

Dear Incoming Undergraduate Student,

Welcome to Carbon Health Services at Emmanuel College. The State of Massachusetts requires that students attending college in the Commonwealth submit the required vaccinations and provide proper documentation. The Immunization Requirement Form details which vaccines are required by the State of Massachusetts and those that are highly recommended by Emmanuel College. Please make sure that your documentation includes all the required vaccines listed or positive titers where applicable, as well as the completed TB Questionnaire. If you have not received all the required vaccines, you will need to obtain them prior to coming to campus.

All forms must be completed and emailed to healthservices@emmanuel.edu The deadline for submission is July 26<sup>th</sup>, 2024 for Fall enrollment.

# PLEASE FOLLOW THE STEPS BELOW:

- 1. Download Carbon Health App via <a href="https://carbonhealth.com/get-care/emmanuel">https://carbonhealth.com/get-care/emmanuel</a>. It is mandatory that you utilize your Emmanuel student email address to complete this!
- 2. Once the App is downloaded, look at the bottom of the screen and click the "Messages" icon.
  - a. In the messages icon you will see a canned message from "Prevention and Wellness" stating "Welcome to Carbon". Open this message thread.
  - b. Once this message thread is opened, press the plus sign at the bottom of the screen on the left-hand side. You will be prompted with options to "Take a photo", "Choose PDF from library", or "Choose photo from library".
  - c. Please select "Take a photo" and allow Carbon to have permissions to access your camera.
  - d. Once the photo of your immunization requirement form (or equivalent) is uploaded, please press "Send"

**Important:** Ensure that your photo is clear! This is necessary to ensure that we are accurately able to process your immunization records

If you are under the age of 18, please have your parent/guardian sign the Medical Consent of a Minor Form: Consent for Medical Care of a Minor.pdf

For any questions regarding the Immunization & Health Form, please contact Health Services directly at 617-264-7678 or via email at healthservices@emmanuel.edu

Thank you in advance for your cooperation and best of luck in your studies.

Sincerely, Your Carbon Health Team





# **IMMUNIZATION REQUIREMENT FORM**

These vaccines are required by the Commonwealth of Massachusetts. You must complete this form with your licensed medical provider and submit this form following the instructions given. If you haven't received all required vaccines, you will need to receive prior to semester start.

LAST NAME	FIRST NAM	IE DOB	
REQUIRED	NOTES	TYPE (check box)	DATE(S)
Hepatitis B	<ul> <li>Standard dosing at 0, 1 and 6 months of age</li> <li>≥ 4 weeks between dose 1 and 2</li> <li>≥ 8 weeks between dose 2 and 3</li> <li>≥ 16 weeks between dose 1 and 3</li> </ul>	☐ Vaccine (3 doses) ☐ Positive HBsAB titer (1 date)	Date 1: Date 2: Date 3:
Meningococcal Quadrivalent	Must be administered after 16 <sup>th</sup> birthday     Meningococcal Quadrivalent (A, C, Y, W-135) OR signed waiver is required. (See attached)	☐ Menactra ☐ Menveo ☐ Nimenrix	Date:
MMR (Measles, Mumps, and Rubella)	<ul> <li>Dose 1 given after first birthday</li> <li>≥ 4 weeks between dose 1 and 2</li> <li>Individual vaccines or individual positive titers are acceptable</li> </ul>	☐ MMR (2 doses) ☐ Individual vaccines (2 doses each) ☐ Individual positive titers (1 date each)	Date 1:
Tdap (Tetanus, Diphtheria, Pertussis)	If Tdap date is > 10 years from date of enrollment you must provide date of recent Tdap booster	□Tdap	Date:
Varicella	<ul> <li>First dose given after first birthday</li> <li>≥ 4 weeks between dose 1 and 2</li> </ul>	☐ Vaccine (2 doses) ☐ Positive titer (1 date) ☐ History of disease (1 date)	Date 1: Date 2:
STRONGLY RECOMMEND	NOTES	MANUFACTURER	DATE(S)
STRONGLY RECOMMEND  COVID-19 vaccine	Please be advised that confirmed COVID-19 vaccinations may still be required to participate in some programs that are partnered with Emmanuel College.	MANUFACTURER  □ Pfizer (2 doses) □ Moderna (2 doses) □ Johnson & Johnson (1 dose)	Date 1: Date 2:
	Please be advised that confirmed COVID-19 vaccinations may still be required to participate in some programs	☐ Pfizer (2 doses) ☐ Moderna (2 doses)	Date 1:
COVID-19 vaccine	Please be advised that confirmed COVID-19 vaccinations may still be required to participate in some programs	☐ Pfizer (2 doses) ☐ Moderna (2 doses) ☐ Johnson & Johnson (1 dose)	Date 1: Date 2:
COVID-19 vaccine	Please be advised that confirmed COVID-19 vaccinations may still be required to participate in some programs that are partnered with Emmanuel College.	☐ Pfizer (2 doses) ☐ Moderna (2 doses) ☐ Johnson & Johnson (1 dose) ☐ Booster Manufacturer: ☐ Booster Manufacturer: ☐ — — — — —	Date 1:  Date 2:  Date 3:



