HEALTH ALERT | Measles Case in the Denver Metropolitan Area | January 9, 2017
Health care providers: Please distribute widely in your office

Key points

- An unvaccinated adult from the Denver Metro area has tested positive for measles after traveling internationally, where public health officials believe the patient was exposed to the virus.
- While infectious, this person visited numerous businesses and two health care facilities in the Denver-Boulder Metro area. Please see below for specific locations and dates.
- **Individuals being seen with a fever and rash should be assessed for measles.** Immediately report all suspect measles cases to your local health department or CDPHE at 303-692-2700, or after-hours at 303-370-9395. Do not wait until laboratory results are available before reporting suspect measles cases.
- Children younger than 5 years and adults older than 20 years are more likely to suffer from measles complications. Complications can include ear infections (that can lead to permanent hearing loss), diarrhea, pneumonia, and more rarely encephalitis.

Background information

Measles is a highly contagious viral disease that causes a distinct febrile rash illness. The incubation period for measles ranges from 7 to 21 days. Susceptible individuals exposed to this person could currently be experiencing measles symptoms and may develop symptoms up until January 19, which is 21 days after the end of the patient’s infectious period.

Tri-County Health Department and Denver Public Health are contacting people directly exposed to the Colorado resident but the measles virus is very contagious and unidentified exposures may exist.
People visiting the following locations on the following dates may have been exposed to measles 
(times are approximate):

**Westerra Credit Union**  
14305 E. Alameda Ave., Aurora, 80012  
12/21/2016 from 11:00 a.m. - 1:30 p.m.

**King Soopers Buckley Square**  
17000 E. Iliff Ave., Aurora 80013  
12/21/2016 from 11:00 a.m. - 3:30 p.m.

**Vitamin Cottage**  
3440 S. Tower Road, Aurora, 80013  
12/21/2016 from 1:00-5:00 p.m. and  
12/27/2016 from 12:30 - 3:30 p.m.

**Walmart Supercenter Pioneer Hills**  
5650 S. Chambers Rd., Aurora, 80015  
12/21/2016 2:30- 5:30 p.m.

**Alfalfa's Market**  
785 E. South Boulder Road, Louisville, 80027  
12/22/2016 from 2:00 - 4:00 p.m.

**T Mobile**  
1590 28th St., Boulder, 80303  
12/22/2016 from 3:00 - 5:30 p.m.

**uBreakiFix**  
1136 Spruce St., Boulder, 80302  
12/22/2016 from 3:30 - 7:00 p.m.

**Rebecca's Apothecary**  
1227 Spruce St., Boulder, 80302  
12/22/2016 from 5:00 - 8:30 p.m.

**Falafel King**  
1314 Pearl St., Boulder, 80302  
12/22/2016 from 5:00 - 7:00 p.m.

**Flatirons Mall, specifically, T Mobile and Brookstone**  
1 W. Flatiron Crossing Dr., Broomfield, 80021  
12/22/2016 from 6:00 - 10:00 p.m.

**Chipotle Mexican Grill**  
1644 E. Evans Ave., Denver, 80210  
12/22/2016 from 8:30 - 10:30 p.m.

**Dollar Tree Englewood Plaza**  
351 W. Englewood Parkway, Englewood, 80110  
12/23/2016 5:00 - 7:00 p.m.

**Walmart Supercenter**  
601 Englewood Parkway, Englewood, 80110  
12/23/2016 from 4:00 - 7:00 p.m.

**Sprouts Farmers Market**  
2880 S. Colorado Blvd., Denver, 80222  
12/23/2016 from 6:00 - 8:00 p.m.

**AFC Urgent Care**  
760 S Colorado Blvd., Denver, 80246  
12/27/2016 from 10:00 a.m. - 3:00 p.m.

**T Mobile Blvd Center**  
1685 S. Colorado Blvd., Denver, 80222  
12/27/2016 from 10:00 a.m. - 1:00 p.m.

**Lifetime Fitness**  
5000 E. Dry Creek Rd, Centennial, 80122  
12/27/2016 from 1:00 p.m. - 4:00

**Parker Adventist Hospital Emergency Department**  
9395 Crown Crest Blvd., Parker, 80138  
12/29/2016 from 5:30 pm to 1:30 am on  
12/30/2016

**Recommendations / guidance**  
The diagnosis of measles should be considered in any person with a generalized maculopapular rash  
and a fever, especially if accompanied by cough, coryza or conjunctivitis (immunocompromised  
patients may exhibit an atypical rash or no rash).
**Measles Symptoms:**

<table>
<thead>
<tr>
<th>Prodrome</th>
<th>Rash</th>
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<tbody>
<tr>
<td>Fever (usually $\geq 101$ degrees F)</td>
<td>Usually begins on face 2-4 days after prodrome onset</td>
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<tr>
<td>Cough</td>
<td>Typically spreads downward/outward to hands and feet</td>
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<tr>
<td>Coryza (runny nose)</td>
<td>Typically is a maculopapular rash</td>
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<tr>
<td>Conjunctivitis</td>
<td>Lasts at least 3 days</td>
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**TESTING:**

Collect a nasal wash, throat (oropharyngeal) or NP (nasopharyngeal) swab for measles PCR testing. Also draw a serum specimen (red top tube or separator tube) for measles IgM testing.

After consultation with CDPHE Communicable Disease Branch staff at 303-692-2700, specimens from highly suspect cases may be referred to the CDPHE laboratory for testing. Specimen collection guidelines can be found on this page:


**INFECTION CONTROL:**

Suspected measles patients (i.e., persons with febrile rash illness) should be removed from emergency department and clinic waiting areas as soon as they are identified.

In HOSPITAL settings, patients with suspected measles should be placed immediately in an airborne infection (negative-pressure) isolation room (if available). If possible, they should not be sent to other parts of the hospital for examination or testing procedures. The exam room should not be used for two hours after the suspect measles patient leaves.

In CLINIC settings, patients with suspected measles should be quickly placed in a private room with the door closed and asked to wear a surgical mask, if tolerated. The exam room should not be used for two hours after the suspect measles patient leaves.

Only health care providers with presumptive evidence of measles immunity should have contact with the patient.
All health care personnel should have presumptive evidence of measles immunity documented and on file at their work location. Current recommendations state that for healthcare personnel, presumptive evidence of measles immunity includes two doses of MMR vaccine, serologic evidence of immunity to measles, or physician-diagnosed measles (during a measles outbreak, there may be additional vaccination recommendations).

**VACCINATION:**
The first dose of MMR vaccine should be given at 12-15 months of age, though infants 6-11 months of age who plan to travel internationally should receive a dose of MMR vaccine prior to travel. Two subsequent doses of MMR still are required on or after the 1st birthday in infants who receive their first dose prior to 12 months of age.

A second dose is recommended at 4-6 years of age but can be given earlier, provided the interval between the 1st and 2nd doses is at least 28 days.

People born during or after 1957 should have documentation of at least one dose of MMR or other evidence of measles immunity.

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**For more information**
For more information, physicians, laboratories, and public health partners should contact Meghan Barnes, Emily Spence-Davison, or Amanda Reiff at 303-692-2700.

For general questions from the public, CO-HELP is available at 877-462-2911.