

Health Advisory



February 1, 2019

Washington State Measles Cases Updates

Washington is experiencing an outbreak of measles in Clark County (41 current confirmed cases) with spread to King County and Multnomah County Oregon.

While **there are currently no confirmed measles cases in Yakima County**, patients may call you with questions regarding their immunization status, or with questions about exposure or current symptoms. We have encouraged the public to call healthcare facilities before presenting with febrile rash illness or known exposure so that your facility may take adequate precautions.

Health care providers should consider measles when evaluating non-immune patients for febrile rash illnesses, including [Dengue](#) and [Kawasaki](#) disease and should ask individuals about any recent travel to Clark County.

Individuals are considered **immune** and **NOT a suspect for measles if:**

- ✓ born before January 1st, 1957
- ✓ they are 12 months old through preschool-aged and have documentation of one MMR vaccine
- ✓ they are school-aged children or adults and have documentation of two MMR vaccines after 12 months of age and at least 28 days apart
- ✓ they have lab confirmed immunity by measles (rubeola) serology
- ✓ they have physician-documented history of measles disease

Measles typically presents with fever and the 3 C's (cough, coryza, conjunctivitis) followed by rash starting 4-5 days after primary symptoms. Rash typically begins in the face/head and travels downwards. Individuals manifest symptoms 7-21 days after exposure and are considered contagious 4 days prior to rash onset (or at onset of other presenting symptoms, whichever comes first) until 4 days after rash onset.

If you suspect measles, immediately mask and isolate patients (in a negative-pressure room, if possible) to avoid disease transmission. Please use the attached [Measles Assessment Form](#) to determine the likelihood of measles infection and

testing if indicated. Recommended testing includes nasopharyngeal swab, urine, *and* serum collection, all with appropriate handling. Please contact the Yakima Health District for specimen collection guidelines and approval for testing at the public health lab.

If you suspect measles exposure, your patient may be eligible for post-exposure prophylaxis. IG may be administered within 6 days after exposure for the following contacts: infants under 12 months of age, pregnant individuals, or individuals who are considered to be immune compromised. There is limited IG availability in the state at present and **we request that you review cases with communicable disease staff at the Yakima Health District prior to administration.**

For other exposed *and susceptible* individuals (see above) [MMR](#) may be administered up to 72 hours after exposure.

Here are ways to minimize exposure to others in clinical settings:

- **Measles, whether confirmed *or suspected*, is a notifiable condition** and should be reported immediately to the Yakima Health District at 509-249-6541 during business hours or 509-575-4040 option 1 after business hours.
- If possible and appropriate, patient may be scheduled as the last patient of the day.
- If feasible, appropriate and patient privacy can be protected, patient can be briefly evaluated outside, at least 30 feet from others. Once mask is placed and a clear path to exam room is prepared, patient can be escorted into the building.
- Whenever possible, patient should be escorted from a separate clinic entrance that allows them to access an exam room directly, without exposing others.
- The number of health care workers interacting with the patient should be kept to a minimum.
- If the patient is already in the clinic, patient should be roomed immediately, rather than allowed to wait in the lobby.
- The exam room door should remain closed at all times, and the patient should remain masked during the entire visit.
- All labs and clinical interventions should be done in the exam room.

- The exam room should not be used for at least two hours after the patient has left.
- Unimmunized or pregnant staff should avoid exposure of patients with suspected measles.
- All staff caring for patients with suspected measles should wear a mask.

MMR Vaccine Schedule

- **Providers should continue to administer MMR vaccine at the current [recommended schedule](#): 12-15 months, and 4-6 years of age.**
- Consider proactively calling families of infants and young children who are due for MMR vaccine to encourage them to complete this.
- Local public health officials may decide, as a local outbreak control measure, to recommend MMR vaccine for infants 6 through 11 months or MMR dose 2 to be given a minimum of 4 weeks after dose 1 instead of waiting until age 4 through 6 years. Infants 6 through 11 months may continue to receive MMR vaccine if traveling internationally. **We will let providers know if these recommendations change.** A third dose of MMR vaccine is recommended by the Advisory Committee on Immunization Practices only during a mumps outbreak, not a measles outbreak.

MMR Vaccine Supply

- Washington has sufficient MMR vaccine dose for children and adults. We are working with local pharmacies to verify vaccine on hand.

For more information about MMR vaccine recommendations visit [the ACIP Advisory Council on Immunization Practice](#)

We appreciate your partnership in minimizing vaccine-preventable disease in Yakima County.

For more information:

[Centers for Disease Control and Prevention](#)

Washington State Department of Health- Vaccination schedules in [English and Spanish](#)

[Washington My IR](#)

[Measles, Mumps, and Rubella \(MMR\) vaccine](#)

Yakima Health District [Immunizations](#) webpage

[Vaccines for Children Program](#)

[Local Pharmacy List](#) (call to find out which ones administer MMR)

[Tribal Services Support](#)

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[Yakima Health District website](#). Provider specific information is found on our [New Provider Resource Page](#)