# **TUBERCULOSIS QUESTIONNAIRE**

LAST NAME				FIRST NAME		DOB		
PART 1: TUBERCULOSIS								
Please refer to this list o	f countries/territori	es below '	when respo	nding to the qu	estions b	elow.		
<ul> <li>Afghanistan</li> </ul>	Chad	<ul> <li>Georgia</li> </ul>	1	<ul> <li>Lithuania</li> </ul>		• Palau	•	<ul> <li>Tajikistan</li> </ul>
Algeria	China	<ul> <li>Ghana</li> </ul>		<ul> <li>Madagascar</li> </ul>		• Panama	•	<ul><li>Thailand</li></ul>
• Angola	China, Hong Kong SAR	<ul> <li>Greenla</li> </ul>	and	<ul> <li>Malawi</li> </ul>		• Papua New Guinea	a '	<ul> <li>Timor-Leste</li> </ul>
Anguilla	China, Macao SAR	<ul> <li>Guam</li> </ul>		<ul> <li>Malaysia</li> </ul>		<ul> <li>Paraguay</li> </ul>		• Togo
Argentina	Colombia	<ul> <li>Guatem</li> </ul>	nala	<ul> <li>Maldives</li> </ul>		• Peru		• Tokelau
• Armenia	Comoros	<ul> <li>Guinea</li> </ul>		• Mali		<ul> <li>Philippines</li> </ul>		• Tunisia
Azerbaijan	Congo	• Guinea-	-Bissau	<ul> <li>Marshall Islar</li> </ul>	nds	Qatar		<ul> <li>Turkmenistan</li> </ul>
Bangladesh	Cote d'Ivoire	<ul> <li>Guyana</li> </ul>	ı	<ul> <li>Mauritania</li> </ul>		• Republic of Korea		• Tuvalu
• Belarus	Democratic People's	• Haiti		<ul> <li>Mexico</li> </ul>		(South Korea)		• Uganda
• Belize	Republic of Korea	• Hondur	as	<ul> <li>Micronesia (F</li> </ul>	ederated	Republic of Moldo	va •	Ukraine
• Benin	Democratic Republic	• India		States of)		Romania		<ul> <li>United Republic of</li> </ul>
• Bhutan	of the Congo	• Indones	sia	<ul> <li>Mongolia</li> </ul>		Russian Federation		Tanzania
Bolivia	Djibouti	• Iraq		<ul> <li>Morocco</li> </ul>		• Rwanda		• Uruguay
Botswana	Dominican Republic	• Kazakhs	stan	<ul> <li>Mozambique</li> </ul>		Sao Tome and Prin	cipe	<ul> <li>Uzbekistan</li> </ul>
• Brazil	Ecuador	<ul> <li>Kenya</li> </ul>		• Myanmar		Senegal		<ul> <li>Vanuatu</li> </ul>
Brunei Darussalam	El Salvador	• Kiribati		Namibia		Sierra Leone		Venezuela (Bolivarian
Bulgaria	Equatorial Guinea	• Kuwait		<ul> <li>Nauru</li> </ul>		<ul> <li>Singapore</li> </ul>		Republic of)
Burkina Faso	Eritrea	<ul> <li>Kyrgyzs</li> </ul>	tan	<ul> <li>Nepal</li> </ul>		Solomon Islands		• Viet Nam
• Burundi	Eswatini	• Lao Peo	ple's	Nicaragua		• Somalia		• Yemen
Cabo Verde	Ethiopia		tic Republic	• Niger		South Africa		• Zambia
	Fiji	• Latvia	•	Nigeria		South Sudan		• Zimbabwe
	French Polynesia	• Lesotho	)	Northern Mai	riana	Sri Lanka		
	Gabon	• Liberia		Islands		• Sudan		
Republic	Gambia	• Libya		<ul> <li>Pakistan</li> </ul>		Suriname		
Source: World Health Organiza	tion, Tuberculosis Incide	nce 2020						
DI ( II		L 37 C	1.01.6	,				
Please answer the follow								. 10
