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## Medical Missions: Honduras 2022 Navigating the Online Pre-Check Form *Updated February 2022*

Honduras has implemented a new online pre-check form in place of the paper form. This form can be found at <https://prechequeo.inm.gob.hn/Login>.

**All travelers to Honduras must submit this form within 48 hours of their arrival.** You are able to sign in and start the pre-check process ahead of time, but you cannot submit more than 48 hours before your entry date.

You will need to have a **copy of your passport and either a COVID-19 vaccination card or proof of a negative COVID-19 test result** (results cannot be older than 72 hours before arrival) to upload to your form.

**Please complete these forms to the best of your ability.** Some questions and English translations are glitchy, and some do not have options that apply. **Also, please note that dates (i.e., travel day, departure day) are in day/month/year format.** We recommend completing this form on a desktop or laptop computer instead of a mobile device.

### Create an Account

1. Go to the pre-check form at <https://prechequeo.inm.gob.hn/Login>
2. The original settings are in Spanish, but you can switch the language settings to English on the left-hand side under the *¿No tienes cuenta?* box.

The screenshot shows a web browser window with the URL [prechequeo.inm.gob.hn/Login](https://prechequeo.inm.gob.hn/Login). The page is in Spanish and features a login form on the left and a 'Pasos para crear tu prechequeo' (Steps to create your pre-check) section on the right. The login form includes fields for 'Correo electrónico' (Email) and 'Contraseña' (Password), an 'Iniciar sesión' button, and a link for '¿Olvidó su contraseña?'. Below the login form is a '¿No tienes cuenta?' section with a 'Crear cuenta' button. The language selector at the bottom left shows 'Español' and 'English', with 'English' circled in red. The 'Pasos para crear tu prechequeo' section consists of three numbered steps: 01 'Crea una cuenta de prechequeo' (Create a pre-check account), 02 'Inicia sesión en el portal' (Log in to the portal), and 03 'Crea tu prechequeo' (Create your pre-check). Each step includes a brief description of the action required.

3. Click *Sign Up Now* in the *Don't have an account?* box.
4. Fill out the form to create an account by entering your email, full name, password, and verification code. Click *Register*. Once you've created your account, you must go to your personal email account and activate the account.

**Create account**  
Register to use the pre-check portal of National Institute of Migration of Honduras. All fields are required.

**Email**  
Enter email  
*Este campo es requerido*

**Fullname**  
Enter fullname

**Password**  
Enter password  
*Este campo es requerido*

**Password confirmation**  
Enter password

**Verification code**  
upmh  
Show another code  
Enter the code

**Register**

Already have an account? [Log In](#)

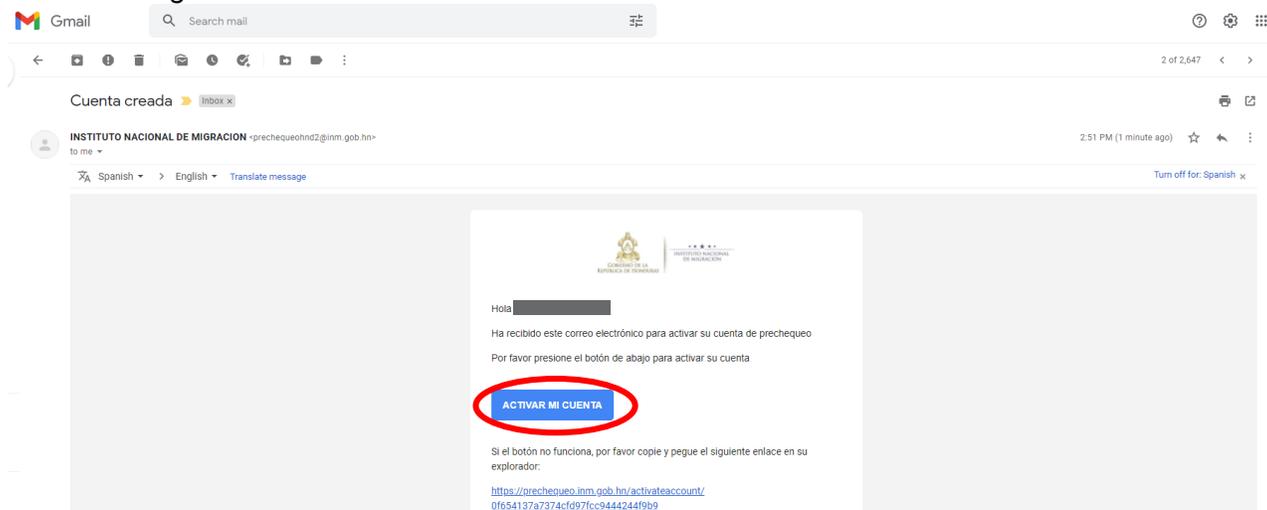
For support please email us at [comunicaciones@inm.gob.hn](mailto:comunicaciones@inm.gob.hn)

