

**Tompkins Cortland Community College  
Student Immunization Record Form and Permission to Treat**

NYS Public Health Laws 2165 and 2167 requires college students taking six (6) or more credit hours to demonstrate proof of immunity against measles, mumps, and rubella (if born on or after 1/1/57), **AND fill out the Meningitis Response** (required for all students). **Your complete record (including MMR and Meningitis Response) must be on file in our Health Center or you will be MEDICALLY WITHDRAWN FROM CLASSES.**

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
mm / dd / yyyy

Address: \_\_\_\_\_  
Street City State Zip

Date \_\_\_\_\_ Phone No.: (\_\_\_\_) \_\_\_\_\_ Student ID # - 7 \_\_\_\_\_

**MENINGITIS RESPONSE - FILL OUT IF TAKING 6 OR MORE CREDITS ON ANY TC3 CAMPUS LOCATION.**

**\*\*Write Date of Vaccination OR Student Declines With Signature\*\***

**MENINGITIS VACCINE – within the past 5 years**

Menomune™ (MPSV4) vaccine - Date received: \_\_\_\_\_

Menactra™ (MCV4) vaccine - Date received: \_\_\_\_\_

Menveo™ (MCV4) vaccine - Date Received: \_\_\_\_\_

----- OR -----

**DECLINE THE MENINGITIS VACCINE**

I have decided to decline the Meningitis vaccine by signing 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.*

Student Signature \_\_\_\_\_  
(Parent/Guardian signs if student is under 18)

**MMR Requirements – MUST BE SUBMITTED BY ALL STUDENTS BORN ON OR AFTER JAN. 1, 1957**

MMR Vaccine/Date* <b>*Must be given at one year of age or older and after 1967.</b> mm/dd/yyyy	OR	<u>Positive Blood Titer*</u> Lab Result (000.00) / Date	OR	Physician Diagnosed Disease/Date of Onset mm/dd/yyyy
MMR 1 _____ MMR 2 _____ <b>OR</b> Measles 1 _____ Measles 2 _____ Mumps 1 _____ Rubella 1 _____	OR	Measles _____ / _____ Mumps _____ / _____ Rubella _____ / _____  *Attach MMR titer lab report for verification.	OR	Measles _____ Mumps _____  History of Rubella is <u>not</u> acceptable

**STUDENT TREATMENT PERMISSION  
For Students Under 18 Years Old**

I grant permission for TC3 Health Services to provide medical care and immunizations to the above student as necessary.

Parent/Guardian Signature \_\_\_\_\_

The MMR Information has been validated by:

Health Care Provider signature \_\_\_\_\_

Health Care Provider name printed \_\_\_\_\_

Address \_\_\_\_\_

(\_\_\_\_) \_\_\_\_\_  
Telephone of Health Care Provider

City State Zip

Date - mm/dd/yyyy

Please return this form to:

**TC3 Student Health Services - Room 118A  
170 North Street  
P.O. Box 139  
Dryden, NY 13053**

Fax: (607) 844-6533  
Office: (607) 844-8222 Ext. 4487  
healthcenter@tc3.edu

# New York State Department of Health

## 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 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 (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?

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 vaccine 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 recommended for all adolescents entering middle school (11 to 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.

### Who needs a booster dose of meningococcal vaccine?

CDC recommends that children age 11 or 12 years be routinely vaccinated with Menactra or Menveo and receive a booster dose at 16 years. Adolescents who receive the first dose at age 13-15 years should receive a one-time booster dose, preferably at ages 16-18 years. Teens who receive their first dose of meningococcal conjugate vaccine at or after 16 years do not need a booster dose, as long as they have no risk factors.

All people who remain at highest risk for meningococcal infection should receive additional booster doses. If the person is age 56 years or older, they should receive Menomune.

### 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 Web sites of the New York State Department of Health, [www.nyhealth.ny.us](http://www.nyhealth.ny.us); the Centers for Disease Control and Prevention [www.cdc.gov/DiseasesConditions/](http://www.cdc.gov/DiseasesConditions/); and the American College Health Association, [www.acha.org.au/info/general/Home/get/0/0/](http://www.acha.org.au/info/general/Home/get/0/0/).

Revised: July 2011