



## Suspect Mumps Case Specimen Submission Instructions

Suspect mumps cases must be reported immediately to the local health department. All suspect mumps cases and specimens submitted for testing must be coordinated with an Oregon State Acute and Communicable Disease Epidemiologist at 971-673-111. Specimens for mumps testing should be sent directly to the **Washington State Public Health Laboratory (WSPHL)**.

Persons suspected of having mumps should have serum drawn and specimens collected for viral isolation and PCR at the time of the first health care provider visit. Providers are encouraged to collect serum, buccal, and oropharyngeal specimens within 3 days of parotitis onset and send to WSPHL.

### SPECIMENS FOR SEROLOGY:

*Among **unvaccinated** persons, if an acute IgM is collected less than 5 days after onset of parotitis and the IgM is negative, mumps cannot be ruled out and a second serum sample collected at least 5 days after onset is recommended.*

### **Serum collection:**

Collect at least 4 ml blood in a red-gray top or red top tube and spin if possible and send at least 2 ml serum for each date of collection.

### SPECIMENS FOR VIRUS ISOLATION AND PCR:

*Although very specific, viral culture and detection of mumps nucleic acid by PCR are not highly sensitive tests. Therefore a negative culture and/or PCR assay cannot rule out the diagnosis of mumps.*

**DO NOT use calcium alginate, cotton or wooden shafted swabs as they inactivate viruses and inhibit PCR reactions and the specimen will be considered UNSATISFACTORY.**

Swab specimens must be collected within 3 – 5 days of onset of parotitis.

**Buccal swab collection:** Massage the parotid gland for about 30 seconds prior to collecting specimen. Simultaneously place **two** Dacron® swabs between rear molars and cheek (both on the affected side if parotitis is unilateral) and leave in place 10–15 seconds. Remove the swabs, snap off the ends at the scored breakpoint and insert **both** swabs in a tube containing 2-3 ml of cold viral transport medium. Ensure that the cap is securely tight and will not leak.

### **Oropharyngeal (throat) swab collection:**

Use a single Dacron® swab to collect secretions from the posterior pharynx and tonsillar areas, avoiding the tongue and teeth. Remove swab, snap off the end at the scored breakpoint and insert in a tube containing 2-3 ml of cold viral transport medium.

### SPECIMEN SUBMISSION:

All clinical specimens must have two patient identifiers, a name **and** a second identifier on both on the specimen label and on the WSPHL virology form. All specimens sent to WSPHL must be accompanied by a completed WSPHL virology form:

<http://www.doh.wa.gov/EHSPHL/PHL/Forms/SerVirHIV.pdf>.

Along with the patient and submitter names, be sure to include the specimen source, date of collection, and immunization history (if known) on the form. For more information on Mumps testing at Washington State Public Health Laboratories, refer to <http://www.doh.wa.gov/notify/guidelines/pdf/mumps>

Before transport ensure that the caps on all tubes are tightly secured and will not leak. Store specimens at 4°C and transport on ice packs as soon as possible to **Washington State Public Health Laboratory**.

### **Send Specimens to:**

Washington State Department of Health, Public Health Laboratories, 1610 NE 150<sup>th</sup> St., PO Box 550501, Shoreline, WA 98155-9701, Phone (206) 418-5400

### **Oregon Contacts:**

For collection supplies contact John Powell at 503-693-4114

For specimen shipping and transport information contact Dina McNulty at 503-693-4123 or go to:

<http://public.health.oregon.gov/LaboratoryServices/SubmittingSamples/Pages/ShippingTransport.aspx>

For disease reporting and general information go to:

<http://public.health.oregon.gov/diseasesconditions/diseasesaz/Lists/Diseases%20AZ%20List/item.aspx?ID=49>