



8/14/2012

Mail To: MOORE, TOM
1 VIA SANTA RAMONA
RANCH MIRAGE CA 92270

Dear Traveler,

Please read this letter immediately so that you will have time to purchase recommended items and get any necessary immunizations before your trip. Each person is listed on a separate page. You should check to be sure the following information is correct.

Name: MOORE, TOM

DOB: 11/27/1942 (69 yrs old)



Trip ID#: 63570

Travel departure date: 9/9/2012

Length of stay: 14 days

Trip reason: Tour

Malaria exposure: 0 days

Allergies and Health Issues: high bp,osteoporosis

Other Allergies:

Current Medications: lisinopril,alendronate

Countries to be Visited: China

Travel Advisory Service Recommendations

Trip Comments: tourist areas

Your Nurses Clinic is: Palm Desert 75-036 Gerald Ford Palm Desert . No appt needed for vaccines. 9:00am-11:00 am and 2pm-4:00pmMonday-Friday. Nurses Clinic. Yellow fever vaccine is available @ this location. Check in @ reception desk upstairs. You will need one visit.

Visit #	Immunizations Recommended
1	Hepatitis A 1.0 mL IM deltoid

Travel prescriptions: If needed, your prescriptions are enclosed-take the TRAVEL RX to your pharmacy.

Dispense Quantity	Dose	Travel-Related Medications Prescribed
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MOORE, TOM

Kaiser#: 18801394

4	2 tablets	Ciprofloxacin 500mg
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Non-prescription Items Recommended	
DEET	We recommend Ultrathon or Sawyers controlled release insect repellent lotion containing DEET
Loperamide:2 mg	Brand name: Imodium AD Adult dose: 2 tablets after every loose stool, max 8 tablets/day Avoid in children under 2

- Be sure to take this letter to the Kaiser medical office injection area / pharmacy
- Carefully read the informational handouts enclosed.

current tdap,pneumonia

Bon Voyage! . . . and please send us a postcard

Travel Advisory Service: 800-517-5556

Travel Advisor: Wendy Kessler, RN
 Doctors: Henry Ng, MD and Brian Bronson, MD
 Kaiser Permanente Travel Advisory Service
 3250 Fordham Street, San Diego, CA 92110

Mail To: MOORE, TOM

Staying Healthy

This list of precautions was prepared especially for you and your itinerary. Let it be your guide to a healthy trip.

CDC International Travel Information	877-394-8747
CDC Travel Advice	http://www.cdc.gov
U.S. State Department	202-647-5225
U.S. State Dept travel warnings	http://www.travel.state.gov

Motor vehicle accidents are the greatest risk of all! Avoid night driving. Buckle up whenever you are in a car.

Country	Malaria Risks	State Department Warning
China	<p>Rural parts of Anhui, Guizhou, Henan, Hubei, Hainan, and Yunnan provinces. Rare cases occur in other rural parts of the country <1,500 m (<4,921 ft) between May–December. None in urban areas. Some major river cruises may go through malaria endemic areas in Anhui and Hubei provinces.</p> <p>Along China-Burma border in the western part of Yunnan province: Atovaquone/proguanil or doxycycline</p> <p>Hainan and other parts of Yunnan province: Atovaquone/ proguanil, doxycycline or mefloquine</p> <p>Anhui, Guizhou, Henan, and Hubei provinces: Atovaquone/proguanil, chloroquine, doxycycline, mefloquine, or primaquine</p> <p>All areas with malaria including river cruises that pass through endemic-malaria provinces: Mosquito avoidance</p>	No

State Department Warnings

Travel Advisory Service

Treatment of Traveler's Diarrhea

Traveler's diarrhea (TD) is the most common cause of illness in travelers to developing countries. It may be accompanied by abdominal cramps, nausea, bloating, urgency, fever and malaise. The risk of acquiring TD in this setting can be lowered by avoiding high risk foods such as raw or undercooked meat and seafood, raw fruits and vegetables, and salads rinsed in tap water. Water should be boiled, treated or adequately filtered. Beverages that are bottled, sealed, or carbonated should be ok. Ice poses a risk. One should avoid foods and beverages from street vendors. Even shower and sink water may be contaminated. Despite these precautions many travelers will still develop TD and this handout will outline an approach to treatment of adults and children with TD.

Adults

Not all diarrhea will require antibiotics

For mild diarrhea take Loperamide (Imodium AD) 4mg once followed by 2mg after each loose stool (not to exceed 16mg per day for up to 3 days) until diarrhea is controlled.

Another option is to use Pepto-Bismol (bismuth subsalicylate) taken as 1 oz of liquid or 2 tablets every 30 minutes up to 8 doses/day (adult dose).

When to use antibiotics

If there is fever, bloody stools, or if the diarrhea causes significant discomfort, or starts to interfere with activities, then the antibiotic (either Cipro or Azithromycin) should be taken along with the Loperamide. Be sure to take the antibiotic as a *single dose* as prescribed. You may have enough antibiotic for a second dose – this is to be used if you have another occurrence of TD later in your trip. In the past it was thought that Loperamide should not be used in diarrheal illness associated with high fever or blood in the stool but more recent studies show that this is a safe practice and can provide quicker control of the diarrhea. If the diarrhea does not resolve with the combination of Loperamide and antibiotics the traveler should seek medical evaluation from a qualified health care provider.

