

TRAVEL RISK ASSESSMENT FORM

If you are travelling in less than 6 weeks then we will not be able to offer you any travel advice or vaccinations. We strongly advise however that you seek this information from an alternative Travel Clinic if your choice.

This form is to be completed by each traveller and then returned back to The Millbarn Medical Centre. One of the Practice Nurses will then contact you via email **within 10 working days** to give you information on your current immunisation history/ vaccines recommended or for consideration plus malaria advice. We advise that you **MUST** access the following website before you complete this form **www.travelhealthpro.org.uk**

Name:	Date of birth:
	Male Female
*E-mail:	*if travelling in a group please nominate 1 person to receive the information. Everyone over 16yrs of age MUST CONSENT to this. See attached email consent form

By looking at the **above website** you are able to look in detail at the **specific country recommendations** plus gain valuable general travel health advice. After reading all the information which vaccinations are you specifically considering?

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Date of departure Return date

Country visiting	Exact location/ region	City/ rural	Length of stay

Type of holiday – please circle all that apply

- | | | | | | |
|------------------|------------|-------------------|-------------------|--------------------------|--------|
| Holiday | Hotel stay | Backpacking | School trip | Business | Cruise |
| Camping/ hostels | Expatriate | Safari | Adventure/ sports | Volunteer work | |
| Pilgrimage | Diving | Healthcare worker | Medical tourism | Visiting friends/ family | |

BELOW IS A LIST OF THE VACCINES WE CAN PROVIDE PLUS COSTS AND SCHEDULES. PLEASE NOTE THAT NOT ALL OF THESE VACCINES ARE REQUIRED FOR EVERY TRAVELLER AND NOT ALL ARE KEPT IN STOCK. **SOMETIMES MANUFACTURING ISSUES MEAN WE ARE UNABLE TO PROVIDE THE VACCINES BELOW AND YOU WILL BE ADVISED TO TRY AND SOURCE PRIVATELY FROM AN ALTERNATIVE CLINIC.**

WE NO LONGER PROVIDE YELLOW FEVER VACCINATION. SHOULD YOU REQUIRE THIS VACCINE PLEASE VISIT THE FOLLOWING WEBSITE TO LOCATE YOUR NEAREST DESIGNATED CENTRE www.nathnac.net

ALL CHARGABLE VACCINES MUST BE PAID FOR IN ADVANCE BY CASH OR CHEQUE.

VACCINE	SCHEDULE	HOW LONG WILL IT LAST/ BOOSTER NEEDED	COST	STOCK/ ORDER
Tet/ Dip/ Polio	1 dose	10 years	FREE	STOCK
Hepatitis A (adult/ child)	1 dose, booster 1 year later	Will last 25yrs after booster	FREE	STOCK
Typhoid	1 dose	3 years	FREE	STOCK
Hepatitis B (adult or child)	3 initial doses. Best schedule is over 6 months, discuss with Practice Nurse	Booster dose decided on a case by case nature, speak to the Practice Nurse	£144.00 for initial 3 doses, then £48.00 per dose for any boosters.	ADULT DOSE STOCK CHILD DOSE ORDER
Rabies	3 doses. Given 0, 7 and 21 or 28 days	10 years	£165.00	ORDER
Meningitis ACWY	1 dose	Booster undetermined	£55.00	ORDER
Japanese Encephalitis	2 doses. Given at 0 and 28 days.	Booster undetermined	£178.00	ORDER
Tick Borne Encephalitis	3 doses. Given at 0,1 and 6months	Every 3 years if still at risk	£195.00	ORDER

MILLABRN MEDICAL CENTRE

Patient consent for email communication

Please complete the form below if you would like to allow Millbarn Medical Centre to send personal information to you by email.

I would like Millbarn Medical Centre to communicate with me by email. I have read and understood the facts and risks below associated with email communications:

- Internet email is not a secure medium
- There is a possibility that my emails and the responses could be intercepted and read by someone else. I will bear this in mind in deciding how much information to seek and how much information to disclose by email
- It is my responsibility to provide an up to date email address
- A private email account rather than a family or shared account is recommended
- Millbarn Medical Centre is not responsible for onwards use or transmission of email once it has been received by me or my nominated person
- The practice email address is not intended for use as a virtual consultation service. If I require urgent clinical advice or attention I should make an appointment with my GP

FOR TRAVEL ADVICE AND INFORMATION PURPOSES

We will only send 1 email per family with regard to travel. Please make sure anyone over the age of 16yrs old gives permission for this to happen and nominates 1 family member to receive all the relevant information and advice. Not doing this may delay us sending the information you need.

My email address for communication is

This is my email address

This is the email address of a nominated person

Name of nominated person (if applicable)

Relationship to patient (if applicable)

Patients name Date / /

Patients signature

On behalf of Millbarn Medical Centre

Name Date

Position Signature