<del>-</del>	ked or lived with sor	neone wi	th active TB	(or will you prid	or to you	r arrival in the Uni	ted Sta	ates)? $\square$ Y $\square$ N
If yes, explain:								
<ol><li>Were you bor</li></ol>	n in, lived in, or have	e you trav	eled for mo	re than one mo	nth to an	y of the high-risk	countr	ies 🗆 Y 🗆 N
listed above?								
If yes, explain:								
3. Have you ever tested positive for TB or completed treatment to prevent active TB? ☐ Y ☐ N								
If yes, explain:								
IF YOU ANSWERED NO	O ALL THE ABOVE (	THESTION	us no furth	or tosting is roa	uirod Th	is form is complet	0	
								a prior to the start
IF THE ANSWER IS YES T		-	IIONS, EIIIIII	ianuei Conege n	equires ti	iat you receive in	iestiii	ig prior to the start
of the semester. Comple	te test history belov	٧.						
<b>TUBERCULOSIS T</b>	<b>EST HISTORY:</b>							
A TB skin test OR IGRA blood t	est must be completed n	o more than	6 months prio	or to semester start	date.			
If positive TB testing, provide of	•		•					
TB Skin Test	Date Given:		Date Read	d:	Result:		Indur	ation:
IGRA Blood Test	Date of Test:		Result:					
וטונא טוטטע ובאנ	שמנב טו ופאנ.		Nesuit.					



# MENINGOCOCCAL VACCINE WAIVER

# Information about Meningococcal Disease, Meningococcal Vaccines, Vaccination Requirements and the Waiver for Students at Colleges and Residential Schools



**Colleges:** Massachusetts requires all newly enrolled full-time students 21 years of age and under attending a postsecondary institution (e.g., college) to receive a dose of quadrivalent meningococcal conjugate vaccine on or after their 16<sup>th</sup> birthday to protect against serotypes A, C, W and Y **or** fall within one of the exemptions in the law, discussed on the reverse side of this sheet.

**Residential Schools:** Massachusetts requires all newly enrolled full-time students attending a secondary school who will be living in a dormitory or other congregate housing licensed or approved by the secondary school or institution (e.g., boarding school) to receive quadrivalent meningococcal conjugate vaccine to protect against serotypes A, C, W and Y **or** fall within one of the exemptions in the law, discussed on the reverse side of this sheet.

The law provides an exemption for students signing a waiver that reviews the dangers of meningococcal disease and indicates that the vaccination has been declined. To qualify for this exemption, you are required to review the information below and sign the waiver at the end of this document. Please note, if a student is under 18 years of age, a parent or legal guardian must be given a copy of this document and must sign the waiver.

