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Owner	Kim Panko: President, College of Nursing
Policy Area	College of Nursing CNG
Applicability	MVHS

Post-Secondary Institution Compliance with Public Health Law Section 2167, CNG-100.57

PURPOSE

To ensure compliance of Public Health Law (PHL) Section 2167 for all students at St. Elizabeth College of Nursing (SECON). New York State PHL Section 2167 requires post-secondary institutions to distribute information about meningococcal diseases and immunization to the students, or parents or guardians of students under the age of 18, accompanied by a response form. The institution is required to maintain appropriate documentation for each student.

SCOPE

Students, Student Health Nurse, SECON Faculty and Administration

REFERENCES

Centers for Disease Control. (2021). CDC bacterial meningitis homepage. Retrieved from: <https://www.cdc.gov/meningitis/bacterial.html>

New York State Health Department. (2023). Meningococcal Disease Fact Sheet. Retrieved from: <https://www.health.ny.gov/publications/2168/>

New York State Health Department. (2022). On-line post-secondary immunization survey instructions. Retrieved from: https://www.health.ny.gov/prevention/immunization/schools/docs/2022_post_secondary_imm_survey_instructions.pdf

CNG-100.57 Form 1 Meningococcal Vaccination Response Form

DEFINITIONS / ABBREVIATIONS

CDC: Centers for Disease Control

OCHD: Oneida County Health Department

PHL: Public Health Law

SECON: St. Elizabeth College of Nursing

PROCEDURE / DIRECTIVE

1. All students are required to provide medical documentation of meningococcal vaccination, intention to be vaccinated timely or declination of the vaccine prior to attending orientation to SECON. Documentation may be provided by utilizing any of the following:

- A vaccine record indicating at least 1 dose of meningococcal ACWY vaccine within the last 5 years or a complete 2-or-3-dose series of MenB without a response form; or
- A signed response form with a vaccine record (if a student submits a response form selecting this option, a vaccine record must be attached); or
- A signed response form indicating that the student will obtain meningococcal vaccine within 30 days; or
- A signed response form indicating that the student will not obtain immunization against meningococcal disease.

If a student has not received meningococcal vaccine within the last 5 years, then he/she must submit the signed response form.

2. Exemptions to IMMUNIZATION INCLUDE:

- 2.1. A medical exemption must be written by a physician, physician assistant, nurse practitioner, or by a license midwife caring for a pregnant student. The exemption must state that a valid contraindication to the vaccine exists. The exemption must specify if the exemption is temporary or permanent, what the contraindication is, and why. Records of temporarily exempted students will be reviewed every 6 months to see if contraindications still exist. In the event of an outbreak, all efforts will be made to protect medically exempt students from exposure. This may include exclusion from classes or campus.
- 2.2. A religious exemption is a written and signed statement from a student or students parent(s) or legal guardian of those less than 18 years old, that they object to immunization due to religious beliefs. In the event of an outbreak, all efforts will be made to protect medically exempt students from exposure. This may include exclusion from classes or campus.

3. A certificate of immunization includes documents such as a certificate from a health care provider, immunization registry record, cumulative health record from a previous educational institution, migrant health record, immunization transfer record, military immunization card,

immunization portion of a passport or an immunization record card. Immunization records must be signed or stamped by a health care provider.

4. Ensure annual Post-Secondary Immunization Survey is completed.
5. In the event a student has a documented case of meningitis, the Oneida County Health Department (OCHD) will be notified by the Student Health Nurse. The address for the OCHD is 185 Genesee Street, Utica, NY 13501 and the telephone number is 315-798-6400.

CONTENT EXPERT(S) / RESEARCHER(S) / CONTRIBUTOR(S): N/A

This Document Replaces: N/A

Attachments

[CNG-100.57 Form 1 Meningococcal Vaccination Response Form.pdf](#)

Approval Signatures

Step Description	Approver	Date
Final Approver	Heidi Coluzza: Nurse Manager, Employee Health	1/30/2024
Owner	Kim Panko: President, College of Nursing	1/30/2024

Applicability

MVHS