***INSTRUCTIONS FOR LOCAL HEALTH DEPARTMENT STAFF ONLY***

***Use the approved language in this standing order to create a customized standing order exclusively for your agency.***

***Print the customized standing order on agency letterhead. Review standing order at least annually and obtain Medical Director’s signature.***

***Standing order must include the effective start date and the expiration date***

**Title of Standing Order:** Specimen Collection and Submission for Orthopox (Monkeypox) virus testing

**Purpose Statement:** To detect the presence or absence of Orthopox (Monkeypox) virus in persons who have been exposed, are at high risk, and exhibit a corresponding rash/ eruption.

**Policy:** Nurse Practice Act, N.C. General Statutes 90-171.20(7)(f)&(8)(c)

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| **Condition or Situation** |
| **Condition or Situation in Which the SO Will Be Used** | **Condition**Patient presents requesting testing for Orthopox (Monkeypox) virus (MPXV) and reports exposure and rash or eruption. |
| **Assessment** |
| **Assessment Criteria** | Patient presents with a new unexplained bump, lesion or rash. Typical Orthopox (Monkeypox) lesions should be firm, well circumscribed (very clear borders), deep seated (inflammation extends to the dermis), and well-differentiated (the lesions are clearly distinct from each other -if many lesions are present, they may overlap)And has one or more of the following:* In the 21 days prior to illness onset, the patient reports having close or intimate contact with a male who has sex with other men (MSM) OR close contact with a person who has been diagnosed with Orthopox (Monkeypox).
* Close or intimate contact with a person with a similar appearing rash of unknown etiology.
* Close or intimate in-person contact with person(s) in a social/sexual network experiencing Orthopox (Monkeypox) activity, this includes individuals who report having multiple or anonymous sex partners in the 21 days prior to rash onset.
* Travel outside the US to an area where Orthopox (Monkeypox) is endemic (Central or West African countries).
* Patient reports history of infection or Varicella Zoster vaccination.
* Lymphadenopathy (localized to general area or diffuse).
* Rash presents in same stage of evolution on any given body part (i.e., vesicular rash on arm and pustular rash on torso).
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| **Subjective Assessment** |
| **Subjective Assessment Criteria** | **Subjective Findings**1. Client presents reporting any one of the following:
2. History of contact with a person or people who have a similar appearing rash or received a diagnosis of confirmed or suspected Orthopox (Monkeypox).
3. Had close or intimate in-person contact with person(s) in a social network experiencing Orthopox (Monkeypox) infections. This includes MSM who meet partners through an online website, app, or social event.
4. Men who have sex with men or transgender individuals who have had multiple or anonymous sex partners in the last 21 days.
5. Reports rash/ eruption that resembles pimples or blisters that appear on the face, inside the mouth, and on other parts of the body, like the hands, feet, chest, genitals, or anus. The rash may include one or multiple eruptions.
6. Subjective findings alone do not satisfy N.C. Board of Nursing requirement for collecting or ordering a Orthopox (Monkeypox) culture by an RN or Enhanced Role Registered Nurse (ERRN).
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| **Objective Assessment** |
| **Objective Assessment Criteria** | **Objective Findings**1. Patient with the following objective finding must be present before collecting MPXV sample(s) by standing order:
2. Client presents with skin, genital, anal, or oral lesions/rash not previously diagnosed.
3. If subjective findings are reported but not present upon assessment, the patient should be referred to a provider for further clinical evaluation.
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| **Nursing Plan of Care** |
| **Contraindications for Use of this Order** | This order should not be implemented if the patient does not meet any portion of the subjective and objective criteria as described above. |
| **Specimen Collection****Specimen Collection****Cont.** | Specimen Collection:1. Specimens collected for submission to NC SLPH, must utilize instructions described in this standing order. Specimens that will be submitted to commercial or academic labs providing this testing, should be collected, processed, and shipped according to their guidelines.
2. Estimated turn-around time for initial results is 6-48 hours from time of specimen receipt and based upon the number of specimens received. USE STANDARD, CONTACT, AND DROPLET PRECAUTIONS WITH [APPROPRIATE PPE](https://www.cdc.gov/poxvirus/monkeypox/clinicians/infection-control-healthcare.html#:~:text=infection%20isolation%20room.-,Personal%20Protective%20Equipment%20(PPE),-PPE%20used%20by) when collecting specimens for orthopox (Monkeypox) testing.
3. See [Monkeypox Guidance for Local Health Departments](https://epi.dph.ncdhhs.gov/cd/lhds/manuals/cd/monkeypox/MonkeypoxLHDGuidanceMemo.pdf) for up to date instructions on swab/transport tube selection and specimen collection.