# What is meningococcal disease?

Meningococcal disease is caused by infection with bacteria called *Neisseria meningitidis*. These bacteria can infect the tissue that surrounds the brain and spinal cord called the "meninges" and cause meningitis, or they can infect the blood or other body organs. Symptoms of meningococcal disease may appear suddenly. Fever, severe and constant headache, stiff neck or neck pain, nausea and vomiting, sensitivity to light and rash can all be signs of meningococcal disease. Changes in behavior such as confusion, sleepiness, and trouble waking up can also be important symptoms. Less common presentations include pneumonia and arthritis. In the US, about 350-550 people get meningococcal disease each year and 10-15% die despite receiving antibiotic treatment. Of those who live, another 10-20% lose their arms or legs, become hard of hearing or deaf, have problems with their nervous systems, including long term neurologic problems, or suffer seizures or strokes.

### How is meningococcal disease spread?

These bacteria are passed from person-to-person through saliva (spit). You must be in close contact with an infected person's saliva in order for the bacteria to spread. Close contact includes activities such as kissing, sharing water bottles, sharing eating/drinking utensils or sharing cigarettes with someone who is infected; or being within 3-6 feet of someone who is infected and is coughing or sneezing.

# Who is at most risk for getting meningococcal disease?

High-risk groups include anyone with a damaged spleen or whose spleen has been removed, those with persistent complement component deficiency (an inherited immune disorder), HIV infection, those traveling to countries where meningococcal disease is very common, microbiologists who work with the organism and people who may have been exposed to meningococcal disease during an outbreak. People who live in certain settings such as first year college students living on campus and military recruits are also at greater risk of disease from some of the serogroups.

# Which students are most at risk for meningococcal disease?

In the 1990s, college freshmen living in residence halls were identified as being at increased risk for meningococcal disease. Meningococcal disease and outbreaks in young adults were primarily due to serogroup C. However, following many years of routine vaccination of young people with quadrivalent meningococcal conjugate vaccine (for serogroups A, C, W and Y), serogroup B is now the primary cause of meningococcal disease and outbreaks in young adults. Among the approximately 9 million students aged 18-21 years enrolled in college, there are an average of 20 cases and 0-4 outbreaks due to serogroup B reported annually. Although incidence of serogroup B meningococcal disease in college students is low, four-year college students are at increased risk compared to non-college students; risk is highest among first-year students living on campus. The close contact in college residence halls, combined with social mixing activities (such as going to bars, clubs or parties; participating in Greek life; sharing food or beverages; and other activities involving the exchange of saliva), may put college students at increased risk.

### Is there a vaccine against meningococcal disease?

Yes, there are 2 different meningococcal vaccines. Quadrivalent meningococcal conjugate vaccine (Menactra and Menveo) protects against 4 serotypes (A, C, W and Y) of meningococcal disease. Meningococcal serogroup B vaccine (Bexsero and Trumenba) protects against serogroup B meningococcal disease. Quadrivalent meningococcal conjugate vaccine is routinely recommended at age 11-12 years with a booster at age 16. Students receiving their first dose on or after their 16<sup>th</sup> birthday do not need a booster. Individuals in certain high risk groups may need to receive 1 or more of these vaccines based on their doctor's recommendations. Adolescents and young adults (16-23 years of age) who are not in high risk groups may be vaccinated with meningococcal B vaccine, preferably at 16-18 years of age, to provide short-term protection for most strains of serogroup B meningococcal disease. Talk with your doctor about which vaccines you should receive.

# Is the meningococcal vaccine safe?

Yes. Getting meningococcal vaccine is much safer than getting the disease. Some people who get meningococcal vaccine have mild side effects, such as redness or pain where the shot was given. These symptoms usually last for 1-2 days. A small percentage of people who receive the vaccine develop a fever. The vaccine can be given to pregnant women. A vaccine, like any medicine, is capable of causing serious problems such as severe allergic reactions, but these are rare.



