

## ANTI-MALARIAL PRESCRIPTION REQUEST

You are requesting a prescription for malarial prevention. After filling out the information, please leave this form with the Student Health Services to be processed. If we have any questions regarding your request, you will be contacted by phone or e-mail. If you are not contacted, you will be able to pick up your prescription or medication within 1 business day.

Before completing this form please review the Center for Disease Control website at <http://www.cdc.gov> regarding Traveler's Health and malaria prevention for up to date traveler's information and medication options to assist us in processing your request.

Below is listed drug information for the most common anti-malarial medications and an estimate of cost.

1. **Atovaquone/proquanil (Malarone)**

Directions to use: Take one tablet a day, start 1 to 2 days before travel to endemic area, during your visit, and for 7 days after you leave the area. Take with food or milk.

Potential Side Effects: Gastrointestinal upset, headache.

Contraindications: pregnancy and breast feeding, kidney impairment, allergic to medication.

Cost: approximately \$5.04/tablet

Not available at Student Health Services, we will write a prescription to fill at an outside pharmacy.

2. **Doxycycline**

Directions to use: Take one tablet a day, start 1 to 2 days before travel to endemic area, during your visit, and for 4 weeks after you leave the area. Take with a full glass of liquid and do not lie down for 1 hour.

Potential Side Effects: Gastrointestinal upset, sun sensitivity

Contraindication: Pregnancy, and allergic to medication.

Cost: approximately \$0.15/ tablet

Available to fill at the Student Health Services.

3. **Mefloquine (Larium)**

Directions for use: Take one tablet a week, start 1 week before travel to endemic area, during trip, and for 4 weeks after leaving area. Take on a full stomach.

Potential Side Effects: Gastrointestinal upset, headache, dizziness, anxiety, wild dreams, insomnia, visual disturbances; and rarely seizures, depression, psychosis.

Contraindications: Active depression, generalized anxiety disorder, schizophrenia, or other major psychiatric disorders, and allergic to medication.  
Cost: approximately \$12.42/ tablet (brand), \$10.59/tablet (generic) wholesale  
Not available at Student Health Services, we will write a prescription to fill at an outside pharmacy.

4. **Chloroquine (Arlen)**

Directions for use: Take one tablet a week, start 1 week before travel to endemic area, during trip, and for 4 weeks after leave area. Take on a full stomach.

Potential Side Effects: Gastrointestinal upset, dizziness, and itching.

Contraindications: Allergy to the medication.

Note: Some geographic areas have chloroquine resistant malaria and require Malarone, Doxycycline, or Larium for prophylaxis.

Cost: approximately \$ 6.04/ tablet (brand), \$4.04/ tablet (generic)

Not available at Student Health Services, we will write a prescription to fill at an outside pharmacy.

Name: \_\_\_\_\_

S.S. or ID #: \_\_\_\_\_ Date: \_\_\_\_\_

Phone #: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Area of Travel: \_\_\_\_\_

How long will you be in this area? \_\_\_\_\_

When are you leaving to go to this area? \_\_\_\_\_

Do you have a history of any medical problems or allergies? \_\_\_\_\_

If yes, please explain: \_\_\_\_\_

(Women) Is there a chance you are pregnant or breast feeding? \_\_\_\_\_

Please write your medication choice that best fits your needs. \_\_\_\_\_

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(clinic use only)

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Clinician order and signature: \_\_\_\_\_

Date: \_\_\_\_\_ Filled by: \_\_\_\_\_