

FOR IMMEDIATE RELEASE 12/12/2017

FOR INFORMATION CONTACT

TO: Grant County Healthcare Providers Grant County Emergency Management Grant County School Nurses Kathleen Nelson, RN, Community Health Nurse Manager 509-766-7960 Ext. 28

Mumps Confirmed in Grant County Healthcare Worker

GRANT COUNTY, WA – Grant County Health Officer, Dr. Alexander Brzezny, issues an alert to inform all healthcare providers of a confirmed case of mumps in a Grant County healthcare worker.

Grant County Mumps Case Investigation

The person with confirmed mumps is a vaccinated healthcare worker with a recent history of travel. The individual developed symptoms on **December 2nd**, **2017**, which means the contagious period was from **November 30th through December 7th**, **2017** (2 days before, 5 days after). During the contagious period the worker was present at two healthcare facilities in Moses Lake: **Samaritan Healthcare (Hospital) and Confluence Health, Moses Lake.**

Approximate locations, dates & times include:

Confluence Health, Moses Lake 11/30/2017 08:30—16:15 12/1/2017 08:30—17:50

12/4/2017 15:00—15:30

Samaritan Healthcare (Hospital) 11/30/2017- 12/1/2017 23:00—3:00

GCHD urges all healthcare providers to test for mumps on any individual with clinical symptoms of mumps, especially in any healthcare worker or patient present in the above-stated locations during the stated times. Anyone with a possible exposure should be monitored for signs and symptoms of mumps and isolated immediately if those symptoms develop. GCHD is recommending that everyone should check their

immunization status and assure immunity for mumps (two doses of MMR vaccine, or positive IgG titer, or birth prior to 1957, or physician documented mumps disease in the past).

GCHD staff are collaborating with healthcare partners from Samaritan Healthcare and Confluence Health to confidentially identify by name all staff and patients who could have been in "close" contact with the ill individual. These individuals will be contacted directly and asked to monitor themselves and their family members for signs and symptoms of mumps through **January 1st, 2018**. Mumps incubation period is usually 12-25 days.

GCHD is asking all clinicians to use a high level of suspicion for mumps in anyone with compatible symptoms. Treating those suspected for mumps requires utilizing isolation, correct and approved testing (PCR buccal swab, urine test), and notification of public health officials. The health district is advising all individuals to



check their family members' and their own vaccination status. Everyone should verify that they are up-to-date with the MMR vaccine series or have another proof of immunity against mumps (see below).

Immunizations:

Two doses of MMR vaccine provides about 88% immunity (one dose about 78% effective). The mumps vaccine is not effective for use as a post-exposure prophylaxis. MMR is contraindicated in pregnancy and other usual immunosuppressed individuals. Even though two doses of MMR are preferred (as per age and indications), the following is sufficient proof of immunity against mumps:

- 1 dose MMR--for preschoolers and low-risk adults, OR
- 2 doses of MMR--for school-age children, college students, international travelers and health care workers, OR
- Serologic evidence of immunity (IgG positive), OR
- Birth before 1957 (not applicable for use among healthcare workers in an outbreak setting), OR
- Evidence of physician-documented prior mumps infection.

Exclusion

All people with symptoms of mumps must be excluded from public places, including workplaces, schools, and/ or child care until they have been evaluated for possible mumps. Those suspected for mumps should be evaluated, tested, and excluded for a minimum of five (5) full days from symptoms onset (day 0).

Healthcare workers exposed to mumps who have no symptoms and no proof of immunity (either at least one MMR administered 28 days prior to the first exposure or other proof of immunity as outlined above) will be excluded from public participation, including from their workplace starting on the 12th day after the first exposure through the 25th day after the last exposure.

Case Definitions

Clinical definition: Acute parotitis or other salivary gland swelling lasting at least 2 days, or orchitis (testicular swelling), or oophoritis (swelling of ovary) unexplained by another more likely diagnosis.

Incubation period: 16-18 days after exposure (range 12-25 days).

