**Office of Global Health Education**

**Student Travel Handbook**

**Overview**

This guide is designed to help Weill Cornell students prepare for their international electives. It includes useful checklists and tips before students depart, along with important information on resources, requirements, and safety protocols. The objective of this guide is to make your experience as enjoyable and stress-free as possible! Being uninformed may be hazardous to your health!

**Please note:** OGHE and the International Committee will not approve travel to countries in which there is ongoing warfare or a travel advisory/alert greater than Level 2 set by the US State Department.

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**OGHE & International Committee Requirements**

1. Financial Aid Forms
   * **First Year Students** – Fill out and have your advisor sign the required financial aid forms. The financial aid forms can be obtained from the Office of Financial Affairs. Ask for work-study forms.
   * **All Other Students** – Fill out and have your advisor sign the required independent elective form, which can be obtained in the Registrar’s office located in Room C-114.
2. Read and sign the Weill Cornell Agreement and Release Form and the Consent Form (pages 3-7). **No reimbursements will be made to any student who leaves the country without signing and submitting these forms.**
3. Reimbursements – Keep all airline receipts (i.e., proof of purchase of tickets) and travel itineraries. Upon return, submit them along with a signed payment requisition form (page 8) and a completed [W9](https://www.irs.gov/pub/irs-pdf/fw9.pdf) form to Maritza Montalvo either in person (office located at 402 East 67th Street C-2) or via email (mmontalv@ med.cornell.edu). Please download and complete from <https://www.irs.gov/forms-pubs/about-form-w-9>.
4. Evaluation Form – **Fourth Years Only** – Complete the Elective Student Assessment Form if you would like to receive credit for the elective. The form is on page 9.
5. Post Trip Summary – A post-trip summary of your experience **is required** before reimbursement will be authorized. Submit the write-up to Maritza Montalvo (mmontalv@ med.cornell.edu). We would like to receive photos to post on our website and Twitter account. Please submit to [globalhealthTA@med.cornell.edu](mailto:globalhealthTA@med.cornell.edu). See detailed guidelines on pages 10-11.
6. Student Poster Presentation – You are required to prepare a poster to be shown at an International Reception (first year in October; all others in May). Guidelines and a sample outline for the poster can be found on page 12.

**Office of Global Health Education**

**Agreement & Release for Overseas Travel**

**All students are required to complete and sign the following forms and return it to the Office of Global Health Education, 402 East 67 Street, C-2, New York, NY 10065, prior to departure for travel and/or study abroad.**

Participant’s Name

Local Address

Local Address cont’d

Telephone

Email Address

Travel Dates: Departure Date/ Return Date

Elective Dates: Start Date/ End Date

**Emergency Contact Person:**

Name

Telephone

Location

WCMC does not discriminate against individuals based on physical or mental illness or related disability. However, if a student has a history of any medical problems during the previous two years, consultation with your personal physician is recommended prior to departure to discuss the potential stress and difficulties attendant in traveling and studying overseas.

