



# OSTOMY TRAVEL CERTIFICATE

## CHINESE (simplified)

Please complete in BLOCK CAPITALS

Name: ..... Doctor/Nurse Name: .....

Address: ..... Surgery Address: .....

.....,.....

.....,.....

Passport No: .....

Signature: ..... Signature: .....

Date: ..... Date: .....

### To whom it may concern

This is to certify that the certificate holder named has had a surgical operation which makes it necessary for him/her to wear a bag attached to their abdomen. This bag is to collect excretion from the bowel or bladder and must be worn at all times. Do not examine or remove this bag unless a qualified medical practitioner is present. Unqualified interference with the bag may cause leakage, and great discomfort and embarrassment to the wearer. The bag may be supported by a belt; if so, this may have metal parts that register on a metal detector.

NB: Should there be need to examine the appliance, a qualified medical practitioner must be present – please assist the certificate holder if this is necessary.

The certificate holder will be carrying medical supplies in hand luggage – this includes extra appliances. It is essential that these remain intact and within the possession of the certificate holder at all times.

*Please be sympathetic to the card holder and allow him/her speedy progress. Thank you for your assistance.*

### 敬启者

这是为了证明所述的证书持有者进行了外科手术，这使得他/她必须佩戴附在其腹部的袋子。这个袋子用于收集肠道或膀胱的排泄物，必须始终穿着。除非有合格的医生，否则不要检查或取出此包。对袋子的不合格干扰可能导致渗漏，并且给穿着者带来很大的不适和尴尬。袋子可以用皮带支撑;如果是这样，这可能有金属部件在金属探测器上注册。

注意：如果需要检查器具，必须有合格的医生在场 - 如有必要，请协助证书持有者。

证书持有人将携带手提行李的医疗用品 - 这包括额外的器具。至关重要的是，这些保持完整并始终由证书持有者持有。

请同情持卡人并让他/她快速进步。谢谢您的帮助。