

Union Theological Seminary Measles, Mumps & Rubella Form

Please return this form by fax: (212) 202-4667) or by mail/in person:

Office of Student Affairs, Union Theological Seminary, 3041 Broadway, New York, NY 10027

Federal Law mandates that we cannot accept records via email for security and privacy reasons.



I. STUDENTS COMPLETE THIS SECTION

New York State Public Health Law 2165 and University Policy REQUIRES all students born on or after JANUARY 1, 1957 prove immunity to measles, mumps, and rubella.

Student Name: _____
Last/Family First Middle Initial

UNI: _____ Birth Date: _____ / _____ / _____ Phone #: _____
Month Day Year

Union E-mail: _____

II. HEALTH CARE PROVIDERS COMPLETE THIS SECTION

All of section A or section B below must be completed by a physician or health care provider.

Section A: MMR (Measles, Mumps, and Rubella)

_____ 1st MMR DOSE: Administered after the first birthday AND after 1/1/1972
and

_____ 2nd MMR DOSE: or 2nd Live Virus Measles Dose:
Administered at least 28 days after 1st dose

Month Day Year
_____/_____/_____

_____/_____/_____

Section B-PART 1: MEASLES

_____ 1st Live Virus Dose: Administered after first birthday
and

_____ 2nd Live Virus Dose: Administered at least 28 days after 1st dose

_____ or
History of Illness documented by Health Care Provider

_____ or
Immunity Proven by Serologic Testing – **MUST SUBMIT COPY OF LAB REPORT**

Month Day Year
_____/_____/_____

_____/_____/_____

_____/_____/_____

_____/_____/_____

Section B-PART 2: MUMPS

_____ Live Virus Dose: Administered after first birthday AND after 1/1/1969

_____ or
History of Illness documented by Health Care Provider

_____ or
Immunity Proven by Serologic Testing – **MUST SUBMIT COPY OF LAB REPORT**

Month Day Year
_____/_____/_____

_____/_____/_____

_____/_____/_____

_____/_____/_____

Section B-PART 3: RUBELLA (German Measles)

_____ Live Virus Dose: Administered after first birthday AND after 1/1/1969

_____ or
Immunity Proven by Serologic Testing – **MUST SUBMIT COPY OF LAB REPORT Note:**
History of Illness is **NOT** acceptable

Month Day Year
_____/_____/_____

_____/_____/_____

_____/_____/_____

The information on this form is accurate to the best of my knowledge.

Physician/Provider Name (Please Print)

Signature

Physician/Provider Stamp

Lic. #

**COURSE REGISTRATION IS PROHIBITED UNTIL COMPLETE DOCUMENTATION HAS BEEN RECEIVED & PROCESSED.
DOCUMENTATION IS DUE UPON ADMISSION.**

Measles, Mumps & Rubella Form

Instructions & Explanations



Instructions

Students: Complete the top portion of this form. Once your physician or health care provider has completed this form or you have copies of supporting documentation, make a copy for your records and return the originals to the Office of Student Affairs, Union Theological Seminary, 3041 Broadway, New York, NY 10027. Forms may also be faxed to (212) 202-4667. We will be unable to process your form without your name, birth date, health care provider's name and provider's signature.

Physician or other Health Care Provider: Complete all required information. Documentation of two (2) MMR vaccines (or equivalent) is required: the first administered after the first birthday and the second administered at least 28 days after the first vaccine. Laboratory results must be provided if immunity is demonstrated by serological testing. If there is no supporting documentation, this form will NOT be processed without a health care provider's name and signature.

Explanations of Supporting Documentation

1. Immunization Documentation from Another School

Students who have attended another school in the United States may submit a copy of those immunization records to prove immunity to measles, mumps, and rubella. Once you have obtained a copy of your documentation, please complete the top portion of this form and attach to the copy of your immunization record. Since requirements vary by state and country, your record is reviewed for compliance with New York State and Union Theological Seminary requirements. It is important for you to maintain a copy, as the forms are often illegible or lack identifying information required to process the documentation.

