



EMS Information Bulletin 2019-03

DATE: May 14, 2019

SUBJECT: Measles Guidance for EMS Providers

TO: PA EMS Agencies

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The Pennsylvania Department of Health (DOH) recently issued a Health Advisory through the Pennsylvania Health Alert Network (PA-HAN) regarding recent measles cases and exposure. Specifically, the alert spoke to the five cases of measles identified in Allegheny County.

One exposure occurred in a hospital emergency department (ED). Everyone who navigated through the ED before the measles patient was identified and isolated was exposed to this disease, including several Emergency Medical Services (EMS) Providers. Due to insufficient records or knowledge showing immunity to measles, at least one EMS agency could not maintain daily staffing requirements.

We are facing continued measles outbreaks. The above event should serve as a reminder for all of us that EMS providers play an important role in the prevention and control of infections. EMS providers are at the front line of medical care and have a **high risk of exposure** to patients with known or unknown infectious diseases or germs.

Therefore, all EMS Agencies and personnel should perform a review of current infection control policies and procedures and reinforce routine infection prevention practices including standard precautions. DOH also provides the following reminders and recommendation:

1. Vaccination

All EMS providers should have documented evidence of immunity to measles. EMS Agencies may want to review their current policies regarding documentation of immunity for staff, including volunteers. This information should be documented and readily available at the work location.

Presumptive Evidence of Immunity:

Health care workers presumed to be immune to measles are those:

- Who have documentation showing they received two doses of live measles-containing vaccine (MMR); and
- Who have documentation of a positive measles IgG titer.

2. Protective Equipment and Procedures

All EMS Providers should use standard precautions during all patient encounters. Measles is a highly contagious viral infection spread through the airborne route so to minimize the risk, the following is recommended:

- Only those who are known to be immune should approach patients who may have measles;
- First responders should wear particulate respirators (e.g. N-95). Please note that particulate respirators should only be used as part of a comprehensive respiratory protection program that includes appropriate screening, training and fit-testing; and
- Patients should wear a surgical mask, if not medically contraindicated.

3. Notification to Receiving Facility

Receiving facilities must be notified **BEFORE** a known or suspected measles patient arrives, so appropriate infection prevention procedures can be implemented. In health care settings, patients with suspected measles should be placed immediately in an airborne infection (negative-pressure) isolation room if one is available and if possible, should not be sent to other parts of the hospital for examination or testing purposes.

4. Transportation

Because measles virus can contaminate surfaces or hang in the air for up to two hours, ambulances and transport vehicles should be taken out of service for a minimum of two hours after transporting a patient with known or suspected measles. Routine cleaning of the transport vehicle should be done.

5. Report and Evaluation of Exposure

EMS Providers who are potentially exposed to measles should consult with health care and public health professionals. Health care personnel should evaluate risk and recommend and/or provide appropriate post-exposure prophylaxis when indicated (i.e., one dose of MMR within 72 hours of exposure for EMS Providers with no proof of immunity). In consultation with public health authorities, EMS Providers who are exposed and do not have proof of immunity may need to be ineligible to work from day 5 from first exposure to day 21 from last exposure.

Personnel who develop symptoms consistent with measles, including fever, runny nose, cough, “pink eye,” and followed by a rash that spreads over the body should seek medical attention (calling ahead before going to the medical facility so proper precautions can be taken to reduce potential exposure). All suspected cases of measles must be reported immediately to the local health department responsible for the municipality in which the patient resides.

Resources:

2007 Guideline for Isolation Precautions: Preventing Transmission of Infectious Agents in Healthcare Settings:

<https://www.cdc.gov/infectioncontrol/guidelines/isolation/index.html>

Immunization of Health-Care Personnel:

<http://www.cdc.gov/mmwr/pdf/rr/rr6007.pdf>

Centers for Disease Control and Prevention general measles information:

<http://www.cdc.gov/measles/index.html>

EMS Infectious Disease Playbook - Intended for the entire EMS community. It contains information tailored to emergency medical dispatchers and both ambulance and first responders.

<https://www.ems.gov/pdf/ASPR-EMS-Infectious-Disease-Playbook-June-2017.pdf>