



San Francisco Department of Public Health

Grant Colfax, MD
Director of Health

City and County of San Francisco
London N. Breed
Mayor

ELIGIBILITY FOR THE MPX VACCINE (JYNNEOS) - SAN FRANCISCO CRITERIA

UPDATED October 12, 2022
(Newest updates are in *italics*)

ELIGIBILITY

- Gay or bisexual men, or any man, trans, or nonbinary person who has sex with men, trans, or nonbinary people
- Sex workers of any sexual orientation or gender identity
- Persons of any age and any gender who have had close contact within the past 6 months with someone with suspected or confirmed MPX
- Persons who had sex or close contact with others at a venue or event or within a social group within the past 6 months where a suspected or confirmed MPX case was identified. This includes persons who received notice from a venue or event of a potential exposure.
- ***Persons living with HIV***
- ***Persons who are taking or are eligible to take HIV PrEP***
- Sexual contacts of any of the persons above
- Persons who anticipate experiencing any of the above
- Laboratory workers who routinely perform MPX virus testing
- ***Clinicians who are likely to collect laboratory specimens from persons with MPX***
- Clinicians who have had a high-risk occupational exposure (e.g., examined MPX lesions or collected MPX specimens without using recommended personal protective equipment)

ELIGIBILITY FOR 2ND DOSES

Persons eligible per the above list who meet CDC criteria for 2nd dose are eligible after a 4-week interval from their 1st dose.



City and County of San Francisco
London N. Breed
Mayor

DEFINITIONS AND EXPLANATIONS

San Francisco Nexus. To be eligible for vaccine in San Francisco the person should live or work in SF or the MPX exposure occurred in SF. (During the period from 9/18-10/9/2022, visitors to SF were also eligible for vaccine).

Series. The vaccination series with Jynneos consists of 2 doses given 4 weeks apart, both for post-exposure prophylaxis and pre-exposure vaccination. Those whose 2nd dose is delayed will not have to restart the series.

Timing of Post-Exposure Prophylaxis (PEP). Current CDC recommendation is that PEP initiated within 4 days of exposure can prevent MPX illness whereas PEP initiated within 5-14 days after exposure, and before symptom onset, can reduce symptoms but may not prevent illness. There is no evidence that PEP is effective when given beyond 14 days after exposure. In persons who may have had multiple MPX exposures, PEP can be timed from the last exposure.

PEP in Persons Who have Symptoms. Many non-MPX syndromes can be consistent with early signs/symptoms of MPX. A person otherwise eligible for PEP who has a nonspecific rash or nonspecific symptoms that could possibly be consistent with early MPX, may still be able to receive PEP if it is warranted per the clinician's judgement. However, if the symptoms are highly suggestive of MPX, the vaccine should not be administered.

Persons Who Have Had MPX Diagnosed. [Current CDC recommendation](#) is that having MPX infection likely confers immune protection. Therefore, persons who have had MPX diagnosed since May 2022 are not recommended for vaccination, and those who have received a first dose of Jynneos are not recommended to receive a second dose. ***Exception: persons with immune compromise who acquire MPX infection may receive the 2-dose MPX vaccine series, and if they are diagnosed with MPX after their 1st dose, they may receive a 2nd dose.***

Close Contacts and Exposures to MPX in Healthcare and non-Healthcare Settings Defined.

Adapted from: [Monitoring People Who Have Been Exposed | Monkeypox | Poxvirus | CDC](#)

High Risk exposures:

- Direct contact between a person's skin or mucous membranes and the skin, lesions, or bodily fluids of a person with suspected or confirmed MPX. Examples: any sexual contact including



San Francisco Department of Public Health

Grant Colfax, MD
Director of Health

City and County of San Francisco
London N. Breed
Mayor

kissing, oral-anal or oral-genital contact or insertive or receptive vaginal or anal sex; ungloved contact with rash or lesions; saliva splashes to the eyes or oral cavity.

- Direct contact with contaminated materials (e.g., linens, clothing) of a person with suspected or confirmed MPX.
- (Healthcare settings) Being inside the room of a patient with confirmed or suspected MPX or within 6 feet of such a patient during any procedures that may create aerosols from oral secretions, skin lesions, or resuspension of dried exudates (e.g., shaking of soiled linens), without wearing an N95 or equivalent respirator and eye protection

Intermediate Risk exposures:

- (Healthcare settings) Being within 6 feet for 3 hours or more of an unmasked patient with suspected or confirmed MPX without wearing, at a minimum, a surgical mask
- (Healthcare settings) Activities resulting in contact between sleeves and other parts of an individual's clothing and the patient's skin lesions or bodily fluids, or their soiled linens or dressings (e.g., turning, bathing, or assisting with transfer) while wearing gloves but not wearing a gown.