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**Completed**  
Account created successful

An email has been sent with instructions to activate your account  
[Back to login](#)

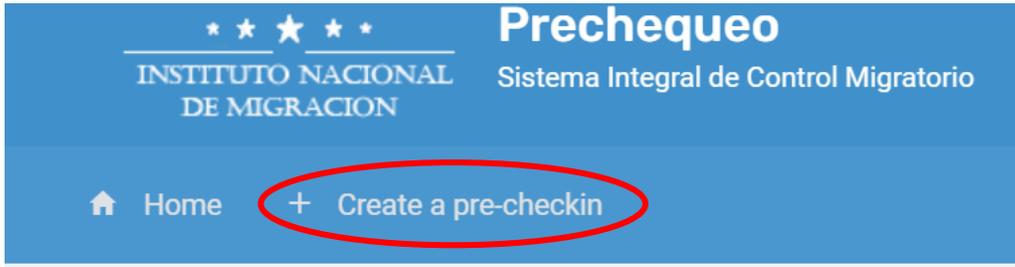
5. Check your inbox an email from *Instituto Nacional de Migracion*. In the email, click *Activar Mi Cuenta/Activate My Account*. Then, you should be redirected back to the precheck form. Click *Back to Login*.



## Pre-Check Form

- The original settings are in Spanish, but you can switch the language settings to English in the top right corner.
- *Please note, that dates are in day-month-year format when completing these forms.*

1. Go to <https://prechequeo.inm.gob.hn/Login> and log-in.
2. Click *Create a Pre-Checkin* found at the top left of the homepage.



3. List your origin country, destination country (automatically completed with Honduras), and your nationality. Once completed, press continue.  
*Please note, USA is listed as Estados Unidos de Norte America under “Country of Origin” but as United States under “What is Your Nationality?”*

Create your pre-check now

\* Select your origin country

ESTADOS UNIDOS DE NORTE AMERICA

\* Select your destination country

HONDURAS

\* What's your nationality?

UNITED STATES

Continue

4. Fill in your flight and travel details. Once completed, press continue.
  - All volunteers' type of transport will be “AEREO” and everyone should be flying into Aeropuerto de Palmerola airport (airport code XPL).
  - Use “TURISMO” for your travel reason
  - Destination address:
    - Nuestros Pequeños Hermanos  
KM 36 Carretera Nueva Olancho  
La Venta Nueva
  - Destination State: Francisco Morazan
  - Destination City: Tegucigalpa

Origin country : ESTADOS UNIDOS DE NORTE AMERICA | Destination country : HONDURAS | Nationality : UNITED STATES

\* Type of transport: AEREO

\* Travel date (dd-MM-yyyy): 11/01/2022

\* Travel time: 14:40

\* Destination State: FRANCISCO MORAZAN

\* Immigration office: AEROPUERTO DE PALMEROLA

\* Travel reason: TURISMO

\* Destination City: TEGUCIGALPA D.C.