1. Participation in the above program is entirely voluntary and will require transportation to and habitation in the country of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and may involve risks relating to or arising out of program activities.
2. Participant understands that there are risks inherent in such activity and acknowledges that he or she has been apprised of such risks (to the extent such risks are known to WCMC), and agrees to assume all risks and responsibility for his or her health, safety, and property while participating in this program.
3. Participant, and Participant’s heirs and assigns, release Cornell University, WCMC, their officers, trustees, overseers, agents and employees from any and all liability, damage or claim of any nature whatsoever arising out of, or in any way related to participation in the overseas program, including, but not limited to, any medical authorization given to Cornell or WCMC, acts of God, acts or omissions of any third parties (including but not limited to common carriers, hotels, restaurants, or other firms, or agencies).
4. Participant agrees to indemnify and hold Cornell University, WCMC, their officers, trustees, overseers, agents and employees harmless from any damage or liability incurred as a result of any illness or accident Participant may suffer, including the costs of any medical care, or any injury or damage to any person or property of others that the Participant may cause, and from any financial liability or obligation that the Participant may personally incur, while participating in the overseas program.
5. Participant understands that the WCMC reserves the right to make cancellations, changes, or substitutions in cases of emergency or changed geopolitical, natural, or health emergencies, or in the interest of any group with which the Participant may be traveling or collaborating. Should WCMC cancel the program, a refund for cost of the airfare will be made to the Participant.
6. Participant understands the WCMC requires that the Participant be covered by appropriate accident and medical insurance and that he or she be financially responsible for such expenses. Participant also agrees that if he or she is planning to operate a motor vehicle during his or her participation, Participant must obtain liability and collision insurance that will cover him or her in the applicable foreign countries. WCMC recommends that Participants insure their property from loss and theft.
7. Participant understands and agrees that all students are subject to Cornell and WCMC regulations (including, but not limited to, the WCMC Standards of Conduct), the host program’s and/or university’s laws, rules, regulations, program guidelines, and laws of the host country. In the event of violation of any of the foregoing, or any other behavior, which is detrimental to the Participant, other students, or the program, the director of the program shall have the right to dismiss the Participant from the program. WCMC and Cornell are not responsible for the defense of a Participant accused of a violation of the laws, regulation, rules or customs of the host country, and is not responsible for the payment of any fines or other penalties resulting from such violations.
8. Participant pledges and agrees to conduct him or herself in a manner that reflects favorably on WCMC and the United States.
9. Participant understands that the manufacture, distribution, possession, use or sale of controlled substances as defined by New York State or Federal law, or the laws of the host country is prohibited during travel, study and work abroad. Participant understands that he or she will be directly subject to the laws and legal procedures as apply to the use, possession and distribution of illegal drugs as enforced by local authorities.
10. Participant further understands and agrees that he or she is solely responsible for ascertaining the lawful age for the possession or consumption of alcoholic beverages in the host country and for his or her conduct in compliance with local laws as enforced by local authorities.
11. Participant agrees that he or she will be responsible for all medical and related expenses incurred while participating in the program. For medical and accident insurance, participant will be insured under:

Name of Insurance Company (if not Medical School)

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Participant certifies that he or she is at least 18 years of age or older.

I have read and understand the above provisions and agree to be bound by the provisions.

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Signature

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Print Name Date

**Office of Global Health Education**

**Consent Form**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ understand that there are risks inherent in doing an elective abroad and I have been apprised of such risks and agree to assume all said risks and responsibility for my health, safety, and property while participating in this program. I, and my heirs and assigns, release Cornell University, WCMC, their officers, agents, and employees from any and all liability, damage or claim of any nature whatsoever arising out of, or in any related to my participation in this program, including, but not limited to, the medical authorization given to WCMC, acts of God, acts or omissions of any third parties (including but not limited to common carriers, hotels, restaurants, or other firms or agencies), except such as may directly result from the negligence of WCMC, its offices, agent, or employees. I agree to indemnify and hold Cornell and WCMC harmless from any damage or liability incurred by Cornell and/or WCMC as a result of any illness I may suffer, including the cost of medical care, or any injury or damage to the person or property of others which I may cause, or from any financial liability or obligation which I may personally incur, while participating in this program.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Name

**Office of Global Health Education**

**The following to be executed if participant will travel to a country for which the United States Department of State has issued a travel advisory warning:**

I further understand and agree that if I am traveling to a country for which the U.S. Department of State has issued a travel warning. I am responsible for reviewing the Consular Information Sheets for that country available on the U.S. Department of State website (<http://www.travel.state.gov>), am familiar with the conditions in that country, understand the potential hazards, and have voluntarily made the decision to travel to such country.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Name

Macintosh HD:Users:sejaltest:Downloads:Payment_Req_FormGForce.pdf

WEILL CORNELL MEDICAL COLLEGE

**Elective Student Assessment**

**\*Due no later than 4 weeks upon return to WCM**

NAME OF STUDENT *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* Indicate your Class*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

