

# Travel Health Actions for Individuals with Preexisting Conditions

Date: \_\_\_\_\_

To: [Recipient's Name]

[Recipient's Address]

Dear [Recipient's Name],

As you prepare for your upcoming travel, we want to ensure that you are aware of the necessary health actions to take due to your preexisting condition(s). Your health and safety are our top priority, and we recommend the following steps:

## 1. Consult Your Healthcare Provider

Please schedule an appointment with your healthcare provider to discuss your travel plans and any necessary adjustments to your treatment regimen.

## 2. Medication Management

Ensure you have an adequate supply of all medications. Carry a copy of your prescriptions and make note of any potential side effects.

## 3. Health Insurance

Verify that your health insurance covers international travel and know the procedure for accessing care abroad.

## 4. Travel Insurance

Consider purchasing travel insurance that includes coverage for medical emergencies related to your preexisting conditions.

## 5. Emergency Contact Information

Prepare a list of emergency contacts, including your healthcare provider, and keep it accessible during your trip.

## 6. Local Healthcare Resources

Research local healthcare facilities at your destination in case of an emergency.

We hope you find this information helpful. Please don't hesitate to reach out if you have any questions or need further assistance.

Sincerely,

[Your Name]

[Your Position]

[Your Organization]

[Contact Information]