Guideline for Medical Screening of Bhutanese Travelers

Department of Public Health
Ministry of Health
Bhutan 2019
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1. Background:

According to the World Tourism Organization, in 2010, international tourist arrivals for business, leisure and other purposes globally amounted to 940 million. Leisure, recreation and holidays travel accounted for just over half of all international tourist arrivals (51% or 446 million arrivals). Almost 15% of international tourists reported travelling for business and professional purposes and additional 27% for specific reasons, such as visiting friends and relatives, pilgrimages and health treatment, etc. In due course, international arrivals are expected to reach 1.6 billion by 2020 (International travel and Health, 2005).

Similarly, international travel is undertaken by increasing number of Bhutanese populations for overseas employment, works, long term and short-term studies, UN peace keeping missions, social, recreational, religious reasons, pilgrimages and humanitarian purposes. As of 2017, there are 4628 students pursuing various degree courses through private funding across the world with majority studying in India. However, the number of tertiary students studying abroad on their own is expected to be more than what Department of Adult and Higher Education (DAHE) has recorded (State of Tertiary Education in Bhutan, 2017). The unpublished data maintained by the department of employment, Ministry of Labor and Human Resources (MoLHR) recorded a total of 6,117 Bhutanese youths deployed through overseas employment program to various countries such as India, Japan, Malaysia and other Middle East countries between 2014-2018. However, less is known about the actual number of people emigrating out of Bhutan annually as there is limited data or study conducted in this field.

International travel can pose many risks to health, depending both on the health needs of the traveler and on the type of travel to be undertaken. Travelers may face sudden and substantial changes in altitude, humidity, temperature and exposure to a variety of infectious diseases, which can result in illness. Furthermore, serious health risks may arise in areas where there is poor accommodation, poor nutrition, inadequate hygiene and sanitation and where medical services are not well developed. Therefore, it is very important that all Bhutanese travelers should seek advice on the potential diseases in their chosen destinations and understand best to protect their health and curtail the risk of acquiring such diseases.

Currently, all Bhutanese travelling out of Bhutan for overseas are subjected to the host country specific health screening forms or requirements while applying for the visa. There is no guideline, practice or health screening standard prescribed by the Ministry of health
(MoH) that a Bhutanese traveler must meet. As a result, there are instances where Bhutanese emigrants fell sick after reaching the country of destination. In such cases, it is not only a matter of inconvenience: financially and health per se to the Bhutanese emigrant but there is also a significant risk of transmitting diseases endemic to Bhutan to the host country. In addition, Bhutanese falling sick after reaching the host countries incur unnecessary expenditure to the Royal Government of Bhutan which actually can be avoided or minimized by instituting effective screening system before they leave our country.

Therefore, the guideline for medical screening of Bhutanese travelers sets a minimum health standard that a Bhutanese traveler should meet before embarking on travel requiring 3 or more months of stay away from Bhutan. This guideline has objective and scope as follows:

2. Objectives

To ensure that all Bhutanese travelling out of country are healthy so as not to transmit diseases endemic to Bhutan in their host countries.

3. Scope:

The scope of this guideline is to screen all Bhutanese citizens travelling out of country requiring a stay of 3 months or more away from our country.

This guideline is intended for use by:

- Civil servants, Armed forces and employees of autonomous agencies;
- Officials deputed for foreign missions and services by Ministry of Foreign Affairs (MFA);
- Students under DAHE scholarship under Ministry of Education (MoE);
- Employees of corporate firms;
- Privates firms under Bhutan Chamber of Commerce and Industries (BCCI);
- The Bhutanese applicants for overseas placement by employment agencies registered under the MoLHR;
- Jigme Dorji Wangchuk National Referral Hospital (JDWNRH);
- Any other Bhutanese travelling out of Bhutan requiring a stay of 3 or more months away from Bhutan.

4. Consultative Process

This guideline was developed through series of consultative meetings between Department of Employment and Human Resources, MOLHR, JDWNRH, Department of Medical Services
and Department of Public Health, Ministry of Health and approved for dissemination and implementation by High Level Committee of MOH.

