**IMMUNIZATION INFORMATION:** Certificate of Compliance with Under Section 2165 of the New York State Public Health Law, students attending postsecondary institutions are required to demonstrate immunity against measles,* mumps and rubella. This requirement includes full and part-time undergraduate, graduate and professional students born on or after January 1, 1957.

**MINIMUM VACCINE REQUIREMENTS ARE:**

- two doses of live measles virus vaccine, the first dose administered on or after the first birthday and the second dose administered more than 28 days after the first dose but after 15 months of age;
- one dose of live rubella virus vaccine administered on or after the first birthday;
- one dose of live mumps virus vaccine administered on or after the first birthday;
- If the student is unable to provide a certificate of immunization that satisfies the above requirements, documentation that proves the student attended primary or secondary school in the United States after 1980 will be sufficient proof that the student received one dose of live measles virus vaccine. If such documentation is provided, then the student must also provide a certificate of immunization that documents a dose of measles vaccine was administered within one year prior to attendance at the postsecondary institution.

* Measles vaccine doses administered prior to 1968 are not valid unless the record specifically states it was live vaccine.

In 1998 New York State Public Health Law 2165 was amended. The amendment reads that: “proof of honorable discharge from the armed services within 10 years from the date of application to an institution shall qualify as a certificate enabling a student to attend the institution pending actual receipt of immunization records from the armed services. If while awaiting the receipt of actual immunization records a health risk shall arise at an institution, a student presenting a certificate under the terms of this subdivision shall be removed from the institution if proper immunization cannot be proved or otherwise rectified.”

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**PART I**

<table>
<thead>
<tr>
<th>Full Name</th>
<th>Date of Birth</th>
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**PART II**

Meningococcal Waiver  Completion of Part II is required by New York State

- Check one (1) box only and provide the necessary information:
  - I have received the meningococcal vaccine  Date __/____
  - Menactra (conjugated vaccine)  Date __/____
  - Menomune™ (Quadrivalent Polysaccharide vaccine)  Date(s) __/____

- I have read (on the back of this form), or have had explained to me, the information regarding meningococcal disease. I request that I receive the vaccine within 30 days of the beginning of the semester.

- I have read (on the back of this form), or have had explained to me, the information regarding meningococcal disease. I understand the risks of not receiving the vaccine. I have decided that I will not obtain immunization against meningococcal disease.

**PART III**

M.M.R. (MEASLES, MUMPS, RUBELLA)  To be completed and signed by your Health Care Provider. All information must be in English (see exemptions below).

**M.M.R.** — Documentation of two doses of measles, one dose of mumps, and one dose of rubella are required by NYS unless proof of immunity is established by physician-certified disease or serological blood tests.  

- Check one (1) box only and provide the necessary information:
  - Required immunizations received: Dose 1 (after first birthday) #1 __/____
  - Dose 2 #2 __/____
  - History of disease (not acceptable for Rubella): Measles __/____ Mumps __/____
  - Serological testing establishing immunity: Results must be attached.

**WAYS TO SHOW COMPLIANCE:**

- Students born before January 1, 1957
- Medical Contraindications: A written, signed and dated statement from a physician must be provided citing the medical condition that contraindicates immunization, the expected duration of the exemption and the specific vaccine(s) being exempted.
- Religious exemption: A statement written, signed and dated by the student (or parent/guardian if the student is a minor) describing his/her objection to immunization based on religious tenets or practices. Philosophical objections will not be accepted.
- Blood work to show immunity
- Verification of military service
- Physician verification of disease for measles and mumps, NOT rubella

**I certify that the information in part III is accurate:** HEALTH CARE PROVIDER SIGNATURE REQUIRED
Meningococcal disease is a serious illness, caused by a bacteria. It is a leading cause of bacterial meningitis in children two through 18 years old in the United States. Meningitis is an infection of fluid surrounding the brain and the spinal cord. Meningococcal disease also causes blood infections. About 2,600 people get meningococcal disease each year in the U.S. 10 to 5 percent of these people die, in spite of treatment with antibiotics. Of those who live, another 11 to 19 percent lose their arms or legs, become deaf, have problems with their nervous systems, become mentally retarded, or suffer seizures or strokes. Anyone can get meningococcal disease. It is most common in infants less than one year of age and people with certain medical conditions, such as lack of a spleen. College freshmen who live in dormitories have an increased risk of getting meningococcal disease. Meningococcal infections can be treated with drugs such as penicillin. Still, about one out of every 10 people who get the disease dies from it, and many others are affected for life. This is why preventing the disease through use of meningococcal vaccine is important for people at highest risk.

