MENINGITIS ON CAMPUS
Know Your Risk
Learn About Vaccination

Certain college students are at increased risk for meningococcal disease, a potentially fatal bacterial infection commonly referred to as meningitis. In fact, freshmen living in dorms are found to have a six-fold increased risk for the disease. A U.S. health advisory panel recommends that college students, particularly freshmen living in dorms, learn more about meningitis and vaccination.

A vaccine is available that protects against four types of the bacteria that cause meningitis in the United States – types A, C, Y and W-135. Protective antibody levels may be achieved within 7-10 days after vaccination and provides protection for approximately 3 to 5 years. As with any vaccine, it may not protect 100% of all susceptible individuals.

Senate Bill 955 states that colleges shall prohibit a student from residing in a dormitory unless the student has received a one-time vaccination against meningococcal disease. A student is exempt if they sign a written waiver stating that they have received and reviewed information provided by the college and have chosen not to be vaccinated.

- **What is meningococcal meningitis?** Meningitis is rare. But when it strikes, this potentially fatal bacterial disease can lead to swelling of fluid surrounding the brain and spinal column as well as severe and permanent disabilities, such as hearing loss, brain damage, seizures, limb amputation and even death.
- **How is it spread?** Meningococcal meningitis is spread through the air via respiratory secretions or close contact with an infected person. This can include coughing, sneezing, kissing or sharing items like utensils, cigarettes and drinking glasses.
- **What are the symptoms?** Symptoms of meningococcal meningitis often resemble the flu and can include high fever, severe headache, stiff neck, rash, nausea, vomiting, lethargy and confusion.
- **Who is at risk?** Certain college students, particularly freshmen who live in dormitories or residence halls, have been found to have an increased risk for meningococcal meningitis. Other undergraduates can also consider vaccination to reduce their risk for the disease.

**For more information:** To learn more about meningitis and the vaccine visit Mount Aloysius College Health Services Office. You can also visit the websites of the Center for Disease Control and Prevention (CDC) at www.cdc.gov/ncidod/dbmd/diseaseinfo and the American College Health Association at www.acha.org. The vaccine is available to all students through Health Services. Please visit (St. Joe’s Hall Room 100-102) or call (814-886-6515) to make an appointment. Waiver forms are also available in Health Services, but we strongly urge you to receive the vaccine if you haven’t done so already.
MENINGOCOCCAL VACCINE WAIVER FORM
**Must be completed by all dormitory students**

According to the Pennsylvania College and University Vaccination Act of July 2002 (Senate Bill 955), students who reside in a dormitory must receive a vaccination against meningococcal disease. A student is exempt from the vaccination requirement if the college provides detailed information on the risks associated with meningococcal disease, the availability and effectiveness of the vaccine and the student signs a written waiver. If the student is a minor, the student’s parent or guardian must sign the waiver.

PLEASE CHECK ONLY ONE OPTION

☐ I have received the meningitis vaccine on _______________ (mm/dd/yy)

☐ I have received and reviewed information on the risks associated with meningococcal disease and the availability and effectiveness of the meningococcal vaccine. I chose NOT to be vaccinated against meningococcal disease at this time. I understand that if I decide in the future that I want the vaccine, I can receive it at Health Services or elsewhere.

Print Name: _____________________________ Date: ______________________________

If student is 18 years of age or older
Signature of Resident Student: __________________________________

If student is under 18 years of age
Signature of Parent/Guardian: __________________________________

PLEASE COMPLETE AND RETURN TO HEALTH SERVICES PRIOR TO MOVING INTO THE DORMITORY!