

# California State Required Meningitis Awareness Disclosure Form

To be completed by student and filled out in pen.

California law requires that universities make an increased effort to educate students about the risk of Meningococcal disease or "meningitis." Although the incidence of meningitis is relatively rare, about one case per 100,000 persons per year, studies done by the CDC and American College Health Association (ACHA) found that the cases of Meningococcal disease are three to four times higher among college freshmen that live in dormitories. The Meningococcal vaccine is effective against the four kinds of bacteria that cause about two thirds of Meningococcal disease in the United States.

## WHAT IS MENINGOCOCCAL MENINGITIS?

Meningococcal meningitis is a potentially fatal infection caused by the bacterium *Neisseria meningitidis* that causes inflammation of the membranes surrounding the brain and spinal chord.

## HOW IS MENINGITIS SPREAD?

Meningitis is spread by direct contact with infected individuals. The bacterium is present in respiratory secretions and can be spread by coughing or sneezing. It is also spread by sharing eating utensils, water bottles, cigarettes, and kissing. Social factors such as smoking, excessive alcohol consumption and bar patronage also increase the chance that a person will contract meningitis from an infected individual.

## IS THERE A VACCINE FOR MENINGITIS?

There are three vaccines available that are 85% to 100% effective in preventing four kinds of bacteria that cause about 70% of disease in the U.S. Menomune, the Meningococcal polysaccharide vaccine has been available since the 1970s. Menactra, the Meningococcal conjugate vaccine was licensed in 2005 and Menveo was licensed in 2010. The vaccines work well, are safe with generally mild side effects such as redness and pain at the injection site lasting up to two days. Immunity develops within 7-10 days after vaccination and lasts approximately 3-5 years. The newer vaccines are preferred for people 11-55 years of age and are expected to give better, longer-lasting protection and should also be better at preventing the disease from spreading from person to person. A few cases of Guillain-Barré syndrome, a serious nervous system disorder, have been reported among people who received the vaccines. However, there is not enough evidence yet to tell whether the cases were caused by the vaccine. This is being investigated currently by health officials.

## WHAT ARE THE SYMPTOMS OF MENINGITIS?

Cases of meningitis peak in late winter and early spring, overlapping the flu season. Symptoms can easily be mistaken for the flu. These symptoms may include high fever, rash, vomiting, severe headache, neck stiffness, lethargy, nausea, and sensitivity to light. If a student has two or more of these symptoms at one time, they should seek health care immediately. Meningitis progresses rapidly and can lead to shock and death within hours of the first symptoms if left untreated.

If you have any questions regarding the meningitis vaccines, please contact your doctor or call Health Services at (805)493-3225. More information can be found at the CDC website [www.cdc.gov](http://www.cdc.gov) or the ACHA website [www.acha.org](http://www.acha.org).

The Menactra Vaccine for *Neisseria meningitidis* is available at CLU Health Services for a fee of \$115 (price is subject to change without notice). We will keep this information confidential as part of your medical record in accordance with Assembly Bill 1452. Please indicate your preference and acknowledgement of this information by signing below:

## MARK ONE OF THE BOXES THEN SIGN BELOW

- I have received a Meningococcal Conjugate vaccine MCV4 (i.e., Menactra, Menveo). Date \_\_\_\_/\_\_\_\_/\_\_\_\_
- I have received a Meningococcal Polysaccharide vaccine MPSV4 (i.e., Menomune). Date \_\_\_\_/\_\_\_\_/\_\_\_\_
- I have received a Meningococcal vaccine but do not know which one. Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
(Hib meningitis vaccine does NOT qualify)

I am planning to contact CLU Health Services about receiving the Meningitis vaccine. I understand my registration will be on hold if I do not receive this vaccine within the first month of classes.

I have read the provided information and do not want to receive a Meningitis vaccine. \_\_\_\_\_ (initial)

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Student Name (Please Print Clearly)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian Signature (if student under age 18)

\_\_\_\_\_  
Print Parent Name

PLEASE MAIL COMPLETED  
FORM TO HEALTH SERVICES IN  
THE ENCLOSED ENVELOPE BY:  
AUGUST 1 FOR FALL SEMESTER  
JANUARY 2 FOR SPRING SEMESTER



HEALTH SERVICES  
60 WEST OLSEN ROAD #4300  
THOUSAND OAKS, CA  
91360-2700  
T: (805) 493-3225  
F: (805) 493-3955

WWW.CALLUTHERAN.EDU/HEALTH