5. **List of diseases and tests to be conducted**

The Bhutanese travelers intended to stay 3 or more months will be screened for conditions and diseases as per the medical examination form attached herewith as **Annexure I**.

6. **Procedure**

The health screening services will be provided by JDWNRH during or as an off-hour service. Either applicant or private employment agencies will have to seek appointment with the off-hour service department of JDWNRH **2 weeks** ahead of intended date of examination. The respective ministries, autonomous agencies, armed forces, corporate and private offices should meet the expenditure for the medical screening of their staff.

![Flow diagram for operational modalities for medical screening]

7. **Operability**

As of now, the health screening service of Bhutanese applicants will only be provided by JDWNRH. Once the applicants complete the health screening and if no significant history or abnormal findings are observed, the examinee will be provided with a medical fitness certificate to be submitted to the respective offices for travel approval. However, if a significant health condition is identified in the process of examination, which may impact on
the ability to meet the health requirement, the issue of medical certificate will be deferred and applicant will be advised for further medical checkup and treatment.

8. **Review time frame**

This document shall remain valid and for use by all the stakeholders listed above. A process of review shall be initiated by Ministry of Health in consultation with relevant stakeholders as and when deemed necessary.
References


Annexure I: Form for Medical screening of Bhutanese Travelers

Medical examination form for outbound Bhutanese travelers
Ministry of Health
Royal Government of Bhutan

Notes:
1. This form is to be used for medical examination of the Bhutanese requiring 3 or more months of stay away from Bhutan
2. This form should not be used for prescribing medicines

<table>
<thead>
<tr>
<th>Part I: Personal Information</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Name:</strong></td>
</tr>
<tr>
<td><strong>Occupation:</strong></td>
</tr>
<tr>
<td><strong>Address:</strong></td>
</tr>
</tbody>
</table>

How long do you intend stay out of Bhutan?

Permanently □

Temporarily □ For how long? Years [ ] months [ ]

What is your destination country?
<table>
<thead>
<tr>
<th>Medical Condition</th>
<th>Yes</th>
<th>No</th>
<th>If yes, provide brief details</th>
<th>Medical Condition</th>
<th>Yes</th>
<th>No</th>
<th>If yes, provide brief details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mental Illness</td>
<td></td>
<td></td>
<td></td>
<td>Epilepsy</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Asthma/COPD</td>
<td></td>
<td></td>
<td></td>
<td>Diabetes Mellitus</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Hypertension</td>
<td></td>
<td></td>
<td></td>
<td>Tuberculosis</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Heart Disease</td>
<td></td>
<td></td>
<td></td>
<td>Kidney Disease</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Addiction to drugs or alcohol</td>
<td></td>
<td></td>
<td></td>
<td>Prolonged or repeated hospital admission</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Major Surgical Operations</td>
<td></td>
<td></td>
<td></td>
<td>Long-term medication</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Visual &amp; Hearing</td>
<td></td>
<td></td>
<td></td>
<td>Pregnancy</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

I declare that all the information given above is correct and true.

Signature/Thumb print of the applicant........................................................

Date ..........................................

*Note: it is an offence under the Immigration Act of the Kingdom of Bhutan to make any false statement, representation or declaration.*
Part III & IV—Physical examination and Laboratory investigation — to be completed by the examining physician

Date of Examination:

Note:

- *For Hepatitis B, C and HIV testing, please ensure that pre and post counselling are carried out.*
- *Parents should be present when children are examined.*
- *Original lab. test results and chest X-ray must be attached for verification by certifying medical professional*

### Part III: Physical Examination *(to be conducted by the registered medical or health professionals)*

<table>
<thead>
<tr>
<th>A. General</th>
<th>Normal</th>
<th>Abnormal</th>
<th>Details, if abnormal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Heart Rate:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>…………..per minute</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Blood Pressure</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>……………..mm Hg</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Conjunctiva (circle):</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>………………………</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pallor/ Non-icteric/ Others (Specify):</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>………………………</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Vision:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Right Eye…………</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Left Eye…………</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lymphadenopathy</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>………………………</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pedal Oedema</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>………………………</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Visible Deformity</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>………………………</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>B. Systemic</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>----------------</td>
<td>---</td>
<td>---</td>
<td></td>
</tr>
<tr>
<td>Skin: Hypo Pigmented patch</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cutaneous Nerve Enlargement</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cardiovascular system</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Per Abdomen/liver/spleen</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hernia</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mental State (Sensory and Coordination)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Respiratory System</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nervous system: Sequelae of stroke or cerebral palsy, other neurological disabilities</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Part IV: Laboratory tests and Chest X-Ray

