Pace University is required to maintain a record of the following for each student:

- Certificate of Immunization for meningococcal meningitis disease; or
- A response to receipt of meningococcal meningitis disease and vaccine information signed by the student or the student’s parent or guardian; AND EITHER
  - Self-reported or parent recall of meningococcal meningitis immunization within the past 10 years; or
  - An acknowledgement of meningococcal disease risks and refusal of meningococcal meningitis immunization signed by the student or the student’s parent or guardian.

Resident first-year students are strongly encouraged to receive a meningococcal vaccination. Students in a nursing program or a physician assistant program must complete this part of the form and submit with a copy of the blood titer results required for participation in these programs.

Students may also submit this part electronically at: www.pace.edu/paperless. The University Health Care Office on your campus can assist you in fulfilling these requirements. Inoculations can be administered for Measles, Mumps, and Rubella (MMR). The Meningitis vaccine may be available. You may contact them directly at the numbers below to make an appointment.

New York UHC (212) 346-1600 Westchester UHC (914) 773-3760

Immunization Records

Provide Immunization Records

All new students are required to submit proof of immunization against measles, mumps, and rubella. New students must have received the meningococcal meningitis immunization within the last 10 years of their first day of enrollment and report the date on which it was received or submit an acknowledgement of the risks and a signed refusal to receive the immunization. For your convenience, an Immunization Requirement Form is attached. Please have your health care provider complete this form and then mail or hand deliver the completed form to: Pace University, Office of Student Assistance, One Pace Plaza, New York, NY 10038, by December 1, 2017.

All matriculated students enrolled for six (6) or more credits must complete this form. Students will not be allowed to register or attend classes unless they submit this completed form. If any portion of this document is illegible, it will not be processed. Please submit copies of all supporting documentation and keep originals for your records. Supporting documentation does not preclude the completion of this form. Please print legibly. If you have questions please call (877) 672-1830 or email immunization@pace.edu.

Measles/Mumps/Rubella

New York State Law requires all college and university students born on or after January 1, 1957, to present proof of immunity against measles, mumps, and rubella. Enrollment at Pace University requires documented proof of immunity.

Measles: The student must submit proof of two doses of live measles vaccine, the first dose given no more than four days prior to the student’s first birthday and the second at least 28 days after the first dose. Students may also submit an original dated laboratory report that reflects postive numerical immunity results of a blood antibody titer test, or a licensed health care provider verification of a history of the disease.

Mumps: The student must submit proof of one dose of live mumps vaccine, given no more than four days prior to the student’s first birthday. Students may also submit an original dated laboratory report that reflects postive numerical immunity results of a blood antibody titer test, or a licensed health care provider verification of a history of the disease.

Rubella: The student must submit proof of one dose of live rubella vaccine, given no more than four days prior to the student’s first birthday. A licensed health care provider verification of a history of the disease must be acceptable and does not confirm immunity. Students may also submit an original dated laboratory report that reflects postive numerical immunity results of a blood antibody titer test.

New York State will consider exceptions only for medical or religious reasons. If either should apply to you, forward appropriate documentation to the Office of Student Assistance along with the attached completed form. Please keep a copy of your immunization record since we will not keep paper files once the information is entered into our computer. All documentation must be in English.

New York State has closed institutions where measles cases have been confirmed. Therefore, students whose immunity records are incomplete will not be allowed to attend class.

For more information, visit www.pace.edu/immunization.
Meningococcal Meningitis

On July 22, 2003, Governor Pataki signed New York State Public Health Law (NYSHL) 2167 requiring institutions, including colleges and universities, to distribute information about meningococcal disease and vaccination to all students meeting the enrollment criteria, whether they live on or off campus. Pace University is required to maintain a record of the following for each student:

- Certificate of Immunization for meningococcal meningitis disease
- A response to a receipt of meningococcal meningitis disease and vaccine information signed by the student or the student’s parent or guardian

And either:

- An acknowledgement of meningococcal meningitis disease risks and refusal of meningococcal meningitis immunization signed by the student or student’s parent or guardian
- Self-reported or parental recall of meningococcal meningitis immunization within the past 10 years

Resident first-year students are strongly encouraged to receive a meningococcal meningitis vaccination.

