

# MEASLES

## Measles Outbreak Guidance: Screening and Specimen Collection for Offices Utilizing Munson Medical Center Laboratory

Clinicians should be vigilant for the possibility of additional measles cases related to the outbreak in Southeast Michigan and are advised to take the following steps in assessing patients with possible measles.

### Clinical Features of Measles:

- The measles prodrome starts 3-4 days before the rash. The prodrome is characterized by a fever ( $>101^{\circ}\text{F}$ ) and by the “3 C’s”: cough, coryza (runny nose), and conjunctivitis. Towards the end of the prodrome, tiny white (Koplik) spots may appear inside the cheeks. Photophobia is common.
- Following the prodrome, a maculopapular rash typically begins on the forehead or hairline and spreads downward to the neck, trunk, and upper and lower extremities (palms and soles rarely involved). The rash usually appears about 14 days after a person is exposed.
- Please note that immunocompromised patients may not develop a rash and those with a previous history of measles infection or vaccination may have a modified disease presentation characterized by milder symptoms and a longer incubation period (17-21 days).



**If you suspect that a patient has measles, ACT QUICKLY!**

Promptly **ISOLATE** the patient to avoid transmission:

- Immediately provide a surgical mask to patient and support person(s).
- For additional control measures, please see page 2 for guidance.

Immediately **REPORT** the suspected measles case to your Local Health Department (LHD):

- Measles is highly contagious. Health Care Providers should **immediately** report any possible case of measles to the LHD of the patient’s residence. **In Grand Traverse County, please contact the Communicable Disease program at 231-996-6125.**

**OBTAIN LAB SPECIMENS** for testing:

- **PLEASE DO NOT SEND PATIENTS TO LABORATORY OUTREACH LOCATIONS FOR SPECIMEN COLLECTION. THIS PUTS OTHERS AT RISK!**
- Collect a throat swab for PCR (synthetic swab with a non-cotton tip)
  - Place swab in viral transport media (viral transport media is sometimes called “M4” or “Universal Transport Media”)
  - Keep cold or frozen.
- **Only** if your staff can collect blood:
  - Collect 2-3mL of whole blood (1 red top or red/black serum separator tube).
  - Spin down and separate serum if possible.

- **Specimens WILL NOT be tested unless they have been pre-approved!** In Grand Traverse County, please contact the Communicable Disease program at 231-996-6125. Grand Traverse County Communicable Disease nurses will assist your office in completing the “Measles Specimen Collection Checklist”, which must be included with the specimen. Information we will need at the time of your call includes:
  - Patient’s name and date of birth
  - Symptoms including fever, cough, coryza, conjunctivitis, photophobia, Koplik spots
  - Onset and description of rash
  - History of travel to an outbreak area or exposure/contact with a known measles case
  - Vaccination history
- **Labeling Specimens:**
  - Label specimen tubes with patient name, unique identifier such as date of birth, and date of collection
  - Include “Measles Specimen Collection Checklist” when packaging specimen
  - Send with your regular courier system to Munson Medical Center Laboratory
  - Munson Laboratory staff will complete the test requisition
- **Testing is Conducted:**
  - At the Michigan Department of Health and Human Services Bureau of Laboratories
  - Monday, Wednesday, Friday (if urgent and also approved, specimen may be tested outside of specified days)
  - Must arrive to the state lab by 9 am
  - Results will be provided to the county by the end of the day

#### Control Measures:

- Do not allow suspect measles patients to remain in waiting area or other common areas.
- Place patient in a negative pressure (airborne isolation) room. If a negative pressure room is not available, put in a private room with the door closed and keep the patient masked.
- Support person(s) should continue wearing a surgical mask, and providers/staff should use an N-95 respirator (regardless of immunity status).
- Close examination room for at least 2 hours after the suspected measles patient leaves.
- Regardless of setting, immediately review evidence of measles immunity in all exposed staff.

#### Resources:

MDHHS, “Key Facts about Measles,”

[www.michigan.gov/documents/mdch/KeyFacts\\_Measles\\_392862\\_7.pdf](http://www.michigan.gov/documents/mdch/KeyFacts_Measles_392862_7.pdf)

MDHHS, “Measles Investigation Guidelines,”

[www.michigan.gov/documents/mdch/Measles\\_388976\\_7.pdf](http://www.michigan.gov/documents/mdch/Measles_388976_7.pdf)

MDHHS, “2019 Michigan Measles Outbreak Information,”

[www.michigan.gov/measlesoutbreak](http://www.michigan.gov/measlesoutbreak)

CDC and the Healthcare Infection Control Practices Advisory Committee, 2007, “Guideline for Isolation Precautions: Preventing Transmission of Infectious Agents in Healthcare Settings”

[www.cdc.gov/infectioncontrol/guidelines/isolation/index.html](http://www.cdc.gov/infectioncontrol/guidelines/isolation/index.html)

IAC, “Measles: Questions and Answers Information About the Disease and Vaccines,”

[www.immunize.org/catg.d/p4209.pdf](http://www.immunize.org/catg.d/p4209.pdf)