## Letter Template: Clinician Alert for Measles Outbreak Notification

Please note that this template is provided as a general guide and should be tailored to meet the specific requirements and regulations of your local health department or relevant authorities. It is crucial that the content and instructions align with current guidelines and legal standards established by your jurisdiction.

[Department of Health] [Address] [City, State, Zip Code] [Date]

### **Clinician Alert: Measles Outbreak Notification**

Dear Colleague:

This letter provides an update on measles with key actions for clinicians.

[Department of Health] has identified a recent outbreak of measles. As of [date], [number of confirmed cases] confirmed cases have been reported in [location(s)], with concerns of further transmission. To protect the community and prevent further transmission, 1) ensure your patients are vaccinated 2) document measles vaccination status for staff and offer vaccination to those without immunity, 3) stay alert for measles symptoms, and 4) contact the health department as soon as measles is suspected.

[If implementing an accelerated vaccination schedule/targeted vaccination campaign/mass vaccination campaign, add: In response to the current outbreak, (Department of Health) is implementing an (insert public health action, eg, accelerated vaccination campaign, targeted vaccination campaign).]

#### **Key Outbreak Details**

- Number of Confirmed Cases: [Number] as of [date]
- Locations of Potential Exposure: [List any specific locations where exposure may have occurred, such as schools, hospitals, public transportation, etc.]
- Date Range of Potential Exposure: [Specify the date(s) during which exposure may have occurred]

### **Information & Recommendations**

- **Symptoms:** Typically include high fever, cough, runny nose, red and watery eyes, and rash that usually begins a few days after the onset of symptoms.
- **Diagnosis**: Report suspected cases of measles to [Department of Health] immediately and while the patient is still present, if possible. Do not wait for diagnostic testing results before reporting.

This template was developed by the Center for Outbreak Response Innovation and adapted from Virginia Department of Health. Updated August 26, 2024

- **Testing**: Consult with [Department of Health] when considering measles testing for patients presenting with symptoms consistent with measles. PCR testing is the preferred test for patients with acute symptoms.
- **Isolation and Quarantine:** Follow isolation and quarantine protocols per [Department of Health] guidance.
- **Vaccination:** Encourage measles vaccination for susceptible individuals, particularly those who have not received 2 doses of the measles, mumps, and rubella (MMR) vaccine. When planning for vaccinations at your clinic, use the following [specify either routine/accelerated/ targeted] schedule:

[Note: Examples of routine, accelerated, and targeted vaccination schedules are listed below. CDC guidance and considerations for an accelerated or targeted vaccination schedule are available <u>here</u>. Accelerated or targeted vaccination schedules can be particularly helpful in controlling outbreaks in communities with ongoing transmission but should be implemented with careful consideration of the associated risks.]

# [Routine Vaccination Schedule for Jurisdiction]

- Children: Children should receive a first dose of MMR or MMRV vaccine (which protects against measles, mumps, rubella, and varicella [chickenpox]) at 12–15 months of age and a second dose at 4–6 years of age. Children can receive the second dose earlier if it is at least 28 days after the first dose.
- Adults: Adults without presumptive evidence of immunity should get at least 1 dose of MMR vaccine. Certain adults may need 2 doses administered 28 days apart, including international travelers, healthcare personnel, and students at post-high school educational institutions.
- International travelers: Anyone 6 months of age and older traveling internationally should be protected against measles.
  - Infants: Those 6–11 months should receive 1 dose of MMR vaccine; infants who get 1 dose of MMR vaccine before their first birthday should get 2 more doses (1 dose at 12–15 months of age and another dose at least 28 days later).
  - Children: Those 12 months of age and older should receive 2 doses of MMR vaccine, separated by at least 28 days.

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- Teenagers and Adults: Those who do not have presumptive evidence of immunity against measles should get 2 doses of MMR vaccine separated by at least 28 days.
- Healthcare personnel: Healthcare personnel should have documented presumptive evidence of immunity, according to the recommendations of the Advisory Committee on Immunization Practices. Healthcare personnel without evidence of immunity should get 2 doses of MMR vaccine, separated by at least 28 days.

#### [Accelerated Vaccination Schedule

- [Note: the following is based on the <u>Davis-Monthan Airforce Base Outbreak</u> <u>Response</u>] Due to the current outbreak in [location/congregate setting name] the [Department of Health] is implementing an accelerated MMR vaccination schedule. Beginning immediately, the [Department of Health] recommends the following:
  - Children 6 to 12 months of age should receive their first dose of MMR immediately. This is an accelerated schedule is being implemented temporarily to provide additional protection during the current outbreak.
  - Children 13 to 15 months of age who have not received their first dose of MMR as part of their routine vaccination schedule should do so immediately. Children should normally be vaccinated for MMR as soon as possible after their first birthday; this is especially important during the current outbreak.
  - Children 4 to 6 years of age who have no received their second dose of vaccine as part of their routine vaccination schedule should do so immediately. Children should receive their second dose of MMR as soon as possible after their fourth birthday; this is especially important during the current outbreak.
  - Children who are 12 months or older and have received their first dose of MMR by receive a second dose of MMR early if the doses are separated by at least 28 days. This is an accelerated schedule is being implemented temporarily to provide additional protection during the current outbreak.
  - Individuals without evidence of immunity should receive at least one dose of MMR vaccine. As part of routine CDC recommendations, healthcare providers without evidence of immunity should receive both doses of MMR vaccine, separated by 28 days.

### [Targeted Vaccination Schedule]

 [Note: the following is based on the <u>Chicago 2024 response</u>.] Due to the current outbreak in [location/congregate setting name] the [Department of Health] is conducting a targeted mass vaccination campaign for nonpregnant

This template was developed by the Center for Outbreak Response Innovation and adapted from Virginia Department of Health. Updated August 26, 2024 residents ages 6 months and older who do not have documentation of previous measles vaccination and residents aged 1 year and older who received a first vaccine dose at least 28 days earlier who may have been exposed to measles at *[location/congregate setting name]*.

- **Treatment:** There is no specific antiviral therapy for measles. Medical care is supportive and aimed at relieving symptoms and addressing complications. For severe measles cases in children, an age-appropriate vitamin A dose should be administered immediately and repeated the next day. More information on dosing is available from the <u>Centers for Disease Control and Prevention</u>.
- **Prevention:** If you suspect a patient has been exposed to measles, contact the *[Department of Health]*. If they lack immunity, they may benefit from MMR vaccination as post exposure prophylaxis (PEP) or immunoglobulin (IG), if the exposure took place within 3 to 6 days.
- Infection Control: Adhere to standard and airborne precautions for patients with known or suspected measles. Ensure all staff have presumptive evidence of immunity from measles.

Please remain vigilant for patients presenting with symptoms suggestive of measles. To report any suspected cases or for further information or assistance, please contact [Department of Health contact information].

Thank you for helping to control the spread of measles in our community.

Sincerely,

[Your Name] [Title] [Department of Health]