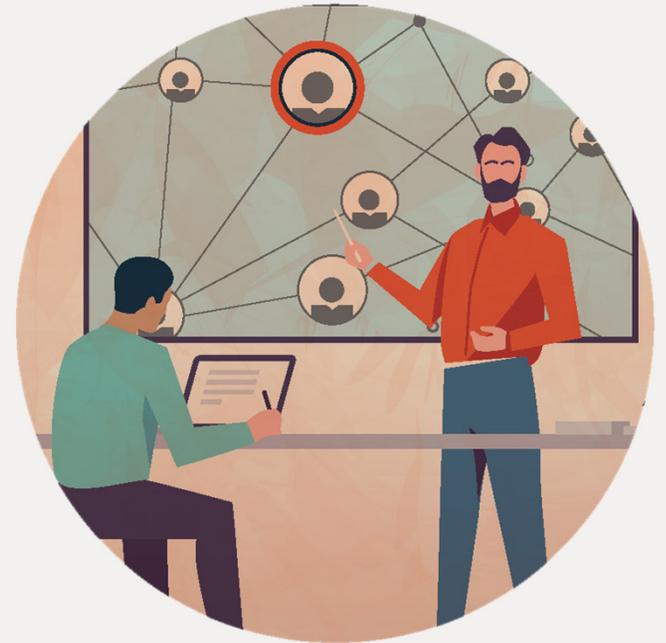


MONKEYPOX

Monkeypox Update for Schools, Early Care and Education Programs, and Other Settings Serving Children or Adolescents

Monkeypox Schools FAQs: Education Partners
August 22, 2022



Key Points

- The risk of monkeypox to children and adolescents is **low**
- School/childcare program practices do **not** need major changes
- CDC is monitoring the spread of monkeypox closely and will share updates as we have them

Everyday Operations

How to Prepare

Follow your regular operational guidance for preventing the spread of infectious diseases

- Stay home when sick
- Wash hands
- Clean and disinfect
- Make space for an ill child
- Provide disease-specific personal protective equipment (PPE), such as masks, to staff caring for children with potentially infectious diseases



How to Manage Illness in Children and Staff

Children

- Keep children home if they have a fever and rash
- Talk to your child's doctor
- Know that several illnesses can cause a fever and rash
- Avoid blaming or excluding children based on fear

Adults

- Should familiarize yourself with monkeypox symptoms
- Stay home if you have a fever and/or new, unexplained rash
- Talk to your doctor if you have a new, unexplained rash
- Wear a mask while visiting a medical professional

Managing Monkeypox Cases and Exposures

Risk and How Monkeypox Spreads

- The risk of monkeypox to children and adolescents is **low**
- Monkeypox can infect **anyone** who has been exposed by:
 - Skin-to-skin contact
 - Uses contaminated objects, fabrics, or surfaces



Who can Currently get a Monkeypox Vaccine?

- People who have been identified by public health officials as a contact of someone with monkeypox
- People who know one of their sexual partners in the past 2 weeks has been diagnosed with monkeypox
- People who had multiple sexual partners in the past 2 weeks in an area with known monkeypox

Managing Cases

- Clean and disinfect
- Work with the health department on contact tracing
- Communicate
 - Keep messages fact-based to avoid introducing stigma
- People can return when the scabs have fallen off and a fresh layer of healthy skin has formed
 - Typically, 2-4 weeks after symptoms begin



Managing Exposures



- Most people who have been exposed can continue attending the program
- Monitor for symptoms for 21 days
- If an exposed child develops symptoms:
 - Separate from other children
 - Wear a well-fitting mask (if >2yo)
 - Have a medical evaluation
- Staff caring for the child should wear a respirator, avoid touching the rash, use gowns/gloves, wash hands

Parents with Monkeypox

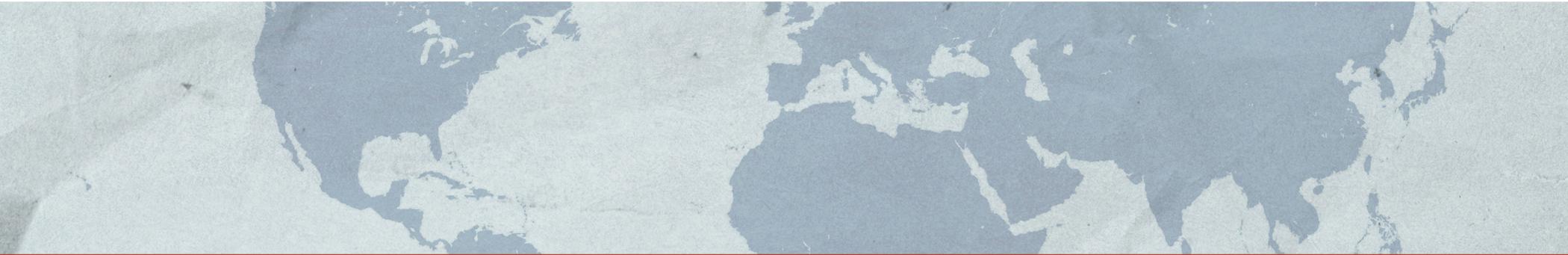
- Ideally, a caregiver without monkeypox should become the primary caregiver of the child.

If that is **not** possible:

- The child may be able to continue attending the program
- When interacting with the child, the parent should cover the rash
- Wear respirators or well-fitting masks
- Clean and disinfect surfaces, floors, and shared items
- Consider vaccination

Resources

- [Schools, Early Care and Education Programs, and Other Settings Serving Children or Adolescents:](#)
 - <https://www.cdc.gov/poxvirus/monkeypox/schools/faq.html>
- [What You Need to Know about Monkeypox if You are a Teen or Young Adult](#)
 - <https://www.cdc.gov/poxvirus/monkeypox/teens-young-adults.html>



For more information, contact CDC

1-800-CDC-INFO (232-4636)

TTY: 1-888-232-6348 www.cdc.gov

The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.