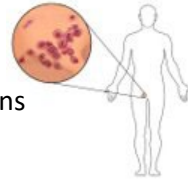


Monkeypox Clinical Assessment Guide

Signs and Symptoms

- A new, maculopapular rash that develops into vesicles and then pustules.
- Lesions may be firm or rubbery, well-circumscribed, deep-seated, and often develop umbilication during the pustular stage.
- The rash may:
 - Appear anywhere on the body, including palms, soles, oral mucous membranes, anus, and genitalia
 - Be the only symptom people experience
 - Be painful, painless or itchy
- Lesions typically crust over, 7 to 14 days after rash begins
- Lesions may present w/wo symptoms such as fever, headache, malaise, chills, lymphadenopathy, myalgias
- Patients may present with anorectal pain, rectal bleeding, or tenesmus along with perianal skin lesions and proctitis



Ask the patient: Within the last 21 days, have you

- Had close or intimate contact with someone with a similar rash or confirmed monkeypox infection?
 - The monkeypox virus is primarily spread through close personal contact including kissing and sex with an infected person or shared clothing or bedding.
- Had close or intimate contact with someone in a social network experiencing monkeypox infection?
 - Although anyone can get monkeypox, men who have sex with men and individuals with multiple partners have been most affected.

[Clinical Recognition of Monkey Pox](#). Additional information: [CDC Clinician FAQs](#).



For most cases, monkeypox infections are mild and self-limiting, and **do not require treatment** except for supportive care. Mild to moderate pain can be treated with topical lidocaine, narcotics, sitz baths, NSAIDs, Tylenol.

Primary care offices should conduct initial assessment and testing for monkeypox infection. PCP offices without testing capacity can refer patients to an SLH UCC* for testing if indicated. Please be sure to call the UCC prior to patient arrival. The ER should be reserved for patients requiring hospitalization.

Vaccines

Monkeypox vaccination is being recommended for post-exposure prophylaxis in those exposed to someone with monkeypox. The MO Department of Health (DOH) is also offering vaccination to those who anticipate possible exposure. Individuals should contact the DOH 314-657-1499 to make a vaccine appointment or fill out this [form](#) on the [STL county DOH website](#).

www.cdc.gov/monkeypox

*SLH UCC's monkeypox testing sites:

O'Fallon

5551 WingHaven Boulevard
1/2 mile north of Highway 40/I-64
O'Fallon, MO 63368
Phone: 636-228-6249

Ellisville

233 Clarkson Road
1/2 mile north of Manchester Road
Ellisville, MO 63011
Phone: 636-330-0632

Des Peres

12304 Manchester Road
Across from Des Peres Park
Des Peres, MO 63131
Phone: 314-916-9311

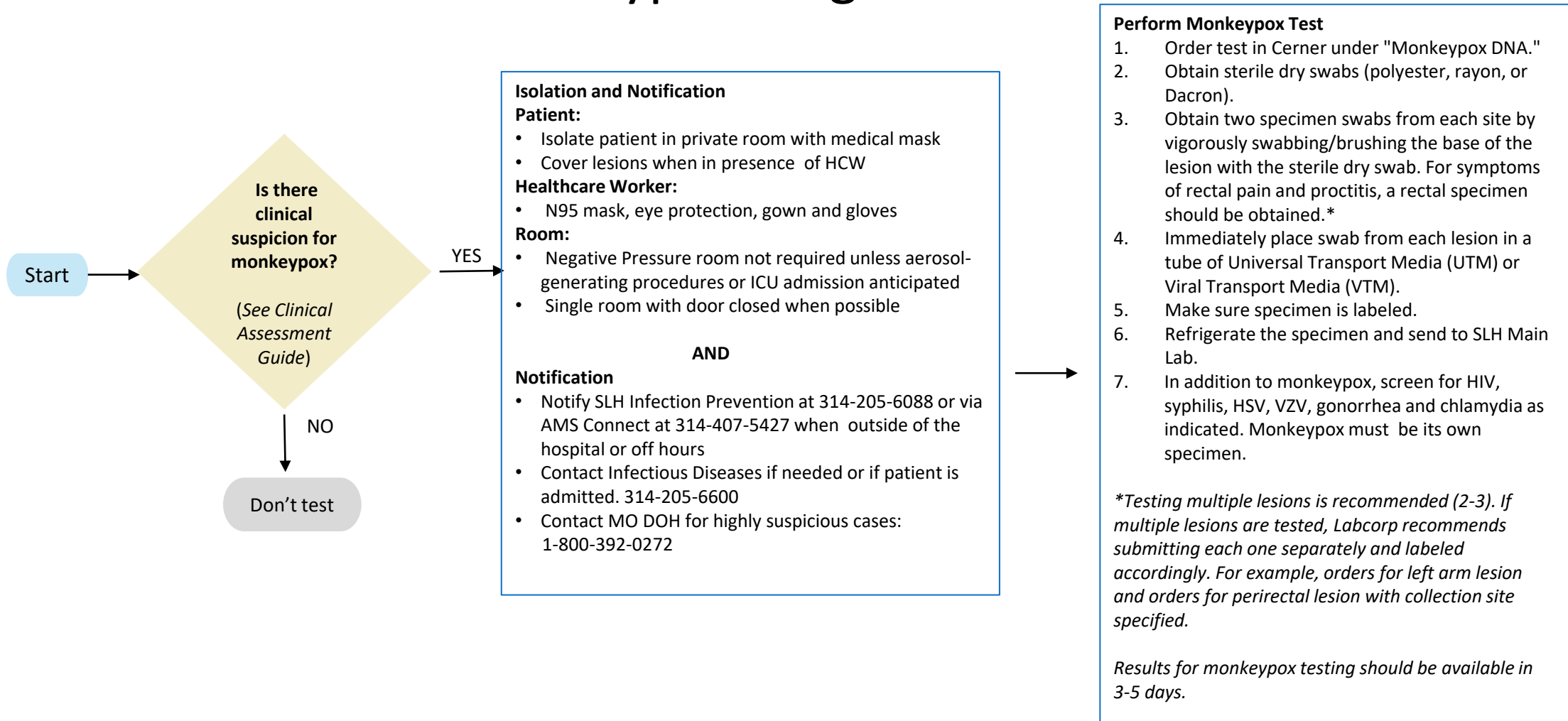
Creve Coeur

11550 Olive Blvd.
at Old Ballas Road
Creve Coeur, MO 63141
Phone: 314-501-9252



Our specialty is you.

