

Itinerary

Round Trip: United States → Mongolia → United States

Health Concerns Summary

The following may pose a risk or require preventive measures based on this itinerary. See the report sections below for details.

- Vaccine-Preventable Diseases: COVID-19, hepatitis A, influenza, rabies, tick-borne encephalitis, typhoid fever
- Other Diseases: anthrax disease, brucellosis, hepatitis C, leptospirosis, Lyme disease, plague, sexually transmitted infections, travelers' diarrhea, tuberculosis, viral hemorrhagic fevers

Current Health Bulletins

Influenza

Mongolia

Seasonal Influenza; Growing Mismatch of A(H3N2) Vaccine Strain

Updated Jan 23, 2026 (Posted Oct 20, 2025)

Northern Hemisphere seasonal influenza rates have moderately increased in Japan and South Korea and moderately decreased in Canada, China, Europe, Southeast Asia, and the US since the last report. As of epidemiological week (EW) 1 (January 4-10) in 2026, seasonal influenza activity is above the average in Canada and China; above the baseline in the US; and below the average in Europe, Japan, South Korea, and Southeast Asia. In vitro antigenic and serological analyses show that the current vaccine formulations are poorly matched to the predominant circulating strain of A(H3N2), with a mismatch of 92% in Canada (84% of all isolated strains), 91% in England (87% of all isolated strains), and 96% in the US (85% of all isolated strains). The vaccine formulations remain well-matched to circulating A(H1N1) and B/Victoria strains in North America, Europe, and East Asia, and A(H3N2) in Europe and East Asia.

Despite a vaccine mismatch against A(H3N2), early estimates suggest that influenza vaccination continues to provide protection against hospitalization (72%–75% for children and 32%–39% for adults) and protection against clinical disease at the primary care level (52% for children and 57% for adults). For additional information, see the full Northern Hemisphere Seasonal Influenza report.

Yellow Fever

Requirement Information (for entry)

Is yellow fever vaccine an official entry requirement for this itinerary?

NO. An official certificate showing vaccination is not required for entry by any country on the entered itinerary sequence, but view full details and see "YF Requirement Table" if there are additional transited countries.

Visa application: Proof of YF vaccination may be required for certain visa applicants. Travelers should contact the appropriate embassy or consulate with questions and, if it is required for their visa, carry the YF certificate with their passport on the day of travel.

Yellow Fever Requirement Table for this Itinerary

The following values result in the "NO" requirement result shown above (based on a round trip with United States as the home country):

Yellow Fever Requirement Table				
Country	Transm. Risk	Required if Coming From	Applies to Ages	See Note

UNITED STATES	No	None	None	
MONGOLIA	No	None	None	

Recommendation Information (for health protection)

Is yellow fever vaccine a recommended protective measure for this itinerary?

NO. Vaccination is not necessary as a protective measure for any country on this itinerary.

Vaccinations

Routine vaccinations are essential due to a persistent global rise of vaccine-preventable diseases (especially markedly high rates of diphtheria, pertussis, and measles). Prior to travel, travelers should be up-to-date with the age-appropriate and risk-based routine vaccinations recommended by their home country, which may include:

- COVID-19
- *H. influenzae* type B (Hib)
- Hepatitis A
- Hepatitis B: Protection is especially important for those at increased risk.
- Herpes zoster
- Human papillomavirus
- Influenza
- Measles, mumps, rubella: A single early dose is recommended for travelers aged 6-11 months.
- Meningococcal
- Pneumococcal
- Polio
- Rotavirus
- Tetanus, diphtheria, pertussis: Tdap preferred; consider an early pertussis booster for high-risk travelers.
- Varicella

Long-stay children should be vaccinated (prior to departure if possible) according to destination-country vaccination schedules as applicable (which may differ from that of the home country and require off-label administration); schedules for multiple countries globally can be found at WHO Immunization Data and for European countries only at European CDC Vaccine Scheduler.

Travel-specific vaccination recommendations are noted below as appropriate.

All Travelers

COVID-19

Recommendation (for health protection)

Mongolia

Risk exists throughout the year. Peaks generally occur during influenza season, although off-season peaks also occur.

Recommended for: all travelers aged ≥ 6 months.

Vaccination Considerations

Mongolia

Travelers are advised to stay current with local COVID-19 vaccination recommendations and to consider transmission activity at their planned destinations. Travelers at highest risk (e.g., those with chronic cardiopulmonary disease or immunocompromise) should consider early booster vaccination, carrying Paxlovid (nirmatrelvir/ritonavir) or another self-administered antiviral therapy, and rapid diagnostic tests. Prophylactic administration of monoclonal antibodies for those at highest risk of poor outcomes may also be considered, especially during periods of peak transmission at their destination or in transit hubs.

