ST. FRANCIS COLLEGE
THE SMALL COLLEGE OF BIG DREAMS

IMMUNIZATION REQUIREMENT FORM

ALL STUDENTS ENROLLED FOR 6 OR MORE CREDITS MUST COMPLETE THIS FORM.

Students will not be allowed to register or attend classes unless they submit this completed form. If any portion of this document is illegible, it will not be processed. Please submit copies of all supporting documentation and keep originals for your records. Supporting documentation does not preclude the completion of this form. **Please print all information.**

PART ONE: STUDENT INFORMATION

First semester at St. Francis College: ⬡ FALL ⬡ SPRING ⬡ SUMMER YEAR ___ ___ ___ ___

Student ID #:___ ___ ___ ___ ___ ___ ___

_____ __ __/__ __/__ __ __ __

LAST NAME FIRST NAME MIDDLE INITIAL DATE OF BIRTH

_____ (__ __ __) __ __ __ -__ __ __ __

SFC E-MAIL ADDRESS PHONE NUMBER

PART TWO: MENINGOCOCCAL MENINGITIS To be completed by student.

Check ONE of the boxes and sign below. I have (for students under the age of 18: My child has):

⬡ had the meningococcal meningitis immunization within the past 5 years. The vaccine record is attached. *[Note: The Advisory Committee on Immunization Practices recommends that all first-year college students up to age 21 years should have at least 1 dose of Meningococcal ACWY vaccine not more than 5 years before enrollment, preferable on or after their 16th birthday, and that young adults age 16 through 23 years may choose to receive the Meningococcal B vaccine series. College and university students should discuss the Meningococcal B vaccine with a healthcare provider.]*

⬡ read, or have had explained to me, the information regarding meningococcal disease. I (my child) will obtain immunization against meningococcal disease **within 30 days** from my private health care provider or [ENTER NAME OF OTHER HEALTH FACILITY]: _____

⬡ read, or have had explained to me, the information regarding meningococcal disease. I understand the risks of not receiving the vaccine. I have decided that I (my child) will not obtain immunization against meningococcal disease.

_____ _____

SIGNED (student Signature or Parent/Guardian if student is a minor) DATE

PART THREE: MEASLES, MUMPS, RUBELLA To be completed by a health care provider.

NOTE: If you were born BEFORE January 1, 1957, please proceed to the birth exemption section below.

MMR VACCINATION: MMR DOES #1 __ __/__ __/__ __ *

MMR DOSE #2 __ __/__ __/__ __

*Please note that the first MMR/Measles Dose must be on or after your 1st birthday.

-OR-

	Dose #1	Dose #2
Measles	__ __/__ __/__ __	__ __/__ __/__ __
Mumps	__ __/__ __/__ __	xxxxxxxxxxxxx
Rubella	__ __/__ __/__ __	xxxxxxxxxxxxx

-OR-

ANTIBODY TITERS:

Measles __ __/__ __/__ __ Result _____

Mumps __ __/__ __/__ __ Result _____

Rubella __ __/__ __/__ __ Result _____

HISTORY OF DISEASE: This must be verified below by a medical provider.

Measles __ __/__ __/__ __ Mumps __ __/__ __/__ __

Rubella xxxxxxxxxxxxx

EXEMPTIONS:

⬡ **Religious Exemption:** If a student has a deeply held aversion to receiving vaccinations for religious reasons, a letter signed by the student stating the same is required.

⬡ **Medical Exemption:** ⬡ Temporary ⬡ Permanent

Requires a letter from health care provider detailing conditions.

⬡ **Birth Exemption:** Proof of birth prior to January 1, 1957 must be submitted with this form.

Health Care Provider Information:

Name (print): _____

Signature: _____ Date: _____

Phone Number: (__ __ __) __ __ __ -__ __ __ __

Place Official Stamp and/or License Number HERE

For Office Use-Immunization Compliance Use Only

Received: _____ Entered: _____ Health Svc. Rep: _____ Missing Info: Y N

INSTRUCTIONS FOR IMMUNIZATION AND MENINGITIS DOCUMENTATION FORM

Return the signed and completed form by mail or fax to:

Office of Admissions
180 Remsen Street
Brooklyn, NY 11201

718.802.0453

Return by the following dates:

Fall Entry term - 1st day semester
Spring Entry Term - 1st day of semester
Summer Entry Term - 1st day of semester

STUDENTS WILL NOT BE ALLOWED TO REGISTER FOR ADDITIONAL CLASSES UNLESS COMPLETED FORMS HAVE BEEN SUBMITTED OR IF THEY DO RECEIVE A PERMISSION AS OUTLINED BY NYS LAW AND DO NOT COMPLY BY DEADLINES, WILL BE RESPONSIBLE FOR ANY FINES INCURRED.

