

Reviewing performance questions- Measles and travel vaccination recommendations 2026

Case Scenarios: Measles risk assessment, exposure and management

1. A 32-year-old NSW resident is preparing for a 6-week trip to India and Vietnam. He is unsure whether he received two doses of MMR vaccine and declines vaccination because there are currently no measles outbreaks reported in his destination cities. Which group currently contributes most to measles importation and secondary transmission events in Australia?

- A. Adults born before 1966 who are presumed to have naturally acquired immunity
- B. Children who have NOT received age-appropriate measles vaccination according to the National Immunisation Program
- C. International travellers with incomplete, undocumented, or absent measles vaccination who are susceptible to infection overseas**
- D. Healthcare workers who have documented evidence of two doses of measles-containing vaccine

2. A 28-year-old traveller from NSW is planning to visit Vietnam in 6 weeks. They are unsure whether they received two doses of MMR vaccine as a child and have no documented vaccination history. What is the most appropriate recommendation?

- A. No vaccination required
- B. Arrange serology before travel
- C. Recommend and administer funded MMR vaccine today and return in 4 weeks for the 2nd dose**
- D. Recommend funded MMR vaccination today and return in 28 days for the 2nd dose only if travelling to a rural area.

3. An 8-month-old infant is travelling with family to Indonesia in 6 weeks. What is the most appropriate measles vaccination advice?

- A. Wait until 12 months of age to administer MMR
- B. Administer an early dose of MMR before travel and continue the routine schedule at 12 months of age**
- C. Administer MMRV vaccine before departure
- D. Measles vaccination is contraindicated before 12 months of age

How confident are you in applying current Australian immunisation recommendations when assessing measles risk in routine and travel health settings?

- Not confident
- Slightly confident
- Moderately confident
- Very confident
- Extremely confident

Case Scenarios: JEV and Diphtheria

4. A 38-year-old NSW resident is planning to spend six weeks in rural Bali and East Java during the wet season, undertaking agricultural volunteer work with regular evening outdoor exposure. During the pre-travel consultation, she asks whether she is eligible for a NSW Government-funded JEV vaccine. According to current NSW recommendations, which statement is most accurate?

- A. She is eligible for a funded JE vaccine because all NSW residents travelling to JE-endemic countries can access vaccination through the NSW program.
- B. JEV vaccination should be recommended however, travel to an endemic country alone does not meet NSW-funded vaccine eligibility criteria.
- C. She is ineligible for JE vaccination because JE vaccine is only recommended for travellers spending more than six months overseas.
- D. She should receive a funded JE vaccine because agricultural exposures automatically qualify international travellers under the NSW-funded program.

5. A 28-year-old Aboriginal man from NSW is planning to spend six weeks working in the Kimberley region of Western Australia, which is currently classified as a diphtheria outbreak-affected area. He completed a primary diphtheria vaccination course in childhood and received his most recent dTpa-containing vaccine 6 years ago. According to current NSW Health recommendations, which of the following is the most appropriate advice?

- A. No additional diphtheria vaccination is required because a booster is only recommended every 10 years.
- B. A funded dtpa dose should be offered because he is an Aboriginal person travelling to a diphtheria outbreak-affected area and his last dose was more than 5 years ago.

- C. A funded dtpa dose should only be offered if he is aged 50 years or older.
- D. A funded dtpa dose is not available because travel-related diphtheria vaccination is not funded by NSW Health.
- E. He should recommence a 3-dose primary diphtheria vaccination schedule.

Case Scenario 4: Pre-Travel Assessment

6. A 42-year-old humanitarian worker plans to spend four weeks in urban Phnom Penh followed by three months working in rural agricultural communities in Cambodia during peak mosquito season. According to current travel medicine principles, which aspect of the itinerary is most relevant when assessing the need for Japanese encephalitis vaccination?

- A. The length of time spent in urban Phnom Penh before travelling to rural areas
- B. The combination of prolonged stay in rural agricultural areas during high seasonal transmission risk.
- C. The traveller's occupation as a humanitarian worker regardless of destination
- D. The total number of countries visited during the trip

7. Which traveller would warrant the most comprehensive pre-travel infectious disease risk assessment?

- A. A healthy adult attending a conference in central Auckland for three days
- B. A university student staying in urban Singapore for one week
- C. A backpacker travelling through multiple countries in Africa and Southeast Asia over six months with flexible accommodation plans
- D. A business traveller staying in a major hotel in Tokyo

Case Scenario 5: Travel Vaccination Planning

8. A 35-year-old traveller presents 10 days before departure to Ghana. She requires a valid Yellow Fever vaccination certificate for entry. Her records show one documented dose of MMR vaccine and no contraindications to live vaccines.

Which of the following is the MOST appropriate vaccination strategy?

- A. Administer Yellow Fever vaccine today and defer MMR until after travel.
- B. Administer MMR today and schedule Yellow Fever vaccine after return.
- C. Administer both Yellow Fever and MMR vaccines at the same consultation.**
- D. Administer Yellow Fever vaccine today and MMR 2 weeks later.
- E. Administer Yellow Fever vaccine only because travel vaccines take priority over routine vaccines.

9. A 45-year-old traveller presents 10 days before departure for a 2-month trip through rural South-East Asia. During the consultation, several potentially indicated vaccines are identified, but there is insufficient time to complete every recommended vaccine schedule before departure.

Which of the following is the MOST appropriate principle to guide decision-making?

- A. Delay all vaccination until a full schedule can be completed.
- B. Prioritise vaccines that provide the greatest benefit based on the traveller's specific itinerary and exposures.**
- C. Administer only vaccines required for border entry.
- D. Avoid commencing any vaccine series that cannot be completed before departure.
- E. Prioritise vaccines according to patient age alone.

Following this education activity, how likely are you to modify or enhance your clinical practice relating to measles prevention and travel vaccination?

- Very unlikely
- Unlikely
- Neutral
- Likely
- Very likely