### Post Exposure Prophylaxis Recommendations for Persons Exposed to Measles

<table>
<thead>
<tr>
<th>Age Range</th>
<th>Measles Immune Status</th>
<th>≤72 hours</th>
<th>4-6 days</th>
<th>&gt;6 days</th>
<th>Symptom monitoring for 21 days&lt;sup&gt;c&lt;/sup&gt; from date of last exposure</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt; 6 months (excluding health care workers)</td>
<td>Non-immune (due to age)</td>
<td>- Consider giving immunoglobulin (IG)&lt;sup&gt;a&lt;/sup&gt;</td>
<td>- PEP not indicated (too late)</td>
<td>- PEP not indicated (too late)</td>
<td>Yes&lt;sup&gt;e&lt;/sup&gt;</td>
</tr>
<tr>
<td>6-11 months</td>
<td>Non-immune (due to age)</td>
<td>- Give MMR vaccine (preferred over IG)</td>
<td>- Give IG&lt;sup&gt;b&lt;/sup&gt;</td>
<td>- PEP not indicated (too late)</td>
<td>Yes&lt;sup&gt;e&lt;/sup&gt;</td>
</tr>
<tr>
<td>≥12 months (including adults, health care workers excluded)</td>
<td>Non-immune</td>
<td>- Give MMR vaccine</td>
<td>- PEP not indicated (too late)</td>
<td>- PEP not indicated, exposed person has documented immunity</td>
<td>Yes</td>
</tr>
<tr>
<td>1 dose of MMR vaccine</td>
<td>Unknown immune status</td>
<td>- Give MMR vaccine</td>
<td>- PEP not indicated, exposed person has documented immunity</td>
<td>- PEP not indicated (too late)</td>
<td>Yes</td>
</tr>
<tr>
<td>Adults born before 1957 (excluding health care workers)</td>
<td>Immunity based on year of birth</td>
<td>- PEP not indicated, exposed person has documented immunity</td>
<td></td>
<td></td>
<td>Yes</td>
</tr>
<tr>
<td>All ages (excluding health care workers)</td>
<td>Immune (IgG positive, 2 documented valid doses of MMR, born before 1957)</td>
<td>- PEP not indicated, exposed person has documented immunity</td>
<td></td>
<td></td>
<td>Yes</td>
</tr>
</tbody>
</table>

<sup>a</sup> IG can be administered intramuscularly (IGIM) or intravenously (IGIV). Please check references available at [https://www.cdc.gov/measles/index.html](https://www.cdc.gov/measles/index.html) for dosing and route of administration recommendations. Administration of MMR or varicella vaccines must be delayed by 6 months after administration of IGIM or by 8 months after IGIV.

<sup>b</sup> When recommending quarantine, ensure all individuals sharing the airspace are immune to measles. Most persons can be quarantined at home. Be sure the person is not living in a communal setting or other setting with shared airspace (e.g., shelter, apartment building). When quarantined, person should remain at home and visitors should be limited. Any visitors must have documented proof of immunity to measles.

<sup>c</sup> Immunoglobulin (IG) prolongs the incubation period to 28 days.

<sup>d</sup> Persons in some high-risk settings, including but not limited to health care and childcare, may need to be excluded from those settings even if they get appropriately timed post exposure prophylaxis. Factors such as immune status, intense or prolonged contact, and presence of populations at risk should be taken into consideration.

<sup>e</sup> Management of immunocompromised persons can be challenging and may require case-by-case decisions with provider based on immunocompromising condition or medication. Please check reference available at [https://www.cdc.gov/mmwr/preview/mmwrhtml/mmwrhtml/rr6204a1.htm](https://www.cdc.gov/mmwr/preview/mmwrhtml/mmwrhtml/rr6204a1.htm) for information on post exposure prophylaxis and immunocompromising conditions.

<sup>f</sup> Birth before 1957 should not be considered sufficient for health care workers exposed to measles; without documented positive measles IgG titers or 2 MMR doses, consider them to have unknown immunity.

