REPORT OF IMMUNIZATIONS

Physician: (A) Please review the student's Report of Medical History (Pages I and 2), comment on all positive answers.
(B) Complete this page, sign, then RETURN TO THE BALL STATE HEALTH SERVICE. The health information provided will not be released without the student's consent, and will be used only as a background for providing health care.

(Please keep a copy of Entire form for your records.)

_____Mr.
_____Mrs._____ _____
_____Miss

LAST NAME (Print) FIRST NAME MIDDLE NAME (MAIDEN)

The "College Immunization Law" (IC21-40-5) and BSU requirements require immunizations as specified below for all matriculating students.

COLLEGE IMMUNIZATION REQUIREMENTS FOR ENROLLMENT
(You must fulfill these requirements prior to the first day of classes)

I) MMR vaccination Both doses must be given after 1967 AND the first on or after the first birthday and the doses must be separated by at least 30 days.

vaccine 1_____/_____/_____
Month Day Year
vaccine 2_____/_____/_____
or Month Day Year

2) Measles (Rubeola) Immunity — Must have live measles vaccine.

vaccine 1_____/_____/_____
Must have two dates Month Day Year
vaccine 2_____/_____/_____
Month Day Year

Both doses must be given after 1967 AND the first on or after the first birthday and the doses must be separated by at least 30 days.

or

Date of physician-diagnosed measles disease _____/_____/_____
Month Day Year

or

Has an immune titer (specify date of test) _____/_____/_____
Month Day Year

or

Born before January I, 1957 — vaccine not required_____Yes

3) Rubella (German Measles) Immunity — Must have one dose:
(Vaccine must be on or after first birthday).

_____/_____/_____
Month Day Year

or

Has an immune titer (specify date of test) _____/_____/_____
Month Day Yea

Born before January I, 1957 — vaccine not required _____Yes

4) Mumps Immunity — Must have one of the following: Immunized with vaccine
(must be on or after first birthday)

_____/_____/_____
Month Day Year

or

Date of physician-diagnosed mumps disease _____/_____/_____
Month Day Year

or

Has an immune titer (specify date of test) _____/_____/_____
Month Day Year

or

Born before January I, 1957 - vaccine not required_____Yes

5) Tetanus, Diphtheria Immunity

Booster dose of Td given within last 10 years _____/_____/_____
Month Day Year

or

Booster dose of Tdap given within last 10 years _____/_____/_____
Month Day Year

RECOMMENDED IMMUNIZATION AND LABORYATORY TESTS:

Hepatitis-B (Series required for health care classes.)

Dose 1_____/_____/_____
Month Day Year
Dose 2_____/_____/_____
Month Day Year
Dose 3_____/_____/_____
Month Day Year

Hepatitis-A

Dose 1_____/_____/_____
Month Day Year
Dose 2_____/_____/_____
Month Day Year

Polio IPV/OPV _____/_____/_____
Month Day Year

or

Varicella Either a history of chickenpox, a positive varicella antibody, or two doses of vaccine given at least one month apart if immunized after age 13 years meets the recommendation.

Dose 1_____/_____/_____
Month Day Year
Dose 2_____/_____/_____
Month Day Year

Meningococcal Vaccine

_____/_____/_____
Month Day Year

Note: This form needs to be signed and dated by a provider or attach a copy of your immunizations from your high school, college, or health department.

PHYSICIAN'S SIGNATURE _____
DATE _____
ADDRESS_____
TELEPHONE NUMBER_____
PRINT PHYSICIAN'S LAST NAME_____

Amelia T. Wood Health Center
Ball State University
1500 Neely Ave. • Muncie, Indiana 47306-0815
(765) 285-8431 • Fax: (765) 285-1103

Welcome to Ball State University. In order to meet many health care needs, Ball State provides a clinic conveniently located on campus. Available services include a medical clinic, women's health center, physical therapy, health education, psychological care and a pharmacy. Students taking 7 hours or more are required to pay the Health Center Fee. Part time students may choose to pay for these services at the same cost as a full time student. To find out more information about Health Center fees - go to www.bsu.edu/bursar/ - go to Tuition and Fee Rates and click on the semester then Mandatory Fees. Also - please see the Health Insurance section inside this form.

