SUPPLEMENTARY DATA

Appendix 1

OUESTIONNAIRE:

Question 1: Did the trip happen? Yes/No. If yes, continue the remaining questionnaire:

Question 2: What was the destination of the trip? One or more destinations? Specify which.

Question 3: How long did the trip take?

Question 4: What was the type of accommodation?

Question 5: Were the vaccines recommended in the traveler's consultation administered? Specify vaccines.

Question 5.1: Has the child/adolescent experienced any side effects of vaccination? If yes, specify the reaction.

Question 6: Prophylaxis was recommended to prevent Malaria?

Question 6.1: If so, what was the recommended medication?

Question 6.2: Did you take all the medication?

Question 6.3: Did you stop medication? If yes, specify why.

Question 6.4: Did the child/adolescent experience any side effects of the medication? If yes, which one?

Question 7: During the trip, did the child/adolescent suffer any complications? If yes, specify which.

Question 7.1: When did it happen?

Question 7.2: How long did the disease last?

Question 7.3: Did you need to seek medical help?

Question 7.4: If so, what was the diagnosis and the treatment?

Question 7.5: Was hospitalization necessary?

Question 7.6: If so, how long did it last?

Question 7.7: Was it necessary to anticipate the return due to illness?

Question 8: On returning to Portugal, did the child/adolescent have symptoms related to the trip? If so, specify which.

Question 8.1: Did the child/adolescent have sequelae? If so, specify which.