Treatment of Infants, Children

Antibiotics should be started with the onset of TD in young children. Children under the age of 2 are at greatest risk of dehydration from diarrhea and should be started on oral rehydration solutions (ORS) as soon as the TD develops. Parents should seek medical attention if their child shows signs of moderate to severe dehydration, fever greater than 102F, bloody stool, or persistent vomiting. Seek medical attention for infants < 1yr of age who develop TD.



Travel Advisory Service

Insect Repellent

For best protection, choose one product from all three of the groups below.

1. DEET insect repellent is the only effective insect repellent for use on skin. We recommend 15% to 40% DEET. Apply sparingly to exposed skin. Wash off once you are inside a well-screened area. Slow-release formulas listed below last longer and are safest for children and pregnant women.

Sawyer Controlled Release 20% DEET® lotion (from Kaiser pharmacies)
Ultrathon® insect repellent by 3M (available by mail from sources below)

2. Room spray for enclosed spaces is available from most large drugstores. Pyrethrin spray kills mosquitoes, ants, flying insects and is very safe for pregnant women & infants. Spray closed room as needed during day and before bedtime. Leave the room for 15 minutes after spraying.

Raid House and Garden® Room Spray

3. Permethrin for clothing, bednets & tentscreens
Permethrin (spray or solution) is very safe for children and pregnant women. Fabric treated with the solution kills insects for months, despite repeated washings. The spray lasts two weeks. Use according to directions at home before your trip.

Sawyer Permethrin spray or Permakill® concentrate
Repel Permanone® spray or solution
Coulston's Duranon® tick repellent spray or solution

These products are available in sporting/outdoor stores (Sports Chalet, REI, A-16)
or by mail from TravMed: <http://www.travmed.com> (800) 872-8633
or by mail from Chinook: <http://www.chinookmed.com> (800)-766-1365

Updated March 27, 2007



Avoid insects and the diseases they transmit

Mosquitoes, fleas, ticks, flies, sandflies, lice and other insects transmit many diseases throughout the world, some of which can be fatal. Mosquitoes transmit organisms which cause malaria, encephalitis, dengue and yellow fever. Avoid scents such as cologne that can attract insects. Personal protection measures should be taken to avoid insect bites because many of these diseases cannot be treated – they must be prevented.

Wear Protective Clothing

Clothing can protect much of your body from flying insects such as mosquitoes and flies. Long sleeves and pants, hat, socks & shoes should cover as much of the body as possible. Clothing should be treated in advance with permethrin, a very safe insecticide that kills ticks and lice that can get inside clothing and also kills mosquitoes that try to bite through clothing. For trips longer than one month, use the solution instead of the spray.

Use DEET on Exposed Skin

Products containing DEET are the most effective insect repellents for application on exposed skin. These repellents need to be applied every 4-8 hours, depending on the brand. Most adults should use a product with 20-40% DEET. Nobody should use 90-100% DEET. Children and pregnant women should use a slow-release form of DEET. Be cautious applying DEET to children's hands, because more will be absorbed if children put hands with DEET into their mouths. Once inside a well-screened area, DEET should be washed off the skin.

Indoor Precautions

Well-screened or air-conditioned areas are less likely to allow mosquitoes and other flying insects into your room. For extra indoor protection, use a pyrethrin room spray such as Raid House & Garden[®] bug killer. If rooms are not well-screened or air conditioned, we strongly recommend mosquito bed nets treated with permethrin. Bed nets are available in some sporting/outdoor stores (Sports Chalet, REI, A-16) or:

TravMed: <http://www.travmed.com> (800) 872-8633

Chinook: <http://www.chinookmed.com> (800)-766-1365

Hepatitis A Vaccine

What You Need to Know

Many Vaccine Information Statements are available in Spanish and other languages. See www.immunize.org/vis.

Hojas de Información Sobre Vacunas están disponibles en Español y en muchos otros idiomas. Visite <http://www.immunize.org/vis>

1 What is hepatitis A?

Hepatitis A is a serious liver disease caused by the hepatitis A virus (HAV). HAV is found in the stool of people with hepatitis A.

It is usually spread by close personal contact and sometimes by eating food or drinking water containing HAV. A person who has hepatitis A can easily pass the disease to others within the same household.

Hepatitis A can cause:

- “flu-like” illness
- jaundice (yellow skin or eyes, dark urine)
- severe stomach pains and diarrhea (children)

People with hepatitis A often have to be hospitalized (up to about 1 person in 5).

Adults with hepatitis A are often too ill to work for up to a month.

Sometimes, people die as a result of hepatitis A (about 3-6 deaths per 1,000 cases).

Hepatitis A vaccine can prevent hepatitis A.

2 Who should get hepatitis A vaccine and when?

WHO?

Some people should be routinely vaccinated with hepatitis A vaccine:

- All children between their first and second birthdays (12 through 23 months of age).
- Anyone 1 year of age and older traveling to or working in countries with high or intermediate prevalence of hepatitis A, such as those located in Central or South America, Mexico, Asia (except Japan), Africa, and eastern Europe. For more information see www.cdc.gov/travel.
- Children and adolescents 2 through 18 years of age who live in states or communities where routine vaccination has been implemented because of high disease incidence.
- Men who have sex with men.
- People who use street drugs.

- People with chronic liver disease.
- People who are treated with clotting factor concentrates.
- People who work with HAV-infected primates or who work with HAV in research laboratories.
- Members of households planning to adopt a child, or care for a newly arriving adopted child, from a country where hepatitis A is common.

Other people might get hepatitis A vaccine in certain situations (ask your doctor for more details):

- Unvaccinated children or adolescents in communities where outbreaks of hepatitis A are occurring.
- Unvaccinated people who have been exposed to hepatitis A virus.
- Anyone 1 year of age or older who wants protection from hepatitis A.

Hepatitis A vaccine is not licensed for children younger than 1 year of age.

WHEN?

For children, the first dose should be given at 12 through 23 months of age. Children who are not vaccinated by 2 years of age can be vaccinated at later visits.

For others at risk, the hepatitis A vaccine series may be started whenever a person wishes to be protected or is at risk of infection.

For travelers, it is best to start the vaccine series at least one month before traveling. (Some protection may still result if the vaccine is given on or closer to the travel date.)

Some people who cannot get the vaccine before traveling, or for whom the vaccine might not be effective, can get a shot called immune globulin (IG). IG gives immediate, temporary protection.

Two doses of the vaccine are needed for lasting protection. These doses should be given at least 6 months apart.

Hepatitis A vaccine may be given at the same time as other vaccines.



U.S. Department of
Health and Human Services
Centers for Disease
Control and Prevention

3**Some people should not get hepatitis A vaccine or should wait.**

- Anyone who has ever had a severe (life threatening) allergic reaction to a previous dose of hepatitis A vaccine should not get another dose.
- Anyone who has a severe (life threatening) allergy to any vaccine component should not get the vaccine.
Tell your doctor if you have any severe allergies, including a severe allergy to latex. All hepatitis A vaccines contain alum, and some hepatitis A vaccines contain 2-phenoxyethanol.
- Anyone who is moderately or severely ill at the time the shot is scheduled should probably wait until they recover. Ask your doctor. People with a mild illness can usually get the vaccine.
- Tell your doctor if you are pregnant. Because hepatitis A vaccine is inactivated (killed), the risk to a pregnant woman or her unborn baby is believed to be very low. But your doctor can weigh any theoretical risk from the vaccine against the need for protection.

4**What are the risks from hepatitis A vaccine?**

A vaccine, like any medicine, could possibly cause serious problems, such as severe allergic reactions. The risk of hepatitis A vaccine causing serious harm, or death, is extremely small.

Getting hepatitis A vaccine is much safer than getting the disease.

Mild problems

- soreness where the shot was given (*about 1 out of 2 adults, and up to 1 out of 6 children*)
- headache (*about 1 out of 6 adults and 1 out of 25 children*)
- loss of appetite (*about 1 out of 12 children*)
- tiredness (*about 1 out of 14 adults*)

If these problems occur, they usually last 1 or 2 days.

Severe problems

- serious allergic reaction, within a few minutes to a few hours after the shot (*very rare*).

5**What if there is a moderate or severe reaction?****What should I look for?**

- Any unusual condition, such as a high fever or unusual behavior. Signs of a serious allergic reaction can include difficulty breathing, hoarseness or wheezing, hives, paleness, weakness, a fast heart beat or dizziness.

What should I do?

- **Call** a doctor, or get the person to a doctor right away.
- **Tell** your doctor what happened, the date and time it happened, and when the vaccination was given.
- **Ask** your doctor, nurse, or health department to report the reaction by filing a Vaccine Adverse Event Reporting System (VAERS) form. Or you can file this report through the VAERS web site at www.vaers.hhs.gov, or by calling **1-800-822-7967**.

VAERS does not provide medical advice.

6**The National Vaccine Injury Compensation Program**

The National Vaccine Injury Compensation Program (VICP) was created in 1986.

Persons who believe they may have been injured by a vaccine can learn about the program and about filing a claim by calling **1-800-338-2382** or visiting the VICP website at www.hrsa.gov/vaccinecompensation.

7**How can I learn more?**

- Ask your doctor. They can give you the vaccine package insert or suggest other sources of information.
- Call your local or state health department.
- Contact the Centers for Disease Control and Prevention (CDC):
 - Call **1-800-232-4636 (1-800-CDC-INFO)** or
 - Visit CDC's website at www.cdc.gov/vaccines

Vaccine Information Statement (Interim)
Hepatitis A Vaccine

10/25/2011

42 U.S.C. § 300aa-26