**Note:** Original lab. test results and chest X-ray must be attached for verification by certifying medical

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1.</strong></td>
<td></td>
</tr>
<tr>
<td>Chest X-ray no. ...................Date of X-ay ..........................</td>
<td></td>
</tr>
<tr>
<td>Remarks/Report...........................................................................</td>
<td></td>
</tr>
<tr>
<td><strong>2.</strong></td>
<td></td>
</tr>
<tr>
<td>Urine analysis: a) Albumin ......................... b) Sugar ...................... c) RBCs ..........................</td>
<td></td>
</tr>
<tr>
<td>Date of Test ..........................</td>
<td></td>
</tr>
<tr>
<td>Remarks/Report...........................................................................</td>
<td></td>
</tr>
<tr>
<td><em>(In women, where an abnormality occurs due to menstruation, please repeat and record urinalysis following completion of menstruation)</em></td>
<td></td>
</tr>
<tr>
<td><strong>3.</strong></td>
<td>Blood tests</td>
</tr>
<tr>
<td>HIV: Result .................. Date of Test ..........................</td>
<td></td>
</tr>
<tr>
<td><em>(After VCT)</em></td>
<td></td>
</tr>
<tr>
<td>Hepatitis B surface antigen: Result .................. Date of Test ..........................</td>
<td></td>
</tr>
<tr>
<td>Hepatitis C antibody : Result .................. Date of Test ..........................</td>
<td></td>
</tr>
<tr>
<td>blood test</td>
<td></td>
</tr>
<tr>
<td>Syphilis Serology : Result .................. Date of Test ..........................</td>
<td></td>
</tr>
<tr>
<td><strong>4.</strong></td>
<td>Malaria Parasite: Result .......................... Date of Test ..........................</td>
</tr>
<tr>
<td><strong>5.</strong></td>
<td>CBC: WBC.....................RBC.....................HB.....................Plt..................... Date of Test ..........................</td>
</tr>
</tbody>
</table>
Part V: Certification and Declaration (to be completed by an authorized medical professional)

Examination grading

Please consider the information that you have recorded regarding this applicant and provide a grading on their medical examination below. Supporting comments must be provided if you decide to provide a B grading.

A No significant history or abnormal findings present ☐
B Significant history or abnormal findings present ☐ ➔ Please list abnormal findings

1.

2.

3.

Name of the Examining Medical or Health Professional:

Name of the Health Center:

BMHC Registration no:

Signature and Official seal:

Note: This form will be retained with the certifying health center/facility. The examinee will be provided with a medical fitness certificate (Annexure II) to process for the overseas travel.
Annexure II: Certificate for medical Screening

ROYAL GOVERNMENT OF BHUTAN
MINISTRY OF HEALTH

Reg No........................................ Medical Certificate

I certify that I have examined

Full name........................................................................................................................................................................

Age/Sex...........................................bearing CID No./Passport Number.........................................................

On (date)...............................................as a candidate applying for (Specify purpose)

.........................................................................................................................................................................................

In my opinion, the person examined is (check appropriate box):

☐ 1. In a state of good physical and mental health condition at the time of examination.
☐ 2. Not fit at the time of examination.

Additional comments:

.........................................................................................................................................................................................

.........................................................................................................................................................................................

Signature of Certifier: ......................................................................................................................................................

Name: .................................................................................................................................................................

Designation: ........................................BMHC Reg. No.: .................................................................

Date (certificate is signed): .................................................................................................................................
Annexure III: List of communicable diseases and its prevention measures for Bhutanese travelers.

