OFF CAMPUS/CITE/HIGHSCHOOL/ SUMMER SCHOOL
PART TIME STUDENT

19 Park Street, Alfred, NY 14802
Phone: (607) 871-2400

HEALTH FORMS CHECK LIST

☐ Read through entire Immunization Form
☐ Placed Banner Student ID number on Immunization Form.
☐ MENINGITIS RESPONSE (Section A or B) completed.
   Student signature required for Part A or Part B. (parent, if under 18)
☐ IMMUNIZATION FORM (completed) with health care provider signature. This may be
   signed by any person authorized by law to administer an immunization.

All STUDENTS must comply with Immunization requirements set forth by New York State
law. Failure to do so may result in the inability to register for classes or create additional
costs to you as a student.

IMPORTANT: Forms other than Crandall Health Center forms will not be accepted
and incomplete forms will be returned.

If you plan to submit proof of immunity by using measles, mumps or rubella titers
rather than using vaccination records, you MUST submit actual laboratory results
including reference range and the results MUST verify immunity.

☐ COMPLETED FORMS returned on: __________________ to: ______________________
   Date

PLEASE DO NOT RETURN THIS CHECKLIST TO CRANDALL HEALTH CENTER -
KEEP FOR YOUR REFERENCE.

Crandall Health Center at Alfred University
Attention: Health Forms
19 Park Street
Alfred, NY  14802

NOTE: To assure your form is received by the health center, please mail it directly to the health center
at the above address.
OFF CAMPUS/ HIGH SCHOOL/CITE/SUMMER SCHOOL/PART TIME STUDENT IMMUNIZATION FORM

This is the only official accepted form

ALL STUDENTS REGARDLESS OF AGE OR CREDIT HOURS MUST COMPLETE TOP SECTION

Name:_________________________________ Banner ID #:____________________ Date of Birth:____________________

Phone Number where student can be reached_________________________________ Email:__________________________

A. Meningitis Vaccination: Date Received:________________ Check One: ☐ Menactra™ ☐ Menomune™
(Recommended not required) Student Signature (Parent, if under 18):_________________________ Date:____________________

OR

B. If Meningitis Vaccine not received complete the following:

MENINGOCOCCAL MENINGITIS VACCINATION ACKNOWLEDGEMENT

Please read the enclosed information regarding Meningococcal Disease and the availability of a vaccination against this disease. This vaccination is available at Crandall Health Center for a cost of approximately $121 (2009-2010 school year). Check one box and sign below:

☐ I have read, or have had explained to me, the information regarding meningococcal meningitis disease. I understand the risks of not receiving the vaccine. I have decided that I (my child) will not obtain immunization against meningococcal meningitis disease. I understand that although I have declined the vaccine at this time, I have the right to request the vaccine at any time in the future.

Student Signature (Parent, if under 18):____________________________________ Date:____________________

C. For those born after January 1, 1957, the following must be completed and signed by your healthcare provider to document compliance with New York State Public Health Law 2165. The form must have the month, day, and year typed or printed in the English language. Please note that according to NYS Public Health law, no institution shall permit any student to attend the institution in excess of 30 days without complying with this law.

Measles (Rubeola): Two live doses of measles are required. First dose must be given no more than 4 days prior to student’s first birthday and the second dose must be given after fifteen months of age and at least twenty eight (28) days after the first dose.

MMR: (Combined measles, mumps, rubella): #1 ___________________ #2 ___________________

(Month/Day/Year) (Month/Day/Year)

OR

Date of first live dose of measles given: #1 __________________

(Month/Day/Year)

Date of second live dose of measles given: #2 __________________

(Month/Day/Year)

OR

Date of positive measles titer: (Copy of actual laboratory report including reference range must be attached.)

Mumps: One live mumps dose is required and must be given after the first birthday.

Date of live mumps vaccination given: #1 __________________

(Month/Day/Year)

OR

Date of positive mumps titer: (Copy of actual laboratory report including reference range must be attached.)

Rubella (German Measles): One live rubella dose is required and must be given after the first birthday.

Date of live rubella vaccination given: #1 __________________

(Month/Day/Year)

OR

Date of positive rubella titer: (Copy of actual laboratory report including reference range must be attached.)

Healthcare Provider Signature:__________________________________________ (Required) Date:____________________

Mailing Address: ______________________________________________________ Phone:____________________ Fax:____________________

*Completed form must be received before the student can register for classes.
MENINGOCOCCAL DISEASE

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 meningitis is prevalent.

How is the germ meningococcus 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 2 to 10 days after exposure, but usually within 5 days. Among people who develop meningococcal disease, 10-15% 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, day care center playmates, etc.) need to be considered for preventive treatment. Such people are usually advised to obtain a prescription for a special antibiotic (either 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? In February 2005 the CDC recommended a new vaccine, known as Menactra™ for use to prevent meningococcal disease in people 11-55 years of age. The previously licensed version of this vaccine, Menomune™ is available for children 2-10 years old and adults older than 55 years. Both vaccines are 85% to 100% effective in preventing the 4 kinds of meningococcus germ (types A, C, Y, W-135). These 4 types cause about 70% 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? Both vaccines are currently available and both are safe and effective vaccines. However, both 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 recommended for all adolescents entering middle school (11-12 years old) and high school (15 years old), and all first year college students living in dormitories. However, the vaccine will benefit all teenagers and young adults in the United States. Also at increased risk are people with terminal complement deficiencies or asplenia, some laboratory workers and travelers to endemic areas of the world.

What is the duration of protection from the vaccine? Menomune™, the older vaccine, requires booster doses every 3 to 5 years. Although research is still pending, the new vaccine, Menactra™, will probably not require booster doses.

How do I get more information about meningococcal disease and vaccination? Contact your physician or your student health service. Additional information is also available on the websites of the New York State Department of Health, www.health.state.ny.us; the Centers for Disease Control and Prevention www.cdc.gov/ncidod/diseases/index.htm; and the American College Health Association, www.acha.org.

7/2005