

Clinician Alert – Measles in NSW



SAFETY NOTICE 025/25

Issue date:	21 November 2025
Content reviewed by:	Health Protection NSW
Distributed to:	Chief Executives; Directors of Clinical Governance; Director, Regulation and Compliance Unit
KEY MESSAGE:	<p>There is an increased local risk for measles in NSW due to several recent public exposures and one locally acquired case in Sydney with no known source.</p> <p>Consider measles in symptomatic people, regardless of age, travel history or measles vaccination status.</p> <p>Isolate the patient immediately when measles is suspected. Have them wear a mask.</p> <p>Notify suspected cases to the PHU urgently by calling 1300 066 055. Do not wait for test results before calling.</p> <p>Test for measles – request URGENT PCR on a nasopharyngeal swab and urine.</p>
ACTION REQUIRED BY:	Clinicians
REQUIRED ACTION:	<ol style="list-style-type: none">1. Distribute this Safety Information to all relevant clinicians and clinical departments to increase awareness of measles.2. Ensure clinical staff have the skills and knowledge to implement clinical recommendations.3. Include this Safety Information in relevant handovers and safety huddles.
DEADLINE:	N/A
We recommend you also inform:	Directors, Managers and Staff of: Emergency Departments, Infectious Diseases Departments and Paediatric Departments
Website:	https://www.health.nsw.gov.au/sabs/Pages/default.aspx http://internal.health.nsw.gov.au/quality/sabs/index.html
Review date:	January 2026

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Situation

- A case of locally acquired measles with unknown source has been identified in Sydney.
- Clinicians should be on alert for measles in anyone with a clinically compatible illness regardless of age, vaccination status, or travel history.
- People with measles have attended public venues including recent music concerts (Jelly Roll in QLD and Oasis in NSW) and used public transport in Sydney, as listed on the [NSW Health website](#).
- People without immunity to measles who attended these locations may be developing symptoms now.

Background

- Measles is a highly contagious viral illness, notifiable on clinical suspicion.
- In 2025, of the 29 cases reported in NSW; 18 were acquired overseas, 3 were acquired interstate, 7 were contacts of a known case, and 1 was locally acquired.
- There is an ongoing risk for measles in NSW and among returning travellers from overseas or interstate due to:
 - ongoing measles outbreaks in South and South-East Asia, the Americas, Europe, and New Zealand, including in areas where measles is eliminated. Canada no longer holds measles elimination status.
 - increased measles activity and ongoing outbreaks in WA and QLD including in vaccinated people.

Assessment

- Measles typically presents with a 2–4-day prodromal illness with fever and the “three Cs”, cough, coryza, and conjunctivitis. A maculopapular rash then typically begins on the face and neck and then spreads down the body.
- Measles in previously vaccinated people may present atypically, with milder symptoms and a slower progression to the rash.
- Cases are infectious from the day before the prodrome to 4 days after the rash onset. It can take up to 18 days for symptoms to appear following exposure to a person with measles, though the average incubation period is 10 days.
- Have a high index of suspicion for measles in anyone with compatible symptoms who has been overseas in the previous 3 weeks, even if they report measles vaccination. Consider measles in anyone with compatible symptoms even if they have not travelled.

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Recommendations

Consider measles in:

- people who attended known measles public exposure locations, including recent music concerts (Jelly Roll in QLD and Oasis in NSW). Other exposure locations in NSW are listed [here](#).
- people arriving from interstate or overseas (particularly South and South-East Asia) with fever, even if previously vaccinated for measles.
- anyone with fever, cough, coryza, conjunctivitis, with or without a maculopapular rash.

Isolate suspected cases immediately. Have them wear a mask.

Notify your public health unit (PHU) immediately on 1300 066 055 of any suspected measles cases (don't wait for test results before calling). PHUs will work with infection control to identify and follow up contacts of confirmed measles cases.

Test: Collect a nose and throat swab, and a first pass urine sample for nucleic acid testing (PCR). Blood for measles serology (IgM and IgG) can be performed, but PCR should always be taken. Mark the tests requested as URGENT. Your PHU can assist in expediting testing.

Encourage measles vaccination

Recommending vaccination is an important way to increase uptake. Clinicians should recommend vaccination for:

- Individuals born in Australia between 1966 and 1994 may not have received two doses of a measles containing vaccine and may not be immune. Measles containing vaccines (MMR) are free in NSW for these people.
- Children aged from 6 months to under 12 months can have an extra MMR vaccination early if travelling overseas. Children who receive an earlier dose (dose zero) should receive their usual MMR vaccine (dose 1) at 12 months of age. They should receive their final dose of MMRV (dose 2) at 18 months of age as routinely recommended.

Further information

<https://www.health.nsw.gov.au/Infectious/measles/Pages/default.aspx>