Hepatitis A

Mongolia

High risk exists and is presumed to have widespread distribution.

Recommended for: all travelers.

Influenza

Mongolia

Risk exists from November through April, with peak activity usually occurring from January through February, although off-season transmission can occur.

Recommended for: all travelers during transmission season; risk during transit should be considered.

Vaccination Considerations

Mongolia

Travelers who have not received the currently available vaccine formulation should be vaccinated against influenza. Travelers who received the current formulation more than 6 months earlier should consider revaccination because immunity may have declined. Consider baloxavir or oseltamivir as standby therapy, especially for those who are at high risk for complications from influenza or who are inadequately vaccinated.

Rabies

Mongolia

Significant risk from dogs exists throughout the country.

Preexposure preventive measures:

Recommended for: all travelers due to lack of available human rabies immune globulin and rabies vaccine for postexposure prophylaxis.

Travelers should observe animal bite precautions.

Postexposure prophylaxis considerations:

Dog, bat, and other mammal (including fox) bites or scratches should be taken seriously, and evacuation for postexposure prophylaxis should be sought even by those already vaccinated.

Travelers should practice proper wound care.

Typhoid fever

Mongolia

High risk exists and is presumed to have widespread distribution.

Recommended for: all travelers.

Some Travelers

Tick-borne encephalitis

Mongolia

Low risk exists throughout northern areas of the country, mainly in Selenge, Arhangay, Bulgan, and Khuvsgul provinces. Transmission occurs from April through October.

Recommended for prolonged and short stays: all expatriates and travelers who anticipate hiking, camping, or other outdoor activities in forested risk areas.

Tick precautions are recommended.

Malaria

No evidence of sustained local transmission exists.

Travelers' Diarrhea

Mongolia

Moderate risk exists throughout the country, including in deluxe accommodations. Community sanitation and food safety measures may be inadequate. Some itineraries (e.g., remote destinations, austere accommodations) and activities (e.g., ecotourism, eating street or local-market food) further increase risk.

Travelers should observe food and beverage precautions, which reduce the likelihood of illness.

In addition to maintaining fluid status with clean, safe water, travelers should maintain electrolyte status if they experience diarrhea and carry loperamide for self-treatment of watery (noninflammatory) diarrhea plus single-dose/short-course azithromycin (alternatively, a quinolone antibiotic) for use in combination with loperamide if functional capacity is impacted. Travelers with dysenteric presentation (or high fever) should use antibiotics (azithromycin, 3-day course) alone and avoid loperamide.

Other Concerns

Lyme disease

Mongolia

Negligible risk exists in some or all forested areas throughout most of the country, mainly in Selenge and Zavkhan provinces. Transmission occurs from March through November, with peak activity from April through June. Travelers should observe tick precautions.

Leptospirosis

Mongolia

Risk may exist, but either cases are not reported or those that are reported are rare. Risk-averse travelers whose itineraries include exposure to fresh water should wear appropriate footwear; avoid exposure to potentially contaminated floodwaters, fresh water, wet soil, and mud; avoid contact with rodents (including their excreta); and may consider preexposure prophylaxis with doxycycline (200 mg once per week).

Tuberculosis

Mongolia

Tuberculosis (TB) is common in all developing countries. According to WHO, this is a high-burden multidrug-resistant TB country. A documented interferon gamma release assay is recommended both before departure and 2 to 3 months after return for all travelers planning to stay more than 3 months and for stays longer than 1 month for health care workers and those with anticipated exposure in prisons, homeless shelters, refugee camps, or shanty towns. All travelers should also be individually assessed for risk before and after return. If necessary, a tuberculin skin test can be used as an alternative. In areas where resistant tuberculosis is common, expert consultation may be required in selection of specific latent tuberculosis therapy, if indicated.

Travelers should avoid crowded public places and public transportation (whenever possible). Domestic household workers should be screened for TB.

Brucellosis

Mongolia

Significant risk exists throughout the country. Travelers should avoid consumption of unpasteurized dairy products and meat that is raw, undercooked, or unlikely to have been inspected. Travelers should also avoid direct or indirect contact with livestock, animal products, and animal carcasses or hides.

