

MEASLES IN HEALTHCARE SETTINGS

Infection Control

If measles is suspected:

- All staff should be masked-preferably in a fitted N-95 mask.
- All staff caring for the client should have proof of MMR vaccine or immunity.
- The client should be masked and spend as little time as possible in the waiting room around other patients. They should also enter/exit through a back or side door if possible.
- The client should be seen in a negative pressure room if available. If not available, they should be seen in a room that can be kept closed and unoccupied for 2 hours after the client leaves.

Diagnosis and Testing Recommendations

If a person presents with a generalized rash and fever of unknown etiology, inquire:

- Have they traveled or had visitors?
- Do they know someone else with a rash and fever?
- Have they had a cough, coryza, or conjunctivitis?
- Where did the rash begin?
- Have they had antibiotics in the past week?
- How many MMR vaccines have they had?

If they have realistic exposure (have recently traveled outside of Oregon <u>OR</u> have had visitors from out of state <u>OR</u> know someone else symptomatic) <u>AND</u> have experienced a cough <u>OR</u> coryza <u>OR</u> conjunctivitis <u>AND</u> have a rash that started on the head, neck or face, <u>AND</u> are unimmunized or under immunized for measles <u>AND</u> had a fever → Collect a PCR for Oregon State Public Health Lab (OSPHL). You must secure approval through Marion County before sending to OSPHL. Marion County will secure approval from the state.

• If they only have a combination of the above, collect a PCR for a commercial lab OR collect serum for IgM.

Reporting

- Physicians are required to report all cases (including suspected cases) immediately per OAR 333- 018-0018.
- Labs are required to report all measles-specific positive tests (e.g., IgM, virus isolation, PCR) immediately, day or night per <u>OAR 333- 018-0018</u>.