



STATE OF ALABAMA
DEPARTMENT OF EDUCATION



Eric G. Mackey, Ed.D.
 State Superintendent of Education

May 10, 2019

MEMORANDUM

TO: City and County Superintendents of Education

FROM: Eric G. Mackey *EGM*
 State Superintendent of Education

RE: Measles Outbreak Information

The Alabama State Department of Education (ALSDE) and the Alabama Department of Public Health (ADPH) Immunization Division work in collaboration to ensure that students are in compliance with the *Alabama School Immunization Law*, §16-30-4 that states:

All public and private school students are required to have an up-to-date ADPH-approved Certificate of Immunization (COI) printed from the Immunization Patients Resources with Integrated Technology (ImmPRINT). Please refer to: <http://www.adph.org/Immunization/assets/SchoolImmLaw.pdf>.

School-required vaccines prevent the following diseases: diphtheria, pertussis, tetanus, polio, measles, mumps, rubella, and varicella. Please refer to: <http://www.alabamapublichealth.gov/immunization/assets/coi-school-childcare-home.pdf>.

The state of *Alabama School Immunization Law*, §16-30-4, requires all students entering public or private schools to present an up-to-date COI, an Alabama Certificate of Religious Exemption, or an Alabama Certificate of Medical Exemption.

Recently, the ADPH was notified of an infectious Tennessee measles case. The infected person traveled through Alabama while contagious and made two stops on April 19, 2019. The following 22 states are confirmed to have measles cases: Arizona, California, Colorado, Connecticut, Florida, Georgia, Illinois, Indiana, Iowa, Kentucky, Maryland, Massachusetts, Michigan, Missouri, Nevada, New Hampshire, New Jersey, New York, Oregon, Texas, Tennessee, and Washington.

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The ADPH urges that all persons know their measles vaccination status and all schools should know the status of each student's vaccination status. If students in your school system are not current with their COI, the ALSDE strongly encourage local education agencies to work with students to bring their COIs up-to-date. Due to the recent outbreaks, parents should be encouraged to obtain a Measles, Mumps, and Rubella (MMR) vaccinations from their physician, healthcare provider, or pharmacy.

Measles are contracted due to a failure to vaccinate. The MMR vaccine is the only vaccine to protect against measles. Two doses of the MMR vaccine given at the appropriate age and intervals are over 97 percent effective in preventing measles.

Please read the attached information shared by the ADPH regarding measles and the recent outbreaks. This information includes points you may want to share with parents/guardians.

If you have any further questions or concerns, please contact Ms. Jennifer Ventress, Nurse Administrator, at (334) 694-4724 or by email at jventress@alsde.edu or Ms. LaBrenda Marshall, Nurse Manager, at (334) 694-4725 or by email at lmmarshall@alsde.edu.

EGM/JV/SB

Attachments

FY19-2086



The Alabama Department of Public Health (ADPH)
MEASLES TALKING POINTS

1. Measles (rubeola) is a notifiable disease in Alabama. The IMM Division regularly investigates reports of suspected measles. As of April 25, 2019, there have been no reported cases of measles in Alabama for 2019.
2. ADPH was notified on April 23, 2019 that a person from East Tennessee with measles disease traveled through Alabama on April 11, 2019 and stopped at D and J Truck Stop in Livingston and Chick fil A in Fort Payne. (See news release from 4/24/2019 for additional information.)
3. Due to the measles case from East Tennessee having traveled in Alabama, the ADPH is working to inform patrons of the two establishments above of any potential exposure. Patrons exposed need to check their vaccine records, monitor themselves for any symptoms of measles, and obtain MMR vaccine if never vaccinated.
4. In order to have no measles cases in Alabama, we must maintain high rates of MMR vaccination. MMR, given within 72 hours of exposure to a case of measles, can prevent a secondary case. While the 72 hour time frame has passed for the exposure to the East Tennessee case, unvaccinated persons can still benefit from obtaining vaccine to reduce future risk of measles disease.
5. ADPH urges that all persons know their measles vaccine status and, if never vaccinated, are strongly encouraged to obtain an MMR from their physician, healthcare provider, or pharmacy.
6. ADPH vaccine efforts primarily focus on children under nineteen years of age. Free MMR vaccine is only available for children participating in the Vaccine for Children (VFC) Program and for persons who may qualify based upon local health department fee schedules.
7. ADPH has a very limited supply of MMR for adults and urges those with insurance and other coverage such as Medicaid to be vaccinated at their pharmacy or provider.
8. As of April 25, 2019, at least 695 cases of measles have been confirmed in 22 states. These numbers will continue to increase. These outbreaks are occurring primarily in unvaccinated persons and are the result of the travel of unvaccinated persons to countries with low vaccination rates and ongoing outbreaks.
9. Measles is due to a failure to vaccinate. MMR vaccine is the only vaccine to protect against measles. Two doses of MMR vaccine, given at appropriate age and intervals, are over 97% effective in preventing measles.