Monkeypox Diagnosis Guideline



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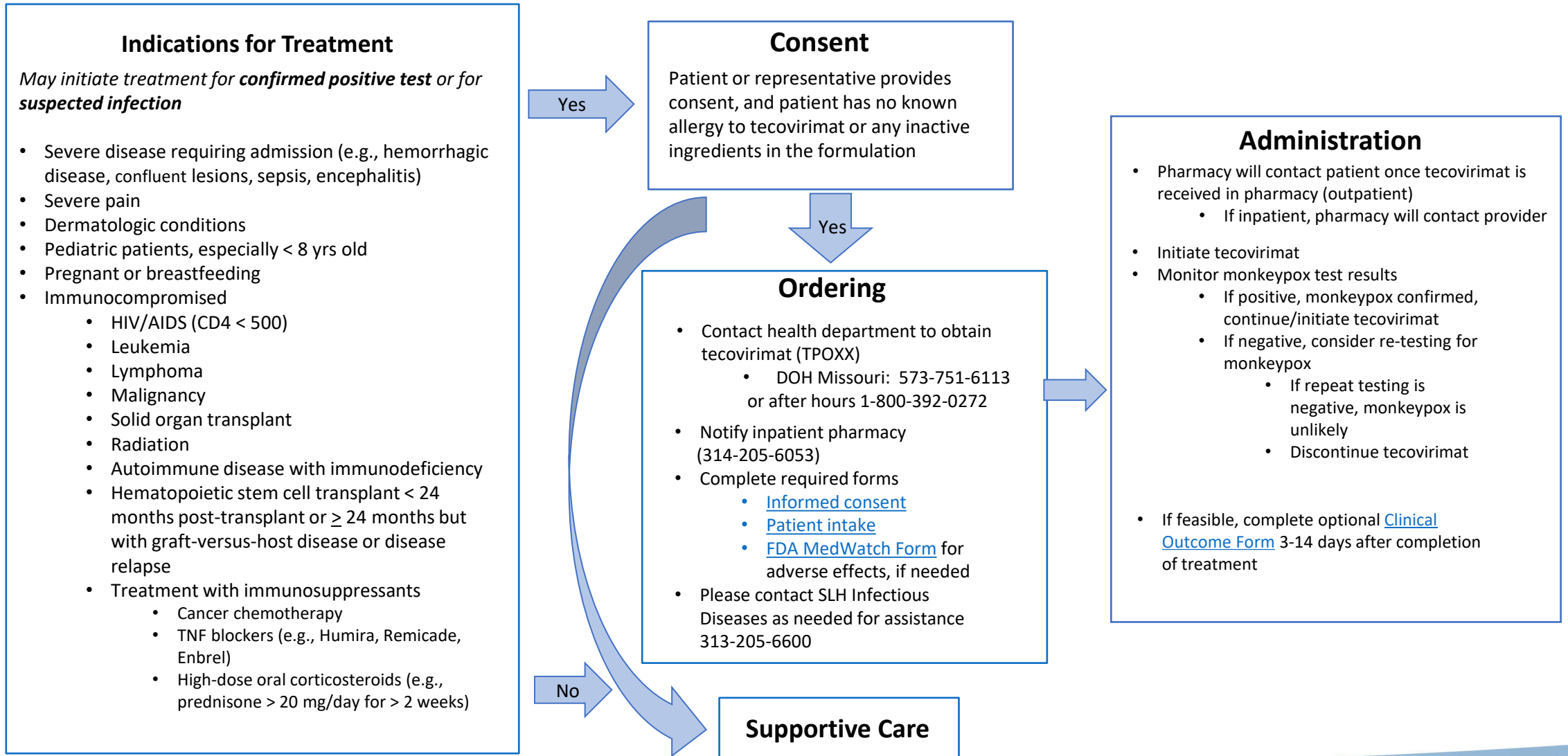
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Monkeypox Treatment Guideline



Supportive Care

- For most cases, monkeypox infections are mild and self-limiting, and do not require treatment expect for supportive care.
- Mild to moderate pain can be treated with topical lidocaine, narcotics, sitz baths, NSAIDS, or Tylenol.
- Patient should remain in isolation until all symptoms have resolved, including full healing of the rash with formation of a fresh layer of skin.
- Until all signs and symptoms have fully resolved
 - Do not share items that have been worn or handled with other people or animals. NO contact with animals, including pet cats and dogs
 - Avoid close physical contact, including sexual and/or close intimate contact with other people.
Wear a condom for 8 weeks after recovered from illness
 - Avoid sharing utensils or cups. Items should be cleaned and disinfected before use by others.
 - Avoid crowds and congregate settings.
 - Wash hands often with soap and water or use an alcohol- based hand sanitizer, especially after direct contact with the rash.

[Preventing Spread to Others | Monkeypox | Poxvirus | CDC](#)

[Disinfecting Home and Other Non-Healthcare Settings |
Monkeypox | Poxvirus | CDC](#)