

### **Background Check**

Students who are new to LCH will soon after registering for their first semester receive an invite email to complete their Background Check through GHRR (Global HR Research). This is not something completed on CastleBranch.

#### **Health and Safety Procedure**

Following the course registration period, students will receive an email from CastleBranch that will enable you to create your immunization tracking account on CastleBranch. Students must request their documentation from their medical provider and upload to the website, MyCB mobile app or fax to CastleBranch directly. Once your account is created you must submit the following:

#### **Immunization Records**

Students <u>enrolled in Arts and Science courses</u> must have the following submitted to CB within the first 30 days of their first semester.

- Measles, Mumps, Rubella (MMR) Immunization History
- ➤ Hepatitis B Immunization History
- Varicella (Chickenpox) Immunization History
- > Tetanus, Diphtheria, Pertussis (Tdap) Immunization History
- ➤ Meningitis Vaccination History (for students ages 21 and under)
- > COVID-19 Vaccination if completing any labs or classes on-ground at the college

Additional information as well as additional requirements and due dates for students who register for the Professional courses with a clinical component can be found on the full Health and Safety Records Form (Attached) or in your Student Handbook.

Again, students will not receive an evite from the Health and Safety Records office until after they have registered for courses. If you have any questions regarding your Health & Safety Requirements, please feel free to contact us by email at <a href="health-andsafetyrecords@laboure.edu">health-andsafetyrecords@laboure.edu</a>.

\*Students with questions about their Health Insurance should be speak with Student Accounts.

# **CastleBranch**

The Power to Make Informed Decisions.

Effective April 2018 Labouré has partnered with Castle Branch, a compliance management company, in order to track the health requirements of Labouré's Nursing program students. "MyCB" is a secure health document management system provided by Castle Branch to help facilitate tracking of health and clinical compliance requirement documents associated with Labouré's Nursing students. MyCB can be accessed online or through a mobile app. Nursing students will use this platform to upload required health and clinical requirement documentation.

Following the course Registration period, Castle Branch will be contacting students via email with directions on creating your student account. Below is a sample of the evite you that you will receive:

From: Customer Service [mailto:customerservice@castlebranch.com]

Sent: Thursday, March 15, 2018 8:44 AM

To:

Subject: Laboure College - Nursing - Request for Order



We require an order be conducted by CastleBranch as soon as possible. Please go to the link below no later than 11:59:59 PM EDT on March 15, 2019. This order will be performed at no cost to you.

# Begin Order!

If you have any questions about how to complete the order request, please contact CastleBranch at (888) 723-4263 or customerservice@castlebranch.com.

Thank you,

Laboure College - Nursing

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Once you have completed your account, you must upload your Health and Safety records to the MyCB website. Once Castle Branch contacts you it is very important that you create your account ASAP, if there is a delay with your account being set up there will be a Compliance Hold placed on your account and you run the risk of being administratively withdrawn from your course.



### Immunization, Health, and Safety Requirements

All Professional Courses with a Clinical Component

### **COLLEGE Requirements**

All College Students must submit the following requirements within 30 days of Registering for Classes. Students will receive an evite to setup their Castle Branch Account following course registration. Students may submit official health summaries or lab reports. Students who have not submitted their requirements will have an academic hold placed on their account until each requirement has been met.

\*Background Check: All students must complete the background check forms and have an in-person ID check. It may <u>not</u> be done via email or mailing. Forms are available on laboure.edu, <u>my.laboure.edu</u> and on campus. Please submit your forms to Health and Safety Records Office in C-127.