2. Vaccine History

Provide a certificate of immunization verifying the date of the disease, or the administered measles, mumps, and rubella vaccines. This includes documents such as:

- A certificate from a licensed physician
- A migrant health record
- A community health plan record
- An immunization record card signed by a physician, a physician's assistant, or nurse practitioner

You must also complete the student section of this form and submit it along with your immunization record. Please note that all immunizations must have been received after your first birthday.

3. Document History of Illness

If you have been diagnosed by a physician with having had measles and/or mumps, this is acceptable proof of immunity. The physician must enter the dates of initial diagnosis on this record form. Note: A diagnosis of previous rubella disease is not acceptable proof of immunity under New York State Health Code.

4. Immunity Proven by Serological Testing

Immunity to all of the three diseases may be proven by blood test for antibodies. You must submit a copy of the actual laboratory report with this form.

If you have any questions please email studentaffairs@uts.columbia.edu and retain a copy for your records.

COURSE REGISTRATION IS PROHIBITED UNTIL COMPLETE DOCUMENTATION HAS BEEN RECEIVED. DOCUMENTATION IS DUE UPON ADMISSION.

MENINGOCOCCAL MENINGITIS DISEASE VACCINATION RESPONSE FORM



New York State Public Health Law 2167, enacted in 2003, requires all colleges and universities to:

- Distribute information to students about meningococcal meningitis and the vaccine that protects against the disease, and
- Collect and maintain a record of each student's decision regarding meningitis vaccination.

Please go to www.cdc.gov/meningococcal for information on meningococcal meningitis and the protective vaccine.

Union Theological Seminary does not require a certificate of immunization for meningococcal meningitis, but *all students* are required to review the information provided, complete and sign this form, and return it to the Office of Student Affairs, Union Theological Seminary, 3041 Broadway, New York, NY 10027. Forms may also be faxed to (212) 202-4667 upon admission. **You will not be permitted to register for classes unless you have submitted this form.**

If you choose to be vaccinated against meningococcal meningitis disease, you may do so through Columbia University Health Services (212-854-2284) or through your own health care provider. Both the Menactra™ and Menomune™ vaccines are available from Columbia for a fee – see http://www.health.columbia.edu/docs/services/immunizations/vaccine_fees.html.

Check one box, sign, and provide required information.

I have reviewed the information provided by Union Theological Seminary about meningococcal meningitis disease and vaccinations, and:

- I certify that I have been immunized against meningococcal meningitis disease with the Menactra™ or Menomune™ vaccine within the past 10 years.
- I will obtain immunization against meningococcal meningitis disease within 30 days from my private health care provider or through Columbia University Health Services.
- I understand the risks of not receiving the vaccine. I have decided that I will not obtain immunization against meningococcal meningitis disease.

Signed _____ Date _____

Print Name _____ Date of Birth _____

Home Address _____

Union E-mail _____

PLEASE RETURN ORIGINAL SIGNED FORM TO:

Office of Student Affairs
Union Theological Seminary
3041 Broadway, New York, NY 10027.
Forms may also be faxed to (212) 202-4667

Information About Meningococcal Meningitis

Meningococcal meningitis is a rare but serious disease that may affect young adults. There is a somewhat higher risk among young adults living in communal housing such as residence halls.

Vaccination provides protection against the more common types of the disease. Only one dose is necessary. The vaccine is available through many primary care providers including Medical Services at Columbia Health, where the vaccine is provided at no cost to students enrolled in the Columbia Health program.

Student Health Services at the Medical Campus also offers the meningitis vaccine. For further information, visit: cumc.columbia.edu/student/health.

Adults entering educational institutions should become informed about meningococcal meningitis and the risk of contracting the disease and should consider carefully whether or not vaccination is appropriate for them.

