EXTREMELY IMPORTANT!

Dear Student:

New York State Public Health Law requires that the College provide you with information regarding meningococcal disease and preventive vaccination.

Meningococcal disease is caused by the Neisseria meningitidis bacterium. The membranes covering the brain and spinal cord become infected and inflamed. Most cases occur in children and adolescents, and an average of 10-15% of those infected die. Of the survivors, approximately 10% lose their arms or legs, become deaf, have problems with their nervous systems, become mentally retarded, or suffer seizures or strokes. (US Department of Health & Human Services-Center for Disease Control and Prevention, VIS/Meningococcal)

Those most at risk for contracting meningococcal disease are close contacts in the same household, those whose immune system is already compromised, children in schools and day care centers, college students, and infants. There is also an increased risk for college freshmen, particularly those living in dormitories. While there are antibiotics available to treat the disease, some people still die. It is therefore important that those who fall into one of the above categories be immunized. You, as a college student, are in a higher risk group and should therefore seriously consider such immunization.

While most immunizations carry some risk, meningococcal vaccine is very safe, and is certainly much safer than getting the disease. Some people have reported mild side effects, such as discomfort and redness at the injection site for about one to two days, and occasionally there has been a report of a mild fever. As with any immunization, there is always a small percentage of people who are allergic to either the vaccine or a component of the vaccine and may develop a more serious reaction. This percentage is extremely small. Meningococcal vaccination is available in the Health and Wellness Center at cost during the academic year.

The law requires that in addition to the College providing you with this information, that you also complete, sign, and return the following section. If you do not do so within THIRTY DAYS OF THE FIRST DAY OF CLASS. you may not be permitted to continue attending class and/or to register for future classes. Please do so immediately, and return to the address on the bottom. If you require any further information, please feel free to contact the Health and Wellness Center at: (631)420-2009.

NAME ___________________________________________ RAM # ____________________________

I hereby certify that I have received information about meningococcal disease and preventive immunization from Farmingdale State University. I also certify that:

MAKE ONE CHOICE ONLY

_______ I understand the risks and benefits of immunization against meningococcal disease but do not wish to receive the vaccine at this time. I understand that I may choose to be immunized in the future.

_______ I have received vaccination against meningococcal disease within 10 years (Proof must be attached or letter will not be valid).

______________________________________________ Date ______________________________

Student signature, or parent/guardian if under 18 years of age.

Return to:
Farmingdale State Health & Wellness Center • 2350 Broadhollow Road • Farmingdale, NY 11735