\* Transport company: AMERICAN AIRLINES

\* Destination Address: Nuestros Pequeños Hermano  
KM 36 Carretera Nueva Olancho  
La Venta Nueva

\* Stay (in days): 7

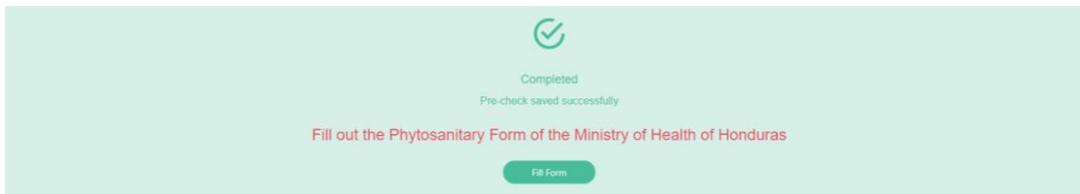
\* Flight number: 961

5. On the next page, you will be asked to input document details and personal information. Once complete, click continue.

- The drop-down menu options for Document Type do not translate. Select “pasaporte” for passport.
- Please note, if you were born in the USA and/or your passport is from the USA, you will be selecting “ESTADOS UNIDOS DE NORTE AMERICA” for the following fields:
  - Issuing Country
  - Country of Birth
  - Country of Resident
- The drop-down menu for profession/occupation does not translate. Some options you may select based on your role include:
  - Medico (doctor)
  - Profesional (professional)
  - Enfermera (nurse)
  - Visitador Medico (medical visitor)
  - Voluntario (volunteer)
  - Optometrista (optometrist)
  - Ortopeda (orthopedist)
  - Otro (other)

6. Once you press continue, you will review and confirm that all your information is correct. Your options are “back” to edit or “save” to continue. Once you press continue, your online pre-check form is complete.

Once completed, you will see the below image and receive an email confirmation with a PDF of your form. It is not necessary to print out, but it may be helpful to keep a copy on hand with you on travel day. Highlight your name, pre-check number, and date of travel on your printed copy.



You will also see an option to print your completed pre-check from the home page by scrolling down to where it shows current pre-checks and selecting the print icon on the right.

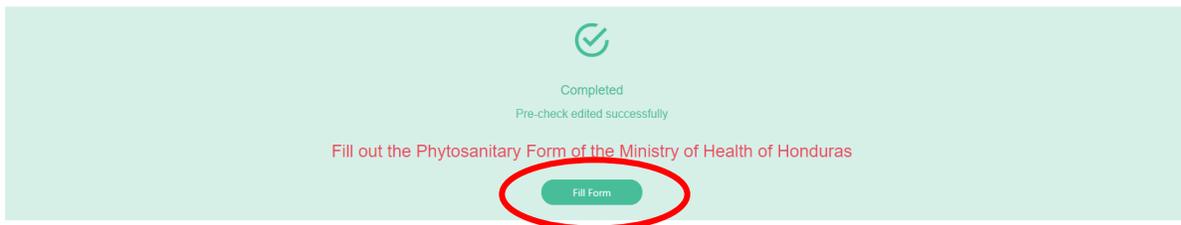
Current pre-checks | Historical pre-checks

Movement	Travel date	Document number	Name	Lastname	Nationality	Origin country	Destination country	Revision status	Print	Share	Delete
ENTRADA	07/04/2021	errherher	RWRH	RHWRHWH	UNITED STATES	ESTADOS UNIDOS DE NORTE AMERICA	HONDURAS	APROBADO			

## Completing the Health Form

There is also a health form “Phytosanitary Form of the Ministry of Health of Honduras/*Ficha de Vigilancia Epidemiológica y Declaración Jurada de Salud*/Epidemiological Surveillance Sheet and Affidavit of Health” that must be completed. Once your pre-check form is complete, click *Fill Form* to continue onto the health form.

