



Measles (Rubeola)

Provider Information Sheet

Measles is a highly contagious respiratory virus that causes febrile rash illness. Measles has been eliminated (no sustained circulation) in the United States for decades. However, there can still be measles cases, as **it is easily imported by unvaccinated travelers and can spread in under-immunized communities.**

Disease Course

- The incubation period is typically 11–12 days from exposure to measles virus until the first symptoms appear (prodromal symptoms).
- A rash follows the prodromal symptoms 2–4 days later and usually lasts 5–6 days.
- Measles is infectious 4 days before and 4 days after rash onset.

Symptoms

- **Prodromal:** Fever, cough, coryza, or conjunctivitis. Koplik spots (tiny white spots inside the mouth) may also appear 2–3 days after symptoms first appear.
- **Rash:** A maculopapular rash (rash of both flat and raised skin lesions) begins on the head and face and then spreads downward to the neck, trunk, arms, legs, and feet. The spots may become joined together as they spread from the head to the body.
- Fever may spike to more than 104° F when rash appears.

Complications

- **Most common complications:** Diarrhea and otitis media.
- **Most severe complications:** Pneumonia, encephalitis, and death. Patients may require hospitalization.
- Children younger than 5, adults older than 20, pregnant women, and immunocompromised persons are at most risk of serious complications.

Health Care Preparedness

- Vaccinate.
- Prompt identification at first presentation.
- Ensure staff education and training on signs/symptoms.
- Ensure supply of respirators and staff are fit-tested.
- Put up signage or other visual alerts about respiratory hygiene, cough etiquette, and hand hygiene.

What to do if you have a suspected case

1. Immediately mask and isolate the patient in a room with a closed door (negative pressure room if available). Follow standard and airborne precautions.
2. Only allow health care workers with presumptive evidence of measles immunity* to attend the patient; they must use N-95 masks or higher level respirator.
3. Evaluate the patient and order measles confirmatory testing (collect a throat or nasopharyngeal swab for RT-PCR and serum for IgM measles testing).
4. Contact infection control if available at your facility.
5. **Immediately report this suspect case to Maine CDC at 1-800-821-5821.**

For questions regarding specimen collection, storage, and shipment, **please call Maine CDC at 1-800-821-5821.**

Measles on the face



Measles on the trunk of the body



Images from cdc.gov

Resources

- Measles information for health care providers: <https://www.cdc.gov/measles/hcp/index.html>
- Measles vaccine recommendations: <https://www.cdc.gov/measles/vaccination.html>
- Infection control guidelines for measles: <https://www.cdc.gov/infectioncontrol/guidelines/measles/index.html>
- Surveillance manual chapter on measles: <https://www.cdc.gov/vaccines/pubs/surv-manual/chpt07-measles.html>
- Maine CDC information and resources: www.maine.gov/dhhs/measles

*Health care workers employed by designated health care facilities are required to have two doses of measles-containing vaccine or laboratory evidence of immunity.