



MEASLES GUIDANCE & RECOMMENDATIONS - SCHOOLS K-12

March 17, 2025

BACKGROUND:

The states of Texas and New Mexico are experiencing a Measles outbreak in the South Plains region (Far West Texas) and east of New Mexico in Lea County. The number of confirmed measles cases continues to grow and about 20% of such cases have required hospitalization and there have been 2 deaths reported so far. Most of the affected individuals have not been vaccinated against Measles, or their immunization status is unknown.

MEASLES KEY FACTS

Measles is a highly contagious viral illness that typically begins with fever, cough, coryza (runny nose), and conjunctivitis (pink eye), followed by a characteristic rash. Measles can cause severe health complications, including pneumonia, encephalitis (inflammation of the brain), and death. The virus is transmitted by direct contact with infectious droplets or by airborne spread when an infected person breathes, coughs, or sneezes. Measles virus can remain infectious in the air and on surfaces for up to 2 hours after an infected person leaves an area. Infected people are contagious from 4 days before the rash starts through 4 days afterward. The incubation period for measles, from exposure to fever, is usually about 7–10 days, and from exposure to rash onset is usually about 10–14 days (with a range of 7 to 21 days).

A complete immunization schedule with 2 doses of Measles-Mumps-Rubella (MMR) vaccine is 97% effective and confers appropriate long-lasting immunity against Measles. People considered high risk for Measles infection are infants <12 mo of age, pregnant women and individuals who are severely immunosuppressed.

MMR Vaccination Schedule:

1st Dose: 12-15 months of age

2nd Dose: 4-6 years of age

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STEPS TO TAKE BEFORE A MEASLES CASE:

- Identify all students claiming a vaccination exemption
- Identify all students with unknown* vaccination status
- Identify and notify parents of any students who are not up to date on MMR vaccination schedule (having 2 doses of MMR vaccine)
- Have Personal Protective Equipment (PPE) available for evaluation of any suspect Measles cases
- Review donning and doffing of PPE procedure
- Identify a well-ventilated space/room for isolation of suspect cases
- Disseminate and provide Measles information materials to parents and school staff

WHAT TO DO IF THERE IS A SUSPECT MEASLES CASE:

Consider measles in students with:

- Fever ≥101°F (38.3°C) **AND**
- RASH starting at the hairline and spreading downward.
- With also cough, runny nose, or conjunctivitis
- Recent travel history to an area experience measles outbreak (west Texas, east New Mexico or abroad)

IMMEDIATELY CALL the City of El Paso Department of Public Health-Epidemiology upon **SUSPECTING** a potential measles case.

24/7 Reporting Line: 915-212-6520.

School officials must report suspected or confirmed Measles cases immediately according to Texas Law (Tex. Health and Safety Code §81.042; Tex Admin. Code §97.2 & §97.3), do not wait for confirmation.

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^{*} Unknown vaccination status refers to those students that school does not have proof of a complete MMR vaccination schedule





Isolation of any suspect cases:

• Immediately separate anyone with suspected Measles into a separate, well-ventilated room until parents come to pick up child.

Exclusion of Students and Staff:

Exclusion means a student is <u>not allowed</u> to attend school or any extracurricular school activities such as childcare, clubs, and sports. All students ≥ 4 yrs of age in the school building without proper documentation of two doses of MMR must be excluded from school regardless of their personal exposure to measles or documentation of an exemption or waiver on file for a medical, religious, or philosophical reason.

If a case of measles is identified in your school, all children (≥ 4 yrs of age) without documentation of two doses of measles vaccine (unvaccinated, unknown vaccination status, or have an incomplete MMR immunization series) <u>are required to be</u> immediately excluded from school.

Unvaccinated students or staff including those who have a medical or other exemption to vaccination, must be excluded from school through 21 days after the onset of the last known case of Measles in the school building. It should be noted that if there are multiple cases of measles at a particular school, the student's exclusion might be significantly extended beyond 21 days, since the 21-day period would reset with the identification of each individual new case.

If an exposed staff can produce alternate evidence of immunity, such as a blood test showing antibodies to measles (also called an IgG antibody test), exclusion of staff may be downgraded to symptom monitoring instead, following discussion with DPH Epidemiology.

When students are allowed to return to school:

- Confirmed cases: Stay home until 4 days after rash onset. (Tex. Admin. Code §97.7 (a)(15))
- **Suspected cases:** Stay home until measles is ruled out by a U.S. licensed healthcare professional.



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- Students with 0 doses of MMR: If the excluded student receives one
 documented dose of MMR, they may return to school immediately. A second
 dose of MMR will need to be received at least 28 days later to complete the 2dose series. Students who do not complete the 2-dose series of MMR vaccine
 within 5 days of the minimum interval (28 days) will be excluded from school.
- Students with one dose of measles vaccine: If the student receives a second documented dose of MMR, they may return to school immediately upon school receipt of documentation of the second dose.
- Students with unknown doses of measles vaccine: If the student receives
 one documented dose of MMR, they may return to school immediately. A second
 dose of MMR will need to be received at least 28 days later to complete the 2dose series or bring proof of complete MMR vaccination series (2 doses of MMR
 vaccine). Students who do not complete the 2-dose series of MMR vaccine within
 5 days of the minimum interval (28 days) will be excluded from school.

Cleaning and Disinfection:

Appropriate cleaning and disinfection with an EPA approved solution that has effective virucidal activity is recommended after a case of Measles present in the school setting. The isolation room should be well ventilated, and all surfaces must be cleaned and disinfected, properly disposing of contaminated items such as tissue paper and used PPE items.

Notification to Parents:

Appropriate notification to parents should be provided in a timely manner. The School Public Information Office may coordinate with DPH Public Information Officer (PIO) for a joint message.

