GRAND RIVER HOSPITAL

St. Mary's GENERAL HOSPITAL

COMMUNIQUÉ

Date:	April 2, 2025
To:	Leadership Team
From:	Shelley Schmidt, Integrated Clinical Program Director, Infection Prevention and Control Dr. William Ciccotelli, Medical Director, Infection Prevention and Control
Regarding:	Measles Management

As previously communicated, Ontario has been experiencing increases in measles cases over the past several weeks. The region of Waterloo has also now noted an increase in activity, with a total of 14 confirmed cases thus far. Cases have largely been isolated to communities with poor vaccination rates, and unvaccinated individuals. However, given the transmissibility of measles, we must remain vigilant and be prepared to respond to any symptomatic, suspected, confirmed or exposed patient presenting for care . We are therefore enacting enhanced screening and management practices for all patients attending our organization.

In the **Measles communication on March 13, 2025 (attached)** information was provided on measles exposures, signs and symptoms, overarching principles of managing symptomatic, suspect or confirmed patients, the reporting requirements, laboratory testing and measles post exposure prophylaxis for high risk contacts.

The IPAC team is currently working with comms to develop passive screening signage for all entry points to the organization. **Attached you will find an interim poster for passive screening.** Active screening of patients presenting to our emergency departments has been implemented.

Attached, you will also find two Measles Management documents for sharing with your clinical teams: one document for managing any symptomatic patients, and one for management of asymptomatic exposed patients.

The IPAC team will be adding a flag to the problem list in Cerner for any measles exposed patients. If any of these patients return to WRHN within 28 days of the charted exposure, it will automatically add Airborne/Droplet Contact precautions for this patient. IPAC will manage addition and removal of these alerts as required. Please be aware this will not work for any units with recurring encounters, isolation will need to be manually added or removed from the recurring encounter, and will not be automatically facilitated. Please reach out to IPAC for support if needed.

We ask that you please ensure that your teams are aware of these processes, so that they are prepared for any patient who may present as direct admits to inpatient units, or present to our ambulatory/outpatient clinics. We also ask Managers/Directors who may need support in developing unit-specific operational plans to implement this to please reach out to the IPAC teams, either at icpinfectioncontrolpractitioners@grhosp.on.ca for GRH (WRHN @ Midtown and @ Chicopee campuses), and infectioncontrol@smh.ca for SMGH (WRHN @ Queen's Blvd campus).