

# Fever and Rash?.....Consider Measles

**Measles is highly contagious. Please protect patients, visitors, and staff!**

## **Keep an eye out for measles symptoms:**

**Suspect Measles in patients with fever, rash, and who have been in the last 3 weeks:**

- In contact with a person with measles or febrile rash illness
- In locations or communities with cases of measles
- Outside of the U.S. or in contact with international visitors
- Visited sites popular with international visitors (tourist attractions, airports, etc.)

**Note:** A history of 2 doses of MMR vaccine does not exclude a measles diagnosis.

### **Prodrome**

- Mild to moderate fever
- Cough
- Coryza
- Conjunctivitis

### **Rash onset**

- Fever spikes, often as high as 104° to 105° F
- Red, maculopapular rash that may become confluent—typically starts at hairline, then face, and spreads rapidly down body
- Koplik's spots (tiny blue/white spots on the bright red background of the buccal mucosa) may be present



## **Act immediately if you suspect measles:**

- **Immediately use airborne infection control precautions. Mask and isolate patient, in a negative pressure room whenever possible.**
- **Permit only staff immune to measles to be near the patient. Staff should use N95 respirators, if available.**
- **Notify your local health department immediately; arrange for expedited PCR testing at a public health lab.**
- **Protect others: Ensure airborne infection control precautions during medical transport and at receiving facilities.**
- **Do not use any regular exam room for at least 1 hour after a suspected measles patient has left.**



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