



PlaquePsoriasis.com

THE ULTIMATE TRAVEL CHECKLIST

Trip Name: _____

BEFORE leaving:

- | | | |
|--|--|---|
| <input type="checkbox"/> Check medicine supply* | <input type="checkbox"/> Research pre-boarding process* | <input type="checkbox"/> Check weather forecast |
| <input type="checkbox"/> Get doctor's note signed* | <input type="checkbox"/> Research luggage policy | <input type="checkbox"/> Charge electronics |
| <input type="checkbox"/> Doctor's contact info | <input type="checkbox"/> Check if refrigerator in hotel
(for biologics) | <input type="checkbox"/> Print up itinerary |
| <input type="checkbox"/> Emergency contact info | <input type="checkbox"/> Check ID's expiration dates | <input type="checkbox"/> Check in for flight online |
| <input type="checkbox"/> Pharmacy contact info | <input type="checkbox"/> Arrange pet sitter/house sitter | <input type="checkbox"/> Set alarm |
| <input type="checkbox"/> Order/Pick up RX | <input type="checkbox"/> Water plants | <input type="checkbox"/> _____ |
| <input type="checkbox"/> Copy RX and Doctor's
note for airport* | <input type="checkbox"/> Hold mail | <input type="checkbox"/> _____ |
| <input type="checkbox"/> _____ | <input type="checkbox"/> Pay bills in advance | <input type="checkbox"/> _____ |
| <input type="checkbox"/> _____ | <input type="checkbox"/> _____ | <input type="checkbox"/> _____ |
| <input type="checkbox"/> _____ | <input type="checkbox"/> _____ | <input type="checkbox"/> _____ |

**For longer/international trips, check supply and bring a few extra days of dosage. You may need to contact insurance company and pharmacy for extra supply approval. Also, a medical note may be required to transport some medications, needles, etc.*

PACKING LIST

*As you put these items into your suitcase, simply check it off the list
Note: to reduce the travel stress, it may be better suited to pack a few days in advance (vs. the night before)*

- | | | |
|---|---|--|
| <input type="checkbox"/> Jacket | <input type="checkbox"/> Facial cleanser | <input type="checkbox"/> Camera |
| <input type="checkbox"/> Jeans | <input type="checkbox"/> Shampoo/Conditioner | <input type="checkbox"/> Headphones |
| <input type="checkbox"/> Tops | <input type="checkbox"/> Hair products | <input type="checkbox"/> Phone |
| <input type="checkbox"/> Dress outfit | <input type="checkbox"/> Hair dryer* | <input type="checkbox"/> Electronic chargers |
| <input type="checkbox"/> Sweatshirt/loose top | <i>*Most hotels have hair dryers;
may not be needed</i> | <input type="checkbox"/> Wallet |
| <input type="checkbox"/> Undergarments | <input type="checkbox"/> Moisturizer | <input type="checkbox"/> Identification |
| <input type="checkbox"/> Socks | <input type="checkbox"/> Body lotion/cream | <input type="checkbox"/> _____ |
| <input type="checkbox"/> Comfy shoes | <input type="checkbox"/> Deodorant | <input type="checkbox"/> _____ |
| <input type="checkbox"/> Rain gear | <input type="checkbox"/> Toothbrush/Toothpaste | <input type="checkbox"/> _____ |
| <input type="checkbox"/> Wide rim hat | <input type="checkbox"/> Floss | <input type="checkbox"/> _____ |
| <input type="checkbox"/> Sunglasses | <input type="checkbox"/> Razor | <input type="checkbox"/> _____ |
| <input type="checkbox"/> Watch | <input type="checkbox"/> Shaving cream | <input type="checkbox"/> _____ |
| <input type="checkbox"/> SPF clothing | <input type="checkbox"/> Sunscreen | <input type="checkbox"/> _____ |
| <input type="checkbox"/> _____ | <input type="checkbox"/> After-sunscreen lotion | <input type="checkbox"/> _____ |
| <input type="checkbox"/> _____ | <input type="checkbox"/> Lip balm | <input type="checkbox"/> _____ |
| <input type="checkbox"/> _____ | <input type="checkbox"/> Tweezers | <input type="checkbox"/> _____ |
| <input type="checkbox"/> _____ | <input type="checkbox"/> Nail clippers | <input type="checkbox"/> _____ |
| <input type="checkbox"/> _____ | <input type="checkbox"/> Glasses/contacts | <input type="checkbox"/> _____ |
| <input type="checkbox"/> _____ | <input type="checkbox"/> Hand sanitizer | <input type="checkbox"/> _____ |
| | <input type="checkbox"/> Soft washcloth/towel | <input type="checkbox"/> _____ |

IMPORTANT

Put medications in carry on luggage

Enjoy Your Trip!