

Region IV Public Health
Clark, Cowlitz, Skamania, Wahkiakum counties
and Cowlitz Tribe

Health Advisory

Please deliver a copy of the accompanying alert to each provider in your organization.

Thank you

Questions regarding this alert may be directed to the office of:

Rachel Wood, MD

Provisional Region IV Health Officer

Clark County Public Health
Cowlitz County Health Department
Skamania County Health Department
Wahkiakum County Department of Health and Human Services

(360) 397-8412

Please Distribute

Categories of Health Alert messages:

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

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

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

HEALTH ADVISORY

August 23, 2013



Region IV Public Health
Clark, Cowlitz, Skamania, Wahkiakum counties
and Cowlitz Tribe

TO: Physicians and Other Health Care Providers

FROM: Rachel Wood, MD Provisional Region IV Health Officer

RE: MEASLES EXPOSURE

Clark County Public Health was notified of a lab-confirmed measles in a child who attended the United States Tennis Association Pacific Northwest Junior Sectional Tournament in Beaverton, OR. Children from multiple cities in Southwest Washington also attended this event. The child was contagious from August 15-17th while visiting the Portland metro area. The window for post exposure prophylaxis has passed, so please carefully evaluate persons presenting with a febrile rash illness for measles. Secondary cases could occur through September 7th, 2013. Contact your local health department for assistance with testing of any ill exposed individuals. Please refer to the attached information sheet on how to determine immunity or susceptibility in health care workers and other exposed individuals.

There were no known exposures in Clark County. The patient is known to have visited the following sites in the Beaverton, OR area while contagious:

Thursday August 15

- 7:30-10:00 am –continental breakfast at Shilo Inn (SW Canyon Road, Beaverton, OR)
- 9:15 -1:45 pm Westview High School tennis courts (NW 185th Ave, Beaverton, OR)
- 12:00-2:30 pm—Michael's Craft Store (Evergreen Pkwy, Beaverton, OR)
- 12:30-3:00 pm Sports Authority (Evergreen Pkwy, Beaverton, OR)
- 1:15-4:00 pm Sweet Tomatoes (NW Waterhouse Ave, Beaverton, OR)
- 2:10-5:15 pm –Westview High School tennis courts (NW 185th Ave, Beaverton, OR)
- 3:30-7:30 pm West Hills Racquet & Fitness Club (SW Cedar Hills Blvd, Beaverton, OR)
- 7:00-9:45 pm –Fred Meyer (SW Walker Rd, Beaverton, OR)

Friday August 16

- 7:00-9:30 am- continental breakfast at Shilo Inn (SW Canyon Road, Beaverton, OR)
- 8:30-12:00 pm Jesuit High School tennis courts (SW Beaverton-Hillsdale Hwy, Beaverton, OR)
- 12:00-3:00 pm --West View High School tennis courts (NW 185th Ave, Beaverton, OR)
- 1:15 3:45 pm Sun Teriyaki (NW Schendel Ave, Beaverton, OR)
- 1:15 3:45 pm Best Teriyaki (SW Regatta Ln, Beaverton, OR)
- 4:00-8:30 pm --West View High School tennis courts (NW 185th Ave, Beaverton, OR)
- 7:00-9:30 pm –Fred Meyer (SW Walker Rd, Beaverton, OR)

Saturday August 17

- 7:30-10:00 am -continental breakfast at Shilo Inn (SW Canyon Road, Beaverton, OR)
- 9:30-1:00 pm -- West View High School tennis courts (NW 185th Ave, Beaverton, OR)

- 1:30-4:30 pm Portland Community College Rock Creek Campus tennis courts (NW Springville Rd, Beaverton, OR)
- 2:40-5:00 pm Baskin Robbins (SW Walker Rd, Beaverton, OR)
- 4:00-6:45 pm—Target (SW Beaverton-Hillsdale Hwy, Beaverton, OR)
- 5:30-9:00 pm -- Washington Mall—especially Footlocker, Champs, H&M, Game Stop, Apple, Pac Sun, and food court (SW Washington Square Rd, Beaverton, OR)

Clark County Public Health will notify exposed individuals by telephone when specific persons can be identified and through a media release. Since it has been greater than 6 days, vaccine and IG are no longer able to be given effectively as prophylaxis. Providers should immediately notify their local health department of any susceptible exposed person identified

