

UNIVERSITY OF ALASKA ANCHORAGE HOUSING IMMUNIZATION FORM

Full Name: _____ UAA Student ID: _____
Address: _____ Birth Date: _____
City: _____ State: _____ Zip: _____ Home Phone: _____ *Enter all 10 digits with no spaces or hyphens*
Work Phone: _____ *hyphens*

Required Immunizations *See page 2 for details on immunization requirements*

MMR* 1st immunization _____ & 2nd immunization _____ OR Serological Confirmation of Immunity _____

Tetanus-Diphtheria Booster _____ *(within the past 10 years required)*

Hepatitis A 1st immunization _____ & 2nd immunization _____

Hepatitis B 1st immunization _____ & 2nd immunization _____ & 3rd immunization _____
OR Serological Confirmation of Immunity _____

Tuberculosis (TB) Skin test must be done within the past year.

Date given _____ Date read _____ PPD-Mantoux _____

If positive results: Chest X-Ray results _____
and/or date treated for TB _____

Currently without evidence of symptoms or risk factors Yes No

**NOT required for females who may be pregnant. If pregnancy is suspected, a statement or document of exemption is required until delivery.*

Recommended Immunizations

Meningococcal Vaccine Date of immunization _____ OR
 Meningitis vaccine discussed. Student opts not to receive the vaccine at this time.

Signature of Health Care Provider

Health Care Provider Name: _____ Address: _____
City: _____ State: _____ Zip: _____ Phone: _____ *Enter all 10 digits with no spaces or hyphens*
Signature: _____ Date: _____

UNIVERSITY OF ALASKA ANCHORAGE HOUSING IMMUNIZATION REQUIREMENTS

Health Care Providers:

Re-immunize if necessary when: 1) measles vaccine was administered before 12 months of age and/or before 1968; 2) Rubella vaccine was administered before 12 months and/or before 1969.

The Centers for Disease Control (CDC) and the American College Health Association recommend the following:

Vaccine	Age Indicated	Major Indications	Major Precautions
MMR	1st dose at 15 months. 2nd dose at school entrance or later	All entering college students born after 1965 should have 2 doses one month apart of live Measles vaccine and susceptible travelers.	Pregnancy history of reaction following egg ingestion or receipt. Neomycin immunosuppressant. Appropriate for HIV antibody positive persons
Tetanus-Diphtheria (Td)	Primary series in childhood with DtaP or DTP, booster at age 11-12 with Td, then every 10 years	All college students	History of neurological hypersensitivity reaction following a previous dose
Polio Vaccine *inactive (IPV) *oral poliovirus (OPV)	Primary series in childhood with IPV alone, or IPV/OPV sequentially; booster only if needed for travel after age 18 years	IPV for certain international travel	OPV should not be given to immunocompromised or HIV antibody positive persons
Varicella	Childhood, adolescence, young adulthood	All entering college students without a history of the disease or without age appropriate immunization or with a negative antibody titer (2 doses at least one month apart, if over 13 years)	Pregnancy
Hepatitis B Vaccine	Series of 3 doses (given at 0, 1-2 months, 6-12 months) prior to college entry	All college students	None
Meningococcal quadrivalent	Over 2 years, repeated every 3-5 years	College students living in dormitory situations	None
Tuberculosis	All ages	Within one year of acceptance to housing. Recommended biannually. Evidence of freedom to cover duration of dorm residence. Expires yearly.	If prior positive results. If positive a chest x-ray is required. Treatment should be started immediately. If previous positive screening, a risk assessment indicating no risk factor must be completed. Follow CDC protocol.

Recent MENINGOCOCCAL - MENINGITIS recommendations:

The ACIP and American College Health Association have recommended that:

- Students and their parents should be informed about meningococcal disease and the benefits of vaccination
- Vaccine should be provided or made easily available to those freshman that wish to reduce their risk of disease
- Other undergraduates under 25 years who wish to reduce their risk can be vaccinated.