

Medical Report for Treatment Abroad

Patient's name	
Date of birth (dd/mm/yyyy)	
Address and contact details of the patient's bronchiectasis clinic and attending physician	

The person mentioned above suffers from a chronic disease, called **Bronchiectasis**. Bronchiectasis is a disease that affects the lungs and may cause cough and sputum production. **Bronchiectasis is NOT contagious.**

Patient's health status (please describe)	
Oxygen requirements? (conditions (flight, exercise), l/min, device)	
Bacteria in sputum cultures (please describe most relevant)	
Known allergies (please describe)	

Medical devices needed during travel:

Product Name	Type	Needed during flights? Y/N
	Spacer	
	Nebulizer	
	Physiotherapy device	
	Oxygen source	
	Pulse oximeter	

	Nebulizer cleaning equipment (eg Liquid soap, kettle or other means)	
--	--	--

Patient needs to carry syringes and/or needles? YES/NO

Note: Medication and medical devices should be carried on to the plane when flying, in **addition** to the regularly allotted hand luggage limit.

Daily required medication			
Product Name	Type	Quantity (units)	Daily frequency
	Bronchodilator inhaler		
	Bronchodilator solution		
	Corticosteroid inhaler (ICS)		
	Corticosteroid/bronchodilator inhaler (ICS/LABA)		
	Inhaled salt solution		
	Inhaled antibiotic		
	Oral antibiotic		

When ill, recommended antibiotic:

Antibiotic	Dose	Daily frequency	Duration
AND/OR			
AND/OR			
AND/OR			

Date:

STAMP of clinic or physician ↓ ↓

Signature physician: _____