

11 Health and Safety Questions to Consider Prior to Travel

Consider the following questions and discuss your answers with a travel health provider as needed.

If there are specific accommodations needed or questions regarding resources on-site in the program location please notify the program manager, fern_mackinnon@uml.edu.

1. Do you currently receive **academic accommodations** for a documented disability at your home institution and anticipate that you will require academic accommodations while abroad?
2. Do you receive **housing accommodations** for a documented disability at your home institution and anticipate that you will require special housing accommodations while abroad?
3. Are you currently being treated for any **medical conditions**, or have you been treated for any medical conditions in the past year?
4. Are you currently being treated for any **psychological conditions or mental health concerns** (such as, depression, anxiety, alcohol and/or other substance use disorder, eating disorder, or condition related to loss or grief)? Or have you been treated for any psychological conditions or mental health concerns in the past year?
5. Are you currently being **prescribed any medication** by a health care provider (physician, psychiatrist, or therapist/counselor/psychologist)? (Please note: Some commonly prescribed medications in the United States may not be available or permitted in your country of study. Be certain to discuss with your health care provider and Program Manager to ensure you are prepared for your time abroad.)
6. Have you undergone any **major surgery** in the past six months, or are you scheduled to have one before going abroad?
7. Do you foresee the **need for continual treatment** for any medical or mental health condition while abroad?
8. Do you suffer from any **allergies** to food, drugs, or environment?
9. Do you need to live by any **dietary restrictions**?
10. Do you have any **physical limitations** that may restrict participation in certain activities abroad?
11. Is there any **additional information** regarding your health or well-being that may impact your health and safety during your experie.04 ¶ () ŷi