Specimen collection and transport guidelines are available at the State Laboratories Division-DOH website.

Acceptable; specimen types: Swab, touch prep and scabs

Safety:
Smallpox is HIGHLY INFECTIOUS. Manipulation of specimen material should be avoided.

Labs should not attempt to culture or perform any diagnostic assay on specimens that are high risk of having smallpox.

A completed Chain-of-Custody documentation shall accompany the specimen.
Patient Evaluation for Smallpox Infections

Patient with Acute, Generalized Vesicular or Pustular Rash Illness

Institute Airborne & Contact Precautions
Alert Infection Control on Admission

Low Risk for Smallpox
No Febrile Prodrome OR
Febrile Prodrome and <4 MINOR smallpox criteria

History and Exam
Highly Suggestive of Varicella

Varicella Testing
Optional

Diagnosis
Uncertain

Test for Varicella and Other Conditions as Indicated

Cannot RULE Out Smallpox
Contact Local/State Health Dept

Moderate Risk for Smallpox
Febrile Prodrome AND one other MAJOR or MINOR smallpox criteria
Febrile Prodrome and >4 MINOR smallpox criteria

ID and/or Derm Consultation
VZV and/or Other Lab Testing as indicated

Non-smallpox Diagnosis Confirmed
Report Results to Infection Control

No Diagnosis Made
Ensure Adequacy of Specimen
ID or Derm Consultant Re-Evaluates Patient

Cannot RULE Out Smallpox
Contact Local/State Health Dept

High Risk for Smallpox
Febrile Prodrome AND Classic smallpox lesions AND lesions in same stage of development

ID and/or Derm Consultation
Alert Infection Control & Local and State Health Depts

Public Health Response Team collects Specimens and Advises on Management

Testing at Wadsworth Center

NOT Smallpox
Further Testing

SMALLPOX

Major Smallpox Criteria
Febrile prodrome: Occurring 1 - 4 days before rash onset, Fever >101°F AND at least one of the following: prostration, headache, backache, chills, vomiting or severe abdominal pain
Classic smallpox lesions: Deep-seated, firm/hard vesicles or pustules, may be umbilicated or confluent
Lesions in same stage of development: On any one part of the body all lesions are in the same stage of development (i.e.: all vesicles or all pustules)

Minor Smallpox Criteria
Centrifugal distribution with greatest concentration of lesions on face and distal extremities
First lesions on the oral mucousa, face or forearms
Slow evolution of lesions: macules to papules to pustules
Lesions on the palms and soles
Patient appears toxic or moribund

Source: Centers for Disease Control and Prevention (CDC)