

Measles in Calgary Zone

Date: April 28, 2025
To: Physicians and Staff, Emergency Departments, and Primary Care Networks in Calgary Zone
From: Calgary Zone Medical Officers of Health

Colleagues:

We are seeing an increase in measles activity across the province, including in multiple areas within the Calgary Zone. Calgary Zone Medical Officers of Health (MOHs) are seeking your assistance in preparing for – and responding to – potential cases.

As of April 28, 5 cases have been identified in Calgary Zone with known public exposures identified in the Bow Valley and Calgary areas. Please monitor the locations and dates of measles exposures in Alberta. Information for Albertans is available at:

<https://www.albertahealthservices.ca/msl/page19108.aspx>.

Recommended Actions by Health Care Providers and Staff

It is strongly recommended that you and your staff are fully vaccinated to prevent acquiring measles. To be considered fully vaccinated staff must have documentation of 2 valid lifetime doses of measles containing vaccine (e.g., MMR), or a documented history of laboratory-confirmed measles infection, or a blood test showing proof of immunity.

- Immunization records are available on myhealth.alberta.ca, under "MyHealth Records" button. Confirm that you have 2 doses of measles-containing vaccine.
- To update your MMR immunizations, call the Immunization Booking Line at 811 between 8 a.m. and 6 p.m. or contact your local community health centre or public health clinic: www.ahs.ca/info/page17791.aspx.
- Healthcare workers without previous evidence of immunity are strongly recommended to receive measles-containing vaccine to ensure they have a total of two valid doses documented.
- Familiarize yourself with the clinical presentation of measles:
 - Measles Information for Health Professionals: www.ahs.ca/msl/page18877.aspx.
 - Alberta Health measles overview: www.alberta.ca/measles.
- Check that the clinic has sufficient supplies of nasopharyngeal swabs, non-expired Universal/Viral Transport Medium (expiry date on container), and sterile urine containers for sample collection.
- Familiarize physicians and nursing staff on how to collect a nasopharyngeal swab: www.ahs.ca/assets/wf/plab/wf-provlab-collection-of-nasopharyngeal-and-throat-swab.pdf.

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- Health care workers should use an N95 mask (airborne) and eye protection (droplet precautions), with consideration of gloves and gown if patient is coughing or is a confirmed or suspected measles case (routine practices).
- Encourage immunization. Measles is extremely contagious and the virus spreads easily through the air. The highly effective vaccine has a long-proven record of safety and provides strong protection.

Exposure of Office Staff to Measles Without Appropriate PPE

- You are determined to be immune if prior documentation of one or more of the following: (i) receipt of two doses of measles-containing vaccines; (ii) a positive measles IgG; (iii) lab evidence of measles infection); you can continue to work
- You have unknown immunity: you will be recommended to undergo measles IgG testing; a positive result will allow you to continue working.
- You do not have immunity if you do not meet immunity criteria above and IgG testing is negative: you are work-restricted starting from the 5th day after the first exposure until the 21st day after the last exposure. You may also be offered post-exposure prophylaxis which may modify or prevent measles disease but will not affect the work restriction.

Clinical Presentation of Measles

Information on measles assessment, symptoms, and rash images are available online:

myhealth.alberta.ca/topic/immunization/pages/measles.aspx.

- fever 38.3 C or greater
- cough, runny nose and/or red eyes (the 3 C's: Cough/Coryza/Conjunctivitis); and
- a rash that appears 3 to 7 days after fever starts, usually beginning behind the ears and on the face and spreading down to the body and then to the arms and legs. The rash appears red and blotchy on lighter skin colours. On darker skin colours, it can appear purple or darker than the skin around it, or it might be hard to see. View measles rash images here: <https://myhealth.alberta.ca/topic/immunization/pages/Measles.aspx?tab=2>

If You Suspect a Measles Case

***New* Physician Reporting Process for Measles Cases**

Please note that the reporting process for measles has changed.