Thank You,
The Health Center Staff
www.bsu.edu/healthcenter

This information is strictly for the use of the Health Services and will not be released to anyone without your knowledge and consent.

COMPLETE PAGE 1 and PAGE 2 BEFORE GOING TO YOUR PHYSICIAN. THIS FORM MUST BE RETURNED BEFORE CLASSES BEGIN TO ALLOW PROCESSING OF YOUR CLASS SCHEDULE.

☐ Male
☐ Female NAME: Last (Print) First Middle (Maiden) DATE OF BIRTH

HOME ADDRESS: Number and Street City State Zip Code

HOME TELEPHONE NUMBER BUSINESS TELEPHONE NUMBER

FATHER'S NAME ADDRESS TELEPHONE NUMBER

MOTHER'S NAME ADDRESS TELEPHONE NUMBER

SPOUSE'S NAME ADDRESS TELEPHONE NUMBER

INDICATE CLASS: ☐ FRESHMAN ☐ SOPHOMORE ☐ JUNIOR ☐ SENIOR ☐ TRANSFER ☐ GRADUATE
☐ INTERNATIONAL Address:

MARITAL STATUS: ☐ SINGLE ☐ MARRIED ☐ DIVORCED

NUMBER OF CHILDREN:

ARE YOU ON A SPECIAL DIET? ☐ YES ☐ NO IF YES, PLEASE EXPLAIN

FAMILY HISTORY

NAME(S)	AGE	STATE OF HEALTH	OCCUPATION	AGE AT DEATH	CAUSE OF DEATH
Father					
Mother					
Brothers					
Sisters					
Children					

Do you have relatives with any of the following?
ANSWER YES OR NO BY CHECK MARK (✓)

	Yes	No	Relationship
Tuberculosis			
Diabetes			
Kidney Disease			
Heart Disease			
Arthritis			
Stomach Disease			
Stroke			
Epilepsy, Convulsions			
Mental Illness			
Suicide			
High Blood Pressure			
Mother or Sister with Breast Cancer			

PERSONAL HISTORY
PLEASE ANSWER ALL QUESTIONS. Comment on all positive answers.
USE CHECK MARK (✓)

HAVE YOU HAD?	Yes	No
Scarlet Fever		
Measles (Rubeola)		
German Measles (Rubella)		
Mumps		
Mononucleosis		
Chicken Pox		
Malaria		
Tuberculosis		
Poliomyelitis		
Rheumatic Fever		
Hepatitis		

Name
Last (print) First Middle
SSN
BSUID

Ball State University Student Health Form

Have you ever been diagnosed with or treated for:	Yes	No
Asthma		
Diabetes		
Epilepsy		
Allergies (Specify)		
Foods (Which)		
Other Experienced		
Do You have trouble with	**Yes**	**No**
Eyes		
Ears		
Nose		
Mouth		
Throat		
Glands		
Heart Murmur		
Lungs		
Stomach		
Kidney's/Bladder		
Back		
Muscles/Joints		
Nerves		

Have you:	Yes	No
Had Surgery		
Broken Bones		
Attempted Suicide		
Had Seizures		
(Females Answer The Following)		
Menstrual Problems		
Had Breast Problems		
Been Pregnant		

Do you experience frequent:	Yes	No
Headaches		
Fainting		
Trouble Sleeping		
Anxiety		
Depression		
Infections		
Urination		
Diarrhea		
Trouble Breathing		
Please Explain 'Yes' Answers		

List allergies to medications:	
List current medications and dietary supplements:	
Has your physical activity been restricted during the past five years? (If yes, give reasons and duration.)	
Have you had any illness or injury or been hospitalized other than already noted? (If so, explain below)	
Have you consulted or been treated by clinics, physicians, healers, or other practitioners for any MAJOR medical or emotional problems within the past five years. If yes, explain.	

