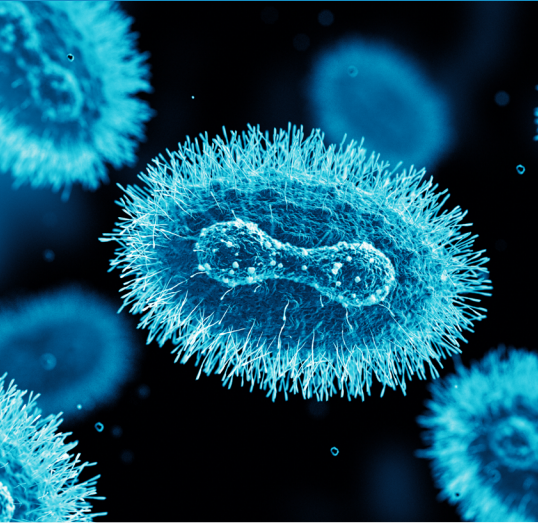


FAQ

Monkeypox in the Workplace: Answers to Frequently Asked Questions



Monkeypox is an infectious disease caused by a virus in the orthopoxvirus genus. Genetically similar to smallpox, it is mainly found in Africa. The 2022 outbreak marks the first time substantial local transmission has been reported in non-endemic countries across multiple continents. The following are questions asked by WorkCare clients, with answers reviewed by WorkCare's occupational physicians.

Q: *How concerned should we be about monkeypox exposures in our workplace?*

A: Exposure risk in most work settings is low. Exposure risk is higher for those whose occupations may involve coming into contact with the virus or an infected person. Higher-risk settings include clinical or animal research laboratories, health care facilities, public safety and work-related travel to countries with outbreaks.

Q: *What are the most common routes of exposure?*

A: The virus can spread from person to person through:

- Direct contact with infectious rash, scabs or body fluids
- Respiratory secretions during prolonged face-to-face contact
- Intimate contact such as kissing, cuddling or having sex
- Touching contaminated clothing, linens or other items

In the U.S., monkeypox is spreading most rapidly among male intimate partners. However, public

health officials say anyone who has close contact with someone with monkeypox is at risk.

Q: *What types of preventive measures should we be taking in our workplace?*

A: Unlike COVID-19, monkeypox is not highly contagious through airborne spread. Recommendations:

- Encourage employees who are concerned about monkeypox to speak to their health care provider about getting vaccinated.
- Advise employees to stay home if they have any signs and symptoms of monkeypox.
- Educate employees about the importance of avoiding skin-to-skin contact, including hugging, kissing or direct contact with people who have a rash.
- Remind employees not to share eating utensils and cups, and not to touch other employees' bedding, towels or clothing without wearing gloves or having other protection.
- Provide easy access to soap and water and alcohol-based sanitizer for hand hygiene.

Q: *What is the source of the current outbreak and what is the fatality rate?*

A: The monkeypox virus driving the current global outbreak likely diverged from a strain found in Nigeria, according to [research published in Nature Medicine](#), a peer-reviewed journal. As of Aug. 15, 2022, there were 35,700 confirmed cases from the World Health Organization member states and 10 deaths reported. Adults with immune system disorders are more vulnerable to serious illness or death from monkeypox.

Q: *How long does the illness last, what are the most common signs and symptoms, and how is it treated?*

A: The illness typically starts with flu-like symptoms, followed by a rash within one-to-four days. It usually lasts two-to-four weeks and resolves on its own. The rash may appear on or near the genitals or anus, and possibly on the hands, feet, chest, face or mouth. The rash goes through several stages before forming scabs and healing. It may initially look like pimples or blisters and be painful or itchy. Other symptoms may include:

- Fever
- Chills
- Swollen lymph nodes
- Exhaustion
- Muscle aches and backache
- Headache
- Respiratory complaints, e.g., sore throat, nasal congestion, cough

Over-the-counter medications help relieve symptoms. Anti-viral drugs are used for treatment in some cases.

Q: *At what point is an infected employee contagious – before or after they have signs and symptoms?*

A: The incubation period for monkeypox averages 12 days. Monkeypox can spread from the time symptoms appear until the rash has healed, all scabs have fallen off and a fresh layer of skin has formed.

