Monkeypox Virus
Safety Plan

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Safety, Emergency, & Enterprise Risk Management
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### Acronyms

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<th>Acronym</th>
<th>Description</th>
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<tr>
<td>CDC</td>
<td>Centers for Disease Control &amp; Prevention</td>
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<tr>
<td>DHRM</td>
<td>Department of Human Resource Management</td>
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<td>EHW</td>
<td>Employee Health &amp; Well-Being</td>
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<td>HRL</td>
<td>Housing and Residence Life</td>
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<td>MPV</td>
<td>Monkeypox Virus</td>
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<td>MPX</td>
<td>Monkeypox Illness</td>
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<td>OSHA</td>
<td>Occupational Safety &amp; Health Administration</td>
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<td>PHI</td>
<td>Personal Health Information</td>
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<td>PEP</td>
<td>Post Exposure Prophylaxis</td>
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<td>PPE</td>
<td>Personal Protective Equipment</td>
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<td>SHS</td>
<td>Student Health Services</td>
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<td>VDH</td>
<td>Virginia Department of Health</td>
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Introduction

This *Monkeypox Virus Safety Plan* outlines the guidelines, procedures, and practices that will be observed when Monkeypox illness (MPX) is reported within the campus community. This plan provides structure for continued instruction and campus operations and outlines risk-mitigation strategies for the Mason community that may include: behavioral expectations and practices (administrative controls), engineering controls, personal protective equipment (physical controls), and policies and procedures consistent with best public health practices. The plan may evolve as circumstances develop and/or as new information or revised guidance becomes available from federal, state, and local officials and public health experts. The university is in frequent communication with state and local government agencies and public health departments, as well as health and safety colleagues at peer institutions and will update the plan as needed.

George Mason University (Mason) is Virginia’s largest public research university, serving more than 37,000 students. The university has a significant footprint in northern Virginia, with three campuses located in Arlington, Fairfax, and Prince William Counties, and multiple instructional and research sites throughout the region. The university also has a campus in Northeast Asia, Mason Korea. George Mason’s guiding principle when responding to communicable disease outbreaks is to support the health, safety, and well-being of the Mason community, while still maintaining operations to fulfill the university’s mission as an innovative and inclusive academic community committed to creating a more just, free, and prosperous world.

Purpose

This *Monkeypox Virus Safety Plan* has been developed to establish policies and procedures to prevent, identify and respond to suspected or confirmed cases of MPX at Mason. The plan applies to all Mason employees, students, affiliates, visitors, and all Mason campus.

The information and guidance in this plan is based upon current guidance from the Centers for Disease Control and Prevention (CDC), the Virginia Department of Health (VDH), and applicable regulations and guidance from the Occupational Safety and Health Administration (OSHA).

Governance

This *Monkeypox Virus Safety Plan* aligns with Mason’s emergency response plans to include the Emergency Operations Plan, Continuity of Operations Plan, and Communicable Disease Response Plan. These plans and associated policies and procedures are used to facilitate alignment among the different constituencies of the university and involvement of the academic and research communities charged (if necessary) with developing detailed plans, standards, and policies required to successfully manage university operations during an emergency or ongoing event.

While the Emergency Management Executive Committee serves as a steering committee for emergency response actions and plans, specific plans pertaining to unique public health threats that require changes to university operations are reviewed and approved by the President, the Senior Leadership Team, and when needed, the full Executive Council.
Integration with State and Local Public Health Agencies

Mason’s broad operational footprint in the Northern Virginia region has led to the establishment of collaborative relationships with local public health departments and the VDH. These relationships support the care and treatment of Mason’s student population in collaboration with Mason’s Student Health Services (SHS), as well as the development and implementation of operational health and safety procedures to support Mason’s faculty, and staff and contractors in collaboration with Mason Employee Health and Well-Being (EHW).

The university has leveraged these relationships with local public health departments and VDH when developing Mason policies and procedures. Mason’s Executive Director of SHS and Mason’s EHW Medical Director serve as Mason’s primary points of contact for local public health departments. In addition, Mason’s Public Health Operations Committee comprised of Safety, Emergency, & Enterprise Risk Management, Student Health Services, and Human Resources as well as local public health officials meet regularly to review cases and identify potential outbreaks.

Epidemiology

Monkeypox is a rare infectious disease caused by the Monkeypox Virus (MPV). MPV is part of the same family of viruses as variola virus, the virus that causes smallpox. MPX symptoms are similar to smallpox but milder; MPX is not related to chickenpox and is rarely fatal.

