



**HAWKE'S BAY**  
District Health Board

# FAX SHEET

To: Hawke's Bay GPs

Date: 31/5/11

No of pages: 1

From: Lester Calder  
Medical Officer of Health

Peter Foley  
Chief Medical Officer, Primary Care

**Subject: Request for GPs to collect measles samples at their own practice**

Measles was imported into Flaxmere from Auckland in mid-March. The outbreak continues in that locality, with 15 cases to date. There has been no further school spread. Community transmission in the last fortnight has led to two adult cases (one hospitalised).

**We are trying to limit spread of this outbreak. For suspected respiratory communicable diseases, such as measles and pertussis, please collect laboratory samples yourself, within your practice. This includes nasopharyngeal swabs and blood for serology. Please do not risk further community transmission by sending patients to Southern Community Laboratories or Hawke's Bay Hospital Laboratory.**

Measles is becoming rarer in New Zealand. (This outbreak was imported into Auckland by international travel). Familiarise yourself with the clinical picture:

<http://www.vaccineinformation.org/measles/photos.asp>

For guidance on obtaining specimens in your rooms see:

[http://www.cdhb.govt.nz/measles/Specimen\\_Collection\\_and\\_Transport.htm](http://www.cdhb.govt.nz/measles/Specimen_Collection_and_Transport.htm)

Ensure that all staff in your practice are immune to measles.

If you see patients with the measles prodrome (fever, cough, coryza, conjunctivitis, and Koplik's spots) or morbilliform rash (maculopapular, begins on the face and spreads as a blotchy rash to the trunk then extremities):

- Isolate the case from all other patients in your waiting room.
- Obtain serology for measles IgM antibody.
- Please obtain the appropriate nasopharyngeal and throat swabs in viral transport medium from Southern Community Laboratories. The package contains a red screw-capped tube with viral transport medium. Do **not** use the blue nasopharyngeal pertussis swab with charcoal transport medium.
- If you think that these tests are not warranted please discuss with the Medical Officer of Health ph 834 1815. Clinical diagnosis of measles is often wrong. A high degree of clinical certainty is needed before deciding not to test – e.g. contact with a case who you *know* is lab-confirmed **and** a convincing clinical picture.
- **Ensure that full clinical information is provided on the lab form: measles immunisation history; past measles history; date of onset of prodrome; date of rash onset.**
- **Notify the Public Health Unit on 834 1815 without awaiting results.**

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