

Travel Form Checklist

The following information will be requested in the online form. The more accurate and complete your information, the better we will be able to serve you.

NOTE: There is a place on the form to check **Uncertain** or **Don't Know** concerning your shot record.

Personal Info			
Name, Birth date, Gender, Weight, Address, Phone, E-Mail, Healthcare provider name and phone			
Medical History			
1. List all known allergies with reactions			
2. Provide 'yes/no' answers for about 20 questions on medical conditions or illnesses			
3. List of surgeries with dates			
4. List of all medications with dosages			
Vaccinations (Form allows 'Uncertain' for vaccinations and 'Don't know' for dates)			
Vaccine	Date	Allergic Reaction? Describe.	
DPT (Tetanus) (first available in 1940's)			
4 shots	1.		
	2.		
	3.		
	4.		
Booster			
Polio (IPV first available in 1955; OPV: 1961-63; exclusive use of IPV in US in 2000)			
3 (IPV) shots or 4(Oral)	1.		
	2.		
	3.		
	4.		
Adult Booster			
MMR (first available in 1981)			
2 shots	1.		
	2.		
Blood titer		State if positive for immunity.	
Chickenpox (first available in 1995)			
2 shots	1.		
	2.		
Adult Shingles (Available -2006)			
Hepatitis A (first available in 1995)			
2 shots	1.		
	2.		
Hepatitis B (first available in 1981)			
3 shots or 4 (accelerated sched.)	1.		
	2.		
	3.		
Accelerated schedule	4.		
Twinrix (combination of Hep A and B) (first available in 2001)			
3 shots or 4 (accelerated sched.)	1.		
	2.		
	3.		
Accelerated schedule	4.		

Meningitis (within the last 5 years; Menveo – 2 years)			
Must be within last 5 years.			
Pneumonia (first available: PPV14 - 1977; PPV23 - 1983; PCV7 - 2000; PCV13 - 2010)			
Adult – PPV			
Influenza			
Immunized within the last year.			
Japanese Encephalitis (<i>Ixiaro</i> – 2 shots, possible booster; Older – 3 or 4 shots)			
2 shots	1.		
Older vaccine may be 3 or 4	2.		
<i>Ixiaro</i> Booster	3.		
Accedlerated schedule - older	4.		
Rabies			
Pre-exposure:3 shots	1.		
	2.		
	3.		
Post-exposure: 5 shots	1.		
	2.		
	3.		
	4.		
	5.		
Booster			
Typhoid (within the last 5 years; <i>Typhim Vi</i> shot good for 2 years; Oral Typhoid pills good for 5 years)			
Typhoid Shot (<i>Typhim Vi</i>)			
Oral Typhoid (4 pills)			
Yellow Fever (within the last 10 years)			
Most recent			
Destinations			
List Countries in Order (include airport connections/layovers)	Days in Country	List regions, cities. List cities >6000 ft. (Do a computer search by city name)	
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			
14.			
15.			