

## Measles Response Checklist

### After hours: Emergency, Nights, Weekends, and Holidays

✓	ITEM	COMMENTS	
<input type="checkbox"/>	Patient/resident/client (PRC) presents to/in a facility with suspect measles ➤ Refer to: <a href="#">Infectious Rash IP&amp;C Algorithm</a>		
<input type="checkbox"/>	Have PRC put on a procedure mask ➤ Assist as needed	Record time PRC put on the mask	
<input type="checkbox"/>	Place PRC in: ➤ An airborne infection isolation room (AIR) if available OR ➤ A single room with door closed	Record time PRC was placed in single room/AIR	
<input type="checkbox"/>	Physician/Nurse Practitioner/Physician's Assistant confirms or identifies measles on differential		
<b>Notifications:</b>			
STEP	ACUTE CARE	LONG TERM CARE	COMMUNITY
1	Confirm PRC Under Investigation (PUI) for measles meets the case definition with IP&C Physician	Confirm P/R/C Under Investigation (PUI) for measles meets the case definition per consult with IP&C Physician	Primary Health Care Provider/Walk-In Clinic will notify MB health/MOH on call (204)788-8666, fill out MHSC form
2	<b>The attending physician/provider:</b> ➤ will notify MB health/MOH on call (204)788-8666 ➤ fill out and send <a href="#">MSHAL</a> form	<b>LTC Site leadership on call for the PUI will:</b> ➤ notify MB health/MOH on call (204)788-8666 ➤ fill out and send <b>MHSC</b> form	<b>Primary care Provider/walk-in clinic will:</b> ➤ notify MB health/MOH on call (204)788-8666 ➤ fill out and send <b>MSHAL</b> form
3	Leave message with site/area IP&C notifying them there was a measles case including: ➤ Patient name ➤ PHIN ➤ Unit ➤ Date ➤ Shift	Leave message with site/area IP&C notifying them there was a measles case including: ➤ Resident name ➤ PHIN ➤ Unit ➤ Date ➤ Shift	Leave message with site/area IP&C notifying them there was a measles case including: ➤ Client name ➤ PHIN ➤ Clinic ➤ Date ➤ Shift
<b>Additional Case Management</b>			<b>Comments</b>
	Review lab testing to confirm or rule out measles: ➤ nasopharyngeal swab (preferred) and/or urine for measles virus isolation. ➤ Blood for serologic testing (measles IgG and IgM)		<ul style="list-style-type: none"> <li>• Nasopharyngeal swabs are the preferred virologic specimen.</li> <li>• Collection technique should be vigorous enough to get epithelial cells</li> <li>• <i>Serology for IgM may produce a false positive or false negative<sup>1</sup></i></li> </ul>
	<b>Phlebotomy:</b> ➤ Notify lab that Airborne Precautions are needed ➤ Arrange for testing in room or have PRC wear a procedure mask to onsite lab If sending P/R/C offsite for testing (e.g. to commercial lab or ED) ➤ Notify intended testing site Airborne Precautions are required ➤ Instruct P/R/C to go for testing immediately P/R/C to wear procedure mask until they arrive home after lab testing		

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	<p>Clinical Lead/Charge Nurse to begin follow-up with staff <b>and</b> other contacts (e.g. Families, other patients/residents/ clients)</p> <ul style="list-style-type: none"> <li>➤ Review chart/interview staff to identify areas PUI was in <u>prior to being put on Airborne Precautions plus 2 hours after</u>. Consider (as applicable): <ul style="list-style-type: none"> <li>○ Diagnostic services</li> <li>○ Waiting areas</li> <li>○ Lab/phlebotomy areas</li> <li>○ In-patient areas</li> <li>○ Cafeterias/Dining areas</li> <li>○ Communal activity areas</li> <li>○ Other areas as applicable</li> </ul> </li> </ul>	<p>Ideally, for lab-confirmed cases, contact investigation should be completed within 24 hours.</p>
	<ol style="list-style-type: none"> <li>1. Identify in-patients/residents who are not considered immune (see definitions below)<sup>2</sup> and provide names to attending physician</li> <li>2. Notify Public Health of PUI and visitation to public spaces during their period of communicability (POC)</li> <li>3. Notify site Occupational Health Services (OESH) for follow up of staff who may have worked with or in areas where the PUI was not on Airborne Precautions</li> </ol>	
	<p>ADMITTING to hospital or readmission to LTC:</p> <ul style="list-style-type: none"> <li>➤ Transfer using Airborne Precautions (patient/client/resident to wear procedure mask and HCW to wear N-95 respirator if not immune)</li> </ul>	
	<p>DISCHARGE teaching</p> <ul style="list-style-type: none"> <li>➤ P/R/C should wear mask until they arrive home</li> <li>➤ If public transport is required, conduct an assessment of P/R/C and willingness to comply with masking and make arrangements with Blueline Taxi <ul style="list-style-type: none"> <li>▪ Offer driver a N95 respirator<sup>3</sup></li> <li>▪ P/R/C will not sit in front seat</li> <li>▪ P/R/C to perform hand hygiene</li> <li>▪ P/R/C to don mask prior to entering vehicle.</li> </ul> </li> <li>➤ If unable/willing to comply with masking, medical transport should be arranged.</li> <li>➤ If using Manitoba Transport Service: let them know <b>airborne precautions</b> are required</li> <li>➤ If returning to LTC, <b>airborne precautions</b> should be maintained as per protocol</li> </ul>	

<sup>1</sup>MHSAL - MSHAL– Communicable Disease Management Protocol— **MEASLES** (2019)

<sup>2</sup>Definitions:

**1.1 Contact**

Someone who shared the same airspace (no minimum length of time) with a measles case during the infectious period from the time of entering a facility/admission until two (2) hours after the measles case either left the area or was isolated.

**1.2 Susceptible Contact** (non-HCWs/Non-Military Personnel)

Is a Contact (defined above) that was born during or after 1970 and **DOES NOT** meet the following criteria for immunity:

- Adults who have received at least two doses of Measles, Mumps, Rubella vaccine (MMR)
- OR**
- Children 12 months to 17 years of age who have received two doses of MMR
- OR**
- Laboratory documentation of antibodies to measles.

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#### 1.3 Criteria for immunity in HCWs and military personnel

An individual in these categories is considered immune if there is:

- Documentation of vaccination with 2 doses of a measles containing vaccine (regardless of their year of birth)
- OR**
- History of laboratory confirmed infection
- OR**
- Laboratory evidence of immunity

<sup>3</sup>Instruct driver on limitations of N95 respirators that haven't been fit tested:

- When using a non-fit tested N95 respirator, the protection afforded by this respirator is at a reduced level.

For more information on measles, please refer to the posted [Specific Disease Protocol](#).