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First Probable Case of Monkeypox Identified in New Hampshire

Monkeypox Update

- The New Hampshire Department of Health and Human Services (DHHS) has identified the first probable case of monkeypox in the State. The NH Public Health Laboratory confirmed orthopox virus and the U.S. Centers for Disease Control and Prevention (CDC) is conducting confirmatory testing. The patient is a resident of Rockingham County. Investigation is underway, but to date there is no identified public health risk. See <u>Press Release</u>.
- More than 4700 monkeypox cases have been <u>identified globally</u> in 49 non-endemic countries, including 306 cases from 28 <u>US states.</u>
- Monkeypox transmission occurs through direct contact with infectious skin lesions or body fluids and through respiratory droplets after close prolonged face-to-face contact. Early reports (<u>Duque</u> <u>et al., Euro Surveill, May 2022</u>; <u>Vivancos et al., Euro Surveill, May 2022</u>; <u>Minhaj et al., MMWR</u>, <u>May 2022</u>) indicate that current monkeypox outbreaks in non-endemic countries are predominantly transmitting through sexual networks.
- Consider monkeypox testing for any person with new skin lesions <u>consistent with monkeypox</u> if the skin lesions occurred:
 - Within a few weeks after traveling to another country where monkeypox is being reported
 - After close contact to a person who has a similar skin rash, or who is suspected or confirmed to have monkeypox
 - After intimate physical or sexual contact with a partner, especially in men who have sex with other men (MSM), or after any intimate/sexual contact that occurred during travel
 - New genital or perianal skin lesions can be the first sign/symptom of monkeypox and may be confused for a sexually transmitted infection (STI)
- Wear gown, gloves, eye protection and an N95 or higher level respirator when evaluating a
 patient suspected of having monkeypox; airborne isolation is NOT necessary unless an aerosol
 generating procedure is being performed (see <u>CDC infection control guidance</u>).
- Visit <u>NH Public Health Laboratories (PHL) website</u> for information on specimen collection and coordination of testing through the PHL.
- Clinicians should immediately report any suspect case of monkeypox to the NH Division of Public Health Services (DPHS) by calling 603-271-4496 (after hours 603-271-5300 and ask for the public health professional on call); reporting must occur before testing at our NH PHL can be performed.
- Additional monkeypox information for healthcare providers and patients:
 - o CDC's Monkeypox: Get the Facts
 - o CDC's Clinician FAQs

- For any questions regarding this notification, please call the NH DHHS, DPHS, Bureau of Infectious Disease Control at (603) 271-4496 during business hours (8:00 a.m. – 4:30 p.m.).
- If you are calling after hours or on the weekend, please call the New Hampshire Hospital switchboard at (603) 271-5300 and request the Public Health Professional on-call.
- To change your contact information in the NH Health Alert Network, please send an email to <u>DHHS.Health.Alert@dhhs.nh.gov</u>.

| Severity: Sensitivity: Message Identifier: | Actual Alert Moderate Not Sensitive NH-HAN 20220629 12 hours No Email, Fax Physicians, Physician Assistants, Practice Managers, Infection Control Practitioners, Infectious Disease Specialists, Community Health Centers, Hospitals, Hospital CEOs, Hospital Emergency Departments, EMS, Nurses, NHHA, Pharmacists, Laboratory Response Network, Manchester Health Department, Nashua Health Department, Public Health Networks, DHHS Outbreak Team, DPHS Investigation Team, DPHS Management Team, Northeast State Epidemiologists, Zoonotic Alert Team, Health Officers, Deputy Health Officers, MRC, NH Schools, EWIDS, Dialysis & Transplant Clinics, STD Clinics, Immunization Practices, Travel Centers, Influenza Sentinels, Urgent Care Centers, Ambulatory Surgical Centers, Walk-in Clinics, Poison Center, Alcohol and Other Drug Treatment Centers, Long-Term Care Facilities, Community Mental Health Centers, Health Departments, Internal Medicine, Occupational Health, Gastroenterology, Schools and Daycare Providers, Regional Public Health Networks, Environmental Services, Family Planning Programs, Department of Corrections, Home Care Providers, Local and State Partners, Area Agencies |
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| From: | Elizabeth A. Talbot, MD, Deputy State Epidemiologist Jonathan R. Ballard MD, MPH, Chief Medical Officer |
| Originating Agency: | NH Department of Health and Human Services, Division of Public Health Services |