PART ONE: To be filled out completely by the student. Please make sure to provide us with your Student Identification Number, a phone number you can be reached, and your assigned St. Francis e-mail address. Requests for any additional information will be made via your St. Francis e-mail address or phone.

PART TWO: MENINGOCOCCAL MENINGITIS

To be filled out completely by the student.

On July 22, 2003, Governor Pataki signed New York State Public Health Law (NYS PHL) 2167 requiring institutions, including colleges and universities, to distribute information about meningococcal disease and vaccination to all students meeting the enrollment criteria, whether they live on or off campus.

St. Francis College is required to maintain a record of the following for each student:

- A response to receipt of meningococcal disease and vaccine information signed by the student or the student's parent or guardian. This must include information on the availability and cost of meningococcal meningitis vaccine (Menactra or Menomune);

AND EITHER

- A record of meningococcal meningitis immunization within the past 10 years signed by a licensed health care provider

(required for first-year dormitory resident students):

OR

- An acknowledgment of meningococcal disease risks and refusal of meningococcal meningitis immunization signed by the student or student's parent or guardian.

EXCLUSION: Students not in compliance with providing vaccination information or students with medical or religious exemptions, are required to be excluded from the campus, should a disease outbreak occur.

PART THREE: Measles, Mumps, Rubella (MMR)

To be filled out completely by health care provider.

New York State requires degree-seeking students born on or after January 1, 1957, to provide the university with documentation of immunity to measles, mumps and rubella (MMR). These highly contagious diseases can cause severe health problems.

You must provide proof of having received 2 measles, 1 mumps, and 1 rubella vaccination. The dates of these vaccinations must be indicated and the first measles vaccination must have been received on or after your first birthday.

Please note that any supporting documentation must have been either signed or stamped by a hospital or medical provider or, in the case of prior high school or university records, stamped by an official of that institution. **An original signature or stamp must appear on the documentation.** Faxes will be accepted as long as they are received directly from a health care provider, high school, or university/college.

In addition, supportive documentation must be accompanied by this form. ALL SUPPORTING DOCUMENTATION MUST CLEARLY SHOW THE DATES OF YOUR VACCINATIONS ON THEM.

If you have had either the measles or mumps in the past, no proof of vaccination will be necessary. However, we will require that you indicate when you contracted the disease and it **must be verified by a health care provider or it will not be accepted.**

Another way to prove compliance is through a Blood Antibody Titer test that measures the level of measles, mumps, and rubella antibodies in your blood. We require that all students have a health care provider attest on this form that the titer results show immunity. Please note that an equivocal result will not be accepted as complaint.

MENINGOCOCCAL DISEASE
FACT SHEET

What is meningococcal disease?

Meningococcal disease is caused by bacteria called Neisseria meningitidis. It can lead to serious blood infections. When the linings of the brain and spinal cord become in flamed, it is called meningitis. The disease strikes quickly and can have serious complications, including death.

Anyone can get meningococcal disease. Some people are at higher risk. This disease occurs more often in people who are:

- Teenagers or young adults
- Infants younger than one year of age
- Living in crowded settings, such as college dormitories or military barracks
- Traveling to areas outside of the United States, such as the "meningitis belt" in Africa
- Living with a damaged spleen or no spleen
- Being treated with Soliris® or, who have complement component deficiency (an inherited immune disorder)
- Exposed during an outbreak
- Working with meningococcal bacteria in a laboratory

What are the symptoms?

Symptoms appear suddenly – usually 3 to 4 days after a person is infected. It can take up to 10 days to develop symptoms. Symptoms may include:

- A sudden high fever
- Headache
- Stiff neck (meningitis)
- Nausea and vomiting
- Red-purple skin rash
- Weakness and feeling very ill
- Eyes sensitive to light

How is meningococcal disease spread?

It spreads from person-to-person by coughing or coming into close or lengthy contact with someone who is sick or who carries the bacteria. Contact includes kissing, sharing drinks, or living together. Up to one in 10 people carry meningococcal bacteria in their nose or throat without getting sick.