Primary care providers and physicians should no longer report cases to their Zone Medical Officer of Health.

Effective immediately, please use the process below:

New process

All suspected, probable and confirmed cases of measles (from in-person/virtual assessments) must be reported immediately by calling 1-844-343-0971.

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You will be prompted to 'press 1' if you are reporting a measles case. You will be asked to leave the following information:

Your first and last name and the best number to reach you at.

- The patient's first and last name, date of birth, healthcare number, onset date of symptoms, what symptoms the patient is experiencing, what tests have been ordered, and any known links to measles cases including travel.

You will get a call back to collect any missing information if needed between 8:00 a.m. and 10:00 p.m., seven days a week.

Please advise the patient to isolate in their home until they are called with the results of their tests and that they may also receive a call from public health.

Primary Care Providers and physicians can still reach out to their Zone Medical Officer of Health with questions, clinical consults, or concerns about measles at the following numbers:

- Calgary Zone: 403-264-5615
- Central Zone: 403-356-6430
- Edmonton Zone: 780-433-3940
- North Zone: 1-800-732-8981
- South Zone: 403-388-6111 (will need to ask to page MOH)
- For those living in a First Nations community: ISC MOH: 780-218-9929

Note that the following resources have been updated to reflect the new reporting process change:

- [Measles Primary Care Summary Guide](#)
- [Provincial Measles Primary Care Clinical Pathway](#)

Masking Reminder

Please remind all patients who have been asked to isolate because they're a contact of someone with measles, have symptoms of measles or are accompanying someone with suspected measles, that they are encouraged to mask to help protect patients, visitors, and staff, at any healthcare facility.

This provides source control, helping reduce the risk of infectious particles being released into shared spaces during movement through the facility. Surgical masks in this context are not a substitute for airborne precautions but serve as an added layer of protection in shared or transitional spaces.

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Lab Reminder - Appropriate collection & transport of lab samples

The laboratory diagnosis of measles is critically dependent upon the collection of the right sample(s) sent in the correct transport medium or container, otherwise the sample will be rejected for testing, or the test result will be inaccurate.

The following are the appropriate samples and transport medium for collection:

- Throat and nasopharyngeal swabs MUST be sent in Viral/Universal Transport medium (pink fluid with red cap), the same transport medium as used for influenza and SARS-CoV-2 testing. Do NOT use e-swabs or Reagan-Lowe transport medium.
- Urine, at least 5 to 10 mL, in a sterile container. Do not use vacutainers or containers with preservatives.
- Blood collected in Gold top Vacutainers (SST).

For further information go to:

- [Alberta Precision Laboratory Guide to Services – Measles page](#)
- [Lab Bulletin](#)

If you are sending someone to lab for specimen collection, please call and book ahead with the APL Patient Appointment Line 1-877-702-4486.

Additional Resources

Patient Symptoms Poster (multiple languages)

- www.ahs.ca/ipc/page17492.aspx

Provincial Measles Primary Care Clinical Pathway

- www.ahs.ca/assets/info/aph/if-aph-prov-measles-pathway.pdf

Environmental Cleaning Guidelines in Community Clinics

- www.ahs.ca/assets/info/ppih/if-ppih-environmental-cleaning-practices-community-clinics.pdf

APL Bulletin 7-Apr-2025 Laboratory Testing for Suspected Measles

- www.ahs.ca/assets/wf/lab/if-lab-hp-bulletin-laboratory-testing-for-suspected-measles.pdf

Measles Primary Care Summary Guide

- www.ahs.ca/assets/info/ppih/if-ppih-measles-primary-care-summary-guide.pdf

AHS Measles Disease: Staff Q & A

- www.ahs.ca/assets/info/ppih/if-ppih-measles-staff-faq.pdf

Measles Specimen Collection Pathways

- [Measles Specimen Collection Pathways](#)
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