



TRAVEL ENQUIRY FORM

Eyemouth Medical Practice does not provide a travel advisory service, as this is not an NHS service. If you are going to travel and think you may require vaccinations, please review your immunisation history.

If you do not keep your own immunisations record, please use this form to request this information from us. We will need at least **seven days notice**. We do not charge a fee for this service. **One form needs to be completed and signed for each person who is going to be travelling.**

Travel advice can be obtained from either a local pharmacy, the website www.fitfortravel.scot.nhs.uk, a specialist travel advice clinic or Health Protection Scotland's website www.hps.scot.nhs.uk which also lists the current Yellow Fever centres.

IMMUNISATION HISTORY REQUEST

- a) I request an extract of my immunisation history from medical records held by Eyemouth Medical Practice.
- b) I understand that these medical records may be held partly in paper and partly in computer form and may not for a complete record of my immunisation history, depending on where and when I was immunised and how this information was recorded.
- c) I understand that Practice Nurses will aim to have this information available for collection from the medical practice within 7 days.
- d) I acknowledge that Eyemouth Medical Practice does not advise on the need for vaccination to travel.
- e) I plan to travel on (date) to (include ALL destinations to be visited)

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NAME

ADDRESS

DATE OF BIRTH

DAYTIME CONTACT NUMBER

EMAIL ADDRESS

SIGNATURE DATE

Please return the completed form to reception

Date completed: by

Immunisation Type	Up to date?	Immunisation dates				

Only the following vaccinations are available free on an NHS prescription. Please mark any that you require:

Disease	Vaccine	Vaccination Required?
Typhoid	Typhim VI	YES / NO
Hepatitis A (adult)	Havrix Monodose	YES / NO
Hepatitis A (child)	Havrix Mono Junior	YES / NO
Hepatitis A & Typhoid (adult)	Hepatyrix	YES / NO
Hepatitis A & Typhoid (child)	Havrix Mono Junior & Typhim VI	YES / NO
Diphtheria, Polio & Tetanus	Revaxis	YES / NO
Cholera		YES / NO

Any other vaccinations required, you will have to consult with a specialist vaccination clinic.

MALARIA PROPHYLAXIS	
If you require malaria prophylaxis, this can be provided by private prescription. Please provide details of the drug(s) required and the duration of the treatment (which is normally longer than the period that you are travelling).	
Name of drug
Length of course required

- You may use this form to request an NHS prescription from us, by marking those you are advised to have. A GP appointment is not necessary. Your prescription will be ready in 3 working days.
- Collect your vaccine from your chemist and store it under conditions according to the advice contained within the vaccine or from the pharmacist/dispenser.
- Make an appointment with the practice nurse in plenty of time before your travel date. Your vaccination will be administered free of charge.

Prescriptions requested by me on (date) – please tick where the prescription is to go:

- Send prescription to Eyemouth Pharmacy
 I will collect the paper prescription at the practice
 Collect from Coldingham Surgery

Appointment made with Practice Nurse on (date & time)

PATIENT CONSENT RE VACCINATION

I confirm that I have obtained the above advice from specialist sources. I consent to the above vaccines being administered and acknowledge advice on the risks associated with them.

Signed Date