



Suspect **MUMPS**

CLINICAL SIGNS & SYMPTOMS

- Parotitis: pain, tenderness, and swelling in one or both parotid salivary glands
- Non-specific prodromal symptoms (low grade fever, myalgia, anorexia, malaise, headache)



Photo courtesy of AAP Red Book

TRANSMISSION & PERIOD OF COMMUNICABILITY

- Direct contact with respiratory secretions or saliva, or through fomites
- Several days before through nine days after parotitis onset

BEFORE A SUSPECT CASE PRESENTS IN YOUR OFFICE:

- Ensure appropriate documentation of presumptive evidence of immunity (see attached) for all patients and staff

Note: Exposed healthcare workers without evidence of immunity must be excluded from work from day 12 after first unprotected exposure through day 25 after last exposure, **regardless of receipt of MMR vaccine after exposure**

WHEN A SUSPECT CASE PRESENTS IN YOUR OFFICE:

Step 1: Promptly **ISOLATE** patient to avoid disease transmission

Step 2: While the patient is still in your office, **IMMEDIATELY REPORT** suspected mumps case to DOH

- Oahu (Disease Reporting Line) (808) 586-4586
- Maui District Health Office (808) 984-8213
- Kauai District Health Office..... (808) 241-3563
- Big Island District Health Office (Hilo) (808) 933-0912
- Big Island District Health Office (Kona)..... (808) 322-4877
- After hours on Oahu (808) 566-5049
- After hours on neighbor islands (800) 360-2575 (toll free)

Step 3: Collect **LABORATORY SPECIMENS**

- **Buccal swab** for PCR testing (ideally within 3 days & not more than 8 days after parotitis onset)
 - See attached illustration and instructions for collection of buccal fluid
 - Place *synthetic* swab in 2 mL of viral transport medium (Keep cold)
- **Urine** for PCR testing (may not be positive until >4 days after symptom onset)
 - Collect in sterile container [minimum volume 50 mL] (Keep cold)

Note: People with a history of mumps vaccination may not have detectable IgM antibody, *regardless of timing of specimen collection*. Absence of mumps IgM in a vaccinated person with clinically compatible mumps does **not** rule out mumps.

Step 4: Identify **POTENTIALLY EXPOSED CONTACTS** for presumptive evidence of immunity to mumps:

- All Staff (physician, nurse, medical assistant, receptionist)
- Patients/parent/siblings/caregivers with close exposure (e.g., within 3 feet) to case in waiting room/office

Step 5: Provide patient with **POSITIVE TEST RESULTS** and **ISOLATION/EXCLUSION REQUIREMENTS**

- Confirmed cases must be restricted from school, work, travel, public places for 9 days after parotitis onset
- See attached isolation/exclusion requirements for contacts of cases, including exposed healthcare personnel



Illustration of Parotid Gland and Instructions for Collection of Buccal Fluid

Massage the parotid gland area for 30 seconds prior to swabbing the area around Stensen’s duct (photo on right), which is the space near the upper rear molars between the cheek and the teeth. Swab the area between the cheek and gum by sweeping the **synthetic swab** near the upper molar to the lower molar area.

Swabs should be placed in 2 ml of standard viral transport medium (VTM).

Following collection, samples should be maintained at 4°C and shipped on cold packs within 24 hours.

Adapted from the Illinois Dept. of Public Health – Div. of Laboratories (Chicago Virology Section)



Photo courtesy of the Illinois Dept. of Public Health – Div. of Laboratories (Chicago Virology Section)

Urine Specimen

A minimum volume of 50 mL of urine should be collected in a sterile container. Note: urine samples may not be positive for mumps virus until >4 days after symptom onset.

MUMPS – Contacts

	GENERAL	HEALTHCARE PERSONNEL
IDENTIFICATION	<ul style="list-style-type: none"> Persons exposed to case 2 days prior through 9 days (per Hawaii State Law) after onset of parotitis 	<ul style="list-style-type: none"> Personnel with unprotected exposure to mumps case (e.g., within 3 feet of patient without use of proper personal protective equipment)
PRESUMPTIVE EVIDENCE OF IMMUNITY	<ul style="list-style-type: none"> Written documentation of receipt of age-appropriate, valid live mumps virus-containing vaccine; or Laboratory evidence of immunity; or Laboratory confirmation of disease; or Birth before 1957 	<ul style="list-style-type: none"> Written documentation of vaccination with two valid doses of live mumps virus-containing vaccine; or Laboratory evidence of immunity; or Laboratory confirmation of disease
POST-EXPOSURE PROPHYLAXIS AVAILABLE	<ul style="list-style-type: none"> No 	<ul style="list-style-type: none"> No
ISOLATION/EXCLUSION	<ul style="list-style-type: none"> No evidence of immunity: <ul style="list-style-type: none"> Exclude from school, work, travel, public places from day 12 after first unprotected exposure through day 25 after last exposure May resume activities immediately after immunization, if no symptoms of mumps Educate re: symptoms of mumps Presumptive evidence of immunity: <ul style="list-style-type: none"> Do not need to be excluded from school, work, travel, public places Educate re: symptoms of mumps 	<ul style="list-style-type: none"> No evidence of immunity: <ul style="list-style-type: none"> Exclude from work from day 12 after first unprotected exposure through day 25 after last exposure, regardless of receipt of MMR vaccine after exposure Educate re: symptoms of mumps, including non-specific presentations Partial vaccination: <ul style="list-style-type: none"> Personnel with written documentation of only one dose of mumps vaccine may continue working following an unprotected exposure to mumps. Should receive a second dose as soon as possible, but no sooner than 28 days after first dose Educate re: symptoms of mumps, including non-specific presentations Presumptive evidence of immunity: <ul style="list-style-type: none"> Do not need to be excluded from work Educate re: symptoms of mumps, including non-specific presentations