Health Insurance

Adequate health insurance is recommended. Please supply a copy of both front and back of your insurance card for lab and x-ray tests, and a copy of both front and back of your prescription card for medications. You must have your student ID to charge Bursars for medication. If you have no coverage, a low cost health insurance plan is available through the University. Please contact the office of Business Affairs for more information. (765-285-2527)

A student may see a doctor or nurse practitioner on a walk-in basis without an appointment. The Health Center Fee covers the professional services, however the student is financially responsible for any medications, labs, and x-ray costs. This makes it important that you are aware of the details of your medical insurance. Many medical plans demand that you see your primary health care provider first before they will cover the cost. Your primary health care provider is a doctor who is assigned to you by some insurance plans to determine when or if you should have medical care. You need to make your health care provider aware of this to help keep your health care costs down. For instance, if a bone fracture is suspected, your insurance may not cover the cost of the x-ray if a campus health care provider orders the test. In those circumstances we may be able to contact your primary care physician or insurance plan to find out if there is a particular way they want it ordered in order for them to pay for it.

Special Needs

If you have a special health need we suggest that you contact the Health Center before your arrival at Ball State.

Approval and Consent for Treatment

I have reviewed the above information and believe it to be accurate. I have reviewed the information about meningitis. I, the undersigned, authorize and consent to treatment, I understand that I may withdraw my consent at any time. Should I be under eighteen years of age, my parent's (or guardian's) signature below indicates approval and consent for medical treatment at the Student Health Center.

Student Signature **Parent or Guardian Signature** **Date**

(Please keep a copy of Entire form for your records.)

Background: Meningococcal Meningitis on Campus

Overview of Meningococcal Meningitis

Meningococcal disease is a potentially life-threatening bacterial infection. The disease most commonly is expressed as either meningococcal meningitis, an inflammation of the membranes surrounding the brain and spinal cord, or meningococcemia, a presence of bacteria in the blood. Meningococcal disease is caused by Neisseria meningitidis, which has become the leading cause of bacterial meningitis in older children and young adults in the United States.

Meningococcal disease strikes about 3,000 Americans each year, leading to death in approximately 10 to 15 percent of cases, which translates into 300 deaths annually. It is estimated that 100 to 125 cases of meningococcal disease occur annually on college campuses and 5 to 15 students die as a result. The disease can result in permanent brain damage, hearing loss, learning disability, limb amputation, kidney failure or death.
The incidence of meningitis outbreaks of serogroup C has risen in the past 10 years, including cases at U.S. colleges and universities. Data suggest that certain social behaviors, such as exposure to passive and active smoking, bar patronage and excessive alcohol consumption, may increase students' risk for contracting the disease. Recent data also show students living in dormitories, particularly freshmen, have a sixfold increased risk for the disease.

Vaccination Recommendations for College Students

On October 20, 1999, the Advisory Committee on Immunization Practices (ACIP) of the Centers for Disease Control and Prevention (CDC) voted to recommend that college students, particularly freshmen living in dormitories and residence halls, be educated about meningococcal meningitis and the potential benefits of vaccination. ACIP further recommends that immunization should be provided or made easily available to those who wish to reduce their risk for meningococcal meningitis. Other undergraduate students wishing to reduce their risk for meningococcal meningitis can also choose to be vaccinated. The American College Health Association (ACHA) supports the ACIP recommendation.

Meningococcal Disease Caused by Five Strains/Serogroups

There are five predominant strains or serogroups of N. meningitidis that account for most cases of meningococcal disease. These are A, B, C, Y and W-135. Among the serogroups responsible for invasive meningococcal disease in the United States in 1997, serogroup B accounted for 30 percent of cases, serogroup C caused 28 percent, serogroup Y about 37 percent and serogroups A and W-135 were rare. Serogroup A is predominantly a cause of meningococcal disease in Africa and Asia. In general, serogroups C, Y and W-135 have higher rates of death and complications compared to serogroup B.