Note: Students may also submit this statement electronically at http://osapaperless.pace.edu

Facts about Meningococcal Disease

Meningitis is a rare disease. However, when it strikes, its flu-like symptoms make diagnosis difficult. If not treated early, meningitis can lead to swelling of the fluid surrounding the brain and spinal column, as well as severe and permanent disabilities, such as hearing loss, brain damage, hearing loss, kidney failure, loss of arms or legs, or chronic nervous system problems.

Cases of meningitis among teens and young adults 15 to 24 years of age (the age of most college students) have more than doubled since 1991. The disease strikes about 24 years of age (the age of most college students) have more than doubled since 1991. The disease strikes about 10 percent of the disease in the United States. In general, the meningococcal meningitis disease is more common in infants and children. For some college students, such as freshmen living in dormitories, there is an increased risk of meningococcal disease. Between 100 and 125 cases of meningococcal disease occur on college campuses every year in the United States; between 5 and 15 college students die each year as a result of infection. Currently, no data is available regarding whether children at overnight camps or residential schools are at the same increased risk for disease. However, these settings are different to college dormitories. Other persons at increased risk include household contacts of a person known to have had this disease, and people traveling to parts of the world where meningitis is prevalent.

How is meningococcal disease spread?

The meningococcal germ is spread by direct close contact with nose or throat discharges of an infected person. Many people carry this particular germ in their nose and throat without any signs of illness, while others may develop serious symptoms.

What are the symptoms?

High fever, headache, vomiting, stiff neck, and a rash are symptoms of meningococcal disease. Among people who develop meningococcal disease, 10 to 15 percent die, despite treatment with antibiotics. Of those who live, permanent brain damage, hearing loss, kidney failure, loss of arms or legs, or chronic nervous system problems can occur.

How soon do the symptoms appear?

The symptoms may appear two to 10 days after exposure, but usually within five days.

What is the treatment for meningococcal disease?

Antibiotics, such as penicillin G or ceftriaxone, can be used to treat people with meningococcal disease.

Is there a vaccine to prevent meningococcal meningitis?

A conjugate meningococcal vaccine (Menactra) is available and provides protection against four of the five kinds of bacteria (A, C, Y, W:135) that cause about 70 percent of the disease in the United States. In general, the benefits of a conjugate vaccine include a longer lasting immune response and improved strength of the immune response. The older polysaccharide vaccine is used to treat people with meningococcal disease.

Vaccination?

As with any vaccine, vaccination against meningitis may not protect 100 percent of all susceptible individuals.

What is meningococcal disease?

Meningococcal disease is a severe bacterial infection of the bloodstream or meninges (a thin lining covering the brain and spinal cord). Who gets meningococcal disease?

Anyone can get meningococcal disease, but it is more common in infants and children. For some college students, such as freshmen living in dormitories, there is a risk.

Meningococcal meningitis

Meningococcal meningitis is a rare disease. However, when it strikes, its flu-like symptoms make diagnosis difficult. If not treated early, meningitis can lead to swelling of the fluid surrounding the brain and spinal column, as well as severe and permanent disabilities, such as hearing loss, brain damage, hearing loss, kidney failure, loss of arms or legs, or chronic nervous system problems.

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How is the germ meningococcus spread?

The meningococcal germ is spread by direct close contact with nose or throat discharges of an infected person. Many people carry this particular germ in their nose and throat without any signs of illness, while others may develop serious symptoms.

What are the symptoms?

High fever, headache, vomiting, stiff neck, and a rash are symptoms of meningococcal disease. Among people who develop meningococcal disease, 10 to 15 percent die, despite treatment with antibiotics. Of those who live, permanent brain damage, hearing loss, kidney failure, loss of arms or legs, or chronic nervous system problems can occur.

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What should I do if I think I have meningococcal disease?

If you think you may have meningococcal disease, see a doctor immediately. You should be treated as soon as possible, even if you do not have all of the symptoms. Antibiotics can help prevent meningococcal disease.

How can I prevent meningococcal disease?

