

### Primary Contact

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## PREVENTING THE SPREAD OF MEASLES

### *Reminder of Best Practices for Healthcare Providers*

In light of recent measles cases nationwide, including in Washington state, Benton-Franklin Health District is reminding physicians and providers to consider measles in the differential diagnosis in appropriate situations.

BFHD is not aware of any current cases or public exposures of measles in our counties at this time. We are reminding you of this condition, its severity, and the importance of timely diagnosis and treatment of measles to prevent community transmission.

### Requested Actions

1. Please consider measles in patients who:
  - a. Are present with febrile rash illness and the “three Cs”:  
cough, coryza (runny nose) or conjunctivitis (pink eye)
  - b. Recently traveled internationally or were exposed to someone with confirmed measles
2. To prevent health care exposures, please implement the infection prevention practices outlined below
3. Report suspect measles cases immediately to BFHD @ 509-539-0416 and 509-543-3851 (after-hours) ([www.bfhd.wa.gov](http://www.bfhd.wa.gov) )

### Infection Prevention

Measles primarily spreads through large droplets but can also be transmitted through the airborne route. The virus can be transmitted through the latter route up to two hours after a contagious patient coughed or sneezed, according to the Centers for Disease Control and Prevention (CDC).

Preventing health care exposures is critical to keep high-risk groups safe. When possible, use phone triage and assessment to determine if patients who might have measles need to be seen in person.

*Up-to-date vaccination status makes measles much less likely.*

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Please implement the interventions listed below in your clinical settings to minimize exposure to others.

- If the patient is present in the clinic/waiting room, room them immediately.
- Use a negative pressure room if available; otherwise, keep the exam room door closed.
- Perform all labs and clinical interventions in the exam room if possible.
- Do not use the exam room after the patient has left for two hours.
- Patients under evaluation for measles should isolate at home until the diagnosis is clarified.

### Specimen Collection Recommendations

- If measles seems likely, collect nasopharyngeal (NP) swab and urine at the first healthcare visit for RT-PCR at WA PHL.
- Laboratory confirmation of measles is critical to track the spread and prioritize prevention efforts. Please confirm all clinical diagnoses of measles with the appropriate laboratory testing.

### Additional Guidance for Healthcare Providers

- [Measles \(Rubeola\) | CDC](#)
- [Measles | Washington State Department of Health](#)
- Attached: [Measles Flyer for providers \(wa.gov\)](#)

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