



## Department of Residence Life & Housing

### Certificate of Meningococcal Waiver

Oklahoma Statutes, Title 70 §3243, requires that all students who are first time enrollees in any public or private postsecondary education institute in this state and who reside in on-campus student housing shall be vaccinated against meningococcal disease.

The statute permits the student or, if the student is a minor, the student's parent or other legal representative, to sign a written waiver stating that the student has chosen not to be or not to have the student vaccinated.

Circle one:

- 1) **I have been vaccinated against meningococcal disease.**
- 2) **I have chosen not to be vaccinated\* against meningococcal disease.**

Please initial:

- 1) \_\_\_\_\_ **I have received and reviewed detailed information on the risks associated with meningococcal disease**

Student's Name: \_\_\_\_\_ Social Security # \_\_\_\_\_

Birth date: \_\_\_\_\_ Term/Year of enrollment: \_\_\_\_\_

Student Signature: \_\_\_\_\_ Classification: \_\_\_\_\_ Date: \_\_\_\_\_

When a student is under 18 years of age, the following must also be completed:

As the parent, guardian or other legal representative, I certify that the student named above is a minor and that I have received and reviewed the information provided and that I have chosen not to have the student vaccinated against meningococcal disease.

Parent Signature (if applicable) \_\_\_\_\_ Date \_\_\_\_\_

*\*With this waiver, I seek exemption from this requirement. I voluntarily agree to release, discharge, indemnify and hold harmless SWOSU, its officers, employees and agents from any and all costs, liabilities, expenses, claims, demands, or causes of action on account of any loss or personal injury that might result from my decision not to be immunized against meningitis.*

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### Emergency Medical Information

#### Personal Information:

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_ Student ID #: \_\_\_\_\_

Permanent Physical Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Campus Address: \_\_\_\_\_ Cell Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

#### Emergency Contact Information: *In case of accident, illness, or other emergencies, please provide information for notification.*

Person to Notify \_\_\_\_\_ Relationship to you \_\_\_\_\_ Phone Number \_\_\_\_\_

Address \_\_\_\_\_ Other Phone Number \_\_\_\_\_

#### Insurance Information (Optional):

Insurance Carrier \_\_\_\_\_ Account Number \_\_\_\_\_

Policy Holder's Name \_\_\_\_\_ Relationship to You \_\_\_\_\_

#### Medical Information: *Please list medical needs/conditions for which housing staff or medical personnel need to be informed.*

\_\_\_\_\_  
\_\_\_\_\_

**Release of Information:** *By signing below, in the event of accident, illness, or other emergency, the Residence Life & Housing Department may release the information on this form to emergency personnel.*

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

## *Meningococcal Disease*

Meningococcal disease can refer to any illness caused by the type of bacteria called *Neisseria meningitidis*, also known as meningococcus [muh-nig-goh-KOK-us]. These illnesses are often severe and can be deadly. They include infections of the lining of the brain and spinal cord (meningitis) and bloodstream infections (bacteremia or septicemia).

These bacteria spread through the exchange of respiratory and throat secretions like spit (e.g., by living in close quarters, kissing). Doctors treat meningococcal disease with antibiotics, but quick medical attention is extremely important. Keeping up to date with recommended vaccines is the best defense against meningococcal disease.

### **Risk Factors**

Certain people are at increased risk for meningococcal disease. Some risk factors include:

- **Age**
  - Doctors more commonly diagnose meningococcal disease in infants, teens, and young adults. [Learn more about vaccine recommendations for age groups at increased risk \(https://www.cdc.gov/meningococcal/about/risk-age.html\)](https://www.cdc.gov/meningococcal/about/risk-age.html).
- **Community setting**
  - Infectious diseases tend to spread wherever large groups of people gather together. Several college campuses have reported outbreaks of serogroup B meningococcal disease during the last several years. [Learn more about vaccine recommendations for those at increased risk in community settings \(https://www.cdc.gov/meningococcal/about/risk-community.html\)](https://www.cdc.gov/meningococcal/about/risk-community.html).
- **Certain medical conditions**
  - Certain medical conditions and medications put people at increased risk of meningococcal disease. They include not having a spleen, having a complement component deficiency, and being infected with HIV. [Learn more about vaccine recommendations for those at increased risk due to certain medical conditions \(https://www.cdc.gov/meningococcal/about/risk-medical.html\)](https://www.cdc.gov/meningococcal/about/risk-medical.html).
- **Travel**
  - Travelers to the meningitis belt in sub-Saharan Africa may be at risk for meningococcal disease. [Learn more about vaccine recommendations for travelers \(https://www.cdc.gov/meningococcal/about/risk-travelers.html\)](https://www.cdc.gov/meningococcal/about/risk-travelers.html).