Transmission

MPV can spread to anyone through close, sustained personal contact, often skin-to-skin, including:

- Direct contact with MPX rash, scabs, or body fluids from a person with MPX.
- Touching objects, fabrics (clothing, bedding, or towels), and other surfaces that have been used by someone with MPX.
- Respiratory secretions through large respiratory droplets during prolonged face-to-face interactions (the type that mainly happens when: intimate contact and living with someone or caring for someone who has MPX)
- Direct contact during intimate contact.

A person with MPX can spread the virus to others from the time symptoms start until the rash has fully healed and a fresh layer of skin has formed. Some individuals may transmit the virus during prodromal symptoms (fever, malaise, headache, sometimes sore throat and cough, and swollen lymph nodes). The incubation period is generally 3-17 days, and the illness typically lasts 2-4 weeks.

Signs and Symptoms of Monkeypox

MPX symptoms typically appear 5-21 days after initial contact with the virus, and symptoms generally last 2-4 weeks. Infected persons can exhibit one or more of the following symptoms, with skin rash being the most typical:
• Skin rash that looks like pimples or blisters on the face, inside the mouth, or other parts of the body including hands, feet, chest, genitals or anus.
• Fever
• Headache
• Muscle and backache
• Swollen lymph nodes
• Chills
• Exhaustion

If a rash develops, the rash goes through multiple different stages before healing completely. It can begin as a pimple or bump and turn into a sore, ulceration or blister before resolving. A person is considered contagious from the time when symptoms are first identified until the rash has fully healed and a fresh layer of skin has formed.

People who do not have any MPX symptoms cannot spread the virus to others.

Further information about signs and symptoms of MPX can be found on the CDC website: https://www.cdc.gov/poxvirus/MPX/symptoms.html.

Culture of Adherence to Public Health and Safety Precautions

All faculty, staff, students, contractors, affiliates, and visitors are required to comply with the policies and procedures outlined in this plan, as relevant for their classification. The university facilitates awareness of these policies and procedures through university wide emails and information hosted on university websites. The university expects individuals to follow appropriate health and safety precautions based on their health and vaccination status. Should issues of compliance arise:

• Faculty have the authority to enforce compliance with public health and safety precautions in the classroom in the same way they enforce other community norms.
• Faculty, staff, and students who do not comply with the university’s public health and safety precautions may be asked to leave the work area, classroom, or building.
• Noncompliance with the Monkeypox Virus Safety Plan may result in disciplinary action in accordance with Department of Human Resource Management (DHRM) Policy 1.60, “Standards of Conduct,” the applicable handbook for employees, or University policy. Employees may face disciplinary action, be placed on unpaid leave, or have their position terminated.
• Students who are noncompliant with the Monkeypox Virus Safety Plan may be subject to discipline under the Student Code of Conduct.

Communications

Information about MPX disease and cases will be shared as information becomes available, in accordance with privacy protection regulations, and in consultation with university and local public health authorities. Mason provides information about Monkeypox on line at: https://seerm.gmu.edu/stop-the-spread-monkeypox/.
Campus wide emails will be sent when new information or guidance must be relayed to the university community.

Targeted communications notifying classrooms, offices, events, registered student organizations, teams, and event participants of possible exposures will only occur if a risk assessment conducted by or in cooperation with the local health department determines that an individual’s presence presented a risk of exposure to others.

**Guidance for Non-residential Students, Faculty and Staff**

Non-residential students, faculty, and staff that suspect exposure to MPV, have symptoms consistent with MPX, or have been diagnosed with MPX must contact their primary care provider (students may contact SHS) to discuss health care, testing, vaccination, living arrangements, and resumption of on campus activities. Avoid others and do not participate in on campus or public activities until cleared by a health care professional.

**Guidance for Residential Students**

Residential students that suspect exposure to MPV, have symptoms consistent with MPX, or have been diagnosed with MPX must contact SHS to discuss health care, testing, vaccination, living arrangements, and resumption of on campus activities. Avoid others and do not participate in on campus or public activities until cleared by a health care professional.

**Requests for Additional Information**

For more information regarding Mason’s MPX protocols, response or individual concerns regarding may be found on the Stop the Spread – Monkeypox webpage. Specific questions about personal circumstances or health conditions can be directed to:

- **Students:** SHS at 703-993-2831 or via email at: shs@gmu.edu.
- **Employees:** Employee Health & Well-Being at 703-993-6001 or via email at: ehw@gmu.edu.

