

TENNESSEE STATE LAW requires two doses of MMR vaccines administered on or after the first birthday for attendance at all universities and colleges in Tennessee with an enrollment greater than 200 students. This is consistent with the recommendations of the Center for Disease Control (CDC). Two doses of MMR are considered to confer adequate immunity to Measles (Rubeola).

Measles (Rubeola) is systemic febrile disease caused by a virus. The primary site of infection is the nasopharynx. Usually fever, rash, cough, nasal discharge, and swelling lymph nodes develop. In about 30 % of cases there are complications including **DEATH**, seizures, encephalitis, and pneumonia. It is highly contagious and is spread by airborne droplets from an infected person. This disease is vaccine preventable.

**YOU WILL NOT BE ALLOWED TO REGISTER FOR CLASSES
UNTIL ADEQUATE DOCUMENTATION OF IMMUNIZATION
IS ON FILE AT STUDENT HEALTH SERVICES.**

The form on the reverse side of this sheet must be completed and signed by a health care provider and returned to Student Health Services before enrollment. (An official copy of the "permanent Tennessee Certificate of Immunization" {form PH-2414} or comparable form from another state's Health Department, or a signed medical record from your Doctor will be acceptable substitutes. Photo copies are acceptable; do not send originals as they will not be returned).

Please disregard this form if you were born before 1957, if you are attending part-time, or if you graduated from a Tennessee high school in 1999 or thereafter. Contraindications to receiving the vaccines may include pregnancy, allergy to a vaccine component, other valid medical conditions, or religious tenets prohibiting vaccinations. If you believe that you are entitled to an exemption based on one of the preceding grounds, you must contact Student Health Services at The University of Memphis prior to registration. If an exempted student contracts measles or if a measles outbreak occurs it shall be the student's personal responsibility to remain off campus until a physician gives written permission for the student to return to campus.

In the event you must obtain a new vaccination, you may contact your private physician or a local health department clinic. Should you have any questions, please call Student Health Services at 901-678-2287. (Facsimile telephone number: 901-678-3124).

**THE UNIVERSITY OF MEMPHIS
CERTIFICATION OF IMMUNIZATION**

TENNESSEE STATE LAW requires this record to be completed before registration and reflect proof of 2 MMR vaccinations administered on or after your first birthday, or documented proof of immunity to measles.

Name (Print) _____
Last First M.I.

Birth date _____ SS# _____ Phone _____

Current mailing address _____
(Street) (City) (State) (Zip)

This form must be signed by your health care provider. A permanent Tennessee Certification of Immunization (2414) or comparable form from another state's Health Department, or a signed medical record from your Doctor will be acceptable substitutes. Photocopies are acceptable; do not sent originals, as they will not be returned. **Please disregard this form if you were born before 1957, if you are attending part-time, or if you graduated from a Tennessee high school in 1999 on thereafter.**

Measles (Rubeola) Check appropriate box Month / Year

() Dates Immunized with MMR Vaccine #1 _____ / _____
#2 _____ / _____

() Dates Immunized with live (Rubeola) Vaccine _____ / _____

() Medically contraindicated because of medical condition _____ / _____
(i.e., allergy to vaccine or neomycin, etc.)

List Reason _____ Attach physician statement

() Refuse immunization because of religious objections _____ / _____
Attach official clergy statement

() Had disease: Confirmed by health care provider office record _____ / _____

() Has Immune titer confirmation of disease _____ / _____
Specify type of titer _____

HEALTH CARE PROVIDER: _____

NAME _____ ADDRESS _____

SIGNATURE _____ PHONE _____