

# Health Alert Network

# **Tri-County Health Department**

Serving Adams, Arapahoe and Douglas Counties
Phone 303/220-9200 • Fax 303/741-4173 • www.tchd.org
Follow us on Twitter @TCHDHealth
John M. Douglas, Jr., M.D. Executive Director

The pages that follow contain information critical to protecting the health of your patients and the citizens of Colorado.

# **HAN ALERT**

Number of pages including cover: 4

Subject: Alert - Measles Cases in the Denver Metro Area - December 16, 2019

Message ID: 12/16/2019 12:00:00 PM Recipients: HAN Community Members.

From: TRI-COUNTY HEALTH DEPARTMENT Adams, Arapahoe and Douglas County, Colorado

Recipient Instructions: Tri-County Health Department is forwarding you the attached HAN. You may have already received this broadcast if you are on the CDPHE distribution list, however, we wanted to ensure you did not miss this important information. No response is required.

You have received this message based upon the information contained within our Health Alert Network Notification System. If you have a different or additional e-mail or fax address that you would like us to use, or if you have additional questions, call 720-200-1477.

## **Categories of Health Alert Network Messages:**

**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; unlikely to require immediate action.

**Info Service/Public Health Brief:** Provides general information that is not necessarily considered to be of an emergent nature.

You may download a copy of this HAN from the TCHD website at http://www.tchd.org/259/Health-Alert-Network



Dedicated to protecting and improving the health and environment of the people of Colorado

HEALTH ALERT NETWORK BROADCAST

MESSAGE ID: 12162019 11:15

FROM: CO-CDPHE

SUBJECT: HAN Alert - Measles Cases in the Denver Metropolitan Area

RECIPIENTS: Local Public Health Agencies / IPs / Clinical Labs / EDs / ID Physicians

RECIPIENT INSTRUCTIONS: Local Public Health Agencies - please forward to healthcare providers

**HEALTH ALERT** | Measles Cases in the Denver Metropolitan Area | Dec. 16 2019

Health care providers: Please distribute widely in your office

## **Key points**

- Three unvaccinated children who are visiting Colorado from another state tested positive for measles after traveling to a country with an ongoing measles outbreak. They are currently hospitalized at Children's Hospital Colorado (CHCO).
- While infectious, they visited Denver International Airport, and CHCO on the Anschutz Campus in Aurora, CO. Please see below for specific dates and times.
- All individuals traveling on the plane with these children or who visited CHCO during this time frame and are believed to be at risk are being contacted directly by public health.
- Providers with patients reporting exposures should contact public health for further guidance.
- Individuals being seen with a fever and rash should be assessed for measles and asked about
  visiting any of these locations, especially if they are not vaccinated. Immediately report all
  suspected measles cases to your local health department or CDPHE at 303-692-2700, or after-hours
  at 303-370-9395. Do not wait until laboratory results are available before reporting suspect
  measles cases.
- Children younger than 5 years and adults older than 20 years are more likely to suffer from measles complications. Complications can include ear infections (that can lead to permanent hearing loss), diarrhea, pneumonia, and more rarely, encephalitis.

## **Background information**

Measles is a highly contagious viral disease that causes illness characterized by fever, rash, and the triad of cough, coryza, and conjunctivitis. The incubation period for measles ranges from 7 to 21 days. Individuals who have no measles immunity and were potentially exposed at DIA or CHCO could develop symptoms until January 2, 2020, which is 21 days after the patients were infectious without being under proper isolation precautions.

Tri-County Health Department and CHCO are contacting parents of patients who had potential exposures in the CHCO Emergency Department. However, the measles virus is very contagious and unidentified exposures may have occurred.

People visiting the following locations on the following dates may have been exposed to measles (times are approximate):

Denver International Airport (DIA) A terminal, train to baggage claim, west baggage claim, and level 4 passenger pick up areas

Dec. 11, 2019

1:15 p.m. until 5:45 p.m.

Children's Hospital Colorado (CHCO) - Anschutz Campus Emergency Department 13123 E 16th Ave, Aurora, CO 80045

Dec.12, 2019

1 p.m. until 7:30 p.m.

Patients and parents/guardians with potential exposures at the CHCO Emergency Department during this time are being notified directly. There is little to no risk to other Emergency Department patients. Public health officials do not consider patients or visitors to other areas of CHCO to have been exposed to measles.

The patients also visited CHCO Anschutz Campus Emergency Department on December 14, 2019, but hospital staff immediately put facemasks on the patients and put them in a negative-pressure room. Public health officials do not consider patients or visitors in the Emergency Department or other areas of CHCO on the 14th to have been exposed to measles.

## Recommendations / guidance

The diagnosis of measles should be considered in any person with a generalized maculopapular rash and a fever, especially if accompanied by cough, coryza or conjunctivitis (immunocompromised patients may exhibit an atypical rash or no rash).

#### Measles symptoms

Prodrome Rash

Fever (usually ≥ 101 degrees F)

Usually begins on face 2-4 days after prodrome onset

Cough Typically spreads downward/outward to hands and feet

Coryza (runny nose) Typically is a maculopapular rash

Conjunctivitis Lasts at least 3 days

#### **TESTING**

- Collect a nasal wash, throat (oropharyngeal) or NP (nasopharyngeal) swab for measles PCR testing. Also draw a serum specimen (red top tube or separator tube) for measles IgM testing. Urine can also be tested for measles via PCR.
- After consultation with CDPHE Communicable Disease Branch staff at 303-692-2700, specimens from highly suspect cases may be referred to the CDPHE laboratory for testing. Specimen collection instructions can be found on this page:
  - O <a href="https://www.colorado.gov/cdphe/measles">https://www.colorado.gov/cdphe/measles</a>

## INFECTION CONTROL

Suspected measles patients (i.e., persons with fever and rash) should be removed from emergency department and clinic waiting areas as soon as they are identified.

In HOSPITAL settings, patients with suspected measles should be placed immediately in an airborne infection (negative-pressure) isolation room (if available). If possible, they should not be sent to other parts of the hospital for examination or testing procedures. The exam room should not be used for two hours after the suspect measles patient leaves.

In CLINIC settings, patients with suspected measles should be quickly placed in a private room with the door closed and asked to wear a surgical mask, if tolerated. The exam room should not be used for two hours after the suspect measles patient leaves.

Only health care providers with presumptive evidence of measles immunity should have contact with the patient and they should adhere to Airborne Precautions.

All healthcare personnel should have presumptive evidence of measles immunity documented and on file at their work location. Current recommendations state that for healthcare personnel, presumptive evidence of measles immunity includes two doses of MMR vaccine, serologic evidence of immunity to measles, or physician-diagnosed measles (during a measles outbreak, there may be additional vaccination recommendations).

#### VACCINATION

MMR vaccine is routinely recommended for all children. The first dose of MMR vaccine should be given at 12-15 months of age. A second dose is recommended at 4-6 years of age but can be given earlier, provided the interval between the 1st and 2nd doses is at least 28 days.

Infants 6-11 months of age who plan to travel internationally should receive a dose of MMR vaccine prior to travel. Two subsequent doses of MMR still are required on or after the 1st birthday in infants who receive their first dose prior to 12 months of age.

People born during or after 1957 should have documentation of at least one dose of MMR or other evidence of measles immunity.

#### For more information

- For more information, physicians, laboratories, and public health partners should contact Meghan Barnes or Emily Spence-Davizon, at 303-692-2700.
- For general questions from the public, CO-HELP is available at 877-462-2911.