and on campus. Please submit your forms to Health and Safety Records Office in C-127.			
Measles (Rubeola), Mumps, & Rubella One of the following is required:	<ul> <li>2 vaccinations OR</li> <li>Positive antibody titer for all 3 components (lab report required)</li> <li>If your series is in process, submit where you are in the series, and new alerts will be created for you to complete the series. If your titer is negative or equivocal, a new alert will be created for you to select which of the following you will submit:         <ul> <li>Booster and repeat titer</li> <li>Repeat vaccine series</li> <li>Repeat vaccines series and repeat titer</li> </ul> </li> </ul>		
Varicella (Chicken Pox) One of the following is required	<ul> <li>2 vaccinations OR</li> <li>Positive antibody titer (lab report required)</li> <li>If your series is in process, submit where you are in the series, and new alerts will be created for you to complete the series. If your titer is negative or equivocal, a new alert will be created for you to select which of the following you will submit:         <ul> <li>Booster and repeat titer</li> <li>Repeat vaccine series</li> <li>Repeat vaccines series and repeat titer</li> </ul> </li> </ul>		
Hepatitis B One of the following is required:	<ul> <li>3 vaccinations OR</li> <li>Positive antibody titer (lab report required) OR</li> <li>School declination waiver</li> <li>If your series is in process, submit where you are in the series, and new alerts will be created for you to complete the series and titer. If your titer is negative or equivocal, a new alert will be created for you to select which of the following you will submit:         <ul> <li>Booster and repeat titer</li> <li>Repeat vaccine series</li> <li>Repeat vaccines series and repeat titer</li> </ul> </li> </ul>		
Tetanus	Submit documentation of a Tetanus, Diphtheria & Pertussis (TDaP) vaccination, administered within the past 10 years. The renewal date will be set for 10 years from the date administered. A Td vaccination is acceptable upon renewal.		
Meningitis Students 21 years of age and under only	Massachusetts requires all newly enrolled full-time students 21 years of age and under attending a postsecondary institution (e.g., colleges) to: receive a dose of quadrivalent meningococcal conjugate vaccine on or after their 16th birthday to protect against serotypes A, C, W and Y or fall within one of the exemptions in the law. For more information about Meningococcal Disease, Meningococcal Vaccines, Vaccination Requirements and to view the Declination Waiver for Students at Colleges please go to <a href="https://www.mass.gov/lists/meningitis-vaccination-requirements">https://www.mass.gov/lists/meningitis-vaccination-requirements</a> or email us at healthandsafetyrecords@laboure.edu.		



### Immunization, Health, and Safety Requirements (Cont'd)

# \* All Professional Courses with a Clinical Component

### All students registered for Professional Course with a Clinical Component

must submit the following by the due date outlined below.

**Fall Professional Course:** Due by August 1<sup>st</sup> (extension for flu shot)

Spring Professional Course: Due by December 1<sup>st</sup> Summer Professional Course: Due by April 1<sup>st</sup>

Summer Professional Course: Due by April 1st				
	One of the following completed within the past 12 months is required:			
Tuberculosis (TB)	<ul> <li>1 step TB skin test OR</li> <li>2 step TB skin test (administered 1-3 weeks apart) OR</li> <li>QuantiFERON Gold blood test (lab report required) OR</li> <li>T-Spot blood test (lab report required) OR IGRA blood test (lab report required)</li> <li>The renewal date will be set for 1 year. Upon renewal, one of the following is required: <ul> <li>1 step TB skin test OR</li> <li>QuantiFERON Gold blood test (lab report required) OR</li> <li>T-Spot blood test (lab report required) OR</li> <li>IGRA blood test (lab report required) OR</li> </ul> </li> <li>If positive results, submit a clear Chest X-ray (lab report required) along with TB Symptom questionnaire form. A new chest x-ray is required every 5 years.</li> </ul>			
	One of the following is required:			
Influenza	<ul> <li>Documentation of a flu vaccine administered during the current flu season (August-May) OR</li> <li>Declination Waiver available for download from this requirement. Declination waiver must be signed.</li> <li>The renewal date will be set for 9/1 of the following flu season.</li> </ul>			
Covid-19 Vaccination	One of the following is required:  Johnson & Johnson (1 dose); or  Pfizer (2 doses); or  Moderna (2 does)			
	And Booster vaccination 3 months after final vaccine.			
	Submit your American Heart Association Healthcare Provider CPR certification. The front AND back of the card must be submitted at the same time and Training Center/Instructor Information must be present on the back of the card. Electronic cards are acceptable as well but must have the Training Center/Instructor Information on them. Visit heart.org to locate a training center near you!			
CPR Certification	Temporary approval will be granted for 30 days with the submission of either a certificate of completion, or letter stating course completion from the provider. The renewal date will be set based on the expiration of your certification.			