Clinical Description of Measles:

Measles is characterized by a generalized maculopapular rash, fever and one or more of the following: cough, coryza or conjunctivitis. Measles has a distinct prodrome that begins with fever and malaise. Additional symptoms can be conjunctivitis, coryza (sneezing, nasal congestion, and nasal discharge), cough, photophobia and Koplik's spots (which as pathognomonic but uncommonly observed). These spots are seen as bluish-white specks on a rose-red background appearing on the buccal and labial mucosa usually opposite the molars. Temperature may exceed 40 degrees C (104 degrees F), and usually fall 2-3 days after rash onset. Rash begins on the head, often along the hairline, and spreads downward reaching the hands and feet. In severe cases, the lesions usually become confluent, especially on the face and upper body.

Lab and Sample Submission:

Persons suspected to have measles should have serum drawn and specimens collected for viral isolation (nasal wash and urine) at the time of the first health care provider visit. Instructions for collecting specimens follow:

- Serum: Collect at least 1 cc of serum. Store specimen in refrigerator and transport on ice.
- **Urine:** Collect at least 50 ml of clean voided urine in a sterile container. Store specimen in refrigerator and transport on ice.
- Nasal wash (preferred respiratory specimen): Attach a small piece of plastic tubing to a syringe. After placing about 3–5 ml of sterile saline in the nose, aspirate as much of the material as possible and add to a centrifuge tube containing viral transport medium. Store specimen in refrigerator and transport on ice. If a nasal wash cannot be performed, collect a nasopharyngeal or throat swab.
 - o **Nasopharyngeal swab:** Swab the posterior nasal passage with a Dacron[™] or rayon swab and place the swab in 2–3 ml of viral transport medium.
 - o **Throat swab:** Swab the posterior pharynx with a Dacron[™] or rayon swab and place the swab in 2–3 ml viral transport medium.

For additional information regarding collection, storage and shipping of specimens for viral isolation, see: http://www.cdc.gov/vaccines/pubs/surv-manual/chpt22-lab-support.htm. All specimens sent to PHL must be accompanied by a completed PHL virology form:

http://www.doh.wa.gov/EHSPHL/PHL/Forms/SerVirHIV.pdf. Along with the patient and submitter names, be sure to include the date of collection, date of rash onset, and immunization history (if known) on the form.

Please call your local health jurisdiction to report suspected or confirmed measles. To report notifiable conditions or if you have questions, please call:

- Clark County Public Health: (360) 397-8182.
- Cowlitz County Health Department: (360) 414-5599
- Skamania County Community Health: (509) 427-3850
- Wahkiakum County Health and Human Services (360) 795-6207

CLARK COUNTY PUBLIC HEALTH MEASLES IMMUNITY AND APPROPRIATE TREATMENT

The definition of immunity is:

- 2 documented doses of MMR vaccine at least 28 days apart or
- Documented history of health care provider-diagnosed measles or
- Serology showing immunity to measles
- Born before January 1, 1957 (except health care workers see below)

<u>Special consideration – exposed susceptible health care workers:</u>

- If an exposed health care worker has had only one documented dose of measles-containing vaccine, give an additional dose of vaccine. If the second dose can be given with 72 hours of the exposure, consider the person immune. If vaccine cannot be administered within 72 hours, send a specimen for measles IgG serology and consider the person immune if the test is positive for measles specific IgG. Exclude the employee until serology confirmation.
- If the exposed health care worker was born on or after January 1, 1957 and has no
 documented evidence of immunity, a dose of measles-containing vaccine should be given. At
 the same time, a serologic test for measles IgG should be done to verify immunity. If immunity
 to measles is not serologically confirmed, the person must be furloughed from day 5 after
 exposure to day 21 after the last exposure.
- If the exposed healthcare worker was born before January 1, 1957 and has no documented evidence of immunity, a serologic test for measles IgG should be considered to verify immunity. If immunity is not confirmed the person must be furloughed from day 5 after the first exposure to day 21 after the last exposure.
- If the exposed healthcare worker has had two documented doses of measles vaccine given on or after the first birthday and at least 28 days apart, consider the person immune. For further information on measles, go to the Washington Department of Health website at: http://www.doh.wa.gov/notify