

## Clinical Office Infection Prevention and Control Checklist for Measles

### ***Infection Prevention and Control information for management of suspect or confirmed measles cases.***

Report all suspect measles cases to the Haldimand-Norfolk Health Unit immediately using the *Measles Health Care Provider Investigation & Reporting Form* available on the HNHU website (<https://hnhu.org/health-care-professionals/>). Do not wait to receive lab results back.

### **Preparation Checklist**

- Immunity:** Check the status of vaccination among your staff. All healthcare workers should have documented immunity to measles. Only staff immune to measles should provide care.
- Screening:** Screen patients over the phone for signs/symptoms of measles at the time of appointment booking. Make efforts to arrange appointments for symptomatic patients at the end of the day when there are no other patients present. Ask the patient to wear a medical mask when visiting the office or advise that a mask will be provided to them on arrival.
- Single Room:** Place the patient in a single room with negative air flow (airborne infection isolation room [AIIR]) with the door closed.
- Masking:** Ensure you have **N95 masks** available for staff and that your staff has been fit-tested. All health care providers regardless of presumptive immunity to measles are to wear a fit-tested, seal-checked N95 mask when providing care to clients with suspect or confirmed measles.
- PPE:** Establish an area to don and doff PPE away from other patients and staff. To avoid contamination with clean PPE, place clean PPE at a distance of 6 feet away from the doffing area. Based on a point of care risk assessment (PCRA), determine if additional PPE such as eye protection, gloves, and gown are required.
- Testing:** Ensure your office has testing specimen containers, supplies, and requisitions for testing all 3 measles tests: *Nasopharyngeal Swab/Throat Swab, Urine and Serology*. Check expiry dates of specimen kits. Additional kits can be ordered from [Public Health Ontario Lab](#). For each laboratory requisition, clearly mark "suspect case of measles".
- Cleaning:** Ensure the room can be closed for a **two-hour period** with signage posted to allow proper air exchange once the patient leaves. Conduct routine cleaning of the room and equipment once sufficient time has elapsed.

### **Steps for Patients Visiting the Clinical Office**

1. Quickly triage patients out of common waiting areas and move symptomatic patients to an exam room. **Isolate suspect or confirmed cases of measles immediately into a single room with the closed door.** Provide a medical mask for the patient to wear at all times.
2. If possible, have the symptomatic patient enter and exit through a separate entrance and enter and exit the exam room directly.

3. Clinicians should consider measles in patients presenting with non-specific signs and symptoms (fever, cough, runny nose, and conjunctivitis), especially if they are unvaccinated, partially vaccinated, or immunocompromised and there is a potential exposure risk, including recent travel. For more information on **clinical presentation, testing and diagnosis, and immunization eligibility**, refer to Public Health Ontario's document, [Measles: Information for Health Care Providers](#).
4. If you are referring a patient for diagnostic testing, the receiving facility (e.g., lab or hospital emergency department) **must be notified before arrival of the patient**, to allow for proper IPAC measures.
5. Allow sufficient time for air exchange with the door closed and signage posted once the patient leaves. Clean the exam room after the two-hour period prior to placing another patient in the exam room.
6. Individuals with suspect measles should be advised to isolate while laboratory results are pending.

#### **For Patients or Staff Inquiring about Immune Status**

If a patient's immunization records are unavailable, immunization with measles-containing vaccine is preferable to ordering serological testing to determine immune status, unless vaccination with live vaccine is contraindicated.

#### **Reference**

[Measles: Information for Health Care Providers](#)

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