

## STUDENT IMMUNIZATION RECORD

Semester:	FALL:_						
SPRING:							
SU	MMER:						

## **RETURN IMMUNIZATION FORM TO:**

SUNY Orange WELLNESS Center 115 South St., Middletown, NY 10940 P: (845) 341-4870 F(845) 341-4872

LAST NAME	FIRST NAME				MIDDLE INITIAL		
ADDRESS:				 CITY		ZIP	
DATE OF BIRTH: ID Number: A				номе рно	NE:		
					NE:		
NYS Public Health law states that all	students n	nust meet	the follow	ving immunization re	equiremen	ts	
ENINGITIS RESPONSE (COMPLETE BY STUDENT/PARI	NT FOR	MINOR)	(Vaccine	is optional, but a re	sponse is r	equired)	
Check a	ppropria	te box a	nd sign b	elow			
have/my child has:							
[ ] HAD the meningococcal meningitis immunizate	tion withir	the past	10 years.				
DATE Immuniz	ation rece	eived:			(attach M	ledical Documentation)	
[ ] read, or had explained to me, the information	(see reve	rse side) r	egarding r	meningococcal Meni	ngitis disea	se. I understand the risk	
of not receiving the vaccine. I have decided the	nat I (my c	hild) <b>WILI</b>	. NOT obt	ain immunization ag	ainst Meni	ngitis disease at this time.	
SIGNED:		_DATE					
be completed by Health Care Professional (MD	. PΔ. NF	P. RN)					
MMUNIZATION/DISEASE	DOSE	Dose	Dose	Disease History	Titer	Titer Result*	
7 10 10 10 10 10 10 10 10 10 10 10 10 10	#1	#2	#3	(Medically	Date	Attach ALL	
EQUIRED:	Date	Date	Date	Documented)		Laboratory Results	
MR (Measles, Mumps, Rubella) 2 Doses required ON							
r AFTER 12 months of age. The second MMR vaccine							
nust be 30 days after the first vaccine. MMR							
equirement is only for those born on or after 01/01/57.							
fter 1/1/68 – vaccines must be "LIVE"							
OR			I	T			
MEASLES (Rubeola) 2 Doses REQUIRED				Disease Date:	MD Sign	ature	
NUMPS 1 Dose REQUIRED				Disease Date:	MD Sign	MD Signature:	
IOMI 5 1 DOSC NEQUINED				Discuse Date.	wid Signature.		
UBELLA (German Measles) 1 Dose REQUIRED				Disease Date:	MD Signature		
				Disease History		Titer Result*	
ADDITIONAL RECOMMENDED IMMUNIZATION	ONS			(Medically	Date	Attach ALL	
TD (within last 10 years)				Documented)		Laboratory Results	
TDap (within last 10 years)							
HEPATITIS "B" – required 3 doses for all students or					1		
attach lab report showing evidence of immunity							
(Hep.B Antibody)							
VARICELLA (Chickenpox) or (Varicella Titer							
- attach a copy of lab report)							
Recommended if you are not immune							
Il equivocal results require an additional vaccine.						For Office Use Only	
vider Name (printed):			PROVII	DER STAMP:		roi Onice Ose Only	
vider Signature:						nt'dNCNPNN	
ne Number:						etter Sent ction needed	
no namber					1 1		



## MENINGOCOCCAL MENINGITIS FACT SHEET

What is meningococcal disease? Meningococcal disease is a severe bacterial infection of the bloodstream or meninges (a thin lining covering the brain and spinal cord) caused by the meningococcus germ.

Who gets meningococcal disease? Anyone can get meningococcal disease, but it is more common in infants and children. For some adolescents, such as first-year college students living in dormitories, there is an increased risk of meningococcal disease. Every year in the United States approximately 2,500 people are infected and 300 die from the disease. Other persons at increased risk include household contacts of a person known to have had this disease, immunocompromised people, and people traveling to parts of the world where meningococcal meningitis is prevalent.

**How is the meningococcus germ spread?** The meningococcus germ is spread by direct close contact with nose or throat discharges of an infected person.

What are the symptoms? High fever, headache, vomiting, stiff neck and a rash are symptoms of meningococcal disease. The symptoms may appear two to 10 days after exposure, but usually within five days. Among people who develop meningococcal disease, 10 to 15 percent die, in spite of treatment with antibiotics. Of those who live, permanent brain damage, hearing loss, kidney failure, loss of arms or legs, or chronic nervous system problems can occur.

What is the treatment for meningococcal disease? Antibiotics, such as penicillin G or ceftriaxone, can be used to treat people with meningococcal disease.

Should people who have been in contact with a diagnosed case of meningococcal meningitis be treated? Only people who have been in close contact (household members, intimate contacts, health care personnel performing mouth-to-mouth resuscitation, daycare center playmates, etc.) need to be considered for preventive treatment. Such people are usually advised to obtain a prescription for a special antibiotic (rifampin, ciprofloxacin or ceftriaxone) from their physician. Casual contact, as might occur in a regular classroom, office or factory setting, is not usually significant enough to cause concern.

Is there a vaccine to prevent meningococcal meningitis? There are three vaccines available for the prevention of meningitis. The preferred vaccine for people ages 2-55 years is Meningococcal conjugate vaccine (MCV4). This vaccine is licensed as Menactra (Sanofi Pasteur) and Menveo (Novartis). Meningococcal polysaccharide vaccine (MPSV4; Menomune [Sanofi Pasteur]), should be used for adults ages 56 and older. The vaccines are 85 to 100 percent effective in preventing the four kinds of meningococcus germ (types A, C, Y, W-135). These four types cause about 70 percent of the disease in the United States. Because the vaccines do not include type B, which accounts for about one-third of cases in adolescents, they do not prevent all cases of meningococcal disease.

Is the vaccine safe? Are there adverse side effects to the vaccine? The three vaccines available to prevent meningococcal meningitis are safe and effective. However, the vaccines may cause mild and infrequent side effects, such as redness and pain at the injection site lasting up to two days.

Who should get the meningococcal vaccine? The vaccine is routinely recommended for all adolescents ages 11-12 years, all unvaccinated adolescents 13-18 years, and persons 19-21 years who are enrolling in college. The vaccine is also recommended for people ages 2 years and older who have had their spleen removed or have other chronic illnesses, as well as some laboratory workers and travelers to endemic areas of the world.

**How do I get more information about meningococcal disease and vaccination?** Contact your physician or The Wellness Center. Additional information is also available:

New York State Department of Health <a href="www.health.state.ny.us/">www.health.state.ny.us/</a>
The Centers for Disease Control and Prevention <a href="www.cdc.gov/DiseasesConditions/">www.cdc.gov/DiseasesConditions/</a>
American College Health Association <a href="www.acha.org/Topics/meningitis.cfm">www.acha.org/Topics/meningitis.cfm</a>