

Prepare for and respond to measles

Checklist for early care and education centers

Measles is a **highly contagious virus** that spreads through the air when an infected person coughs, sneezes, speaks, sings, or breathes. If 1 person has measles, up to **9 in 10 people nearby** will become infected if they are not protected.

Measles is more than just a rash—it can cause serious health complications or even death. About 1 in 5 people who get measles will be hospitalized. The best protection is the **measles, mumps, and rubella (MMR) vaccine**.

Measles can spread quickly in early care and education centers (ECE), because children and staff spend a lot of time together in close contact with each other and children younger than 12 months old are likely unvaccinated.

How to prepare for measles

- **Save the contact information** for your [local health department](#) so you can reach out if you suspect measles in a student, staff member, or volunteer.
- **Maintain accurate immunization records:** Keep up-to-date and accurate vaccination records for all students and staff.
 - **Immunization requirements for early childhood programs:** Children enrolled in early childhood programs (licensed daycare center, nursery or preschool, childcare facility, family home care, or Head Start Program) must be immunized appropriately for their age.
 - Maintain a list of students and staff who have medical, religious, or personal exemptions. This information will help the health department identify people who are not immune to measles and give them guidance on the next steps to take. Here is a [sample documentation template](#).
- **Encourage MMR vaccination:** The measles, mumps, and rubella (MMR) vaccine is the most effective way to prevent measles. One dose is about 93% effective. Two doses are about 97% effective.
 - » Measles vaccines are available from:
 - Doctor's offices
 - Local pharmacies (check with locations based on the child's age)
 - [Local health departments](#)
- **Find an isolation space** where students with measles symptoms can wait for a caregiver to pick them up. This will help prevent other people from getting sick.
 - » Choose a **separate room** (not shared with anyone else) with a door that can close and a window that can open to the outdoors, ideally with access to a separate bathroom
- Remind staff and caregivers that people **should stay at home when they are sick**.
- **Watch for** students, staff, and volunteers who may come to care centers with fever and other signs and symptoms of measles:
 - » **First symptoms:** Fever with cough, runny nose, and/or red, watery eyes
 - » **3–5 days after symptoms start:** Rash
Note: The rash is usually made up of flat, red spots that first appear on the face at the hairline and spread downward to the neck, torso, arms, legs, and feet.

Immediate actions

What to do in the first 10 minutes after measles is suspected

When a student, staff member, or volunteer has measles symptoms, take these actions immediately:



Give the person a face mask (if 2 years and older). To limit the spread of respiratory secretions, facemasks should be well-fitting and cover their mouth and nose.

Isolate the person with measles symptoms to protect others from exposure.

» Move **a student with measles symptoms** to the designated isolation space and contact a caregiver to pick them up. Keep the door closed and the window open.

» Staff or volunteers who monitor an isolated child should be immune to measles.

» Instruct **an adult with measles symptoms** to isolate at home. If they are unable to leave immediately, have them wait in the designated isolation space until transportation is arranged. Advise the individual to seek medical care. They should not enter a clinic without calling first.

» After a person with measles symptoms leaves the isolation space, it should remain vacant for at least 2 hours. Then, clean and disinfect the space with a disinfectant like: Lysol Disinfectant Spray or Clorox Disinfecting Wipes. You may also use mix of 1 part bleach to 9 parts water. Let the solution sit on the surface for at least 1 minute before you wipe it off.



Contact your state or local health department.

They will have further guidance for isolation, testing, and care, if needed, for the person with measles symptoms.

Seek emergency care if the person who is sick gets rapidly worse or if they experience trouble breathing,

pain when breathing or coughing, dehydration, a fever or headache that won't stop, confusion, decreased alertness or severe weakness, blue color around the mouth, or low energy. **Notify staff at the healthcare facility of your concern for measles before arrival so that they can put procedures in place to prevent spread.**

Additional actions after isolation

Be prepared to work with your local health department on the following actions, based on their recommendations:

- **Make a list of people who might have been exposed to the person with suspected measles.** The health department may recommend that anyone who is not immune to measles be excluded from the ECE to protect their health and prevent further spread. The health department may also offer them post-exposure prophylaxis to prevent infection after exposure.
- **Inform caregivers** that someone at their child's ECE has had measles symptoms, and let them know if their child has been exposed. Ask them to watch for measles symptoms in their children and other household members for 21 days (even if they are immune). See [sample notification templates](#).
- Ask staff and volunteers to **watch for measles symptoms in themselves and students for 21 days after the exposure.**

Scan for additional measles resources:

