



NEW YORK CITY DEPARTMENT OF
HEALTH AND MENTAL HYGIENE
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Commissioner

March 7, 2014

ALERT # 7: Update on Measles Outbreak in New York City

- 1) The number of measles cases has increased from six to 16.**
- 2) Most cases reside in Northern Manhattan.**
- 3) Ensure procedures are in place to identify patients presenting with fever and rash so they are immediately placed in airborne precautions.**
- 4) If you suspect measles, even if you do not have laboratory confirmation, obtain specimens and report the case immediately to the Health Department.**
- 5) Ensure that all patients and health care workers are up to date with measles-mumps-rubella (MMR) vaccine.**

**Distribute to All Primary Care, Infectious Disease, Emergency
Medicine, Internal Medicine, Pediatrics, Family Medicine, Laboratory
Medicine, and Infection Control Staff**

Dear Colleagues,

This is an update to Health Alert #4 on Measles sent on February 24, 2014 and available at http://dohmport/sites/NYCHAN/Lists/AlertUpdateAdvisoryDocuments/HAN_Measles.pdf. The number of confirmed measles cases has increased from 6 to 16 since February 5, 2014 with ongoing transmission. The majority of recent cases reside in Northern Manhattan. Two cases were in Bronx residents. Four cases have been hospitalized. Cases include 9 children and 7 adults. Among the children, 4 were aged <1 year and, therefore, too young to have been vaccinated; three were aged 13 months to 15 months and two were unvaccinated due to parental refusal. The 7 adults ranged in age from 22 years to 63 years. Among the adults, 5 thought that they had been vaccinated, but did not have their vaccination records for documentation, and 2 cases had previously received 2 doses of MMR vaccine.

Delays in considering the diagnosis of measles and isolating suspect cases has resulted in several hundred children and adults being exposed in New York City. Providers should always consider measles in a patient with generalized rash and fever, and should immediately place these patients in airborne isolation. If a negative pressure room is not available, place the suspect case in an exam room with a mask, and do not use that room for 2 hours after the patient has left. Clinics, emergency departments, and urgent care centers should review procedures to ensure that all front office, registration, and triage staff ask every person entering the facility about fever and rash. Ensure signage is clearly visible instructing patients with fever and rash to immediately notify facility staff. Anyone with fever and a rash should immediately be given a mask and placed in isolation. Suspected cases of measles should be reported immediately to the Department of Health and Mental Hygiene (DOHMH) at 866-692-3641. Do not wait for laboratory confirmation to report.

DOHMH recommends that pediatric-care providers in the affected zip codes (10034, 10040, 10033, 10032, 10451, 10453) actively identify all children in their practice who are aged 12 months and older, who reside in these zip codes, and who have not received their first dose of MMR. Providers should contact them to come in for vaccination now. Children presenting for care who have already received their first dose should be instructed to receive their second dose now rather than wait until age 4 years, as long as 28 days has passed since the last live virus vaccine was administered. This dose will be considered valid for school entry. Providers enrolled in the Vaccines for Children Program are able to order additional MMR vaccine, if needed.

Please refer to the February 24th alert for additional details on clinical presentation, transmission and infection control, reporting, laboratory testing, post-exposure prophylaxis, evidence of immunity, travel recommendations and treatment.

Please call DOHMH at 866-692-3641 if you have questions. To report a suspect measles case as part of this outbreak, call 347-396-2402 during regular business hours; after hours, call 866-692-3641. As always, your cooperation is appreciated.

Sincerely,

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