Media inquiries are directed to the Office of University Branding, Strategic Communications (703-993-8780; stratcom@gmu.edu).

Questions regarding the identify of individuals who have or potentially have a communicable disease is considered Personal Health Information (PHI) and handled in a confidential manner.

**Administrative Controls**

Administrative controls are procedures that should be observed to assist in mitigating a potential risk to one’s self or others.

**Vaccination**

CDC recommends vaccination for people who have been exposed to MPV and people who are at higher risk of being exposed to MPX. At this time vaccine is limited; eligibility requirements are used to determine who can receive vaccine.

Some eligibility criteria are:
- People with a known exposure to someone with monkeypox
- All people, of any sexual orientation or gender, who have had anonymous or multiple (more than 1) sexual partners in the last 2 weeks; or
- Sex workers (of any sexual orientation or gender); or
- Staff (of any sexual orientation or gender) at establishments where sexual activity occurs (bathhouses, saunas, sex clubs).

At this time, vaccine is available through the following:
- George Mason University students and employees through the EWH Vaccination and Testing Clinic at Fenwick A. Individuals may email ehw@gmu.edu for assistance scheduling.
- Fairfax County Health Department
- Inova Pride Clinic

Students may contact SHS at 703-993-2831 or via email at: shs@gmu.edu, to discuss vaccination options and availability.

For more information about how to obtain vaccine and eligibility requirements, contact the health department or district in which you reside:

- Arlington County: Arlington County MPX Vaccine
- Fairfax County Health Department: 703-267-3511
  https://www.fairfaxcounty.gov/health/MPX
- Prince William County: (703) 792-6300 or (703) 792-7300
- Warren County: (540) 635-3159
- Inova Pride Clinic (703) 522-1175

**Testing**

Upon report of MPX exposure or symptoms, primary care providers or the health department/district will instruct individuals when MPX testing is recommended and how to obtain a test. Residential students can contact SHS at 703-993-2831 or via email at shsinfo@gmu.edu with questions about testing. Non-residential students should contact their primary care provider, SHS or another provider of their choice about testing. Employees should contact their primary care physician to discuss MPX testing.

**Reporting**

Students and employees should report cases to their primary care provider. All residential students and those non-residential students who use SHS as their primary care provider should report to SHS. Primary care providers will relay the necessary information to the appropriate health department or health district in accordance with VDH regulations.

Students and employees do not need to report positive or diagnosed MPX cases to Mason.
Questions about care, reporting, and medical consultation are also available through Mason by contacting:

- **Students**: Student Health Services at 703-993-2831 or via email at: shs@gmu.edu.
- **Employees**: Employee Health & Well-Being at 703-993-6001 or via email at:chw@gmu.edu.

Questions regarding the identity of individuals who have or potentially have a communicable disease is considered PHI and handled in a confidential manner.

**Mental Health & Well-Being**

The university will continue to provide a wide range of mental health services for students, faculty, and staff.

- Mental health services for students will be delivered both in-person and virtually through Counseling and Psychological Services (CAPS).
- Students will be able to access other in-person or virtual well-being focused programs through Mason’s Center for the Advancement of Well-being, Student Involvement, and Mason Recreation.
- Faculty and staff enrolled in George Mason University healthcare plans have access to Employee Assistance Programs, which offer confidential assistance with personal, physical, psychological, and/or financial challenges. Employees and their dependents are eligible for up to four free sessions to address a variety of topics including, but not limited to, legal issues, housing insecurity, mental health, elder care, substance abuse and grief counseling. Additional information can be found on the DHRM Employee Assistance Program webpage.
- Human Resources and Payroll is offering and advertising a variety of workshops and programs for all faculty and staff (regardless of whether they are enrolled in the university’s benefit programs) to support well-being.
- **If you or anyone you know is experiencing a crisis, text “START” to 741741 (Crisis Text Line) or call 1-800-273-TALK (8255) to speak with a crisis counselor.**

**Engineering Controls**

Engineering controls are devices, equipment, and other mechanical means of mitigating potential hazards, exposure to hazardous substances or infectious diseases. Based on the epidemiological characteristics of MPX, the CDC and public health experts do not recommend specific engineering controls such as increased ventilation or barriers.

**Physical Controls**

Physical controls are actions and protective clothing that can mitigate the spread of communicable diseases. Exercising good personal hygiene and utilizing personal protective equipment (PPE) when required to perform specific functions can prevent the spread of MPV. Face coverings are not recommended as a protective measure against contracting MPX; however, individuals who are suspected to have MPX may be asked to wear a properly fitting N-95 respirator when they are in the presence of others as an additional level of protection.
**Standard Hygiene Practices**

The following personal hygiene practices can help prevent the spread of communicable diseases and should be observed by all students, faculty, and staff:

- Avoid touching eyes, nose, or mouth with unwashed hands.
- **Wash hands** often with soap and water for at least 20 seconds. If soap is not available, use hand sanitizer that contains at least 60% alcohol and follow up with soap and water as soon as you are able. It is especially important to wash your hands before eating or preparing food or touching your face and after leaving a public place, blowing your nose, coughing, or sneezing, using the restroom, handling your face covering, and caring for someone who is sick.
- Mason provides hand-washing facilities and/or hand sanitizing stations for employees to use in shared spaces. Units are provided hand sanitizer to place in common areas such as office suites, conference rooms and break rooms.
- When hand washing facilities are not available, use hand sanitizer. Hand sanitizer dispensers are located at main building entrances, main entrances to dining areas, near entrances to exercise rooms and work out areas, in common areas inside classroom buildings, in or near every classroom, and in elevator lobbies on all floors as necessary based on risk assessment.

**Personal Protective Equipment**

PPE is not recommended for the general public as a mitigating factor; however PPE may be required for some employees based on their job function. Employees who have the potential for close contact with positive MPX individuals are required to follow the procedures and use/wear the PPE criteria outlined in the Job Safety Analysis of their tasks.

**PPE for Students, Faculty, Staff, Affiliates, and Visitors**

No PPE is required or advised for routine use or as a preventative measure to mitigate the spread of MPV.

In some cases, potentially infectious individuals may be asked to wear a well-fitting face mask or N-95 respirator, and gowns while on campus, awaiting transport to a health care facility, or alternate location.

**PPE for Healthcare Employees**

PPE used by healthcare staff and university employees who are required to examine or enter a space vacated by a person with suspected or confirmed MPX will use the following PPE.

- Gown
- Gloves
- Eye protection (i.e., goggles or a face shield that covers the front and sides of the face)
- NIOSH-approved particulate N-95 respirator
Employees that are expected to use PPE in the course of their work must receive requisite training from Environmental Health & Safety to include but not limited to Respiratory Protection Training and function-specific training.

**On-Campus Exposure Guidelines**

When a suspected exposure to MPX occurs on campus, the following guidelines will be observed.

**Contact Tracing**

The local health department/district is responsible for determining potential exposures to MPX within the Mason community. Mason’s Public Health Operations Committee will assist the local health department/district in contact tracing as necessary and relay potential, suspected, or confirmed positive cases and potential exposure events to the health department/district for investigation.

**Exposure Risk Assessment Process**

Determination of risk of exposure to MPV on campus or during university sanctioned/sponsored activities will follow current CDC and VDH published risk assessment guidance summarized in the tables below. Factors that are considered when determining risk of exposure include but are not limited to symptoms, presence/severity/location of lesions, duration of contact, proximity, activity, environment, and health history.

### Degree of Exposure: High

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<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
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<tr>
<td>During the period of interest¹, did you have any unprotected skin or mucous membrane contact to the individual’s skin, lesions, or bodily fluids, or contaminated materials (e.g., linens, clothing)?</td>
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<tr>
<td>During the period of interest¹, were you inside the individual’s room or within 6 feet of a individual during any procedures that may create aerosols from oral secretions, skin lesions, or resuspension of dried exudates (e.g., shaking of soiled linens) while you were not wearing a NIOSH-approved N95 or equivalent respirator (or higher) and eye protection?</td>
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If Yes to any of the above, degree of exposure is **High** and recommendations include:

- Monitor for symptoms
- Post Exposure Prophylaxis (PEP): recommended

If No to all of the above, proceed to assessing Intermediate degree of exposure risk below.

### Degree of Exposure Risk: Intermediate

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<th>Question</th>
<th>Yes</th>
<th>No</th>
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<tbody>
<tr>
<td>During the period of interest¹, were you within 6 feet of an unmasked individual for 3 hours or more while you were not wearing a surgical mask or higher level respiratory protection?</td>
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</table>
During the period of interest\(^1\), did you perform activities that resulted in unprotected direct contact between your sleeves and other parts of your clothing and the individual’s skin lesions or bodily fluids, or their soiled linens or dressings while you were wearing gloves but not a gown?  

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<th>Yes</th>
<th>No</th>
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If Yes to any of the above, degree of exposure is **Intermediate**, recommendations include:  
- Monitor for symptoms  
- PEP: The need should be based on informed clinical decision making recommended on an individual basis to determine whether benefits of PEP outweigh risks  

*If No to all of the above, proceed to assessing Low/Uncertain degree of exposure risk below.*

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### Degree of Exposure Risk: Low/Uncertain

During the period of interest\(^1\), did you enter the individual room without wearing eye protection on one or more occasions, regardless of duration of exposure?  

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<th>Yes</th>
<th>No</th>
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During all entries in the individual care area or room during the period of interest\(^1\) (except for during any procedures listed above in the high-risk category), did you wear a gown, gloves, eye protection, and at minimum, a surgical mask? [Note: Contact with a confirmed MPX case or environment contaminated with MPV while wearing gown, gloves, eye protection, and surgical mask (with no known breaches) is considered a low risk exposure.]

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<tr>
<th>Yes</th>
<th>No</th>
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During the period of interest\(^1\), were you within 6 feet of an unmasked individual for less than 3 hours while you were not wearing a surgical mask or higher level respiratory protection?  

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<tr>
<th>Yes</th>
<th>No</th>
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If Yes to any of the above, degree of exposure is **Low/Uncertain** and recommendations include:  
- Monitor for symptoms  
- PEP: Not recommended  

*If No to all of the above, proceed to assessing Other Exposures below.*

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### Other Exposures

During the period of interest\(^1\), did you have any other possible exposures to the individual or potentially infectious material in the individual’s room?  

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<th>Yes</th>
<th>No</th>
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If yes, consult with the local health department about classification of exposure.  
- In general, unprotected direct contact or high risk environmental contact may be considered a high risk exposure.  
- Unprotected exposure to infectious materials, or a situation where potential for an aerosol exposure is uncertain may be considered an intermediate risk exposure.  
- A situation with uncertainty about whether MPX virus was present on a surface and/or whether a person touched that surface may be considered a low risk exposure.  

*If No to the above, the degree of exposure risk is considered No Risk. Monitoring and postexposure prophylaxis are not recommended.*

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\(^1\) Period of interest is defined as onset of symptoms (including prodromal symptoms) through resolution of the rash (i.e., shedding of crusts and observation of healthy pink tissue at all former lesion sites).

### Post Exposure Prophylaxis

At the recommendation of a public health official or primary care provider, individuals who are exposed to MPV but do not exhibit symptoms may be directed to receive post exposure prophylaxis (PEP); that is, a shot or series of shots intended to prevent MPX illness. How,
where, and when to receive post exposure prophylaxis will be relayed by the health department official or primary care provider when possible.

**Non-Residential Environments**

When a case of MPX is reported in a classroom, office, university event, public/common space, or within a group (e.g., registered student organization, athletic team, etc.), the local health department will conduct contact tracing and notify others who may be a risk of exposure. Mason’s Public Health Operations Committee will assist local health departments as necessary in contract tracing.

Students, faculty, and staff who are identified as close contacts by the health department will be provided with instructions to include but not limited to seek evaluation from a health care provider, monitor for symptoms, participate in MPX testing, quarantine or isolate, or receive PEP (taking medication as a preventative measure after a possible or confirmed exposure).

**Residence Hall**

Mason’s Public Health Operations Committee will work with residential students to determine their level of exposure and appropriate actions that need to be taken within their residence hall. Students should follow all directions and precautions from Housing and Residence Life (HRL) and SHS. SHS will notify students based on probable exposure and work in partnership with HRL to provide PPE when needed and implement MPX Isolation Procedures. Additional support will be provided for students who have a positive roommate. All suitemates/roommates will receive direction from the local health department or SHS on what to do if a roommate is found to be positive.

**Service and Companion Animals**

It is possible that people who are infected can spread MPX virus to certain animals through close contact, including petting, cuddling, hugging, kissing, licking, sharing sleeping areas, and sharing food. People with MPX should avoid contact with mammals, including pets, domestic animals, and wildlife to prevent spreading the virus. There is no evidence that MPV can infect birds, reptiles, amphibians, or fish. If a service animal has been in close contact with a person with MPX, that service animal shall be tested based upon CDC guidance using a veterinarian before returning to campus or their on-campus residence.

