

Patients Name: _____ Address: _____ DOB: _____

Travellers Diarrhea		
<input type="checkbox"/> Azithromycin	250mg \$1.27/tab	Take 4 tablets upon onset (for Travelers Diarrhea) If symptoms continue after 24hrs take 2 tablets daily for days 2 & 3 8 Tabs x ____ Refills
<input type="checkbox"/> Azithromycin Susp	<input type="checkbox"/> 300mg/15mL <input type="checkbox"/> 600mg/15mL	Give ____ mL daily for 3 days (for travellers Diarrhea) 10mg/kg * ____ kg = ____ mg (max 1,000mg)
<input type="checkbox"/> Dukoral	2 sachets \$102	Dissolve the Contents of 1 Sachet into 150 mL of water, then repeat in 7 days. Start latest 2 weeks before travel, do not take within 1 hr of food.
<input type="checkbox"/> Dukoral (booster w/n 5 yrs)	1 sachet \$57	Dissolve the Contents of 1 Sachet into 150 mL of water. Start latest 1 weeks before travel, do not take within 1 hr of food.
<input type="checkbox"/> Loperamide	2mg	Take 2 stat, and then 1 after every loose bowel movement # ____ Tabs

Anti-Malarials (prevention)		
<input type="checkbox"/> Malarone Adult	100 + 250mg \$4.77/tab	Take ____ tablet at the same time (with food or milky drink) daily. Start 1 days before travelling to, while within the malaria zone, and for 7 days after leaving. <input type="checkbox"/> >40 kg = 1 tab QD Days travelling ____ + 8 = # ____ Tabs
<input type="checkbox"/> Malarone Pediatric	25 + 62.5mg \$1.88/tab	<input type="checkbox"/> 10 - 20 kg = 1 tab QD 31 - 40 kg = 3 tab QD Days travelling ____ + 8 = <input type="checkbox"/> 8 - 10 kg = ¾ tab QD 21 - 30 kg = 2 tab QD # ____ Tabs <input type="checkbox"/> 5 - 8 kg = ½ tab QD
<input type="checkbox"/> Doxycycline	100mg \$0.6/tab	Take 1 cap/tab daily with food. Start 1 days before travelling to, while within the malaria zone, and for 4 weeks after leaving. Days travelling ____ + 29 = # ____ Tabs
<input type="checkbox"/> Mefloquine	250mg \$4.27/tab	Take ____ tab once a week. Start 1 week before travelling to, while within the malaria zone, and for 4 weeks after leaving. Weeks travelling ____ + 5 = # ____ Tabs <input type="checkbox"/> >45 kg = 1 tab QD <input type="checkbox"/> 30 - 45 kg = ¾ tab QD *C/I in pts with Major psychiatric disorders & epilepsy <input type="checkbox"/> 20 - 30 kg = ½ tab QD <input type="checkbox"/> 5 - 20 kg = ¼ tab QD

Altitude Sickness		
<input type="checkbox"/> Diamox (prevention)	250mg \$0.13/tab	Take ½ tab (125mg) q12h cc starting 1-2 days before ascent, during ascent, and until 48 hrs after highest altitude reached # ____ Tabs
<input type="checkbox"/> Diamox (Treatment)	250mg \$0.13/tab	Take 1 tab at onset of symptoms q12 hr until 24 hrs after symptoms has cleared (for a max of 4 days). # ____ Tabs

Vaccinations		
<input type="checkbox"/> Avaxim	Jr	Inject at 0 and 6-36 months
<input type="checkbox"/> Engerix	Jr	<input type="checkbox"/> Traditional: Inject at 0,1, and 6 months <input type="checkbox"/> Rapid: Inject at 0, 7 & 21 days, booster at 12 months
<input type="checkbox"/> Twinrix	Jr	<input type="checkbox"/> Traditional: Inject at 0,1, and 6 months <input type="checkbox"/> Rapid: Inject at 0, 7 & 21 days, booster at 12 months
Imovax Polio		Inject 0.5mL S/C Alternate: (1-15yo): Inject 1mL IM (0, 6-12months)
<input type="checkbox"/> Vivotif		Take 1 capsule (1 hr before or 2 hrs after food) every other day (days 1,3,5,7).
<input type="checkbox"/> Typhim	\$59	Inject at 0.5mL IM
<input type="checkbox"/> YF-VAX	\$104	INJECT 0.5mL
<input type="checkbox"/> Ixiario	\$224	Inject on days 0 & 28, Booster in 12-24 months (if required) <input type="checkbox"/> Accelerated (0,7days)
Imovax Rabies	\$214	Pre-exposure: Inject on days 0, 7, 21/28
Boostrix	\$56	INJECT 0.5mL
Shingrix		INJECT 0.5mL (0, 2-6 months)

Prescribers Name, License# & Signature: Raj Manhas RPh 14127 *Rm* Date (dd/mm/yy): ____/____/2025

MMR INJECT 0.5mL (0, 28 days)

Varivax INJECT 0.5mL S/C (0,3 months)