### Is meningococcal vaccine mandatory for entry into secondary schools that provide housing, and colleges?

Massachusetts law (MGL Ch. 76, s.15D) and regulations (105 CMR 220.000) requires both newly enrolled full-time students attending a secondary school (those schools with grades 9-12) who will be living in a dormitory or other congregate housing licensed or approved by the secondary school or institution and newly enrolled full-time students 21 years of age and younger attending a postsecondary institution (e.g., colleges) to receive a dose of quadrivalent meningococcal conjugate vaccine.

At affected secondary schools, the requirements apply to all new full-time residential students, regardless of grade (including grades pre-K through 8) and year of study. Secondary school students must provide documentation of having received a dose of quadrivalent meningococcal conjugate vaccine at any time in the past, unless they qualify for one of the exemptions allowed by the law. College students 21 years of age and younger must provide documentation of having received a dose of quadrivalent meningococcal conjugate vaccine on or after their 16th birthday, regardless of housing status, unless they qualify for one of the exemptions allowed by the law. Meningococcal B vaccines are not required and do not fulfill the requirement for receipt of meningococcal vaccine. Whenever possible, immunizations should be obtained prior to enrollment or registration. However, students may be enrolled or registered provided that the required immunizations are obtained within 30 days of registration.

Exemptions: Students may begin classes without a certificate of immunization against meningococcal disease if: 1) the student has a letter from a physician stating that there is a medical reason why he/she can't receive the vaccine; 2) the student (or the student's parent or legal guardian. if the student is a minor) presents a statement in writing that such vaccination is against his/her sincere religious belief; or 3) the student (or the student's parent or legal guardian, if the student is a minor) signs the waiver below stating that the student has received information about the dangers of meningococcal disease, reviewed the information provided and elected to decline the vaccine.

### Shouldn't meningococcal B vaccine be required?

CDC's Advisory Committee on Immunization Practices has reviewed the available data regarding serogroup B meningococcal disease and the vaccines. At the current time, there is no routine recommendation and no statewide requirement for meningococcal B vaccination before going to college (although some colleges might decide to have such a requirement). As noted previously, adolescents and young adults (16 through 23 years of age) may be vaccinated with a serogroup B meningococcal vaccine, preferably at 16 through 18 years of age, to provide short term protection against most strains of serogroup B meningococcal disease. This would be a decision between a patient or parent and a healthcare provider. These policies may change as new information becomes available

### Where can a student get vaccinated?

Students and their parents should contact their healthcare provider and make an appointment to discuss meningococcal disease, the benefits and risks of vaccination, and the availability of these vaccines. Schools and college health services are not required to provide you with this vaccine.

# Where can I get more information?

- Your healthcare provider
- The Massachusetts Department of Public Health, Division of Epidemiology and Immunization at (617) 983-6800 or www.mass.gov/dph/imm and www.mass.gov/dph/epi
- Your local health department (listed in the phone book under government)

## **Waiver for Meningococcal Vaccination Requirement**

I have received and reviewed the information provided on the risks of meningococcal disease and the risks and benefits of quadrivalent meningococcal conjugate vaccine. I understand that Massachusetts' law requires newly enrolled full-time students at secondary schools who are living in a dormitory or congregate living arrangement licensed or approved by the secondary school, and newly enrolled full-time students at colleges and universities who are 21 years of age or younger to receive meningococcal vaccinations, unless the students provide a signed waiver of the vaccination or otherwise qualify for one of the exemptions specified in the law.

After reviewing the materials above on the dangers of menin	gococcal disease, I choose to waive receip	ot of meningococcal vaccine.
Student Name:	Date of Birth:	Student ID:
Student Signature:	Date:	
If student is under the age of 18, then both	th student and parent/legal guardian must	sign this form.
Parent/Guardian Name:		
Parent/Guardian Signature:	Date	:
MDPH Meningococcal Information and Waiver Form		Updated September 202

Provided by: Massachusetts Department of Public Health / Divisions of Epidemiology and Immunization / 617-983-6800\