

Measles Frequently Asked Questions for K-12 School Officials

What are the symptoms of measles?

Measles is one of the most contagious of all infectious diseases, infecting 9 out of 10 susceptible persons with close contact to a case. It is transmitted by direct contact with infectious droplets or by airborne spread. It can remain infectious on surfaces and in the air for up to two hours after an infected person has left an area.

Initial symptoms include fever, cough, runny nose, and red watery eyes. Koplik spots (tiny white spots inside the mouth) may also appear two to three days after symptoms first appear.

Three to five days after symptoms first appear a rash follows and lasts five to six days.

Rash appears as a

- flat red rash (sometimes raised bumps on top of flat red lesions), and
- begins on the head and face and spreads downward to the neck, trunk, arms, legs, and feet.
- Fever may spike to more than 104°F when rash appears.

After a few days, the fever subsides and rash fades.

What is the infection control process in schools for measles?

If a student or staff presents with symptoms that are consistent with measles, the person should be isolated from the rest of the school population immediately. If a student or staff with suspected measles needs medical attention, the medical facility (and EMS if necessary) should be notified ahead of time about the suspected diagnosis so appropriate control measures can be put in place.

If a student or staff is diagnosed with measles, the person cannot return to school until four days have passed after rash onset. If a person is suspected of having measles, the person should be kept out of school until four days have passed after rash onset or until a medical provider has ruled out measles as a possible diagnosis.

If a person at school is diagnosed with measles, extensive follow up will be needed. Public health officials, including Iowa HHS, will assist with determining and carrying out appropriate follow up, but it may include:

- Identifying anyone potentially exposed
- Reviewing vaccination records for all students and staff
- Working with school officials to notify and educate parents and staff about the potential exposure

- Evaluating the need to exclude exposed, non-immune children and staff from school
- Monitoring exposed, non-immune children and staff for symptom development

Since measles is so infectious, the following individuals should be considered exposed:

- Anyone that was in the same room as the ill individual during the infectious period (four days before rash onset through four days after rash onset).
- Anyone that was in the room up to two hours after the ill individual left the room during the infectious period.
- Schools where students change classrooms, or share common areas such as a cafeteria, will potentially need to consider all students/staff exposed due to the possibility of exposure in the hallways and other common areas within the school.

What is the measles, mumps, rubella (MMR) vaccination requirement for students attending K-12 schools in Iowa?

Iowa law requires that all students be vaccinated with two doses of measles and rubella containing vaccine (MMR vaccine) at the time of enrollment (kindergarten or whenever students transfer into an Iowa school). To be considered valid, the first dose of MMR vaccine must be administered on or after one year of age, and the second dose must be administered at least 28 days after the first dose (usually given at four to six years of age).

Iowa law allows for provisional enrollment if a student has received at least one dose of MMR or is transfer student seeking enrollment from one United States elementary or secondary school into another. A provisional certificate is valid for 60 days and allows time for the child to receive additional vaccine doses.

Iowa law allows for a four-day “grace period”, which would apply to the minimum age of the first dose (i.e., the vaccine can be given up to four days before the child turns one year of age). The four-day period may also be applied to the 28-day minimum interval between two doses of MMR if the interval is inadvertently shorter than 28 days, although healthcare providers should never plan to administer the second dose earlier than the 28-day minimum interval. This four-day “grace period” does not apply to the strict 28-day minimum interval between two different live vaccines (e.g., MMR and varicella vaccines), if not administered at the same visit.

What types of MMR vaccine exemptions are allowed for students attending K-12 schools in Iowa?

Iowa law allows for the following exemptions:

1. Religious exemptions:

Religious exemption stating that immunization conflicts with a genuine and sincere religious belief. A notary signature is no longer required for a certificate of religious exemption to be valid. The exemption is valid for the entire length of time the student attends school (kindergarten through 12th grade).

2. Medical exemptions:

Medical exemption stating that immunization would be injurious to the health and well-being of the applicant, or any member of the applicant's family or household must be signed by an MD, DO, PA, or ARNP to be considered valid. Unless the MD, DO, PA, ARNP specifically lists an expiration date, the medical exemption is valid for the entire length of time the student attends school (kindergarten through 12th grade).

What are the MMR vaccination requirements for staff who work at K-12 schools in Iowa?

Iowa law does not address vaccination requirements for staff working at K-12 schools in Iowa. However, Iowa HHS recommends that all staff be fully vaccinated.

What are the requirements for non-immune persons (including K-12 students and staff) determined to have been exposed to a person with confirmed measles?

Non-immune persons exposed to a person with confirmed measles should stay in their home from five days after the first possible exposure through 21 days after their last possible exposure to the person with confirmed measles. Public health officials will work directly with K-12 school officials to determine which exclusions are appropriate.

Should K-12 school officials in Iowa maintain records of staff members' MMR vaccination history?

Iowa law does not require K-12 school officials to maintain measles vaccination records for school staff. However, if a case of measles were identified within a school, public health officials would work with school officials to quickly determine which students and

staff are non-immune and determine appropriate exclusions. Having these records readily available would expedite this determination.

Can K-12 schools in Iowa (either public or private) impose any additional MMR vaccination recommendations, such as denying a religious or medical exemption?

If a school seeks to impose additional requirements, they should consult their own legal counsel prior to doing so to ensure compliance with the Americans with Disabilities Act (ADA) and federal and state civil rights laws.