



JONATHAN E. FIELDING, M.D., M.P.H.
Director and Health Officer

ROBERT KIM-FARLEY, M.D., M.P.H.
Director, Communicable Disease Control and Prevention

Immunization Program

MICHELLE T. PARRA, Ph.D., Director
A. NELSON EL AMIN, M.D., M.P.H., Medical Director

3530 Wilshire Boulevard, Suite 700
Los Angeles, California 90010
TEL (213) 351-7800 • FAX (213) 351-2780

www.publichealth.lacounty.gov

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MEASLES ALERT- A MESSAGE TO EMERGENCY ROOM DEPARTMENTS IN LOS ANGELES COUNTY

This alert is to notify hospital emergency room departments of increased measles activity throughout the U.S., including California. Most cases have been linked to foreign travel or exposure to a tourist visiting the U.S. while in the communicable stage of measles.

Measles is a highly communicable disease that can have serious complications. Transmission of measles in hospital emergency rooms can be prevented by adoption of appropriate infection control procedures and by ensuring that all hospital employees and volunteers with direct patient care have been vaccinated against measles if they don't have proof of measles immunity (record of previous vaccination or positive measles serological test results).

Following are four basic rules that should be integrated into your emergency room procedures.

- **Consider measles when evaluating any patient who has an acute rash illness with fever, especially in someone returning from international travel or who has had contact with international visitors.** Symptoms usually begin 10-12 days (up to 21 days) after exposure with a prodrome of fever as high as 105°F (40.5°C), malaise, cough, runny nose, and conjunctivitis. Two to four days following the onset of the prodrome, a maculopapular rash develops. The rash usually begins around the ears and hairline and then spreads down to cover the face, trunk, arms, and legs.
- **Respiratory and airborne precautions should be taken to prevent transmission.** Suspect measles cases needing medical attention should not be allowed in patient waiting areas. They should be masked and placed immediately in an examination room, with the door closed. The examination room in which a patient with suspected or confirmed measles was examined should not be used again for two hours. With hospitalized patients, respiratory isolation is recommended for 4 days after the onset of rash. Listings of all exposed patients and staff will be required by the public health department from any medical facility treating a case of measles.
- **Obtain blood specimens for serologic confirmation of the diagnosis.** Blood specimens should be obtained at the time of clinical presentation and be tested for both measles IgM and IgG antibodies. Additionally, specimens for measles virus culture should be collected and transported in a tube of viral transport media. If within 4 days of rash onset, collect both a nasopharyngeal swab and a urine specimen. If within 5-10 days of rash onset, collect urine specimen only.
- **IMMEDIATELY report any suspect cases in Los Angeles County to the Morbidity Central Reporting Unit at 888-397-3993 (phone) or 888-397-3778 (fax).** Do NOT wait for laboratory confirmation before reporting a suspect case. During non-business hours (before 7:30 am, after 5:00 pm, or weekends) call 213-974-1234. For cases among residents of the Cities of Long Beach or Pasadena, contact their respective health departments. Remember, the Los Angeles County Department of Public Health depends on healthcare providers to identify suspected measles cases and report them in a timely manner.

For technical assistance or additional information about measles, please call the Los Angeles County Immunization Program's Surveillance Unit at (213) 351-7800.

Fever and Rash?.....Consider Measles

Measles cases continue to be identified in California in returning international travelers. Measles is highly contagious. Please protect patients, visitors, and staff!

✓ **Keep an eye out for measles symptoms:**

Suspect measles in patients with:

- fever and rash
- history of international travel or contact with international visitors in the prior 3 weeks.

Note: A history of 2 doses of MMR vaccine does not exclude a measles diagnosis.

Prodrome

- Mild to moderate fever
- Cough
- Coryza
- Conjunctivitis

Rash onset

- Fever spikes, often as high as 104° to 105° F
- Red, maculopapular rash that may become confluent—typically starts at hairline, then face, and spreads rapidly down body
- Koplik's spots (tiny blue/white spots on the bright red background of the buccal mucosa) may be present



✓ **Act immediately if you suspect measles:**

- **Implement airborne infection control precautions immediately, mask and isolate patient—negative pressure room, if available.**
- **Permit only staff immune to measles to be near the patient.**
- **Notify your local health department immediately.**
- **Expedite measles serologic testing (IgM and IgG) at a public health lab; use of commercial labs may delay diagnosis.**
- **Safeguard other facilities: assure airborne infection control precautions before referring patients.**
- **Do not use any regular exam room for at least 2 hours after a suspected measles patient has left the room.**



Visit www.GetImmunizedCA.org for more information