



FIT TO TRAVEL FORM
TRANSFER /FLIGHTS / COURT / RELEASED
(Circle as appropriate)

Date of Departure: 26/05/17	
Date and Time seen or reviewed:	25/05/17@1337

Name of Detainee	Mr D68
Date of Birth	DPA
Reason for Departure	Flight

<u>Medical Condition</u>	
Asthma	NO
Diabetes	NO
Epilepsy	NO
Psychiatric Condition	NO
Risk of Self-Harm or Suicide	NO
Mobility Concerns	NO
Sensory Impairment	NO
Communication Problems	NO
Soft tissue Damage	NO

<i>If YES to any of the above please specify below</i>	
Others	
Current Medication	
Medication placed *Circle as appropriate	In Luggage / In-possession / Given to escorts

I Kevin McPhoy have assessed that detainee **D68** is Fit to travel to the above stated destination (Circle as appropriate)

If the health status of Detainee changes, it will be the responsibility of the discharging officer to request a re-assessment by health care staff.

<u>Nurses name and signature</u>	<u>Receiving Medical escort name and signature</u>
Name: Kevin McPhoy	Name:
Date: 25 May 2017	Date:
Signature:	Signature: