Name: _	
UGA ID:	#81
Date of E	Birth:

Phone:

TRAVEL CLINIC APPOINTMENT REQUEST

Please email completed form to: allergytravel@uhs.uga.edu or fax (706) 583-8255. Once we receive your completed paperwork we will contact you to schedule an appointment *Before sending any forms via email, please be aware of the possible risks of using unencrypted email. These forms contain protected health information and are confidential. The use of unencrypted email and any attachment could result in an unintentional disclosure of your protected health information. If you use email, you have decided that the risks with email communications are acceptable to you and you hereby release the University of Georgia for any such disclosure unless caused by the negligence of UGA. If not, you may fax the forms to us.

Have you been seen as a patient at University Health Center? Y \square N \square^{**}

**If No, then call (706) 542-1767 for UHC patient registration. After you've been registered in the UHC system,

then submit completed form by email or fax.

University Health Center

UNIVERSITY OF GEORGIA

Student Affairs

I. COMPLETE ITINERARY: (List <u>all</u> planned countries/cities in chronological order)

Country			All cities/town	s/area	Dates of Travel (a	rrival – departure)
	Are you traveling with	n a US passpo	rt?Y□ N□	If no, what cour	ntry?	
	Is this a UGA program	i? Y□ N□	Name of U	GA program/depart	tment	
Ш.	ACCOMMODATION Hotel Dorm	IS (select all t Hostel		Cabin 🗆 Home 🗆	Resort \Box	Cruise ship 🗌
III.	ACTIVITIES (select a	all that apply):			
	Study Abroad/Teaching	ng 🗌	Research \Box	Long-term travel	(> 6 months) \Box	Peace Corps 🗌
	Mission Trip \Box		Vacation \Box	Direct contact wi	th animals \Box	Conference \Box
	Healthcare worker \Box Hik		Hiking 🗌	Returning home to visit family/friends \Box		
	Cruise Ship passenger	· 🗌	Other(eg.)			
IV.	MEDICAL HISTORY	(select all tha	at apply):			
	No medical problen	ns 🗆		No medication, v	vaccine, or food aller	gies 🗆
	A. Allergies List each allergy and reaction (hives, rash, swelling, nausea/vomiting, anaphylaxis, etc.)					

Allergy	Reaction	Allergy	Reaction

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Name:_____

UGA ID: #81

Date of Birth:

Phone:

B. MEDICATIONS: List all prescription and over the counter medication that you take (including birth control)

Medication	Dose	Frequency	Medication	Dose	Frequency

C. MEDICAL CONDITIONS (select all that apply):

Thymus disease or history of thymectomy \Box		Immune system disorde	er 🗆 🛛 Asthma 🗆	Anxiety \Box
Depression \Box	Heart problems \Box	Kidney disease 🗆	Liver disease \Box	Smoker \Box
Diabetes	Seizures	Pregnant 🗆	Planning pregnancy wit	hin 3 months \Box
$Breastfeeding \square$	Psychiatric condition \Box	Neurological co	ndition \Box	
Other/comments				

V. PREPARING FOR YOUR APPOINTMENT:

- A. Immunization Records: Bring any immunization records to your appointment, including yellow card and any out of state records. If vaccines were given in Georgia, then we have access to the state registry.
- B. Arrive 15 minutes prior to your appointment time to check in with patient registration (bring picture ID and insurance information)
- C. If you arrive more than 10 minutes late for your appointment, then you may be asked to reschedule.
- D. Charges: Travel consultation \$80 Complex travel consultation \$110 (travel to 3+ countries)
 - a. Additional charges you may incur: vaccines, prescriptions, and/or lab work
 - b. Verify your insurance coverage for travel services at UHC prior to your appointment.
 - c. Good Faith Estimate and Fees can be found online where you found this document.
- E. Travel consultation appointments are approximately 30-40 minutes.
- *F.* ** \$30 charge for those that do not provide 24-hour notice to cancel appointment. If the clinic is closed, then please leave a message on our voicemail.**

By signing below, I acknowledge that I am responsible for all fees incurred by scheduling a Travel Appointment

Signature:

/s/:

Х			

If unable to use the signature function: My typed name below is my confirmed signature.

Date: _____

Effective Date: 07/2021 Reviewed:

Revised: 07/2022, 04/2023, 07/2023