GRAND RIVER HOSPITAL

St. Mary's GENERAL HOSPITAL

COMMUNIQUÉ

Date:	March 13, 2025
To:	All Team Members
From:	Shelley Schmidt, Integrated Clinical Program Director, Infection Prevention and Control Dr. William Ciccotelli, Medical Director, Infection Prevention and Control
Regarding:	Measles

Measles is a highly contagious respiratory virus that causes febrile rash illness and poses significant health risks. In addition to an increase in measles activity and outbreaks globally cases of measles have recently been confirmed in many of the regions surrounding Waterloo Region. For your awareness, Public Health Ontario has compiled an updated list of publicly reported measles exposure sites in Ontario

Measles is a highly infectious virus. **Symptoms of measles begin 7 to 21 days after exposure and can include any of the following:**

- Fever
- At least one of: cough, runny nose (coryza),conjunctivitis
- Small white spots known as "Koplik's spots" can appear on the inside of the mouth and throat
- 3 to 7 days after the start of the symptoms, a red, maculopapular rash appears on the face and then progresses down the body from head to toe
- Cases are infectious from 4 days before to 4 days after rash onset.

See GRH and SMGH Infection Prevention and Control Sharepoint sites and refer to the document "Vaccine Preventable Illness reference" for photos and comparison of communicable disease rashes.

Response to symptomatic, suspect or confirmed patients:

- Symptomatic, suspect or confirmed patients and caregivers/family members present must apply a medical mask immediately on presentation.
- Do not wait for laboratory confirmation before initiating Airborne Droplet Contact Precautions as Measles is extremely contagious
- Immediately place patient and caregivers together in an Airborne Infection Isolation Room (AIIR) with the door closed. If there is not an AIIR (negative pressure single room) immediately available, place patient and caregivers immediately in a single room with a portable HEPA filter and the door closed.
- The Additional Precautions required for any patient with suspect/confirmed measles including contacts of a confirmed case is Airborne Droplet Contact Precautions that includes a fit tested and seal checked N95 respirator plus eye protection, gown and gloves.
- Suspect/confirmed cases should only be cared for by vaccinated healthcare providers wearing the PPE outlined above.

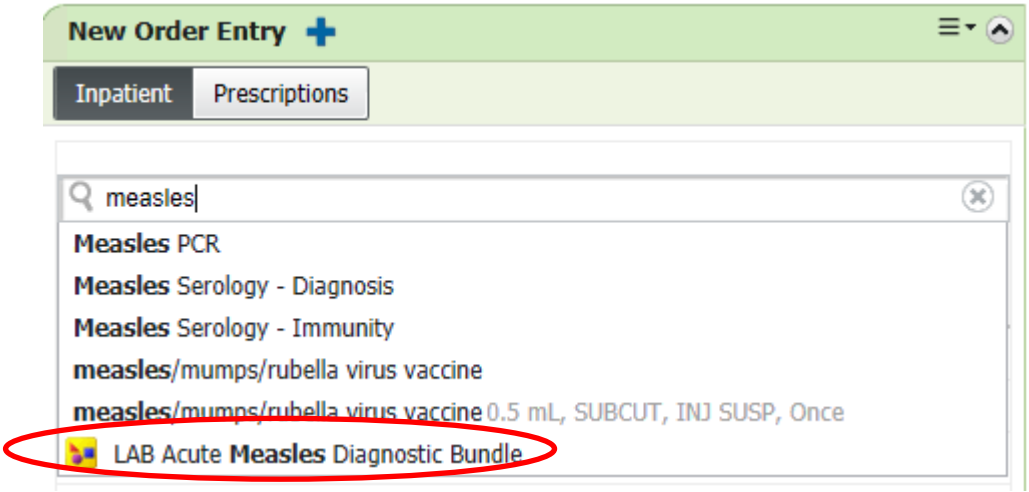
- The room door must remain closed and negative airflow maintained for 2 hours after the patient has been discharged until all air in the room has been replaced. In consultation with IPAC, this time may be modified based on known air exchange rates for the specific room/space.

Immediately report suspect measles and contacts of confirmed cases of measles to:

- Region of Waterloo Public Health at 519-575-4400 ext 5275 or Afterhours/Weekends/ Holidays at 519-575-4400
  AND
- The Infection Prevention and Control teams at your respective sites
  - **GRH:** 0800 to 1600 hours 7 days a week at 226-750-5184 or contact the (AHA) after hours administration (AHA) as appropriate in the evening/night
  - **SMGH:** 0800 to 1600 M-F at x1517/1157/4118 or contact the after hours supervisor/clinical on call as appropriate in the evening/night and weekends.

Laboratory Testing for Suspect Measles cases
Diagnostic laboratory testing for measles includes PCR virus detection and serology. A Powerplan is live in Cerner for Measles to guide testing

The Acute Measles Powerplan is found in Cerner as shown below:



The specimens for diagnosis include:

- A blood specimen for measles antibodies (IgM and IgG) collected in an SST tube within 7 days after the rash onset
- A nasopharyngeal swab or throat swab collected using unexpired viral medium
  AND
- Approximately 50 mL of urine collected in a C&S container within 14 days after the onset of the rash

A Public Health Laboratory requisition must be fully completed and accompany the specimens or the specimens will be rejected
https://www.publichealthontario.ca/-/media/Documents/Lab/general-test-requisition.pdf?rev=19d31d25de734017a0a3bbd3d4c82781&sc_lang=en

Additional information about measles testing can be found by here: Measles – Serology | Public Health Ontario ; Measles – Diagnostic – PCR | Public Health Ontario

Measles post exposure prophylaxis for high-risk Measles contacts
Measles post exposure prophylaxis(PEP) can include the administration of the measles vaccine or immune globulin (Ig) for certain individuals considered a contact of a confirmed measles case and deemed high risk.

High Risk individuals can include:

- Those who are unvaccinated or undervaccinated
- Infants under 6 months of age
- Individuals who are immunocompromised
- Pregnant women
- Infants 6-12 months of age, where the window for vaccine PEP has passed

A Clinician Reference Guide for Hospitals entitled “Immune Globulin for Measles Post-Exposure Prophylaxis” is posted on the Region of Waterloo Public Health Website found here: https://www.regionofwaterloo.ca/en/living-here/resources/Documents/Measles_Clinician_Reference_Guide_for_Hospitals-PeP-fact-sheet-accessible.pdf

For further information see Public Health Ontario documents pertaining to Measles https://www.publichealthontario.ca/en/Diseases-and-Conditions/Infectious-Diseases/Vaccine-Preventable-Diseases/Measles