

HOLBROOK SURGERY
Bartholomew Way, Horsham, RH12 5JL
01403 339818

HOLBROOK SURGERY PRE-TRAVEL RISK ASSESSMENT FORM

Complete one form per traveller and return to reception, preferably 6 weeks prior to your travel date. Please be aware we might not have the capacity to offer last minute travel appointments if you are travelling within 6 weeks and you may need to attend a private travel clinic.

TELEPHONE the surgery 5 working days after submitting this form to make an appointment.

NB – We DON'T telephone you.

You will be advised of the length of appointment you require and the vaccines recommended for your planned travel. If you intend to visit more than one country further vaccinations may be needed.

NOT ALL TRAVEL VACCINES ARE AVAILABLE ON THE NHS AND INCUR A CHARGE

Prior to your appointment please download and read our travel health advice leaflet from our website www.holbrooksurgery.com. Also visit www.travelhealthpro.org.uk prior to your travel appointment so that you will have an understanding of what you may require.

IF YOU HAVE ANY QUESTIONS YOU WILL HAVE THE OPPORTUNITY TO RAISE THESE AT YOUR APPOINTMENT

TRAVELLER INFORMATION (one per traveller):

NAME: _____ **Date of Birth:** _____

Destination(s): _____

Use a separate page if necessary

NB: If you are intending to travel within the country(ies) please bring details of your travel itinerary as further vaccines may be recommended.

Date of departure and length of stay:

Reason for trip: Holiday / Business / Volunteer Work / Other (please state)

Type(s) of Accommodation: Hotel / Hostel / Cruise / Other (please state)

Any excursions or sports/adventure activities planned?: No / Yes (please state)

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Female only: Are you currently pregnant? Yes/No

Pregnancy planned in the next 6 months? Yes/No

Any further information you feel we should be aware of:

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I DECLARE THE INFORMATION ON THIS FORM HAS BEEN UNDERSTOOD AND COMPLETED CORRECTLY

Signed **Date**

Relationship to Traveller if signing for an under 15 year old