Transmission and Symptoms of the Disease

Meningococcal bacteria are transmitted through the air via droplets of respiratory secretions and direct contact with persons infected with the disease. Oral contact with shared items, such as cigarettes or drinking glasses, or through intimate contact such as kissing could put a person at risk for acquiring the infection. People identified as close contacts of a patient are at an increased risk for disease and should receive antibiotics to prevent meningitis.

Many normal healthy people become carriers of these bacteria and usually nothing happens to the person other than developing natural antibodies. Very rarely, for reasons such as suppressed immunity or concurrent respiratory illness, the bacteria invades the body, causing disease. Meningococcal disease usually peaks in late winter and early spring. The disease can easily be misdiagnosed as something less serious, because symptoms are similar to the flu. The most common symptoms include high fever, headaches, stiff neck, confusion, nausea, vomiting, lethargy and/or rashes. Anyone with similar symptoms should contact a physician immediately. If untreated, often within hours of the onset of symptoms, the disease can progress rapidly and can lead to shock and death.

Incidence of Meningococcal Meningitis

In the United States, outbreaks of serogroup C meningococcal disease have been occurring more frequently since the early 1990s, especially among young adults in school and community settings. There were 26 outbreaks between 1994 and 1996; four of these outbreaks were at a college or university, compared with only 15 outbreaks occurring between 1989 and 1993, including two outbreaks at a college or university.

Persons at Risk for the Disease, Including College Students

Meningococcal disease can affect people at any age. Certain groups are at increased risk for contracting the disease including those in close contact with a known case, individuals with compromised immune systems and persons traveling to endemic areas of the world. Since 1991, cases of meningococcal disease among 15- to 24-year olds have more than doubled.

Recent evidence found that students residing in dormitories on campus appear to be at higher risk for meningococcal disease than college students overall. Further research recently released by the CDC shows freshmen living in dormitories have a six times higher risk for meningococcal disease than college students overall.

Prior to 1971, the military had experienced high rates of meningococcal disease, particularly serotype C disease. The U.S. military now routinely vaccinates new recruits. Similar to college students, military recruits live in confined areas. Since the initiation of routine vaccination of recruits, there has been an 87 percent reduction in sporadic cases and a virtual elimination of outbreaks of invasive meningococcal disease in the military.

Vaccination to Prevent Meningococcal Meningitis

A conjugate meningococcal vaccine is available against four of the most common strains of N. meningitidis in the United States (A, C, Y, W-135). The vaccine can be used in adults and children 11 to 55 years of age.The vaccine is often used to control serotype C meningococcal disease outbreaks and for pre-exposure among certain high-risk groups (e.g., immunosuppressed, travelers).

As of Spring, 2004, ACIP recommends that undergraduate college students, particularly freshmen who live in or plan to live in dormitories or residence halls, receive information about meningococcal meningitis and the benefits of vaccination. Freshmen and other undergraduates who wish to reduce their risk for disease should be provided access to the vaccine.

Cases/Outbreaks of the Disease

Between 1986 and 1993, an outbreak was defined as five cases of the same serotype in 100,000 people with at least three occurring within three months. From 1994 to present, 10 cases of the same serotype in 100,000 people with at least three occurring within three months constitute an outbreak. The vast majority of disease occurs as sporadic and isolated cases, referred to as endemic disease.

For more information on meningococcal meningitis and the vaccine, please discuss it with your personal physician when you go in for your physical prior to coming to Ball State. For comprehensive information see the MMWR (Morbidity and Mortality Weekly Report Volume 49 (No. RR-7) published June 30, 2000. You can also visit the websites of the Centers for Disease Control and Prevention (CDC), www.cdc.gov/ncidod/dbmd/diseaseinfo, and the American College Health Association, www.acha.org.