

**UT SOUTHWESTERN
MEDICAL CENTER
FERPA Privacy Notice**

The Family Educational Rights and Privacy Act (FERPA) designates certain information related to students as "Directory Information" and gives UT Southwestern the right to disclose such information to anyone inquiring without having to ask students for permission. Students can specifically request in writing that all such information not be made public without their written consent. FERPA regulations and related institutional policies are included in each school's official catalog available in print and on the campus web-site at <http://www.utsouthwestern.edu>. UT Southwestern has defined the following data as "Directory Information": name; address and telephone number; major field of study; participation in recognized activities; dates of attendance; enrollment status; most recent previous educational institution attended; classification; degrees and awards received; and date of graduation.

Students have the right to withhold the disclosure of all "Directory Information" data by submitting this form to the Office of the Registrar. Students may designate their "Directory Information" restriction preferences at any time, but are strongly encouraged to record their preference at the time of registration. Changes will be effective within two working days after the receipt of this form. Your FERPA designation will remain in effect until superceded by a subsequent request even after the conclusion of your student enrollment.

Please consider very carefully the consequences of any decision made by you to withhold "Directory Information," since requests for such information from a broad spectrum of persons or organizations will be refused. (This spectrum includes prospective employers, scholarship agencies, prospective institutions to which you might apply, honors programs, classmates, and family members.) UT Southwestern will honor your request to withhold "Directory Information" and cannot assume responsibility to contact you for subsequent permission to release the data.

Please indicate below your preference to UT Southwestern regarding its release of your "Directory Information" by checking one of the following:

- UT Southwestern has my permission to release "Directory Information" as described above. If the Office of the Registrar fails to receive this form, we will assume that you have selected this option.
- I have carefully read the above information and DO NOT want my "Directory Information" released without my prior permission.

_____	_____
<i>Print Name</i>	<i>Date</i>
_____	_____
<i>Signature</i>	<i>Student ID Number</i>
Academic Program: _____	Class(medical only): _____

Return with other registration materials:
UT Southwestern Medical Center
Office of the Registrar
5323 Harry Hines Blvd.
Dallas, Texas 75390-9096
Tel. 214-648-3606 / Fax. 214-648-3289

With few exceptions, you are entitled on your request to be informed about the information UT Southwestern collects about you. Under Sections 552.021 and 552.023 of the Texas Government Code, you are entitled to receive and review the information. Under Section 559.004 of the Texas Government Code, you are entitled to have UT Southwestern correct information about you that is held by us and that is incorrect, in accordance with procedures set forth in the University of Texas System Business Procedures Memorandum 32. The information that UT Southwestern collects will be retained and maintained as required by Texas records retention laws (Section 441.180 et seq. Of the Texas Government Code) and rules. Different types of information are kept for different periods of time.

SOUTHWESTERN

To: UT Southwestern Student
Subject: Meningococcal Meningitis Fact Sheet

The attached sheet provides you with facts from the Texas Department of Health regarding Meningococcal Meningitis. Please read this fact sheet at your earliest convenience. You should immediately sign this form below to indicate your receipt of the Meningococcal Meningitis fact sheet and return it to your academic program office or the Registrar's Office. The program office will forward this form to the Office of the Registrar to record your reply.

I have received the Meningococcal Meningitis fact sheet. (Please Print All Requested Info)

Student Name : _____

Student ID Number: _____

Program: _____

Signature: _____

Date: _____

Facts about Meningococcal Meningitis

Q. What is meningitis?

A. Meningitis, often referred to as spinal meningitis by the general public, is an infection of the layers of tissue which cover the brain and spinal cord. It may be caused by many different germs. It is generally a very serious illness which can result in blindness, deafness, amputations, permanent brain damage, or even death. However, with proper treatment, many people recover fully.

Q. What is meningococcal meningitis?

A. Meningococcal meningitis is a particularly severe form of meningitis caused by the bacteria *Neisseria meningitidis*. Even when treated with the right antibiotics, about 10-20% of people with this illness die, often within hours of the onset of the first signs of illness.

