



Immunization Record

(If you have previously attended any CUNY college, please contact the Health Service Center)

Name _____

Address _____

Phone (____) _____ Birth Date ____/____/____ Sex M F Years in the USA _____

Parent/Guardian Name _____ Phone (____) _____

Address _____

PART 1 - To be completed and signed by ~~student~~ parent/guardian for student under the age of 18:

Meningococcal Meningitis: (One dose within 10 years recommended by NYS Public Health Law #2167)

Please check one (1) box only:

- I have read (see reverse side) or have had explained to me the information regarding meningococcal meningitis. The meningitis vaccine (Menomune™)* was administered to me on _____ Date ____/____/____
- 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, and have decided that I/my child will not obtain immunization against meningococcal meningitis disease at this time.

Signed by ~~student~~ parent _____ Date ____/____/____

*For meningitis vaccine availability, check with your primary care physician OR visit the CDC Travel Clinic Web site (www.istm.org). The cost of the vaccination is approximately \$75.

PART 2 - Attach official documentation OR have this form completed and signed by your Health Care Provider (all documentation MUST have an official signature and stamp).

First Measles Vaccination (after first birthday) _____ Date ____/____/____

AND/OR

MMR (Measles, Mumps & Rubella) Vaccine (two doses after 1/1/1972)

1. First dose given after 12 months of age _____ Date ____/____/____

AND

2. Second dose given after 15 months of age _____ Date ____/____/____

OR

3. Laboratory report proving immunity must be submitted (if dates of immunizations are not submitted).

PART 3 - Tuberculin Skin Test

(recommended for everyone—students in the USA for less than 5 years MUST have a recent TB skin test).

Date given ____/____/____ Date read ____/____/____ Result _____

Chest X-ray performed Date read ____/____/____ Result _____

I certify that the above-named student has received the indicated immunizations, or I have enclosed/attached laboratory report indicating the student's immunity. (HEALTH CARE PROVIDER'S SIGNATURE AND STAMP REQUIRED.)

Signed _____ Date ____/____/____

Address _____ Phone (____) _____

Immunization Information

MEASLES, MUMPS, AND RUBELLA

As of Spring 1993, Queens College has required that all students comply with New York State's Public Health Law #2165, which requires that college students born **on or after January 1, 1957** present proof of immunizations or laboratory results indicating immunity against Measles, Mumps, and Rubella. Proof of age must be submitted for those students born prior to 1957.

Exemptions

- Documentation of medical contraindications by a physician.
- Written documentation by the student of religious belief that prohibits immunization.

On July 22, 2003, Governor Pataki signed New York State Public Health Law #2167 requiring institutions, including colleges and universities, to distribute information about meningococcal disease to all students meeting the enrollment criteria, whether they live on or off campus. This law became effective on August 15, 2003 (prior to the Fall 2003 semester).

MENINGOCOCCAL MENINGITIS

Queens College, CUNY, 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 student's parent or guardian. This must include information on the availability and cost of meningococcal meningitis vaccine (Menomune™);

AND/EITHER

- A record of meningococcal meningitis immunization within the past 10 years;

OR

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

Meningitis is rare. When it strikes, however, its flu-like symptoms make diagnosis difficult. 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 amputation, and even death.

Cases of meningitis among teens and young adults 15 to 24 years of age (the age of most college students) have more than doubled since 1991. The disease strikes about 3,000 Americans each year and claims about 300 lives. Between 100 and 125 meningitis cases occur on college campuses, and as many as 15 students will die from the disease.

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. Vaccines are available from your primary care physician, or visit the CDC Travel Clinic Web site (www.istm.org) for a list of clinics that have meningitis vaccine available. The cost is approximately \$75.

To learn more about meningitis and the vaccine and other immunizations for college students, please feel free to contact our Health Service Center and/or consult your personal physician. You can also find information about the disease on the following Web sites:

New York State Department of Health: www.health.state.ny.us

Centers for Disease Control and Prevention (CDC): www.cdc.gov/ncidod/dbmd/diseaseinfo

American College Health Association (ACHA): www.acha.org.

Information about medical/dental insurance, low-cost health clinics, and available services is available on the Health Service Center Web site (www.qc.cuny.edu/health_services).