

Measles Guidance for Schools

Measles in a school can be serious and disruptive. The Centers for Disease Control and Prevention recommends that everyone be vaccinated against measles, according to their age and health status. Schools follow their state and local regulations. Additionally, schools should:

- Know the signs and symptoms of measles.
 - Refer to Measles Fact Sheet and Guidelines (separate document).
- Ensure students are vaccinated with the MMR vaccine or have a legal exemption on file.
- Save immunization and exemption records for all students and ensure they are entered into KSWebIZ. Make sure these records are current and easy to find.
- Encourage staff to confirm they have received the MMR vaccine or have immunity to measles.
 - Documentation of MMR vaccination (at least one dose), or
 - Lab confirmation of immunity (through a titer).

Who should be vaccinated for measles

- Infants 6mo-12mo traveling outside the United States may receive 1 dose of MMR, which will not count towards the 2-dose series.
- Children ages 1-3 = 1 dose
 - If children are 2 years or older they can get their second dose.
- Students ages 4+ = 2 doses
- Most adults = 1 dose
 - Exceptions:
 - Healthcare providers, international travelers, and international students need 2 doses of MMR.

- Measles doses administered between 1957 and 1967 are considered invalid and must be repeated.
 - 2 doses administered 28 days apart
- Inform unvaccinated staff and families of unvaccinated children that they may need to stay home for up to 21 days each time they are potentially exposed to measles.

Steps to take if there has been a suspect measles case at the school:

- Report suspected measles cases (refer to Measles Fact Sheet and Guidelines - separate document) to Lawrence-Douglas County Public Health at **785-856-7361 or 785-856-3382** or the KDHE Epi Hotline at **1-877-427-7317**.
 - All suspect measles cases are **required** to be reported **within 4 hours**.
- Review attendance records for all children or staff that attended child care or school during the time the person with measles was at child care or school.
- Review visitor log for all volunteers or organizations that provide student support that were onsite during the time the person with measles was at child care or school.
- Be prepared to provide LDCPH or KDHE with contact and vaccine information for all exposed persons:
 - Student/staff/visitor/volunteer/etc. first and last name
 - Address
 - Date of birth
 - Phone number
 - MMR vaccination date/s
- Distribute the LDCPH provided measles exposure notification letter to families of children, staff, and volunteers.

- Enforce LDCPH isolation requirements for exposed students and staff who do not have evidence of measles immunity.

Post-exposure

- If unvaccinated, partially vaccinated, or immunity unknown, persons should:
 - Within 72 hours of exposure, receive a dose of MMR vaccine as PEP (post-exposure prophylaxis), to prevent disease. Children 6 months to 12 months of age may be given one dose of MMR if exposure occurred within 72 hours.
 - Speak with your provider about receiving immunoglobulin (Ig) within 6 days of exposure, to prevent or lessen the severity of measles.
- If vaccinated, monitor symptoms. No isolation required.

Children and staff exposed to measles and not vaccinated should be excluded from child care and school

- They must stay home starting 7 days after first exposure through 21 days after the last exposure if they do not receive MMR vaccine within 72 hours of exposure.
- Isolation is required.
- Isolating greatly reduces the risk that the disease will spread to others who are unprotected, such as infants and pregnant women.

How Public Health determines who will be excluded from a childcare facility or school

When a case of measles is confirmed in a childcare facility or school, LDCPH or KDHE investigates and confirms when the infected person attended the childcare facility or school.

Determining who will be excluded from a childcare facility or school

Generally, it is not necessary to close childcare facilities or schools during a measles outbreak. However, it may be necessary to close a childcare facility or school if there are not enough providers/teachers or enough students to safely and effectively operate. This decision should be made by the facility or school.

People at highest risk from exposure to measles

- Those who are unvaccinated
- Anyone who is pregnant
- Infants under six months of age
- Those with weakened immune systems

There is no specific treatment for measles. Vaccination is the best protection to prevent catching the disease.

- The following counts as evidence of immunity:
 - Birthday before 1957
 - People born before the introduction of measles vaccine probably had measles virus.
 - Documented vaccinations
 - Record of a measles vaccination:
 - Children ages 1-3 = 1 dose
 - If children are 2 years or older they can get their second dose.
 - Students ages 4+ = 2 doses
 - Most adults = 1 dose
 - Exceptions:
 - Healthcare providers, international travelers, and international students need 2 doses of MMR.
 - Measles doses administered between 1957 and 1967 are considered invalid and must be repeated.
 - 2 doses administered 28 days apart