Sexually transmitted infections

Mongolia

Most travel increases the risk for all sexually transmitted infections (STIs), with an increased risk of mpox for persons (and partners of persons) who have behavioral risk factors; risk for persons outside these groups is low. Travelers should be counseled on risk factors for STIs, indications for mpox vaccination, and observation of safer-sex practices.

Visa/HIV Testing

Mongolia

HIV testing is not required to obtain a tourist, work, or residence visa.

Air pollution

Mongolia

Air quality may be variable throughout the year. Annual mean particulate matter concentrations are hazardous in select cities. Ulaanbaatar: When air quality worsens, travelers should avoid all outdoor physical activity until air quality is better; those with lung disease or at the extremes of age should remain indoors and keep activity levels low.

Viral hemorrhagic fevers

Mongolia

Negligible risk of Crimean-Congo hemorrhagic fever exists in Bayanhongor, Dornogovi, Omnogovi, and Govi-Altay provinces. Tick precautions are recommended. Travelers should avoid contact with infected livestock and animal tissue/blood.

Hepatitis C

Mongolia

Moderate risk exists. Hepatitis C is estimated to be present in 3.6% of the population, putting this country in the top tier of all countries. No vaccine is available. Travelers should observe safer-sex practices and avoid contact with sharp objects (e.g., needles or tattooing equipment) and with blood or blood products that are not from a reputable medical source. Review the need for hepatitis A and hepatitis B vaccine in travelers at highest risk.

Anthrax disease

Mongolia

Low risk exists throughout the country. Travelers should avoid direct or indirect contact with livestock, animal products, and animal carcasses or hides, as well as consumption of meat that is raw, undercooked, or unlikely to have been inspected.

Plague

Mongolia

Low risk exists throughout the country, mainly in western and central provinces. Transmission occurs throughout the year. Travelers should avoid contact with potentially infected rodents and their fleas.

Additional Information by Country

Mongolia

Medical Summary

General Information

Mongolia is a developing nation classified as lower middle income. Located in eastern Asia (south of Russia and north of China), the climate classifications range from humid cold (dry winter) in the north to dry (arid) in the south, with cooler temperatures in some high-altitude areas.

Medical Care

Medical care is extremely limited throughout the country. Any serious medical condition will require evacuation. Beijing, China is a frequent destination. Adequate evacuation coverage for all travelers is a high priority. One or more JCI accredited hospitals are present in Ulaanbaatar. Adequate medical care for routine minor-care medical situations and stabilization prior to evacuation is available at 1 or more internationally staffed outpatient clinics. Shortages of routine medications and supplies are common.

For a private ambulance in Ulaanbaatar, call United Family Intermed Hospital at [+976] 7700-0103 or [+976] 7701-1111. For a public ambulance in Ulaanbaatar, call 103. Reliable ambulance services do not exist outside of major cities. A taxi (from official ranks or dispatched via smart phone app or radio from a reputable company) or private car is the recommended means of transport to the hospital outside of major cities.

Upfront payment by cash, up to the total of all anticipated charges, is generally required by hospitals catering to foreigners prior to services or treatment. Upfront payment may be waived by hospitals that have existing cashless agreements with at least some major international insurance providers.

Safety and Security

Key Safety Risks

- Road conditions
- Public transportation
- Petty crime
- Heightened crime risk for women
- Heightened crime risk for LGBTQ+ travelers
- Scams
- Natural disasters
- Extreme weather

Key Security Threats

- Risk of violent protests
- Occasional violent crime

Emergency Contacts

The police emergency number is 102.

Civil Unrest

Protests and demonstrations may infrequently occur and have the potential to turn violent without warning. Bystanders are at risk of harm from violence or from the response by authorities. Disruption to transportation, free movement, or the ability to carry out daily activities may occur.

Crime

Moderate risk of violent crime (armed robbery, sexual assault, and assault) and high risk of petty crime exist throughout the country, especially in Ulaanbaatar (particularly in State Department Store, Gandantegchinlen Monastery, markets, Central Post Office, outside of bars and nightclubs, and on public transportation), in other cities, and during festivals (including Tsaagan Sar and Naadam).

Scams involving false identity (such as criminals posing as police officers) have been reported.

Natural Hazards

The rainy season is from July to September, especially in northern areas. Floods, mudslides, and landslides may occur.

Winter storms and dust storms frequently occur.

Terrorism

No intrinsic risk of attack by terrorist groups exists, but unforeseen attacks are possible.

Transportation Safety

Official permission is required from the State Frontier Guard Authority to travel within 100 km (62 mi) of Mongolia's border.

