# PATIENT QUESTIONNAIRE – TRAVEL FORM

## TRAVEL FORMS MUST BE SUBMITTED 6 WEEKS PRIOR TO TRAVELLING

### Going abroad on holiday or business?

You may need travel vaccinations, depending on the country or countries you intend to visit and the kind of holiday you are going on.

**If travel forms are not submitted within the recommended timescale we may be unable to accommodate you with a suitable appointment.**

Name

Address

Telephone Number

Date of birth

1. Which countries do you intend to visit (including any stopovers however brief)?

2. Will you be staying in hotels or under more primitive conditions (e.g. camping)?

3. Are you visiting friends or relatives? Yes No

4. Does your journey include:

Coastal Areas? ☐

Inland Areas? ☐

5. Do you plan any safaris, jungle exploration or travel in difficult terrain?

6. Departure date

7. Duration of stay abroad

8. Have you ever had any of the following vaccinations and if so when?

Typhoid ☐ _____

Tetanus ☐ _____

Hepatitis A ☐ _____

Hepatitis A/ Booster ☐ _____

Hepatitis B ☐ _____

Hepatitis B +C ☐ _____

Yellow Fever ☐ _____

Any Other Vaccines ☐ _____

09. Are you on any medications?

10. Have you ever had or are you suffering from heart disease or other chronic illness?

11 Are you pregnant or breastfeeding? Yes No

**Remember: If you are taking any medication, make sure that you take enough supplies to last through your overseas visit.**

For Nurse use only: