**Chickenpox (Varicella)**

**Images of Chickenpox (Varicella)**

- Healthy child with varicella
- Healthy adult with varicella
- Lesions are in different stages of development (back of hand)
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**Differentiating Chickenpox from Smallpox**

Chickenpox (varicella) is the most likely condition to be confused with smallpox.

In chickenpox:

- No or mild prodrome
- Lesions are superficial vesicles: *dewdrop on a rose petal* (see photo at top)
- Lesions appear in crops; on any one part of the body there are lesions in different stages (papules, vesicles, crusts)
- Centripetal distribution: greatest concentration of lesions on the trunk, fewest lesions on distal extremities. May involve the face/scalp. Occasionally entire body equally affected.
- First lesions appear on the face or trunk
- Patients rarely toxic or moribund
- Rapid evolution: lesions evolve from macules → papules → vesicles → crusts quickly (<24 hours)
- Palms and soles rarely involved
- Patient lacks reliable history of varicella or varicella vaccination
- 50-80% recall an exposure to chickenpox or shingles 10-21 days before rash onset

**Evaluating Patient**

**Acute, Generalized Vesicular**

**Risk of Smallpox**

- **High Risk of Smallpox** → Report Immediately
  1. Febrile prodrome (defined below) AND
  2. Classic smallpox lesion (defined below & photo at top right) AND
  3. Lesions in same stage of development (defined below)

- **Moderate Risk of Smallpox** → Urgent Evaluation
  1. Febrile prodrome (defined below) AND
  2. One other **major** smallpox criterion (defined below)
  3. Febrile prodrome (defined below) AND
  4. ≥ 4 **minor** smallpox criteria (defined below)

- **Low Risk of Smallpox** → Manage as Clinically Indicated
  1. No febrile prodrome
  2. < 4 **minor** smallpox criteria (defined below)

**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, round well-circumscribed vesicles or pustules; as they evolve, lesions may become umbilicated or confluent.
- **Lesions in Same Stage of Development**: on any one part of the body (e.g., the face, arm) all the lesions are in the same stage of development (i.e., all are vesicles, or all are pustules).