10. There are a few contraindications to MMR vaccine. This information is available on the CDC website, simply type “CDC MMR Contraindications” into your browser and this information should pop up. People with a contraindication should not receive MMR vaccine, including those who are pregnant, had a severe allergic reaction after receiving a dose of MMR or a component of the vaccine including gelatin or neomycin, and has known severe immunodeficiency or a family history of severe immunodeficiency. In addition to contraindications, there are precautions listed by the Advisory Committee on Immunization Practices (ACIP). NOTE: If additional information is requested on contraindications and precautions, please refer to the pdf “Vaccine Contraindications”.
11. The concern voiced by some that the MMR vaccine causes autism and other general concerns have been researched. Despite numerous studies performed over the last two decades finding that the MMR and other vaccines do not cause autism, there continues to be vaccine hesitancy and vaccine refusals. Several advocacy groups including Autism Speaks urges parents and caregivers to vaccinate children. There are factors that have been found to increase the risk of autism including, but not limited to, increased parental age, some pregnancy and birth complications such as extreme prematurity and low birth weight.
12. Measles is a very contagious viral illness spread from secretions from the nose and throat. Because the virus is spread by respiratory droplets, the virus can live suspended in the air or on surfaces for at least two hours.
13. About 95% or more of unvaccinated people exposed to a single case of measles will contract the disease. For every single case, 12-18 additional cases can be expected. The complication rate from measles is about 20-30 %, especially in infants, children less than five years of age, and persons 20 years and older. Complications can range from ear infections and pneumonia to deadly encephalitis. For every 1000 people with measles, one to two people will die.
14. It is important to know the signs and symptoms of measles that occur before the rash. Patients develop fever, sometimes as high as 105 degrees, followed by cough, runny nose, and red eyes (conjunctivitis). Anywhere from 1-7 days after these symptoms begin, the rash develops. The rash starts on the face and spreads across the body. Patients may also have small white spots on the inside of the mouth on the cheek which may occur from 2 days before and up to 2 days after the rash.
15. From the time that a person is exposed to measles, it can take 7-21 days for signs and symptoms to occur with an average of 10-14 days. People are contagious from four days before the rash develops until four days after.

Measles

What is Measles?

- Measles is a highly contagious viral illness that spreads through droplets in the air or direct contact with nasal or throat mucus from the infected person.
- Complications may include pneumonia, hearing loss, or even death.

How to protect yourself

- Vaccination with 2 doses of the measles, mumps, and rubella (MMR) vaccine is the best prevention.
- Children can get their first dose at 12 months old.
- If you have not been vaccinated, it is not too late to get vaccinated as an adult.

Symptoms



Runny nose



High Fever
($\geq 101^{\circ}\text{F}$)



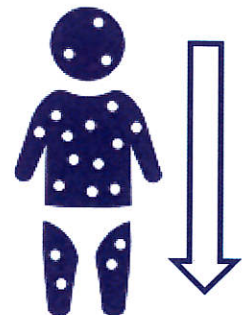
Red or
watery eyes



Coughing



- Tiny white spots inside the mouth
- Rash that may spread from the face to the neck, chest, arms, legs, and feet



**If you have symptoms, please call your doctor
or primary care provider.**



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**Alabama Department of Public Health (ADPH)
Alabama Emergency Response Technology (ALERT)
Health Alert Network (HAN)
04/24/2019**

Tennessee (TN) measles case travel through Alabama and made two stops

Key Message

The Alabama Department of Public Health (ADPH) has been notified of a infectious TN measles case who traveled through AL while infectious and made two stops on 4/11/2019. ADPH is investigating and will contact those exposed based on the information provided by the two locations. The two locations are D&J Travel Plaza in Livingston and Chick-Fil-A in Fort Payne, AL.

ADPH encourages all healthcare providers to

- Assess all patients' vaccination status
- Vaccinate all patients who do not have a history of 2 doses of MMR
- Review symptoms of measles
- Report the presumptive diagnoses immediately
- Collect and submit specimens for testing
- Consider measles in differential diagnosis

Key Facts

- Currently, AL has no measles cases.
- There are twenty two states with confirmed measles cases; Arizona, California, Colorado, Connecticut, Florida, Georgia, Illinois, Indiana, Iowa, Kentucky, Maryland, Massachusetts, Michigan, Missouri, Nevada, New Hampshire, New Jersey, New York, Oregon, Texas, Tennessee, and Washington.
- For more information on measles cases and outbreaks, please see <https://www.cdc.gov/measles/cases-outbreaks.html>.
- A presumptive diagnosis of measles must be reported within 24 hours by physicians, nurses, hospital administrators, infection control practitioners, AND laboratory directors.
- To report presumptive measles, either report online, <https://epiweb.adph.state.al.us/redcap/surveys/?s=H37ENP8ADD>, or call ADPH Immunization Division at 1-800-469-4599 (24/7/365).

Specimen Collection and Shipping

- Providers should collect a throat swab or nasopharyngeal swab, and place in viral transport medium on all presumptive measles cases for their patients.
- ADPH will collect specimens for patients without a provider.
- Follow instructions below to properly collect and send specimens to the Bureau of Clinical Laboratories (BCL).
- The specimen should be refrigerated (2-8°C) until ready to ship.
- For shipping, the specimen should be placed in an insulated container with frozen ice packs.

- Complete a BCL Requisition Form for each specimen and test ordered, http://www.adph.org/bcl/assets/BCL_Requisition_Form.pdf. Include patient information, specimen collection date, date of symptom onset, as well as dates, locations of recent travel, and relevant vaccine history.
- Specimens may be dropped off at your local county health department to be couriered to the BCL overnight, or can be shipped directly to the BCL at 8140 AUM Drive, Montgomery, AL 36117 (at your expense).
- If you have questions about specimen collection and shipping, call the BCL at 334-260-3400 or email clab@adph.state.al.us.

A statewide news release is being issued today.

Primary Point of Contact:

Dr. Karen Landers, 256-246-1714

Secondary Points of Contact:

Dr. Burnestine Taylor, 334-206-5100

LyTasha Foster, 334-206-2030