

Vaccination Policy

EDMC institutions shall recognize all state and federal vaccination and immunization requirements.

Institutions, with the support of EDMC accreditation & licensing and legal departments, are responsible for ensuring compliance with applicable requirements.

Meningococcal Disease

Meningococcal disease can refer to any illness that is caused by the type of bacteria called *Neisseria meningitidis*, also known as meningococcus [muh-ning-goh-KOK-us]. These illnesses are often severe and include infections of the lining of the brain and spinal cord (meningitis) and bloodstream infections (bacteremia or septicemia).

Meningococcus bacteria are spread through the exchange of respiratory and throat secretions such as saliva (e.g., by living in close quarters, kissing). Meningococcal disease can be treated with antibiotics, but quick medical attention is extremely important. Keeping up to date with recommended vaccines is the best defense against meningococcal disease.

Meningococcal disease is more commonly diagnosed among infants, adolescents, and young adults. Infectious diseases tend to spread wherever large groups of people gather together. Outbreaks of serogroup B meningococcal disease have been reported from college campuses during the last several years. There are certain medical conditions and medications that place people at increased risk of meningococcal disease, such as not having a spleen and having a complement component deficiency. Travelers to the meningitis belt in sub-Saharan Africa may be at risk for meningococcal disease, particularly during the dry season.

There are three types of meningococcal vaccines available in the United States:

- Meningococcal conjugate vaccines
- Meningococcal polysaccharide vaccine
- Serogroup B meningococcal vaccines

Meningococcal vaccination is recommended for all preteens and teens. All 11- and 12-year-olds should be vaccinated with a single dose of a quadrivalent (protects against serogroups A, C, W, and Y) meningococcal conjugate vaccine. Since protection decreases over time, a booster dose is

recommended at age 16 so teens continue to have protection during the years when they are at highest risk of meningococcal disease. Teens and young adults (16- through 23-year-olds) also may be vaccinated with a serogroup B meningococcal vaccine, preferably at ages 16 through 18. Two or three doses are needed depending on the brand. Preteens, teens, and young adults should be vaccinated with a serogroup B meningococcal vaccine if they are identified as being at increased risk of meningococcal disease. Some people should not get the meningococcal vaccine, they should wait, or they should tell their doctor if they have certain conditions.

Additional information regarding the meningococcal vaccination, disease, risks, and contraindications can be found at <http://www.cdc.gov/meningococcal/index.html>.

Measles, Mumps and Rubella Vaccination (MMR)

Measles, Mumps, and Rubella are serious diseases. Before vaccines they were very common, especially among children. The Measles virus causes rash, cough, runny nose, eye irritation, and fever. It can lead to ear infection, pneumonia, seizures (jerking and staring), brain damage, and death. The Mumps virus causes fever, headache, muscle pain, loss of appetite, and swollen glands. It can lead to deafness, meningitis (infection of the brain and spinal cord covering), painful swelling of the testicles or ovaries, and, in rare instances, sterility. The Rubella virus causes rash, arthritis (mostly in women), and mild fever. If a woman contracts rubella while she is pregnant, she could have a miscarriage or her baby could be born with serious birth defects.

These diseases spread from person to person through the air. You can easily catch them by being around someone who is already infected. The Measles, Mumps, and Rubella (MMR) vaccine can protect children and adults from all three of these diseases.

Children should get two doses of MMR vaccine: the first dose at 12 to 15 months of age and the second dose at 4 to 6 years of age (this dose may be given sooner if at least 28 days has passed since the first dose was administered).

Some adults should also get the MMR vaccine. Generally, anyone 18 years of age or older who was born after 1956 should get at least one dose of the MMR vaccine, unless they can show that they have either been vaccinated or had all three diseases.

Additional information regarding the MMR vaccination, disease, risks, and contraindications can be found at <http://www.cdc.gov/vaccines/hcp/vis/vis-statements/mmr.html>

Hepatitis B

Hepatitis B is a liver infection caused by the Hepatitis B virus (HBV). Hepatitis B is transmitted when blood, semen, or another body fluid from a person infected with the Hepatitis B virus enters the body of someone who is not infected. This can happen through sexual contact; sharing needles, syringes, or other drug-injection equipment; or from mother to baby at birth. For some people, Hepatitis B is an acute, or short-term, illness but for others, it can become a long-term, chronic infection. Risk for chronic infection is related to age at infection; approximately 90 percent of infected infants become chronically infected, compared with 2 to 6 percent of adults. Chronic Hepatitis B can lead to serious health issues such as cirrhosis or liver cancer. The best way to prevent Hepatitis B is by getting vaccinated.

The vaccination schedule most often used for adults and children has been three intramuscular injections, the second and third administered one and six months after the first. Recombivax HB® has been approved as a two-dose schedule for individuals between 11 and 15 years of age. Twinrix® also has been approved as a four dose accelerated schedule.

Additional information regarding the Hepatitis B vaccination, disease, risks, and contraindications can be found at <http://www.cdc.gov/hepatitis/hbv/index.htm>