<sup>\*</sup> Students will be notified if any additional clinical requirements are required in the future. If you have registered for a class and have not received your Castle Branch evite, please email healthandsafetyrecords@laboure.edu



# **College Requirement:**

### Healthcare Provider / Basic Life Support (BLS)

- High-quality CPR for adults, children, and infants
- The AHA Chain of Survival, specifically the BLS components
- Use of an AED
- Effective ventilations using a barrier device
- Importance of teams in multi-rescuer resuscitation and performance as an effective team member during multi-rescuer CPR
- Relief of foreign-body airway obstruction (choking) for adults and infants

### The College does not accept the following:

### Advanced Cardiovascular Life Support (ACLS)

- Basic life support skills, including effective chest compressions, use of a bag-mask device, and use of an AED
- Recognition and early management of respiratory and cardiac arrest
- Recognition and early management of peri-arest conditions such as symptomatic bradycardia
- Airway management
- Related pharmacology
- Management of ACS and stroke
- Effective communication as a member and leader of a resuscitation team

Q: Why doesn't ACLS trump BLS?

A: The ACLS class only covers Adult CPR/AED, it does not test Child/Infant skills or choking.

#### Heartsaver® First Aid

- First aid basics
- Medical emergencies
- Injury emergencies
- Environmental emergencies
- Preventing illness and injury
- Optional exam

### Hear(saver® CPR AED)

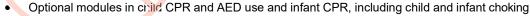
- Adult CPR and AED use
- Opioid-associated life-threatening emergencies
- Child CPR and AED use
- Infant CPR
- Adult, child, and infant choking

#### Heartsaver® First Aid CPR AED

BASIC LIFE

Provider

- First aid basics
- Medical emergencies
- Injury emergencies
- Environmental emergencies
- Preventing illness and injury
- Adult CPR and AED use
- Opioid-associated life-threatening emergencies
- Child CFR and AED use
- Infant CPR
- Optional modules in child CPR and AED use and infant CPR
- Optional exam



Optional exam



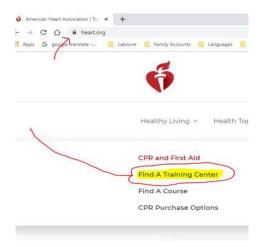
# **Approved CPR Training Sites**



www.cprboston.org 617-298-0699 (Carney Hospital)

# **American Heart Association**

# www.heart.org



# **EMS Academy**

#### www.emsacademy.biz

781-834-6911



# 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., colleges) 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 schools) 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 college freshmen living in dormitories and military recruits are also at greater risk of disease from some of the serogroups.

#### Are some students in college and secondary schools 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 MenACWY vaccine, 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 2-4 outbreaks due to serogroup B reported annually.

Although incidence of serogroup B meningococcal disease in college students is low, college students aged 18-21 years are at increased risk compared to non-college students. The close contact in college residence halls, combined with certain behaviors (such as alcohol consumption, exposure to cigarette smoke, sharing food or beverages, and other activities involving the exchange of saliva), may put college students at increased risk. There is insufficient information about whether new students in other congregate living situations (e.g., residential schools) may also be at increased risk for meningococcal disease. But, the similarity in their environments and some behaviors may increase their 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 <u>and</u> 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 16<sup>th</sup> 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 healthcare provider and a patient. 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 <a href="https://www.mass.gov/dph/imm">www.mass.gov/dph/imm</a> and <a href="https://www.mass.gov/dph/epi">www.mass.gov/dph/imm</a> and <a href="https://www.mass.gov/dph/epi">www.mass.gov/dph/epi</a>
- 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 or meningococcal vaccine.	n the dangers of meningococcal disease, I ch	oose to waive receipt of	
Student Name:	Date of Birth:	Student ID:	
Signature:	Date:		
	if student is under 18 years of age)	nmunization / 617 083 6800	

MDPH Meningococcal Information and Waiver Form

Updated May 2018 - Reviewed August 2019

# Meningococcal Disease and Students: Commonly Asked Questions

#### What is meningococcal disease?

Meningococcal disease is caused by infection with bacteria called *Neisseria meningitidis*. These bacteria can infect the tissue (the "meninges") that surrounds the brain and spinal cord and cause meningitis, or they may infect the blood or other organs of the body. Symptoms of meningococcal disease may appear suddenly. Fever, severe and constant headache, stiff neck or neck pain, nausea and vomiting, 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. In the US, about 350-550 people get meningococcal disease each year and 10-15% die despite receiving antibiotic treatment. Of those who survive, about 10-20% may lose limbs, become hard of hearing or deaf, have problems with their nervous system, including long term neurologic problems, or have seizures or strokes. Less common manifestations of meningococcal disease include pneumonia and arthritis.

