



EPIDEMIOLOGY & SURVEILLANCE

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Suspecting a Mumps Case – Physicians Guide to Diagnosing

Collin County Health Care Services
Business Hours: 972-548-4707 After Hours: 972-547-5350

Suspecting Mumps

- Mumps is a reportable condition per the Texas Department of State Health Services.
- Mumps usually involves pain, tenderness, and swelling in one or both parotid salivary glands (cheek and jaw area). Swelling usually peaks in 1 to 3 days and then subsides during the next week. Nonspecific prodromal symptoms may precede parotitis by several days, including low-grade fever which may last 3 to 4 days, myalgia, anorexia, malaise, and headache.
- If mumps is suspected, contact Collin County Health Care Services immediately for further guidance and to arrange for laboratory testing.
- Do not refer patients to the health department without prior approval.

Laboratory Diagnosis

- Laboratory testing is needed to confirm a case of mumps.
- Per the Centers for Disease Control and Prevention (CDC), healthcare providers should obtain a buccal swab for PCR. IgM serology can also be used to aid in diagnosing mumps, but PCR is preferred.
- The preferred laboratory test in Texas is a buccal swab for PCR.

Buccal Swab PCR

PCR testing for mumps can be ordered through a commercial lab. Using a buccal, massage the parotid gland area for 30 seconds prior to swabbing the area around Stensen's duct.

Materials:

- Viral Transport Media (VTM) and tubes
- Flocked polyester fiber tipped swabs

Serum IgM/IgG

IgM and IgG antibody testing can be ordered through a commercial lab. Please note persons with a history of mumps vaccination may not have detectable mumps IgM antibody regardless of timing of specimen collection.

Materials:

- Red top tubes and serum separator tubes OR gold top OR tiger top tubes.
- Centrifuge

Control Measures Checklist

If you have a suspected mumps case in your facility use the following control measures check list:

- Isolate patient.
- Implement standard and droplet precautions.
- Utilize appropriate PPE.
- Health care staff that were exposed to the case should verify their immunity status to mumps.
- Recommend patient respiratory isolation until 5 days after onset of parotitis.

Reference: Centers for Disease Control and Prevention <https://www.cdc.gov/vaccines/pubs/surv-manual/chpt09-mumps.html#hcp-settings>