



**This is a Health Alert Network: Advisory**

*This advisory provides important information for a specific measles incident, and contains recommendations and actionable items to be performed by providers, clinicians, and laboratorians.*

**IMPORTANT:** Please read this [Health Advisory issued by the CDC](#) in regard to the [Expanding Measles Outbreak in the United States and Guidance for the Upcoming Travel Season](#).

As of June 24, 2025, a total of 1,227 confirmed measles cases were reported nationally by the [CDC](#).

**Information for Oregon Providers:**

Oregon has reported ONE measles cases for 2025, please see this [News Release](#) issued by Oregon Health Authority on June 24, 2025. There are currently zero measles cases in Deschutes County.

In Deschutes County, the [2-year-old up-to-date rate for \(one\) MMR vaccine](#) was 86.9% in 2024, up from 85.9% in 2023, and 86.5% in 2022, but below the rates of 87.6% in 2021, and 89.7% in 2020. Herd immunity against measles requires about 95% of the population to be immune, **please review your patient's MMR status and encourage vaccination.**

All clinicians are required to IMMEDIATELY report suspect and confirmed cases of measles to the [Local Public Health Authority \(LPHA\)](#) in which the patient resides.

- [Deschutes County](#) - (541) 322-7418 *(24/7/365)*
- [Crook County](#) - (541) 447-5165 *(24/7/365)*
- [Jefferson County](#) - (541) 475-4456 *(Business Hours)* / (541) 475-2201 *(After Hours)*

Please report the following information to the LPHA:

- Full patient name
- Date of birth
- Physical address
- Phone Number
- Language spoken
- Clinical presentation
- Rash onset date
- Travel history
- Exposure history
- Vaccination history

If available, take photos of the rash for Infectious Disease/Health Officer consultation.

Please adhere to measles infection control practices throughout the patient evaluation to prevent exposure of other patients.

**Measles PCR Testing at Oregon State Public Health Laboratory (OSPHL)**

Currently, prior approval from your Local Public Health Authority is **REQUIRED** for measles PCR testing at the OSPHL. Both criteria below must be met for measles PCR testing at OSPHL. If the criteria are not met, clinicians should instead submit specimens

for measles testing to commercial laboratories. The criteria are as follows:

1. Acute febrile rash illness compatible with measles and with no more likely explanation for the clinical presentation;  
**AND**
2. Plausible exposure to measles—i.e., linkage to another case or travel to an area where measles is known to be circulating.

If testing at OSPHL is approved, collect specimens in accordance with the guidance on the OSPHL Lab Test Menu ([www.healthoregon.org/labtests](http://www.healthoregon.org/labtests)) for **Measles (Rubeola)**. Specimens should be transported to OSPHL using facilities' available transport mechanisms, if available. If specimen transport support is needed, contact OSPHL at 503-693-4100.

See also the [OHA Measles Investigative Guidelines](#) for detailed information including an algorithm for test approval at OSPHL (last page), specimen collection (section 3.4), isolation (sections 5.2 and 5.3), and vaccination (section 5.5).

If Measles PCR testing is NOT approved at OSPHL, testing can be done through Mayo, Quest, LabCorp or ARUP.

### CDC Testing Recommendations:

For all patients with clinical features compatible with measles, [the CDC recommends the following specimens be collected](#):

- Nasopharyngeal swab or oropharyngeal (throat) swab are preferred, urine is also accepted  
**AND**
- Blood specimen (Measles IgM/IgG and Measles PCR)

### Test Ordering in Epic

- **Order as:** Miscellaneous Test
- **Test:** Measles PCR for Outbreak
- **Lab:** OSPHL

### Lab Processing (St. Charles Laboratory):

- St. Charles Lab will complete the [OSPHL Virology Request Form](#) and send with specimen(s) to OSPHL
- Specimen(s) are sent to OSPHL after LPHA approval

### Specimen Collection Timing & Specifications:

Do NOT test during prodrome (without rash) – OHA may not approve specimens

#### **1) RT-PCR - Nasopharyngeal, Throat or Urine:**

Collect specimens on Day 1-3 of rash, ≤ Day 10

- **Nasopharyngeal (NP) Swab:** Use synthetic swab (Dacron/Rayon) in 2-3mL of VTM or UTM; instructions for collection NP specimens are available from COPANusa via [video](#) or [PDF](#).
- **Oropharyngeal (throat) Swab:** Use a single swab to collect secretions from posterior pharynx and tonsillar areas – avoiding tongue and teeth; transport in 2-3mL of VTM or UTM.
- **Urine:** Collect 10-50 mL in a sterile container (this specimen type is accepted but not preferred).

#### **2) Serology - IgM/IgG (Blood):**

IgM best ≥72 hours after rash onset (IgM has poor sensitivity in early illness)

- 3-5mL in red top or SST
- Centrifuge within 2 hours

### Handling & Shipping to OSPHL:

- Ship specimens on ice
- Must arrive at OSPHL within 72 hours
- PCR results typically available within ~3 business days

or send an email to [healthservices@deschutes.org](mailto:healthservices@deschutes.org).

Deschutes County Health Services | 2577 NE Courtney Drive | Bend, OR 97701 US

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