

TURRET MEDICAL CENTRE

Catherine Street, Kirkintilloch, G66 1JB Tel: 0141 776 8200 Fax: 0141 776 3170

TRAVEL – Patient Information – Patient Form (part 1)

This practice endeavours to provide the following vaccinations if indicated for travel, as per the Public Health recommendations.

Diphtheria Polio Tetanus Typhoid Hepatitis A/B

Some time is necessary following vaccination before the vaccines become effective and provide immunity. To this end we recommend that you attend at least **2 months prior to travel**, but earlier if possible. We are unable to guarantee that we will be able to schedule vaccinations to suit your departure dates, however if you attend in good time there is usually no difficulties arranging travel advice and administering vaccination if required. We **MUST** have a minimum of 4 weeks before travel. Within this period you may have to pay for any required vaccines at a private clinic.

Procedure

1. **Please complete and return this form to reception. A NURSE will call you within 7-10 days to discuss your travel vaccination needs.** *If you have previously received vaccinations outwith the surgery for travel purposes, it is important that you note this in the relevant section of the form.* It would also be helpful to attach any records you may have of these vaccinations to your this form.
2. The NURSE will establish what your vaccination requirements are based on your medical history, information you supply, and destinations and will call you to discuss this.
3. Depending on what is needed, we will arrange a prescription for any vaccinations you require. A member of surgery staff will call you to make an appointment if required for any vaccinations (any vaccinations needed will be here as we will arrange this with the pharmacy).

Please note: Some vaccinations cannot be given in GP surgeries and you may need to be referred to the *Brownlee Centre* at Gartnavel General Hospital to have these done. The Brownlee Centre will **charge for this service**, to cover the cost of the vaccine.

- **Malaria Prophylaxis**

The NURSE will advise you on which medication is required for the area you are visiting. Most of these drugs are bought from the pharmacist as they are not available on an NHS prescription.

The only exceptions to this are *Mefloquine*, *Doxycycline* and *Malarone*, which require a Private Prescription from the GP. Your pharmacist will charge for dispensing these medications. Please consult with your pharmacist about the cost.

- **Regular Repeat Prescription**

We are able to issue regular medications for a period of up to 2 months.

- **Private Travel Clinics**

If you have less than 2 months before travel, or would prefer an alternate service to suit your lifestyle there are a number of Private Travel Clinics in operation. Whilst the Practice does not endorse the following, we include them for your information only –

Ailsa Surgery
0141 429 0913

Clair Travel
0141 848 4800

M.A.S.T.A.
0141 221 4224

Stay well travel
0779 597 2157
0779 597 6719

PATIENT TRAVEL REQUIREMENT FORM (part 2)

Name:

Address:

Date of birth:

Daytime phone number:
***** (THIS IS ESSENTIAL) *****

Departure Date:	Duration of trip:
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1. Have you ever had any of the following vaccinations and if so, when?

Vaccination	Tick if Yes	When
BCG		
Hepatitis A		
Hepatitis B		
Typhoid		
Influenza		
Japanese Encephalitis		
Meningitis C		
Rabies		
Tick-borne encephalitis		
Immunoglobulin		
Yellow Fever		
Tetanus		
Diphtheria		
Polio		

2. Do you have any allergies that you are aware of?

3. Do you have a history of health problems? If so, please list below.

4. Are you currently taking any medication?

5. Have you ever suffered from any of the following?	YES	NO
Heart Disease		
Mental health problems (eg. Anxiety or depression)		

6.	YES	NO
Are you currently pregnant?		
Are you currently breast feeding?		

7. Which countries, in sequence, do you intend to visit? Include any stopovers, however brief. Please be specific about the areas you are visiting in each country?

8. What type of accommodation will you be staying in? (eg. Hotel, camping etc)

9. Are you staying with friends or relatives?
 Yes No

10. Is this a holiday or will you be working at any time? Please specify the type of work, if any, that you intend to undertake.

11. Does your journey include:	YES	NO
Coastal areas?		
Inland areas?		

12. Do you plan to go on any safaris, jungle exploration, or travel in difficult terrain, including high altitude? If yes, give details.

13. Are there any other activities or details relating to your travel we need to be aware of?