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From: Carlton, Maria L *HS

Sent: Tuesday, September 26, 2006 9:36 AM

To: CL Clinical Staff Members; CL Registered Nurses; CL Nurse Managers; CL Nurse Practitioner; CL Physician Assistants; Darin, James M *HS; Wandres, Daniel L *HS; Dianas-Hughes, Noel P *HS; CL Medical Center House Staff; Treleaven, Kay *HS

Cc: Childs, Deborah L *HS; Sidebottom, Marge L *HS; 'Susan G. Harris (sgh4c)'

Subject: Important Information on Mumps from Dr. Keri Hall

Importance: High

Background Information

As you may have heard, UVA Student Health diagnosed a probable clinical case of mumps last Friday in a first-year college student. The infectious student has returned to her family home and all individuals exposed to this student are being contacted by the health department. The U.S. is experiencing a large mumps outbreak that began in Iowa and has spread to at least 10 other states. Thus far, the majority of cases in the Midwest have been mild and have occurred in persons aged 18-25 years of age, particularly college students. The significance of the case diagnosed at UVA Student Health on Friday is that it's the first case on a college campus in Virginia, and most other outbreaks began on college campuses. UVA is in close contact with the local and state Health Departments and CDC as the situation evolves.

General information on Mumps

Mumps is an acute viral infection that causes non-specific symptoms including myalgia, anorexia, malaise, headache and fever, followed by acute onset of unilateral or bilateral tender swelling of parotid or other salivary glands in 30-70% of cases. Rarely, complications of mumps infection can include deafness, orchitis leading to male infertility, oophoritis, mastitis, pancreatitis, meningitis/encephalitis, and spontaneous abortion. With the exception of deafness, these complications are more common among adults than children. There is no treatment for mumps, but spread can be controlled using aggressive vaccination and infection control measures.

Transmission of the mumps virus occurs by direct contact with respiratory droplets, saliva, or contaminated fomites. The incubation period is generally 16-18 days (range 12-25 days) from exposure to onset of symptoms. People with mumps are usually considered infectious for 3 to 7 days before until 9 days after onset of swelling of the parotid glands. A less technical explanation about mumps can be found on the CDC web site: <http://www.cdc.gov/nip/publications/VIS/vis-mmr.pdf>

Employee Information

All staff that do not meet the definition of immunity will need to receive MMR vaccine. The health department has developed the following "definition of immunity" for those who work in healthcare facilities.

- Documentation of two doses of mumps-containing vaccine separated by at minimum of 28 days
- Physician diagnosed case (this may be self reported-no documentation required)
- Positive mumps titer (documentation required)

We are rolling out a plan to begin immunizations for physicians and staff who work in the health system. The first wave includes those who work in the following areas. Employees working in other areas will be deferred at this time.

Outpatient

Community Medicine at NR
Univ Physicians, Fontaine
Family Medicine, PCC
Colonnades Medical Associates
KCRC outpatient
OB/GYN, NR
ED
Peds Clinic, NR
Peds Clinic, PCC

Univ Physicians, JABA
Otolaryngology, Fontaine
Family Medicine, Crossroads
Family Medicine, Stoney Creek
Internal Medicine, Orange
OB/GYN, PCC
Teen Health
Peds Clinic Orange
UMA

Inpatient

7C/7W
NICU/Trans
6 Central
8 Central OB

PICU
L&D
KCRC inpatient
NBN

Anyone who works in the above areas who does not meet the definition of immunity will need vaccine (see Immunization Clinic Schedule below). The mumps vaccine (MMR) will be administered at no charge to employees and is expected to be 65-80% effective after one dose and 90% effective after two doses. You will be notified when a second dose of vaccine is available.

Those who do meet the definition of a physician diagnosed case of mumps can go to (<https://www.healthsystem.virginia.edu/intranet/knowledgelink/MMR.doc>), print and complete Box 1, and fax it to Employee Health at (434) 982-0523.

If you decline MMR vaccine at this time you can go to (<https://www.healthsystem.virginia.edu/intranet/knowledgelink/MMR.doc>) complete Box 2 and fax to Employee Health at (434) 982-0523.

Immunization Clinic Schedule

MMR vaccine will be available in the Dining Conference Rooms for those listed above at the following dates and times:

- Tuesday, September 26 1030-1630
- Wednesday, September 27 1000-1630
- Thursday, September 28 select outlying clinics (all outlying clinics listed will receive further information)
- Friday, September 29 0600-1000 and 1800-2030

More times will be identified in the near future.

Walk-in at Employee Health, M-F, 0730-1700, closed Wed., 1200-1300.

Work Med (545 Ray C. Hunt Drive) will have a fast track clinic for physicians or staff at the Fontaine locations listed above, Wednesday, September 27, 1500-1800.

IMPORTANT We have a limited supply of vaccine on hand, more is on the way. It is possible we will need to reschedule some of the above times if we have to wait on additional vaccine. Please watch your email.

Patient Information

If you suspect a **patient** of having mumps infection, please **call Infection Control (924-0260) immediately** for guidance regarding isolation and reporting to the local health department. Do not allow suspected patients to wait in the waiting area, keep them at least three feet from other patients, and request that they wear a surgical mask. Patients should be placed on **Droplet Precautions (Contact/Droplet if < 7 years of age)**.

If you suspect illness in yourself, please notify Employee Health at (924-2013) for further guidance.

The CDC has issued the following guidance for diagnosis of mumps:

Clinical case definition: an illness with acute onset of unilateral or bilateral tender self-limited swelling of the parotid or other salivary gland, lasting 2 or more days, and without other apparent cause.

Laboratory criteria for diagnosis (note that further specifics for obtaining samples will be forthcoming as the health department updates their guidelines):

- Positive serologic test for mumps IgM antibody, OR
- A four-fold rise between acute- and convalescent-phase titers in serum mumps IgG antibody level, OR
- Isolation of mumps virus from a clinical specimen, OR
- Detection of mumps viral RNA by reverse transcription polymerase chain reaction (RT-PCR)

For more information, see CDC's website: <http://www.cdc.gov/nip/diseases/mumps/>.

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