HEPATITIS B (HBV) IMMUNIZATION

Hepatitis B is a serious viral infection of the liver that can lead to chronic liver disease, cirrhosis, liver cancer, liver failure, and even death. The disease is transmitted by blood or body fluids and many people will have no symptoms when they develop the disease. The primary risk factors for Hepatitis B are sexual activity and injection drug use. This disease is completely preventable. Hepatitis B vaccine is available to all age groups. A series of three (3) doses of vaccine are required for optimal protection. Missed doses may still be sought to complete the series if only one or two have been acquired. The HBV vaccine has a record of safety and is believed to confer lifelong immunity in most cases.

MENINGOCOCCAL MENINGITIS

Meningococcal disease is a rare but potentially fatal bacterial infection, expressed as either meningitis (infection of the membranes surrounding the brain and spinal cord) or meningococcemia (bacteria in the blood). Meningococcal disease strikes about 3,000 Americans each year and is responsible for about 300 deaths annually. The disease is spread by airborne transmission primarily by coughing. The disease can onset very rapidly and quickly and without warning. Rapid intervention and treatment is required to avoid serious illness and or death. There are 5 different subtypes (called serogroups) of the bacteria that causes Meningococcal disease. The current vaccine does not stimulate protective antibodies to Serogroups B, but does protect against the most common strains of the disease, including serogroups A, C, Y, W-135. The duration of protection is approximately 3-5 years. The vaccine is very safe and adverse reactions are mild and infrequent, consisting primarily of redness and pain at the injection site lasting up to two days. The Advisory Committee on Immunizations Practices (ACIP) of the U.S. Center for Disease Control and Prevention (CDC) recommends that college freshman (particularly those who live in dormitories or residence halls) be informed about meningococcal disease and the benefits of vaccination and those students who wish to reduce their risk for meningococcal disease may also choose to be vaccinated.

FIND OUT MORE INFORMATION

For more information about immunizations and vaccines, visit your family physician, or contact:

- Okmulgee County Health Department, 918-756-1883
- U.S. Centers for Disease Control and Prevention (CDC), www.cdc.gov
- American College Health Association, www.acha.org
- National Foundation for Infectious Diseases, www.nfid.org

NEW IMMUNIZATION LAWS
NEW REQUIREMENTS FOR OSUIT STUDENTS

OSUIT
Campus Health Services
Student Union Building
1801 East 4th Street
Okmulgee, OK 74447
918-293-4946
Immunization Requirements for Oklahoma State University Institute of Technology Students

Beginning with the fall semester 2004, Oklahoma state law requires that all new students who attend Oklahoma colleges and universities for the first time provide proof of immunization for certain diseases. If you cannot verify your immunizations you will need to be re-immunized. Medical, religious and personal exemptions are allowed by law and such requests must be in writing using the OSUIT Certificate of Exemption form available at the Campus Health Services Office or online at www.osu-okmulgee.edu/campus community/campus health/.

MENINGITIS VACCINE REQUIREMENTS

**THIS SECTION ONLY APPLIES TO STUDENTS LIVING ON CAMPUS**

Section 3243 of Oklahoma Statute Title 70 requires all new students that live in on-campus housing to comply with one of the following options:

- **Option A**: Be immunized for meningococcal disease. *(copy of immunization records not required)*

- **Option B**: After having reviewed information about meningitis provided by OSUIT, decline the vaccination based on medical, religious, or personal objection.

These choices will be provided by the OSUIT Residential Life Office and must be completed prior to moving into campus housing.

**MEASLES, MUMPS, RUBELLA, AND HEPATITIS B VACCINE REQUIREMENTS**

Section 3244 of Oklahoma Statute Title 70 requires all new students to comply with the law by completing the OSUIT Immunization form and returning it with the necessary documentation to the Campus Health Services Office. Below is a summary of the new requirements:

**Measles, Mumps, Rubella, (MMR):**

All students born after 1957 are required to provide documentation of having received two vaccinations for measles, mumps and rubella.

**Hepatitis B:** All new students are required to have completed a Hepatitis B series.

Students who have a medical, religious or personal objection to these vaccinations must complete and return the Certificate of Exemption to the OSUIT Campus Health Services Office. Please note, in the case of a public health emergency, students claiming this exemption may be barred from campus and from attending classes.

**ACCEPTABLE DOCUMENTATION OF IMMUNIZATIONS**

- Signature of physician or nurse on the OSUIT Immunization form verifying the accuracy of the submitted information.
- Copies of shot records
- Copies of medical records
- Copies of school health records
- Copies of laboratory test results demonstrating immunity

**MEASLES, MUMPS AND RUBELLA**

Immunization is a safe and effective way to protect yourself against vaccine-preventable diseases that can hurt, cripple and even kill. The following three contagious diseases can spread rapidly among non-immunized individuals in a group situation, such as a university campus.

**Measles** is a serious disease characterized by rash and moderate to high fever. It can lead to pneumonia, serious ear infections, deafness, and convulsions. In one out of every 1000 cases; one in ten of such complicated cases will result in death.

**Rubella** or German Measles is an infectious viral disease characterized by mild fever and rash. The major risk is to non-immune women who catch the disease early in pregnancy. Such women are likely to have a baby with serious birth defects.

**Mumps** is an acute viral infection characterized by fever and by swelling and tenderness of one or more salivary glands. The most common complications of the disease include deafness from secondary ear infections (1 per 15,000 cases), meningoencephalitis (3.5 per 1,000 cases), and death (1-3.5 per 10,000 cases).