ELECTIVE NUMBER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ELECTIVE TITLE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

LOCATION: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DATES OF ROTATION: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ACADEMIC PERFORMANCE **N/A Poor Satisfactory Good Superior**

1. Knowledge of relevant content \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. Ability to utilize relevant basic science knowledge \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. Ability to reason \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. Ability to read & study independently \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CLINICAL PERFORMANCE

1. Ability to obtain an accurate history \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. Ability to perform competent physical examination \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. Ability to give a concise presentation \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. Ability to formulate differential diagnosis \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PROFESSIONALISM

1. Acceptance of feedback \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. Motivation \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. Reliability \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. Professional demeanor \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5. Teamwork \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

6. Patient rapport \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

7. Relationships with faculty \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

8. Relationships with other health professionals \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Narrative Comments Required** (please use reverse if necessary):

**Overall Grade:** Pass\_\_\_\_\_\_ Fail\_\_\_\_\_\_ Reported by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date

(signature of evaluator)

Name/Title:

(type or print)

**\*\*These forms should be completed and returned by a faculty member via email or hardcopy.\*\***

**Please return completed form to:**

**Registrar, Weill Cornell Medical College**

**Office of Student Services**

**1300 York Avenue, Room C-114, New York, N.Y. 10065**

**registrar@med.cornell.edu**

**DO NOT FAX THIS FORM**

**Guidelines**

**Summary Write Up**

**Post - International Applied Experience**

Each student participating in an international applied experience that is approved by the International Committee and funded by the Office of Global Health Education is required to submit a short report (500-1500 words) and up to three photos upon return to Weill Cornell. The objective of this write up is to have the student summarize the professional and personal impact of the experience as well as to serve as a guide for future students who are considering doing the same or similar elective at the host organization. The photos will be used for the website, international reception brochures and slideshows, and other events to highlight student participation in international experiences.

**Those students, whose international experience focused on a research project, please follow the guidelines delineated in sections I, II and IV.**

**Those students, whose international experience focused on clinical service, please follow the guidelines delineated in sections I, III and IV.**

1. General Description - Describe the general concept of your project/activity and the specific learning objectives. Include in your write up:

* Name and location of host organization
* Host Mentor
* Date of the elective
* When elective was taken and for how long
* Responsibilities; i.e., description of what you did

1. Research Projects (clinical, bench, quality improvement, surveys, etc.) – If you conducted research include the following sections:

* Was IRB approval required for your project?
  + Yes
  + No
  + Not applicable
* Background and Purpose of Study
  + Identify gaps of knowledge addressed by your project
  + Explain the purpose of your study and how your work relates to the broader field of global health
* Objectives; i.e., What were you hoping to accomplish in this project?
* Methods; i.e., Provide a clear description of study population and data collection/analysis
* Results & Conclusions
  + Report and discussion of results (can be qualitative or quantitative)
  + Discuss the impact of project/study on the study population
  + Discuss future directions for your work, questions that you would like to pursue further

1. Clinical Observation/ Rotation – If you participated in clinical observation/ rotation/ community service/ service learning project, include the following sections:

* Background:
  + Discuss the unmet health needs in the community.
  + Discuss the types of clinical/ service activities in the community.
* Objectives
  + What were you hoping to accomplish in this project?
  + What were you hoping to learn from this experience?
* Present a description of the following:
  + Local community you served / patient population
  + Roles of care providers, and your roles within “the team”
  + Healthcare resources on site, regionally, etc., including the community organizations you worked with
  + Your clinical or service responsibilities – include scope and depth

1. Personal Impact

* How did your experience meet or not meet your learning objectives?
* Describe the best aspects about the experience.
* Discuss the obstacles and opportunities that emerged during your applied experience, and how you handle these situations.
* Describe the impact your experience has on personal and professional development, including future career goals.
* List three remaining questions you still have that you would like to pursue further.
* What advice would you give future students interested in doing a similar project at the host organization?