Below is information about meningococcal meningitis from the Centers for Disease Control and Prevention. Please read it carefully. Then make a decision about vaccination. See response form for recording your decision.

What is meningitis?

Meningitis is an infection of the fluid of a person's spinal cord and the fluid that surrounds the brain. People sometimes refer to it as spinal meningitis. Meningitis is usually caused by a viral or bacterial infection. Knowing whether meningitis is caused by a virus or bacterium is important because the severity of illness and the treatment differ. Viral meningitis is generally less severe and resolves without specific treatment, while bacterial meningitis can be quite severe and may result in brain damage, hearing loss, or learning disability. For bacterial meningitis, it is also important to know which type of bacteria is causing the meningitis because antibiotics can prevent some types from spreading and infecting other people. Before the 1990s, *Haemophilus influenzae* type b (Hib) was the leading cause of bacterial meningitis, but new vaccines being given to all children as part of their routine immunizations have drastically reduced the occurrence of invasive disease due to *H. influenzae*. Today, *Streptococcus pneumoniae* and *Neisseria meningitidis* are the leading causes of bacterial meningitis in adults. Fortunately, there are vaccines available for all three types of bacteria.

What are the signs and symptoms of meningitis?

High fever, headache, and stiff neck are common symptoms of meningitis in anyone over the age of 2 years. These symptoms can develop over several hours. Other symptoms may include nausea, vomiting, rash, discomfort looking into bright lights, confusion, and sleepiness. As the disease progresses, patients of any age may have seizures.

How is meningitis diagnosed?

Early diagnosis and treatment are very important. If symptoms occur, the patient should see a doctor immediately. The diagnosis is usually made by growing bacteria from a sample of spinal fluid. The spinal fluid is obtained by performing a spinal tap, in which a needle is inserted into an area in the lower back where fluid in the spinal canal is readily accessible. Identification of the type of bacteria responsible is important for selection of correct antibiotics.

Can meningitis be treated?

Bacterial meningitis can be treated with a number of effective antibiotics. It is important, however, that treatment be started very early in the course of the disease. Appropriate antibiotic treatment of most common types of bacterial meningitis should reduce the risk of dying from meningitis to below 15% for everyone except the very young and the elderly.

Is meningitis contagious?

Yes, some forms of bacterial meningitis are contagious. The bacteria are spread through the exchange of respiratory and throat secretions (e.g., coughing, kissing). Fortunately, none of the bacteria that cause meningitis are as contagious as things like the common cold or the flu, and they are not spread by casual contact or by simply breathing the air where a person with meningitis has been.

However, sometimes the bacteria that cause meningitis have spread to other people who have had close or prolonged contact with a patient with meningitis caused by *Neisseria meningitidis* (also called meningococcal meningitis) or Hib. People in the same household or residence hall, or anyone with direct contact with a patient's oral secretions (such as a boyfriend or girlfriend) would be considered at increased risk of acquiring the infection. People who qualify as close contacts of a person with meningitis caused by *N. meningitidis* should receive antibiotics immediately to prevent them from getting the disease. Tell your doctor if you think you have been exposed to someone with meningitis. Meningitis cases have to be reported to state or local health departments to assure follow-up of close contacts and to permit recognition of outbreaks.

Are there vaccines against meningitis?

Yes, there are two vaccines currently available in the United States that protect against *N. meningitidis*: *Menomune* and *Menactra*. First-year university students, especially those who live in residence halls are at higher risk for meningococcal disease and should be educated about the availability of a safe and effective vaccine which can decrease their risk. Although large epidemics of meningococcal meningitis do not occur in the United States, some countries experience large, periodic epidemics. Students travelling overseas should check to see if meningococcal vaccine is recommended for their destination. Students may contact Medical Services at Columbia Health for vaccination recommendations prior to travelling abroad.

It's important for students interested in the vaccine to understand that it is safe and may be effective for up to 10 years; however, some individuals' vaccine-related immunity may wane after three-to-five years.