



EDGEWOOD COLLEGE

Health Services

Student Health History Report

THIS FORM MUST BE COMPLETED PRIOR TO MOVING INTO THE RESIDENCE HALL

Please print in black ink

CONFIDENTIALITY NOTICE

The information contained on this health form is legally privileged and confidential and is intended only for the use of Edgewood College Health Center. The copying or distribution of this document is prohibited.

Name (Last)		(First)		MI	Student I.D.
Date of Birth (MM/DD/YY)	Age	Citizenship (Specify Country if Other)			Preferred Pronouns:
		US <input type="checkbox"/>	Other <input type="checkbox"/>		
Home Address					
City			State	Zip	Student Cell Phone ()
Emergency Contact (Name and Phone)					
()					

PART 1. IMMUNIZATION RECORD (must include all dates of immunizations below)

COVID-Vaccine type: Pfizer Moderna Johnson & Johnson Other (please circle one-state type if "other")	1	2		
DIPHTHERIA – PERTUSSIS – TETANUS (DPT)	1	2	3	4
TETANUS – DIPHTHERIA Vaccine type: Td Tdap (please circle one)			1	2
MMR (Measles, Mumps, Rubella)			1	2
POLIO	1	2	3	4
VARICELLA (Chickenpox) OR if you have had Chicken Pox Record the Year:			1	2
HEPATITIS B		1	2	3
MENINGOCOCCAL				1
HPV VACCINE		1	2	3

PART 2. PERSONAL HEALTH HISTORY

MEDICAL OR HEALTH CONCERNS: Prior or current – Please check boxes below **IF NONE** apply, check this box

Chicken Pox	Migraine Headaches	Thyroid Disease	Diabetes	
Whooping Cough	Ear, Nose, or Throat problems	Eczema	Hearing problems	
Polio	Sinusitis	Hives	Eating Disorder	
Tuberculosis	Tonsils removed	Back injury	Vertigo or Dizziness	
Hernia	Asthma	Heart problems	Ulcers	
Menstrual problems	Pneumonia	Kidney problems	Organ transplant	
Mononucleosis	Hypertension/Hypotension	Bladder problems	Surgery(specify)	
Hay Fever	Heart Murmur	Arthritis	Fracture(specify)	
Epilepsy (Seizures)	Rheumatic Fever	Bowel problems	Other (specify below)	

Allergies:

List current medication(s) and reason(s):

Do you have an illness or condition, including emotional or psychological, not listed above, for which you are receiving treatment? If yes, specify.

List date(s) and reason(s) for any hospitalizations:

Other pertinent medical information:

PART 3. EMERGENCY ROOM and URGENT CARE

We do not handle any insurance coverage/costs There is a minimal cost for visits or medications, which are billed to the student account. Please consult your insurance carrier to identify covered facilities within a 50-mile radius of Edgewood College. This enables us to provide appropriate referrals and helps avoid the need to search for this information in an urgent situation. If you do not have coverage within the region, we recommend you consider the student health plan. Since students are a healthy group in general, insurance premiums tend to be relatively low and may offer a savings over group family plans. See www.wpsic.com/waicu/ for plan information.

	URGENT CARE	EMERGENCY ROOM
FACILITY NAME		
ADDRESS		

PART 4. STUDENT VERIFICATION

By signing below, I am affirming that I have read the attached information regarding Hepatitis B and Meningitis. I am also certifying that the information on this form is complete and accurate to the best of my knowledge.

Student Signature_____
Date**PART 5. AUTHORIZATION FOR TREATMENT**

This is to be completed and signed by students (if student is under eighteen years old, this must also have the signature of the student's parent/guardian). In case of serious illness or accident, I give Edgewood College or its representative(s) permission to secure medical and/or surgical care to include transportation to a physician or hospital of their choice, examination, medication, and surgery that is considered necessary for my good health. I agree to be responsible for all medical costs. In the event of a non-serious condition requiring minor care, I approve of care by Edgewood College's licensed professional nursing staff.

Student Signature_____
Parent/Guardian Signature_____
Date**Please return form to:**

Edgewood College Health Services
1000 Edgewood College Drive
Dominican Hall 123
Madison, WI 53711
Phone: (608) 663-8334
Fax: (608) 663-3394



EDGEWOOD COLLEGE

Health Services

DATE: 2021-2022 Academic Year

TO: Incoming Students, Parents/Guardians

RE: Hepatitis B and Meningococcal Vaccine

The General Assembly of the State of Wisconsin mandates that each public or private postsecondary institution in the state provide information concerning Hepatitis B infection to all students entering the institution for the first time. Those students who will be living in on-campus housing must also be informed about the risk of meningococcal meningitis infection. The required information below includes the risk factors and dangers of each disease as well as information on the availability and effectiveness of the respective vaccines for persons who are at-risk for the diseases. The information concerning these diseases is from the Centers for Disease Control and the American College Health Association.