**Guidelines**

**International Reception Poster**

What should my Poster look like?

* The poster should look professional as if you are preparing a poster for a professional scientific conference.
* The poster should contain the following sections. (This is a recommend outline.)
  + Name & Class Year
  + Title of Research Study and Site of Program
  + Background
  + Purpose of Project
  + Methods (Describe Study Design and Sample)
  + Student’s Role (Your role in data collection, analysis, & other)
  + Results (Include tables, figures, etc.)
  + Conclusions
  + Photos (not tourist photos please!)
  + Acknowledgements (I.e., WCM and host mentors; funding source)
  + Optional: Contact Information (Program, Student, Host Mentor)
* Poster dimensions should be approximately 30 x 40
* The Poster should not include personal pictures, pictures of faces of patients, scraps of paper tacked on to a poster board.
* You can go to Weill Cornell Duplicating Department’s Print Shop or use an online site to prepare your Poster. OGHE will provide the actual easel boards, tacks, and tape. OGHE cannot reimburse you for the cost of preparing the Poster.
* Pages/photos may be printed in color.
* Students who traveled together to the same site may prepare a joint poster.

**Cancellation Policy for International Electives**

The organization and preparation for an international elective requires significant administrative resources and time. As the demand for spots often exceeds the supply, it is important that we optimize our use of these scarce resources. Students who wish to take an international elective must submit an application for approval to OGHE (see application form on our website). Written notification of approval will be sent via email to the student. **Students will have 30 days from the date of approval notification to confirm or cancel the international elective.**  This must be done in writing to the Director of the Office of Global Health Education, Madelon Finkel, Ph.D, maf2011@med.cornell.edu. If the student does not respond after 30 days from the date of the approval letter, he or she will be deemed to have declined the opportunity to take the elective and the elective will be made available to another student.

Once a student has confirmed his or her intent to accept the opportunity for an approved international elective, he or she is expected to keep that commitment. If a student believes that he or she needs to cancel an international elective, he or she must provide a written request with justification to the Director of the Office of Global Health Education. Compelling reasons for cancellation of a prior commitment to an international elective would include, but are not limited to, a personal illness or a major illness in a close family member (child, sibling, spouse, partner, or parent). **Students who cancel the elective and are deemed to not have provided a compelling reason for their cancellation will be required to pay $100 to cover the administrative costs incurred in preparing for that elective.**

