



Mpox (monkeypox) quick guide for primary healthcare workers: Assessing and testing for mpox

All suspected cases must be notified by telephone to your local Public Health Unit

Assessment

Wear the appropriate PPE including:

- fluid repellent surgical mask, gloves, disposable fluid resistant long-sleeved gown and face shield or goggles
- a fit-checked* P2/N95 mask if the patient has respiratory symptoms, if varicella or measles is suspected, or aerosol-generating procedures (e.g. conducting procedures involving oropharynx).

Suspect mpox if the patient has clinical AND epidemiological evidence.

Assess for clinical evidence, including:

- a rash or lesion on any part of the body, including the mouth or rectum; may be maculopapular, vesicular, pustule, ulcer or scab
- proctitis (which may present with anal or rectal pain, bloody stools or diarrhoea) or urethritis (unexplained by other causes)
- prodromal symptoms may or may not be present (lymphadenopathy, fever ($\geq 38^{\circ}\text{C}$), headache, myalgia, arthralgia, back pain and sore throat)

Assess for epidemiological evidence:

In the 21 days before symptom onset:

- contact with a case of mpox, or
- sexual and/or physical intimate contact with a gay, bisexual or other man who has sex with men at events associated with mpox activity (e.g. sex-on-premises venues or festivals), or
- meeting new partners through dating or hook-up apps.

Testing and diagnosis

When collecting specimens (during consultation):

- use a sterile dry swab to vigorously rub the base of the lesion
- sample at least 2 lesions (skin, mouth or rectal) using individual swabs
- collect and send scabs if present
- in addition, obtain either a throat or nasopharyngeal swab
- use a rectal swab if proctitis only and no skin lesions
- collect a dry urethral swab if urethritis present (alternatively first void urine if swab declined by patient)
- avoid using swabs with transport medium
- double-bag the specimen in a biohazard bag to protect against leakage
- refrigerate specimen if delay in transporting specimen to the laboratory is anticipated (do not freeze).

Consider alternative diagnoses and request testing such as:

- a mpox PCR test
- document clinical features and epidemiological risk factors on the pathology request form
- consider testing for syphilis, varicella, herpes zoster, herpes simplex, measles, molluscum contagiosum and bacterial infection, if clinically compatible presentation, in addition to mpox

Where there is uncertainty about testing, advice can be obtained from an Infectious Disease Physician or Clinical Microbiologist.

Infection prevention and control

Instruct people with suspected mpox to stay at home until a negative result is received. They should wear a mask, be diligent with hand hygiene, cover lesions where possible, abstain from sexual contact and maintain physical distancing.

A suspected case can leave home for essential activities only. They should avoid crowded settings, high-risk persons and high-risk settings (including schools, childcare, health care and aged care settings).

Clean and disinfect the clinical workspace after the consultation by:

- removing PPE worn during consultation and apply a new set of PPE before cleaning and disinfecting the room
- following or combining cleaning with a disinfectant process using a 2-in-1 step clean (using a combined TGA listed detergent/disinfectant wipe or solution) or alternatively 2-step clean (detergent followed by TGA listed disinfectant)
- not reusing cloths, and avoiding dry dusting, sweeping and vacuuming, to prevent dispersal of infectious particles
- pay attention to frequently touched surfaces
- once surfaces are dry, the room can be safely used for the next patient consultation.

Notification

Contact your local Public Health Unit (PHU) by telephone to notify suspected cases within 24 hours, but ideally at the time or soon after consultation.

Public health contact details:

Metropolitan Perth 9222 8588 or 1300 623 292	
Pilbara 9174 1660	Kimberley 9194 1630
South West 9781 2359	Goldfields 9080 8200
Great Southern 9842 7500	Midwest 9956 1985
Wheatbelt 9690 1720	After hours (on-call) 9328 0553

Advise patient that mpox is notifiable to Public Health and patient may be contacted by the PHU.

If mpox result is negative, inform patient of their result and consider offering testing for BBVs and STIs.

If mpox result is positive, inform patient of their result. The PHU will provide further guidance.

Call the Clinical Microbiologist at your referring laboratory (private or PathWest) to inform them of specimens referred for mpox testing to facilitate safe handling and expedite testing.

*a 'fit-check' should be performed each time a P2/N95 respirator is used (and is independent of 'fit-testing'). See [WA Health Respiratory Protection program](#). To see the latest [WA Health Clinician alerts and updates](#). For further information visit health.wa.gov.au/mpox