

NEW MEXICO HEALTH ALERT NETWORK (HAN) ADVISORY

Increased Risk of Exposure to Measles

January 28, 2026

Background:

The New Mexico Department of Health (NMDOH) is notifying healthcare providers that the Texas Department of State Health Services (TX DSHS) has [confirmed exposures](#) in Pecos and Monahans, TX from three out-of-state measles cases. In addition, the Centers for Disease Control and Prevention (CDC) [National Wastewater Surveillance System](#) detected measles virus in wastewater from the sewershed serving Gaines County during the week of January 11-17, 2026. Both the Pecos area and Gaines County neighbor the southeastern corner of New Mexico. There are also [large measles outbreaks](#) occurring in South Carolina, Arizona, and Utah. Therefore, while there are currently no confirmed cases in New Mexico, healthcare providers should be vigilant for febrile rash in unvaccinated or under-vaccinated patients of any age, especially those with recent travel to an area with measles transmission or exposure to known cases. It is important that your patients be up-to-date with measles vaccination, and critical for patients with suspected measles to be promptly recognized, isolated, **reported to 1-833-796-8773**, and tested to prevent further spread.

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 the Post-Exposure Prophylaxis (PEP) Table [here](#).

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).

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.