

## **Travel Letters**

When traveling with clotting factor, the person with the bleeding disorder – in the case of a child, the parent – should bring a prescription from their doctor and a travel letter from the doctor or hemophilia treatment center (HTC). The letter should contain a brief description of the person's condition and the need for the medication.

## **Sample Travel Letter**

Date:				
RE: Travel Letter				
To Whom It May Concern:				
(Insert name of person with bleeding disorder) (D	oate of birth)	has	_ (insert diagnosis)	·
This is a blood clotting disorder that can cause painful and episodes are treated with IV infusions of clotting factor.	debilitating b	pleeding episodes	into joints and i	muscles. Bleeding
The patient with this bleeding disorder treats bleeding epis	odes with a	clotting factor con	centrate (Ins	sert brand name)
Because (Insert name of person with bleeding disorder) has the dilatant water.	nis bleeding o	lisorder, he/she m	nust travel with o	clotting factor and
Infusion supplies such as syringes, needles, and tournique his/her person). Clotting factor should be maintained at roccooler or a container with cold packs or in a refrigerator (36 exceeds these temperatures, there is a high risk of it losing	om temperatu 6°F to 46°F).	ire (not exceeding Clotting factor sh	g 86°F) and, ide ould never be fr	ally, be packed in a
Please note that this special medication consists of multiple We recommend that this medication stay with the patient d and temperature fragility and because the patient might ne Being unable to quickly administer this medicine can be life.	luring travel, ed it urgently	including planes, r for a bleeding ep	trains, or cars, b pisode, which ca	pecause of its glass in occur at any time.
The person with the bleeding disorder also should use ami antifibrinolytic drug is used to maintain clots and to prevent	•			• .
Please feel free to call (Insert name of hemophilia treatment cer	nter) at	(Phone number)		_for further assistance.
Sincerely,				
(Insert name of doctor)		(Insert title)		
(Insert name of hospital/hemophilia treatment center)				····
(Insert name of nurse)		(Insert Title)		