



Patient Travel Consultation Immunizations

□ Discharged in stable condition □ Handout(s) □ Needs Reinforcem □ Return to Clinic: □ Prescriptions For prescription, patient prefers: Rx for: □ Pickup Rx will be available for pickup on: □ Phone in to pharmacy Pharmacy name: □ Pharmacy number: □ Mail		Site Given	Lot#	Manufacturer	Dose	
Hepatitis A Hepatitis B Twinrix Pre-Rabies Meningococcal – MCV MEX Tetanus, diphtheria/retanus, diphtheria, pertussis (Td/Tdap) Measles, Mumps & Rubella (MMR) Inactivated poliovirus vaccine (IPV) Other: Education/counseling Focus: Malaria/insect Protection:	phoid -Oral – IM					
Hepatitis B Twinrix Pre-Rabies Meningococcal – MCV MEX Tetanus, diphtheria/tetanus, diphtheria, pertussis (Td/Tdap) Measles, Mumps & Rubella (MMR) Inactivated poliovirus vaccine (IPV) Other: Education/counseling Focus: Malaria/insect Protection:	llow Fever					
Twinrix Pre-Rabies Meningococcal – MCV MEX Tetanus, diphtheria/tetanus, diphtheria, pertussis (Td/Tdap) Measles, Mumps & Rubella (MMR) Inactivated poliovirus vaccine (IPV) Other: Education/counseling Focus: Malaria/insect Protection:	patitis A					
Meningococcal – MCV MEX Tetanus, diphtheria/tetanus, diphtheria, pertussis (Td/Tdap) Measles, Mumps & Rubella (MMR) Inactivated poliovirus vaccine (IPV) Other: Education/counseling Focus: Malaria/insect Protection:	patitis B					
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Tetanus, diphtheria/tetanus, diphtheria/tetanus, diphtheria, pertussis (Td/Tdap) Measles, Mumps & Rubella (MMR) Inactivated poliovirus vaccine (IPV) Other: Education/counseling Focus: Malaria/insect Protection:	e-Rabies					
diphtheria, pertussis (Td/Tdap)	ningococcal – MCV MEX					
Inactivated poliovirus vaccine (IPV)		K-12				
Citer: C						
Education/counseling Focus: Malaria/insect Protection: ☐Travel folder with VIS given ☐ Diarrhea/water/food: ☐Travel folder with VIS given ☐ Vaccinations Provided: ☐See above ☐ Other: Visit Assessment ☐ ☐ Teaching Methods: ☐ ☐ Vaccines given and tolerated well ☐ ☐ Verbal Discussion ☐ ☐ Discharged in stable condition ☐ ☐ Handout(s) ☐ ☐ Return to Clinic: ☐ Prescriptions For prescription, patient prefers: Rx for: ☐ ☐ Pickup Rx will be available for pickup on: ☐ ☐ Phone in to pharmacy Pharmacy name: ☐ ☐ Pharmacy number: ☐ ☐ Mail						
Malaria/insect Protection:						
Visit Assessment Vaccines given and tolerated well Discharged in stable condition Return to Clinic: Prescriptions For prescription, patient prefers: Rx for: Plickup Rx will be available for pickup on: Pharmacy number: Pharmacy number: Mail	_					
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Return to Clinic: Prescriptions For prescription, patient prefers: Rx for: Pickup Rx will be available for pickup on: Phone in to pharmacy Pharmacy name: Pharmacy number:] Vaccines given and tolerated well		Verbal Discussion	☐ Verbalizes Understanding		
For prescription, patient prefers: Rx for: ☐ Pickup Rx will be available for pickup on: ☐ Phone in to pharmacy Pharmacy name: ☐ Pharmacy number: ☐ Mail			Handout(s)	☐ Needs Reinfor	rcement	
Pickup Rx will be available for pickup on: Phone in to pharmacy Pharmacy name: Pharmacy number:		₹x for:				
Pharmacy number:	☐ Pickup Rx will be available					
☐ Mail	☐ Phone in to pharmacy Ph	narmacy nam	ne:			
Rx picked up on: Rx called into pharmacy on:		armacy num	ber:			
	x picked up on:	Rx called into pharmacy on:				
Nurse: Date:	se.		Date:			