

**REQUIRED BY STATE STATUTE: IMMUNIZATION INFORMATION: MENINGITIS QUESTIONNAIRE**

***This form is for MINORS only: Must be filled out & signed by parent or guardian.***

Upload into the Student Health Portal with your immunization records

Students 18+ must ONLY complete this form online in the Student Health Portal

**Student Name:** \_\_\_\_\_, \_\_\_\_\_ **Student ID# 855** \_\_\_\_\_

Last

First

**DOB:** \_\_\_\_/\_\_\_\_/\_\_\_\_ **Incoming semester (please circle) FALL \* SPRING Year** \_\_\_\_\_

**MENINGOCOCCAL VACCINE REQUIREMENTS**

New Jersey law requires that new students enrolling in a public private institution of higher education in New Jersey to have received meningococcal vaccines as recommended by the Advisory Committee on Immunization Practices (ACIP). There are two types of meningococcal vaccines that might be required depending on your age and your risks: the meningococcal conjugate vaccine (MenACYW) that protects against serogroups A, C, Y, and W disease; and the meningococcal serogroup B vaccine (MenB) that protects against serogroup B disease.

**MenACYW (Menactra® and Menveo®)** vaccine is routinely recommended at ages 11-12 years with a booster at 16 years. Adolescents who receive their first dose of MenACWY vaccine on or after their 16th birthday do not need a booster dose. Additional doses may be recommended based on risk. People 19 years of age and older are not routinely recommended to receive the MenACYW vaccine unless they are students living in residential housing or if another risk factor applies.

**MenB (Bexsero® and Trumenba®)** vaccine is routinely recommended for people ages 10 years or older with high risk health conditions. People 16-23 years old (preferably at ages 16-18) may also choose to get a MenB vaccine.

- ✚ All students ages 16 to 18 are required to provide proof of the meningitis ACYW vaccine.
- ✚ All students living on campus of any age, are required to provide proof of the meningitis vaccine (type ACYW) received at 16 years old or older. Room keys will not be given out without this.

**INSTRUCTIONS:** To assist in determining which meningococcal vaccines may be required, review each of the indications in the table below, both by age and by increased risk, with your healthcare provider.

**Please check off all that apply to you**

Age	MenACWY Requirement	Men B Requirement
<input type="checkbox"/> Age 18 or younger	✓ Vaccine required	× Vaccine not required
<input type="checkbox"/> Age 19 or older	× Vaccine not required	× Vaccine not required
Indication by increased risk	MenACWY Requirement	Men B Requirement
<input type="checkbox"/> First-year college student living in residence hall or military recruit- <b>any age</b>	✓ Vaccine required	× Vaccine not required
<input type="checkbox"/> Complement component deficiency or use of a medication known as a complement inhibitor (e.g., eculizumab)	✓ Vaccine required	✓ Vaccine required
<input type="checkbox"/> Have no spleen or have a problem with spleen – including sickle cell disease	✓ Vaccine required	✓ Vaccine required
<input type="checkbox"/> HIV infection	✓ Vaccine required	× Vaccine not required
<input type="checkbox"/> Travel to an area where the disease is common. Check <a href="http://www.cdc.gov/travel">www.cdc.gov/travel</a> for travel-related risk	✓ Vaccine required	× Vaccine not required
<input type="checkbox"/> Work in a laboratory with meningococcal bacteria ( <i>Neisseria meningitidis</i> )	✓ Vaccine required	✓ Vaccine required
<input type="checkbox"/> Part of an outbreak as declared by public health officials—you will be notified if this applies to you	Vaccine required if outbreak caused by serogroup A, C, W or Y	Vaccine required if outbreak caused by serogroup B

By signing this form, I certify that all the information indicated in the table above is true and correct to the best of my knowledge.

Parent/guardian's Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_