<table>
<thead>
<tr>
<th>SN</th>
<th>Disease Type</th>
<th>Preventive Messages</th>
</tr>
</thead>
</table>
| 1  | Rabies                                | • Avoid contact with animals particularly cats and dogs. If bitten by an animal, immediately wash the wound thoroughly with running water and soap for at least 10-15 mins and visit the nearest health centre for anti-rabies post exposure prophylaxis.  
  • Pre-departure Pre-exposure prophylaxis are available from any health facilities in Bhutan for those traveling to the endemic countries that have poor health system with no or limited access to anti-rabies PEP |
| 2  | Middle East Respiratory Syndrome-Coronavirus (MERS-COV) | • It is not possible to give specific advice on prevention of infection as the source of infection and mode of transmission are not yet clear. However, basic hygiene measures include frequent handwashing with soap and clean water, avoiding sick animals, and avoiding food that may be contaminated with animal secretions unless they are properly washed, peeled, or cooked. |
| 3  | Influenza/Seasonal Flu                | Preventive measures  
  • Wash your hands frequently with soap and water. When soap and water are not available, sanitize your hands with alcohol-based and antibacterial hand sanitizer.  
  • Avoid close contact with people infected with flu.  
  • Maintain one-meter distance with influenza infected person  
  • Do not hug or shake hands with influenza infected person  
  • If you get sick with influenza:  
    o Avoid crowds  
    o Stay home from work or school and limit contact with others to prevent infecting them.  
    o Cover your nose and mouth with tissue/clothes when you cough and sneeze.  
    o Dispose the used tissue properly in a trash bin. |
| 4  | Avian Influenza or Bird Flu           | • Travelers in affected countries should avoid contact with sick, dead or wild birds, and should avoid consumption of undercooked eggs, poultry or poultry products.  
  • Practice frequent hand hygiene  
  • Washing or use of alcohol rubs is recommended. If exposure to individuals with suspected H5N1 illness or severe, unexplained respiratory illness occurs, travellers should monitor their health and in case of fever with respiratory symptoms, urgently consult health professionals. Travelers should contact their local health providers or national health authorities for supplementary information. |
HIV & STIs

- The risk of acquiring a sexually transmitted infection can be prevented by abstinence from sex with occasional or casual partners during travel or reduced by safer sexual practices such as non-penetrative sex and correct and consistent use of male or female condoms. Condoms also reduce the risk of unwanted pregnancy. Latex rubber condoms are relatively inexpensive, are highly reliable and have virtually no side-effects.
- A man should always use a condom during sexual intercourse, each time, from start to finish, and a woman should make sure that her partner uses one. A woman can also protect herself from sexually transmitted infections by using a female condom – essentially, a vaginal pouch – which is now commercially available in some countries.
- To reduce the risk of acquiring hepatitis B and HIV infections, it is essential to avoid injecting drugs for non-medical purposes, and particularly to avoid any type of needle-sharing. Blood transfusions should be given only on the basis of strong (or “clear”) medical indications, to minimize the risk of transmitting infections such as syphilis, HIV and hepatitis B.
- Medical injections, dental care and piercing and tattooing using unsterilized needles or blades are also possible sources of infection and should be avoided.
- If an injection is needed, the traveler should try to ensure that single-use needles and syringes come from a sterile package.
- Patients under medical care who require frequent injections, e.g. diabetics, should carry sufficient sterile needles and syringes for the duration of their trip and a doctor’s authorization for their use.

TB

Messages on General Signs and Symptoms of TB
One should suspect TB infection if we see/experience following signs and symptoms:
- Cough for more than 2 weeks
- Coughing up blood in the sputum
- Chest pain, or pain while breathing or coughing
- Loss of appetite
- Unintentional weight loss
- Weakness or fatigue
- Sweating at nights
- Chills and fever

Messages for TB patients to prevent transmission to others
- Cover mouth and nose while coughing and sneezing.
- Avoid crowds and public gatherings.
- Wearing a mask in crowd during the first three weeks of treatment.
- Avoid smoking and drinking alcohol.
- Sputum should be disposed properly/safely as advised by the health workers.
Even if TB patient feels better with treatment, they should continue taking their medicines and complete the full course of treatment as advised by the health workers.

All close contacts of lung TB patients should be screened for TB once in every three months.

