



University of Miami Meningitis Vaccine Declination Form

On April 7th, 2022, the Florida Department of Health issued the following alert due to the increasing cases of **meningococcal meningitis** seen in the state.

Tallahassee, Fla. — The Florida Department of Health (FDOH) is responding to an outbreak of meningococcal disease in Florida. **However, it can be prevented and treated. Getting vaccinated is the best way to protect against meningococcal disease.**

Thus far, the number of cases identified in 2022 surpasses the 5-year average of meningococcal disease cases in Florida. FDOH epidemiologists are investigating each case as well as contacting people with potential or direct exposure to known cases to provide them with information and treatment options.

The following groups should consider vaccination with a meningococcal conjugate (MenACWY) vaccine during this outbreak:

- **College and university students;**
- Immunocompromised individuals;
- People living with HIV;
- [Men who have sex with men;](#)
- People in any groups listed above who received their MenACWY vaccine more than 5 years ago.

This is a serious disease caused by bacteria called *Neisseria meningitidis*. Fortunately, these bacteria are not as contagious as germs that cause the common cold or flu. People do not catch the bacteria through casual contact or by breathing air where someone with meningococcal disease has been. It requires close contact over a period of time, or direct contact such as kissing or sharing drinks.

Early symptoms of the disease include fever, headache, stiff neck, nausea, vomiting, light sensitivity, confusion, and rash. Anyone who has been exposed or develops symptoms should be evaluated by a health care provider immediately. This is a rare but potentially devastating disease.

I attest that I have reviewed the message above and choose to decline vaccination against meningococcal meningitis, despite the risks.

Student Name: _____ Date of birth: _____

Student Signature: _____ Date: _____

Parent/Guardian Name and Signature _____
(required if student is under age 18 years)

Please upload signed form via [MyUHealthChart.com](https://myuhealthchart.com)
Alternatively, you may email it to Studenthealth@miami.edu