

## Infectious Disease Control Unit, Texas Department of State Health Services 1100 West 49th St., Austin, TX 78756 (512) 458-7676 (512) 458-7616 fax

Mumps Case Track Record	FINAL STATUS:  CONFIRMED  RULED OUT/ DROPF	PROBABLE NBS PATIENT ID#: PED
Patient's Name:last Address:County:Region:Phone: ( )Phone: ( Address:Phone: ( Address:Phone: ( )	Zip:	Reported By:         Agency:         Phone: ( )         Date:      //
DEMOGRAPHICS:       DATE OF BIRTH:		SEX: ☐ Male ☐ Female ☐ Unknown can ☐ Unknown ☐ Other:
CLINICAL DATA: DATE OF ONSET://  COMPLICATIONS:   Meningitis  Deafness  Hospitalized at:	Orchitis   Encephaliti	Set Date:        /
Probable Exposure  Probable Exposure  -25 D ays -12 D		enter dates for probable exposure and communicable periods.  Period of Communicability  2 Days Parotitis +5 Days +9 Days Ons et
		□ Previous Disease - Lab Confirmed
Where did this case acquire mumps?: □ Day-care □ : □ Hospital Outpatient □ Military □ Jail □ Church □     Has any travel occurred within the exposure period? □ : □ Importation Class: □ Indigenous □ International □ C     Is case traceable within 2 generations to international importance.	School □ College □ Worl □ International Travel □ Yes □ No □ Unknown If Out-of-state □ Unknown nport? □ Yes □ No □	If imported, from what country/state:

Revised 05/2007 Stock # F11-10869

e:								
BORATORY.		er:		□ Unknown	Phone: (	)		
IgG: Dat	te specimen collected: _ te acute collected: irus Isolated: Type of s	_// Resi	ult: Date co					
•	y results called to local i	g .		Unknown ed:/	/ In	ıtials:		
USEHOLD (	CONTACTS: Were Co	ntrol Activities Initiate	d?: □ Yes □ No	□ Unknown	If no, explain	:		
Name Relation to Case Age Mumps Disease History			isease History		Mumps Vac	cine Histo	ry	
				☐ Unknown	☐ 2 MMR	□ 1 MMR	□ None	□ Unknowr
			□ No		□ 2 MMR	□ 1 MMR	☐ None	□ Unknowr
			□ No		□ 2 MMR	□ 1 MMR	☐ None	☐ Unknowr
		□ Yes	□ No	☐ Unknown	□ 2 MMR	□ 1 MMR	☐ None	□ Unknowr
		□ Yes	□ No	☐ Unknown	□ 2 MMR	□ 1 MMR	☐ None	□ Unknowr
		□ Yes		□ Unknown	□ 2 MMR	□ 1 MMR	☐ None	□ Unknowr
	READ CONTACTS:				,,			
me	Relation to Case		isease History	Mumps Vaccine History				
			No	Unknown	2 MMR	1 MMR	None	Unknown
		Yes	No	Unknown	2 MMR	1 MMR	None	Unknown
		Yes	No	Unknown	2 MMR	1 MMR	None	Unknown
		Yes	No	Unknown	2 MMR	1 MMR	None U	Jnknown
		Yes	No	Unknown	2 MMR	1 MMR	None	Unknown
		Yes	No	Unknown	2 MMR	1 MMR	None	Unknown
estigator's N	lame:		Agen	cy name:				
one: ( )		Date In	vestigation Initiated:		Date (	Completed	d:	//_
•			•			Completed	d:	J

Revised 05/2007 Stock # F11-10869