

## BARRINGTON MEDICAL CENTRE TRAVEL HEALTH QUESTIONNAIRE

It is essential we know not only the country you are intending to visit but the provinces. Risks of various diseases can vary within some countries. Please complete the form below. A travel nurse will then contact you within 7 working days to make the necessary appointments.

PLEASE NOTE, There is a \$120 fee for this service, when this form is returned, whether or not you proceed to vaccinate. There are extra charges for each additional family member; Adults \$50, Children \$25.00. Each vaccination will also have a charge. Full payment for vaccines are required on day of consultation.

I.....(patients name) have read the above and agree to pay the above mentioned fee for completion of this questionnaire

Patient's Label (office use)

Phone Contact Details:

Male ☐

Female ☐

GP: .....

Today's Date: .....

If female, is it possible you could be pregnant?

Yes ☐

No ☐

### DETAILS OF PROPOSED TRAVEL

List countries to be visited in order of visit

Date Travel Commences: .....

Country & Provinces/Cities	Rural/Urban	Length of Stay	Accommodation eg.backpackers, hotel etc	Activities eg. Diving, snorkeling, climbing etc

**LIST ANY:** Medications being taken, Allergies and Pre-existing Medical Conditions

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## BARRINGTON MEDICAL TRAVEL CONSULTATION & VACCINE COSTS

### Travel Consultation Charges

Nurse Travel Consult / Form	\$120.00	<input type="checkbox"/>	NUR1
Additional Adult	\$50.00	<input type="checkbox"/>	NURTF
Additional Child	\$25.00	<input type="checkbox"/>	NURTC
Medication Script, eg antimalarial script	\$20.00	<input type="checkbox"/>	
Doctor's Appointment, if required	\$65.00	<input type="checkbox"/>	

### Vaccine Costs

Bexsero	\$145.00	<input type="checkbox"/>	BEX
Boostrix	\$50.00	<input type="checkbox"/>	BOOS
Dukoral	\$146.00	<input type="checkbox"/>	DUK
Flu	\$25.00	<input type="checkbox"/>	F
Havrix 1440	\$97.00	<input type="checkbox"/>	HAV
Havrix Junior Child	\$60.00	<input type="checkbox"/>	HAVJR
Hep B	\$40.00	<input type="checkbox"/>	HEPB
Japanese Enc	\$180.00	<input type="checkbox"/>	JESP
Nimenrix	\$120.00	<input type="checkbox"/>	NIME
Polio	\$85.00	<input type="checkbox"/>	IPV
Rabies	\$180.00	<input type="checkbox"/>	RABIES
Typhim VI	\$87.00	<input type="checkbox"/>	TYPV
Twinrix (Hep A & B)			
Adult	\$100.00	<input type="checkbox"/>	TWIN
Child	\$60.00	<input type="checkbox"/>	TWINJ

**Note:** Boosters and rapid courses are required for some immunisations. These will also incur a charge as above.

Office Use Only:

Patient Informed	<input type="checkbox"/>
Patient Label:	