#### How common is meningococcal disease?

Meningococcal disease is becoming much less common. Over the past 20 years, the overall incidence of meningococcal disease in the US has declined 10-fold. Twenty years ago in Massachusetts there were 80-100 cases of meningococcal disease per year. In contrast, for the past decade the average is approximately 12 cases per year. Declining rates of meningococcal disease may be due in part to the introduction of meningococcal vaccines (initially recommended routinely in 2005 for adolescents aged 11-12 years, unvaccinated college freshmen living in residence halls) as well as other factors such as the decline in cigarette smoking, which may impact susceptibility to this disease.

#### 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 most at 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 are routinely exposed to the organism and people who may have been exposed to meningococcal disease during an outbreak. People who live in certain settings such as college freshmen living in dormitories and military recruits are also at greater risk of disease caused by some of the serotypes.

#### 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 2-4 outbreaks due to serogroup B reported annually. Although incidence of serogroup B meningococcal disease in college students is low, college students aged 18-21 years are at increased risk compared to non-college students. The close contact in college residence halls, combined with certain behaviors (such as alcohol consumption, exposure to cigarette smoke, 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, for age 10 and older.

#### Should my child or adolescent receive meningococcal vaccine?

Different meningococcal vaccines are recommended for a range of age and risk groups. Quadrivalent meningococcal conjugate vaccine is recommended routinely for children 11-12 years of age, with a second dose at age 16. College freshmen and other newly enrolled college students living in dormitories who are not yet vaccinated are also recommended to receive quadrivalent meningococcal conjugate vaccine.

Meningococcal B vaccine is recommended for people over age 10 in certain relatively rare high risk groups. In addition, adolescents and young adults (16 through 23 years of age) who are not at high risk **may** be vaccinated with a serogroup B meningococcal vaccine, preferably at 16 through 18 years of age, to provide short term protection for most strains of serogroup B meningococcal disease. Talk with your doctor about which vaccines your child should receive.

**Requirements:** Massachusetts law requires the following students receive quadrivalent meningococcal conjugate vaccine (unless they qualify for one of the exemptions allowed by the law):

**Colleges:** All newly enrolled full-time students 21 years of age and under attending a postsecondary institution (e.g., colleges), regardless of housing status, must 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.

**Residential Schools:** 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 schools) must receive a dose of quadrivalent meningococcal conjugate vaccine **or** fall within one of the exemptions in the law.

More information may be found in the MDPH document "Information about Meningococcal Disease, Meningococcal Vaccines, Vaccination Requirements and the Waiver for Students at Colleges and Residential Schools."

#### 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 healthcare provider and a patient. These policies may change as new information becomes available.

#### How can I protect my child from getting meningococcal disease?

The best protection against meningococcal disease and many other infectious diseases is thorough and frequent handwashing, respiratory hygiene and cough etiquette. Individuals should:

- 1) wash their hands often, especially after using the toilet and before eating or preparing food (hands should be washed with soap and water or an alcohol-based hand gel or rub may be used if hands are not visibly dirty);
- 2) cover their nose and mouth with a tissue when coughing or sneezing and discard the tissue in a trash can; or if they don't have a tissue, cough or sneeze into their upper sleeve.
- 3) not share food, drinks or eating utensils with other people, especially if they are ill.
- 4) contact their healthcare provider immediately if they have symptoms of meningococcal disease.

If your child is exposed to someone with meningococcal disease, antibiotics may be recommended to keep your child from getting sick.

You can obtain more information about meningococcal disease or vaccination from your healthcare provider, your local board of health (listed in the phone book under government), or the MDPH Division of Epidemiology and Immunization at (617) 983-6800 or on the MDPH website at <a href="https://www.mass.gov/dph">www.mass.gov/dph</a>.