



State of California—Health and Human Services Agency
Department of Health Services



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Governor

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TO: California Vaccines for Children (VFC) Program Providers

FROM: Howard Backer, M.D., M.P.H., Chief
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SUBJECT: Updated Mumps Immunization Recommendations

The federal Advisory Committee on Immunization Practices, Centers for Disease Control and Prevention, and the American College Health Association have recently issued revised immunization recommendations in response to the large mumps outbreak primarily affecting Midwestern states. California Department of Health Services (CDHS) endorses these national recommendations, many of which are summarized and modified as follows:

Colleges and other post-secondary institutions

- All college students should provide documentation of having received two doses of MMR vaccine or of other acceptable evidence of immunity to measles, mumps and rubella.
- All colleges should collect written or electronic documentation of their students' immunization status. CDHS further recommends that all colleges have a system for reviewing and maintaining these records. Electronic immunization records of many children in California are kept in regional immunization registries. Colleges in California should contact their regional immunization registry about tracking students' immunization records. To locate your regional immunization registry, go to <http://www.ca-siis.org/>, under "Find My Registry."
- Colleges should consider implementing a policy of deferred registration for classes until students provide documentation of having received two doses of MMR vaccine or other acceptable evidence of immunity to measles, mumps and rubella.

- During the late spring or summer, students should be made aware of any current recommendations, requirements or enforcement procedures before the start of the fall semester. Including parents in these communications will likely improve compliance with an MMR vaccine requirement.

Health care workers

- All health care workers should have documentation of having received two doses of MMR vaccine or other acceptable evidence of immunity to measles, mumps and rubella.
- Health care employers should maintain documentation of their employees' immunity to measles, mumps and rubella. In many settings, this will mean adding documentation of immunity to mumps to existing records on immunity to measles and rubella.
- Because birth before 1957 is only presumptive evidence of immunity, health care facilities should consider recommending one dose of MMR vaccine for workers born before 1957 who do not have other evidence of immunity to mumps. During an institutional or community outbreak of mumps, health care facilities should strongly consider recommending two doses of MMR vaccine to unvaccinated workers born before 1957 who do not have other evidence of mumps immunity.

Summer camps

CDHS recommends that

- All campers and camp staff should provide documentation of having received two doses of MMR vaccine or other acceptable evidence of immunity to measles, mumps and rubella. All camps should maintain copies of this documentation.

Other high-risk settings

CDHS recommends that

- All persons in other high-risk settings, including
 - students in grades K-12
 - international travelers
 - persons residing in institutional facilitiesshould have documentation of having received two doses of MMR vaccine or other acceptable evidence of immunity to measles, mumps and rubella.

Acceptable evidence of immunity to measles, mumps and rubella

In the absence of an outbreak, acceptable presumptive evidence of immunity to measles, mumps and rubella includes at least one of the following:

- 1) documentation of adequate vaccination after the first birthday with live vaccine against measles, mumps and rubella viruses, preferably MMR:
 - For measles and mumps:
 - At least 1 dose for preschool-aged children and adults not at high risk
 - 2 doses for school-aged children (i.e., grades K-12) and for adults at high risk (i.e., health care workers, international travelers, and students at post-high school educational institutions)
 - For rubella:
 - At least 1 dose
 - Other notes:
 - A second dose of MMR should be administered no earlier than 28 days after the first dose.
 - MMRV vaccine can be considered instead of MMR for children aged 12 months to 12 years for whom varicella vaccination is also indicated. Any second dose of MMRV should be administered no earlier than 3 months after the first dose of MMRV.
- 2) laboratory evidence of immunity
- 3) birth before 1957, except for
 - health care workers (see above)
 - women who could become pregnant, who require additional evidence of immunity to rubella
- 4) documentation of physician-diagnosed measles, mumps or rubella.

Additional Information:

- Advisory Committee on Immunization Practices:
<http://www.cdc.gov/mmwr/preview/mmwrhtml/mm55e601a1.htm>
- Centers for Disease Control and Prevention:
<http://www.cdc.gov/nip/diseases/mumps/>
<http://www.cdc.gov/nip/diseases/mumps/ACHAguidance-ltr.pdf>
- American College Health Association:
<http://www.acha.org/ACHAMumpsSignedFinal.pdf>
http://www.acha.org/mumps_06.cfm
- Iowa Department of Public Health:
<http://www.idph.state.ia.us/adper/mumps.asp>

- California Code of Regulations Title 17 Section 307000 - Organized Camps
http://www.dhs.ca.gov/ps/ddwem/environmental/Rec_Health/PDFs/DraftR-15-97_9-20-02%20version.PDF

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