UCSF Health

Mpox Tip Sheet

Consider the diagnosis



- Presentation can include a flu-like illness followed by a rash.
- Rash progression macules-> papules-> vesicles-> pustules filled with yellowish fluid-> crusts. Lesions are deep-seated, firm/hard, well-circumscribed and may umbilicate or become confluent.
- Cases can present atypically with no prodrome and with localized genital/perianal lesions.

Isolation and Personal Protective Equipment

- Initiate Novel Respiratory Isolation. Room the patient right away. If no medical contraindications, have the patient mask and cover the rash.
- Use a fit-tested N95, eye protection (or PAPR), gloves, gown including during room cleaning and linen handling.

Patient Placement and Disinfectants

- Place the patient in a single room with the door closed, preferably with a dedicated bathroom. An Airborne Infection Isolation/negative pressure room is needed only if the patient is having any aerosol generating procedures.
- If the patient had aerosol generating procedures, keep the room empty with the door closed for 1 hour after the patient leaves and before cleaning.
- Routine hospital disinfectants are appropriate for cleaning.

Reporting

- Report cases to SFDPH by completing the Confidential Morbidity Report Form (CMR) (see below)

Testing

- SFDPH approval is not required to test. Refer to this guidance for testing recommendations.
- Order Mpox Virus DNA, Qualitative PCR . Collect 2 swabs from 2 separate lesions. Each swab should be placed in a separate container.
- Complete the Confidential Morbidity Report (CMR) Form and send the completed form to the UCSF clinical lab with the specimens. Tests will not be processed without this form.

Clinical Guidance and Treatment

- Tecovirimat is an investigational antiviral that can be offered for serious or high-risk cases.
- Serious or high-risk cases: Rash involving eye, mouth, rectum, urethra; infections complicated by sepsis, proctitis, pneumonia or encephalitis; pregnancy, children <8 years old; immunocompromised hosts (ex. Poorly controlled HIV, leukemia/lymphoma, transplant, primary immunodeficiencies.)
- If your patient may need treatment call: Adult ID pager 415-443-8996, BCH-SF ID pager 415-443-2384.

For more information, refer to these additional resources

1/6/2026