Should I test for measles? A Guide for Arkansas Healthcare Providers



Consider the patient's clinical presentation:

Does the patient have fever, rash (beginning on the face and progressing downwards), and conjunctivitis, cough, or runny nose?

If NO, not measles, no testing required. STOP If **YES**, continue.





Consider the patient's history;

Was the patient born before 1957 or have documented history of receiving MMR?

Yes to either

patient was born before 1957 or has a history of receiving 2 doses of MMR

In the 21 days prior to symptom onset, was there any of the following:

- known exposure to infected person
- international travel
- contact with international travelers
- travel to outbreak state (refer to CDC website)
- contact with travelers from an outbreak state

If No: Measles unlikely, provide education



If Yes: Is there an alternate explanation for the rash? (antibiotics, strep, mono)

Yes: Not measles, no testing

required

No: Measles unlikely, but out of an abundance of caution, may choose to

> Isolate Call Collect

No to both

patient was born after 1957 and does not have a history of receiving 2 doses of MMR

In the 21 days prior to symptom onset, was there any of the following:

- known exposure to infected person
- international travel
- contact with international travelers
- travel to outbreak state
- contact with travelers from an outbreak state

If Yes to any:

Isolate Call Collect

If No: Has the patient been symptomatic for > 10 days?

Yes: Measles unlikely, call vour ADH Outbreak Response Staff,

(501) 661-2381.

Isolate Call Collect

CALL COLLECT **ISOLATE**

Isolate the patient according to girborne precautions.

Call **ADH Outbreak Response Staff** (501) 661-2381 after hours 1-800-554-5738

Collect specimens for laboratory testing.

Throat swab or NP swab in Viral Transport Medium (VTM) and Serology. Consult with ADH Outbreak Response Staff on how to submit to ADH Lab.