Messages for Diagnosis and Treatment of TB

- Cough for more than 2 weeks could be due to TB.
- Early diagnosis and treatment is the best method of prevention.
- It is very important to take TB medicines regularly as advised by the health workers.
- It is important to complete the full course of 6 to 8 months TB treatment to be cured.
- In case patients develop side effects to TB drugs, they should report to the health worker.
- Tuberculosis can be treated and cured if Directly Observed Treatment (DOT) is followed strictly.
- Family members of TB patients and community at large have greater role in ensuring the DOT for better outcome of the patients.
- If TB patient stops or takes medicines irregularly after four weeks of treatment, patient will develop resistance to the anti-TB drug/medicine resulting into MDR-TB (the drug will no more cure the TB infection).
- Every TB patient must complete the 6 months treatment course once it is initiated.
- A healthy diet is recommended while on TB treatment.

Messages on Multi Drug Resistance Tuberculosis (MDR-TB)

- Multidrug Resistant TB (MDR-TB) is a serious form of TB caused by defaulting initial treatment, non-compliance to treatment by patients and inadequate follow up of cases by health workers.

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<table>
<thead>
<tr>
<th></th>
<th>Malaria</th>
<th>Dengue</th>
</tr>
</thead>
<tbody>
<tr>
<td>8</td>
<td><strong>Precautions</strong></td>
<td>Protection against mosquito bites</td>
</tr>
</tbody>
</table>
|   | - Always try to avoid getting bitten by mosquitoes. The most common time of mosquito bites are at night between dusk and dawn.  
  o One sure way to avoid mosquito bites is to wear a mosquito repellent containing DEET  
  o Wearing light coloured, long-sleeved clothes when you’re outdoors  
  o Avoiding wearing perfume or cologne (some of these can attract mosquitoes)  
  o Preventing mosquitoes entering your accommodation  
  o Using a mosquito net at night-time (if mosquitoes are likely to be present)  
  - If you develop fever, always immediately seek medical attention in malaria risk areas and upon return from a malaria risk and up to 3 months (or, rarely, later). | - All travelers should be advised that individual protection from mosquito |

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bites between dusk and dawn is their first line of defence against malaria.
• Practical measures for protection are described in Chapter 3, in the section “Protection against vectors”.

11 Chikungunya
- No vaccine is available. Prevention and control are entirely dependent on taking steps to avoid mosquito bites and eliminate mosquito breeding sites.

To avoid mosquito bites
• Wear long sleeves and full-length clothes to cover the limbs.
• Use mosquito coils, repellents and electric vapor mats during the daytime.
• Use mosquito nets to protect babies, the elderly and those who rest during the day.
• Treat the nets and Curtains (cloth or bamboo) with insecticides to improve its effectiveness or hang the cloths treated with insecticide on the windows or doorways to repel or kill mosquitoes. Mosquitoes get the virus and become infected when they bite people who are sick with chikungunya; therefore, infected persons should also minimize exposure to mosquitoes.

12 Yellow Fever
- Yellow fever occurs in urban and rural areas of Africa and central South America. In jungle and forest areas, monkeys are the main reservoir of infection, which is spread by mosquitoes from monkey-to-monkey and, occasionally, to humans.
- Avoid mosquito bites; the highest risk of yellow fever transmission is during the day and early evening.

13 Japanese Encephalitis
- JE is mainly found in Indian sub-continent, SE Asia and China.
- The risk of diseases is particularly high in those involved in outdoor activities in rural areas.
- The primary prevention is avoiding mosquito bites
  o Use insect repellent
  o Wearing long-sleeved clothes when you’re outdoors
  o Avoiding wearing perfume or cologne (some of these can attract mosquitoes)
  o Preventing mosquitoes entering your accommodation
  o Using a mosquito net at night-time
- If you develop fever, always seek medical attention as soon as possible

14 Measles
- Measles is one of the most infectious diseases. It is spread by coughing, sneezing and close contact with the infected person. The symptoms of Measles is fever, rash, runny nose, cough & red eye.
- There is no specific treatment for Measles. Best way for prevention of Measles is by vaccinating with Measles vaccine.

15 Polio
- People travelling to Pakistan, Nigeria and Africa should receive one dose (2 drops) of oral Polio vaccine ideally one month before departure for prevention of Polio.