## MENINGOCOCCAL MENINGITIS VACCINATION WAIVER FORM

Due: July 20th Return form to: St. Lawrence University Student Health Service 76 Park Street Canton, NY 13617 Or fax to: 315-229-5514

Name: \_\_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_/\_\_\_\_ M D

For all students, regardless of age, New York State Public Health Law mandates that you read the following information and sign the Meningitis Waiver form below if you have not had the vaccination or do not wish to receive the vaccination.

Meningitis disease is a severe bacterial infection of the bloodstream or meninges (a thin layer covering the brain and spinal cord). It is a relatively rare disease and usually occurs as a single isolated event. Cluster of cases or outbreaks are rare in the United States. It is transmitted through air via droplets of respiratory secretions and direct contact with an infected person. Direct contact, for these purposes, is defined as oral contact with shared items such as cigarettes or drinking glasses or through intimate contact such as kissing.

Although anyone can come into contact with the bacteria that cause meningococcal disease, data also indicates certain social behaviors, such as exposure to passive and active smoking, bar patronage, and excessive alcohol consumption, may put students at increase risk for the disease. Patients with respiratory infections, compromised immunity, those in close contact to a known case, and travelers to endemic areas of the world are also at increased risk.

The early symptoms usually associated with meningococcal disease include fever, severe headache, stiff neck, rash, nausea, vomiting, and lethargy, and may resemble the flu. Because the disease progresses rapidly, often in as little as 12 hours, students are urged to seek medical care immediately if they experience two or more of these symptoms concurrently. The disease is occasionally fatal. The symptoms may appear 2 to 10 days after exposure, but usually within 5 days. Antibiotics can be used to treat people with meningococcal disease.

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 preventative treatment. Such people are usually advised to obtain a prescription for a special antibiotic from their physician. Casual contact as might occur in a regular classroom, office or factory setting is not usually significant enough to cause concern.

There is a vaccine that will protect against some strains of meningoccoccus. It is recommended in outbreak situations, and for those traveling to areas of the world where high rates of the disease are known to occur. The meningococcal vaccine has been shown to provide protection against the most common strains of the disease, including serogroups A, C, Y and W-135. The vaccine has shown to be 85-100 percent effective in serogroups A and C in older children and adults. The vaccine is very safe and adverse reactions are mild and infrequent consisting primarily of redness and pain at the site of injection lasting up to 2 days.

If you wish to receive the meningococcal vaccine, contact your health care provider.

## MENINGOCOCCAL MENINGITIS WAIVER

## To be completed & signed by the student (OR parent/guardian for students under age 18.)

| I have read the information regarding meningococcal meningitis disease and I understand the risk of not receiving the vaccine. I (my child) will not obtain the immunization against meningococcal meningitis disease at this time.

Signature: \_\_\_\_\_

Date: