



**Health, Seniors and Long-Term Care  
Public Health**

300 Carlton Street  
Winnipeg, Manitoba Canada R3B 3M9

March 18, 2026

**RE: Clinical Notification of Measles - NEW Form**

Dear Health Care Provider,

Due to the increase in measles-related clinical notifications over the past several months, Manitoba Public Health is streamlining the notification process for measles.

**New Notification Form**

- Health care providers should now use the Clinical Notification of Measles Form, available at: <https://www.gov.mb.ca/health/publichealth/surveillance/forms.html>.

**Reporting Requirements**

- Healthcare providers are still required to report suspect clinical cases of measles by fax using the new form within 24 hours to Manitoba Health, per the *Reporting of Diseases and Conditions Regulation*: <https://web2.gov.mb.ca/laws/regs/current/pdf-regs.php?reg=37/2009>.
- Healthcare Providers are **not** required to report laboratory confirmed measles cases as they are reported to Public Health directly by the laboratory.
- During this outbreak, additional telephone reporting is **ONLY** required for suspect cases when the individual meets one or more of the following criteria:
  - Has had close contact with high risk individuals within the previous 6 days (i.e. immunocompromised individuals, unimmunized pregnant persons, infants <12 months old) who may require post-exposure prophylaxis; OR
  - Was infectious in a childcare or health care setting; OR
  - Is from an area not known to have measles activity (e.g., Northern Manitoba).
- For all other communicable diseases that require clinical notification, please continue to use: [https://www.gov.mb.ca/health/publichealth/cdc/protocol/mhsu\\_0013.pdf](https://www.gov.mb.ca/health/publichealth/cdc/protocol/mhsu_0013.pdf).

**Measles Testing Options**

- A nasopharyngeal (preferred) or throat swab within 7 days of rash onset can be used for virus detection (i.e., measles PCR).

- A urine specimen for virus detection can also be collected within 14 days of rash onset and is particularly helpful in later stage diagnosis of measles.
- Serology for measles IgM and IgG may also be helpful, particularly if the patient is unimmunized. However, if the patient is still in their infectious period and phlebotomy cannot be easily arranged under airborne isolation, then specimens for PCR testing should be prioritized.
- For more information about measles testing:
  - <https://www.gov.mb.ca/health/publichealth/cdc/protocol/measles.pdf>
  - <https://www.gov.mb.ca/health/publichealth/diseases/docs/measles-quick-reference-guide.pdf>

### Seeking Urgent/Emergent Care

- To avoid exposing higher risk individuals, refer suspect cases to urgent care or emergency departments only if they require that level of care, and call ahead to the facility to alert them of the suspect measles diagnosis so they can ensure isolation precautions are followed.

### Further Information

- The number of cases is updated on the measles website weekly each Friday: <https://www.gov.mb.ca/health/publichealth/diseases/measles.html#update>.
- Public exposures are posted as they are identified: <https://www.gov.mb.ca/health/publichealth/diseases/measles-exposures.html>.

Please share this information with all colleagues at your facility/clinic.

Sincerely,

*“Original Signed by”*

*“Original Signed by”*

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