Is there treatment?

Early diagnosis of meningococcal disease is very important. If it is caught early, meningococcal disease can be treated with antibiotics. But, sometimes the infection has caused too much damage for antibiotics to prevent death or serious long-term problems. Most people need to be cared for in a hospital due to serious, life-threatening infections.

What are the complications?

Ten to 15 percent of those who get meningococcal disease die. Among survivors, as many as one in five will have permanent disabilities. Complications include:

- Hearing loss
- Brain damage
- Kidney damage
- Limb amputations

MENINGOCOCCAL DISEASE
FACT SHEET

What should I do if I or someone I love is exposed?

If you are in close contact with a person with meningococcal disease, talk with your health care provider about the risk to you and your family. They can prescribe an antibiotic to prevent the disease.

What is the best way to prevent meningococcal disease?

The single best way to prevent this disease is to be vaccinated. Vaccines are available for people 6 weeks of age and older. Various vaccines offer protection against the five major strains of bacteria that cause meningococcal disease:

- All teenagers should receive two doses of vaccine against strains A, C, W and Y. The first dose is given at 11 to 12 years of age, and the second dose (booster) at age 16.
  - It is very important that teens receive the booster dose at age 16 in order to protect them through the years when they are at greatest risk of meningococcal disease.
  - Talk to your health care provider today if your teen has not received two doses of vaccine against meningococcal strains A, C, W and Y.
- Teens and young adults can also be vaccinated against the "B" strain. Talk to your health care provider about whether they recommend vaccine against the "B" strain.

Others who should receive the vaccine include:

- Infants, children and adults with certain medical conditions
- People exposed during an outbreak
- Travelers to the "meningitis belt" of sub-Saharan Africa
- Military recruits

Please speak with your health care provider if you may be at increased risk.

What are the meningococcal vaccine requirements for school attendance?

As of September 1, 2016, children entering grades 7 and 12 must be immunized against meningococcal disease strains A, C, W and Y according to the recommendations listed above.

Is there an increased risk for meningococcal disease if I travel?

- Meningococcal disease and outbreaks occur in the United States and around the world. The disease is more common in the "meningitis belt" of sub-Saharan Africa. The risk is highest in people who visit these countries and who have prolonged contact with local populations during an epidemic.
- To reduce your risk of illness, wash your hands often, maintain healthy habits such as getting plenty of rest and try not to come into contact with people who are sick.

Travel and meningococcal disease: www.nc.cdc.gov/travel/diseases/meningococcal-disease
Learn more about meningococcal disease: www.cdc.gov/meningococcal/
For more information about vaccine-preventable diseases: www.health.ny.gov/prevention/immunization/

MMR VACCINE WHAT YOU NEED TO KNOW

VACCINE INFORMATION STATEMENT

(Measles, Mumps and Rubella)

Many Vaccine Information Statements are available in Spanish and other languages. See www.immunize.org/vis

Hojas de información sobre vacunas están disponibles en español y en muchos otros idiomas. Visite www.immunize.org/vi

1 Why get vaccinated?

Measles, mumps, and rubella are serious diseases. Before vaccines they were very common, especially among children.

Measles

- Measles virus causes rash, cough, runny nose, eye irritation, and fever.
- It can lead to ear infection, pneumonia, seizures (jerking and staring), brain damage, and death.

Mumps

- Mumps virus causes fever, headache, muscle pain, loss of appetite, and swollen glands.
- It can lead to deafness, meningitis (infection of the brain and spinal cord covering), painful swelling of the testicles or ovaries, and rarely sterility.

Rubella (German Measles)

- Rubella virus causes rash, arthritis (mostly in women), and mild fever.
- If a woman gets rubella while she is pregnant, she could have a miscarriage or her baby could be born with serious birth defects.

These diseases spread from person to person through the air. You can easily catch them by being around someone who is already infected.

Measles, mumps, and rubella (MMR) vaccine can protect children (and adults) from all three of these diseases.

Thanks to successful vaccination programs these diseases are much less common in the U.S. than they used to be. But if we stopped vaccinating they would return.

2 Who should get MMR vaccine and when?

Children should get 2 doses of MMR vaccine:

- First Dose: 12–15 months of age
- Second Dose: 4–6 years of age (may be given earlier, if at least 28 days after the 1st dose)

Some infants younger than 12 months should get a dose of MMR if they are traveling out of the country. (This dose will not count toward their routine series.)