You can help prevent meningococcal disease by:

- Covering your mouth and nose when you cough or sneeze
- Washing your hands often, especially after being around someone who has meningococcal disease
- Avoiding close contact with people who have meningococcal disease

Meningococcal meningitis is a serious disease. It is often difficult to prevent. However, you can help protect yourself and others by:

- Getting vaccinated against meningococcal disease
- Taking good care of yourself
- Getting medical attention if you have symptoms of meningococcal disease

For more information about meningococcal disease, please visit the websites of the New York State Department of Health (www.health.state.ny.us), the Centers for Disease Control and Prevention (www.cdc.gov), and the American College Health Association (wwwacha.org).
MENINGOCOCCAL MENINGITIS

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Resident first-year students are strongly encouraged to receive a meningitis vaccination.

Note: Students may also submit this statement electronically at http://osapaperless.pace.edu.

FACTS ABOUT MENINGOCOCCAL DISEASE

Meningitis is a rare disease. However, when it strikes, its flu-like symptoms make diagnosis difficult. If not treated early, meningitis can lead to swelling of the 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.

Cases of meningitis among teens and young adults 15 to 24 years of age (the age of most college students) have more than doubled since 1991. The disease strikes about 5,000 Americans each year and claims about 300 lives. Between 100 and 125 meningococcal meningitis cases occur on college campuses every year in the United States; between 5 and 15 college students die each year as a result of infection. Currently, no data is available regarding whether children at overnight camps or residential schools are at the same increased risk for disease. However, these settings are similar to college dormitories. Other persons at increased risk include household contacts of a person known to have had this disease, and people traveling to parts of the world where meningitis is prevalent.

How is the germ meningococcal spread?

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How do I get more information about meningococcal disease and vaccination?

Contact your family health care provider or University Health Care. Additional information is also available on the websites of the New York State Department of Health (www.health.state.ny.us), the Centers for Disease Control and Prevention (www.cdc.gov), and the American College Health Association (www.acha.org).

OFFICE OF STUDENT ASSISTANCE
IMMUNIZATION REQUIREMENT FORM

Part One: Student Information

STUDENT ID NUMBER: _____________________________
LAST NAME: _____________________________
FIRST NAME: _____________________________
MIDDLE: _____________________________
DATE OF BIRTH: _____________________________
FIRST SEMESTER AT PACE: _____________________________
CAMPUSS/NYC, PLV, or WP-LAW: _____________________________
DAY TELEPHONE NUMBER: _____________________________
MOBILE/CELL NUMBER: _____________________________
PACE EMAIL ADDRESS: _____________________________

New York State Public Health Law requires that all college and university students enrolled for at least six (6) semester hours or the equivalent per semester, or at least four (4) semester hours per quarter, complete and return this form to Pace University. Students will not be allowed to register or attend classes unless they submit this completed form. Any portion of this document is illegible, it will not be processed. Please submit copies of all supporting documentation and keep a copy of your record.

Please print legibly. All documentation must be in English.

Part Two: Measles, Mumps, Rubella

Please use the reverse side of this form for information on completion of this part and acceptable documentation. This part must be certified by a health care provider, with an official stamp and/or license number indicated below.

VACCINATION DATES: Two Measles vaccinations, one Mumps vaccination, and one Rubella vaccination must have been given after the student’s first birthday. Please have your health care provider indicate the dates appropriately and certify the form below:

Measles Disease: _____________________________
Mumps Disease: _____________________________
Rubella Disease: _____________________________

Dose #1: _____________________________
Dose #2: _____________________________

If you have history of contracting either Measles or Mumps disease, please have your health care provider indicate the dates appropriately and certify the form below:

Dose #1: _____________________________
Dose #2: _____________________________

EXEMPTION FROM MEASLES, MUMPS, AND RUBELLA VACCINATION (student must legibly check the applicable box):

1) Birth Exception (born prior to January 1, 1957): _____________________________

2) Medical Exception (circumvent either Temporary or Permanent, submit medical documentation): _____________________________

3) Religious Exception (student with deeply held aversions to receiving vaccinations for religious reasons must submit a formal, signed and dated original statement, indicating such): _____________________________

BLOOD ANTIODY TITER TEST: Students must submit a dated laboratory report to be considered compliant through this option. The report must include the laboratory name and address, the student’s name and date of birth, the numerical result(s), and the numerical interpretation range.

