## Report all SUSPECT measles cases immediately to your local health department.

www.doh.wa.gov/ForPublicHealthandHealthcareProviders/NotifiableConditions/Measles

✓ Consider measles in the differential diagnosis of patients with fever and rash:

		Yes	No	Comments
A)	What is the highest temperature recorded?		°F	Fever onset date://
B)	Does the rash have any of the following			Rash onset date:/
	characteristics?			Measles rashes are red, maculopapular rashes that may become confluent – they typically start at hairline, then face, and spreads rapidly down body. Rash onset typically occurs 2-4 days after first symptoms of fever (≥101°F) and one or more of the 3 C's (cough, conjunctivitis, or coryza).
	Was the rash preceded by one of the			
	symptoms listed in (C) by 2-4 days?			
	Did fever overlap rash?			
	Did rash start on head or face?			
C)	Does the patient have any of the following?			
	Cough			
	Runny nose (coryza)			
	Red eyes (conjunctivitis)			
D)	Unimmunized or unknown immune status?			Dates of measles vaccine:
•				#1/
				#2/
E)	Exposure to a known measles case?			Date and place of exposure:
-				
F)	Travel, visit to health care facility, or other			See local health department for
•	known high-risk exposure in past 21 days?			potential exposure sites.

✓	Measles should be highly suspected if you answered YES to at least one item in B and C, PLUS a YES
	in D or E or F. IMMEDIATELY:

- ☐ Mask and isolate the patient (in negative air pressure room when possible) AND
- ☐ Call your local health department to arrange testing at the WA State Public Health Laboratories (WAPHL). All health care providers must receive approval from [name of local health jurisdiction] prior to submission.
  - [LHJ phone number] during normal business hours
  - o [after hours phone number] after hours (duty officer)

## ✓ Collect the following specimens

- ☐ Nasopharyngeal (NP) swab for rubeola PCR and culture (preferred respiratory specimen)
  - Swab the posterior nasal passage with a Dacron™ or rayon swab and place the swab in 2–3 ml of viral transport medium. Store specimen in refrigerator and transport on ice.
  - o Throat swab also acceptable.
- ☐ Urine for rubeola PCR and culture
  - Collect at least 50 ml of clean voided urine in a sterile container and store in refrigerator.
- ☐ Serum for rubeola IgM and IgG testing
  - Draw at least 4-5 ml blood (yields about 1.5 ml serum) in a red or tiger top (serum separator) tube. Store specimen in refrigerator and transport on ice.

If you have questions about this assessment or collection and transport of specimens, call your local health department.