### **Causes**

Bacteria called *Neisseria meningitidis* cause meningococcal disease. About 1 in 10 people have these bacteria in the back of their nose and throat with no signs or symptoms of disease; this is called being ‘a carrier’. But sometimes the bacteria invade the body and cause certain illnesses, which are known as meningococcal disease.

There are five serogroups (types) of *Neisseria meningitidis* — A, B, C, W, and Y — that cause most disease worldwide. Three of these serogroups (B, C, and Y) cause most of the illness seen in the United States.

### **Spread to Others**

People spread meningococcal bacteria to other people by sharing respiratory and throat secretions (saliva or spit). Generally, it takes close (for example, coughing or kissing) or lengthy contact to spread these bacteria. Fortunately, they are not as contagious as germs that cause the common cold or the flu. People do not catch them through casual contact or by breathing air where someone with meningococcal disease has been. Sometimes the bacteria spread to people who have had close or lengthy contact with a patient with meningococcal disease. Those at increased risk of getting sick include:

- People who live with the patient
- Anyone with direct contact with the patient’s oral secretions, such as a boyfriend or girlfriend

Close contacts of someone with meningococcal disease should receive antibiotics to help prevent them from getting the disease. This is known as prophylaxis (pro-fuh-lak-sis). Health departments investigate each case of meningococcal disease to identify all close contacts and make sure they receive prophylaxis. This does not mean that the contacts have the disease; it is to prevent it. People who are not a close contact of a patient with meningococcal disease do not need prophylaxis.

### **Signs and Symptoms**

Seek medical attention immediately if you or your child develops symptoms of meningococcal disease. Symptoms of meningococcal disease can first appear as a flu-like illness and rapidly worsen. The two most common types of meningococcal infections are meningitis and septicemia. Both of these types of infections are very serious and can be deadly in a matter of hours.

### **Meningococcal Meningitis**

Doctors call meningitis caused by the bacteria *Neisseria meningitidis* meningococcal meningitis. When someone has meningococcal meningitis, the bacteria infect the protective membranes covering their brain and spinal cord and cause swelling.

The most common symptoms include:

- Fever
- Headache
- Stiff neck

There are often additional symptoms, such as

- Nausea
- Vomiting
- Photophobia (eyes being more sensitive to light)
- Altered mental status (confusion)

Newborns and babies may not have or it may be difficult to notice the classic symptoms of fever, headache, and neck stiffness. Instead, babies may be slow or inactive, irritable, vomiting, or feeding poorly. In young children, doctors may also look at the child's reflexes for signs of meningitis.

### ***Meningococcal Septicemia (aka Meningococemia)***

Doctors call septicemia (a bloodstream infection) caused by *Neisseria meningitidis* meningococcal septicemia or meningococemia. When someone has meningococcal septicemia, the bacteria enter the bloodstream and multiply, damaging the walls of the blood vessels. This causes bleeding into the skin and organs.

Symptoms may include:

- Fever
- Fatigue
- Vomiting
- Cold hands and feet
- Cold chills
- Severe aches or pain in the muscles, joints, chest or abdomen (belly)
- Rapid breathing
- Diarrhea
- In the later stages, a dark purple rash

### ***Diagnosis***

Meningococcal disease can be difficult to diagnose because the signs and symptoms are often similar to those of other illnesses. If a doctor suspects meningococcal disease, they will collect samples of blood or cerebrospinal fluid (fluid near the spinal cord; see image below). Doctors then test the samples to see if there is an infection and, if so, what germ is causing it. If *Neisseria meningitidis* bacteria are in the samples, laboratorians can grow (culture) the bacteria. Growing the bacteria in the laboratory allows doctors to know the specific type of bacteria that is causing the infection. Knowing this helps doctors decide which antibiotic will work best. Other tests can sometimes detect and identify the bacteria if the cultures do not.

### ***Prevention***

**Keeping up to date with recommended immunizations is the best defense against meningococcal disease.** Maintaining healthy habits, like getting plenty of rest and not having close contact with people who are sick, also helps.

### ***Vaccination***

Vaccines help protect against all three serogroups (B, C, and Y) of *Neisseria meningitidis* bacteria commonly seen in the United States. Like with any vaccine, meningococcal vaccines are not 100% effective. This means there is still a chance you can develop meningococcal disease after vaccination. People should know the [symptoms \(https://www.cdc.gov/meningococcal/about/symptoms.html\)](https://www.cdc.gov/meningococcal/about/symptoms.html) of meningococcal disease since early recognition and quick medical attention are extremely important.

### ***Antibiotics***

Close contacts of a person with meningococcal disease should receive antibiotics to prevent them from getting sick. This is known as prophylaxis (pro-fuh-lak-sis). Examples of close contacts include:

- People in the same household or roommates
- Anyone with direct contact with a patient's oral secretions (saliva or spit), such as a boyfriend or girlfriend

**The above information was retrieved from the Center for Disease Control:  
<https://www.cdc.gov/meningococcal/index.html>**