Communicable Disease Epidemiology and Immunization Section

401 5th Avenue, Suite 1250 Seattle, WA 98104

206-296-4774 Fax 206-296-4803

TTY Relay: 711

www.kingcounty.gov/health



Health Advisory – Measles Case in King County Resident Exposed During International Travel, King County – January 23, 2023

Action requested:

- Be aware of a confirmed measles case in an adult resident of King County who was exposed during recent international travel and was not previously vaccinated. This person with measles spent time at SeaTac airport and Providence Swedish First Hill Emergency Department during their infectious period.
 - o The infectious period for this case is January 16-January 24, 2023
 - Secondary cases resulting from this case would be expected to occur during January 25–February 14, 2023.
- Assess <u>immunization status of patients</u> at every visit and strongly recommend vaccination based on <u>recommended schedule</u>, health condition, occupation, and other risk factors such as travel; Under-vaccinated individuals may be at risk for measles infection due to outbreaks that occur in the US or anywhere else in the world.
- Consider measles infection in exposed patients with compatible symptoms, including:
 - Prodrome of fever, cough, coryza and conjunctivitis for 2-4 days
 - Generalized maculopapular rash that usually begins on the face at the hairline and then spreads to the neck, trunk, and extremities
 - Koplik spots may appear on buccal mucosa 1-2 days prior to rash
- Be prepared for the possibility of patients with measles at your facility:
 - In urgent/emergency healthcare settings:
 - Suspected patients should wear a mask covering the nose and mouth and be triaged immediately away from waiting rooms
 - Room patient in airborne isolation if available
 - In outpatient clinic settings:
 - Schedule suspected patients to be seen at end of day, if possible, and keep them out of waiting rooms
 - Use standard and airborne infection control precautions
 - o Only staff with documented immunity to measles should enter patient's room.
 - After patient is discharged, do not use or have staff enter the room for 2 hours.
- Collect specimens on patients with suspected measles for diagnostic testing:
 - For PCR and virus isolation:
 - Nasopharyngeal swab placed in viral transport media (VTM)
 - Urine, minimum 20mL, in sterile leak proof container
 - For measles IgM serology:
 - Serum, minimum 1mL, in red top or red-grey top tube
- Route specimens through Public Health to expedite testing (do not use commercial laboratory).
- Report suspected cases of measles to Public Health at (206) 296-4774 immediately before discharging or transferring patients.

Background

Public Health is investigating a local case of measles in an adult who was exposed while overseas. The case was at SeaTac airport and Providence Swedish First Hill Emergency Department during their infectious period before receiving the diagnosis of measles. The case did not wear a face mask at the airport but did wear a face mask in the healthcare facility, which might have reduced the risk to others in the emergency department. The case has been isolating at home since receiving their measles diagnosis.

Healthcare providers should be vigilant for potential measles infections among persons who spent time in these locations (see link below) at the dates/times listed, or had recent international travel, or had domestic travel to Ohio where measles outbreaks are occurring. The Ohio outbreak that began in November 2022 has primarily affected unvaccinated children and is up to 85 confirmed cases of which 34 were hospitalized. The greatest risk of measles introduction into U.S. communities is through international travel to areas where outbreaks are occurring. According to the WHO and CDC, measles outbreaks can be found in every region of the world (see link below for locations).

People infected with measles are considered infectious from four days prior to rash onset through four days after rash (total of nine days). Healthcare facilities should screen patients for possible symptoms or exposure to measles either at triage or when scheduling appointments to identify potentially infectious cases and promptly implement recommended infection control measures to prevent transmission to other patients and staff.

Specific dates and times of public exposure locations are online at: https://kingcounty.gov/depts/health/news/2023/January/21-measles.aspx

Resources

- Public Health Seattle & King County Measles Resources: www.kingcounty.gov/measles
- Washington State Department of Health:
 - Measles Resources: https://doh.wa.gov/you-and-your-family/illness-and-disease-z/measles
 - Managing Measles Exposures in Healthcare Workers
 https://doh.wa.gov/sites/default/files/legacy/Documents/5100//420-249-MeaslesHCFExposure.pdf
 - Measles specimen collection and shipping guidance: <u>Measles Specimen Shipping Guide</u> (wa.gov)
- CDC measles information for healthcare providers:
 - o Measles information for healthcare providers: https://www.cdc.gov/measles/hcp/index.html
 - Infection Prevention recommendations for measles in healthcare settings: https://www.cdc.gov/infectioncontrol/guidelines/measles/index.html
 - o Global measles outbreak information: Global Measles Outbreaks (cdc.gov)