

**The University of Memphis**  
**Meningococcal Meningitis and Hepatitis B Immunization Health History Form – Under the age of 18**

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Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

UofM ID#: U \_\_\_\_\_

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The law does not require that students receive Meningitis or Hepatitis B vaccination for enrollment. Furthermore, the institution is not required by law to provide vaccination and/or reimbursement for the vaccine. A student may be exempted from immunization requirements if vaccination conflicts with the religious tenets and practices of the student or if a licensed physician determines that the risk of harm from the vaccine outweighs the potential benefit.

• **Meningococcal Meningitis**

Meningococcal disease is a rare but potentially fatal bacterial infection, expressed either as meningitis (infection of the membranes surrounding the brain and spinal cord) or meningococcemia (bacteria in the blood). Meningococcal disease strikes about 3,000 Americans each year and is responsible for about 300 deaths annually. The disease is spread by airborne transmissions, primarily by coughing. The disease can onset very quickly and without warning. Rapid intervention and treatment is required to avoid serious illness and / or death. There are five different subtypes (called serogroups) of the bacterium that causes Meningococcal Meningitis. The current vaccine does not stimulate protective antibodies to Serogroups B, but it does protect against the most common strains of the disease, including Serogroups A, C, Y and W-135. The duration of protection is approximately three to five years. The vaccine is very safe and adverse reactions are mild and infrequent, consisting primarily of redness and pain at the site of injection lasting up to two days.

The Advisory Committee on Immunization Practices (ACIP) of the U.S. Centers for Disease Control and Prevention (CDC) recommends that college freshmen (particularly those who live in dormitories or residence halls) be informed about meningococcal disease and the benefits of vaccination and those students who wish to reduce their risk for meningococcal disease be immunized. Other undergraduate students who wish to reduce their risk for meningococcal disease may also choose to be vaccinated.

• **Hepatitis B (HBV) Immunization**

Hepatitis B (HBV) is a serious viral infection of the liver that can lead to chronic liver disease, cirrhosis, liver cancer, liver failure, and even death. The disease is transmitted by blood and or body fluids and many people will have no symptoms when they develop the disease. The primary risk factors for Hepatitis B are sexual activity and injecting drug use. This disease is completely preventable. Hepatitis B vaccine is available to all age groups to prevent Hepatitis B viral infection. A series of three (3) doses of vaccine are required for optimal protection. Missed doses may still be sought to complete the series if only one or two have been acquired. The HBV vaccine has a record of safety and is believed to confer lifelong immunity in most cases.

**Additional Immunization Information - Measles, Mumps, Rubella (MMR) and Varicella Immunizations**

**Measles**, causes fever, rash, cough, runny nose, and red, watery eyes. Complications can include ear infection, diarrhea, pneumonia, brain damage, and death.

**Mumps** causes fever, headache, muscle aches, tiredness, loss of appetite, and swollen salivary glands. Complications can include swelling of the testicles or ovaries, deafness, inflammation of the brain and/or tissue covering the brain and spinal cord (encephalitis/meningitis), and, rarely, death.

**Rubella** causes fever, sore throat, rash, headache, and red, itchy eyes. If a woman gets rubella while she is pregnant, she could have a miscarriage, or her baby could be born with serious birth defects.

**Varicella** (chicken pox) causes blister-like rash, itching, fever, and tiredness. Complications can include severe skin infection, scars, pneumonia, brain damage, or death.

**You can protect against these diseases with safe, effective vaccination.**

**Helpful links:** For more information about these diseases and the vaccine schedules, please contact your local health care provider or consult the Center for Disease Control and Prevention Web site at [CDC A-Z Index - A](http://www.cdc.gov). Tennessee Department of Health - College Immunization Information <https://www.tn.gov/health/cedep/immunization-program/ip/immunization-requirements/college-immunization-requirements.html>

**You are required to select one of the following statements.**

**I hereby certify that I have read this information and:**

- I have elected to receive and/or have started to receive the complete three dose series of the Hepatitis B vaccine.
- I have elected not to receive the Hepatitis B vaccine.

**You are required to select one of the following statements.**

**I hereby certify that I have read this information and:**

- I have elected to receive or have received the vaccine for Meningococcal Meningitis.
- I hereby certify that I have read this information and I have elected not to receive the vaccine for Meningococcal Meningitis.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_