



Case Definitions† for Use in the 2022 Monkeypox Response

Updated July 22, 2022

Suspect Case

- New characteristic rash* OR
- Meets one of the epidemiologic criteria and has a high clinical suspicion[†] for monkeypox

Probable Case

- No suspicion of other recent Orthopoxvirus exposure (e.g., Vaccinia virus in ACAM2000 vaccination) AND demonstration
 of the presence of
 - o Orthopoxvirus DNA by polymerase chain reaction of a clinical specimen OR
 - o Orthopoxvirus using immunohistochemical or electron microscopy testing methods OR
 - Demonstration of detectable levels of anti-orthopoxvirus IgM antibody during the period of 4 to 56 days after rash onset

For Health Departments

Please see CDC's Case Reporting Recommendations for Health Departments for more information about data collection for case reporting and specimen collection.

Confirmed Case

• Demonstration of the presence of *Monkeypox virus* DNA by polymerase chain reaction testing or Next-Generation sequencing of a clinical specimen **OR** isolation of *Monkeypox virus* in culture from a clinical specimen

Epidemiologic Criteria

Within 21 days of illness onset:

- Reports having contact with a person or people with a similar appearing rash or who received a diagnosis of confirmed or probable monkeypox OR
- Had close or intimate in-person contact with individuals in a social network experiencing monkeypox activity, this includes men who have sex with men (MSM) who meet partners through an online website, digital application ("app"), or social event (e.g., a bar or party) **OR**
- Traveled outside the US to a country with confirmed cases of monkeypox or where *Monkeypox virus* is endemic **OR**
- Had contact with a dead or live wild animal or exotic pet that is an African endemic species or used a product derived from such animals (e.g., game meat, creams, lotions, powders, etc.)

Exclusion Criteria

A case may be excluded as a suspect, probable, or confirmed case if:

- An alternative diagnosis* can fully explain the illness **OR**
- An individual with symptoms consistent with monkeypox does not develop a rash within 5 days of illness onset OR
- A case where high-quality specimens do not demonstrate the presence of *Orthopoxvirus* or *Monkeypox virus* or antibodies to orthopoxvirus

†Clinical suspicion may exist if presentation is consistent with illnesses confused with monkeypox (e.g., secondary syphilis, herpes, and varicella zoster).

*The characteristic rash associated with monkeypox lesions involve the following: deep-seated and well-circumscribed lesions, often with central umbilication; and lesion progression through specific sequential stages—macules, papules, vesicles, pustules, and scabs.; this can sometimes be confused with other diseases that are more commonly encountered in clinical practice (e.g., secondary syphilis, herpes, and varicella zoster). Historically, sporadic accounts of patients co-infected with *Monkeypox virus* and other infectious agents (e.g., varicella zoster, syphilis) have been reported, so patients with a characteristic rash should be considered for testing, even if other tests are positive.

Categorization may change as the investigation continues (e.g., a patient may go from suspect to probable).

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