



Tip sheet: Monkeypox for healthcare providers

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This tip sheet was developed by the San Francisco Department of Public Health (SFDPH) for local use. It will be posted at <http://www.sfdcp.org/monkeypoxhcp>.

AUDIENCE: Clinicians and healthcare providers.

PURPOSE: To help give healthcare providers an overview of how to test, treat, and provide care to patients with monkeypox. Further information is available, see 7/28/22 [PPT](#) and [webinar recording](#).

Testing and specimen submission

Monkeypox testing is now available through [LabCorp](#) and [Quest](#) as well as through the [San Francisco Public Health Lab](#). There is no need to contact SFDPH for approval to test at commercial laboratories, but providers must report all suspect cases to SFDPH within 1 business day by emailing a [Confidential Morbidity Report](#) (CMR) to monkeypox@sfdph.org or by fax to (415)554-2848. Write “suspect monkeypox” in the disease field.

All providers are requested to review and follow this [SF provider guidance for monkeypox evaluation](#), including infection control, [appropriate PPE](#), and specimen collection instructions, and patient isolation.

Treatment with tecovirimat (TPOXX)

TPOXX has an FDA indication for treating smallpox and is available to treat cases of severe monkeypox via Expanded Access Investigational New Drug (EA-IND) protocol. Patients may qualify for TPOXX treatment if they have any [conditions](#) that could lead to severe disease (e.g., immunocompromised) or complications (e.g., extensive or confluent lesions, lesions near the eyes, etc).

SF clinicians seeking assistance to become a prescriber can email monkeypox@sfdph.org or go to [SFDPH new treatment provider process](#). Non-San Francisco Health Network physicians can also visit [CDC information to obtain and use TPOXX](#) for more information.

Supportive care

Many patients experience self-limited disease with subjectively severe symptoms that do not meet current [criteria](#) for TPOXX administration. Patients in the outpatient setting should be monitored for progression of lesions that might lead to complications like bacterial superinfections, problems with voiding, urination or bowel movements or scarring in sensitive locations like around the eyes, urethra, or anus.

Symptomatic treatment should include pain relievers, antipruritic medications, topical cortisone, and benzocaine/lidocaine gels for painful proctitis. A warm [sitz bath](#) lasting at least 10 minutes, several times per day may be helpful.

Monkeypox vaccination and sites

Review criteria for [vaccine eligibility](#) in San Francisco. See list of [local monkeypox vaccine sites](#). Additional monkeypox vaccine information can be found at [EZIZ](#).

Isolation and preventing spread

People with monkeypox should isolate and avoid contact with other unaffected individuals until rash has fully resolved, the scabs have fallen off, and a fresh layer of intact skin has formed.

- Isolate in a room or area separate from other household members and pets when possible.
- Limit use of shared spaces and items. Do not share dishes and other eating utensils.
- Use an alcohol-based hand rub or wash hands with soap and water after touching material, clothing, linens, or environmental surfaces that may have had contact with rash material.
- If possible, use a separate bathroom if there are others who live in the same household.
- Cleaning can be done with standard disinfectants like Lysol/Clorox on non-porous surfaces.

Resources

San Francisco Department of Public Health (SFDPH)

- Monkeypox information & guidance for healthcare providers:
<http://www.sfdcp.org/monkeypoxhcp>

California Department of Public Health (CDPH)

- Information for healthcare providers:
<https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Monkeypox-HCP-Info.aspx>

Centers for Disease Control and Prevention (CDC)

- Information for healthcare professionals:
<https://www.cdc.gov/poxvirus/monkeypox/clinicians/index.html>