Q: *What should we advise employees about monitoring for symptoms?*

A: Advise employees to take preventive measures while monitoring for symptoms and begin home isolation if symptoms appear. Although the incubation period is typically shorter, the U.S. Centers for Disease Control and Prevention (CDC) recommends that anyone with a known community exposure to a person or animal with monkeypox monitor their health for signs or symptoms for 21 days. Monitoring includes an examination of the skin, mouth (oral), genitals and anus for rash or lesions.

Q: *What should we do if an employee has a known exposure to monkeypox but has not developed symptoms?*

A: You will need to make a policy decision depending on the nature of your workplace. Unlike its guidance for the management of COVID-19 in the workplace, the Equal Employment Opportunity Commission has not issued guidance to allow employers to require disclosure of an employee's monkeypox symptoms or diagnosis. Americans with Disabilities Act (ADA) provisions restricting medical inquiries apply. If an employee reports an exposure, we recommend that you refer them to their personal provider. You may decide to allow an exposed employee to work around others while monitoring for symptoms and taking preventive measures such as practicing social distancing, wearing a mask, frequently washing hands and not sharing personal protective equipment. Alternatively, you may ask an exposed employee to work from home, as feasible, if they are not already working remotely.

Q: *What are the standard, recommended return-to-work guidelines for an employee who has had monkeypox?*

A: An employee can be safely returned to work when their symptoms have resolved and they have been cleared by their physician.

Q: *Are there any sanitation requirements for infected workers' workstations?*

A: Please refer to the [CDC's guidance](#) for homes and non-health care workplaces for detailed instructions on cleaning, disinfection, waste disposal, environmental controls, and donning/doffing of personal protective equipment. For health care settings, refer to this [CDC webpage](#).

Q: *What are the recommendations for testing to detect monkeypox infection?*

A: The Food and Drug Administration (FDA)-cleared non-variola orthopoxvirus test can detect monkeypox from lesion samples. Employees who think they are infected are advised to ask their health care provider about testing. The provider will evaluate the condition and, if clinically warranted, collect specimens to send to a public health or reference laboratory. The [FDA advises](#) medical providers to use swab samples taken directly from a lesion (rash or growth). The FDA reports it is not aware of clinical data supporting the use of other sample types such as blood or saliva. Testing samples not taken from a lesion may lead to false test results.

Q: *What is the status of vaccine availability?*

A: Vaccine availability varies by state. Advise at-risk employees who wish to be vaccinated to contact their personal provider or local health department. There are two vaccines available in the U.S. – JYNNEOS and ACAM2000, the latter only used under an investigational protocol due to concerns about side effects. JYNNEOS is administered beneath the skin (subcutaneously) as two doses, 28 days apart. Due to unexpected demand and limited vaccine supplies, the FDA issued an [emergency use authorization \(EUA\)](#) on Aug. 9, 2022, for the JYNNEOS vaccine for high-risk adults to be administered between the layers of the skin (intradermally). By offering the shots in this way, only a fifth of the full dose is needed for each person, although a two-dose sequence is still recommended. There are no data available to indicate that one dose of JYNNEOS will provide

long-lasting protection.

Q: *From a legal perspective, what can we do to help prevent the spread of monkeypox in our workplace?*

- A: According to [Littler, an employment law firm](#), employers may take the following actions:
- Review safety programs and emergency action plans to ensure they include infectious disease protocols and comply with health and safety regulations.
 - Circulate information to employees reminding them of recommended hygiene practices and prevention measures.
 - Instruct an employee to stay home and get medical assistance if they are ill.
 - Direct an employee to obtain a return-to-work/fitness-for-duty notice from a health care provider before returning to work after illness.
 - Allow leaves of absence for monkeypox in a manner consistent with all other leave-of-absence policies.

Q: *What are the limitations on an employer's ability to respond to monkeypox?*

- A: Littler reports that employers must be careful to avoid discrimination due to disability from illness or within a protected class affected by the virus. Medical records must be treated as confidential.

To learn more, refer to our [Monkeypox Fact Sheet](#).