Instructions for Monkeypox Specimen Collection
As of July 19, 2022

When considering testing a patient for monkeypox, please first consult with the Rhode Island Department of Health (RIDOH) for authorization. RIDOH can be reached Monday-Friday from 8:30 a.m.-4:30 p.m. at 401-222-2577 or call 401-276-8046 weekends and after hours.

When collecting specimens for monkeypox testing, wear appropriate personal protective equipment including:
   a. Gloves, Disposable gown, face-shield, or goggles,
   b. N95 mask (fit-tested, if possible)

This is a Category B Specimen and should be transported in the following packaging:

   **Monkeypox Kit should contain:**
   1. 2 specimen bags, each containing:
      a. 2 Dacron-tipped sterile swabs – total 4 swabs
      b. 2 dry (no media) sterile screw capped tubes – total 4 tubes
      c. Absorbent pad
   2. Rhode Island State Health Laboratories (RISHL) requisition form
   3. Ice pack (for transport)
   4. Styrofoam box (for transport)
   5. Cardboard box (for transport)

   **Specimen Collection Preparation for Suspected Monkeypox Patient:**
   1. Label all tubes as follows:
      c. Patient’s name and Date of Birth
      d. Date of Collection
      e. Two tubes for each vesicle location, labeled with that vesicle location
   2. Complete Rhode Island State Health Laboratories (RISHL) requisition form:
      a. All patient information fields
      b. Provider and facility information if applicable
      c. Collection date
      d. Specimen source(s)/location(s)
      e. In comments section write “Orthopox PCR”
**Instructions for the Collection of Suspected Monkeypox Specimen**

1. **Each pair of swabs is used to sample a single lesion.** Two different lesions should be sampled, preferably from different locations on the body or from lesions that differ in appearance.

2. **Swab the lesion vigorously to collect adequate DNA using sterile, dry synthetic swabs (including, but not limited to polyester, nylon, or Dacron)** with a plastic, wood, or thin aluminum shaft. **Do not use cotton swabs.** It is not necessary to de-roof the lesion before swabbing.

3. Break off the end of each swab’s applicator into a separate sterile screw-capped tube, **one swab per tube.** Ensure tubes are labelled as described above. Do not add or store in viral or universal transport media. RISHL will not accept viral transport media at this time.

4. Repeat steps #2 and 3 with a second lesion, again using **two swabs.**

5. Place a swab from each lesion into one or the other specimen bag, so that each bag has a swab from two different lesions and the two bags are identical.

6. Place RISHL requisition form on the outside pocket of one of the two bags.

7. Refrigerate or place on top of frozen ice pack in Styrofoam container until transport. Both bags are to be sent to the RISHL. One bag will be tested and the second retained to be sent to CDC for confirmation, if either swab in first bag is positive.