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MEMORANDUM

TO: Healthcare facilities, Chief Medical Officers of hospitals, Infection Control Preventionists,
FROM: Dr. Jennifer E Layden, MD, PhD; Chief Medical Officer and State Epidemiologist, IDPH
RE: Measles immunity among Health Care workers
DATE: February 22, 2019

Recommendations and Action Items:

- 1.) Healthcare providers should have documented evidence of measles immunity
- 2.) Healthcare providers without evidence of measles immunity should be offered 2 doses of measles, mumps, and rubella (MMR) vaccine
- 3.) Healthcare facilities should have readily available lists of immunity status of all health care personnel

Background:

Ongoing measles outbreaks nationwide, including recently confirmed cases in Illinois, provides an opportunity to remind health care facilities and providers of the recommendation that all health care personnel* (HCP) have evidence of immunity to measles¹.

HCP are at higher risk than the general adult population for becoming infected with measles. If a measles exposure occurs in a facility, it can be costly, and can lead to a substantial disruption of hospital routines, especially if the immunity of staff is unknown. If a measles exposure occurs in a facility, non-immune exposed HCPs are required to be excluded from work from the 5th- 21st day after exposure.

For these and other reasons, ACIP guidelines recommend that all HCP should have presumptive evidence of immunity to measles. Further, facilities should have this documented and readily available.

For HCPs, presumptive evidence of immunity to measles for persons includes any of the following:

- written documentation of vaccination with 2 doses of live measles or MMR vaccine administered at least 28 days apart
- laboratory evidence of immunity (eg- positive measles serum IgG)
- laboratory confirmation of disease, or
- birth before 1957**

**For unvaccinated personnel born before 1957 who lack laboratory evidence of measles immunity, health-care facilities should recommend 2 doses of MMR vaccine during an outbreak of measles

For HCPs without presumptive evidence of immunity, pre-vaccination antibody screening before MMR vaccination is not necessary, unless the medical facility considers it cost effective. Serologic testing for immunity is not recommended for HCP who have 2 documented doses of MMR vaccine.

Reference:

- 1.) Immunization of Healthcare personnel: <https://www.cdc.gov/mmwr/pdf/rr/rr6007.pdf>.

*HCP's are defined as all paid and unpaid persons working in health-care settings, which includes (but is not limited to) physicians, nurses, technicians, students / trainees, contractual staff not employed by the health-care facility, and persons (e.g., clerical, housekeeping, volunteers) not directly involved in patient care but potentially exposed to infectious agents.