Mumps Surveillance Worksheet

NAME (Last, First)				Hospital Record No.
Address (Street and No.)	City	County	Zip	Phone
Reporting Physician/Nurse/Hospital/Clinic/Lab	Address			Phone

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Mumps Surveillance Worksheet

County	State	Zip

Birth Date — Month / Day / Year

Age — Unk = 999

Age Type — 0 = 0-120 years; 1 = 0-11 months; 2 = 0-52 weeks; 3 = 0-28 days; 9 = Age unknown

Ethnicity — H = Hispanic; N = Not Hispanic; U = Unknown

Race — N = Native Amer./Alaskan Native; A = Asian/Pacific Islander; B = African American; W = White; O = Other; U = Unknown

Sex — M = Male; F = Female; U = Unknown

Event Date — Month / Day / Year

Event Type — 1 = Onset Date; 2 = Diagnosis Date; 3 = Lab Test Date; 4 = Reported to County; 5 = Reported to State or MMWR Report Date; 9 = Unknown

Outbreak Associated — Unk = 999

Reported — Month / Day / Year

Imported — 1 = Indigenous; 2 = International; 3 = Out of State; 9 = Unknown

Report Status — 1 = Confirmed; 2 = Probable; 3 = Suspect; 9 = Unknown

CLINICAL DATA

Parotitis? — Y = Yes; N = No; U = Unknown

Notes:

COMPLICATIONS

Meningitis? — Y = Yes; N = No; U = Unknown

Deafness? — Y = Yes; N = No; U = Unknown

Orchitis ? — Y = Yes; N = No; U = Unknown

Encephalitis? — Y = Yes; N = No; U = Unknown

Death? — Y = Yes; N = No; U = Unknown

Other Complications? — Y = Yes; N = No; U = Unknown

If Yes, Please Specify:

Hospitalized? — Y = Yes; N = No; U = Unknown

Days Hospitalized — 0 - 998; 999 - Unknown

LABORATORY

Was Laboratory Testing For Mumps Done? — Y = Yes; N = No; U = Unknown

Date IgM Specimen Taken — Month / Day / Year

Result — P = Positive; E = Pending; N = Negative; X = Not Done; I = Indeterminate; U = Unknown

Date IgG Acute Specimen Taken — Month / Day / Year

Date IgG Convalescent Specimen Taken — Month / Day / Year

Result — P = Significant Rise in IgG; N = No Significant Rise in IgG; I = Indeterminate; E = Pending; X = Not Done; U = Unknown

Other Lab Result — P = Positive; N = Negative; I = Indeterminate; X = Not Done; E = Pending; U = Unknown

Specify Other Lab Method:

VACCINE HISTORY

Vaccinated? (Received mumps-containing vaccine?) — Y = Yes; N = No; U = Unknown

Vaccination Date (Month / Day / Year)	Vaccine	Vaccine Type	Manuf.	Lot Number

Vaccine Type Codes — A = MMR; B = Mumps; O = Other; U = Unknown

Vaccine Manufacturer Codes — M = Merck; O = Other; U = Unknown

Number of doses received ON or AFTER 1st birthday

If Not Vaccinated, What Was The Reason?

1 = Religious Exemption
2 = Medical Contraindication
3 = Philosophical Objection
4 = Lab. Evidence of Previous Disease
5 = MD Diagnosis of Previous Disease
6 = Under Age For Vaccination
7 = Parental Refusal
8 = Other
9 = Unknown

EPIDEMIOLOGIC

Date First Reported to a Health Department — Month / Day / Year

Date Case Investigation Started — Month / Day / Year

Outbreak Related? — Y = Yes; N = No; U = Unknown

If Yes, Outbreak Name

Transmission Setting (Where did this case acquire mumps?)

1 = Day Care
2 = School
3 = Doctor's Office
4 = Hospital Ward
5 = Hospital ER
6 = Hospital Outpatient Clinic
7 = Home
8 = Work
9 = Unknown
10 = College
11 = Military
12 = Correctional Facility
13 = Church
14 = International Travel
15 = Other

If Other, Specify Transmission Setting:______________________________

Were Age and Setting Verified? (Is age appropriate for setting, i.e. aged 49 years and in day care, etc.) — Y = Yes; N = No; U = Unknown

Source of Exposure For Current Case (Enter State ID if source was an in-state case; enter Country if source was out of U.S.; enter State if source was out-of-state)

Epi-Linked to Another Confirmed or Probable Case? — Y = Yes; N = No; U = Unknown

[dotted box] Indicates epidemiologically important items not yet on NETSS screen

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Notes/Other information:

Clinical Case Definition (1999):
An illness with acute onset of unilateral or bilateral tender, self-limited swelling of the parotid or other salivary gland, lasting = 2 days, and without other apparent cause.

Case Classification (1999):
***Probable*: a case that meets the clinical case definition, has noncontributory or no serologic or virologic testing, and is not epidemiologically linked to a confirmed or probable case.**
***Confirmed*: a case that is laboratory confirmed or that meets the clinical case definition and is epidemiologically linked to a confirmed or probable case. A laboratory-confirmed case does not need to meet the clinical case definition.**