EXAMPLE MEASLES SCREENING TOOL FOR HEALTH CARE FACILITIES

Anyone with Generalized Rash Must be Masked and Put in Airborne Isolation Room. (Generalized = more than 1 part of body) If airborne isolation room not available, place in private room with closed door.

Documented or subjective fever on any day of rash?

YES

Did rash begin on face?

YES

Were anti-fever meds taken on any day of rash (i.e. Tylenol)?

YES

Was there fever within 4 days prior to rash onset?

YES

Does patient have a laboratory-confirmed diagnosis other than measles to explain both rash & fever?

NO

Is the patient immunosuppressed?

YES

Did the rash begin on face & extend down the body?

YES

Is there a travel history to a measles outbreak area OR measles endemic country OR measles exposure?

YES

NO

Release w/surgical mask & measles discharge instruction sheet.

Assure correct telephone #

Release

Admit

Remain in Isolation

Hospital Infection Control: Tel (   ) ___-______

**Contact County Health Department for assistance and guidance

**Report Cases to Your County Health Department Tel: (   ) ___-______