



Health, Housing, and Community Services Department

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## HEALTH ADVISORY

### Mumps: Clinical Guidance for Healthcare Providers March 6, 2026

**ALERT** – conveys the highest level of importance; warrants immediate action or attention.

**ADVISORY** – provides important information for a specific incident or situation; may not require immediate action.

**UPDATE** – provides updated information regarding an incident or situation; unlikely to require immediate action.

City of Berkeley Public Health is issuing this Public Health Advisory following two recently reported mumps cases at Berkeley High School. The timing of the two cases raises the possibility of transmission on campus from one individual to another. At this time, there is no evidence of community-wide spread of Mumps nor is there evidence of an outbreak. This Advisory is being released so that clinicians have guidance in case they encounter patients from Berkeley High school or their contacts with possible Mumps symptoms. The date of the potential exposure at Berkeley High School was February 19 and February 20. The incubation period for Mumps is up to 25 days. Symptoms should be monitored for 25 days after last exposure.

Out of appropriate clinical caution, please include Mumps in the differential diagnosis for patients with parotitis or compatible symptoms, regardless of vaccination status, and verify that patients are up-to-date on the 2-dose MMR series.

Below is guidance for diagnosis, testing, infection control, reporting, and vaccination in accordance with CDC and CDPH Mumps recommendations.

#### **1. When to Suspect Mumps**

Please consider **Mumps** in any patient—regardless of vaccination status—with:

*A Vibrant and Healthy Berkeley for All*

1947 Center Street, Berkeley, CA 94704 ♦ Tel: 510.981.5292 ♦ Fax: 510. 981.5345 ♦ E-mail: [PHOU@berkeleyca.gov](mailto:PHOU@berkeleyca.gov)

- Acute **unilateral or bilateral parotitis**
- Swelling of other salivary glands
- Fever, headache, myalgias, or malaise with facial swelling
- Orchitis/oophoritis, mastitis, pancreatitis, hearing changes, meningitis, or encephalitis **with or without parotitis**
- Exposure to Berkeley High School on or after **February 19, 2026 and February 20, 2026**

**Important:** Vaccinated persons may have **mild or atypical** symptoms. Lack of parotitis does *not* rule out mumps.

## **2. Required Testing – PCR is Preferred**

**Collect specimens immediately when mumps is suspected.** Specimens can be sent to the commercial lab of preference by the provider.

Follow CDC and CDPH guidance:

### **A. rRT-PCR (preferred)**

- Collect a **buccal swab**, ideally **≤3 days after parotitis onset**, but acceptable up to 9 days.
- Massage the parotid gland for 30 seconds before swabbing.

### **B. If >3 days since onset**

Collect BOTH:

- Buccal swab for rRT PCR
- Serum for IgM (supportive, *not* confirmatory)
- IgM may not be detectable in the first few days of illness and is often negative in previously vaccinated individuals.

### **C. If complications present without parotitis**

(e.g., orchitis, meningitis, hearing loss)

- Collect buccal rRT PCR and serum IgM

### **3. Isolation Guidance**

Patients with **suspected or confirmed mumps** must:

- **Self-isolate for 5 days** after onset of parotid or salivary gland swelling
- Droplet precautions should be used during isolation to prevent transmission.
- If no parotitis: 5 days after first symptom (e.g., fever, orchitis)

They should avoid school, childcare, extracurriculars, and congregate settings during this period.

### **4. Management of Exposed Patients**

For asymptomatic persons with known exposure (e.g., Berkeley High students):

- Monitor for symptoms for **25 days after last exposure**. The date of possible exposure at Berkeley High School was February 19, 2026 or February 20, 2026.
- Check for documentation of proper mumps immunization. Serologic testing (titers, IgG) is not recommended for asymptomatic exposed individuals as serology does not reliably predict immunity. Documented age-appropriate vaccination supersedes serologic test results. Even persons with negative or equivocal mumps titers who have received 2 documented MMR doses should be considered immunized and do not need additional vaccinations.
- Encourage masking if coughing or sneezing.
- If symptoms develop, immediately isolate and seek PCR testing

#### **Post-exposure prophylaxis (PEP)**

- **PEP with MMR is NOT recommended after mumps exposure**, as MMR does not prevent mumps infection after exposure has already occurred.
- Vaccination is still recommended for **future** protection **AND for the added benefit of protecting against measles**.
- A third dose of MMR is not recommended in this situation.

## **5. Vaccination Guidance**

### **A. Children and adolescents**

- Ensure **2 documented MMR doses**
- If patient has **0 or 1 dose**, provide MMR vaccination unless contraindicated. Ensure the two doses are given at least 28 days apart.
- Do NOT use serologic IgG testing to determine immunity.
- For more information on immunization please visit: [Mumps Vaccine Recommendations | Mumps | CDC](#)

## **6. Reporting Requirements**

### **Immediately report:**

- **Suspected, probable, or confirmed** mumps cases
- To: **City of Berkeley Communicable Disease Program 24/7 at Phone: 510-981-5292** and via email through [COBCD@berkeleyca.gov](mailto:COBCD@berkeleyca.gov)
- Please report **even if laboratory confirmation is pending**

### Public Health may reach out for:

- Contact tracing information
- Updated clinical status
- Lab specimen details

## **7. Clinical Considerations**

- Up to **20%** of cases of mumps may be asymptomatic
- Vaccinated individuals can still develop mumps, but **complications are significantly reduced**
- Severe complications (rare): orchitis, oophoritis, pancreatitis, meningitis, encephalitis, hearing loss

## **8. When to Seek Public Health Consultation**

### Please call us if:

- You need help determining if a patient requires testing

- You suspect a complication
- Two or more patients from the same school/community present with parotitis
- You need guidance on isolation or return-to-school criteria

### **Clinical Contact**

#### **City of Berkeley Communicable Disease Program**

- Confidential Phone: 510-981-5292 call us 24/7
- Confidential Fax: 510-981-5345
- Email: [COBCD@berkeleyca.gov](mailto:COBCD@berkeleyca.gov)