



Preparing for March Break: Measles immunization recommendations

- While measles activity has decreased in Ontario, transmission continues globally, including in common travel destinations, such as the United States and Mexico.
- Healthcare providers are encouraged to remind patients who will be travelling to check their immunization records.
- For patient vaccinations:
 - Most Ontarians are eligible for two publicly funded doses of measles-containing vaccine, based on clinical judgment and patient-specific risk (e.g. healthcare workers, post-secondary students, military personnel and those travelling to areas where measles is circulating).
 - In general, those born prior to 1970 are presumed to have acquired natural immunity to measles. However, those with patient-specific risk factors (listed above) may receive a measles-containing vaccine regardless of birth year.
 - Infants aged 6–11 months do not routinely receive the MMR vaccine; however, those travelling to areas with increased measles transmission should receive one dose of MMR.
 - Infants who receive a dose prior to 12 months will still require two additional measles-containing doses: one at or after 12 months of age and another between 4–6 years of age.
- Please consider measles testing in returning travellers who present with:
 - Fever (>38.3°C), and
 - Cough, coryza, or conjunctivitis, and
 - A generalized maculopapular rash.
- If your patient meets the above criteria, order the following tests:
 - Measles PCR: nasopharyngeal (NP) or throat swab and urine specimen
 - NP swab (pink-coloured medium) and urine (50 mL)
 - Measles serology: blood test (IgG and IgM)
- Immediately report all suspected or confirmed measles cases to GBPH at 519-376-9420, ext. 2.

Infection prevention practices: Slowing gastrointestinal outbreaks

- Grey Bruce Public Health continues to note gastrointestinal [outbreak activity](#) at Long-Term Care Homes and Childcare Centres in local communities, indicating that enteric pathogens continue to circulate in our community. Given this context, reviewing environmental cleaning practices and products in clinical office settings remains important to prevent healthcare-associated infections.
- Public Health Ontario offers resources and checklists targeted at IPAC in clinical office settings, including:
 - Infection Prevention and Control Organizational Risk Assessment for Clinical Practice ([guide](#) and [form](#)) - a step by step approach for identifying and managing IPAC organizational risk in clinical office practices.
 - [Infection Prevention and Control for Environmental Cleaning in Health Care Online Learning Modules](#)
 - Online course on IPAC and environmental cleaning.
- Norovirus, a common cause of viral gastroenteritis, can live on surfaces in the environment for up to 12 days. Not all disinfectants are effective against norovirus (including most quaternary ammonium compound-based products). During times of increased enteric illness activity, or in areas soiled by vomiting or diarrhea, check your disinfectant for virucidal claims. For more information see:
 - [Significant Microorganisms in Environmental Cleaning FAQs](#)
 - [Best Practices in Environmental Cleaning in all Healthcare Settings](#)

Benzathine Penicillin G (Bicillin® L-A) shortage extended

- The national shortage of Bicillin® L-A—the preferred treatment for syphilis—has been extended until at least April 3, 2026.
- During the shortage, the Ministry recommends providers restrict the use of Bicillin® L-A by using alternate treatments as outlined by the [Public Health Agency of Canada](#).
- Conserved Bicillin® L-A should be used for:
 - Pregnant individuals (all stages) and their ongoing sexual contact(s). Note that infectious syphilis (primary, secondary, and early latent) only requires one dose of 2.4 million units of Bicillin® L-A, including during pregnancy.
 - Infectious cases (primary, secondary and early latent syphilis), regardless of HIV status, if adherence to alternative treatment and follow-up is uncertain.
 - Non-pregnant adults who have already initiated their treatment course with Bicillin® L-A should complete their therapy according to standard guidelines.
- Primary care providers play an important role in preventing syphilis transmission:
 - Screen all sexually active persons with a new or multiple partners, and/or upon request of the individual. Screen those with multiple partners every 3 to 6 months.
 - High prevalence groups should consider targeted “opt-out” screening as frequently as every 3 months.
 - Individuals who are pregnant should be screened within the first trimester or at their first prenatal visit. At-risk individuals should be re-screened at 28 to 32 weeks and during labour in areas with outbreaks.
- More tips and treatment information can be found on the [Government of Canada](#) website.
- Grey Bruce Public Health will communicate updates or changes in guidance to healthcare providers as more information is received from the Ministry of Health.

ISPA Update: School suspension notices issued

- Suspension notices have been sent out to parents and guardians of students who do not meet ISPA requirements.
- **The school suspension period will run from March 24-April 22, 2026**, inclusive for those students who are not compliant with the ISPA requirements.
- GBPH will be holding vaccine clinics in Grey-Bruce communities in March, including throughout March Break, as part of ongoing, focused suspension prevention efforts. These clinics are aimed at students who are at risk of suspension and unable to access vaccination through their primary care provider. Clinic dates can be found at the following link: [GBPH Calendar](#).
- Promptly submitting immunization updates to Public Health after vaccine administration and providing parents or guardians with a copy of their child’s updated immunization record can help reduce the burden from these suspension orders. Updated records can be faxed to GBPH at 519-376-7782.
- For ISPA-related questions, contact a nurse in the Vaccine-Preventable Diseases program.

Resources for Primary Care Professionals

- Canadian Research Initiative in Substance Misuse - [Clinical Guidelines for High-Risk Drinking and Alcohol Use Disorder](#).
- Ontario Dietitians in Public Health – [Supporting Patients with Weight Inclusive Care](#)
- PHO – [Candida auris: Information for Patients, Residents and Visitors](#).

Webinars

- [PHO Microbiology Rounds: Genomic Epidemiology of Tuberculosis in Ontario \(2023–2025\)](#) – Mar. 5, 2026.
- [PHO Webinar: Guiding Families Through Early Allergen Introduction](#) – Mar. 11, 2026.

For Patients

- Talk Tobacco – [Quit Smoking Support for Indigenous People](#)