

Should I test for measles?

A Guide for Arkansas Healthcare Providers



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. 

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



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

Yes: Not measles, no testing required



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) 661-2381

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.