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| **Collection of Specimens for Orthopox RT-PCR Testing**NOTE: **At least two lesions should be sampled**, preferably from different locations on the body. To allow for further characterization at CDC, TWO DRY SWABS should be used simultaneously to vigorously scrub each lesion. |
| **Disease Stage** | **Acceptable Specimen Types** |
| Macules / Papules / Vesicles / Pustules | Vigorously scrub, using TWO DRY SWABS, the lesion base/lesion fluid |
| [Source: Monkeypox Provider Memo (ncdhhs.gov)](https://epi.dph.ncdhhs.gov/cd/docs/MonkeypoxProviderMemo.pdf) |

**Sample Collection:**1. Don appropriate PPE using standard precautions.
2. Specimens should be collected in the manner outlined below. When possible, use a plastic, sterile, leak-proof container rather than glass materials for specimen collection.
3. Place each specimen in an individual collection tube (i.e., one tube per swab). See [Monkeypox Guidance for Local Health Departments](https://epi.dph.ncdhhs.gov/cd/lhds/manuals/cd/monkeypox/MonkeypoxLHDGuidanceMemo.pdf) to get the most up to date instruction on collection container.
	1. Label each specimen tube separately with: Specimen site/type
	2. Patient Name
	3. Date of Birth
	4. Date of Collection
4. Swab collection - use a sterile nylon, polyester, or Dacron swabs with plastic, wood, or thin aluminum shaft to vigorously scrub the rash/eruption. Do not use cotton or other types of swabs. Scrub vigorously for best results.
5. Break off the end of each swab separately and place into transport tubes as specified in [Monkeypox Guidance for Local Health Departments](https://epi.dph.ncdhhs.gov/cd/lhds/manuals/cd/monkeypox/MonkeypoxLHDGuidanceMemo.pdf).

**Specimen Storage and Shipping Requirements:**1. All specimen submissions must have a completed BTEP Specimen Submission Form.
2. Within one hour of collection, place all specimens in a 2-8°C refrigerator or a freezer at -20°C or colder.
3. Refrigerated (2-8°C) samples are acceptable for testing up to 7 days after collection. Frozen samples (-20°C or lower) are acceptable for testing for up to 1 month after collection.
4. Shipment to NCSLPH – If shipment is to be received at NCSLPH within 5 days of collection, specimens must be received cold (2-8°C, packaged with frozen cold packs) to be acceptable for testing. For delays exceeding 5 days, freeze specimens at -70°C & ship on dry ice to be received at NCSLPH frozen (-20°C or lower).
5. Specimens must be packaged with cold packs to ensure an arrival temperature between 2 - 8°C if refrigerated and -20°C or lower if frozen. Packages should be shipped to NCSLPH as Category B. Category B shipping instructions can be found here. However, please note that specimens must be packaged with frozen cold packs. If you have questions regarding Category B shipping, please contact the BTEP Unit using the information below.
6. The following supplies are necessary for Cat B shipping: a rigid package with insulation, frozen ice packs, appropriate Category B labels, and a leakproof container specimens can be placed into (this can be a larger sample container or a specimen bag).

**Interpretation of NC SLPH Lab Findings:** Positive findings are reported as identification of Orthopox (Monkeypox) virus.  |
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| **Nursing Actions** | 1. The RN/ERRN should seek consultation with the medical provider to clarify if the medical provider desires to see all patients presenting with rash/ eruptions prior to or after specimen collection.
2. Call both NC Communicable Disease Branch Epi on-Call (919-733-3419) and NC SLPH BTEP (919-807-8600) prior to sending samples. When testing will be done at a commercial lab, it is not necessary to call the Epi on-Call. Commercial laboratories currently offering MPXV testing include LabCorp, Quest Diagnostics, Sonic, and Aegis Science.
3. Reporting of suspected cases to the NCDPH Communicable Disease Branch is required regardless of testing facility.
4. Counsel the patient on isolation requirements for those diagnosed with or suspected of having MPXV infection.
5. People with Orthopox (Monkeypox) should isolate themselves until the rash has fully resolved, the scabs have fallen off, and a fresh layer of intact skin has formed.
6. People with Orthopox (Monkeypox) should follow these recommendations until cleared by state or local public health officials:
7. Do not leave the home except as required for emergencies or follow-up medical care.
8. Friends, family, or others without an essential need to be in the home should not visit.
9. Avoid close contact with others.
10. Avoid close contact with pets in the home and other animals.
11. Do not engage in sexual activity that involves direct physical contact.
12. Do not share potentially contaminated items, such as bed linens, clothing, towels, washcloths, drinking glasses, or eating utensils.
13. Routinely clean and disinfect commonly touched surfaces and items, such as counters or light switches, using an EPA-registered disinfectant in accordance with the manufacturer’s instructions.
14. Wear well-fitting source control mask (e.g., medical mask) when in close contact with others at home.
15. Avoid the use of contact lenses to prevent inadvertent infection of the eye.
16. Avoid shaving rash-covered areas of the body as this can lead to the spread of the virus.
17. Limit exposure to others:
18. Avoid contact with unaffected individuals until the rash has resolved, the scabs have fallen off, and a fresh layer of intact skin has formed.
19. Isolate in a room or area separate from other household members and pets when possible.
20. Limit the use of spaces, items, and food that are shared with other household members.
21. Do not share dishes and other eating utensils. It is not necessary for the infected person to use separate utensils if properly washed. Wash soiled dishes and eating utensils in a dishwasher or by hand with warm water and soap.
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| **Nursing Actions****Cont.** | 1. Limit contamination within the household:
2. Try to avoid contaminating upholstered furniture and other porous materials that cannot be laundered by placing coversheets, waterproof mattress covers, blankets, or tarps over these surfaces.
3. Additional precautions such as steam cleaning can be considered if there is concern about contamination.
4. Consider if pets are in the home and need for isolation for pets in the home. [CDC Orthopox (Monkeypox) Pets in Homes Information](https://www.cdc.gov/poxvirus/Orthopox%20%28Monkeypox%29/specific-settings/pets-in-homes.html)
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| **Follow-up** | **Assure that suspected cases of Orthopox (Monkeypox) are immediately reported to the Communicable Disease Branch Epidemiologist on Call at 919-733-3419.**1. Immediately refer patient information to Health Department CD team for case investigation, contact tracing, and patient monitoring. The CD team will determine further follow-up and length of isolation.
2. Advise patient of results, following agency policy regarding informing patients of test result.
3. If the patient tests positive, reinforce the need for continued isolation and infection prevention precautions until no longer infectious.
4. All patients tested for Monkeypox should be connected with a health care provider for further evaluation, testing and treatment.
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| **Criteria for Notifying the Physician/APP** |
| **Criteria for Notifying the Physician/APP** | Contact the Medical Director or Medical Provider for:1. Connect all tested patients with a health care provider for further Orthopox (Monkeypox) evaluation, testing, vaccination and treatment options.
2. Any question about whether the individual meets the criteria for testing.
3. Any question about whether to carry out any provision of the standing order.
4. Associated pain that disrupts the patient’s activities of daily living.
5. Rash/eruption extending into or near the eye.
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Approved by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Approved (or last reviewed):\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Signature of Physician/AAP)

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