<sup>g</sup> HCP vaccinated during 1963–1967 with a killed measles vaccine alone, killed vaccine followed by live vaccine, or a vaccine of unknown type should be revaccinated with 2 doses of live measles virus vaccine.

<sup>h</sup> Furlough non-immune health care workers for 21 days even if they get MMR PEP.
### Post Exposure Prophylaxis Recommendations for Persons Exposed to Measles – Special Considerations

<table>
<thead>
<tr>
<th>Group</th>
<th>Measles Immune Status</th>
<th>Post Exposure Prophylaxis</th>
<th>Symptom monitoring for 21 days from date of last exposure</th>
</tr>
</thead>
</table>
| Severe immunocompromised individuals<sup>a</sup> | Will need IG within 6 days regardless of immune status | - Give IG<sup>a</sup>  
- Quarantine<sup>b</sup> from 5 days from first exposure through 28 days<sup>c</sup> after last exposure  
- PEP not indicated (too late)  
- Quarantine<sup>b</sup> from 5 days from first exposure through 21 days after last exposure | Yes<sup>e</sup> |
| Pregnant women                     | Non-immune            | - Give IG<sup>a</sup>  
- No quarantine needed in most situations<sup>d</sup>  
- PEP not indicated (too late)  
- Quarantine<sup>b</sup> from 5 days from first exposure through 21 days after last exposure | Yes<sup>e</sup> |
| Unknown immune status              | - Draw serology (measles IgG only) to determine immunity. Quarantine<sup>b</sup> while awaiting results if ≥5 days from first exposure  
- If IgG negative, follow non-immune instructions above  
- If IgG positive, can return to normal activity while symptom monitoring | Yes<sup>e</sup> |
| Health care workers<sup>g,h</sup>  | Non-immune            | - Give MMR vaccine  
- Furlough from 5 days from first exposure through 21 days from last exposure<sup>e</sup>  
- PEP not indicated (too late) unless severely immunocompromised/ pregnant (then refer to above)  
- Quarantine<sup>b</sup> from 5 days from first exposure through 21 days after last exposure, then give MMR vaccine to protect from future exposures | Yes |
| Unknown immune status              | - Draw serology (measles IgG only) to determine immunity. Quarantine while awaiting results if ≥5 days from first exposure  
- If IgG negative, give MMR vaccine if ≤72 hours from first exposure and quarantine<sup>b</sup> from 5 days from first exposure through 21 days after last exposure<sup>e</sup>  
- If IgG positive, can return to normal activity while symptom monitoring | Yes |

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<sup>b</sup> When recommending quarantine, ensure all individuals sharing the airspace are immune to measles. Most persons can be quarantined at home. Be sure the person is not living in a communal setting or other setting with shared airspace (e.g., shelter, apartment building). When quarantined, person should remain at home and visitors should be limited. Any visitors must have documented proof of immunity to measles.

<sup>c</sup> Immunoglobulin (IG) prolongs the incubation period to 28 days.

<sup>d</sup> Persons in some high-risk settings, including but not limited to health care and childcare, may need to be excluded from those settings even if they get appropriately timed post exposure prophylaxis. Factors such as immune status, intense or prolonged contact, and presence of populations at risk should be taken into consideration.

<sup>e</sup> Symptom monitor for 28 days in individuals who received immunoglobulin as post-exposure prophylaxis.

<sup>f</sup> Management of immunocompromised persons can be challenging and may require case-by-case decisions with provider based on immunocompromising condition or medication. Please check reference available at [https://www.cdc.gov/mmwr/preview/mmwrhtml/rr6204a1.htm](https://www.cdc.gov/mmwr/preview/mmwrhtml/rr6204a1.htm) for information on post exposure prophylaxis and immunocompromising conditions.

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<sup>h</sup> HCP vaccinated during 1963–1967 with a killed measles vaccine alone, killed vaccine followed by live vaccine, or a vaccine of unknown type should be revaccinated with 2 doses of live measles virus vaccine.

<sup>i</sup> Furlough non-immune health care workers for 21 days even if they get MMR PEP.

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<sup>Created 9/2019</sup>