

TRAVEL QUESTIONNAIRE (Private & Confidential).

GOING ABROAD ON HOLIDAY OR BUSINESS

To help us advise you on the protection you need, please complete this form at least **eight weeks** before you travel.

Please contact the surgery after four working days to obtain information and an appointment, if required.

Name:

Address:

Date of Birth:

Today's date:

There may be a charge for some vaccines and malaria tablets. Please refer to separate sheet

Patient to complete

Date of travel:

Please list the countries to be visited in the table below, with dates, including stopovers.

The protection you need may be influenced by the nature of your travel. Please tick relevant boxes A to F.

- A** Rural or uncertain accommodation
- B** Average tourist accommodation
- C** Includes organised rural excursion
- D** Visit for business or work purposes
- E** Visiting friends or family
- F** Are you likely to visit this area three or more times in one year

Country – include area if known.	Date of arrival	Date of Leaving	A	B	C	D	E	F

Details of any previous immunisations and dates, if known:

Tetanus		Hep A		Meningitis	
Polio		Hep B		Rabies	
Diphtheria		Typhoid		Jap Encephalitis	
Yellow Fever		T.B.		Tick Encephalitis	
Swine Flu					

Please list any current medications:

Please state any known allergies:

Are you pregnant or planning a pregnancy in the next three months?

Practice Use

<u>Immunisation</u>	Up to date	Recommended	Recommended in some circumstances
Diphtheria/tetanus/polio.			
Hepatitis A			
Hepatitis B			
Typhoid			
Rabies			
Japanese Encephalitis			
Tick Encephalitis			
Meningitis			
Tuberculosis			
Yellow Fever			Not available from surgery please contact travel clinic.

No Malaria risk	Take measures to avoid bites.	Malaria tablets should be purchased from the chemist.		A prescription for malaria tablets is required.
		Chloroquine	Chloroquine and Proguanil	Mefloquine, Doxycycline or Malarone.

Advice to patients.

- 1 No specific immunisations required but please read 'Health advice for travellers' for general advice.
- 2 All necessary immunisations are up to date. Please read 'Health advice for travellers' for general advice.
- 3 Immunisations/Malaria tablets/Advice required.
Please make an appointment to see Practice Nurse **10mins** _____
20mins _____
Please make a telephone appointment with the Practice Nurse _____
- 4 We recommend that for this itinerary you attend a Travel Clinic for specialist advice.
- 5 Other _____

Signed _____

Date _____