Consider the patient’s clinical presentation:

Does the patient have fever, rash (beginning on the face and progressing downwards), and conjunctivitis, cough, or runny nose?

If **NO**, not measles, no testing required. **STOP**

If **YES**, continue.

Consider the patient’s history:

Was the patient born before 1957 or have documented history of receiving MMR?

**Yes** to either

- patient was born before 1957 or has a history of receiving 2 doses of MMR

In the 21 days prior to symptom onset, was there any of the following:

- known exposure to infected person
- international travel
- contact with international travelers
- travel to outbreak state (refer to CDC website)
- contact with travelers from an outbreak state

If **No**: Measles unlikely, provide education

**STOP**

If **Yes**: Is there an alternate explanation for the rash? (antibiotics, strep, mono)

- **Yes**: Not measles, no testing required **STOP**
- **No**: Measles unlikely, but out of an abundance of caution, may choose to Isolate Call Collect

**No** to both

- patient was born after 1957 and does not have a history of receiving 2 doses of MMR

In the 21 days prior to symptom onset, was there any of the following:

- known exposure to infected person
- international travel
- contact with international travelers
- travel to outbreak state
- contact with travelers from an outbreak state

If **Yes to any**:

- **Isolate Call Collect**

If **No**:

- Has the patient been symptomatic for > 10 days?

- **Yes**: Measles unlikely, call your ADH Outbreak Response Staff, (501) 537-8969.

- **No** Isolate Call Collect

**ISOLATE**

Isolate the patient according to airborne precautions.

**CALL**

Call ADH Outbreak Response Staff (501) 537-8969

**COLLECT**

Collect specimens for laboratory testing.

Throat swab in Viral Transport Medium (VTM). Consult with ADH Outbreak Response Staff on how to submit to ADH Lab.