

NOTE: in this document, patient refers to patients, residents and clients.

Infection Prevention and Control Guidance in All Health Care Settings	
Patient Access Points	<ul style="list-style-type: none"> Alcohol-based hand rub (ABHR), tissues and masks should be readily available at all triage and patient access points Encourage patients and family members/support persons to perform hand hygiene and respiratory etiquette
Point of Care Risk Assessment (PCRA)	<ul style="list-style-type: none"> Always perform a Point of Care Risk Assessment (PCRA) before every clinical encounter.
Hand Hygiene	<ul style="list-style-type: none"> Health care workers (HCWs) should perform hand hygiene according to the SHA Hand Hygiene Policy Education should be provided to patients and family member/support person about how and when to perform hand hygiene
Assessment and Triage¹	<ul style="list-style-type: none"> Assess for signs and symptoms of monkeypox: <ul style="list-style-type: none"> Illness begins with fever, chills, swollen lymph nodes, aches, exhaustion Rash develops 1-3 days after appearance of fever, often beginning on face and spreading to other body parts (mouth, soles of feet, palms, genitals) Rash lesions progress from macule -> papule -> vesicle -> pustule -> crust (see picture in Appendix A) To avoid exposure to contacts in waiting rooms, place patients that present with fever and vesicular/pustular rash (i.e., suspect monkeypox) into a single patient exam room as quickly as possible. Refer to Monkeypox section in the Saskatchewan Communicable Disease Control Manual for Case and Contact definitions, including epidemiological criteria for high risk exposure.
Patient Placement	<ul style="list-style-type: none"> Place patient in an Airborne Infection Isolation Room (AIIR), if available If AIIR unavailable, place patient in private room with dedicated toilet. Ensure door is closed Any AGMP's should be performed in an AIIR, if possible
Precautions	<ul style="list-style-type: none"> In addition to Routine Practices, place patient on Airborne, Droplet, and Contact Precautions Use former regions' signage for Airborne AND Droplet/Contact Precautions (2 signs)
Personal Protective Equipment (PPE)	<ul style="list-style-type: none"> Fit-tested N95 respirator (or equivalent); perform seal check after donning N95 respirator Gloves Gown Eye protection (e.g., face shield or indirectly/non-vented goggles)
Communication	<ul style="list-style-type: none"> Notify the facility's Infection Control Practitioner if a suspect or confirmed case receives care or is admitted to the facility Most responsible practitioner must notify local Public Health Office/Medical Health Officer (MHO) of suspect/confirmed cases. The MHO will facilitate a public health investigation of the case

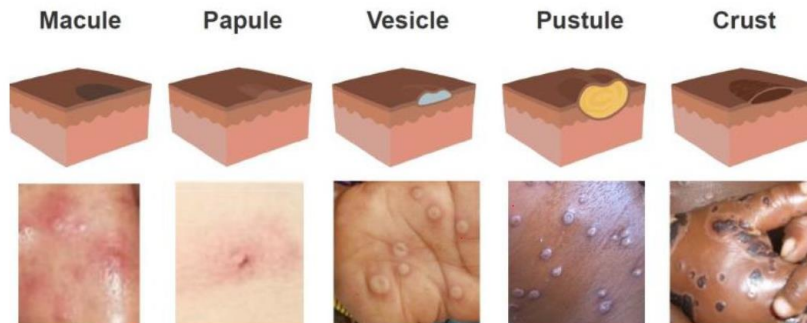
¹ Where possible, pregnant women and severely immunocompromised health care workers should not assess or clinically care for individuals with suspected or confirmed monkeypox. This will be reassessed as evidence emerges.



