



Health Alert CDPH

Chicago Department of Public Health

City of Chicago
Brandon Johnson, Mayor

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Chicago Department of Public Health
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Measles Activity in the United States and Canada February 28, 2025

Summary and Action Items

- Clinicians should be vigilant for [signs and symptoms of measles](#) in patients with compatible symptoms and domestic or international travel to areas with [active transmission](#).
- Providers should notify Chicago Department of Public Health (CDPH) immediately upon suspicion of measles. Do not wait on testing before notifying CDPH. Educate patients about [vaccines that provide protection against measles](#).
- Call the emergency room or urgent care before sending a patient with suspected case of measles so that appropriate infection control precautions can be taken.

REPORTING/CONTACT INFORMATION: To report a suspected case of measles to CDPH, call 312-743-9000 during business hours and select option 2. During after-hours, weekends, holidays, or if you are unsuccessful using the number above, call 311 (or 312-744-5000 if outside the City of Chicago) and request the CDPH medical director on-call to report suspect cases immediately to 311.

Background

Measles activity is increasing in parts of the United States and Canada in 2025.

- The [Texas Department of State Health Services](#) is reporting an outbreak of measles in the South Plains Region of Texas, with 146 cases as of February 28, 2025. Only five of the persons were vaccinated, 20 patients have been hospitalized and there has been one death in an unvaccinated school-aged child.
- The [New Mexico Department of Health](#) is reporting an outbreak of measles in Lea County, near Gaines County, Texas. As of February 28, 2025, 9 cases have been identified.
- The [Public Health Agency of Canada](#) has reported 44 cases of measles in 2025, 31 cases in Ontario and 13 in Quebec. Thirty-three (33) persons were unvaccinated or had unknown vaccination status and four patients have been hospitalized.
- The [New Jersey Department of Health](#) has reported 3 cases of measles among unvaccinated Bergen County residents as of February 20, 2025.
- On February 26, 2025, the [Kentucky Department for Public Health](#) announced a confirmed case of measles identified in an adult that recently traveled internationally to an area with ongoing measles transmission.
- “Immune amnesia,” or the resetting of the immune system, can occur among persons who are infected with measles. This can cause increased susceptibility to other infectious diseases after a measles infection.
- The measles, mumps and rubella (MMR) vaccine, which includes two doses, is 97% effective at preventing measles. Communities develop herd immunity when at least 95% of residents are vaccinated.

Clinician Actions

- Educate patients about [vaccines that provide protection](#) against measles. This is especially important before travel to areas in which measles outbreaks are occurring in the United States and internationally, including Canada. An early, extra dose of MMR is recommended prior to international travel for infants ages 6-11 months.
- Be alert for patients who have febrile rash illness and [symptoms consistent with measles](#) (e.g., cough, coryza, or conjunctivitis) particularly if the timing of symptoms is consistent with measles and they have recently [traveled](#) to areas with ongoing measles outbreaks.
- Call the emergency room or urgent care before sending a patient with suspected case of measles so that appropriate infection control precautions can be taken.

MMR Vaccine:

[CDPH Immunization clinics](#) provide free MMR vaccination for [VFC eligible children](#) and uninsured or underinsured adults. Clinical settings serving uninsured or underinsured adults may contact CDPH Vaccine Manager at kevin.hansen@cityofchicago.org to obtain MMR vaccine supply for this population.

Measles Testing

Healthcare providers should suspect measles in individuals presenting with rash and fever, cough, conjunctivitis, and coryza, especially if they have traveled to or from areas with known measles outbreaks. **Providers should notify CDPH immediately upon any suspicion of measles; do not wait on testing before notifying CDPH.** Isolate the patient and notify your facility's infection prevention team of the suspect measles case.

- Collection of a **nasopharyngeal or oropharyngeal swab for reverse transcription-polymerase chain reaction (RT-PCR)**, ideally collected 0-3 days after rash onset and up to 10 days after rash onset. IDPH-Laboratories provides PCR testing for measles at no cost to the patient or provider and turnaround time is typically 24 hours but is up to 3 business days. Measles testing should be conducted at the state public health lab, as testing at commercial laboratories can delay results. IDPH-Laboratories specimen/submission instructions can be found [here](#) on page 42.
- Collection of **serum for measles-specific IgM and IgG antibodies**. Serology testing alone is insufficient for diagnostic confirmation but may provide supportive evidence. IgM is most sensitive at 3 or more days after rash onset and may be negative from days 0-3 after rash onset. Serum should be sent to facility's commercial clinical laboratory. CDC serology guidance can be found [here](#).
- **Urine samples** can also contain the measles virus and can be considered for RT-PCR testing, though nasopharyngeal or throat swabs are preferred. Collection should occur within 10 days of rash onset. Collecting both respiratory and urine samples may improve test sensitivity, especially if individuals are at the end of the PCR detection window.

Consult the [CDPH-Measles HAN](#) page and [Provider Job Aid](#) for more information on reporting, testing, and infection prevention and control practices.

For more information:

- [CDC: Measles](#)
- [CDC: Measles Cases and Outbreaks](#)
- [CDC: Talking with Parents about Vaccines](#)
- [CDC: Vaccines for Your Children](#)
- [City of Chicago: Get the Facts--Measles](#)