

Instructions for Providers/Laboratorians
Orthopoxvirus/Monkeypox Testing Procedures

Wearing full PPE (gowns, gloves, masks, eye protection), collect **two** swabs from each lesion. Place each swab in its own sterile collection container. It is very important that TWO swabs are collected from each lesion in order to facilitate both screening and confirmatory testing (if necessary) of the specimens.

If multiple lesions are present, collect specimens from up to 3 different lesions (maximum of 6 swabs). Collect specimens as follows:

1. Vigorously swab lesion with two separate sterile, dry polyester or Dacron swabs. Unroofing of the lesion may improve test results, however, is not required and creates additional exposure risks. "Cleaning" of the lesion prior to sample of the lesion may decrease detection.
2. Place each swab into an approved collection container. Include the scab, if available.
 - a. Approved collection containers:
 1. 2 Dry swabs per lesion: Place each swab into separate sterile, empty 15 mL conical tube.
 2. 2 Swabs in VTM per lesion: Place each swab into a separate **VTM** collection container. Note: UTM is not an accepted specimen collection container at this time.
 - b. Make sure caps are completely secured and tight.
3. Mark/label all swab collection containers with the corresponding location of the lesion.
 - a. Label duplicate swabs so they are easy to distinguish from other lesion collections.
 - i. i.e. Swab #1 from left thigh; Swab #2 from left thigh.
4. Place swab collection containers in a biohazard bag. Seal bag completely.
5. Store specimens in a refrigerator for up to 72 hours after collection. If shipping will be delayed more than 72 hours, specimens must be stored at -80 Celsius.
6. Fill out the VRDL Requisition slip for each lesion location (maximum of 3 requisitions per patient). Make sure to include all required information on the requisition in order to expedite testing of your specimens. Missing paperwork/information will severely delay specimen testing and will require additional follow-up with clinician.
 - a. Each lesion should have a separate VRDL form. *Paired swabs share a requisition.
 - b. Swabs from different lesion locations will require a separate requisition
7. Include a brief patient history with the requisitions
 - a. Information needed: onset date, recent travel, recent Monkeypox exposure, symptoms (rash, location/appearance of rash, fever, etc.)
 1. The Monkeypox screening form or a CMR can be used to collect this information
8. Please make sure all requisitions and patient history are included in the **outside** pocket of the biohazard bags the swabs are placed in.



Notify the Contra Costa County Acute Communicable Disease (ACD) Program of the potential cases before sending specimens to the Public Health Laboratory:

Secure Email (preferred): CoCoCD@cchealth.org OR Phone: 925-313-6740, 1, 2
OR Secure fax CMR to (925) 313-6465

Specimens should be packaged on ice and sent via courier or overnight shipment as a Category B Infectious substance (UN 3373) to:

Contra Costa Public Health Laboratory
Attn: Stephanie Trammell/Kelly Riddle
2500 Alhambra Ave, Room 209
Martinez, CA 94553

Note: The Contra Costa Public Health Laboratory is open M-F from 8 am to 5 pm. Any specimen delivered outside of normal operating hours may be rejected. Monkeypox screening form or CMR can be requested from ACD via email (referenced above).

Please visit cchealth.org/monkeypox for additional information regarding Monkeypox.

