

NEW MEXICO HEALTH ALERT NETWORK (HAN) ADVISORY
Recommendation for Early Dose of Measles Vaccine in Outbreak Area

April 14, 2025

Background

The New Mexico Department of Health (NMDOH) is notifying healthcare providers that 58 cases of measles have been confirmed in New Mexico. As of April 11, CDC had reported over 700 cases nationally. The neighboring states of Texas, Oklahoma, Kansas, and Colorado have all reported multiple measles cases, the vast majority associated with the Texas outbreak. Texas has also reported three new measles cases in El Paso County.

Vaccination with the measles, mumps, and rubella (MMR) vaccine remains the best protection against measles. NMDOH is issuing the following updated MMR vaccine recommendations for persons who live in or visit areas at increased risk for exposure to measles (which in New Mexico includes Lea County, as well as Dona Ana County due to the recent detection of measles in El Paso, Texas, and Juarez, Mexico):

Infants

- Infants aged 6-11 months should receive an early dose of measles, mumps, and rubella (MMR) vaccine.
- **Infants who receive an early dose should still receive two additional doses of MMR vaccine on the regular schedule:**
 - **a dose at 12-15 months**
 - **a dose at 4-6 years**

Children

- Children at least one year of age with no prior documented doses should immediately receive their first recommended dose.
- Children aged 4-17 years with no prior documented doses should receive two doses at least 28 days apart.
- Children aged 4-17 years with one prior documented dose should immediately receive their second dose, at least 28 days after the first dose.

Adults

- Administer a second dose of MMR vaccine for adults who received one prior dose.
- Adults with no documented vaccination history should receive two doses at least 28 days apart.

*Adults born before 1957, pregnant women, and people with severe immunodeficiency are not recommended to receive MMR vaccine

Healthcare providers should remain vigilant for febrile rash in unvaccinated or under-vaccinated patients of any age, especially those with recent travel to an outbreak area or exposure to known cases. It is critically important for patients with suspected measles to be promptly recognized, isolated, **reported to 1-833-796-8773**, and tested to prevent further spread.

NMDOH measles updates, including the times and locations of measles vaccine clinics, and press releases regarding measles exposures to large public settings, can be found on our website <http://measles.doh.nm.gov/>

Management of suspect cases

- If measles is suspected, **immediately notify NMDOH by calling 1-833-SWNURSE, option 4 (1-833-796-8773) for further guidance.**
- Testing of febrile people **without a rash is not recommended** and may lead to false negative results. The PCR test is unlikely to detect measles virus until the onset of rash.
- Patients with a rash only and no fever or prodrome of cough, coryza or conjunctivitis should be evaluated for an alternative diagnosis.
- There is **no need to test asymptomatic contacts**; see “Management of Exposed Contacts” below
- Obtain a throat swab or nasopharyngeal **swab in viral transport medium for PCR testing** at the State Public Health Laboratory; serology is not needed.
- Patients suspected of having measles should be **instructed to isolate** themselves at home pending test results.

Measles is characterized by a prodrome of fever, malaise, cough, coryza, and conjunctivitis, followed by a maculopapular rash. The rash begins on the head and spreads down the body, and usually appears about 14 days after exposure, but ranges from 7-21 days after exposure. A person with measles is contagious from 4 days before the rash begins through 4 days after it appears. Measles is extremely contagious, and **NMDOH recommends that patients with suspected measles (fever and rash at triage) not be allowed in the waiting room with others.** Preferably patients are initially evaluated outside the clinic, e.g., in the car or as the last patient of the day. If measles is suspected, the patient should wear a mask and immediately be isolated in a negative-pressure room or a private room with a closed door. Any room occupied by a suspected measles patient should not be used for two hours after the patient leaves, due to measles virus remaining suspended in the air during that time.

Management of confirmed cases

No specific antiviral therapy is available. Medical care is supportive to help relieve symptoms and address complications such as bacterial infections. Complications of measles including otitis media, bronchopneumonia, croup, and diarrhea occur commonly in young children and immunocompromised

hosts. Even in previously healthy children, measles can cause serious illness requiring hospitalization. About one in five measles cases require hospitalization.

Confirmed cases should isolate at home until day 5 after rash onset, with onset date being day zero, and instructed to call their medical provider should symptoms worsen.

Management of exposed contacts

Asymptomatic exposed contacts do not need testing. If an exposed contact develops febrile rash illness, treat as a suspect case.

Measles vaccine should be considered in all exposed individuals who are vaccine eligible and have not been vaccinated or only received one dose. Measles vaccine administered to susceptible individuals within 72 hours of exposure can provide protection or disease modification. If exposure does not result in infection, the vaccine can provide protection against future exposures. Refer to Table 1 on the final page of this HAN.

Additional Resources:

[New Mexico Department of Health Measles Updates](#)

For more information about measles, please visit the Centers for Disease Control and Prevention (CDC) website at <https://www.cdc.gov/measles/index.html> or call the NMDOH Center for Health Protection at **1-833-SWNURSE** (1-833-796-8773).

Vaccine communication resources can be found here:
<https://www.cdc.gov/vaccines/resources/index.html>.

New Mexico Health Alert Network: To register for the NM Health Alert Network, please visit the following site <https://nm.readyop.com/fs/4cjZ/10b2> Please fill out the registration form completely and click Submit at the bottom of the page, to begin receiving Important health alerts, advisories, and updates.

Please Note that our system also utilizes text messaging to notify members of important health information. Due to FCC Regulation changes that are designed to decrease the amount of unwanted spam text messages sent each year to citizens, please save, this phone number **(855) 596-1810** as the **“New Mexico Health Alert Network”** default phone number for your account used for text messages on the mobile device(s) you register with us.

Table 1

AGE RANGE	MEASLES IMMUNE STATUS	PEP TYPE DEPENDING ON TIME AFTER INITIAL EXPOSURE		
		≤3 days	4-6 days	>6 days
All ages	Immune (2 MMR doses, or born before 1957, or IgG positive)	PEP not indicated		
<6 months	Non-immune due to age	Give IMIG Home quarantine for 28 days after last exposure		PEP not indicated (too late) Home quarantine for 21 days after last exposure
6-11 months	Non-immune due to age	Give MMR (preferred over IG) No quarantine needed	Give IMIG Home quarantine for 28 days after last exposure	PEP not indicated (too late) Home quarantine for 21 days after last exposure
	1 early dose of MMR vaccine	PEP not indicated		
≥12 months	Non-immune (zero doses of MMR or IgG negative)	Give MMR No quarantine needed	PEP not indicated Home quarantine for 21 days after last exposure Give MMR vaccine to protect against future exposure	
≥12 months	1 dose of MMR vaccine	Give 2 nd MMR dose if ≥ 28 days from last dose of live vaccine. No quarantine needed	Household or documented contacts (higher risk exposure) to confirmed/suspect case <ul style="list-style-type: none"> Obtain IgG titers to determine immunity, home quarantine while awaiting results. If IgG negative quarantine for 21 days after last exposure Give 2nd dose MMR to protect against future exposures Age 1-3 years less likely to get sick due to 1 dose of MMR no quarantine needed 	
			Lower risk exposures (grocery store, restaurant, public event, etc.) <ul style="list-style-type: none"> Age 1-3 years less likely to get sick due to 1 dose of MMR, no quarantine needed, self-monitor for symptoms Age ≥ 4 years less likely to get sick due to 1 dose of MMR, give 2nd dose MMR to protect against future exposures, no quarantine needed, self-monitor for symptoms 	

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High-risk contacts, such as those who are pregnant or immunocompromised, may need additional evaluation.