/clinicians/infection-control-healthcare.html)

Sharps Safety for Healthcare Settings (www.cdc.gov/sharpssafety/index.html)

Bloodborne Infectious Diseases: Preventing Needlesticks

(www.cdc.gov/niosh/topics/bbp/sharps.html)

Joint ECDC-WHO Regional Office for Europe Monkeypox Surveillance

Bulletin.9.21.2022 (monkeypoxreport.ecdc.europa.eu/)

Monkeypox Virus Transmission to Healthcare Worker through Needlestick Injury, Brazil.

(wwwnc.cdc.gov/eid/article/28/11/22-1323_article)

Healthcare Workers Occupational Infection by Monkeypox Virus in Brazil. Preprints

2022, 2022080544 (doi: 10.20944/preprints202208.0544.v1).

Health Care Personnel Exposures to Subsequently Laboratory-Confirmed Monkeypox Patients — Colorado, 2022. MMWR 71; 1216-19

(www.cdc.gov/mmwr/volumes/71/wr/mm7138e2.htm?s_cid=mm7138e2_w)