

REQUEST FOR NIH SREA REVIEWER TRAVEL ACCOMODATIONS WITH MEDICAL CONDITIONS

Steps for Requesting First Class, Premium Class and/or Travel Attendant Due to a Medical Condition:

It is recommended that requests for authorization for special travel accommodations be made 4-6 weeks in advance of the reviewer's travel date.

The reviewer **must** complete the following 2 steps to receive authorization for special travel accommodations:

1. Complete the "Request for NIH SREA Reviewer Travel Accommodations with Medical Conditions" form (see attachment) and submit to the SREA Office via email to CSRSREAProgramManagers@mail.nih.gov.

The SREA Office will obtain Executive Officer approval signature and forward the form to Occupational Medical Service (OMS) on the reviewer's behalf.

2. Obtain physician's letter and relevant medical records supporting the reviewer's medical condition and submit documents directly to OMS via fax or email to:

Occupational Medical Service (OMS)
Attention: Carolyn A. Fleeger
Fax: 301-402-0673
Email: fleegerc@mail.nih.gov

NOTE: Do not submit physician's letter or medical records to the SREA Office or World Travel Service

The OMS physician reviewing the medical documents will determine the duration of authorization; the SREA Office will send the approved request form via email to the reviewer and World Travel Service to authorize travel reservations.

Request For NIH SREA Reviewer Travel Accommodations With Medical Conditions

This form is to be completed and maintained in your IC travel files for each Travel Authorization reflective of travel accommodations due to medical reasons.

PLEASE CHECK the requested accommodation (Reviewer required information):

- First Class**—The highest class of accommodations on a multiple-class airline flight. When an airline flight only has two classes of accommodations, the higher-class, regardless of the term used for that class, is considered to be first class.
- Premium Class Other Than First Class**—Any class of accommodations between coach-class and first-class, e.g., business-class.
- Coach Class**—Any coach-class travel accommodation.
- Travel Attendant**—Reviewer's medical condition requires a travel attendant.
- This authority will expire at six months, one year, or three years from date of approval, depending upon the nature of the medical condition.

Reviewer's Name <i>(please print)</i>	Institute/Center (IC) or Organization
Meeting Name	Trip Start Date Trip End Date
SRO Name	Trip Destination
Reviewer's Signature	Date

EXECUTIVE OFFICER

IC Executive Officer's Signature	Date
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OCCUPATIONAL MEDICAL SERVICE

<p>OMS Assessment</p> <p><input type="checkbox"/> The documentation submitted for review supports the request for a period of:</p> <p style="margin-left: 20px;"> <input type="checkbox"/> 6 months <input type="checkbox"/> 1 year <input type="checkbox"/> 3 years </p> <p><input type="checkbox"/> The documentation submitted for review does not support the request.</p>	<p>Date medical documentation and request form received by OMS</p> <hr/> <p>Date forwarded to DDM <i>(only for first or premium class accommodations)</i></p>
Reviewing OMS Physician's Signature	Date

DEPUTY DIRECTOR FOR MANAGEMENT (FIRST AND PREMIUM CLASS REQUESTS ONLY)

DDM Determination: <input type="checkbox"/> Request Approved <input type="checkbox"/> Request Disapproved	
DDM's Signature	Date