Travel Screening of Pediatric Patients for International Travel, High Risk Areas, and Isolation

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International travel is common among all age groups. Many patients lack adequate primary care or access to specialized pre-travel consultations and may seek pre-travel counseling in the emergency department (ED). This policy statement is to help guide emergency physicians in this situation but should not be interpreted as mandating travel screening or making it the standard of care for emergency physicians to provide this care.

Only half of all children and a minority of children visiting family seek out pre-travel consultation and advice from any source. Children visiting family are a group that is at the highest risk for contracting travel related diseases for a variety of epidemiological reasons. As this represents an opportunity to mitigate risks associated with travel and to promote the health and safety of vulnerable children, the American College of Emergency Physicians (ACEP) supports the ability, but not the requirement, of emergency physicians to provide targeted pre-travel screening and resources to pediatric patients in the ED.

Risk assessment should include a discussion of planned travel-related activities and should take into account age-specific needs. Key areas to consider include infection prevention and prophylaxis, as well as vehicle and water safety. Routine vaccinations should be emphasized in addition to referrals for specialized travel vaccines.

Targeted emergency department pre-travel screening should not replace a comprehensive pre-travel evaluation, and families planning high-risk travel should be referred to specialized travel medicine services whenever feasible. Emergency physicians are encouraged to familiarize themselves with local resources for vaccination and prophylaxis and to have information for appropriate specialty travel medicine centers for referral when needed. As travel guidelines to specific countries can change, reference to the CDC Yellow Book is encouraged: