**TOLLERTON SURGERY NHS TRAVEL QUESTIONNAIRE**

 **PRIVATE & CONFIDENTIAL**

**PLEASE NOTE:** if you are travelling in the next week make an appointment now as you will be limited to advice/vaccines

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| --- | --- | --- | --- |
| TYPE OF TRIP: |  BUSINESS |  PLEASURE |  OTHER |
| HOLIDAY TYPE: |  PACKAGE | SELF-ORGANISED |  BACKPACKING |
|  CAMPING |  CRUISE |  TREKKING |
| ACCOMMODATION: |  HOTEL |  FAMILY HOME | CAMPING/ OTHER |
| AREA STAYING IS:  |  URBAN |  RURAL |  ALTITUDE |
| PLANNED ACTIVITIES: |

|  |  |
| --- | --- |
| NAME: | ADDRESS: |
| D.O.B: |
| TEL NUMBER: |
| DO YOU CONSENT TO A MESSAGE BEING LEFT ON YOUR HOME/MOBILE ANSWER MACHINE? Please circle | YES NO |
| DATE OF DEPARTURE |  |
| LENGTH OF OVERALL TRIP |  |
| PURPOSE OF TRIP |  |
| COUNTRY/COUTRIES VISITING (please list exact areas for all destinations) |  |

DO YOU HAVE ANY RECENT OR PAST MEDICAL HISTORY?.........................................................

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DO YOU HAVE ANY ALLERGIES OR A SERIOUS REACTION TO A VACCINE?.................................

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HAVE YOU RECENTLY UNDERGONE RADIOTHERAPY, CHEMOTHERAPY OR STEROID TREATMENT?.............................................................................................................................

**WOMEN ONLY :** ARE YOU (please circle): PREGNANT PLANNING PREGANANCY BREAST FEEDING NONE

ARE YOU TAKING CONTRACEPTION? (If so please state name): …………………………………………..

**The following standard NHS Vaccinations can be administered free of charge at Tollerton Surgery if required; Dip/Tet/Polio, Hepatitis A, Typhoid.**

**We suggest for further advice
you look on the NHS public travel site which is** [**www.travelhealthpro.org.uk**](http://www.travelhealthpro.org.uk) **or discuss with a local travel clinic or Pharmacy.**

**PLEASE GET IN CONTACT WITH THE SURGERY 3 DAYS AFTER HANDING FORM IN**