EACH PARTICIPANT OF A RESIDENTIAL PROGRAM MUST COMPLETE A MENINGITIS IMMUNIZATION FORM OR A MENINGOCOCCAL VACCINE WAIVER FORM BEFORE THEY WILL BE ADMITTED TO ANY RESIDENCE HALL

Do not submit the Meningitis Immunization Form OR the Meningococcal Vaccine Waiver Form with your application.

All completed forms must be submitted directly to the Office of Residence Life and Housing.
Please complete all roster forms as soon as your participants have been confirmed. Rosters can be submitted separate from the entire application but not later than two (2) weeks prior to the start of your program. Programs that submit rosters less than two (2) weeks prior to the start date may encounter delays receiving requested services. All residential participants must complete the MENINGITIS IMMUNIZATION FORM or a MENINGOCOCCAL VACCINE WAIVER FORM before they will be admitted to residence halls.

MENINGOCOCCAL VACCINE
FOR HIGHER EDUCATION STUDENTS

WHAT YOU NEED TO KNOW
Effective, June 1, 2000, Maryland law requires that an individual enrolled in an institution of higher education in Maryland who resides in on-campus student housing must be vaccinated against meningococcal disease. An individual may be exempt from this requirement if (1) the institution of higher education provides the individual or the individual’s parent or guardian if the individual is a minor (under 18 years of age) detailed information on the risks associated with meningococcal disease and the availability and effectiveness of any vaccine, and (20 the individual or a minor individual’s parent or guardian signs a waiver stating that the individual or the parent or guardian has received and reviewed the information provided and has chosen that the individual will not be vaccinated against meningococcal disease.

What is Meningococcal Disease?
Meningococcal disease is a rare but life threatening illness, caused by the bacterium, Neisseria meningitidis. It is a leading cause of bacterial meningitis (an infection of the brain and spinal cord coverings) in the United States. The most severe form of the disease is meningococcemia, infection of the bloodstream by this bacterium.

Deaths from meningococcal disease have occurred among Maryland college students in recent years. Students living in dormitories or residence halls are at increased risks. The Maryland Department of Health and Mental Hygiene encourages meningococcal vaccination of higher education students.

About 2,600 people get meningococcal disease each year in the U.S. 10-15% of these people die, in spite of treatment with antibiotics. Of those who live, 10% lose their arms or legs, become deaf, have problems with their nervous systems, become mentally retarded, or suffer seizures or strokes.

About the Vaccine:
Meningococcal vaccine can be effective in preventing four types of meningococcal disease. The vaccine is not effective in preventing all types of disease, but it does help to protect many people who might become sick if they don’t get the vaccine. Drugs such as penicillin can be used to treat meningococcal infection. Still, about one out of every ten people who get the disease dies from it, and many others are affected for life.

A vaccine, like any medicine, is capable of causing serious problems, such as severe allergic reaction. People should not get meningococcal vaccine if they have ever had a serious allergic reaction to a previous dose of meningococcal vaccine. Some people who get meningococcal vaccine have mild side effects, such as redness or pain where the shot was given (which is usually under the skin of the upper arm). A small percentage of people who receive the vaccine develop a fever. The vaccine may be given to pregnant women.
Neisseria meningitidis (the meningococcus) is a bacterium (germ) that can cause serious infections.

The meningococcus cause: meningitis, an infection of the covering of the brain and spinal cord. It also causes serious infections of the blood (meningococcemia) and of other normally sterile body sites (e.g., joints). These infections may lead to death.

The meningococcus is spread by droplets or by direct contact

The meningococci are sprayed into the air through sneezing and coughing. Many people may carry the bacteria in their noses and throats, and they will not become ill – they are healthy carriers. These carriers can spread the germ to other people.

Symptoms to look for:

- High fever
- Nausea and vomiting
- Severe headache
- Stiffness and pains in the neck, shoulders, and back
- Skin rash of small bright red spots

Symptoms occur within 2–10 days (usually 3-4 days) after the person has been exposed. Symptoms often begin suddenly.

