INFECTIOUS DISEASES SOCIETY OF AMERICA EMERGING INFECTIONS NETWORK QUERY:

Questions Regarding Measles and Infection Prevention

The United States is currently experiencing multiple measles outbreaks, with over 1,200 cases reported so far in 2025. CDC updated the Infection Prevention and Control Recommendations for Measles in Healthcare Settings in May 2025 (https://www.cdc.gov/infection-control/hcp/measles/) but there are still gaps and gray areas regarding implementation of these recommendations. Moreover, few infection prevention teams have dealt with measles exposures. We created this survey to assess how ready infection prevention teams are to deal with measles exposures and to identify gaps that need to be remediated.

The goal of this survey is to learn how acute-care hospitals prepare for and manage measles in 2025.

Abbreviations:
HCP: Healthcare personnel
APP: Advanced practice provider (e.g. PA, NP)

EMERGING INFECTIONS NETWORK QUERY

Measles and Infection Prevention

Name: _____

If measles infection prevention is not within your scope of practice, CHECK HERE __ and submit form

Measles Immunization of Healthcare Personnel (HCP):

1a. Does your institution require evidence of immunity to measles for at least some individuals?

__ No, proceed to Question 2
__ Not sure, proceed to Question 2
__ Yes

1b. If yes, select any of the following that is considered acceptable evidence:

__ Documentation of 2 MMR vaccinations appropriately scheduled
__ Serological evidence of immunity
__ Birth before 1957

1c. If yes, which HCP must provide evidence of immunity?

__ All
__ A subset of HCP, e.g. only patient-facing/interacting personnel

1d. If yes, which non-employed personnel must provide evidence of immunity?

__ Company representatives / vendors *[Please select all that apply]*
__ Volunteers
__ Chaplains (if not employed by the organization)
__ Students
__ Non-employed/independent physicians or APPs

1e. If yes, are data stored electronically so that immune status can be determined quickly?

__ No
__ Yes, for employed staff
__ Yes for employed staff and for non-employees who provide evidence of immunity
__ Not sure

Comments about measles immunity, e.g., role of immunosuppression in HCP:

Identification of Exposed Patients:

2. Can a list of patients with the following location information be obtained quickly (within hours)?

a. Check-in times	__ Yes	__ No	__ Not sure
b. Time put in exam/patient room	__ Yes	__ No	__ Not sure
c. Check-out times	__ Yes	__ No	__ Not sure
d. Total time duration in a specific area	__ Yes	__ No	__ Not sure

Comments about identifying exposed patients:

"Shared Air Space" Exposures:

3. At what point below would you consider a person who was in a clinic waiting room <u>at the same time</u> as a patient with measles to be exposed and at-risk of becoming infected?

__ More than 30 minutes spent together in a shared waiting room airspace
__ More than 15 minutes spent together in a shared waiting room airspace
__ More than 1 minute spent together in a shared waiting room airspace
__ <1 minute spent together in a shared waiting room airspace

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4. At what point below would you consider a person who was in a clinic waiting room after a patient with measles left to be exposed and at-risk of becoming infected?

[Please assume that air exchanges do result in the specified contaminant removal]

__ Arrival >120 minutes after measles patient departure (>99.8% airborne contaminant removal)
__ Arrival within 120 minutes after measles patient departure (>99.5% airborne contaminant removal)
__ Arrival within 90 minutes after measles patient departure (>99.5% airborne contaminant removal)
__ Arrival within 60 minutes after measles patient departure (>80% airborne contaminant removal)
__ Arrival within 30 minutes after measles patient departure (>40% airborne contaminant removal)
__ Arrival within 10 minutes after measles patient departure (<40% airborne contaminant removal)

5. Can you readily obtain information about the number of air exchanges in specific hospital areas (e.g., waiting rooms, patient rooms, staff work rooms)?

__ No __ Yes __ Not sure

Comments about shared air space:

Management of Measles Exposures:

6. Does your institution ever require patients with suspected or confirmed measles to wear a mask?

__ No __ Yes, where? _____ __ Not sure

7. For whom does your institution recommend measles post-exposure prophylaxis?

__ All exposed HCP *[Please select all that apply]*
__ Only exposed HCP who are non-immune
__ Only exposed HCP who are immunocompromised
__ All exposed patients
__ Only exposed patients who are non-immune
__ Exposed patients who are immunocompromised
__ All exposed visitors
__ Only exposed visitors who are non-immune
__ Only exposed visitors who are immunocompromised
__ Not sure

8. Who is responsible for prescribing measles post-exposure prophylaxis for…

[Please select all that apply]	**a. …healthcare personnel**	**b. …patients**	**c. …visitors**
Healthcare epidemiologist / Infection prevention	__	__	__
Employee health	__	__	__
Emergency department	__	__	__
The exposed individual's own physician	__	__	__
Other	__	__	__
Not sure	__	__	__

9. What measles infection prevention issues still need to be addressed?

Thank you for completing this survey!

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