Meningococcal Disease is a rare but potentially fatal bacterial infection. The early symptoms usually associated with the disease include fever, severe headache, stiff neck, rash, nausea, vomiting, and lethargy. It should be emphasized that meningitis is still a very rare disease, occurring at a rate of approximately 1 in 100,000 persons in the United States. Disease occurrence is unpredictable and we cannot reliably identify who may be at risk. Edgewood College has had only one documented case of the disease in its history.

The current available meningococcal vaccine covers some but not all strains of the bacteria that can cause Meningococcal Disease. About 30% of meningitis cases in college students can be caused by a strain that is not included in the vaccine. The vaccine offers protection that last only 3-5 years. That maybe enough for a student to feel that the cost of the vaccine is worth it. Whether to receive the vaccine is a personal health, rather than a public decision, given our current understanding of the risk for the disease and limitations of the vaccine. Edgewood College Health Services' position on meningococcal vaccine is that the vaccine should be available to those freshmen that wish to reduce their risk of the disease. Other undergraduate students wishing to reduce their risk of the disease can also choose to be vaccinated.

For questions and information about the vaccines, please call (608) 663-8334.

Suzanne Wallace DNP ANP-BC
Director of Health Services
Edgewood College Health Services

IMPORTANT HEPATITIS B AND MENINGITIS INFORMATION

The General Assembly of the State of Wisconsin mandates that each public or private postsecondary institution in the state provide information concerning Hepatitis B infection to all students entering the institution for the first time. Those students who will be living in on-campus housing must also be informed about the risk of meningococcal meningitis infection. The required information below includes the risk factors and dangers of each disease as well as information on the availability and effectiveness of the respective vaccines for persons who are at-risk for the diseases. The information concerning these diseases is from the Centers for Disease Control and the American College Health Association.

The law does not require that students receive vaccination for enrollment. Furthermore, the institution is not required by law to provide vaccination and/or reimbursement for the vaccine.

Hepatitis B (HBV) Immunization

Hepatitis B (HBV) is a serious viral infection of the liver that can lead to chronic liver disease, cirrhosis, liver cancer, liver failure, and even death. The disease is transmitted by blood and or body fluids and many people will have no symptoms when they develop the disease. The primary risk factors for Hepatitis B are sexual activity and injecting drug use. This disease is completely preventable. Hepatitis B vaccine is available to all age groups to prevent Hepatitis B viral infection. A series of three (3) doses of vaccine are required for optimal protection. Missed doses may still be sought to complete the series if only one or two have been acquired. The HBV vaccine has a record of safety and is believed to confer lifelong immunity in most cases.

Meningococcal Meningitis

Meningococcal disease is a rare but potentially fatal bacterial infection, expressed as either meningitis (infection of the membranes surrounding the brain and spinal cord) or meningococemia (bacteria in the blood). Meningococcal disease strikes about 3,000 Americans each year and is responsible for about 300 deaths annually. The disease is spread by airborne transmission, primarily by coughing. The disease can onset very quickly and without warning. Rapid intervention and treatment is required to avoid serious illness and or death. There are 5 different subtypes (called serogroups) of the bacterium that causes Meningococcal Meningitis. The current vaccine does not stimulate protective antibodies to serogroups B, but it does protect against the most common strains of the disease, including serogroups A, C, Y and W-135. The duration of protection is approximately three to five years. The vaccine is very safe and adverse reactions are mild and infrequent, consisting primarily of redness and pain at the site of injection lasting up to two days. The Advisory Committee on Immunization Practices (ACIP) of the U.S. Centers for Disease Control and Prevention (CDC) recommends that college freshmen (particularly those who live in dormitories or residence halls) be informed about meningococcal disease and the benefits of vaccination and those students who wish to reduce their risk for meningococcal disease be immunized. Other undergraduate students who wish to reduce their risk for meningococcal disease may also choose to be vaccinated.

For more information about Meningococcal Meningitis and Hepatitis B disease and vaccine, please contact your local health care provider or consult the Center for Disease Control and Prevention Web Site at [\[www.cdc.gov/health/default.htm\]](http://www.cdc.gov/health/default.htm)