

Measles GP Flowchart

Visit to GP

Suspected measles case – each of the three following criteria should be present:

1. Fever or history of fever
2. Generalised macular-popular rash
3. Cough or coryza or conjunctivitis or Koplik's spots

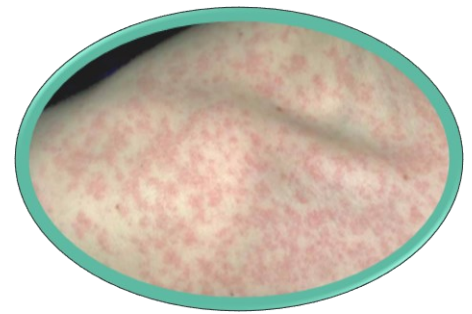
On suspicion of measles, the GP should:

- Notify the on call Medical Officer of Health of the possible clinical diagnosis
- Arrange urgent laboratory tests (see below)
- Exclude case from work, kura, school, Kohanga reo or preschool for at least five (5) days after the appearance of the rash
- Discuss contact tracing with Medical Officer of Health

Treatment is non-specific (consider immunoglobulin if immunocompromised, discuss with relevant specialist).

On notification, Toi Te Ora Public Health will:

1. Ensure appropriate lab tests have been ordered
2. Review case management and immunisation status
3. Assist with contact tracing and management:
 - Check immunisation status and risk factors
 - Refer at-risk contacts to GP for vaccination
 - Exclude susceptible contacts where appropriate
4. Follow up with any involved Kohanga reo, preschool, schools, kura, etc.
5. Collect data for national statistics



Infection control

If measles is a possibility, place the patient into a separate area to avoid infecting others in the waiting room.

Differential diagnosis

- Seven to ten (7-10) days post MMR vaccination
- Rubella
- Roseola infantum
- Enteroviruses
- Arboviruses
- Mycoplasma pneumonia
- Kawasaki's disease
- Drug hypersensitivity rash (may present many days after drug has been ceased)
- Group A streptococcal disease (scarlet fever)

Complications

- Otitis media
- Pneumonia
- Croup
- Diarrhoea
- Encephalitis

Laboratory testing

The choice of suitable laboratory tests can be discussed with the on call Medical Officer of Health or the Clinical Microbiologist. The following can be used as a guide:

- Take a nasopharyngeal or throat swab for measles PCR pre-rash or day 0 – 3 of rash (rash onset is day 0). Please put the swab in viral transport media
- Days 4 – 6 of the rash please do a PCR swab (in viral transport media) and blood test for IgM and IgG serology (SST tube)
- >seven (7) days from rash onset: Blood for measles IgM and IgG serology (SST tube).

If possible, specimens are to be collected by the GP to minimise risk of infection. If a patient is to have a specimen collected at Pathlab, please phone ahead so that the laboratory can ensure appropriate infection control.

For further information on which swabs to use, please phone Pathlab on 07 578 7073 or visit www.pathlab.co.nz/providers and click on swab charts.



TOI TE ORA
PUBLIC HEALTH
Bay of Plenty + Lakes Districts

Te Whatu Ora
Health New Zealand

Case notification

Phone: 0800 221 555, select option 3 (business hours), option 5 (after hours)

Email: cd.admin@bopdhb.govt.nz

On-call Medical Officer of Health: 07 579 8000 (Tauranga Hospital)

Website: www.toiteora.govt.nz