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Health Alert

To: Healthcare Providers
From: David Canton, DO, MPH, JD, Health Officer (signed original on file)
Date: July 18, 2022
Re: **First Probable Monkeypox Case Confirmed in Butte County**

The Butte County Department of Public Health (BCPH) has received lab confirmation of the first probable monkeypox case in Butte County on July 15, 2022. As of July 14, a total of 250 probable and confirmed cases of monkeypox had been reported in California. BCPH would like to remind providers to be vigilant about detection of monkeypox as the presentation can be very similar to some sexually transmitted infections (STIs). We would also like to ensure that providers know how to collect specimens, how to submit for testing and how to report suspect and confirmed cases, all of which are essential to control the spread of monkeypox in our community.

Close, sustained skin-to-skin contact, including sexual contact, with a person with monkeypox appears to be the most significant risk factor associated with transmission among recent cases. In this outbreak, many of the reported cases have been among gay, bisexual or other men who have sex with men (MSM). However, it is important to remember that any person, irrespective of gender identity or sexual orientation, can acquire and spread monkeypox.

Evaluation of a Patient with Suspected Monkeypox Infection

The classic presentation of monkeypox infection includes flu-like illness lasting a few days, followed by the appearance of a characteristic rash. Presenting symptoms can include fever, chills, a distinctive rash, and/or new lymphadenopathy; the appearance of the rash typically evolves rapidly and sequentially from macules (lesions with a flat base) to papules (slightly raised firm lesions), vesicles (lesions filled with clear liquid), pustules (lesions filled with yellowish fluid) and crusts which dry up and fall off. Importantly, clinical case presentations during the 2022 monkeypox outbreak have not been characteristic of classic monkeypox illness. Thus far, in the U.S. outbreak some notable features of infected people have included:

- All have developed a rash;
- The rash has often begun in mucosal, genital or perianal areas;
- The lesions have at times been scattered or localized to a body site rather than diffuse;
- Lesions have sometimes been in different stages of progression;
- Not all have classic prodromal symptoms; rash may be the first sign of infection; and
- Presenting symptoms have included anorectal pain, tenesmus and rectal bleeding associated with perianal lesions and proctitis.

Since monkeypox infection in the current outbreak may not be classical in appearance or progression, the patient history is particularly important for identifying possible cases. Suggestive history includes:

- Close contact with a person or persons with a similar appearing rash or with a person who has received a diagnosis of confirmed or probable monkeypox; and/or

- Close or intimate in-person contact with persons in social networks experiencing monkeypox infections; this includes MSM who meet partners through online websites, apps or social events (e.g., a bar, bathhouse or party).

Testing

To increase the availability of testing, CDC recently expanded non-variola Orthopox virus (NVO) testing to 5 commercial laboratories. Treatment, contact tracing and isolation recommendations are the same for all NVO infections; thus, a positive test result for an Orthopox virus using the NVO assay is immediately actionable, leading to the use of anti-orthopoxviral treatment, if warranted, and allowing public health authorities to initiate isolation, contact tracing, monitoring, investigation, and postexposure prophylaxis of exposed contacts. Current options for laboratory testing include:

- LabCorps: NVO
- Quest NVO with more specific monkeypox testing planned to be available soon.
- Aegis: NVO
- Mayo Clinic: NVO
- Sonic Healthcare: NVO
- Public Health: NVO and specific monkeypox testing to the clade level. If a commercial lab is not an option, specimens may be sent to BCPH Laboratory for submission to either Sacramento County Public Health Laboratory OR CDPH Viral and Rickettsial Disease Laboratory (VRDL). Contact BCPH (see below) before using this option.

When submitting specimens to commercial labs, please refer to that lab for specimen collection guidance as requirements may vary. For general information, please refer to the CDC guidance; [Preparation and Collection of Specimens](#).

For specimens being sent to a public health laboratory, consultation with BCPH is required. Please call 530.552.3929 during regular business hours or 530.332.2462 after hours. When specimens are being sent to a public health lab collect 2 swabs per lesion from several lesions and place each swab in separate, sterile, dry containers (please mark/label duplicate swabs with identical number so they are easy to distinguish from separate lesion collections e.g., swabs from left thigh are both #1). If lesions are present in multiple areas, try to collect from different areas of the body. Specimen collection instructions may change so check frequently for updates.

Reporting

Healthcare providers should NOT wait for laboratory results to report a case. As stated in Title 17 CCR 2500, providers are mandated to IMMEDIATELY report any case or SUSPECT case to the local health jurisdiction in which the patient resides. Providers can report to the Butte County Department of Public Health (BCPH):

- **by telephone to 530.552.3929 during regular business hours or 530.332.2462 after hours**

AND

- **via [Confidentially Morbidity Report \(CMR\)](#) by fax to 530.538.5387 or electronically via CalREDIE provider portal**

In accordance with Title 17, California Code of Regulations (CCR), failure to report is a misdemeanor (Health and Safety Code § 120295) and is a citable offense under the Medical Board of California's Citation and Fine Program (Title 16, CCR, § 1364).

Resources

Butte County Department of Public Health; [Report a Disease/Outbreak](#)

California Department of Public Health; [Monkeypox](#)

California Department of Public Health; [Healthcare Provider Health Advisory: Managing Monkeypox Infection in California \(June 23, 2022\)](#)

Centers for Disease Control & Prevention; [Monkeypox](#)

Categories of urgency levels:

Health Alert: conveys the highest level of importance; warrants immediate action or attention

Health Advisory: provides important information for a specific incident or situation; may not require immediate action

Health Update: provides updated information regarding an incident or situation; unlikely to require immediate action