

Pre-travel pre-consultation form

Name: _____ DOB: _____ Gender: _____

Contact phone number: _____ Usual GP: _____ Departure date for trip: _____

Email: _____

Do you have travel insurance for this trip? Yes No

Does this cover: Healthcare overseas? Yes No

Medical evacuation? Yes No

Travel Plans

Purpose of trip (choose all that apply)

- Vacation
- Education/research
- Adoption
- Visit friends or family
- Missionary/volunteer/humanitarian relief

- Work (urban, office-based, conference)
- Work (rural, outdoors, in local community)
- To obtain medical or dental care
- Other: _____

Activities

Will you be visiting areas that are?

Rural Yes No unsure

Urban Yes No unsure

Primitive or remote Yes No unsure

Will you be engaging in any of the following? (Choose all that apply)

- Safari
- Adventure (e.g. climbing, skiing)
- Diving
- Ascending to high altitudes
- Potential exposure to body fluids (e.g. tattooing)
- Potential exposure to animals
- Potentially having new sexual partners
- Hiring car/motorbike

Accommodation (choose all that apply)

- Resort/large hotel
- Small hotel/guest house/B&B
- Dormitory/hostel
- Air-conditioned
- Up-scale camping/lodge
- Primitive camping
- Private home
- Cruise ship

Countries and cities in order of visit (continue over back of page if needed)

Country	Arrival	Departure

Vaccination history

Have you had an adverse reaction to an immunisation? Yes No explain: _____

Did you miss any childhood immunisations? Yes No which ones? _____

Have you received the following?

	Yes	Date:	No	Unsure
Hepatitis A				
Hepatitis B				
Meningococcal				
Measles/Mumps/Rubella				
Polio				
Tetanus				
Typhoid				
Yellow Fever				
Japanese Encephalitis				
Influenza				
Other				

General health information

Do you have any allergies (foods, medicines)? Yes No explain: _____

Are you or your partner pregnant or intending to become pregnant? Yes No

Are you breastfeeding? Yes No

Please check health conditions & medications (including OTC) with health provider & ask for a print out to take with you