

# MEDICAL REQUIREMENTS

*Meningitis Response Signature (Part 1) and MMR Immunization Records (Part 2)  
are required before registration*

Name: \_\_\_\_\_ SSN \_\_\_\_\_

Address: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ DOB: \_\_\_\_\_

**Part 1-** TO BE COMPLETED AND SIGNED BY STUDENT OR PARENT/GUARDIAN FOR STUDENT UNDER THE AGE OF 18

## **MENINGOCOCCAL MENINGITIS.**

CHECK ONE (1) BOX ONLY (One dose within 10 years recommended by NYSPHL2167)

I have read, (**see reverse side**) or have had explained to me, the information regarding meningococcal meningitis.

The vaccination was administered on DATE \_\_\_\_/\_\_\_\_/\_\_\_\_

**OR**

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

**\*For Meningitis Vaccine availability, check with your primary care physician OR visit the CDC Travel Clinics websites: [www.istm.org](http://www.istm.org) The cost approximately \$75.00**

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Part 2 - TO BE COMPLETED, SIGNED, AND STAMPED BY YOUR HEALTH CARE PROVIDER.**

Single immunizations (one mumps, one measles, or one rubella) must have been given after January 1, 1968.

Measles 1 Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Measles 2 Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Mumps Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Rubella Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**OR**

**M.M.R. (Measles, Mumps, Rubella)** (Two doses; after 1/1/1973)

1. Dose 1 given at age 12 months or later..... **Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_

2. Second dose given after 15 months of age..... **Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_

**OR**

3. Laboratory Report proving immunity must be submitted. (MMR Titer)  
(See reverse side for information)

**I certify that the above-named student has received the above immunizations, or I have enclosed laboratory results indicating immunity.**

Physician signature AND stamp required \_\_\_\_\_

Address: \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Phone#: (\_\_\_\_) \_\_\_\_\_

## Medical Requirements

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### New York State Public Health Law 2167-Meningococcal Meningitis

New York State Public Health Law 2167 took effect on August 15, 2003. It requires that all colleges inform their students about meningococcal meningitis and the meningitis vaccine. It further requires you to do the following:

Complete Part 1 of the reverse side of this form indicating that you have received information about meningitis and the meningitis vaccine and **EITHER:**

Have been vaccinated against meningitis within the last 10 years (please submit date)

**OR**

Have decided **not** to obtain the vaccination.

Meningitis is rare. However, when it strikes, its flu-like symptoms make diagnosis difficult. Symptoms can include high fever, severe headache, stiff neck, and rash. If not treated early, meningitis can lead to swelling of the fluid surrounding the brain and spinal column as well as severe and permanent disabilities, such as hearing loss, brain damage, seizures, limb amputations, and even death.

Meningitis is spread through the air via respiratory secretions such as coughing, sneezing, kissing or sharing personal items like utensils, cigarettes and drinking glasses. Certain college students, particularly freshman living in dormitories or resident halls, have been found to have an increased risk for meningitis.

A vaccine is available that protects against four types of the bacteria that cause meningitis in the United States—types A, C, Y and W-135. These types account for nearly two thirds of meningitis cases among college students. The vaccine is safe and effective and provides immunity for approximately 3 to 5 years. Meningitis vaccine is available at your primary care physician or visit [www.istm.org](http://www.istm.org) for clinic listings. The cost is approximately \$75.00.

To learn more about meningitis and the vaccine and other immunizations for college students, please feel free to contact our health center and/or consult your physician. You can also find information about the disease at NEW YORK STATE DEPARTMENT OF HEALTH WEBSITE: [WWW.HEALTH.STATE.NY.US](http://WWW.HEALTH.STATE.NY.US), WEBSITE, THE CENTER FOR DISEASE CONTROL AND PREVENTION (CDC): [WWW.CDC.GOV/NCIDOD/DBMD/DISEASEINFO](http://WWW.CDC.GOV/NCIDOD/DBMD/DISEASEINFO), OR AMERICAN COLLEGE ASSOCIATION (ACHA) WEBSITE: [WWW.ACHA.ORG](http://WWW.ACHA.ORG)

### New York State Public Health Law 2165-Measles, Mumps, Rubella

If you were born after December 31, 1956, you are required by state law to prove you are immune to Measles, Mumps, and Rubella in order to attend college. Acceptable proof of immunity includes: immunization cards from childhood, immunization records from High School or other schools you attended, or records from your doctor or clinic. If you do not have proof of immunizations, you must be immunized again or have a blood test (MMR titer) to show you are immune to all three diseases.

MMR vaccines are available at the Lehman College Student Health Center free of charge. Blood testing is also available but requires medical insurance or payment by the student. Medical waiver: Any student with a medical condition that prohibits vaccination may submit a doctor's statement on letterhead for exemption. (Temporary medical conditions, such as pregnancy, require blood titer clearance)

**\* You do not need proof of vaccinations if you were born on or before December 31, 1956.**