

Community Follow-up mpox¹ CONFIRMED case

1. PROACTIVE

Proactive checks - follow up calls every 48 hours or as required for patients who are any one of below:

- a. Immunocompromised
- b. Systemic symptoms but stable for discharge home
- c. Those with painful lesions, particularly in perianal area
- d. Those identified as being particularly anxious
- e. Any others with specific clinical concern (e.g. large number of lesions)

MRN:

Date POSITIVE sample:

Symptom start date (day of illness):

Symptoms review:

Are you generally better/same/worse/?, *circle appropriate*

If better/same

If worse, check from list below

- Fever– if yes, have you recorded your temperature?
- Rash
 - wet/dry/crusted, any new lesions, how many, where are they?
 - Any eye lesions?
 - If perianal lesions – do you have difficulty opening your bowels
- Headache
- Muscle aches
- Back ache
- Swollen lymph nodes (under the armpits, groin or neck)
- Chills
- Exhaustion

Have you noticed any pain on passing urine or discharge from the urethra?

Have you noticed any blood or discharge from the back passage?

Impression: Confirmed mpox infection day ***

Plan:

- Arrange follow up in clinic in 48 hours or sooner if you are concerned about them.
- If same/better – further welfare check in 48 hrs
- If worse – escalate to arranging clinical assessment as needed
- If sx of intercurrent/concurrent STI – escalate to doctor call back
- Safety netted to call dedicated helpline (or refer to local plan) (Mon – Fri 9 to 5) or 999 (if out of hours) if emergency and ensure to say to emergency response team that they have mpox infection
- Signposted to patient information resources

2. Passive

- **Passive checks** - for patients not meeting the above criteria, a phone number is provided for patients to contact us if they have any queries or concerns.

¹ Formerly Monkeypox

- Patients also signposted to information resources including when to seek help and when can end isolation. When the patient thinks they meet that criteria, they can contact us and we will discuss this with them and make a plan.
- Advise how to seek emergency care if required – NB that they inform emergency services that they are mpox positive
- Provide with contact details and advise can call with any new symptoms/concerns during working hours
- Inform PH of positive result (contact details below)
- **See below for ending self-isolation**
- Communicate to HA team to arrange follow up appt in clinic once out of isolation

Ending Isolation

- Patients should be provided with PIL outlining criteria for ending isolation (available on HPSC → Mpox → Guidance → Leaflets).
- When the patient believes that they meet the criteria to come out of isolation, they should make contact with service to discuss and agree
- Ensure patient is booked for follow-up STI clinic for screening / assessment