



## TRAVEL CONSULTATION AND IMMUNIZATION SERVICES

When planning vacations or business trips, remember that certain countries outside the United States, such as those in Central or South America, Africa, the Middle East or Asia, require vaccinations and other preventive medications. Making plans to ensure good health for your international trip is just as important as obtaining your passport and your airline tickets.

The clinical pharmacists at Cedars-Sinai Medical Network offer a thorough evaluation of your immunization needs and take time to talk with you about the health risks and necessary precautions associated with your individual itinerary. A trusted name in healthcare, Cedars-Sinai Medical Network provides patients with comprehensive, personalized care from a highly experienced staff.

### TRAVEL MEDICINE SERVICES

During your consultation, you will receive a personalized travel health booklet containing specific information about the place(s) you plan to visit. One of our specially trained pharmacists will review the following health and travel concerns with you.

- Health risks associated with the locations you will visit
- Disease prevention
- Safe practices and precautions for your travel, with a special focus for those who may be pregnant, nursing or have a chronic health condition
- Vaccination recommendations and requirements dictated by the Centers for Disease Control (CDC) and the World Health Organization (WHO)
- Proper food and water precautions to ensure good health

Certain vaccinations and other preventive medications are recommended at least one-to-two months before entering some areas of the world. Book your travel consultation appointment as soon as you know your travel plans.

Travel Consultation and Immunization Services offers the following vaccines for your travel needs.

- Hepatitis A and Hepatitis B
- Immune globulin
- Influenza
- Japanese encephalitis
- Measles, mumps and rubella
- Meningococcal
- Pneumococcal
- Poliomyelitis
- Rabies
- Tetanus, diphtheria and pertussis
- Typhoid fever
- Varicella
- Yellow fever

### COSTS

Most health insurance plans do not cover travel vaccinations. Our services include a low \$60 consultation fee, and we offer vaccinations at reasonable and competitive prices.

### CONTACT US

For more information about Travel Consultation and Immunization Services at Cedars-Sinai Medical Network, please contact us at:

### CEDARS-SINAI MEDICAL NETWORK

250 N. Robertson Blvd., Suite 601  
Beverly Hills, CA 90211  
Phone: 310-385-3534, option 3  
Fax: 310-385-3577  
Email: [csmntravel@cshs.org](mailto:csmntravel@cshs.org)  
[cedars-sinai.edu/medicalnetwork](http://cedars-sinai.edu/medicalnetwork)

*Please fill out the travel history form  
on the back of this page and email or  
fax it to our office.*



## TRAVEL HISTORY FORM

Please complete this form and email it to [csmntravel@cshs.org](mailto:csmntravel@cshs.org) or fax it to 310-385-3577.

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Primary Care Physician \_\_\_\_\_ Insurance \_\_\_\_\_ Member ID \_\_\_\_\_

Sex: ☐ M ☐ F Phone (\_\_\_\_) \_\_\_\_\_ Country of Birth \_\_\_\_\_

Purpose of Trip: ☐ Business ☐ Pleasure ☐ School-related Study or Work

Country AND Cities in Order of Visit (include return visits)	Arrival Date	Departure Date

### Will you be:

- Visiting ONLY urban areas? ☐ Yes ☐ No
- Staying ONLY in hotels? ☐ Yes ☐ No
- Working with exposure to animals? ☐ Yes ☐ No
- Working in the medical or dental field with exposure to blood? ☐ Yes ☐ No
- Ascending to high altitudes (greater than 7,000 feet)? ☐ Yes ☐ No
- Potentially having sexual contact with new partners? ☐ Yes ☐ No
- Requiring precise manual dexterity, precise thinking/perception or skilled physical activity (such as mountain climbing or piloting)? ☐ Yes ☐ No

### Have you had an allergic reaction to any of the following? (Check all that apply.)

- ☐ Antibiotics (tetracyclines or neomycin)
- ☐ Bee stings
- ☐ Chrysanthemums
- ☐ Eggs
- ☐ Lactose
- ☐ Pyrimethamine
- ☐ Quinines
- ☐ Soy
- ☐ Sulfa Drugs
- ☐ Thimerosal
- ☐ Yeast
- ☐ Other allergies: \_\_\_\_\_

### Have you completed the following immunizations?

- Hepatitis A ☐ Yes ☐ No If yes, when? \_\_\_\_\_
- Hepatitis B ☐ Yes ☐ No If yes, when? \_\_\_\_\_
- Influenza ☐ Yes ☐ No If yes, when? \_\_\_\_\_
- Meningococcal ☐ Yes ☐ No If yes, when? \_\_\_\_\_
- MMR (measles, mumps, rubella) ☐ Yes ☐ No If yes, when? \_\_\_\_\_
- Polio ☐ Yes ☐ No If yes, when? \_\_\_\_\_
- Tetanus/Diphtheria/Pertussis ☐ Yes ☐ No If yes, when? \_\_\_\_\_
- Typhoid Fever ☐ Yes ☐ No If yes, when? \_\_\_\_\_
- Yellow Fever ☐ Yes ☐ No If yes, when? \_\_\_\_\_

Past AND Current Medical Problems	ALL Current Medications (Prescription and Nonprescription)

### For Women Only:

- When was your last normal menstrual period? \_\_\_\_\_
- Are you or could you possibly be pregnant? ☐ Yes ☐ No
- Are you breastfeeding an infant? ☐ Yes ☐ No