**Travel Logistics**

* Try to purchase your tickets 3 months in advance.
  + Useful websites: Google Flights, Kayak, Expedia, Priceline, Travelocity, STA Travel, StudentUniverse, Yapta
  + Also check individual airline company's website.
  + Some airlines offer refunds. Yapta.com can track and notify you about changes in price.
  + Consider purchasing flight insurance.
* Obtain up-to-date travel documents: passports and visas
  + If your passport is due to expire within six months of your travel dates, you must renew before you leave the country. Failure to do so will result in your being denied entry to the host country.
    - <https://travel.state.gov/content/passports/en/passports.html>
  + Check the State Department website for country specific details (Visa requirements, currency, health conditions, etc.):
    - <https://travel.state.gov/content/passports/en/country.html>
  + Travel on a tourist Visa. Be sure your passport has a sufficient number of blank pages for visas and country stamps.
  + Make copies of passport, health insurance, credit cards, and other important documents, and keep these safely apart from your passport and credit cards.
* Obtain necessary vaccinations.
  + Visit the CDC website for required or recommended immunizations/ vaccinations. Unfortunately OGHE cannot reimburse students for these immunizations.
    - <http://wwwnc.cdc.gov/travel/destinations/list/>
  + The Travel Medicine clinic at Weill Cornell provides vaccinations/immunizations, but there is a charge.
* Obtain malaria prophylaxis if necessary
  + CDC website lists malaria endemic areas.
  + Strategies for combating malaria include: medical prophylaxis, Mallarone (curative), mosquito nets, bug spray and repellants.
  + Buy a mosquito net. Sources include REI.com, EMS.com, or Amazon.
* Connect with students who have travelled to your destination before for firsthand perspective and tips.
  + Check out the WCMC Global Health Project Database to find contact information of students who have taken international electives.
    - <http://weill.cornell.edu/globalhealth/mappage.html>
* Contact your host country mentor to finalize your schedule and inquire about housing options.
* Learn about the area you are working in
  + Buy a guidebook! Check out Lonely Planet (great pictures and cultural background of cities and attractions), Let's Go (great resource for hostel names and cheap restaurants/bars) or RoughGuide (consider copying pages that are specific for your destination).
  + A Student's Guide to International Health and Funding
    - Under Publications: <http://www.amsa.org/advocacy/action-committees/global-health/international-health/>
* What to pack?
  + First Aid Kit: Insect repellent, sunscreen, Purell, Band-Aids, pain medication (Tylenol, Advil), moleskin, tweezers, anti-diarrheal medication (Pepto-Bismol, Imodium), feminine hygiene products.
  + Prescription medications with a copy of prescription/letter from your doctor.
  + Put all valuables (prescription medication, camera, computer, jewelry, cash, etc.) in your carry-on bag, never in your checked luggage.
  + Label all luggage.
  + Note: most airlines charge for oversized or extra bags.
* Get to the airport on time! Some options to JFK & Newark Airports include:
  + Take the E train from Penn Station to Jamaica Station. From Jamaica, take AirTrain to JFK. AirTrain stops at all terminals.
  + Airport shuttle bus to JFK and Newark leaves from Port Authority.
  + Take NJTransit Train from 34th Street Penn Station to Newark Liberty International Airport
  + Take an Uber or taxi.

**Be Prepared for Emergencies**

* The Need for a Crisis and Incident Management Plan
  + Regardless of where one may be traveling, the need for an emergency evacuation plan cannot be more strongly stressed. Political strife and instability can occur anywhere in the world and at any time. As such, travelers should have an emergency plan in place before they leave the country.
  + Weill Cornell Medicine offers travel assistance to all students traveling on University-sanctioned trips.
  + Weill Cornell Medicine has international resources available for all of its travelers at: <https://riskmanagement.weill.cornell.edu/travel>.
  + Further, all faculty, students and staff are automatically covered under the medical & travel security services company “**International SOS**” plan while they travel on college business. There is no cost to the traveler. A full range of medical and emergency services is provided, including onsite emergency medical assistance services, medical evacuation and repatriation services, security and political evacuation services.
  + Each student is responsible for downloading the [International SOS card](https://riskmanagement.weill.cornell.edu/sites/default/files/wcm_isos_membership_card_2020.pdf). The student should keep the card as well as their website URL address in a safe place when traveling abroad. Students are highly encouraged to download the app to their mobile devices and using the WCMC policy number to log in.
  + More information about International SOS can be found at their website: [www.internationalsos.com](http://www.internationalsos.com). WCM’s membership policy number is **11BYSG788939. In case of emergency, travelers can call: + 1 215-942-8478.**
  + If you need further assistance, please call WCM Risk Management at 646-962-7683.
* Know what to do in an emergency!
  + Contact the Office of Global Health Education. In case of an emergency (including robbery, illness, lost documents), contact Dr. Madelon Finkel via email at maf2011@med.cornell.edu or cell at (914)484-0451.
  + Know the number and location of the U.S. Embassy and consider checking in with the embassy or consulate upon arrival to the host country.
* Water Safety
  + Better safe than sorry! Avoid fresh fruits/vegetables that were likely washed in local water. Only eat fruits and vegetables with protective skin (i.e., bananas}.
  + Avoid mixed juice drinks, since they were also likely mixed with water.
  + Avoid ice cubes in drinks.
  + Consider buying water purification tablets, if traveling to rural areas.
  + Ask about local ways of disinfecting water (filters and UV systems}.
* Food Safety
  + Eating street food can be one of the favorite elements of a trip. It can remain a favorite element if a few considerations are made.
  + Choose freshly fried and well-cooked foods.
  + Some diseases and bugs don't get killed when food is simply reheated.
  + Use common sense when eating from street/food vendors.
* General Health
  + Seek medical care if you are not well.
  + Practice safe sex; use a condom.
  + An enjoyable experience is the goal.
  + Be smart about traveling and don't take unnecessary risks while abroad.

**Emergency Protocol & Procedures**

**Sexual Assault and Rape**

Students traveling abroad may be a victim of sexual harassment or sexual assault. While sexual harassment (ranging from whistling, suggestive comments, standing too close, or unwelcome sexual advances) and sexual assault (e.g., mugging, sexual assault, rape) are rare, they can and do occur.

If you are a victim of sexually harassment, quickly get away from the individual/individuals harassing you. Call and/or scream for help. Screaming will probably scare away the individual(s) and will usually draw a crowd.

If you are involved in a sexual assault or rape while traveling abroad, the following guidelines should be followed:

* Immediately contact your WCM mentor as well as your host mentor to report the incident. If you are not comfortable talking about the incident with your host mentor, be sure that you contact your WCM mentor. Seek medical attention immediately.
* In addition to contacting your WCM mentor, also contact OGHE to report the incident (Dr. Finkel’s cell phone number: 914-484-0451; email: maf2011@med.cornell.edu).
* **Do not** contact the local police unless your host mentor advises you to do so.
* Consider contacting the local United States Embassy or Consulate to report the assault or rape.
* If raped, seek emergency treatment for sexually transmitted infections (STIs) and follow instructions regarding HIV prophylaxis, pregnancy prevention, and prevention of STIs.
* If raped, or if the sexually assault results in injury, consider returning to the United States for emergency medical care and counseling. Student health or the NYP emergency department can provide you with appropriate care and counseling. If you prefer to seek care from your own physician, do so. Student Health Services can be reached at 646-962-6942.
* International SOS will help arrange transport back to the United States. Contact them 24/7 by calling + 1 215-942-8478 (WCM Membership number: 11BYSG788939).

**Emergency Protocol & Procedures:**

**Prophylaxis after HIV Exposure**

The prevalence of HIV infection is high in most countries around the world. Potential risks to medical students doing electives would include injury from a sharp, mucous membrane exposure to blood and body fluids, exposure to blood or body fluids following an accident on the road, sexual exposure, and exposure during medical care involving injections or blood transfusions. To date, there are no reports of medical students becoming HIV positive during an elective abroad; however, it is prudent to take appropriate precautions.

Students engaging in activities where there is a reasonable risk of exposure to HIV should inquire with their sponsor whether or not they will have access to Post-exposure Prophylaxis (PEP) and should receive training in the local exposure protocol once they arrive on location. Otherwise students are advised to travel with their own supply of an appropriate regimen currently recommended to protect against HIV infection. Recommended regimens are updated regularly. You can consider donating the medication to your medical host if they are not used. Students may discuss appropriate PEP regimens with their personal physicians or set up a visit with Weill Cornell Medicine Student Health Services.

If significant exposure to blood or bodily fluids occurs you should immediately follow local reporting and testing procedures at your medical host if these are available. Otherwise, if the source patient cannot be tested OR if the source patient has HIV, you should immediately start your prophylactic regimen and return to the medical college for evaluation and treatment. You should continue taking the prophylaxis until your re-evaluation. Notify Weill Cornell Medicine Student Health Services as soon as you are able to do so, for reporting and evaluation. [*Student Health Services*](https://medicaleducation.weill.cornell.edu/student-resources/student-health-services)*: 646-962-6942.*