Laboratory Testing	<ul style="list-style-type: none"> • Contact the Microbiologist on call (Regina 306-766-4444; Saskatoon 306-655-1000) to facilitate testing at the RRPL • Refer to Laboratory Medicine Bulletin for further details on testing.
Family / Support Persons and Visitors	<ul style="list-style-type: none"> • Visitors should be restricted to those necessary for care or compassionate grounds • If visitation is necessary, family/support person should wear a N95 respirator while in room; they should be instructed on how to perform a seal-check after donning the respirator. In addition, they should wear gloves, gown and eye protection
Patient Transport	<ul style="list-style-type: none"> • Limit transport of patient out of room unless medically necessary • If movement is necessary: <ul style="list-style-type: none"> ○ Alert receiving department for need of additional precautions ○ Have patient wash their hands and provide patient with a medical mask ○ Patient should put on clean gown/housecoat and cover exposed lesions as best as possible with gown or sheet
Environmental Cleaning	<ul style="list-style-type: none"> • All SHA approved cleaning/disinfection products are sufficient as long as manufacturer’s instructions are followed (e.g., dilution, application and contact time) • Follow SHA protocols for daily cleaning of rooms for patients on additional precautions • If an area has carpet, clean with HEPA-filter equipped vacuum • After discharge, transfer, or discontinuation of additional precautions, follow SHA’s discharge cleaning protocol • Additional precaution signs should not be removed until both patient’s personal hygiene and environmental cleaning have been completed
Patient Care Items and Equipment	<ul style="list-style-type: none"> • Use disposable equipment when possible • All reusable equipment and supplies should be dedicated to the patient until discharge • If reusable equipment cannot be dedicated to a single patient, clean and disinfect thoroughly with a SHA approved disinfectant before use on another patient • Items that cannot be appropriately cleaned and disinfected should be discarded upon patient discharge or transfer
Laundry/Linen and Dishes	<ul style="list-style-type: none"> • No special precautions are required; routine practices are sufficient • Ensure hot water (70 degrees Celsius) and hot dry cycles are used for all linens • Take care when handling soiled linen to prevent dispersal of infectious particles (e.g., do not shake soiled linen).
Waste Management	<ul style="list-style-type: none"> • No special precautions are required; routine practices are sufficient. • Ensure general waste from room/unit is bagged and tied/sealed in the room prior to disposing in facility trash • Follow facility protocols for any biomedical waste
Duration of Precautions	<ul style="list-style-type: none"> • Patient must remain on <u>all</u> additional precautions until all scab crusts have fallen off and a fresh layer of skin has formed (about 3-4 weeks from onset of illness) • If patient is discharged prior to new skin forming, provide them with the Monkeypox Q&A factsheet

Appendix A: Lesion Progression

Source: University of Toronto



References

1. Public Health Agency of Canada. Routine practices and additional precautions for preventing the transmission of infection in healthcare settings [Internet]. Ottawa, ON: Government of Canada; 2013. Revised November, 2016. [Cited May 25, 2022]. Available from: <https://www.canada.ca/en/public-health/services/publications/diseases-conditions/routine-practices-precautions-healthcare-associated-infections.html>
2. Public Health Agency of Canada. Monkeypox [Internet]. Ottawa, ON: Government of Canada; May 26, 2022 [Cited May 27, 2022]. Available from: <https://www.canada.ca/en/public-health/services/diseases/monkeypox.html>
3. Centers for Disease Control and Prevention. Monkeypox [Internet]. Atlanta, GA: Centers for Disease Control and Prevention; May 20, 2022 [Cited May 25, 2022]. Available from: <https://www.cdc.gov/poxvirus/monkeypox/>
4. Ontario Agency for Health Protection and Promotion (Public Health Ontario). Infection prevention and control (IPAC) recommendations for monkeypox in health care settings [Internet]. Toronto, ON: Queen's Printer for Ontario; 2022 [Cited May 26, 2022]. Available from: https://www.publichealthontario.ca/-/media/Documents/M/2020/monkeypox-ipac-recommendations-healthcare-settings.pdf?sc_lang=en
5. World Health Organization. Monkeypox [Internet]. Geneva: World Health Organization; 2022 [Cited May 25, 2022]. Available from: <https://www.who.int/news-room/fact-sheets/detail/monkeypox>
6. UK Health Security Agency, Public Health Scotland, Public Health Wales, Public Health Agency Northern Ireland. Principles for monkeypox control in the UK: 4 nations consensus statement [Internet]. Government of UK; May 30, 2022. Updated July 15, 2022. [Cited July 15, 2022]. Available from: <https://www.gov.uk/government/publications/principles-for-monkeypox-control-in-the-uk-4-nations-consensus-statement/principles-for-monkeypox-control-in-the-uk-4-nations-consensus-statement#contents>
7. Saskatchewan Communicable Disease Control Manual. Monkeypox [Internet]. Regina, SK: Saskatchewan Ministry of Health; June 27, 2022. [Cited July 15, 2022]. Available from <https://www.ehealthsask.ca/services/Manuals/Pages/CDCManual.aspx>