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To: Nebraska Healthcare providers and Public Health professionals

RE: Second case of Measles identified with exposures in North Platte, NE

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A case of measles has been identified in North Platte and two additional persons are being tested due to measles-like symptoms. The West Central District Health Department and the Nebraska Department of Health and Human Services continues to investigate but no link to the confirmed case in Omaha last month has been identified. We are asking for your help to ensure early recognition, appropriate testing, and thorough epidemiologic investigation of suspected cases. It is strongly encouraged that providers contact their local health department immediately if they suspect a measles diagnosis. This is very important for public health’s ability to identify transmission and provide recommendations to affected persons.

This case reported travel to Wood River and Lincoln during the 3 weeks prior to symptoms but did not report travel outside North Platte while infectious. All known exposure locations in North Platte are listed below.

- Madison Middle School
  April 1, 2017 to April 10, 2017
- North Platte Public Transit
  April 3, 2017 to April 10, 2017
- New Life Church Youth Group
  April 5, 2017 (6:00pm – 10:30pm)
- Great Plains Health Emergency Room
  April 10, 2017 (6:00pm – 2:30am on April 11)
- Precise Medical Care
  April 11, 2017 (8:00am – 2:00pm)
- Great Plains Health Pavilion in
  Pathology Services
  April 11, 2017 (11:00am – 3:00pm)

- If you suspect your patient has measles, isolate them immediately and alert your local health department as soon as possible. The risk of measles transmission to others can be reduced if control measures are implemented quickly. For patients and providers around North Platte, West Central District Health Department can be reached at (308) 696-1201.
Consider measles in patients of any age who have a fever AND a characteristic rash. Fever can spike as high as 105°F. Measles rashes are red, blotchy and maculopapular and typically start on the hairline and face and then spread downwards to the rest of the body.

Obtain a thorough history on such patients, including: the above listed exposures or travel outside the country or contact with international travelers in the prior three weeks; and prior vaccinations for measles. Exposure to measles is defined as sharing the same air space with a person with measles (and up to 2 hours after the infected person left) during their contagious period (4 days before to 4 days after rash onset) for any period of time.

Non-immune individuals who were exposed: Healthy adults and children with only 1 documented MMR should be given MMR #2. Infants 6-11 months can be given a dose of MMR if exposed to measles. See information on the table below for more information for infants under 6 months.

Laboratory Testing: Consult the health department for more information if you are ordering a measles test.
- RT-PCR testing on a throat and urine specimen can be organized for you by the health department.
- Incubation period time from exposure to onset of symptoms is usually around 14 days (range 7-21 days)
- Establishing immunity: Information on determining if someone is immune to measles is on the following page.

Preventing measles transmission in healthcare settings

Suspected measles patients (i.e., persons with febrile rash illness) should be removed from emergency department and clinic waiting areas as soon as they are identified, placed in a private room with the door closed, and asked to wear an N95 mask, if tolerated. In hospital settings, patients with suspected measles should be placed immediately in an airborne infection (negative-pressure) isolation room if one is available and, if possible, should not be sent to other parts of the hospital for examination or testing purposes.

Other useful resources for health care professionals
- Centers for Disease Control and Prevention (CDC)/Immunization Action Coalition
  - http://www.immunize.org/askexperts/experts_mmr.asp