

February 26, 2019

Dear Colleagues:

Re: Measles Preparedness for North Zone

A case of measles has been recently identified within the Edmonton Zone. The confirmed case was a traveller on an international flight. There may have been contacts from the North Zone. In addition, measles has been recently reported in Washington, Texas, New York, Illinois, and Vancouver, BC. Returning travelers who are susceptible may also be at risk of measles disease.

Measles is a serious, vaccine preventable, disease; approximately 1 in 20 will get pneumonia, and 1-2 in 1000 will die. It is easily spread through the air (coughing) and will cause infection in >90% of susceptible/unimmunized individuals who are exposed. The following is provided to ensure that you and your facility are prepared.

Clinical Presentation

Please consider measles in patients presenting with the following signs and symptoms:

- Fever 38.3° C or higher AND
- Cough, coryza or conjunctivitis AND
- Generalized maculopapular rash beginning on the face and spreading down to the trunk & extremities (usually appears 3-7 days after onset of prodrome)

Diagnostic Tests

Order the following tests as soon as possible to be done STAT on a ProvLab requisition. Please record the date of symptom onset, recent travel history and measles vaccination history on the requisition.

Blood	Serology for measles IgM and IgG (If collected within the first 3 days of rash, repeat testing may be needed due to the likelihood of false negatives).
Urine	For measles virus culture/PCR
NP Swab	For measles culture/PCR (in viral/universal transport medium [pink liquid])

Infection Prevention and Control Measures

Transmission for measles is airborne & may persist in the air/environment for 2 hours

- **In Emergency Departments:** a procedure mask should be applied to patients with rash and fever. They must be triaged away from other patients into a private (ideally negative pressure isolation) room as soon as possible. **Airborne precautions must be used.** It is critical to connect with your site Infection Prevention and Control Practitioner.
- **In offices or other facilities without negative pressure rooms:** Place a procedure mask on patient with fever and rash, AND direct the patient to a private room and close the door.

...2

- Healthcare workers (HCWs) who are uncertain about their immunity to measles must wear an N95 mask to provide care.
- If you suspect measles, and the patient has not had a procedure mask on in the room, you must leave the patient's room empty for 2 hours after departure, clean and disinfect before next use.
- If appropriate for discharge, advise the patient to stay home with no visitors for 4 days after the rash onset.

Reporting

Report all patients who are suspicious for measles immediately to the Medical Officer of Health via CDC Intake at (780) 513-7530 during business hours, and via Public Health on call at 1 (800) 732-8981 after hours, on weekends and holidays. Public Health will ask you for a list of all possible healthcare contacts of the case. Please advise the patient that Public Health will be calling them to identify other contacts. Post-exposure prophylaxis is available for high-risk susceptible contacts, including infants, pregnant women, and immune-compromised individuals.

Protect your patients, staff and yourself

Measles vaccine is offered, free of charge, through the publicly funded immunization program to all eligible individuals. Due to the highly communicable nature of measles, it is critical for all HCWs to be adequately protected against measles. Measles-containing vaccine is the primary means of providing protection for non-immune HCW. HCWs must meet one of the following criteria to be considered protected against measles, regardless of year of birth, include:

- 2 documented doses of measles containing vaccine
- History of laboratory confirmed measles disease
- Laboratory evidence of measles immunity

Thank you for your continuing collaboration in the preventing the spread of disease, and improving the health of our population.

If you have further questions, please contact your Zone Medical Officer of Health (MOH) at:

- 1-855-513-7530 - CDC Intake during regular business hours, or
- 1-800-732-8981 - Public Health On Call after hours and on weekends.

This letter will be posted on the AHS-MOH webpage
www.albertahealthservices.ca/medstaff/Page7082.aspx

Sincerely,

North Zone Medical Officers of Health

Dr. Albert de Villiers, Lead & NZ-West Areas 1,2,3,9

Dr. Kathryn Koliaska, NZ-Central Areas 4,5,6

Dr. Gerhard Benade, Dr. Mayank Singal, NZ-East Areas 7,8,10