

**MEMORANDUM**

To: Healthcare providers in office/outpatient settings

From: Dr. Rim Zayed, Regional Medical Officer of Health, Western Zone

Date: Wednesday, April 23, 2025

Re: **Measles testing pathways in Western Zone** **REVISED**

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**REVISED:** Please see yellow highlighted section below for updated information on alternate testing pathways for patients without a primary care provider.

The purpose of this memorandum is to provide guidance to healthcare providers in office and outpatient settings regarding measles testing pathways in the Western Zone. Timely and efficient diagnosis and management of suspected measles cases are critical in curbing transmission and mitigating community impact. For detailed information on measles symptoms, epidemiology, prevention, and occupational health considerations, please refer to Dr. Ryan Sommers' [memo on measles](#) sent February 27, 2025.

Although we currently do not have any cases in Nova Scotia, this situation continues to evolve, with increasing case numbers reported across Canada, the United States, and globally.

### **Clinical Considerations and Testing Protocol**

Measles is an exceptionally contagious viral infection. As a proactive measure, screening for symptoms or concerns should be incorporated when booking appointments whenever feasible.

If you suspect measles and the patient presents ill at an appointment, or if an urgent end of day appointment can be arranged, **collecting samples in your office is the most preferred approach**. This minimizes exposure within the healthcare system and reduces delays in diagnosis. Our primary objective remains to contain transmission and alleviate the burden on the broader community.

### **Infection Prevention and Control (IPAC) Measures**

Healthcare providers must take the following precautions when managing suspected measles cases:

- Isolate the patient in a single room immediately
- Conduct a Point of Care Risk Assessment before providing care
- Use the most appropriate PPE when caring for a suspected or confirmed measles patient (typically, gown, gloves, and fit-tested N-95 respirator, refer to IPAC link below).

Please ensure that nasopharyngeal (NP) or throat swabs in viral transport medium, as well as sterile urine containers, are readily available in your office. It is advisable to confirm your NP swab stock with your local laboratory in advance.

## Specimen collection and Public Health notification

### For cases managed in an outpatient setting:

- Order Measles PCR (nasopharyngeal swab AND urine) – see Appendix 1
- **IMMEDIATELY notify Public Health by phone as per [It's the Law poster](#).**

- **Western Zone Public Health Offices**

Please follow the link for Public Health Office contact [Public Health | Nova Scotia Health](#)

## Alternate testing pathways for patients without a primary care provider:

1. **Virtual care for primary assessment.**
2. **Consult with Public Health to coordinate testing with primary care managers to locate a testing site.**
3. **Dartmouth General Hospital Drive-Through** (by appointment only)
  - Call 902-460-4129 to book an appointment.
  - No washroom access; patients should bring a pre-collected urine sample in a sterile container along with their requisition.

Efforts are being made to limit the presence of patients under investigation in waiting areas, particularly in emergency departments. If a suspected measles case requires urgent clinical evaluation and must be sent to the emergency department, please notify the receiving healthcare facility (and EHS, if applicable) in advance to [emergency department](#) (and EHS if needed) in advance.

## Key Contacts for Additional Support

- **IPAC:** Contact [Your local Infection Control Team](#)
- **Occupational Health and Safety (OHS):** Contact your local NSH OHS Office or [OHSWMatters@nshealth.ca](mailto:OHSWMatters@nshealth.ca)
- **Laboratory/Medical Microbiology:** Contact the Medical Microbiologist on call at 902-473-2222 or [CZMicrobiologist@nshealth.ca](mailto:CZMicrobiologist@nshealth.ca)

Your continued diligence and collaboration in measles containment efforts are invaluable. Thank you for your commitment to safeguarding public health. We will keep you updated with further resources and data.

Sincerely,

Dr. Rim Zayed  
Regional Medical Officer of Health, Western Zone  
[rim.zayed@nshealth.ca](mailto:rim.zayed@nshealth.ca)

**Appendix: Diagnostic Testing for Measles**

<b>LABORATORY TESTING AND SAMPLE TYPE</b>			
	<b>Specimens to be Collected</b>	<b>Specimen Containers</b>	<b>Test Request</b>
<b>Acute Illness</b>	1) Nasopharyngeal swab / aspirate or throat swab = collect as soon as possible from rash onset (within 7 days). <u>AND</u> 2) Urine = collect within 14 days of rash onset.	1) Viral Transport Medium <u>AND</u> 2) Urine = 10 mL in a sterile container	Request <b>Measles PCR</b> for swab and urine.
Refrigerate samples at 4°C and send promptly to the Central Zone Laboratory at the QEII HSC. <b>For acute illness samples:</b> Notify Janice Pettipas at <a href="mailto:Janice.Pettipas@nshealth.ca">Janice.Pettipas@nshealth.ca</a> if a sample is being sent. <b>After hours:</b> Inform the Microbiologist on-call at 902-473-2222.			