health net

Los Angeles County: What to Know About the Monkeypox (MPX) Virus

LEARN ABOUT MPX AND HOW TO PROTECT YOUR PATIENTS

Monkeypox (MPX) is a rare disease caused by the MPX virus. It leads to rash and flu-like symptoms. It is similar to smallpox but less severe. It is a member of the family called orthopoxvirus. MPX spreads through close, physical contact between people. This means anyone can get MPX. However, based on the current outbreak, certain populations are being affected by MPX more than others, including men who have sex with men (MSM).

What are the key symptoms and indicators of MPX?

- **Indications of skin lesions,** which are areas of skin that look different from the surrounding area. They are often lumps, bumps, ulcers, sores, or colored areas of the skin. MPX skin lesions are often described as painful until the healing phase when they become itchy and crusty.

- **During the current global outbreak**

  - It often occurs in the genital and anorectal areas (with signs of pain or bleeding), or in the mouth. Rash may be confined to only a few lesions or only a single lesion.

  - Lesions typically develop at the same time and advance through four stages with respective durations – macular (1–2 days), popular (1–2 days), vesicular (1–2 days) and pustular (5–7 days) – before scabbing (7–14 days) over and peeling off.

  - The incubation period is 3–17 days, during which time a person may not have symptoms at all and the illness often lasts 2–4 weeks.

- **Prodromal symptoms** (fever, chills, malaise, headache, myalgias, or lymphadenopathy) may occur before rash, after or not be present at all.

For more information on MPX, symptoms and indicators, refer to **www.cdc.gov/poxvirus/ monkeypox/clinicians/clinical-recognition.html** or visit **publichealth.lacounty.gov/acd/ Monkeypox/.**

How to test a patient for MPX

- Testing is available through several commercial labs, which are using the Centers for Disease Control and Prevention's (CDC's) orthopoxvirus test. Labs available for testing are Quest Diagnostics, LabCorp, Aegis Sciences, Sonic Healthcare USA, and ARUP Laboratories.

- Health care providers must report all Los Angeles County residents with orthopoxvirus infections, hospitalizations, and deaths within 1 working day from identification (Title 17, CCR, §2500). The online report form can be obtained at **dphredcap.ph.lacounty.gov/ surveys/?s=DMRYFCC3TM.**

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- Orthopoxvirus tests are now a Medi-Cal benefit. Orthopoxvirus virus tests administered on or after July 26, 2022, should use **CPT code 87593.**

- Diagnosis for MPX should use **ICD-10 code B04** (Monkeypox).

- Providers that suspect MPX in a person experiencing homelessness (PEH), pregnant persons and children with a history of close, personal contact with someone who has MPX as well as providers that do not have access to testing, can submit specimens to the LAC DPH Public Health Laboratory (PHL). Approval is needed at PHL by calling below or specimens will not be tested.

  - Be prepared to share photos of the rash and provide pertinent medical information (e.g., rash onset date, rash type, symptoms, smallpox vaccination date if relevant, exposure history).

  - PHL testing may be requested seven days a week during these hours:

    » Monday–Friday: 8:30 a.m. to 5 p.m., **213-240-7941.** Weekends and holidays: 8 a.m. to 5 p.m., **213-974-1234.**

    » During the evening (Monday–Sunday 5 p.m. to 8 a.m.), providers should collect, store, and label the specimens as outlined in this section and call Public Health for approval in the morning.

Are there vaccines available?

Two vaccines may be used for the prevention of MPX disease:

1. **JYNNEOS™** vaccine is approved for the prevention of MPX and smallpox disease.

2. **ACAM2000** vaccine is approved for immunization against smallpox disease and made available for use against MPX under an Expanded Access Investigational New Drug (EA-IND) protocol.

Currently, JYNNEOS is the only vaccine available in California and was given the Emergency Use Authorization (EUA) on August, 9, 2022, for prevention of MPX. JYNNEOS is approved for individuals 18 years of age and older at high risk for MPX infection and administered intradermally as a two dose series (0.1 ml given at least 28 days apart). The EUA also allows for use of the vaccine in individuals younger than 18 years of age **and** individuals of any age, who have a history of keloid formation, by subcutaneous injection as a two-dose series (0.5 ml given at least 28 days apart). People who receive JYNNEOS are not considered vaccinated until **two weeks** after they receive the second dose of the vaccine. The CDC states that vaccination given within four days from the date of exposure may prevent disease. Vaccination given between 4–14 days from date of exposure may reduce symptom severity.

Who is eligible for JYNNEOS vaccine?

Due to limited vaccine supply, LAC DPH is offering JYNNEOS vaccine in phases. Eligibility for JYNNEOS vaccine will expand as vaccine supply increases or the epidemiology of the outbreak changes. For information on groups currently eligible for vaccination, refer to the LAC DPH website at **publichealth.lacounty.gov/acd/monkeypox/Vaccine/#jynneos-admin.**

Providers with JYNNEOS vaccine from the LAC DPH should vaccinate their own patients meeting eligibility criteria for MPX vaccine. Providers that do not have the JYNNEOS vaccine should advise patients who meet the eligibility criteria to visit a public vaccination site for the vaccine or visit **myturn.ca.gov.** Individuals without access to the internet can call the **DPH at 833-540-0473.**

For more information on JYNNEOS vaccine, visit the CDC website at **www.cdc.gov/poxvirus/monkeypox/interim-considerations/jynneos-vaccine.html.**

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Are there treatments available for MPX?

Tecovirimat (TPOXX) may be considered for treatment in people infected with MPX virus. Please visit the LAC DPH *Guidance for the Treatment of MPX-Tecovirimat* available at **publichealth.lacounty.gov/acd/monkeypox/#infection-control-in-healthcare-setting.**

For more information on Tecovirimat, visit the CDC website at **www.cdc.gov/poxvirus/monkeypox/clinicians/Tecovirimat.html.**

Helpful tips to prevent the spread of MPX

Providers should consider these steps to help prevent the spread of MPX when a patient is suspected or confirmed with MPX infection:

- Place the patient in a single-person room with the door kept closed (if safe to do so) and have a dedicated bathroom for patient. Limit transport and movement of patient outside of room. Patient should use a medical mask and have sheet or gown to cover any exposed skin lesions.

- Ensure personal protective equipment (PPE) is used by health care workers in the care of all patients including for patients with suspected MPX. PPE includes gloves, gown, National Institute for Occupational Safety and Health (NIOSH) approved respiratory devices equipped with N95 filters or higher, and other face and eye protection (e.g., goggles, face shields) for potential splash or spray of blood, respiratory secretions, or other body fluids.

- Clean and disinfect the environmental surface using a U.S. Environmental Protection Agency (EPA) registered hospital-grade disinfectant product or the EPA-registered product List Q, which are products qualified for use against Emerging Viral Pathogens (EVPs).

- Keep soiled laundry in appropriate laundry bags. Never shake or handle in a manner that may disperse infectious particles. Activities such as dry dusting, sweeping or vacuuming should be avoided. Wet cleaning methods are preferred. Discard all personal waste as a medical waste.