The Zamiin Uud border crossing (with China) and the Sukhbaatar/Altanbulag border crossing (with Russia) are open to foreign nationals throughout the year. Other border crossings are open to foreign nationals only sporadically.

Driving is not recommended for safety reasons. Operating a vehicle is unsafe outside of Ulaanbaatar. Road conditions are mostly rudimentary, and many paved roads are narrow and lack shoulders. During the rainy season (July-September), flooding and landslides may make roads and bridges impassable. Dust storms (usually in May and June) can disrupt travel by road, especially in the Gobi Desert region. Carrying high-quality cold-weather clothing is required (even for short trips in vehicles) in case of a delay or automotive breakdown.

GPS may be unreliable and mobile phone connectivity may be unavailable outside of major cities.

Off-road or remote travel requires a 4-wheel-drive vehicle, an experienced guide from a reputable company, proper equipment (such as a satellite phone, an emergency-position-indicating radio beacon, spare tires), and an adequate supply of food and water.

Sharing itineraries and expected return times with a trusted contact is common practice.

Travelers typically monitor official weather reports for updated information.

The distance between settlements can be considerable.

For overland travel outside of cities, travelers typically notify the National Emergency Management Agency (NEMA), which has an English-language website, and preprogram a mobile phone with the numbers for local NEMA and police offices for the provinces to be visited.

Ulaanbaatar's public buses are generally reliable but can be overcrowded.

Licensed, metered taxis are generally safe and reliable and can be arranged through a hotel. Unregistered taxis (which are common in Ulaanbaatar) are unsafe.

Using a hired car and driver is generally safe and reliable and can be arranged through local tour companies.

For travel outside of cities, hiring an experienced, professional driver who is familiar with the driving conditions and geography of the countryside is common practice.

Domestic air services (including helicopter services) in Mongolia may not always comply with international aviation safety standards.

Water Safety

Rent water sports equipment from reputable operators. Scuba dive only with personnel certified by PADI or NAUI and use equipment only from PADI- or NAUI-certified dive operators.

Cross-Cultural Considerations

Official Name, Nationality

- Official Name: Mongolia
- Nationality: Mongolian

Conversation

Good topics of conversation include horses and sports; popular sports include archery, horse racing, and wrestling. Central to Mongolian national identity is the epic poem of Chinggis (Genghis) Khan's creation of the Mongol Empire.

Currency

The official currency is the tögrög (MNT). The US dollar (USD) may also be accepted by some businesses in Ulaanbaatar. USD dated before 2000 may not be accepted, even by banks.

Travelers should carry sufficient cash to cover expenses, especially outside of Ulaanbaatar. ATMs are widely available in Ulaanbaatar but limited elsewhere. Credit cards are not widely accepted outside of Ulaanbaatar.

Dress

Professional attire is preferred for business. Traditional dress, a *deel* tunic with a sash over trousers and boots, is worn by some urban and many rural residents. Avoid wearing short sleeves, which may cause offense.

Food

Hospitality is important, and will include offering refreshments. It is rude to decline. Mongolian tea is salty, with milk and sometimes butter. Meals are hearty, not spicy, and feature dairy and meat stews. Fermented mare's milk and vodka are popular beverages.

Gestures, Touching, and Personal Space

Avoid stepping on the threshold of a door when entering a building or room.

Language(s)

Khalka Mongolian is the official language, written in Cyrillic script. Kazakh, Russian, Chinese, and English are sometimes spoken. Having information written in Mongolian is useful (e.g., destination for taxi driver).

Personal

Homosexual activity is not illegal, but may result in police attention or intolerance by the local community.

Photography

Photography of police, police escorts, and military establishments or personnel is a criminal offense. Avoid photographing airports, border crossings, and government buildings. Photography is generally prohibited within monastery buildings. Some attractions may charge a small fee for still and video cameras. Ask permission before photographing people.

Protocol/Etiquette

Greetings may include guests and hosts passing around small, elegant snuff bottles. Mongolians traditionally cross a threshold with the right foot first. Stepping on the doorway's threshold when entering a home or room may offend Mongolians.

Religion

Freedom of religion is provided by the constitution. The population is majority Lamaist Buddhist. By law, the government accords special respect to Buddhism. Avoid touching sacred images or objects in Buddhist monasteries. Proselytizing is limited by laws prohibiting the spread of religious views by force, pressure, material incentives, or deception.

Time

Avoid scheduling business meetings for the 3-day lunar New Year festival, Tsagaan Sar.

Tipping

Tipping 5-10% at bars and restaurants is becoming customary.

