



PRE-TRAVEL CONSULT

I. TRIP PLANNING:

- Please visit the Centers for Disease Control and Prevention website at www.CDC.gov/travel
- Plan how and where you can obtain health care during your trip, should the need arise
- Call your insurance company to review travel insurance. Consider adding evacuation insurance, especially if working with animals, as rabies post-exposure care may not be available in-country

II. NON-INFECTIOUS RISKS:

- Less than 1 in 100 traveler deaths are due to disease
- Half of traveler deaths are due to motor vehicle accidents, falls, drownings, and homicide
- All children need a safe (properly installed) car seat

III. IMMUNIZATIONS:

Vaccine	CDC Recommends	Currently Up To Date	Available at Travel Clinic/Pharmacy
Hepatitis A			
Hepatitis B			
Influenza			
Jap Encephalitis			
Meningococcal			
MMR			
Polio			
Rabies			
Tetanus			
Typhoid		Typhim Vi Q2 yr Vivotif Q5 yr	
Yellow Fever			
Miscellaneous			

IV. FOODBORNE ILLNESS: Follow CDC guidelines for food and water to prevent disease

- Avoid cooked food served at room temperature
- Avoid raw food, including raw vegetables unless they can be washed thoroughly
- Only drink boiled or treated water or beverages from sealed bottles or cans
- Only use ice made from bottled/disinfected water

Diarrhea Care Plan	
Symptoms:	Treatment:
Mild diarrhea (loose stool)	Oral rehydration salts
Moderate diarrhea (watery stool)	Oral rehydration salts + antibiotic*
Fever, bloody stool, significant pain, lethargy, mental status changes	See a medical provider immediately.
*Recommended antibiotic for children <18 years old: Azithromycin 10 mg/kg once (max 1 g)	

V. MALARIA: No medication guarantees total protection. Fever during or after travel is an emergency requiring urgent medical attention. Pregnant women are at higher risk of severe disease and should defer travel when possible. Non-pregnant adolescents should consider using contraception while taking anti-malarial prophylaxis and for three months after.

Prevent bites:

- Cover exposed skin and use appropriate insect repellent (DEET, picaridin, etc.)
- Use permethrin-treated clothing and gear (boots, pants, socks, and tents). Travelers can buy pre-treated clothing and gear or treat them at home. Treated clothing remains protective after multiple washings. Permethrin should NOT be used directly on skin
- Stay and sleep in air-conditioned or screened rooms
- Use an insecticide treated bed net if sleeping area is exposed to the outdoors

Take prophylactic medications to prevent Malaria:

	Medication:	Dosing:	Cautions Include:
	Chloroquine	Weekly. Begin 1-2 week before travel, once per week during travel, and for 4 weeks after leaving.	
	Doxycycline	Daily. Begin 1-2 days before travel, daily during travel, and for 4 weeks after leaving.	Vivotif w/in 7 days, <8 years
	Mefloquine	Weekly. Begin 1-2 week before travel, once per week during travel, and for 4 weeks after leaving.	
	Atovaquone -Proguanil	Daily. Begin 1-2 days before travel, daily during travel, and for 7 days after leaving.	Vivotif w/in 10days, <5 kg

VI. YELLOW FEVER VACCINE: We do not have this vaccine but can provide a prescription. The attached list of pharmacies and travel clinics may carry the vaccine (please call to verify pricing and availability). When making an appointment to get the vaccine(s), make sure that you indicate you only need the vaccine, not a travel consult.

VII: TYPHOID VACCINE: Two options, please call pharmacies above for availability and pricing

- Injectable (Typhim Vi, ≥2 years, give 2 weeks before travel, lasts two years)
- Oral (Vivotif, ≥6 years, 4 doses over 1 week, 1 week before travel, lasts five years). Should not be given within 7 days of Doxycycline, 10 days of Atovaquone-Proguanil, or if immunosuppressed

VIII. MEDICATIONS TO TAKE WITH YOU:

- Any regular home medications (ask your provider if you need a copy of your medication list)
- Malaria prophylaxis medication and mosquito repellent
- Medication for traveler’s diarrhea, as above
- Over the counter medications that may be helpful: acetaminophen, ibuprofen and diphenhydramine (Benadryl)

IX. POST-TRAVEL VISIT: Please return 8-10 weeks after travel for possible tuberculosis screening, sooner if fever >101F or any concerns.

X. OTHER SAFETY RISKS & HEALTH RECOMMENDATIONS (adapted from CDC):

- **Stay safe outdoors**
 - Dress for the climate (loose and light clothing for hot climates or warm layers for cold)
 - Stay hydrated, avoid overexposure to the sun and use sunscreen
 - Practice safe swimming habits. Do not swallow water

- **Keep away from animals**
 - Avoid touching, petting, handling, or feeding animals, including pets
 - Spiders and scorpions can sting. Exercise care in environments where they are present.
 - Urgently treat suspected and probable rabies infection by:
 - Washing the wound immediately with soap and clean water
 - Seeking medical attention as soon as possible

- **Reduce exposure to germs**
 - Do not travel if ill
 - Practice hand hygiene and cover sneezes with a tissue or sleeve

- **Avoid sharing body fluids**
 - Use a latex condom correctly during every sexual encounter (vaginal, anal, oral-genital)
 - Avoid alcohol consumption and injectable drugs
 - Avoid tattoos, piercings, or any procedures using needles (acupuncture)
 - Ensure that medical and dental equipment is sterile or disinfected if seeking care

- **Protect yourself from theft or assault**
 - Check recent State Department travel warnings (www.state.gov/travel)
 - Notify the local United States Embassy of your visit (www.state.gov/travel)
 - Store valuables appropriately and leave electronics at home when possible
 - Use a money belt around neck or waist
 - Avoid military clothing or camouflage-patterned clothes
 - Avoid informal taxis and instead ask the hotel or restaurant to phone a taxi

XI: OTHER NOTES: _____

