

**To:** Emergency Dept, Sexual Health, Dermatology, Infectious Diseases  
**From:** Chris Mansell, clinical microbiologist  
**Date:** 26 May 2022

**Subject:** Monkeypox testing

There have been a number of Monkeypox cases in Europe and North America.

- The virus is closely related to smallpox but illness is less severe and human to human transmissibility is very limited.
- The fully developed rash is similar to smallpox, affecting the face and hands. Genital lesions are also common and are the likely route of transmission in the current outbreaks.
- Vesicles may resemble those of Chickenpox or Herpes Simplex.



Images of individual monkeypox lesions

<https://www.gov.uk/guidance/monkeypox>



<https://doi.org/10.1016/j.idc.2019.03.001>

Precautions during sampling: Contact (gloves and gown) and droplet (mask)

### Samples:

- Viral swab from base of deroofed vesicle
- ± Dried scabs in dry sterile container
- ± EDTA blood for PCR if systemically unwell
- Bacterial swab if needed ± Second viral swab if HSV / VZV PCR needed ± serology, haematology and biochemistry blood for other conditions as needed
- Include on request form details of suspected contact, travel, date of onset.
- Deliver, preferably by hand, to Waikato Hospital specimen reception, Waiora bldg Level 3.

### Notify:

- Laboratory of specimens coming.
- Discuss with Clinical Microbiologist 027 2905255 or infectious disease physician