

DPHHS HAN

Information Sheet



DATE

September 21, 2026

SUBJECT

Measles Exposures in Flathead County

SUMMARY

The Flathead City-County Health Department has issued a Health Advisory to notify health care providers that a person infected with measles visited Flathead County from September 8, 2026, to September 11, 2026. Flathead City-County Health Department is aware of three public sites the person visited while in the County. Of note, the case may have exposed individuals outside of Flathead County while traveling on an Amtrak train. The case rode Amtrak Train #8, traveling eastbound across Montana on 9/11/26 to Chicago Union Station.

Further information regarding the exposure sites is available on the Health Department's website, [Measles :: Flathead County](#). Any updated information will be made available there.

BACKGROUND

See attached Flathead City-County Health Department HAN.

INFORMATION

See attached Flathead City-County Health Department HAN.

RECOMMENDATIONS

See attached Flathead City-County Health Department HAN.

Date: September 21, 2026

RE: Measles Exposures in Flathead County

Background:

This message is to notify healthcare providers that the Flathead City-County Health Department (FCCHD) was notified that a person infected with measles visited Flathead County from September 8th, 2026 to September 11th, 2026.

FCCHD is aware of 3 public sites where the person went while visiting the County. The listed times include the period when exposure occurred and two hours after, as the measles virus can stay in the air for up to two hours after the infected person left. Individuals present during these windows may have been exposed and should monitor for symptoms for 21 days after their last exposure:

- **Glacier Highland Gift Store and Restaurant**
12555 Hwy 2E, West Glacier, MT 59936
09/08/2026 – 09/11/2026
- **Logan Health Primary Care**
1675 Talbot Road, Columbia Falls, MT 59912
09/08/2026 | 12:00 p.m. – 5:00 p.m.
- **Amtrack Train #8 Traveling Eastbound on 9/11/2026 from West Glacier, MT 59937**

The above exposure sites are also available on the Health Department's website, [Measles :: Flathead County](#). Any updated information will be made available there.

FCCHD is also contacting any known individuals who may have been exposed to this case in Flathead County and are providing them with information related to the exposure date and disease symptoms to watch out for. There are no known cases or exposed individuals associated with schools or daycares.

Recommendations for Clinicians:

Consider measles as a diagnosis in anyone with fever ($\geq 101^{\circ}\text{F}$ or 38.3°C) and a generalized maculopapular rash with cough, coryza, or conjunctivitis in individuals who report the following:

- Individuals who report exposure to a case of measles in the previous 21 days, including the exposures in Flathead County,
- Recent travel to [areas in the U.S.](#) with measles cases and/or outbreaks, or
- Individuals who recently traveled abroad in countries with measles cases

Please note:

- Some patients may not have a history of travel or visitors; this should not deter clinicians from testing suspected measles cases.



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- Some measles cases have reported a “modified” presentation of measles, including a more subtle rash that some describe resembling “pimples” and other reduced symptoms. This seems to be more common in persons who are partially or fully vaccinated for measles.
- Any person reporting an exposure to measles should be monitored for 21 days (28 days if immune globulin was given) for signs and symptoms of measles illness. To help assess their risk status, exposed individuals can be referred to the [Health Department’s Measles Exposure Self-Assessment form](#).

When a clinician suspects a diagnosis of measles, there are several key steps to prevent ongoing transmission, as noted below:

- **Isolate:** Do not allow patients with suspected measles to remain in the waiting room or other common areas of a health care facility; isolate patients with suspected measles immediately, ideally in a single-patient airborne infection isolation room (AIIR), if available, or in a private room with a closed door until an AIIR is available. Health care providers should be adequately protected against measles and should adhere to standard and airborne precautions when evaluating suspect cases, regardless of their vaccination status. Offer testing outside of facilities to avoid transmission in health care settings. Call ahead to ensure immediate isolation for patients referred to hospitals for a higher level of care. See [Interim Infection Prevention and Control Recommendations for Measles in Healthcare Settings](#) for more details.
- **Notify:** Healthcare providers in Flathead County should notify FCCHD immediately about any suspected case of measles to ensure rapid testing and investigation. This can be done by calling the FCCHD Communicable Disease Line at 406-751-8117. If it is after 5PM or on the weekends, please call the Public Health Emergency Line at 406-756-2900 and a public health official will be notified.
- **Test:** Follow the attached Montana Public Health Laboratory (MTPHL) testing recommendations. Collect a respiratory specimen (either throat, nasopharyngeal, or nasal Dacron swabs in viral transport media) for reverse transcription polymerase chain reaction (RT-PCR) from all patients with clinical features compatible with measles. PCR is the preferred test and should be collected **after rash onset**. If rash has been present for at least 4 days, providers should also collect a blood specimen for serology testing (1 – 2 ml of serum) in addition to the specimens for PCR testing. Specimens can be transported by [courier](#), UPS, or FedEx to MTPHL in Helena.
- **Manage:** Provide appropriate measles post-exposure prophylaxis (PEP) to eligible individuals as soon as possible after exposure to close contacts without evidence of immunity, either with MMR (within 72 hours) or immunoglobulin (within six days). The choice of PEP is based on elapsed time from exposure or medical contraindications to vaccination.
- **Vaccinate:** The best way to protect against measles is vaccination. No changes have been made to the existing measles, mumps, and rubella (MMR) vaccine recommendations in the United States. Schools, early childhood education providers, and health care providers should work to ensure students and families are current with MMR vaccine.



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MMR Vaccine Recommendations

- Children are routinely recommended to receive two doses of MMR vaccines. Children should receive their first dose of MMR at age 12 to 15 months and their second dose at four to six years.
- Unvaccinated children and adolescents are recommended to receive two age-appropriate doses of MMR vaccine.
- Unvaccinated adults may need one or two doses of MMR vaccine, depending on their circumstances, if they do not have evidence of immunity. Persons born before 1957 are considered to have presumed immunity.
- Special circumstances may warrant additional MMR vaccine schedule considerations, including domestic travel to areas experiencing a measles outbreak, international travel, and working in health care settings.
- MMR doses should be separated **by at least 28 days**.



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Montana Public Health Laboratory Guidance: Measles Testing



*State communicable disease reporting rules require health care providers suspecting measles to report suspected cases to local public health authorities **immediately**. Public health authorities may implement immediate control measures to prevent transmission and/or arrange immediate transport of the specimen when warranted.*

Specimen Criteria

Collect the following specimens to test for measles infection:

- Respiratory Specimen (Throat, NP, Nasal Swab)
- Serum

Specimen Collection for **PCR Testing**:

Collect specimens as soon as possible after appearance of rash, and ideally within 3 days of rash onset.

Detection can be possible up to day 7 following onset of rash. *Respiratory Specimen*: Throat, Nasopharyngeal, or Nasal Dacron swabs in viral transport media.

Consult with Public Health authorities regarding PCR testing prior to rash development of individuals who may have had a recent exposure to measles.

Specimen Collection for **IgM Testing**:

For IgM testing, specimens must be collected >48 hours post rash onset.

- *Serum*: 1 – 2 ml of serum. Can be sent in a spun serum separator tube or can be poured off into a transport tube.

Transport Conditions:

- Keep *Respiratory specimens* cold, and transport with cold packs as soon as possible following specimen collection. Avoid repeat freeze-thaw cycles. If specimen transport is going to be delayed >24 hours, freeze the sample at -70°C and ship on dry ice.
- *Serum* specimens can be shipped cold (refrigerated) or frozen (preferable for IgM testing).

Submission Reminders:

*Please be sure to include the collection date and at least two patient identifiers (Name and DOB or medical record #) on the sample container.

*Use the [Montana Public Health Laboratory online portal](#) to order. *For respiratory specimens, order Measles PCR. *For serology specimens, order Rubella IgM Serology (ND). *Be sure to select the appropriate specimen source when ordering. *For the Onset Date, enter the date of rash onset.

*Print the Requisition form, verify patient identifiers match the sample, and place the paperwork in the side pouch of the specimen bag. *Place the two specimens in separate specimen bags with the correct paperwork in each pouch. *Finally, create a manifest for all samples being shipped and place the manifest separately in the shipping container.

Specimens can be transported by courier (if available), UPS or FedEx to:

Montana Public Health Laboratory
1400 Broadway, Room B126
Helena, MT 59601

Please contact the Montana Public Health Laboratory at 1-800-821-7284 for more information and remember to report any suspect measles to your local health department.