Toilets

Travelers may want to carry toilet paper and hand sanitizer at all times. Public toilets may be squat type.

Basic Protective Measures

Many travel-related health and safety problems can be significantly reduced through appropriate behavior by the traveler. Risk can be minimized by adherence to the following measures.

Health

Safe Food and Beverages

- Wash hands with soap before eating and after using the toilet. If water is not available, use disposable antiseptic wipes or an alcohol-based hand sanitizer.
- Avoid food from street vendors or market stalls.
- Choose establishments that are known to cater to foreigners.
- Avoid buffets if food covers or fly controls are not used or foods have not been kept steaming hot.
- Avoid undercooked meat, seafood, and fish; unpasteurized dairy products, such as cheese, yogurt, and milk; creamy desserts; cold sauces such as mayonnaise, salad dressing, and salsas; and leafy or uncooked vegetables and salads.
- Eat well-cooked, steaming-hot foods. Other foods that are safer to eat include breads, tortillas, crackers, biscuits, and other baked goods as well as canned foods and fruits, nuts, and vegetables with thick skins, peels or shells that can be removed.
- Avoid eating amberjack, bonito, mackerel, mahi-mahi, or tuna due to risk of scombroid poisoning.
- Avoid tap water or anything mixed with tap water and do not rinse toothbrushes in tap water.
- Do not use ice unless it is made from boiled, bottled, or purified water. Freezing does not kill the organisms that cause diarrhea.
- Use sealed bottled water or chemically treated, filtered, or boiled water for drinking and making ice and for brushing teeth.
- Drink canned, boxed, or commercially bottled carbonated water and drinks. Beer and wine are safe to drink; however, alcohol added to other beverages does not render the beverages safe.
- Purify water if one of these options is not available (see *Treating Water*). Decide which method to use for water purification and bring along the appropriate equipment or chemicals. Do not assume that water is safe because it is chlorinated. Chlorination does not destroy all the organisms that can cause illness.
- Continue to breastfeed infants who are nursing because it is the safest food source for these infants. If formula is used for feeding infants, prepare with boiled water and sterilized containers.

Blood-Borne and Sexually Transmitted Infections (STIs)

- Use condoms in all sexual encounters; unprotected casual sex, whether with local residents or with fellow travelers, always poses a high risk.
- Understand that inhibitions are diminished when traveling away from the social constraints of home; excessive use of alcohol and recreational drugs can influence behavior and encourage unintentional risk exposure.
- Avoid sexual relations with commercial sex workers.
- Consider short-term HIV preexposure prophylaxis with Truvada if very high-risk sexual behaviors are anticipated.
- Avoid skin-perforating procedures (acupuncture, piercing, or tattooing).
- Avoid invasive medical or dental procedures in unaccredited medical facilities (unless in a life-threatening situation); request proof of accreditation by Joint Commission International or other international bodies.
- Consider carrying disposable needles, syringes, and sutures for remote travel.

Rabies

- Never assume that an animal or bat is free of rabies.
- Avoid entering caves due to the possibility of exposure to bats and their droppings.
- Do not handle or feed pets, unknown animals (especially dogs and monkeys), or bats. Children should be closely supervised.
- Clean any bite, scratch, or lick on broken skin immediately with soapy water; seek postexposure prophylaxis for rabies (even if rabies vaccine was completed before exposure) or herpes B virus (transmitted by monkey bites).
- Minimize running or bicycling in high-risk rabies areas to avoid provoking domestic animals.

Skin/Wound Care

Extra vigilance, as outlined below, is recommended.

- Clean any bite, cut, or broken skin with safe water. Broken skin may become infected and lead to serious problems. Apply an antiseptic solution or spray.
- Seek medical help if increasing pain, redness, or discharge from a wound occurs, which suggests a spreading infection and may require antibiotic treatment.
- Always wear hats and apply sunscreen in the tropics. When both an insect repellent and sunscreen are used, apply the sunscreen first, let it dry completely, then apply the repellent. Very limited data suggest that DEET-containing repellents reduce a sunscreen's stated SPF UVB protection by as much as one-third, requiring more frequent sunscreen application. Sunscreens do not appear to reduce the efficacy of insect repellents (DEET or picaridin) but may increase the absorption of

DEET (but not picaridin) through the skin, even when the sunscreen is applied first as recommended. Never use a combination sunscreen/insect repellent product (e.g., Avon Skin Soft Bug Guard, Bull Frog Mosquito Coast Sunscreen with Insect Repellent, or Sunsect).

