



Notes:

- ¹Any person not recently vaccinated and meeting the **clinical** and the **laboratory criteria**. Refer to [case definition](#) on HPSC website for further information.
- ²Contact tracing should identify close contacts with significant exposure within the **infectious period**, *The infectious period is from four days prior to the onset of the rash to four days after the rash erupts*. In the absence of a rash the period of infectiousness should be taken from 24 hours before reported prodromal symptom onset. (Refer to NIAC guidelines, [Chapter 12 Measles](#) for details on significant exposure).
- ³Those in situations or settings where all contacts can be individually identified.
- ⁴Groups at increased risk of severe illness and complications include: *Infants younger than 12 months of age, pregnant women without measles immunity* and those who are *immunocompromised* (For more information on those who are immunocompromised, see [Chapter 3 NIAC Immunisation of Immunocompromised Persons](#))
- ⁵For immunocompromised patients where exposure or susceptibility is recognised late (more than **6 days** post exposure), risk assessment is required with the specialist caring for the individual and consideration may be given to offer immunoglobulin to attenuate infection.
- ⁶Household contacts of a case have higher intensity exposure and an increased risk of more severe disease than non-household contacts.
- ⁷Higher risk settings include settings for underserved populations (congregate settings), prisons and places of detention, complex domestic settings, healthcare settings, educational and childcare settings and other settings where there may be high levels of contact and with susceptible people who may be more prone to developing severe disease if infected (*adapted from [Immunisation Handbook: 2024, version 1 – Chapter 12 Measles](#) - April 2024*).
- ⁸Those in situations or settings where the level of exposure is unclear and not all contacts can be identified.