HEALTH CARE PROVIDER INFORMATION:

Name: _____________________________
Signature: _____________________________
Phone Number: _____________________________

Part Three: Meningococcal Meningitis

The dose of the shot was:

[ ] I have had the meningococcal immunization within the past 10 years of my first date of enrollment at Pace University.

[ ] I have read or have had explained to me, the information regarding meningococcal meningitis disease. I understand the risks of not receiving the vaccination. I have decided that (my child) will not obtain immunization against meningococcal disease.

STUDENT’S SIGNATURE: _____________________________
DATE: _____________________________
PARENT/GUARDIAN’S SIGNATURE: _____________________________
DATE: _____________________________
Immunization Records

Instructions for the Immunization Requirement Form

Return the signed and completed form by mail, fax, or email to:

Pace University  Return by the following dates:
Office of Student Assistance  Fall Entry Term: August 1
One Pace Plaza  Spring Term: December 1
New York, NY 10038  Summer Entry Term: April 1
Tel: (877) 672-1830  STUDENTS WILL NOT BE ALLOWED TO
Fax: (914) 988-8309  REGISTER OR ATTEND CLASSES UNLESS

Immunization@pace.edu THEY SUBMIT THIS COMPLETED FORM.

PART ONE: To be filled out completely by the student. Please make sure to provide us with your Student Identification Number, a phone number(s)
you can be reached at, and your Pace assigned email address. Requests for any additional information will be made via your Pace email
address or phone.

PART TWO: MEASLES, MUMPS, RUBELLA (MMR): To be completed by your health care provider. Supporting documentation is not required
if this part is signed and stamped legibly.

New York State Public Health Law requires that all college and university students enrolled for at least six (6) semester hours or the equivalent per
semester, or at least four (4) semester hours per quarter, complete and return this form to Pace University.

You must provide proof of having received 2 measles, 1 mumps, and 1 rubella vaccinations. The dates of these vaccinations must be indicated
in the part and all vaccinations must have been received on or after your first birthday. Please note that any supporting documentation must have been either signed or stamped by a hospital or medical provider or, in the case of prior
school or university records, stamped by an official of that institution. An original signature or stamp must appear on the documentation.

Faxes will be accepted as long as they are received directly from a healthcare provider, high school, or university/college.

Please note that any supporting documentation must have been either signed or stamped by a hospital or medical provider or, in the case of prior
high school or university records, stamped by an official of that institution. An original signature or stamp must appear on the documentation.

PART THREE: MENINGOCOCCAL MENINGITIS: To be filled out completely by the student.

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universities, to distribute information about meningococcal disease and vaccination to all students meeting the enrollment criteria, whether they live
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below to make an appointment.

New York UHC (212) 346-1600  Westchester UHC (914) 773-3760

Updated 9/2017

PROVIDE IMMUNIZATION RECORDS

All new students are required to submit proof of immunization against measles, mumps, and rubella. New students must have received the meningococcal meningitis immunization within the last 10
years of their first day of enrollment and report the date on which it was received or submit an
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MEASLES/MUMPS/RUBELLA

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present proof of immunity against measles, mumps, and rubella. Enrollment at Pace University requires
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Measles: The student must submit proof of two doses of live measles vaccine, the first dose given no
more than four days prior to the student’s first birthday and the second at least 28 days after the first
dose. Students may also submit an original dated laboratory report that reflects positive numerical
immunity results of a blood antibody titer test, or a licensed health care provider verification of a
history of the disease.

Mumps: The student must submit proof of one dose of live mumps vaccine, given no more than four
days prior to the student’s first birthday. Students may also submit an original dated laboratory report
that reflects positive numerical immunity results of a blood antibody titer test, or a licensed health care
provider verification of a history of the disease.

Rubella: The student must submit proof of one dose of live rubella vaccine, given no more than four
days prior to the student’s first birthday. A licensed health care provider verification of a history of the
disease is not acceptable and does not confer immunity. Students may also submit an original dated
laboratory report that reflects positive numerical immunity results of a blood antibody titer test.

New York State will consider exceptions only for medical or religious reasons. If either should apply to
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