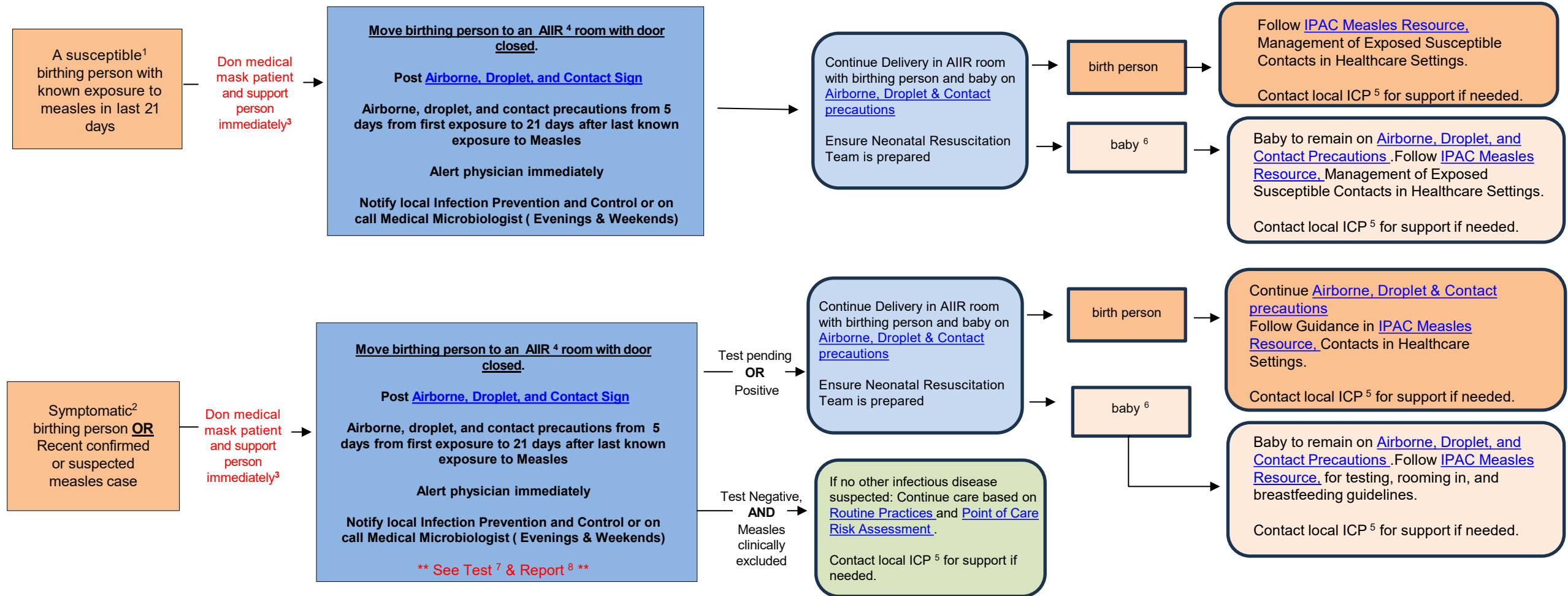


Perinatal Measles

IPAC Management and Additional Precautions Recommendation



1) Susceptible if:

- NO laboratory evidence of prior measles infection with onset greater than 14 days ago.
- NO documented 2 doses of measles containing vaccine, given at appropriate intervals, on or after one year of age.
- NO serological proof of immunity (reactive or positive measles IgG antibody).

2) Symptoms of Measles: Fever ($\geq 38.3^{\circ}\text{C}$) and cough, runny nose (coryza) or conjunctivitis, followed by generalized maculopapular rash appearing 3-7 days after symptom onset. Refer to [IPAC Measles Resource](#) for additional signs and symptoms.

3) Support person Guidelines: Requires N95 respirator, glove, gowns and eye protection as outlined in [Airborne, Droplet and Contact Precautions](#).

4) Airborne Infection Isolation Room. (AIIR): If no AIIR, see [Management of Patient Requiring Airborne Isolation IN THE ABSENCE of AIIRs](#).

5) Infection Control Professional (ICP) : Monday – Friday 08:00-16:00 contact local preventionist. [IPAC Contact List](#) for weekends, and statutory holidays refer to [IPAC Weekends and Statutory holiday coverage](#)

6) IPAC Guidance on baby: [IPAC Measles Resource](#) provides guidance for additional precautions, testing, rooming in, and breastfeeding for baby.

7) Test: Physician to assess birthing person for clinical signs of measles and risk factors (see point 2) . Physician to order: Measles PCR on urine AND nasopharyngeal swab specimens AND Measles IgM & IgG Serology

8) Report: If clinical signs highly suspicious for measles and risk factors present, physician to immediately phone CD Unit at 1-866-778-7736 (M-F, 8:30-16:30) or On-call Medical Health Officer (MHO) 1-866-457-5648 (evenings & weekends) to assess likelihood of measles case