

# Have you recently traveled out of the United States?

# ¿Usted ha viajado afuera de los Estados Unidos recientemente?

**Please inform your health care providers of any recent travel outside of the United States, including:**

*Por favor informe a su doctor primario si ha viajado fuera de los Estados Unidos recientemente incluyendo:*



**Africa** including Guinea, Senegal, Sierra Leone, Liberia, Nigeria and Democratic Republic of Congo

**Africa** incluyendo Guinea, Senegal, Sierra Leona, Liberia, Nigeria y la Republica Democrata de Congo

**The Middle East** including the Arabian Peninsula

**El medioeste** incluyendo la Peninsula da Arabia