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County Executive

Sherlita Amler, M.D.  
Commissioner of Health

# ATTENTION

## Public Health Alert

DATE: 29 June 2022

SUBJECT: MONKEYPOX RISK ASSESSMENT, PPE, & TESTING

PLEASE DISTRIBUTE TO EMERGENCY ROOM, AMBULATORY CARE, INTERNAL MEDICINE, PEDIATRIC, FAMILY PRACTICE, PRIMARY CARE, INFECTIOUS DISEASE, AND LABORATORY STAFF

Dear Colleagues:

As of 6-29-22, four (4) Westchester County residents have been diagnosed with monkeypox. We urge healthcare providers in Westchester County to be alert and to take the proper PPE precautions for patients who have rash illness consistent with monkeypox to ensure early diagnosis and to reduce risk to health care workers.

Most cases required multiple medical visits and resulted in a delayed diagnosis and a number of Westchester County healthcare provider exposures prior to diagnosis due to monkeypox not being suspected and not using the recommended PPE.

**Recommended PPE** (See below link for additional infection control information)

- Gown
- Gloves
- Eye Protection
- N-95 or higher level respiratory protection

A single room should be used; AIIR is not required unless an aerosol generating procedure is being performed.

Please see the NYSDOH and CDC advisories for additional information at:

[https://health.ny.gov/diseases/communicable/zoonoses/monkeypox/docs/2022-06-17\\_han.pdf](https://health.ny.gov/diseases/communicable/zoonoses/monkeypox/docs/2022-06-17_han.pdf)

Please consider monkeypox in individuals presenting with skin lesions and the following **risk factors and clinical presentation** (see above link to advisories for additional information):

- Although there is no evidence that monkeypox is sexually transmitted at this time, monkeypox cases to date in Westchester, NYS, the U.S., and internationally have predominantly been among men who have sex with men, those who identify as gay, or bisexual.
- Multiple or anonymous sexual contacts within the past 21 days
- Contact with a person or persons with similar skin lesions or who have been diagnosed with monkeypox within the past 21 days. Anyone with close skin to skin contact with someone with monkeypox can be infected.

- Westchester cases report either no international or **no travel** at all, indicating local person-to-person monkeypox transmission
- Persons with skin lesions consistent with and being evaluated for a number of sexually transmitted infections (STIs) e.g. Syphilis, Herpes Simplex, *Chlamydia*-LGV. Individuals diagnosed with an STI with consistent skin lesions also should be tested for monkeypox.
- Skin lesions in current monkeypox cases are quite **varied and often do not appear like the posted photos of classic monkeypox**. Lesions often start in the genital/perianal area, or in the oral mucosa.
- **Notify the Westchester County Department of Health (WCDH) of any suspected cases with the above risk factors and clinical presentation at (914) 813-5159, Mon-Fri 8:30 AM- 4:30 PM or 914-813-5000 (After Hours 24/7)**

**Testing** – At this time testing of (non-NYC) NYS residents is only available at the NYSDOH Wadsworth Laboratories and **must be approved by the NYSDOH and WCDH prior** to sending specimens or electronically ordering testing in the NYSDOH CLIMS system. CDC is working with major commercial diagnostic laboratories to expand testing. Testing should generally include:

**MPX specimens/testing:** (See above link to the NYSDOH advisory for details)

- 4 swabs (synthetic material) - 2 each from 2 different lesions, placed in viral transport medium
- Blood specimen for serology [https://www.cdc.gov/laboratory/specimen-submission/detail.html?CDC\\_TestCode=CDC-10516](https://www.cdc.gov/laboratory/specimen-submission/detail.html?CDC_TestCode=CDC-10516)
- These specimens **MUST BE HELD** at your facility pending approval and shipping directions from NYSDOH and **NOT** sent/picked up by commercial or other lab couriers.
- If there are no open skin lesions, vigorous swabbing of intact e.g. maculopapular lesions should be done and submitted
- Crusts from scabs or lesions that are scabbing over also can be sent

**STI specimens/testing** should also include the below, all of which can be done through your usual testing facility or commercially:

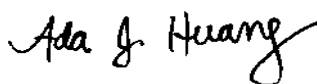
- Syphilis serologies or syphilis/*T. pallidum* NAAT
- GC/*Chlamydia trachomatis* (CT) NAAT
- LGV specific molecular testing – lesion swabs to be sent if CT NAAT is (+)
- HSV NAAT from lesions
- Any other diagnostic testing for which there is clinical suspicion

**Varicella Zoster (VZV) for PCR testing** (culture results can require many days) should be sent to your usual testing facility or commercially.

Thank you for your continued assistance and support.



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Commissioner of Health



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