



**New Jersey Department of Health
Vaccine Preventable Disease Program
MEASLES GUIDANCE FOR FIRST RESPONDERS
Date: January 2024**

The New Jersey Department of Health (NJDOH) has received numerous inquiries regarding precautions that should be taken by first responders when evaluating and transporting persons with suspected measles infections. The Department has updated recommendations for first responders, particularly those providing Emergency Medical Services care.

In addition to routine infection prevention practices including standard precautions, NJDOH recommends the following:

1. Vaccination

All first responders should have documented [evidence of immunity](#) to measles. Entities responsible for first responders may want to review their current policies regarding documentation of immunity for staff, including volunteers. This information should be documented and readily available at the work location.

Presumptive evidence of immunity to measles for first responders includes **any** of the following:

- Written documentation of vaccination with 2 valid doses of live measles or MMR vaccine administered at least 28 days apart
- Laboratory evidence of immunity (equivocal IgG results should be considered negative)
- Laboratory confirmation of disease

First responders born before 1957 who lack laboratory evidence (e.g., blood test) of immunity or laboratory confirmation of previous disease should be vaccinated with 2 doses of MMR vaccine at the appropriate interval.

2. Protective Equipment and Procedures

All first responders should use standard precautions during all patient encounters. Measles is a highly contagious viral infection spread via the airborne route, so in order to minimize the risk, the following is recommended:

- Only those who are known to be immune should approach patients who may have measles; and
- First responders should wear particulate respirators (e.g. N-95). Please note that particulate respirators should only be used as part of a comprehensive respiratory protection program that includes appropriate screening, training and fit-testing; and
- Patients should wear a surgical mask, if not medically contraindicated

3. Notification to Receiving Facility

Receiving facilities must be notified **PRIOR** to arrival of known or suspected measles patients to facilitate implementation of appropriate infection prevention procedures. In health care settings, patients with



suspected measles should be placed immediately in an airborne infection (negative-pressure) isolation room if one is available and, if possible, should not be sent to other parts of the hospital for examination or testing purposes.

4. Transportation

Because measles virus can contaminate surfaces or hang in the air for up to two hours, ambulances and transport vehicles should be taken out of service for a minimum of two hours after transport of a patient with known or suspected measles. Routine cleaning of the transport vehicle should be done.

5. Report and Evaluation of Exposure

First responders who are potentially exposed to measles should consult with health care and public health professionals. Health care personnel should evaluate risk and recommend and/or provide appropriate post-exposure prophylaxis when indicated (i.e., one dose of MMR within 72 hours of exposure for first responders with no proof of immunity). In consultation with public health authorities, first responders who are exposed and do not have proof of immunity may be furloughed from day 5 from first exposure to day 21 from last exposure.

Personnel who develop symptoms consistent with measles, including fever, rash, runny nose, cough, loss of appetite, and "pink eye", should seek medical attention (calling ahead before going to the medical facility so proper precautions can be taken to reduce potential exposure). All suspected cases of measles must be reported immediately to the local health department responsible for the municipality in which the patient resides.

Resources

2007 Guideline for Isolation Precautions: Preventing Transmission of Infectious Agents in Healthcare Settings: <https://www.cdc.gov/infectioncontrol/guidelines/isolation/index.html>

Immunization of Health-Care Personnel:
<http://www.cdc.gov/mmwr/pdf/rr/rr6007.pdf>

Protecting Emergency Medical Service Workers from Airborne Infectious Diseases:
<https://www.nj.gov/health/workplacehealthandsafety/documents/peosh/emsrespro.pdf>

New Jersey specific Measles Frequently Asked Questions pertaining to clinical staff and the general public: <https://www.nj.gov/health/cd/topics/measles.shtml>

Centers for Disease Control and Prevention general measles information:
<http://www.cdc.gov/measles/index.html>