Measles in the Healthcare Setting



To prevent measles outbreaks in healthcare settings, healthcare workers (volunteers, trainees, nurses, physicians, technicians, receptionists and other clinical support staff) should have documented immunity to measles *before* exposure, ideally as a condition of employment. Healthcare facilities should maintain readily available documentation of immunity.

Acceptable evidence of immunity to measles in healthcare workers includes:

- Documented administration of 2 doses of live measles virus vaccine given on or after the first birthday*, or
- Laboratory evidence of immunity, or
- Born before January 1, 1957 –
 healthcare facilities should consider
 recommending measles, mumps,
 rubella (MMR) vaccination for
 unvaccinated workers born before 1957
 without a history of measles disease or
 laboratory evidence of immunity, or
- Documentation of healthcare providerdiagnosed measles.
- * Persons who were vaccinated with an inactivated vaccine that was available from 1963-76, and have not been re-vaccinated, may however be at risk for measles.

All exposed persons (including other persons present in the facility at the same time as the suspect case and within two-hours after the suspect case departs), regardless of immune status, should be told to watch for symptoms of measles until 21 days after the last exposure to the communicable person. If suggestive symptoms develop, they must isolate themselves and call the local health department as soon as possible. Susceptible, previously unimmunized contacts should avoid all public settings from 7 days after the first date of exposure until 21 days after the last date of exposure regardless of whether they received post-exposure prophylaxis.

If possible, schedule appointments for a suspect measles patient at the end of the day. Mask suspect

case immediately and do not allow him/her to remain in the waiting room or other common areas. Isolate the patient immediately in a private room with the door closed. Allow only healthcare personnel with acceptable evidence of immunity to enter the patient's room.

If a person communicable with measles or suspected measles is examined in a healthcare facility, the examination room should be cleaned as per usual and remain unused for 2 hours. Keep a record of all persons including staff, patients and others who were in the facility at the time the suspect measles patient was in the facility and for two hours after they have departed. If measles is confirmed, those individuals will need to be contacted and assessed for immunity.

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