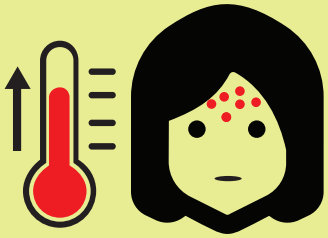
Think Measles

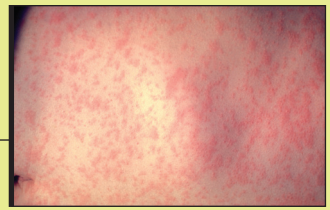
Florida Department of Health • Find county contact information at: FloridaHealth.gov

1. IDENTIFY

Suspect measles in patients with:



- Fever and rash.
- History of international travel or contact with visitors from locations with known measles outbreaks in the past 3 weeks.
- No or unknown MMR vaccine status. History of MMR vaccine **does not** exclude a measles diagnosis.



This is the skin of a patient after 3 days of measles infection.

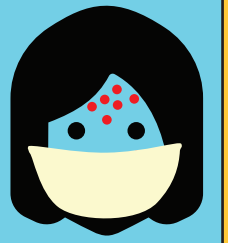
Photo courtesy of the CDC.



Head and shoulders of boy with measles; third day of rash.

Photo courtesy of the CDC.

2. ISOLATE



- Implement airborne infection control precautions, mask and isolate patient in a negative pressure room, if available.
- Permit only staff immune to measles to be near the 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.

< FIND YOUR COUNTY

Vaccination Protects Against Measles

A single dose is 93% effective and two doses are 97% effective.

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.

Prodrome

- ☐ Fever, cough, coryza, conjunctivitis

Rash Onset

- ☐ Fever spikes, often up to 104°F.
- ☐ 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.

02/03/15