

# Questions and Answers

Mumps Outbreak in Schools, Preschools, and Child Cares Webinar  
Conducted on January 10, 2017  
Office of Immunization and Child Profile

---



- 1. Q: How many mumps cases have been reported in Washington? What counties are affected by the mumps outbreak?**  
**A:** The number of cases reported in the current outbreak is higher than the total number of cases reported in any single year in Washington in more than three decades. For the most up-to-date case count in the state and by county, visit [www.doh.wa.gov/mumps](http://www.doh.wa.gov/mumps).
- 2. Q: What percentage of confirmed cases were fully vaccinated with MMR?**  
**A:** Approximately 88% of confirmed and probable cases are up to date with their MMR vaccination.
- 3. Q: Is there any difference in the efficacy of the MMR vaccine versus the MMRV combination vaccine?**  
**A:** Both vaccines are considered to provide the same level of protection.
- 4. Q: What is the most common presenting symptoms in the cases that have been diagnosed?**  
**A:** The most common symptoms have included swelling of the parotid glands (parotitis) under one or both ears, fever, headache, muscle aches and tiredness, and loss of appetite. Some infections can be asymptomatic.
- 5. Q: What should we do if a person has symptoms of mumps?**  
**A:** If a person in your school has mumps symptoms they should be referred to their healthcare provider for evaluation. Additionally, you should contact your local health jurisdiction about a possible mumps case in your school. If the person is confirmed to have mumps he/she should be excluded until 5 days have passed since the symptoms started.
- 6. Q: Should a student who has a personal exemption on file for the MMR vaccine be excluded if a mumps case is confirmed in the school?**  
**A:** Yes, this student is considered susceptible and should be excluded until they receive a dose of MMR or provide proof of immunity. The local health department and the school district will determine the specific exclusion procedures.

  - Susceptible children or staff include:
    - Children with an exemption on file for both mumps vaccine doses.
    - Those who lack documentation of two doses of MMR vaccine for school-aged children, OR one dose of MMR vaccine for children in preschool or child care.
    - Those who lack laboratory evidence of immunity for mumps or laboratory confirmation of mumps disease.
    - Staff who are born before 1957 are presumed to be immune to mumps, so they are NOT required to get MMR vaccine or be tested
- 7. Q: For how many days should susceptible students and/or staff be excluded during a mumps outbreak?**  
**A:** Susceptible asymptomatic children or staff should be excluded through the 26th day after the onset of parotitis (swelling of salivary glands in one or both cheeks that starts front of the ear and can spread down to the neck or jaw), in the last person with mumps in your facility. The LHJ should be consulted when determining this date.
- 8. Q: If someone is excluded and during their exclusion, a "new" case is confirmed in the school, does the exclusion period start over?**

## Questions and Answers

Mumps Outbreak in Schools, Preschools, and Child Cares Webinar  
Conducted on January 10, 2017  
Office of Immunization and Child Profile

---



**A:** Yes, the exclusion period starts over with each new case. Susceptible students and staff should be excluded through 26 days after the onset of parotitis in the last known case in your school.

**9. Q After receiving a dose of MMR vaccine, how soon can staff and/or students return to school?**

**A:** Allow under- or unvaccinated children and staff to return to school, preschool, or child care immediately after receiving a dose of MMR vaccine (i.e., persons with no doses can return after receiving a first dose; persons with one prior dose should receive a second dose).

**10. Q: How long does it take for the MMR vaccine to start building immunity?**

**A:** Mumps immunity does not reliably develop until at least 12 days after the vaccine is received, so vaccination will not prevent mumps in persons already infected. However the vaccine will prevent infection in persons who are not yet exposed or infected and most people who get vaccinated can be considered fully immune within 2-3 weeks.

When mumps has occurred in a school and excluded students are readmitted immediately after they are vaccinated, cases are expected to continue to occur for at least 25 days among newly vaccinated persons who may have been infected before vaccination. If a newly-vaccinated student develops mumps they will be excluded until they are no longer contagious. Once only vaccinated individuals with a lower likelihood of becoming infected and spreading mumps to others are present in the environment, new cases stop happening. This strategy is recommended by CDC and has been highly effective in previous mumps outbreaks.

**11. Q: When should schools start to send out notification letters to the families regarding the mumps outbreak and possible school exclusions?**

**A:** To be proactive, schools without mumps cases can send a letter to families at this time to let them know about the mumps outbreak, possible exclusions, and if their child is missing MMR vaccine. You don't need to get permission from the local health department to send this type of letter. A sample letter is available [here](#).

**12. Q: What is the exclusion protocol for McKinney Vento students?**

**A:** If there is an outbreak such as mumps, etc., and there is a need to exclude **all non-immunized students** from school, then homeless students who have not been immunized can be excluded just as housed students would be. The district, however, cannot single out homeless students and exclude them from school unless all non-immunized students are excluded on the same basis. Additional information can be found here: [www.nche.ed.gov](http://www.nche.ed.gov)

**13. Q: If we have a case in one school, do we consider exclusion in just that one school or do we consider it for all the schools in the district?**

**A:** Work with your local health jurisdiction to determine your exclusion policies and procedures.

**14. Q: If a student gets their first dose of MMR and are in conditional status, can they return to school or do they need to wait 28 days until they receive their second dose of MMR?**

**A:** The student can return to school following their first dose of MMR and do not have to wait until they receive their second dose.

**15. Q: If a staff member does not have immunization records, how do we determine if they need to be excluded?**

**A:** Encourage staff member to get a blood test that can show immunity to mumps (a mumps IgG test), or get a dose of MMR vaccine.

## Questions and Answers

Mumps Outbreak in Schools, Preschools, and Child Cares Webinar  
Conducted on January 10, 2017  
Office of Immunization and Child Profile

---



- 16. Q: Do school staff born before 1957 need titers to prove their mumps immunization status?**  
**A:** Staff who are born before 1957 are presumed to be immune to mumps, so they are not be required to get a blood test to document immunity or to receive the MMR vaccine.
- 17. Q: Do staff need one or two doses of MMR to be considered fully immunized? Is a booster required for staff?**  
**A:** Most staff need one documented dose of MMR to show evidence of immunity. School nurses or child care health consultants are considered high risk, so they should have two documented doses of MMR vaccine, get tested for mumps immunity, or have a statement from a health care provider confirming that they previously had mumps. Staff in general are not recommended to get a booster, but everyone should talk to their healthcare providers about being sure they have routine evidence of immunity.
- 18. Q: Should special precautions be taken with pregnant students and/or staff members?**  
**A:** Since MMR vaccine can't be given to a pregnant students or staff members, these persons should take extra precautions to prevent getting exposed to mumps, including avoiding contact with sick persons if possible. They should wash hands frequently, know the symptoms of mumps, stay home when sick, and notify their healthcare provider immediately if exposed.
- 19. Q: How will I know what local health jurisdiction my school district will need to work with?**  
**A:** Here's a list of all the local health jurisdictions in our state:  
[www.doh.wa.gov/AboutUs/PublicHealthSystem/LocalHealthJurisdictions](http://www.doh.wa.gov/AboutUs/PublicHealthSystem/LocalHealthJurisdictions)
- 20. Q: Whose responsibility is it to track the 26 day exclusion period? School districts or the local health jurisdiction?**  
**A:** If an outbreak occurs at your school, the local health department will work closely with the school district on the exclusion procedures, including determining who should be excluded and when they can return to school. Both school staff and health department staff will determine roles and responsibilities and notification procedures.
- 21. Q: Will local health jurisdictions notify school districts of confirmed cases?**  
**A:** Yes, when the local health jurisdiction receives a report of a mumps case, they will notify the appropriate school district.
- 22. Q: Who has ultimate authority when making decisions about student and staff exclusions? School districts or Health Departments?**  
**A:** The ultimate decision legally lies with the local health officer. Even though the health department has legal authority to protect the public's health, they will work with each school district's administration on specific policies and procedures. These procedures may vary from district to district depending on the circumstances.
- 23. Q: I have a pregnant staff member who in September had titers checked and found out she is not immune to mumps. Baby is due in April, does she need to wait until then to be immunized again?**  
**A:** Yes, she will need to wait until after the baby is born to get MMR vaccine.
- 24. Q: What do we do with the staff who do not develop immunity to mumps even after 3 MMR shots? 2 given during childhood and one as adult.**  
**A:** In discussion about exclusion, staff may be encouraged to get a second dose of MMR vaccine. Once they have documentation of two doses of MMR vaccine, they do not need to be excluded regardless of serologic

## Questions and Answers

Mumps Outbreak in Schools, Preschools, and Child Cares Webinar  
Conducted on January 10, 2017  
Office of Immunization and Child Profile

---



(IgG) test results. A staff member with 2 documented MMR doses and a negative IgG test result should consult with their healthcare provider if an actual mumps exposure occurs.

**25. Q: If there was an outbreak at a school, would the health department notify the parents of exempt students right away with regards to the exclusion or would the school take the first measure in being sure those students did not return to school?**

**A:** The district works with the local health department to determine how parents of students that must be excluded will be notified (e.g. working together to develop an exclusion notification letter). Usually, the school is responsible for the actual notification of parents about exclusion. The district also works with the local health department to determine when students will be allowed to return to school.

**26. Q: As a school nurse, is it our responsibility to know the staff immunization status?**

**A:** This will vary depending on the district. Many times Human Resources works with the school nurse to determine staff immunization status. Please work with the appropriate persons in your district to determine this process.

**27. Q: During the measles outbreak in ~1990, a second MMR was advised for all adults. Why not a second dose now for adults >19yrs?**

**A:** The current general recommendations is for one dose for adults unless they are high risk, such as healthcare workers (including school nurses) and international travelers. During an outbreak, an adult in a high risk setting such as a school where there are mumps cases may receive a recommendation to get a second MMR dose.

If you have a disability and need this document in another format, please call 1-800-525-0127 (TDD/TTY call 711).  
DOH 348-597 January 2017