Human Monkeypox Virus (MPV) Interim Guidance for Schools  August 16, 2022

MPV is a disease that can cause flu-like symptoms and a rash. Human-to-human transmission of MPV occurs by direct contact with lesions or infected body fluids, or from exposure to respiratory secretions during prolonged face-to-face close contact. A person is considered to be infectious until there is full healing of the rash with formation of a fresh layer of skin.

Strategies for Preventing MPV Transmission in Schools

School health staff should monitor for MPV among ill staff and students, and should implement the following strategies to prevent transmission within school settings:

- **Monitor staff and students for the presence of new, unexplained vesicular or pustular lesions** (other than acne), or any characteristic lesions on palms and encourage them to seek medical evaluation. (Note: rashes are not uncommon in children due to a variety of causes: See IDPH School Health Listing of Communicable Diseases (illinois.gov). For any staff or students who have a chronic condition that causes rash/skin lesions (e.g., acne), it may be helpful to have a healthcare provider’s note in their health record to document this condition. For students who have new vesicular or pustular lesions, recommend they visit their healthcare provider for evaluation and testing if indicated.

- **Contact your local health department** immediately to discuss any suspect or confirmed cases of MPV.

- **Encourage staff and students to stay home if ill** and maintain supportive sick leave protocols to encourage this. In addition to the rash, other symptoms of MPV include fever, headaches, muscle aches, swollen lymph nodes, chills, exhaustion, and respiratory symptoms (e.g., sore throat, nasal congestion, or cough). These symptoms can appear one to four days before the onset of the rash.

- **Ensure access to handwashing.** Soap and water or hand sanitizer with at least 60% alcohol should be available and encouraged/monitored, especially before eating and after using the restroom.

- **Limit sharing of personal items.**
  - Do not share eating utensils or cups.
  - Do not share bedding, towels, or clothing.

- **Clean and disinfect:** Clean surfaces at least once a day to reduce the risk of germs spreading by touching surfaces. Additionally, schools should follow standard procedures for cleaning, sanitizing, and disinfection in their setting, such as after diapering, feeding, and exposure to bodily fluids. See Caring for Our Children. Standard sanitizing procedures are acceptable.
Managing Potential Exposure within a School Setting

If a staff member, volunteer, or student has suspected or confirmed MPV infection that may have occurred in the school setting:

- **Communicate with staff, volunteers, and parents.** Provide information about the potential exposure, guidance on monitoring for symptoms, and seeking medical attention/testing if symptoms develop, and provide information about MPV post-exposure vaccination opportunities. A sample letter will be provided by your local health department.

- Any persons with MPV should remain out of school until MPV symptoms have resolved, the rash has healed, all scabs have fallen off, and a fresh layer of skin has formed per Centers for Disease Control and Prevention (CDC) recommendations. A healthcare provider letter clearing the person for return is recommended. Alternatively, upon the recommendation of local health department staff, school staff or students may return once other symptoms have resolved and should wear a well-fitted mask and cover all lesions with clothing, gloves, or bandages. They should not participate in events that are crowded, involve close contact (e.g., wrestling) or where a bandage can’t be worn (e.g., swimming).

- **Rapidly identify and assess people who might have been exposed to MPV,** in collaboration with the local health department.
  - Identifying Exposed Persons: Staff from the local health department will work with school staff to identify dates the case was at the school during the case’s infectious period and those with whom the case would have had close contact.
  - Screening Exposed Persons: All identified exposed persons will be screened for symptoms and level of exposure.
    - Any individual with symptoms should isolate and be medically evaluated as described above.
    - Risk of exposure will be assessed based on CDC’s recommendations to identify people who had exposures to someone with MPV, where possible. If contact tracing is not feasible, staff, volunteers, and students who spent time in the same area as someone with MPV should be considered to have intermediate or low degrees of exposure, depending on the characteristics of the setting (e.g., level of crowding).
  - Symptom monitoring: LHD staff will provide guidance to the parents of exposed students on monitoring for symptoms during the potential incubation period (21 days from last exposure).
    - Any individual with symptoms should isolate and be medically evaluated as described above.
  - Post-exposure prophylaxis (vaccinating individuals after high or intermediate exposure to prevent illness): IDPH and your local health department can provide post-exposure prophylaxis for people with high or intermediate exposures if the exposure was within the last 14 days AND no symptoms of MPV have developed. (Any symptoms of MPV would preclude post-exposure prophylaxis till MPV has been ruled out and so it is important to facilitate clinical
screenings and arrange vaccine administration through your local health department at the earliest opportunity.

- **Post-exposure vaccination** is not necessary for low or intermediate degree exposures unless deemed appropriate by IDPH or your local health department.
  - At this time, **asymptomatic exposed individuals do not need to stay home from school unless recommended by the local health department due to high-risk exposure.**

- **Heighten surveillance for cases among those exposed for 21 days from the date the most recent case was in attendance.** Consider requesting daily confirmation from staff and parents that staff and students are free from MPV symptoms and rashes, as well as implement the IDPH REDCap monitoring tool for exposed individuals.

- **Ensure access to handwashing.** Soap and water or hand sanitizer with at least 60% alcohol should be available at all times and at no cost to all staff, volunteers and students with supervised use by students where required. Anyone who touches lesions or clothing, linens, or surfaces that may have had contact with lesions should wash their hands immediately.

- **Clean and disinfect** the areas where people with MPV spent time. Avoid activities that could spread dried material from lesions (e.g., use of fans, dry dusting, sweeping, or vacuuming) in these areas. Perform disinfection using an U.S. Environmental Protection Agency (EPA)--registered disinfectant with an **Emerging Viral Pathogens** claim, which may be found on EPA’s **List Q**. Follow the manufacturer’s directions for concentration, contact time, and care and handling. Linens can be laundered using regular detergent and warm water. Soiled laundry should be gently and promptly contained in a laundry bag and never be shaken or handled in a manner that may disperse infectious material. People handling these materials should wear PPE as outlined below.

- **Provide appropriate personal protective equipment (PPE) for staff, volunteers, and students.** Employers are responsible for ensuring that workers are protected from exposure to MPV virus and that workers are not exposed to harmful levels of chemicals used for cleaning and disinfection. PPE should be worn by staff, volunteers, or residents in these circumstances:
  - **Laundry** — When handling dirty laundry from people with known or suspected MPV infection, staff should wear a gown, gloves, eye protection, and a well-fitting mask or respirator. PPE is not necessary after the wash cycle is completed.
  - **Cleaning and disinfection** — Staff should wear a gown, gloves, eye protection, and a well-fitting mask or respirator when cleaning areas where people with MPV spent time.

**CDC Resources:**

[What You Need to Know about Monkeypox if You are a Teen or Young Adult](#)

School/ECE FAQ Document (pending release)