



**Orange County**

**ATTENTION**

**STEVEN M. NEUHAUS**  
County Executive

**PUBLIC HEALTH ALERT**

**Dr. Irina Gelman, DPM, MPH, PhDc**  
Commissioner of Health

JULY 26, 2022

**PLEASE DISTRIBUTE TO AND POST CONSPICUOUSLY IN PEDIATRIC, FAMILY PRACTICE, PRIMARY CARE, EMERGENCY ROOM, INTERNAL MEDICINE, URGENT CARE, INFECTIOUS DISEASE, OB/GYN, LABORATORIES, HOSPITALS, AND AMBULATORY CARE STAFF.**

**PUBLIC HEALTH ALERT #6**  
**Emergency of Monkeypox Outbreak in New York State**

As of July 25, 2022, a total of 1,111 confirmed orthopoxvirus/monkeypox cases in New York- a designation established by the Centers for Disease Control and Prevention (CDC) - have been identified in the United States. Of those, 1,040 are in New York City and 71 are in New York outside of NYC including two cases in Orange County.

As of July 23, 2022, the World Health Organization declared Monkeypox a public health emergency. In the United States, evidence of person-to-person disease transmission in multiple states and reports of clinical cases with some uncharacteristic features have raised concerns that some cases are not being recognized and tested. While early data suggests that people who identify as gay, bisexual, and other men who have sex with men have made up a high proportion of cases, it is critical that anyone who is experiencing symptoms consistent with monkeypox, such as a characteristic rashes or lesions should be assessed for Monkeypox. Although all patients diagnosed with monkeypox in the United States to date have experienced a rash or ananthem, some cases have presented with some features uncharacteristic of the classic monkeypox disease. These uncharacteristic features include:

- Rash beginning in mucosal areas (e.g., genital, perianal, oral mucosa)
- Lesions scattered or localized to a specific body site, rather than diffuse, and that may not involve the face or extremities
- Lesions in different stages of progression on a specific anatomic site
- Classical prodromal symptoms not always occurring before rash if they occur at all
- Presentation with symptoms such as anorectal pain, tenesmus, and rectal bleeding
- Presentation similar to some sexually transmitted infections (STI), such as syphilis herpes, lymphogranuloma (LGV), or other etiologies of proctitis

Providers should be alert for patients who have rash illnesses consistent with monkeypox regardless of their gender, gender of sex partners, travel history, or specific risk factors for monkeypox. In people with epidemiologic risk factors, rashes initially considered characteristic of more common infections such as sexually transmitted infections (STIs), should be carefully evaluated for concurrent characteristic monkeypox rash and considered for testing. Clinicians suspecting monkeypox should strictly adhere to infection prevention and control practices and immediately notify the OCDOH if monkeypox is suspected. Please see the NYSDOH Health Advisory from July 8<sup>th</sup> for information regarding infection control protocols and the testing of specimens

at Wadsworth Public Health Laboratories:

[https://health.ny.gov/diseases/communicable/zoonoses/monkeypox/docs/2022-07-08\\_han.pdf](https://health.ny.gov/diseases/communicable/zoonoses/monkeypox/docs/2022-07-08_han.pdf)

Healthcare providers should be aware of the recommendations below for PPE to limit potential exposure in the healthcare setting.

Recommended PPE includes:

- Gown
- Gloves
- Eye Protection
- N-95 or higher-level respiratory protection

A single room should be used; AIIR is not required unless an aerosol generating procedure is being performed. Please see the CDC Infection Prevention and Control of Monkeypox in healthcare Setting Website for additional information at:

<https://www.cdc.gov/poxvirus/monkeypox/clinicians/infection-control-healthcare.html>

Please consider monkeypox in individuals presenting with skin lesions and the following risk factors and clinical presentation (see above link to advisories for additional information):

- Although there is no evidence that monkeypox is sexually transmitted at this time, monkeypox cases to date in NYS, the U.S., and internationally have predominantly been among men who have sex with men, those who identify as gay, or bisexual;
- Multiple or anonymous sexual contacts within the past 21 days
- Contact with a person or persons with similar skin lesions or who have been diagnosed with monkeypox within the past 21 days. Anyone with close skin to skin contact with someone with monkeypox can be infected.
- Persons with skin lesions consistent with and being evaluated for a number of sexually transmitted infections (STIs) e.g. Syphilis, Herpes Simplex, Chlamydia-LGV. Individuals diagnosed with an STI with consistent skin lesions also should be tested for monkeypox.

Skin lesions in current monkeypox cases are quite varied and often do not appear like the posted photos of classic monkeypox. Lesions often start in the genital/perianal area, or in the oral mucosa.

Commercial laboratory testing is now available through Labcorp, Aegis Sciences, Mayo Clinic Laboratories, Sonic Healthcare USA, and Wadsworth Public Health Laboratory. Quest Diagnostics is currently not available to healthcare providers in New York State at the time of this alert but is expected to be available pending State review. Questions about testing at these facilities should be directed to the appropriate laboratory. In order to test at Wadsworth Laboratory, **NYSDOH and OCDOH approval must be obtained prior to sending specimens.** Specimens sent to Wadsworth **without prior approval will be discarded.**

Antiviral treatment with tecovirimat should be considered for people with severe infection, illness complication, or risk factors for progression to severe infection. Step-by-step directions to order tecovirimat can be found on the CDC website here:

<https://www.cdc.gov/poxvirus/monkeypox/clinicians/obtaining-tecovirimat.html>

Post-Exposure Prophylaxis (PEP) for contacts of confirmed cases of Monkeypox may receive the JYNNEOS vaccine, as supplies are available, within 14 days of last contact. To receive vaccination approval, please contact OCDOH to conduct risk assessments for all potential contacts. As vaccine allocations are currently limited, please note that not all contacts may be approved for PEP.

Please report any suspect Monkeypox cases by calling OCDOH at 845-291-2330 immediately. On-call staff is available 24 hours a day, seven days a week.