Measles alert

If on presentation for measles pathology collection patient has:
rash + fever + cough + runny nose
+/or red inflamed eyes

Patient may be infectious

- Place patient in separate room (door closed) immediately

Act
Implement airborne precautions including surgical mask for patient if possible.

Ensure attending staff are:
- aware
- vaccinated/immune
- using appropriate PPE.

If aware that patient will be presenting for measles pathology collection arrange to be last for the day or do home visit.

Note: Do not use isolation room for 30 minutes after the patient has vacated.
Measles remains one of the leading causes of death among young children globally.

Despite the availability of a safe and effective vaccine, an estimated 110,000 people worldwide died from measles in 2017, mostly children.

No longer considered endemic in Australia but outbreaks continue to occur.

Cases imported from other countries remain an important source of infection.

Measles is a serious viral illness that can result in:

- pneumonia
- encephalitis
- middle ear infections
- subacute sclerosing panencephalitis (SSPE)

Transmission: Airborne (respiratory spread)


Prevention: The best protection is vaccination. Two doses of measles vaccine are required at least one month apart.

Notifiable: Measles must be immediately notified to Public Health Units on clinical suspicion (Public Health Act 2005 and Public Health Regulation 2018)

Queensland Public Health Units:

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