- **Suspected:** Parotitis, acute salivary gland swelling, orchitis, or oophoritis unexplained by another more likely diagnosis, OR positive lab result with no mumps clinical symptoms (with or without epilink).
- **Probable:** Acute parotitis or other salivary gland swelling lasting at least 2 days, or orchitis or oophoritis unexplained by another more likely diagnosis, in:

A person with a positive test for serum anti-mumps immunoglobulin M (IgM) antibody, OR

A person with epidemiologic linkage to another probable or confirmed case or linkage to a group/community defined by public health during an outbreak of **mumps**.

- **Confirmed:** A positive mumps laboratory confirmation for mumps virus with reverse transcription polymerase chain reaction (RT-PCR) or culture in a patient with an acute illness characterized by any of the following:
 - o Acute parotitis or other salivary gland swelling, lasting at least 2 days
 - o Aseptic meningitis
 - o Encephalitis
 - Hearing loss
 - o Orchitis
 - Oophoritis

- Mastitis
- o Pancreatitis

Actions Requested

- Be familiar with the symptoms of mumps and maintain vigilance for possible cases, particularly in patients with parotitis.
- Review guidance for immunization of healthcare workers with MMR vaccine and ensure healthcare personnel have documented evidence of mumps immunity (before an exposure):
 - o Documented receipt of 2 doses of MMR (or mumps) vaccine (at least 28 days apart).
 - o Serologic evidence of immunity.
- Review your vaccine inventory and order appropriately.
- Please report suspected cases to GCHD at (509) 766-7960 for investigation and coordination of laboratory testing.

Infection Control Recommendations

- Hospitalized patients should be cared for using droplet precautions until the 6th day after the date of parotitis onset.
- Isolate all cases with parotitis for at least five days or until negative results.
 - Cases (including suspected cases) should stay home and not go to school, work, public places, or social activities until 5 full days have passed since the date of parotitis onset. Family members who are not immune should avoid contact during the time the case is infectious. Healthcare workers with mumps illness should be excluded from work until the 6th day after the onset of parotitis, with the date of onset being day 0.
- Cases should be taught "respiratory etiquette".

Collection of Specimens for PCR Testing

Mumps can be most reliably diagnosed by isolation of mumps virus or detection of mumps nucleic acid by PCR assay from buccal mucosa secretions. In most cases if serologic testing is desired, send serum commercially and **request both IgM and IgG results.**

- On days 0-3 after onset of parotitis, collect a buccal swab only.
- On days 4-10 after onset of parotitis, collect both a buccal swab and urine.
- Please consult with GCHD about what testing can be considered if more than 10 days has elapsed since onset of parotitis.

Testing- Buccal Swab Collection:

- For patients with symptoms of mumps, collect a buccal swab and urine for viral PCR and culture at Washington State Public Health Laboratory. Buccal swab should be collected within 3 days of symptom onset.
- Massage the parotid gland for about 30 seconds prior to collecting the specimen. Place a Dacron swab between rear molars and cheek (on the affected side if parotitis is unilateral) and leave in place 10–15 seconds. Place both swab in a tube containing 2-3 ml of cold viral transport medium (VTM).
- Send serum to commercial lab for mumps IgM and IgG.
- Use droplet precautions (mask and eye protection).
- Ask patients to remain at home for 5-days post symptom onset.

Mumps Reporting Requirements:

Healthcare providers, healthcare facilities, laboratories: notifiable to GCHD within 24 hours suspected case to arrange specimen testing. Call GCHD and speak with a public health nurse if you have and questions- 509-766-7960.

• All requests for mumps testing at Public Health Lab (PHL) must have approval from GCHD.

Mumps Information for Healthcare Providers:

- DOH Mumps Guidelines I WA-DOH
- Manual for the Surveillance of Vaccine-Preventable Diseases, Chapter 9: Mumps I CDC
- Mumps Information for Health Providers I CDC

Consultations:

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