

**Should I test for measles?**

*a guide for Tennessee healthcare providers*

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

Does the patient have fever, rash (beginning on the face and progressing downwards), and conjunctivitis, cough, or runny nose?

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

**Consider the patient’s history:**

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

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<table>
<thead>
<tr>
<th>Yes to either; patient was born before 1957 or has a history of receiving 2 doses of MMR</th>
<th>No to both; patient was born after 1957 and does not have a history of receiving 2 doses of MMR</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>In the 21 days prior to symptom onset, was there any of the following?</strong></td>
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</tr>
<tr>
<td>- known exposure to infected person</td>
<td>- known exposure to infected person</td>
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<tr>
<td>- international travel</td>
<td>- international travel</td>
</tr>
<tr>
<td>- contact w/ international travelers</td>
<td>- contact w/ international travelers</td>
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<tr>
<td>- travel to outbreak state</td>
<td>- travel to outbreak state</td>
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<tr>
<td>- contact w/ travelers from an outbreak state</td>
<td>- contact w/ travelers from an outbreak state</td>
</tr>
</tbody>
</table>

**If NO**

- Measles unlikely, provide education

**If YES**

- is there an alternate explanation for a rash? (antibiotics, strep, mono)

  - **YES**
    - not measles, no testing required.
  - **NO**
    - Has the patient been symptomatic for > 10 days?

      - **YES**
        - not measles, no testing required.
      - **NO**
        - Measles unlikely, but out of an abundance of caution, may choose to

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**CALL**

Call your local health department.

https://www.tn.gov/health/health-program-areas/localdepartments.html

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**COLLECT**

Collect specimens for laboratory testing.

Throat swab on VTM.
Consult with public health for submission to lab.

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**ISOLATE**

Isolate the patient according to airborne precautions.