**Quarantine and Isolation Guidelines**

An individual with suspected or confirmed MPX infection should relocate to a single-person room or residence. The door should be kept closed if safety permits. The individual should have access to a dedicated bathroom that is not shared with others that have not been exposed to MPV or those with suspected or presumptive cases. Transport and movement of the individual outside of their room or residence should be limited to essential activities only. At the direction of a primary care provider, if the individual must leave their room or residence, a well-fitting N-95 respirator must be worn and any exposed skin lesions covered with a bandage or covering.
On Campus Quarantine & Isolation Protocol

Residential students diagnosed with MPX, will be asked to return to their permanent residence if distance and safety permits. Students that are diagnosed with MPX that isolate on campus will be provided with a room with dedicated bathroom. If necessary, students will be relocated to residential spaces designated as quarantine and isolation space. The following services will be provided to students during isolation at on campus locations; medical check-ins, meals, laundry service, toiletries, trash collection, and access to commercial deliveries.

While in isolation, the student should: avoid contact with other individuals, wear well-fitting source control (e.g., N-95 mask), and have any exposed skin lesions covered with a bandage or covering, when in the presence of others or outside of their isolation space.

Off Campus Isolation Protocol

Students and employees who reside off campus and are diagnosed with or suspected to have MPX must remain off campus until they are cleared by a primary care provider to return to normal activities. Students and employees are responsible for requesting an accommodation and notifying instructors or supervisors respectively to negotiate time away from class and work.

Students

Residential students who suspect exposure to or are concerned that they have MPX should seek medical care from SHS. Non-residential students who suspect exposure to or are concerned that they have MPX should seek medical care from their primary care provider, SHS or another provider of their choice. Students in quarantine or isolation should not come to campus or attend any university events.

Students who would need additional services or academic support during their time in isolation may contact the Student Support and Advocacy Center or the Dean of Students Office. Students may be required to produce a doctor’s note to be excused from academic activities.

Employees

Employees who are positive for MPX should seek medical care from their primary care provider. Employees under an isolation order from a physician or public health official may not come to campus or attend any university event. Employees should consult with Human Resources and Payroll to request accommodations and adjustments to their work schedule to include but not limited temporary telework, unapproved time off, work schedule adjustments, and leaves of absences. All remote work agreements will also comply with the Commonwealth of Virginia Department of Human Resource Management Policy 1.61 Teleworking.

Employees should reach out to Human Resources and Payroll for any questions related to reporting time or access to disability leave. Employees may be required to produce a physician’s note to be eligible for unplanned absences and additional benefits.

Ending Isolation and Resuming On-Campus Activities

A person is considered contagious from the time symptoms start until the rash has fully healed and a fresh layer of skin has formed. MPX illness typically lasts 2 to 4 weeks. A person may leave isolation at the direction of their primary care provider.
Residential students may return to their academic year room and resume normal activities only after receiving written clearance from SHS. Non-residential students may return to campus and normal activities after receiving written clearance from their primary care provider or SHS.

Employees may return to campus when approved to resume normal activities by their primary care provider. Documentation will be required per Human Resources and Payroll procedures.

**Cleaning and Disinfection**

Based on a risk assessment and at the advice of public health experts, spaces occupied by an individual diagnosed with MPX may require cleaning. Spaces may include but are not limited to residence, classrooms, vehicles, auxiliary spaces, SHS examination rooms, and athletic facilities. If it is determined that cleaning is required, spaces shall be closed off until proper cleaning and disinfection can take place. Cleaning may be conducted without prior notification.

**Cleaning and Disinfection Procedures:**

When cleaning and disinfection is recommended as per public health and CDC guidance, Mason will utilize a contracted service vendor to perform all cleaning/disinfecting. Cleaning and disinfecting will be conducted using a registered disinfectant from the Environmental Protection Agency’s List Q: Disinfectants for Emerging Viral Pathogens. The contracted service vendor will wear all PPE based upon CDC guidance and OSHA regulations. Cleaning procedures may include hard surfaces, upholstered furniture, carpets, and other objects that have come in contact with the occupant(s).

**Regulated Medical Waste**

Regulated medical waste generated by cleaning activities will be managed in accordance with Commonwealth of Virginia Department of Environmental Quality regulations and CDC guidance.