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MEMORANDUM

TO: College/University Administrators and Health Services
FROM: Communicable Disease Control Section
DATE: August 25, 2022
RE: Human Monkeypox Virus (MPV) Infections in College and University Settings

MPV infections across the United States continue to increase and the MPV outbreak will remain active when colleges and universities are back in session. It is possible that tight-knit social and sexual contacts/activity on college campuses may lead to additional spread of the MPV virus. Even if spread does not occur, awareness and educational efforts are needed to address student concerns and misinformation. To ensure you are prepared to respond appropriately, IDPH recommends that the following capabilities be established before students return for fall classes, consistent with CDC's [Considerations for Reducing Monkeypox Transmission in Congregate Living Facilities](#):

All institutions

- 1) Stay updated on the [latest guidance](#) from the Centers for Disease Control and Prevention, your [local health department](#) (LHD), and [IDPH](#), as this is an evolving outbreak. To sign up for IDPH Health Alert messages, including MPV webinar announcements, visit the [SIREN Rapid Response System](#).
- 2) Develop a MPV messaging strategy with input from impacted groups. Monkeypox can spread from person to person through direct contact with the infectious rash, scabs, or body fluids. It also can be spread by respiratory secretions during prolonged, face-to-face contact, or during intimate physical contact, such as kissing, cuddling or sex. Currently, most confirmed cases in the U.S., according to the CDC, are among gay and bisexual men, however anyone can get monkeypox and additional groups may be impacted as the outbreak evolves. This situation creates challenges for direct, targeted, and non-stigmatizing messaging to at-risk individuals as well as the community at large. CDC has created [guidance](#) for messaging to the general population and gay and bisexual men. IDPH has also produced an infographic available at [IDPH MPV Messages](#). A rave, party, or club where there is minimal clothing and where there is direct, personal, often skin-to-skin contact has some risk. Festivals, events, and concerts where attendees are fully clothed and unlikely to share skin-to-skin contact are safer. However,

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attendees should be mindful of activities (like kissing) that might spread monkeypox. Avoid any rash you see on others and consider minimizing skin-to-skin contact. Enclosed spaces, such as saunas, sex clubs, or private and public sex parties where intimate sexual contact with multiple partners occurs, may have a higher likelihood of spreading monkeypox.

3) Make sure students who meet [criteria](#) for receipt of [Jynneos](#) vaccine as part of Illinois' expanded prophylaxis strategy (PEP++) are informed about Jynneos and where they can be vaccinated. If you would like to discuss offering Jynneos vaccine on site, contact your [local health department](#).

4) Ensure that students are comfortable seeking and have access to medical evaluation, testing and treatment for possible MPV infection. Partnering with, or seeking input from, local community health centers, university clinics, and community/student organizations that specialize in treating and supporting the lesbian, gay, bisexual, transgender, queer, and/or questioning (LGBTQ+) community can help ensure students obtain judgment-free health care, whether it be on- or off-campus.

5) Be prepared with the necessary supplies, trained staff, and policies/procedures needed to operationalize CDC's [guidance for preventing MPV spread in congregate living settings](#), such as dormitories at institutes of higher education, to respond to a case and assist the LHD in identifying person exposed. This will include:

- Consulting with your LHD.
- Preparing to provide housing where cases can isolate away from others either on-site or off-site.
- Ensuring that residents with MPV wear well-fitting masks and cover lesions with close, gloves or bandages if leaving isolation.
- Managing cleaning/disinfection and waste from isolation areas using appropriate PPE (For information on respirator fit-testing, contact your facility's occupational health unit.)
- Assisting the LHD in identifying persons exposed, assessing levels of exposure, monitoring for symptoms, and assisting in providing post-exposure prophylaxis to those with high or intermediate risk.

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B. Institutions providing clinical services

1. Clinical service providers who may see patients with sexually transmitted infection (STI) or rash symptoms that may be due to monkeypox should have access to the training and supplies needed for evaluation of patients with suspect MPV infection, including personal protective equipment (PPE), and the supplies and equipment necessary for specimen collection, storage, and shipping.

2. Make sure you know where specimens for MPV testing will be sent and the specific

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specimen collection, storage, and shipping requirements for the laboratory(ies) you will be utilizing. IDPH will test specimens [meeting certain criteria](#). However, because not all specimens may be approved for testing at IDPH, college and university health services should have arrangements in place for MPV testing at commercial labs. (Labs currently offering MPV testing are Aegis Science, ARUP, Labcorp, Mayo Clinic Laboratories, Quest Diagnostics, and Sonic Healthcare.)

3. Train clinical staff in [recognition of possible MPV infection](#) (e.g., staff should be able to determine if a patient has recognized risk factors for MPV infection, able to obtain sexual and travel histories, and be familiar with MPV syndromes and their overlap with other conditions [infectious and non-infectious]).

4. Designated staff should be familiar with [specimen storage and shipping requirements](#).

5. Be prepared to report confirmed and probable MPV cases and check with your [LHD](#) to determine if reporting of suspect cases is needed.

6. Be prepared to identify and [manage MPV exposures](#) among clinical staff. Staff who use recommended PPE when evaluating MPV patients are not considered exposed, so ensuring use of proper PPE can reduce or eliminate the burden of evaluating and monitoring exposures.

7. Be familiar with criteria for use of [post-exposure prophylaxis](#) (PEP and PEP++) for high-risk exposures or those at high risk for infection and how to request vaccine.

8. Be familiar with the [criteria for use of TPOXX](#) (available under CDC's investigational new drug [IND protocol] to treat MPV illness). Information about how to request TPOXX is available through your local health department. The FDA specifies that TPOXX treatment must be overseen by a licensed physician.

Contact your [local health department](#) with questions or concerns.