Some adults should also get MMR vaccine: Generally, anyone 18 years of age or older who was born after 1956 should get at least one dose of MMR vaccine, unless they can show that they have either been vaccinated or had all three diseases.

MMR vaccine may be given at the same time as other vaccines.

Children between 1 and 12 years of age can get a “combination” vaccine called MMRV, which contains both MMR and varicella (chickenpox) vaccines. There is a separate Vaccine Information Statement for MMRV.

3 Some people should not get MMR vaccine or should wait.

- Anyone who has ever had a life-threatening allergic reaction to the antibiotic neomycin, or any other component of MMR vaccine, should not get the vaccine. Tell your doctor if you have any severe allergies.
- Anyone who had a life-threatening allergic reaction to a previous dose of MMR or MMRV vaccine should not get another dose.
- Some people who are sick at the time the shot is scheduled may be advised to wait until they recover before getting MMR vaccine.
- Pregnant women should not get MMR vaccine. Pregnant women who need the vaccine should wait until after giving birth. Women should avoid getting pregnant for 4 weeks after vaccination with MMR vaccine.
- Tell your doctor if the person getting the vaccine:
  - Has HIV/AIDS, or another disease that affects the immune system
  - Is being treated with drugs that affect the immune system, such as steroids
  - Has any kind of cancer
  - Is being treated for cancer with radiation or drugs
  - Has ever had a low platelet count (a blood disorder) - Has gotten another vaccine within the past 4 weeks - Has recently had a transfusion or received other blood products

Any of these might be a reason to not get the vaccine, or delay vaccination until later.

MMR VACCINE WHAT YOU NEED TO KNOW

VACCINE INFORMATION STATEMENT

(Measles, Mumps and Rubella)

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4 What are the risks from MMR vaccine?

A vaccine, like any medicine, is capable of causing serious problems, such as severe allergic reactions.

The risk of MMR vaccine causing serious harm, or death, is extremely small.

Getting MMR vaccine is much safer than getting measles, mumps or rubella.

Most people who get MMR vaccine do not have any serious problems with it.

Mild Problems

- Fever (up to 1 person out of 6)
- Mild rash (about 1 person out of 20)
- Swelling of glands in the cheeks or neck (about 1 person out of 75)

If these problems occur, it is usually within 6-14 days after the shot. They occur less o en after the second dose.

Moderate Problems

- Seizure (jerking or staring) caused by fever (about 1 out of 3,000 doses)
- Temporary pain and stiffness in the joints, mostly in teenage or adult women (up to 1 out of 4)
- Temporary low platelet count, which can cause a bleeding disorder (about 1 out of 30,000 doses)

Severe problems (very rare)

- Serious allergic reaction (less than 1 out of a million doses)
- Several other severe problems have been reported after a child gets MMR vaccine, including:
  - Deafness
  - Long-term seizures, coma, or lowered consciousness - Permanent brain damage

These are so rare that it is hard to tell whether they are caused by the vaccine.

5 What if there is a serious reaction?

What should I look for?

- Look for anything that concerns you, such as signs of a severe allergic reaction, very high fever, or behavior changes.

  Signs of a severe allergic reaction can include hives, swelling of the face and throat, difficulty breathing, a fast heartbeat, dizziness, and weakness. These would start a few minutes to a few hours after the vaccination.

What should I do?

- If you think it is a severe allergic reaction or other emergency that can't wait, call 9-1-1 or get the person to the nearest hospital. Otherwise, call your doctor.
- Afterward, the reaction should be reported to the Vaccine Adverse Event Reporting System (VAERS). Your doctor might file this report, or you can do it yourself through the VAERS web site at **www.vaers.hhs.gov**, or by calling **1-800-822-7967.**

VAERS is only for reporting reactions. They do not give medical advice.

6 The National Vaccine Injury Compensation Program

The National Vaccine Injury Compensation Program (VICP) is a federal program that was created to compensate people who may have been injured by certain vaccines.

Persons who believe they may have been injured by a vaccine can learn about the program and about ling a claim by calling **1-800-338-2382** or visiting the VICP website at **www.hrsa.gov/vaccinecompensation.**

7 How can I learn more?

- Ask your doctor.
- Call your local or state health department.
- Contact the Centers for Disease Control and Prevention (CDC):
  - Call **1-800-232-4636 (1-800-CDC-INFO)** or
  - Visit CDC's website at **www.cdc.gov/vaccines**