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Providing NHS services

*'Seamless care, working with our community'*

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**TRAVEL RISK ASSESSMENT FORM – to be completed by traveller prior to appointment.**

Name:		Date of birth:	
Address:		[ ] Male [ ] Female	
Home Tel No:		E-mail:	
Mobile No:			
<b>PLEASE SUPPLY INFORMATION ABOUT YOUR TRIP IN THE SECTIONS BELOW</b>			
Date of departure:		Total length of trip:	
Country to be visited	Exact location or region	City or rural	Length of stay
1.			
2.			
3.			
Have you taken out travel insurance for this trip?			
Do you plan to travel abroad again in the future?			
<b>TYPE OF TRAVEL AND PURPOSE OF TRIP ABROAD – Please tick all that apply</b>			
[ ] Holiday	[ ] Staying in hotel	[ ] Backpacking	<u>Additional information</u>
[ ] Business Trip	[ ] Cruise ship trip	[ ] Camping/hostels	
[ ] Expatriate	[ ] Safari	[ ] Adventure	
[ ] Volunteer Work	[ ] Pilgrimage	[ ] Diving	
[ ] Healthcare Worker	[ ] Medical tourism	[ ] Visiting friends/family	

<b>PLEASE SUPPLY DETAILS OF YOUR PERSONAL MEDICAL HISTORY</b>			
	<b>Yes</b>	<b>No</b>	<b>Details</b>
Are you fit and well today			
Any allergies including food, latex, medication			
Severe reaction to a vaccine before			
Tendency to faint with injections			
Any surgical operations in the past including eg your spleen or thymus gland removed			

	Yes	No	Details
Recent chemotherapy/radiotherapy/organ transplant			
Anaemia			
Bleeding/clotting disorders (including history of DVT)			
Heart disease (eg angina, high blood pressure)			
Diabetes			
Mental health issues (including anxiety, depression)			
Neurological (nervous system) illness			
Respiratory (lung) disease			
Rheumatology (joint) conditions			
Spleen problems			
Any other conditions			
<b>Women only:</b>			
Are you pregnant			
Are you breastfeeding			
Are you planning a pregnancy while away			
Have you undergone FGM / been cut / circumcised			

**Are you currently taking any medication** (including prescribed, purchased or a contraceptive pill)?

Tetanus/ polio/diphtheria		MMR		Influenza	
Typhoid		Hepatitis A		Pneumococcal	
Cholera		Hepatitis B		Meningitis	
Rabies		Japanese Encephalitis		Tick Borne Encephalitis	
Yellow Fever		BCG		Other	
Malaria tablets					

**Any additional information**