- *Applicable only to African countries:* Iron all clothes that have been dried outdoors to prevent skin infestation by the larvae of the tumbu fly.

Tuberculosis

- Practice hand hygiene diligently.
- Avoid crowded public transportation or crowded public places that are poorly ventilated.
- Move away from anyone with a persistent or intense cough.
- Screen domestic workers for tuberculosis.
- Have a tuberculosis skin test or tuberculosis blood test before departure, once per year thereafter, and upon returning home (if planning a long stay to areas of the world where TB is highly or moderately endemic).

Pretravel Checklist

- Have predeparture medical and dental exams.
- Express any concerns about jet lag, altitude illness, or motion sickness to a travel health provider, who may suggest suitable medications.
- Pack adequate supplies of necessary medications and ensure that they are securely packaged in their original, labeled prescription containers and carried in multiple places. Travelers should have a letter from a physician stating the medical condition and the medications and/or medical supplies being carried.
 - If traveling with a controlled drug for personal use, review medication regulations on the International Narcotics Control Board website (<http://www.incb.org/incb/en/travellers/index.html>) as well as official government sites. Rules on amphetamine-based medications used for attention-deficit/hyperactive disorders should always be checked before travel.
- Prepare a compact medical kit that includes the following: simple first-aid supplies (such as bandages, gauze, hemostatic gauze, antiseptic, antibiotic ointment, butterfly bandages, skin glue, and splinter forceps), a thermometer, antipyretic agents, antifungal creams, cough and cold remedies, antacids, hydrocortisone cream, and blister pads.
- Pack a spare pair of eyeglasses or contact lenses and adequate cleansing solution, if applicable.
- Pack sunglasses, wide-brimmed hats, sunscreen (SPF 30+), and lip protection to avoid sun exposure problems during travel.
- Arrange adequate medical and evacuation insurance when traveling, even for short trips. Ensure all preexisting medical issues are declared to the insurer so that noncovered conditions are ascertained in advance. Have the insurer's contact details recorded and accessible at all times during travel.
- Carry a list of contact information for hometown medical providers, health insurance carriers, and a medical assistance company, keeping it accessible at all times.
- Carry a list of medical conditions, allergies, and medications (with dosages).
- Carry a copy of a recent electrocardiogram on a portable USB drive or ensure that it can be accessed on the internet (for those with cardiac disease).

Safety

Safety and Crime Avoidance

Extra vigilance, as outlined below, is recommended.

- Use caution in tourist sites and crowded areas and on or near public transportation; avoid marginal areas of cities.
- Be wary of any stranger who initiates conversation or physical contact in any way, no matter how accidental it may seem.
- Be familiar with common local scams and distraction techniques.
- Avoid using ATMs at night.
- Minimize visible signs of wealth in dress or jewelry.
- Wear handbags across the chest to prevent theft.
- Give up valuables if confronted. Money and passports can be replaced; life cannot.
- Use taxis from official ranks or dispatched via smart phone app or radio from a reputable company.
- Carry only a photocopy of the passport face page and legal entry stamp unless otherwise required by authorities; leave the actual passport in a hotel safe or other safe place.
- Advise at least 1 other person of one's whereabouts and expected schedule.

- Register a foreign trip and residence information with the Department of State at travelregistration.state.gov (U.S. citizens only), which facilitates communication and assistance in case of an emergency.

Safety in the Hotel

- Keep hotel doors locked at all times.
- Seek out and read fire safety instructions in the hotel room. Become familiar with escape routes upon arrival.
- Keep valuables in the room safe or the hotel safe.

Safety while Driving

- Do not drink and drive.
- Avoid overcrowded transportation.
- Keep automobile doors locked and windows closed at all times, if possible.
- Seek vehicles with seat belts, which may result in extra expense; decline vehicles without seat belts unless no choice is available.
- Decline transportation in vehicles with worn tires, worn brakes, or inoperative lights.
- Avoid driving at night or alone; seek local advice before driving outside urban areas after dark.
- Never drive a motorcycle or scooter abroad; passengers should wear a helmet.
- If planning a long stay, arrange for local mobile phone service (either a personal phone with a local plan or a locally purchased phone) to be in the vehicle when traveling.

Travax content represents decision-relevant, expert synthesis of real-time data reconciled with new and existing available advice from authoritative national and international bodies. Recommendations may differ from those of individual countries' public health authorities. Travax country-specific recommendations pertain to healthy adult travelers. Guidance regarding pediatric and special needs travelers can be found under the relevant topic in the Travax Library.

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