**SHOULD I TEST FOR MEASLES?**

A Guide for District of Columbia Healthcare Providers

**Consider the patient’s clinical presentation:**

Does the patient have fever, **and** a rash (maculopapular rash beginning on the face and progressing downwards)? **AND**

Did the patient report symptoms of cough, runny nose or conjunctivitis prior to developing the rash?

- If **NO**, not measles, No testing required.
- If **YES**, continue.

**Consider the patient’s history:**

Was the patient born before 1957 or has documented history of receiving MMR?

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
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<tbody>
<tr>
<td><strong>Patient was born before 1957, or</strong>&lt;br&gt;Patient has a history of receiving 2 doses of MMR</td>
<td><strong>Patient was born after 1957, and</strong>&lt;br&gt;Patient does not have a history of 2 doses of MMR</td>
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In the 21 days prior to symptoms onset, was there any of the following?

- Any known exposure to infected person?
- Recent international travel?
- Any contact with international travelers?
- Travel to an outbreak area?
- Contact with travelers from an outbreak area?

If **NO**: Measles unlikely, provide education

If **YES**: Is there an alternate explanation for the rash? (antibiotics, strep, mono)

**YES**;<br>Not measles, no testing required

**NO**;<br>Has the patient been symptomatic for > 10 days?

If **YES** to any; **ISOLATE** and **CALL** 1-844-493-2652

If **NO** to all; **ISOLATE** and **CALL** 1-844-493-2652