- The original settings are in Spanish, but you can switch the language settings to English in the top right corner.
- *Please note, that dates are in day-month-year format when completing these forms.*



## List Of Questions You Will Be Completing

KoBo Toolbox Choose Language English

**Ficha de Vigilancia Epidemiológica y Declaración Jurada de Salud**

GOBIERNO DE LA REPÚBLICA DE HONDURAS SECRETARÍA DE SALUD

Entry Form

Aerial  
 Land  
 Sea

Date of arrival  
yyyy-mm-dd

Time of arrival  
hh:mm

yyyy-mm-dd

Traveler Type

RESIDENT

- Entry form [**Select aerial**]
- Port of Arrival [**Select Aeropuerto Internacional Palmerola**]
- Name of Airline (multiple choice)
- Date of Arrival (yyyy-mm-dd)
- Time of Arrival
- Flight Number
- Seat Number (if you do not have your seat number listed, put NA)
- “Responsible of notifying”/Date when survey is completed. Input the date you are completing this form.
- Traveler Type [**Select “Tourist”**]

- Passport Number
- Upload a photo of your passport (must be an image file)
- Date Covid-19 [test or last dose of vaccine] was taken
- Upload a photo of your Covid-19 vaccine or test result (i.e., a screenshot of an email, a photo of your paper results)
- First Name
- Middle Name [Not Required- can be left blank]
- Last Name
- Second Last Name [Not Required-can be left blank]
- Date of Birth
- Gender
- Nationality (select from the drop-down menu)
- Profession (select from the drop-down menu- these do not translate, feel free to select any option)
- Has exhibited signs or symptoms [of covid-19]? (select si/yes or no)
- Ha padecido covid-19: This slide does not translate: “have you had covid-19” (select si or no)
- Country of Residency (select from the drop-down. If you are selecting USA it will present as Estados Unidos de America).
- Connecting cities (type out the city you are coming from)
- Type of Stay [**Select House or Residency**]
- Department [**Select Francisco Morazan**]
- Municipality [**Select Distrito Central**]
- Expected Departure Date: yyyy-mm-dd
- Email
- Phone Number
- Sworn Statement (see text below) [**Click OK**]

*I certify that on this date I have filled out the Health Surveillance Form during the immigration pre-check, I declare that at the time of entering my data I do not present any symptoms of illness such as: Fever, cough, difficulty breathing, diarrhea, headache, vomiting, and others such as: muscle pain, skin rash, bruises. If during the trip I present any of the symptoms mentioned above, I promise to report it immediately to the travel official, respect the biosecurity measures imposed by the country in the framework of the COVID-19 pandemic.*

*I am aware that I must comply with the instructions issued here, maintaining social distancing and the corresponding hygiene and biosafety measures in order to help prevent the spread of COVID-19, if I have any symptoms during my stay in Honduras, I will I promise to report it immediately to the health facility closest to my home, to comply with the mandatory 14-day quarantine at my home. Likewise, I recognize that the measures that have been implemented to date are intended to safeguard my life, that of my loved ones and the population in general.*

*I undertake to comply with the measures established by the State of Honduras through the Ministry of Health in this Declaration and in the event of non-compliance with it, I am aware that the Public Ministry will be informed, so that it may exercise the criminal actions due by the corresponding authority, who, in addition, will subject me to mandatory quarantine in my*

*place of stay or residence. If I violate this Affidavit, I am aware that I will incur the crimes contained in the Current Penal Code: Article 180, 184, 186, 191.*

*Note: If any of the citizens or foreigners who enter the country presents the symptoms described and does not have the means to comply with this mandatory quarantine, the state of Honduras will provide them with a site of isolation or temporary stabilization.*

- Aceptación / Acceptance **[Click OK]**
- Lugar de Firma/ Place of signature **[Enter Full Name]**

**Once you reach the final page, you will see a Form ID number.**

**It is not required to print this, but if you would like a printed copy you must press the print icon at the top before you press submit.**

*Please contact One World Surgery's medical missions team at [medicalmissions@oneworldsurgery.org](mailto:medicalmissions@oneworldsurgery.org) if you have any questions or issues completing these forms.*