

MEASLES RECOMMENDATIONS

Healthcare Personnel Vaccination and Treatment



Birth year	Immunity	No known measles exposure	Exposed to measles case (incl. suspected)
All Years Birth year alone is not sufficient to establish immunity for high-risk groups like healthcare personnel	1 dose documented	MMR dose(s) needed Give a second dose (≥ 28 days after first).	Not fully immune. Give the second MMR dose; follow facility exposure protocol.
	2 doses documented	No action needed Immune; no dose or titer needed.	Immune; no post-exposure prophylaxis needed. Individuals can care for measles patients.
	Prior infection documented	No action needed Immune; no dose or titer needed.	Immune; no post-exposure prophylaxis needed. Individuals can care for measles patients.
	No documentation available	Check immunity or give MMR Either check a blood test OR simply give 2 doses of MMR (revaccination is safe even if already immune).	Treat as nonimmune. Give MMR within 72 hours. If beyond 72 hours, immune globulin should be administered within 6 days; may be excluded from work days 5-21 after exposure. The measles infectious period begins four days before the rash appears and ends four days after the rash starts.
	Vaccinated 1963-1967 Killed vaccine era	Check immunity or give MMR Either check a blood test OR simply give 2 doses of MMR (revaccination is safe even if already immune).	Treat as nonimmune. Give MMR within 72 hours. If beyond 72 hours, immune globulin should be administered within 6 days; may be excluded from work days 5-21 after exposure. The measles infectious period begins four days before the rash appears and ends four days after the rash starts.

Important: Those who are pregnant or severely immunocompromised should not receive the MMR vaccine. Only give immune globulin within 6 days of exposure for these individuals.

The Centers for Disease Control and Prevention maintain a detailed webpage on [Measles Infection Control in Healthcare Personnel](#).