

**Information for NM clinic providers regarding MEASLES:**

Please contact Infection Prevention or Public Health for any questions (see numbers listed below). Useful CDC information is available at

<https://www.cdc.gov/vaccines/vpd/mmr/public/index.html>

The most common questions we receive are these four:

**1. My patient is not sure if they are immune to measles**

If your patients are not sure if they are immune to measles, they can be vaccinated (there is no harm in an extra vaccine). Or, they can have a titer drawn (this would entail a second visit then for vaccination if you determine that they are not immune). You are considered immune if you meet one of the following:

- Pre-school age child with one measles vaccine (MMR)
- School-age child (K-12) or adult with two measles vaccines (MMR)
- Born before 1957
- Previously diagnosed with measles by a doctor or blood test
- Titer test that shows you are immune

For more information: <https://www.cdc.gov/measles/about/faqs.html#immunity>

**2. My adult patient would like vaccination**

Vaccination guidelines for adults who do not have evidence of immunity: they should get at least one dose of the MMR vaccine. See resources at

<https://www.cdc.gov/vaccines/vpd/mmr/public/index.html#materials>

**3. My patient may have measles symptoms**

Please see the attached guidelines. If the patient mentions measles or fever+rash when scheduling an appointment, note:

- **Patients calling for appointments:** **HIGH SUSPICION:** If the patient mentions fever, rash that starts on the head and descends, and 1 or 2 of cough, coryza, and conjunctivitis, and potential exposure to measles, the person making the appointment should alert the clinic. The clinician should call the local health department and NM Infection Prevention for next steps. Do not have the patient with a HIGH suspicion for measles come to the clinic. The health department will assist with patient management and any testing that might need to be done. Infection Prevention will assist with any staff exposures
- **LOW SUSPICION:** Some symptoms but no exposure to measles. If the patient with low suspicion is seen in the clinic, try to schedule the patient to come in at end of day when other patients are gone. (If needed, consider other practical actions to prevent exposure of potentially susceptible patients in waiting areas, i.e. bring patient in through a back entrance and place immediately in an exam room, or to go out to patient vehicle to evaluate or collect specimens.)

If the patient arrives with symptoms:

- **All patients with a fever and rash** are to be asked to **wear a mask immediately upon arrival** and those with suspected measles be isolated as quickly as possible.



**4. My patient thinks they have been exposed to measles**

Call the local health department for further information. The health department will help determine any exposures to any known cases that are currently occurring in the community. If they are having symptoms, please follow the guidance above.

**Call the local health department and page NM Infection Prevention (North/Central: 312-695-9196; West Region: 630-255-1293) for questions, guidance and assistance.**

**Public Health Department numbers:**

- Chicago: 312-747-9884
- Cook: 708-633-4000
- DeKalb: 815-748-2467
- DuPage: 630-221-7553
- Kane: 630-208-3801
- McHenry: 815-334-4500