

# Travel appointment information

Trips to far away destinations are increasingly popular and the lower costs, plus faster transport, make it feasible for many. The variety of different adventure-type holidays are also on the increase. However, with such diversity, the risk of travel to your health is increased and this makes the appointment with the nurse more complex. For example, we need to know about your travel itinerary and any significant aspects of your health in the past. These are typical questions we will be asking:

- When are you departing and for how long?
- Where are you going? – (including the destinations within a country.)
- Are you planning on undertaking any high risk activities?
- Have you taken out travel insurance and have you informed the company if you have any medical condition?
- If female and of child bearing age, is there any possibility you could be pregnant should we need to give you any injections?
- Do you have any medical conditions? – These can interfere with the vaccination - for example, with the choice of malaria tablets if you were travelling to a country that has malaria?

We need to perform a Travel Risk Assessment before deciding which vaccines are recommended and the advice that will best address your needs. For this reason the appointment could take 20 minutes or even a little longer. **Please fill in the attached form and bring it with you to your appointment.**

Within this surgery we plan to give you the necessary injections within the appointment time to save you having to come back. Modern vaccines are excellent today, so if you do feel nervous, please try not to worry - people are always surprised at how easy the injections are and unlike experiences remembered from the past!

It would help us greatly if you had some awareness of the travel health problems from which you may be at risk on your trip before you come for your appointment.

[www.fitfortravel.nhs.uk](http://www.fitfortravel.nhs.uk)

Other useful websites to look at are:

[www.fco.gov.uk](http://www.fco.gov.uk)

[www.nathnac.org](http://www.nathnac.org)

[www.malariahotspots.co.uk](http://www.malariahotspots.co.uk)

We look forward to seeing you and helping you to travel safely.



# WALLINGFORD MEDICAL PRACTICE

## TRAVEL RISK ASSESSMENT FORM

Please complete and bring this form to your travel appointment

Personal details						
<b>Name:</b>	<b>Date of birth:</b>					
	<b>Male [ ] Female [ ]</b>					
<b>Easiest contact telephone number</b>						
<b>E mail</b>						
Dates of trip						
<b>Date of Departure</b>						
<b>Return date or overall length of trip</b>						
Itinerary and purpose of visit						
<b>Country to be visited</b>	<b>Length of stay</b>	<b>Away from medical help at destination, if so, how remote?</b>				
1.						
2.						
3.						
<b>Please tick as appropriate below to best describe your trip</b>						
<b>1. Type of trip</b>	Business		Pleasure		Other	
<b>2. Holiday type</b>	Package		Self organised		Backpacking	
	Camping		Cruise ship		Trekking	
<b>3. Accommodation</b>	Hotel		Relatives / family home		Other	
<b>4. Travelling</b>	Alone		With family / friend		In a group	
<b>5. Staying in area which is</b>	Urban		Rural		Altitude	
<b>6. Planned activities</b>	Safari		Adventure		Other	

<b>Personal Medical History</b>
Do you have any recent or past medical history of note? - (including diabetes, heart or lung conditions, thymus disorder)
List any current or repeat medications
Do you have any allergies for example to eggs, antibiotics, nuts?
Have you ever had a serious reaction to a vaccine given to you before?
Does having an injection make you feel faint?
Do you or any close family members have epilepsy?
Do you have any history of mental illness, including depression or anxiety?
Have you recently undergone radiotherapy, chemotherapy or steroid treatment?
<i>Women only:</i> Are you pregnant, planning pregnancy or breast feeding?
Have you taken out travel insurance and informed the insurance company about any medical conditions?
Please write below any further information which may be relevant

<b>Vaccination History</b>					
Have you ever had any of the following vaccinations / malaria tablets and if so when?					
Tetanus		Polio		Diphtheria	
Typhoid		Hepatitis A		Hepatitis B	
Meningitis		Yellow Fever		Influenza	
Rabies		Jap B Enceph		Tick Borne	
Other					
Malaria tablets					

For discussion when risk assessment is performed within your appointment:

I have no reason to think that I might be pregnant. I have received information on the risks and benefits of the vaccines recommended and have had the opportunity to ask questions. I consent to the vaccines being given.

Signed \_\_\_\_\_ Date \_\_\_\_\_