



Westchester Regional EMS Council

R E M A C A D V I S O R Y

2019 – 01: Measles and Infectious Disease

Issued: April 12, 2019

Effective Date: Current

The Westchester County Health Department has confirmed a small number of measles cases in Westchester County.

The WREMAC would like to provide the following information and guidance for First Responders, in the County, when handling a patient with a suspected case of measles:

Background:

Measles is a highly contagious RNA virus that affects both children and adults. It has a transmission rate of 90% for unvaccinated individuals, 10% for individuals with 1 of 2 MMR vaccine injections and <1% for fully vaccinated individuals. Measles has an incubation period of 7-21 days and a contagious period primarily 4 days prior to and 4 days after a rash appears.

According to the County Health Department the MMR vaccination rate in Westchester County is >90%. The County Health Department is currently offering free vaccinations to the small percentage of the population that are unvaccinated. (See attached letter for details).

Specific signs and symptoms of measles include: Cough, Runny Nose, Conjunctivitis, High Fever, Anorexia, Rash (late sign), Koplik Spots (specific to measles, whitish-grey spots on the buccal membrane).

Screening:

Part of providing quality patient care is performing a thorough clinical assessment and detailed patient history including vaccinations, exposure, travel, etc.

Always be on the lookout for presentation of any infectious disease (coughs, fevers, rash, etc.).

-If you are treating a the patient with a rash, along with a fever or a cough;

-And they, or someone in their home has traveled to or come in contact with someone from an area that has been identified as high risk within the past 21 days;

-That patient should be considered a Person Under Investigation for measles.



Koplic Spots



Measles Rash (3 days)

PPE and Treatment:

A person with a suspected case of measles should be treated similarly to all other potential infectious diseases. This includes:

- PPE for both the crew, the patient, and family traveling in the ambulance. (N95 for crew and surgical masks for others)
- Limit medical interventions to those clinically necessary.
- Utilize exhaust fan in patient compartment.
- Early notification of the hospital, and confirm the hospital is prepared to receive the patient prior to exiting the ambulance.
- Through decontamination of the ambulance. (If suspected measles it is recommended the vehicle remains out of service for a minimum of 2 hours)

Note: Medical Control can always be consulted if provider(s) are uncertain of the patient's condition or additional required actions.

Issued by:

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