

HEALTH ALERT NETWORK | HEALTH ADVISORY | July 14, 2022

Update to Monkeypox Testing Availability and North Dakota Vaccine Allocation

This health update provides updates to providers on the availability of monkeypox testing nationwide and more information on the allocation of monkeypox vaccine to North Dakota. North Dakota has not yet had a case of monkeypox identified in the state.

The NDDoH is reminding providers that suspected monkeypox cases should be reported immediately by calling 1-800-472-2180 or 701-328-2378. Reporting is important to ensure rapid case investigation, contact tracing, and access to timely post exposure prophylaxis of close contacts.

Testing:

On June 22, 2022, Health and Human Services (HHS) through the Centers for Disease Control and Prevention (CDC) [announced](#) that they are increasing nationwide laboratory capacity by sending orthopoxvirus tests to five commercial laboratories. These labs are in addition to the capacity already established by the Laboratory Response Network. The commercial laboratories include Aegis Sciences, Labcorp, Mayo Clinic Laboratories, Quest Diagnostics and Sonic Healthcare. The establishment of these commercial labs is expected to greatly increase nationwide capacity as reported in a recent [CDC MMWR](#).

The Laboratory Services Section at the North Dakota Department of Health continues to offer PCR testing for orthopox. More information on laboratory testing, including specimen collection and transport, is available by calling 701-328-6272. If providers choose to utilize a commercial laboratory, providers should contact the respective laboratory to ensure proper collection and transport techniques are followed.

Vaccination:

The NDDoH is receiving allocations of JYNNEOS™ vaccine to help slow the [spread of monkeypox in the U.S.](#) The CDC is allocating vaccine doses to states based on monkeypox epidemiology and population.

[JYNNEOS™](#) is a live, non-replicating, orthopoxvirus vaccine. It is administered as a two-dose series, 28 days apart (a seven-day grace period applies to this interval). It is licensed by the U.S. FDA for subcutaneous administration to those ages 18 and older. Other vaccines, *with the exception of COVID-19*, may be administered at the same time as JYNNEOS™. The vaccine comes as single-dose vials. Ancillary supplies are NOT included with the vaccine. JYNNEOS™ is shipped frozen (-20°C). It may be stored frozen or refrigerated (2-8°C). If refrigerated, the vaccine must be used within [eight weeks](#).

North Dakota Monkeypox Vaccine Allocation

North Dakota did not receive an allocation in phase 1 due to not having any cases of monkeypox reported. In phase 2a, North Dakota is receiving **65 doses**. A portion of these doses is being reserved for post-exposure prophylaxis of future close contacts to monkeypox cases. The remaining small number of doses are being allocated to health care providers who serve populations eligible for PEP++ (see below). Health care providers need to reserve second doses for those who receive first doses out of their allocation. After distribution next week, monkeypox vaccine locations will be posted online at [Monkeypox \(MPV/MPX/MPXV\) | Department of Health \(nd.gov\)](#).

Subsequent phases of vaccination through August are anticipated to be small. Health care providers should be ready to receive allocations of vaccine and/or vaccinate close contacts rapidly.

The NDDoH Division of Immunizations will be responsible for allocating vaccine to providers based on demographics and need of various regions. The CDC recommends three vaccine strategies as described below.

Pre-Exposure Prophylaxis (PREP)

PREP* is available for order on a case-by-case basis from the NDDoH and may be warranted when persons meet the following criteria:

1. Person is a laboratorian performing research or diagnostic testing for orthopoxviruses.
2. Person is a health care worker caring for or likely to be exposed to patients with monkeypox.

*At this time, most clinicians, health care workers and laboratorians are **NOT** recommended for PREP vaccination because adequate PPE is readily available.

Regardless of whether they get PREP, clinicians and laboratorians should use recommended infection control practices.

Post-Exposure Prophylaxis (PEP):

PEP is available for order on a case-by-case basis from the NDDoH. PEP vaccination should be considered when someone meets the following criteria:

1. Individual has had at least one of the following exposure characteristics with a person with confirmed or probable monkeypox as defined by CDC's Case Definitions for Use in the 2022 Monkeypox Response (www.cdc.gov/poxvirus/monkeypox/clinicians/case-definition.html):
 - a. Unprotected contact (generally skin to skin): between a person's skin or mucous membranes, lesions, or bodily fluids from a patient. This could include any sexual contact, splashes of patient saliva to the eyes or oral cavity of a person and/or ungloved contact with a patient.
 - b. Contaminated materials: contact with materials contaminated or in contact with lesions. This could include sharing clothing, sleeping in the same bedding, or sharing the same towel. A health care worker's clothing may also become contaminated during patient care (bathing, turning, etc.) if a gown is not worn.
 - c. Face-to-face: being near a person or within six feet of a person for three or more hours without using a surgical mask.
 - d. Aerosols: being within six feet of a person or patient during any procedures that may create aerosols from oral secretions, skin lesions, or resuspension of dried exudates (as when shaking dirty linen), without wearing an N95 or equivalent respirator and eye protection.
 - e. A person identified by public health as being a part of a specific situation where transmission has been documented (e.g., cases associated with a bath house, party).
 - f. Other exposure that may warrant consultation for PEP.
2. Individual's last date of exposure is within 14 days.
 - a. Vaccine given within four days from the date of exposure may prevent onset of the disease.
 - b. If given between 4–14 days after the date of exposure, vaccination may not prevent infection, but may decrease severity of illness.

Enhanced Post-Exposure Prophylaxis (PEP++):

PEP++ is limited and being allocated to providers based on estimates of eligible patients. PEP++ vaccination is indicated for people at high-risk who may have had a recent exposure. The current recommendations are for gay, bisexual or other cisgender men who have sex with men or transgender persons who meet at least one of the following criteria:

1. Has had multiple sex partners in the last 14 days
2. Attended venues or events where monkeypox spread has been identified
3. Has had a sexually transmitted infection in the past year

Note: Persons living with HIV or other immune-compromising conditions** may be at higher risk for severe outcomes and should be a high priority for vaccination if they have exposure as listed above. **Immune-compromising conditions: leukemia, lymphoma, generalized malignancy, solid organ transplantation, therapy with alkylating agents, antimetabolites, radiation, tumor necrosis factor inhibitors, high-dose corticosteroids, being a recipient with hematopoietic stem cell transplant <24 months.

Offer Other Services

When possible, monkeypox vaccination should occur along with other sexual health services, including testing for sexually transmitted infections and prescribing HIV PrEP. If services are not available in your area, consider [offering home test collection](#). Health care providers should also consider administering other vaccines, including hepatitis A and MenACYW, at the same time. **COVID-19 vaccine cannot be administered at the same time as JYNNEOS™.**

NDDoH Vaccination Resources

- [JYNNEOS™ storage and handling guidance](#)
- [Monkeypox vaccine readiness checklist](#)
- [Monkeypox virus FAQ for providers](#)

Please visit the [CDC](#) and [NDDoH](#) websites for more information on monkeypox and vaccination.

Categories of Health Alert Network messages:

Health Alert Requires immediate action or attention; highest level of importance

Health Advisory May not require immediate action; provides important information for a specific incident or situation

Health Update Unlikely to require immediate action; provides updated information regarding an incident or situation

HAN Info Service Does not require immediate action; provides general public health information

##This message was distributed to state and local health officers, state and local epidemiologists, state and local laboratory directors, public information officers, HAN coordinators, and clinician organizations##