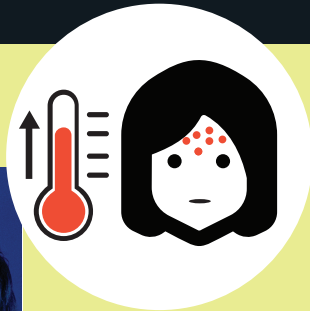




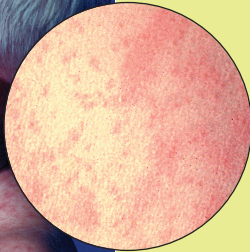
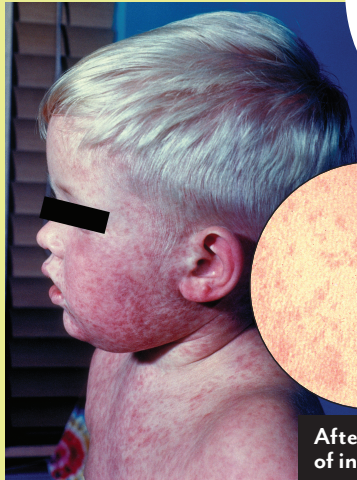
Suspecting Measles

Florida Department of Health • Find county contact information at: FloridaHealth.gov

1. IDENTIFY



Prodrome: fever of at least 101°F, cough, coryza and conjunctivitis.



After 3 days of infection.

Rash onset within 3–5 days:

- Red, maculopapular rash that may become confluent—typically starts at hairline, then face and spreads down body.
- The rash may be difficult to see on darker skin.
- Koplik's spots—small, red, irregularly-shaped spots with blue-white centers found on the oral mucosa—may be present in a small number of cases.

Photos courtesy of the Centers for Disease Control and Prevention.

RISK FACTORS:

- History of international travel, contact with international travelers or domestic travel to locations with known measles outbreaks.
- No or unknown MMR vaccine status. History of MMR vaccine does not exclude a measles diagnosis.
- Contact with a person that had a febrile rash illness.

2. ISOLATE



- Encourage patients and families to call ahead first.
- Avoid placing patient in waiting room.
- Implement airborne infection control precautions, mask and isolate patient in a negative pressure room, if available.
- Permit only immune proven staff to be in contact with patient.
- Collect nasopharyngeal swab, urine and serum for measles IgG, IgM and PCR.

3. INFORM



IMMEDIATELY REPORT ALL SUSPECTED MEASLES INFECTIONS TO YOUR COUNTY HEALTH DEPARTMENT.

NOTIFY other facilities of suspected measles before transport.

EXCLUDE patient from school for up to 4 days after onset of rash.

VACCINATION PROTECTS AGAINST MEASLES: A single dose is 93% effective and two doses are 97% effective.