

**MEMO**

**To:** Healthcare Providers  
**From:** Dr. Janice Fitzgerald, Chief Medical Officer of Health  
**Date:** June 24, 2022  
**Re:** **Updated on Monkeypox**

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The Public Health Agency of Canada (PHAC), in consultation with provinces and territories, continue to monitor the number of cases of Monkeypox across the country. As of June 22, 2022, there are 210 cases of Monkeypox publicly reported. Currently, there are no confirmed cases of Monkeypox in the province of NL.

The national case definition of Monkeypox has been updated since the last CMOH correspondence on May 26th:

**Suspect case definition:**

A person of any age who presents with one or more of the following:

1. An unexplained\* acute rash\*\* AND has at least one of the following signs or symptoms
  - Headache
  - Acute onset of fever (>38.5°C),
  - Lymphadenopathy (swollen lymph nodes)
  - Myalgia (muscle and body aches)
  - Back pain
  - Asthenia (profound weakness)
2. An unexplained\* acute genital, perianal or oral lesion(s)

**Probable case definition:**

A person of any age who presents with an unexplained\* acute rash or lesion(s) \*\*

AND

Has one or more of the following:

1. Has an epidemiological link to a probable or confirmed MPX case in the 21 days before symptom onset, such as
  - face-to-face exposure, including health workers without appropriate personal protective equipment (PPE)
  - Direct physical contact, including sexual contact; or contact with contaminated materials such as clothing or bedding

2. Reported travel history to or residence in a location where MPX is reported\*\*\* in the 21 days before symptom onset.

**Confirmed case definition:**

A person who is laboratory confirmed for MPX virus by detection of unique sequences of viral DNA either by real-time polymerase chain reaction (PCR) and/or sequencing.

\*Common causes of acute rash can include Varicella zoster, herpes zoster, measles, herpes simplex, syphilis, chancroid, lymphogranuloma venereum, hand-foot-and-mouth disease.

\*\*Acute rash. Monkeypox illness includes a progressively developing rash that usually starts on the face and then spreads elsewhere on the body. The rash can affect the mucous membranes in the mouth, tongue, and genitalia. The rash can also affect the palms of hands and soles of the feet. The rash can last for 2 to 4 weeks and progresses through the following stages before falling off:

- Macules
- Papules
- Vesicles
- Pustules
- Scabs

N.B. It is not necessary to obtain negative laboratory results for listed common causes of rash illness in order to classify a case as suspected.

\*\*\*Reported travel history includes regional, national, or international travel in the 21 days before symptom onset to any area where Monkeypox may be reported.

The national case definition is now available on the [PHAC website](#).

Suspect, probable and confirmed cases of Monkeypox must be immediately reported to:

- Infectious Disease consultant on call at 709-777-6300
- Public health:
  - Eastern Health 752-4358;
  - Western Health 643-1830;
  - Central Health 651-6238;
  - Labrador Grenfell health 897-3110 (north) or 285-8410 (Lab West Health)
  - Outside regular working hours, contact the Medical Officer of Health on call at 1-866-270-7437

Notification to public health should also be completed using the national case reporting form. A copy of the case reporting form is included in the email which you received this memo.

For more information related to Monkeypox, visit the [PHAC website](#). The Department of Health and Community Services will continue to share provincial information as it becomes available.