

PREPARING AND RESPONDING TO MEASLES: Checklist for K-12 Schools



WHY SHOULD K-12 SCHOOLS PREPARE FOR MEASLES?

Measles is caused by a highly contagious virus that spreads through the air when an infected person coughs or sneezes. If one person has measles, up to 9 in 10 people nearby will become infected if they are not protected through vaccination or previous infection.

Measles can spread quickly in schools because students and staff spend a lot of time in close contact, and outbreaks can result in time out of school that disrupts learning.

Measles is more than just a rash — it can cause serious health complications and even death. About 1 in 5 people who get measles will be hospitalized. The best protection is the **measles, mumps, and rubella (MMR) vaccine**.

The risk for widespread measles in the U.S. remains low. However, measles cases occur in the U.S. every year when unvaccinated travelers get measles while they are in other countries and return to the U.S. Outbreaks also occur when measles spreads in under-vaccinated communities. Anyone without immunity to measles is at risk.

PREPARE FOR POSSIBLE MEASLES CASES

- Know how to contact your **health department** when measles is suspected. Ideally, have a point of contact ahead of time and meet with them before school starts to discuss plans for how to respond to a measles case.
- Review health department guidance, local regulations, and laws on measles for schools and ensure the school emergency operations plan is up to date.
- Communicate with staff, families, and caregivers about your school's policies and procedures:
 - » **Requirements for students and staff to stay at home when they are sick.** Consider proactively sharing information about **signs and symptoms of measles** so families and caregivers know when to keep a child at home and when to seek medical evaluation.
 - » **Procedures for students with measles symptoms**, such as the student being required to use a mask when possible, isolated away from others, and requiring immediate pick-up by a caregiver and medical evaluation before returning to school.
- » **Applicable state, local, or school MMR vaccine requirements.** The best way to prevent the spread of measles is to ensure that all students and staff are vaccinated or **immune to measles**. If needed, partner with your health department and local vaccine providers, such as pharmacies or pediatric clinics, to set up school-based vaccination clinics and help make MMR vaccination accessible.
- **Provide training to school nurses and other school-based healthcare providers to recognize measles symptoms.** Early symptoms can seem like a common cold and include fever; cough; runny nose; red, watery eyes; and/or tiny white spots in the mouth. A rash generally occurs 3-5 days after symptoms begin and usually appears on the face and behind the ears first and then spreads down the body.
- **Make sure your school has a supply of masks** to give to a person with measles symptoms.
- **Identify an isolation space** where a student with measles symptoms can wait for a caregiver to pick them up. This will help prevent other people from getting sick.

- » **Choose a separate room (not shared with anyone else) with a door that can close and a window that can open to the outdoors, if available.** If there is no separate room available, consider identifying an outdoor space to use, weather and safety permitting.
- **Make a plan for how to continue education** for students who may need to be excluded from school due to isolation or quarantine for measles. This may include things like virtual schooling or paper-based assignments that students can complete at home.
- **Maintain documentation of measles immunity status for all students and staff**, including any with medical or other exemptions from vaccination. **See sample documentation template.**
- » This information will help the health department identify people who are not immune to measles, so that they can be offered vaccination or medication to prevent infection after exposure, also called **post-exposure prophylaxis**.
- » Ensure record keeping is consistent with any state and local legal requirements and considers privacy and confidentiality.

RESPONDING TO MEASLES IN K-12 SCHOOLS

IMMEDIATE ACTIONS - WHAT TO DO IN THE FIRST 10 MINUTES AFTER MEASLES IS SUSPECTED



When a student or staff member has **measles symptoms**, take these actions **IMMEDIATELY**:

- ☐ **Give the person a mask.** To limit the spread of respiratory secretions, masks should be well-fitting and cover their mouth and nose.
- ☐ **Isolate the person with measles symptoms to protect others from exposure.**
 - » Move **a student with measles symptoms** to the designated isolation space and contact a caregiver to pick them up. Keep the door closed and windows to the outside open.
 - » Instruct **a staff member with measles symptoms** to isolate at home. If they are unable to leave school immediately, have them wait in the designated isolation space until transportation is arranged.
 - » If measles is suspected, advise the caregiver or staff member to seek medical care.
 - » After a person with measles symptoms leaves the isolation space, it should remain vacant for at least two hours. Then, clean and disinfect the space with an **EPA-registered disinfectant** suitable for hepatitis B and HIV (these are also effective against the measles virus).
- » Staff who monitor an isolated child and staff who clean an isolation space after use should have **evidence of immunity** to measles and should wear a well-fitting **respirator** (preferred) or **disposable mask**.
- ☐ **Contact your health department.** They will have further guidance for isolation duration, testing, care, and transport, if needed, as well as other guidance for students and staff in the school. They can also help coordinate school-based vaccination clinics, if needed.
- ☐ **Seek emergency care** if the person who is sick gets **rapidly worse** or if they experience trouble breathing, pain when breathing or coughing, dehydration, a fever or headache that won't stop, confusion, decreased alertness or severe weakness, blue color around the mouth, or low energy. **Notify staff at the healthcare facility of your concern for measles before arrival so that they can put procedures in place to prevent spread.**

ADDITIONAL ACTIONS AFTER ISOLATION

Be prepared to work with your health department on the following actions, based on their recommendations:

- **Make a list of people who might have been exposed to the person with suspected measles.** Consider movement throughout the school building including lunch periods, gym, and special events or classes. The health department might recommend that students and staff who are not immune to measles be excluded from school to protect their health and prevent further spread. The health department might also offer them vaccination or medication to prevent infection after exposure, also called **post-exposure prophylaxis**.
- **Gather information** about school's layout and ventilation to share with the health department.
- **Inform families and caregivers** that someone at their student's school has had measles symptoms and let them know if their student has been exposed. Ask them to watch for measles symptoms in their student and other household members for 21 days (even if they are immune). **See sample notification templates.**
- **Ask staff to watch for measles symptoms in themselves and students for 21 days and seek medical care if symptoms develop.**

RESOURCES

About Measles:

www.cdc.gov/measles/about/index.html

Be Ready for Measles Toolkit:

www.cdc.gov/measles/php/toolkit/index.html

Measles Isn't Just a Little Rash Fact Sheet:

www.cdc.gov/measles/resources/measles-isnt-just-a-little-rash-infographic.html

Do You Think Your Child Has Measles?

www.cdc.gov/measles/downloads/measles-factsheet-seek-care-508.pdf

Preventing Measles Before and After Travel Fact Sheet:

www.cdc.gov/measles/resources/before-after-travel-fact-sheet.html