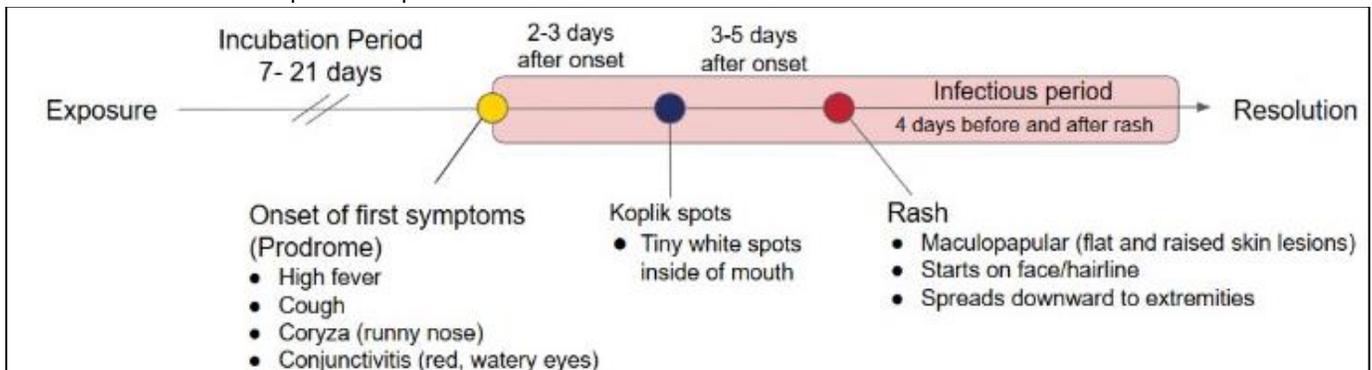


Measles Toolkit (updated: 12/11/25)

When to suspect measles:

1. Clinically compatible illness
 - Cough, coryza, or conjunctivitis
 - Fever $\geq 100.4^{\circ}\text{F}$
 - Generalized, maculopapular rash (see timeline below)
 - Not present during the prodromal phase
 - Begins on face, then spreads to trunk and extremities
 - Fades in order it appears
2. **AND** an accompanying epidemiological risk factor
 - Known or suspected measles exposure
 - Recent international travel or travel to an area with ongoing measles outbreak
 - No prior receipt of MMR vaccine



Source: <https://cdphe.colorado.gov/dcphr/communicable-disease-manual/measles>

Immediate actions to take once measles is suspected:

1. Mask

- Mask patient and visitors with surgical mask if 2 years of age or older
- Mask self with fit-tested N95 mask or PAPR

2. Isolate

- Use Airborne Infection Isolation Room (AIIR) if available onsite
- Keep AIIR door closed, post yellow Airborne Isolation sign
- Turn on negative pressure and verify monitor shows at least -2.5 Pa or more negative
- If no AIIR available onsite - Move the patient to a private room and keep the door closed
- Individuals susceptible to measles should not enter room

3. Notify the Public Health Department

- Immediate notification must occur **24 hours a day** (Class A Reportable Disease, OAC Chapter 3701-3)
 - **Franklin County residents:** call **614-525-8888** and follow prompts for reporting Class A disease
 - **Residents of other counties:** Contact the local public health department where the patient lives
 - Delaware County: 740-203-2042 (Business hours), 740-815-6518 (after hours)
 - Union County: 937-645-2062 (Business hours), 937-645-4110 (after hours)

4. Send appropriate testing

- The health department will typically reserve testing for those patients presenting with a rash

- Refer to the Nationwide Children’s [Laboratory Services Test Directory](#) for “Measles Virus by PCR with Reflex” testing guidance (Test code: MEA).
 - Collect nasopharyngeal (preferred) or throat swab **(and place in Viral Transport Media)** for PCR and whole blood specimens for serology.
 - **Note:** *An ODH submission form is no longer required at this time*
- If unable to collect specimens onsite, refer to NCH’s Measles Testing Referral Process to coordinate testing

5. Mitigate Exposures

- Provide guidance to isolate at home until cleared by the health department
- Call ahead if referring a patient to another healthcare facility. If referring to a Nationwide Children’s facility, please contact the Physician Direct Connect line at (877) 355-0221 to coordinate
- After patient has been discharged, close patient room for 2 hours due to airborne transmission

Additional Resources

[CDC Measles for Healthcare Professionals](#)

[ODH Measles Resources](#)

Examples of Characteristic Rash

Images: CDC

