Measles (Rubeola)
An illness requiring airborne precautions

What is measles?
Measles or Rubeola (also known as “hard measles”) is a highly contagious vaccine-preventable disease. It is caused by a virus that normally grows in the cells that line the back of the throat and the lungs. Measles spreads so easily that anyone who is not immunized will probably get it. If you have been exposed to measles you should contact your health care provider.

Measles is a reportable disease and the health department is notified whenever a case is diagnosed so others who may have come in contact with you and are at risk of becoming ill may be identified and protected.

Complications from measles include diarrhea, ear infections, pneumonia, encephalitis (swelling of the brain), seizures, and death.

What are the symptoms?
The symptoms appear about 10 to 12 days after exposure to the virus and include:

- High fever that lasts about 2 to 4 days.
- Cough, runny nose, and/or conjunctivitis (pink eye) after the fever.
- A blotchy rash that appears about 14 days after exposure and lasts 5 to 6 days. The rash begins at the hairline and then involves the face and upper neck. Over the next 3 days, the rash gradually proceeds downward and outward, reaching the hands and feet. Depending on the color of your skin, the rash may be reddish to brownish.

How is it spread?
Measles spreads from person to person from 4 days prior to the onset of the rash to 4 days after the rash appears by droplet and airborne spread.

When an infected person sneezes or coughs, droplets spray into the air. The infected mucus can land in other people’s noses or throats when they breathe or put their fingers in their mouth or nose after handling an infected surface. The virus remains active and contagious on infected surfaces for up to 2 hours.
Exposed and symptomatic persons should practice “respiratory hygiene” by wearing a mask, washing their hands often, and disposing of tissues in wastebaskets when coming into a health care facility. Free “Cover Your Cough Kits” are available at the Information Desk and at clinic intake areas.

How is it diagnosed?
Measles is diagnosed by the symptoms, by the appearance of the rash, and by sending specimens to the laboratory for identification.

How are others protected at the medical center?
At University of Washington Medical Center, we place an “Airborne Precautions” sign near the doorway of your room to alert healthcare workers and your visitors to observe expanded precautions when caring for you. Others who are at risk from acquiring the disease are advised not to enter the room.

What does it mean to be in airborne precautions?
Health care workers and caregivers wear masks and eye protection, gowns, and gloves when providing care.

Visitors should not enter the room if they have never had measles or if they are not sure if they have had the disease. Visitors who are sure they have had all of their MMR (mumps, measles, rubella) vaccinations may enter the room. All visitors who enter the room should wear protective items – gowns, gloves, and masks.

Hand washing for 15 seconds, using alcohol hand gels, and environmental cleanliness are emphasized.

You will be asked to stay in your room unless you need to go to other departments in the hospital for treatment. If you leave your room, you will be asked to wash your hands and to wear a yellow gown, gloves, and a mask.

Please do not use the nutrition rooms while you are “in isolation.” When you want a snack or water, ask a member of your healthcare team to bring it to you.

When can precautions be stopped?
Airborne precautions for measles may be stopped 5 days after the rash appears.