

BACTERIAL MENINGITIS VACCINE FORM

College of Biblical Studies - Houston

For Office Us	e Only
Date Rec'd: Staff Initials:	
Immunize d Completion Date: _	Waiver

IMPORTANT NOTE: Students will neither be permitted to register for classes nor to attend said classes until this form and the accompanying documentation has been received (please refer to deadlines in Section D below). Texas Education Code, Section 51.9192, requires first-time students of Texas institutions of higher education, including transfer students, as well as current students returning from a break, to show evidence of immunization for meningococcal (bacterial) meningitis within the past five (5) years and at least ten (10) days before the start of the semester.

SECTION 1: To be completed by ALL INCOMING STUDENTS		
Date:	Student ID #	
Name: (Last) (Middle)	
Student	Status: (Check one) 2 U.S. Citizen 2 Permanent Resident 2 International Birth date: (MM/DD/YYYY)/	
Address	Phone:	
	Representative Permit (FOR STUDENTS UNDER THE AGE OF 18): I agree to provide on behalf of my son/daughter all required ntation and information concerning his/her vaccination with the meningococcal meningitis vaccine.	
Printed	Name:	
Signed_	Date	
	I have received the meningococcal meningitis immunization within the past 5 years (must provide documentation). Date received:	
Supporti	ing Documentation (Check all applicable boxes.)	
_ _ _	I have included a statement from a physician, or other health care provider, authorized by law to administer the required vaccine. I have included my official immunization record issued by a state or local authority. I have included my official record from a Texas school official or a school official in another state.	
Student	Signature: X Date:	
SECTIO	N 2: Meningitis Immunization Waiver Status. (Please print legibly in blue or black ink)	
□ I	(Signature) have not received the meningitis immunization.	
	viewing the information presented on the reverse side of this form about meningococcal meningitis and the vaccine, I have chosen not to evidence of receiving the vaccination under the following circumstance: (Check all applicable boxes.)	
	In the opinion of a physician the vaccination required would be injurious to my health and well-being. Therefore an affidavit or certificate signed by a physician duly registered and licensed to practice medicine in the U.S. is included with this form. The affidavit or certificate includes the physician's name, address, the state where licensed and license number.	
	I have declined the vaccination for bacterial meningitis for reason of conscience, including religious belief. Therefore a signed affidavit/waiver stating that I have declined for reason of conscience is included with this form. Requests for a required affidavit must be obtained from the Texas Department of State Health Services https://webds.dshs.state.tx.us/immco/default.aspx .	

SECTION 3: Deadline for this completed form and accompanying documentation to be received by CBS

For Spring 2014: Dec. 18, 2013 For Summer 2014: April 23, 2014 For Fall 2014: August 13, 2014



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Requirement

Texas Education Code, Section 51.9192, "the Jamie Schanbaum and Nicolis Williams Act," requires first time students of Texas institutions of higher education, including transfer students, as well as current students returning from a break, to show evidence of immunization for meningococcal (bacterial) meningitis within the past five (5) years, and at least ten (10) days before the start of the semester. Additionally, current students are required to receive the immunization following a break in enrollment of at least one fall or spring semester at the same or another institution. In both cases, students will not be permitted to attend class without providing proof of immunization, or the proper exemption documentation

Exemptions

A Covered Student is exempted from the requirements of this policy if he or she submits one of the following:

- an affidavit or certificate signed by a physician licensed to practice medicine that states that physician is of the opinion that the required vaccination would be injurious to the health and well-being of the Covered Student; or
- an affidavit on the form provided by the Texas Department of State Health Services (the Department) signed by the Covered Student stating that the Covered Student declines to have the required vaccination based on reasons of conscience, which may include the Covered Student's religious beliefs.
 - However, this exception will not be available, at the discretion of the University, during a disaster or public health emergency, hostile or paramilitary action, or extraordinary law enforcement emergency declared by an appropriate official or authority from the Texas Department of State Health Services affecting the University.
 - o The affidavit can be requested online from the Department at https://webds.dshs.state.tx.us/immco/default.aspx or by mailing, hand delivering or faxing a request for an affidavit to the Department.

Important: There may be a delay between the date of the request for the affidavit form and receipt of the form from the Department. Students who plan to request an exemption should make the request early enough to allow them to complete and notarize the affidavit prior to submission to the Academic Advisor. For more information regarding exemptions, please see http://collegevaccinerequirements.com/exemption.php.

MENINGOCOCCAL DISEASE

What is meningococcal disease?

Meningococcal disease is a severe bacterial infection of the bloodstream or meninges (a thin lining covering the brain and spinal chord).

Who gets meningococcal disease?

Anyone can get meningococcal disease, but it is more common in infants and children. For some college students, such as freshmen living in dormitories, there is increased risk of meningococcal disease. Between 100 and 125 cases of meningococcal disease occur on college campuses every year in the United States; between 5 and 15 college students die each year as a result of the infection. Currently, no data are available regarding whether children at overnight camps or residential schools are at the same increased risk for disease. However, these children can be in settings similar to college freshmen living in dormitories. Other persons at increased risk include household contacts of a person known to have had the disease, and people traveling to parts of the world where meningitis is prevalent.

How is the germ meningococcus spread?

The meningococcus germ is spread by direct close contact with nose or throat discharges of an infected person. Many people carry this particular germ in their nose and throat without any signs of illness, while others develop serious symptoms.

What are the symptoms?

High fever, headache, vomiting, stiff neck and a rash are symptoms of meningococcal disease. Among people who develop meningococcal disease, 10-15% die, in spite of treatment with antibiotics. Of those who live, permanent brain damage, hearing loss, kidney failure, loss of arms or legs, or chronic nervous system problems can occur.

How soon do the symptoms appear?

The symptoms may appear two to 10 days after exposure, but usually within five days.

What is the treatment for meningococcal disease?

Antibiotics, such as penicillin G or ceftriaxone, can be used to treat people with meningococcal disease.

Is there a vaccine to prevent meningococcal meningitis?

Yes, a safe and effective vaccine is available. The vaccine is 85% to100% effective in preventing four kinds of bacteria (serogroups A, C, Y, W-135) that cause about 70% of the disease in the United States. The vaccine is safe, with mild and infrequent side effects, such as redness and pain at the injection site lasting up to 2 days. After vaccination, immunity develops within 7 to 10 days and remains effective for approximately 3 to 5 years. As with any vaccine, vaccination against meningitis may not protect 100% of all susceptible individuals.

How do I get more information about meningococcal disease and vaccination?

Contact your family physician or your student health service. Additional information is also available on the Center for Disease Control and Prevention website at http://www.cdc.gov/vaccines/hcp/vis/vis-statements/mening.html.

Return to: Fax to: 713-532-8150 Scan and email to: admissions@cbshouston.edu

College of Biblical Studies

ATTN: Office of Admission

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