Q. Is meningococcal meningitis contagious?

A. Yes. However, it is not as contagious as the common cold or the flu.

Q. How is meningococcal meningitis spread?

A. It is spread by direct contact, as in coughing, sneezing, kissing, and immediate sharing of unwashed eating utensils.

Q. What are the symptoms?

A. Symptoms of meningitis may include:

Adults:

1. Fever
2. Severe headache
3. Stiffness of the neck
4. Nausea and maybe vomiting
5. A skin rash that looks like small, purplish red spots

Any infant with a fever of 101°F or greater and who is not easily wakened should be seen by a doctor.

Persons with meningitis may also be confused or very drowsy; sometimes they may even go into a coma from which they cannot be awakened. Getting early medical advice when a person has fever, stiff neck and headache, especially when meningitis has been reported in the community, can be lifesaving.

Q. What should I do if someone in my household gets symptoms of meningitis?

A. Do not wait. Seek immediate medical attention for the sick person. Remember to ask the doctor about care of household members.

Q. How is it treated?

A. Persons with meningococcal meningitis must be hospitalized, almost always in intensive care. They are treated with intravenous antibiotics and other medications, and monitored closely.

Q. Who is most likely to get sick with meningococcal meningitis?

A. Up to 15-20% of normal healthy people can have the meningococcal germs in their nose and throat, and remain well. Why some people suddenly become ill with this germ is not understood and happens unpredictably.

Two groups of people are known to have a higher chance of getting sick, as a result of direct and close contact to the infected case:

- The first group is people who live together under the same roof where there is a case of meningitis in the house
- The second group is preschool age children in day care centers where there is a case of meningitis

In a hospital setting, the only people who may have an increased chance of getting meningococcal meningitis are those who have direct face-to-face contact with a case, such as may occur during artificial breathing.

Q. What if I am exposed to someone who has meningococcal meningitis?

A. Those who are close contacts (household members, day-care classmates and teachers, and "best friends") will usually be advised to take a two-day course of antibiotics to reduce their risk of meningitis. Depending on the antibiotic used, this may be a single dose or up to two days of medication. Medications used are ciprofloxacin (Cipro) or rifampin given orally, or ceftriaxone (Rocephin) given as an injection.

Q. How long would it take for me to become sick if I were in close contact with and infected person?

A. In most situations, there is little chance that an individual who is exposed to a case of meningococcal meningitis will also get sick. However, anybody who has been around a case of meningitis should be alert to the possibility of disease in themselves, and seek medical care if they develop symptoms of meningitis. If you are going to become ill, the symptoms will show up in just a few days. Most people will get sick in two to ten days; the average is three to four days.

Q. Is there a vaccine for meningococcal meningitis?

A. There is a vaccine against meningococcal meningitis. It is effective against four of the groups of bacteria; A, C, Y, and W-135. It is not helpful for treatment of contacts to cases, because it takes at least two weeks after vaccination for protection to begin. A person can develop disease in less than two weeks. In addition, the protection provided by the vaccine wears off in a few years. Finally, it is ineffective in children under two years of age.

Q. What does the health department do when cases are reported?

A. The health department investigates every proven or suspected case of meningococcal meningitis that is reported. First of all, the health department makes sure that close contacts are treated with preventive antibiotics, and that casual contacts are alerted to the signs and symptoms of disease. The health department also collects information on the particular type of *N. meningitidis* that causes each illness. If the same particular type is seen in several cases, the health department sometimes recommends immunization of some or all persons in the community. Although there is not strong scientific evidence that mass immunization can stop a community epidemic of meningitis, it is probably worthwhile when a high rate of disease occurs in a community.

Q. Are there other general recommendations to avoid this and other infections in my household?

- A. Personal hygiene is very important. This includes:
1. Covering your nose and mouth when sneezing or coughing
 2. Frequent handwashing
 3. Not allowing people to kiss your baby on the mouth
 4. Not sharing common eating utensils
 5. Avoiding overcrowded conditions



Religious Holy Days Request Form

Last Name First Name Middle Student ID Number

Name of Religious Institution Tax Code Number

Name of Holy Day Date(s)

School: SWMS _____ SGSBS _____ SAHSS _____

Deadline forms due to the Registrar's Office:

Fall Semester 2009 August 20, 2009

Spring Semester 2010 January 4, 2010

Summer Semester 2010 May 3, 2010

Instructor's conditions and deadlines for completing missed assignments:

Student's Signature Date

Instructor's Signature Date

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