2. Meningococcal Vaccine

- Two meningococcal vaccines are available in the U.S.: Meningococcal polysaccharide vaccine (M.P.S.V.4) has been available since the 1970s. Meningococcal conjugate vaccine (M.C.V.4) was licensed in 2005.
- Both vaccines can prevent four types of meningococcal disease, including two of the three types most common in the United States and a type that causes epidemics in Africa. Meningococcal vaccines cannot prevent all types of the disease, but they do protect many people who might become sick if they did not get the vaccine.
- Both vaccines work well, and protect about 90 percent of those who get it. M.C.V.4 is expected to give better, longer-lasting protection.
- M.C.V.4 should also be better at preventing the disease from spreading from person to person.

3. Who Should Get Meningococcal Vaccine and When?

- M.C.V.4 is recommended for all children at their routine preadolescent visit (11 to 12 years of age). For those who have never gotten M.C.V.4 previously, a dose is recommended at high school entry.
- Other adolescents who want to decrease their risk of meningococcal disease can also get the vaccine.
- Meningococcal vaccine is also recommended for other people at increased risk for meningococcal disease:
  - College freshmen living in dormitories.
  - Microbiologists who are routinely exposed to meningococcal bacteria.
  - U.S. military recruits.
  - Anyone traveling to, or living in, a part of the world where meningococcal disease is common, such as parts of Africa.
  - Anyone who has a damaged spleen, or whose spleen has been removed.
  - Anyone who has terminal complement component deficiency (an immune system disorder).
  - People who might have been exposed to meningitis during an outbreak.
- M.C.V.4 is the preferred vaccine for people 11 to 55 years of age in these risk groups, but M.P.S.V.4 can be used if M.C.V.4 is not available. M.P.S.V.4 should be used for children two to 10 years old, and adults over 55, who are at risk.

4. Some People Should Not Get Meningococcal Vaccine or Should Wait.

- Anyone who has ever had a severe (life-threatening) allergic reaction to a previous dose of either meningococcal vaccine should not get another dose.
- Anyone who has a severe (life threatening) allergy to any vaccine component should not get the vaccine. Tell your doctor if you have any severe allergies.
- Anyone who is moderately or severely ill at the time the shot is scheduled should probably wait until they recover. Ask your doctor or nurse. People with a mild illness can usually get the vaccine.
- Anyone who has ever had Guillain-Barré Syndrome should talk with their doctor before getting M.C.V.4.
- Meningococcal vaccines may be given to pregnant women. However, M.C.V.4 is a new vaccine and has not been studied in pregnant women as much as M.P.S.V.4 has. It should be used only if clearly needed.
- Meningococcal vaccines may be given at the same time as other vaccines.

5. What Are the Risks From Meningococcal Vaccine?

- A vaccine, like any medicine, could possibly cause serious problems, such as severe allergic reactions. The risk of meningococcal vaccine causing serious harm, or death, is extremely small.
- Mild problems—Up to about half of people who get meningococcal vaccines have mild side effects, such as redness or pain where the shot was given.
- If these problems occur, they usually last for one or two days. They are more common after M.C.V.4 than after M.P.S.V.4.
- A small percentage of people who receive the vaccine develop a fever.
- Severe problems—Serious allergic reactions, within a few minutes to a few hours of the shot, are very rare.
- A few cases of Guillain-Barré Syndrome, a serious nervous system disorder, have been reported among people who got M.C.V.4. There is not enough evidence yet to tell whether they were caused by the vaccine. This is being investigated by health officials.

6. What if There Is a Moderate or Severe Reaction?

**What should I look for?**

- Any unusual condition, such as a high fever or behavior changes. Signs of a serious allergic reaction can include difficulty breathing, hoarseness or wheezing, hives, paleness, weakness, a fast heart beat or dizziness.

**What should I do?**

- Call a doctor, or get the person to a doctor right away.
- Tell your doctor what happened, the date and time it happened, and when the vaccination was given.
- Ask your doctor, nurse, or health department to report the reaction by filing a Vaccine Adverse Event Reporting System (VAERS) form. Or you can file this report through the VAERS web site at www.vaers.hhs.gov, or by calling 1-800-822-7967. VAERS does not provide medical advice.

7. How Can I Learn More?

- Ask your doctor or nurse. They can give you the vaccine package insert or suggest other sources of information.
- Call your local or state health department.
- Contact the Centers for Disease Control and Prevention (C.D.C.): Call 1-800-232-4636 (1-800-C.D.C. I.N.F.O.)