



TO: Physicians and other health care providers

Please distribute a copy of this information to each provider in your organization.

Questions regarding this information may be directed to the following Region IV health officers:

Dr. Rachel Wood, MD, MPH

Acting health officer Clark County Public Health, (360) 397-8412 Skamania County Community Health, (509) 427-3850 Cowlitz County Health & Human Services, (360) 414-5599 Wahkiakum County Health & Human Services, (360) 795-6207

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Deputy health officer Clark County Public Health, (360) 397-8412 Skamania County Community Health, (509) 427-3850

Alert categories:

Health Alert: conveys the highest level of importance; warrants immediate action or attention.

Health Advisory: provides important information for a specific incident or situation; may not require immediate action.

Health Update: provides updated information regarding an incident or situation; no immediate action necessary.



Recommendations for influenza, strep A rapid testing when evaluating possible measles cases



Purpose

The measles outbreak in Clark County is ongoing. Measles should be considered in the differential diagnosis of persons presenting with fever and a rash, and the Suspect Measles Case worksheet for providers (sent in previous measles alerts) is attached to this advisory for your convenience. The Suspect Measles Case worksheet is also available on the Clark County Public Health website, www.clark.wa.gov/sites/default/files/dept/files/public-health/CD/Resources/Suspect Measles Worksheet 190203.pdf.

However, Public Health is aware of multiple instances in recent weeks where patients presenting with febrile rash illnesses were tested for influenza, as well as for measles, and influenza was confirmed as the cause of the patients' illnesses.

To help you evaluate the likelihood that a patient has measles, please consider rapid testing for influenza and group A streptococcus in persons with a febrile rash illness, especially if the presentation is not consistent with the classic measles symptoms described in the attached assessment tool.

Please visit the measles investigation webpage for the latest information on case numbers and exposure sites, www.clark.wa.gov/public-health/measles-investigation. For more information about flu surveillance in Clark County, visit www.clark.wa.gov/public-health/flu.

Thank you for your partnership.

LHJ	Phone	Fax
Clark County Public Health:	(360) 397-8182	(360) 397-8080
Cowlitz County Health Department:	(360) 414-5599	(360) 425-7531
Skamania County Community Health:	(509) 427-3850	(509) 427-0188
Wahkiakum County Health and Human Services:	(360) 795-6207	(360) 795-6143



Clark County Public Health Suspect Measles Case

Probable and confirmed cases are **IMMEDIATELY** reportable to Clark County Public Health*

*FULLY COMPLETE this form for use only during the 2019 measles outbreak

	Reporting Facility:					
Evaluation Date:	Patient Name:		Patient DOB:			
Patient Address:	City:	County	y:	State:	Zip:	
(If patient is a minor) Patient Parent/Guardian Name:				Patient/Parent Phone:		
Patient MRN:	Evaluating Clinician:		Clinician Phone/Fax:			
Consider measles in	the differential diag	jnosis d	of patie	ents WITH FEVER and	RASH:	
A) What is the highest temperature recorded? N/A - Afebrile °F			Fever onset date:			
B) Does the patient have a rash?		YES	NO	IF NO RASH, DO NOT COLLECT MEASLES SPECIMENS. CONSIDER RULE OUT TESTING FOR OTHER FEBRILE ILLNESS.		
C) Rash characteristics: Rash onset date: / /						
Was the rash preceded	d by one of the	YES	NO	Measles rashes are red, maculopapular rashes that may become confluent – they typically start at hairline, then face, and spreads rapidly		
symptoms listed in (D)	-					
Did fever overlap rash	?					
Did rash start on head	or face?			down body. Rash onset typically occurs 2-4 days after symptom onset, which includes fever and at		
D) Has the patient had any of the following?				least one of the "3 Cs" (below):		
Cough				Onset date://		
Runny nose (coryza)				Onset date://		
Red eyes (conjunctiviti	s)			Onset date://		
E) Is the patient immunized? Unimmunized Unknown At least one documented MMR vaccine:			Dates of measles vaccine: #1:/ #2://			
F) Exposure to a known me	asles case?	YES	NO	Date and place of exposure):	
				Chack CCDU wake	ita fan Imaaron	
G) Travel, visit to health care facility, or other known high-risk exposure in past 21 days?				Check CCPH webs exposures		
Kilowii iligii-ilsk exposui	e iii pasi z i uays :		l	exposure :	iles.	
Measles is <u>highly suspected</u> in a fe	ebrile patient if you answer	YES to B,	at least	one item in C & D, unimmun	ized, PLUS YES in F	
IF MEASLES IS SUSPECTED 1. Mask and isolate the patien		sure roon	n when	possible).		
 Swab the posterio 	wab for rubeola PCR a or nasal passage with a D . Store specimen in refr	acron™ (or rayon	preferred respiratory speci swab and place the swab in ckup is authorized.		

3. Contact Clark County Public Health to report suspected measles case.

Serum for rubeola IgM and IgG testing:

CCPH staff will follow up with your facility to review the case and to approve testing of measles specimens. If testing is approved, CCPH will arrange specimen pickup and shipment to Washington State Public Health Lab.

Rubeloa IgM and IgG should be collected and tested by facility's regular lab mechanism, and at the discretion

Collect at least 50 ml of clean voided urine in a sterile container and store in refrigerator.

of the healthcare provider. For additional information, discuss with a CCPH representative.

or G.

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