See a doctor immediately for treatment

People who think they may have an infection due to the meningococcus should see a doctor immediately. Treatment with an antibiotic should be started right away to stop the infection from causing brain damage or death. Lab tests are needed to prove what kind of infection a person has.

People in close contact with a case may need an antibiotic

Check with your doctor or your local health department for advice. Preventive treatment with certain antibiotics is recommended and should not be delayed. Your doctor or health department will decide which medicine is best in your best situation.

People in close contact may include:

- Somebody who lives in the same house
- A person who has contact with the patient’s mouth or nose secretions, such as through kissing or by sharing cigarettes, or using the same eating and drinking utensils, glasses and plates.
- A person who has done medical treatments like giving mouth-to-mouth resuscitation on the patient, or intubating or suctioning the patient.
- Children sharing toys, such as in group day care centers, family child care homes, or in nurseries.

A vaccine is available to prevent some types of meningococcal disease

The vaccine protects against groups A, C, Y and W-135. Check with your doctor or your local health department to see if you should get the vaccine.
Dear On-Campus Housing Student:

Effective June 1, 2000, Maryland law requires that every student enrolled at a University, and who resides in on-campus housing, be vaccinated against meningococcal disease, or sign a specified waiver; requiring the parent or guardian of the student to sign the waiver if the student is a minor (under age 18).

**MENINGOCOCCAL VACCINE REQUIREMENT**

I have received the meningococcal vaccine as required by Maryland Law for individuals residing in on-campus student housing at an institution of higher education. Documentation from a physician or health clinic of receipt of vaccine, and date vaccine was administered is attached to this form.

____________________________________  ____________________________
Student’s Signature  Date

___________________________________  ______________
Student’s ID #:  Student’s Age

__________________________________________________________  ____________
Signature of Parent/Guardian of Individual Under 18 Years of Age  Date
Dear On-Campus Housing Student:

Effective June 1, 2000, Maryland law requires that every student enrolled at a University, and who resides in on-campus housing, be vaccinated against meningococcal disease, or sign a specified waiver; requiring the parent or guardian of the student to sign the waiver if the student is a minor (under age 18).

WAIVER AGE IS 18 YEARS OR OLDER

I am 18 years of age or older. I have received and reviewed the information provided on the risk of meningococcal disease and the effectiveness and availability of meningococcal vaccine. I understand that meningococcal disease is a rare but life threatening illness. I understand that Maryland law requires that an individual enrolled in an institution of higher education in Maryland who resides in on-campus student housing shall receive vaccination against meningococcal disease unless the individual signs a waiver to the vaccination.

I voluntarily agree to release, discharge, indemnify and hold harmless the State of Maryland, the University, its officers, employees and agents from any and all costs, liabilities, expenses, claims, demands or causes of action on account of any loss or personal injury that might result from my non-compliance with the law.

I choose to waive receipt of meningococcal vaccine.

Signature ________________________________ Date __________________

Social Security # _____________________________________ Age ____________

WAIVER FOR INDIVIDUALS UNDER THE AGE OF 18

I have received and reviewed the information provided on the risks of meningococcal disease and the effectiveness and availability of meningococcal vaccine. I understand that meningococcal disease is a rare but life threatening illness. I understand that Maryland law requires that an individual enrolled in an institution of higher education in Maryland who resides in on-campus student housing shall receive vaccination against meningococcal disease unless a waiver to the vaccination is signed.

I voluntarily agree to, release, discharge, indemnify and hold harmless the State of Maryland, the University, its officers, employees and agents from any and all costs, liabilities, expenses, claims, demands or causes of action on account of any loss or personal injury that might result from my non-compliance with the law.

I choose to waive receipt of meningococcal vaccine for my child.

Child’s Name ___________________________________ Child’s Social Security #

_________________________________________________ _______________________
Signature of Parent/Guardian Date