

CDC/AAMC Clinicians' Checklist: Clinical Assessment of Patient with Suspected Monkeypox

Monday, June 13, 2022

According to the Centers for Disease and Prevention Control (CDC) [recommendations](#), here is a checklist for a clinical assessment of a patient suspected of monkeypox.

Preparing for Possible Cases

Supplies Needed:

- Sterile dry polyester, nylon, or Dacron swabs with a plastic, wood, or thin aluminum shaft (do **not** use other types of swabs)
- Individual, sterile containers
- Personal protective equipment:
 - Gowns
 - Gloves
 - Eye protection (for example: goggles or a face shield that covers the front and sides of the face)
 - Particulate respirator equipped with N95 filters or higher, as approved by NIOSH

Guidelines for Rash or Lesion Specimen Collecting ([CDC Site](#))

- **Clinicians should first isolate the patient in a single person room if available and immediately consult their state health department ([State Contacts](#)).**
 - Prompt notification is important to facilitate testing, exposure risk assessments for close contacts. For the patient or close contacts, consider available medications and vaccination.
- Make sure personnel wear recommended PPE while taking specimens.
- Swab or brush lesion vigorously with two separate sterile dry swabs. If possible, take samples from two different lesions. Use a separate swab for each lesion.
- Place swabs in individual sterile containers. If the specimen is not sent to a lab within immediate proximity, the sample should be frozen. **Do not add any transport media.**
- Refrigerate (2°–8°C) or freeze (-20°C or lower) specimens within an hour after collection. Store refrigerated specimens for up to 7 days and frozen specimens for up to 60 days.
- Send both swabs to the appropriate state or territorial public health laboratory. **All specimens should be sent to the state or territorial public health department, unless authorized to send them directly to the CDC.**
- A state public health laboratory may test one of the paired dry swabs for presumptive results. The CDC can provide monkeypox virus-specific testing on the second dry swab specimen if the

first dry swab is non-variola orthopoxvirus positive at the state or territorial public health laboratory. CDC may also perform sequencing.

- [CDC Infection Control Guidance](#)

How to Manage a Suspected Case

- [Case Definitions for Use in Monkeypox Recognition](#)
- [Clinical Recognition](#) Historically, people with monkeypox report flu-like symptoms – such as a fever, body aches, and swollen lymph nodes – before a characteristic rash appears on the body, often on the face, arms, and hands. During the current outbreak, some patients have developed a rash or lesions around the genitals or anus before any other symptoms, and some have not developed flu-like symptoms at all.
- [Information for Healthcare Professionals/2022 Monkeypox Cases](#)
- [Clinician FAQs](#)

Instructions for Patients While Test Results are Pending

- People with extensive lesions that cannot be easily covered, draining/weeping lesions, or respiratory symptoms (e.g., cough, sore throat, runny nose) should be isolated at home or area separate from other family members and pets when possible.
- People with a test pending for monkeypox should not leave the home except as required for follow-up medical care.
- Unexposed people who do not have an essential need to be in the home should not visit.
- Household members who are not ill should limit contact with the person who has a pending test for monkeypox.
- People with a test pending for monkeypox should avoid contact with animals, including pets. Other household members should care for pets when possible.
- People with a test pending for monkeypox, especially those who have respiratory symptoms, should wear a surgical mask. If this is not feasible (e.g., a child with a pending test for monkeypox), other household members should consider wearing a surgical mask when in the presence of that infected person.

Treatment Protocol

- Consult the [CDC interim treatment guidance for monkeypox](#) for clinical guidance and available medical countermeasures. Although there is [not a specific treatment for monkeypox](#) at this time, outbreaks can be mitigated.