**ADVICE SHEET: NHS treatment for travel abroad**

Under NHS legislation, the NHS ceases to have responsibility for people when they leave the UK to live abroad on a permanent basis. This is because the NHS is a residency based system

People traveling within Europe should be advised to carry either a UK Global Health Insurance Card (UK GHIC) (for most people) or a UK European Health Insurance Card (UK EHIC) if you have rights under the Withdrawal Agreement which entitles them to medically necessary state-provided healthcare whilst in a European Union (EU) country or Switzerland.

Not all state healthcare is free within the EU and Switzerland and so you may have to pay for services that you would get for free on the NHS. For most people, the UK Global Health Insurance Card (UK GHIC) replaces the existing European Health Insurance Card (EHIC) for new applications.

**Requests for extra supplies of medication for patients who wish to travel abroad:**

The BMA guidance on prescribing in General Practice states that the NHS accepts responsibility for supplying ongoing medication for temporary periods abroad of up to three months. This applies for both holidays and working abroad.

If a person is going to be abroad for more than three months, then only a sufficient supply of his/her regular medication should be provided to enable them to get to the destination and find an alternative supply.

The patient should be advised to register with a local doctor for continuing medication, which they may need to pay for; the patient should check if the medicines required are available in the country being visited.

GP practices however are not responsible for finding a doctor or ensuring medication supplies are available at the holiday destination.

The patient is responsible for finding and registering with a local doctor and for confirming a regular supply of their medication.

**NHS prescriptions must never be obtained by relatives or friends on behalf of patients who are currently abroad, irrespective of such factors as owning a house in the UK or paying UK taxes.**

**Patients are responsible for ensuring that any drugs they take into a country conform to local laws Further information is available on the NHS website and the UK government website.**

**Controlled drugs and travellers:**

A personal import/export licence is not required by the Home Office if a person travelling abroad is carrying less than3 months’ supply of a controlled drug (schedules 2, 3, or 4 Part I (CD Benz) and Part II (CD Anab), but is required for longer periods. See the BNF.

***Advice to prescriber - It is advised that a covering letter from the prescriber is obtained that confirms the name of the patient, travel plans, the name of the prescribed controlled drug, total quantity and dose.***

***Patient responsibilities - The patient should check with the embassies or High Commission for the countries they will be travelling through to ensure that import and export regulations in those countries are complied with Patients should also check any additional requirements that their travel operator/airline company may impose. Patients can obtain further information on carrying controlled drugs abroad from Bringing medicine containing a controlled drug into the UK***

**Communications from the Department of Health:**

❖ ‘The Department of Health (personal communication September 2015) does not normally specify the period for which prescriptions may be issued, as that decision is best made by the patients GP, taking into account their detailed knowledge of the patient's medical history and current medical condition

❖ It would not be considered good clinical practice for a doctor to prescribe large amounts of drugs to a patient going abroad for an extended period of time, whose progress that GP is not able to monitor

❖ Under the National Health Service (General Medical Services Contracts) Regulations 2004, where a person for whose treatment a doctor is responsible leaves the United Kingdom with the intention of being away for a period of at least three months, that person should be removed from the doctor's list. This remains in the updated contract.

**Seafarers:**

The Department of Health (personal communication September 2015) understands that there may be special arrangements for seafarers whereby the seafarer’s employer makes arrangements in the UK and/or abroad for their medication There is nothing to prevent a patient obtaining supplies privately. However, as set out previously it would not be considered good clinical practice for a doctor to prescribe large amounts of drugs to a patient going abroad for an extended time, whose progress that GP is not able to monitor.

**Miscellaneous items for conditions while travel abroad:**

GPs are not responsible for the prescribing of items for conditions which may arise while abroad or traveling e.g. sun screens, flight socks, antibiotics, travel sickness tablets or diarrhoea treatments. Patients should be advised to purchase these items locally prior to travel as per NHS England guidance: Conditions for which over the counter items should not routinely be prescribed. Advice is available from community pharmacists if required. For conditions unresponsive to self-medication the patient should seek medical attention abroad.

Under the NHS regulations a GP can write a private prescription for a patient but cannot charge the patient for writing a private prescription if the patient is registered for NHS care with that GP or any other GP in the same practice. An exception is when an NHS GP writes a private prescription for drugs which are either being issued solely in anticipation of the onset of an ailment whilst outside the UK but for which the patient does not require treatment when the medicine is prescribed or drugs issued for the prevention of malaria.

**Travel kits:**

Travel kits containing disposable needles, syringes, IV cannulae, sutures (sometimes plasma substitutes and medicines) may be purchased. These kits are not available via the NHS, although some components may require a private prescription.

**Acetazolamide:**

Proper acclimatisation is the best way to prevent altitude sickness. In the UK acetazolamide is not licensed for preventing (or treating) altitude sickness. However, it may sometimes be considered for 'off-label' use to prevent altitude sickness in people who may be at risk of developing it. When requested for travel purpose, GPs should note that this is unlicensed medication and GPs who prescribe unlicensed drugs carry a greater medico-legal responsibility for their actions than when they prescribe licensed treatments. It is therefore locally designated non-formulary.

**Jet lag:**

Medication (e.g. melatonin specifically the Colonis Pharma preparations) licensed for jet lag would be classified as a medicine used for travel and in anticipation of the ailment. GPs should therefore not provide an NHS prescription. Private prescriptions may be written for this purpose if deemed clinically appropriate.

**Malaria prevention:**

The UK Health Security Agency updated the Guidelines for malaria prevention in travellers from the UK (2021) are updated and reissued annually. They are intended for use by healthcare workers who advise UK-based travellers to malaria-endemic areas but may also be of use to prospective travellers who wish to read about the options themselves.

**Malaria prophylaxis is not to be prescribed on the NHS under any circumstances and patients should be advised to purchase prophylaxis over the counter from community pharmacies where possible (chloroquine and proguanil can be purchased over the counter but are used less often). If the medication required is a prescription only medicine, then this should be prescribed and obtained on a private prescription**. *See the NICE Clinical Knowledge Summary on Malaria Prophylaxis*