



Service. Healing. Transformation.

Medical Missions: Honduras 2022
Navigating the Online Pre-Check Form
Updated November 2022

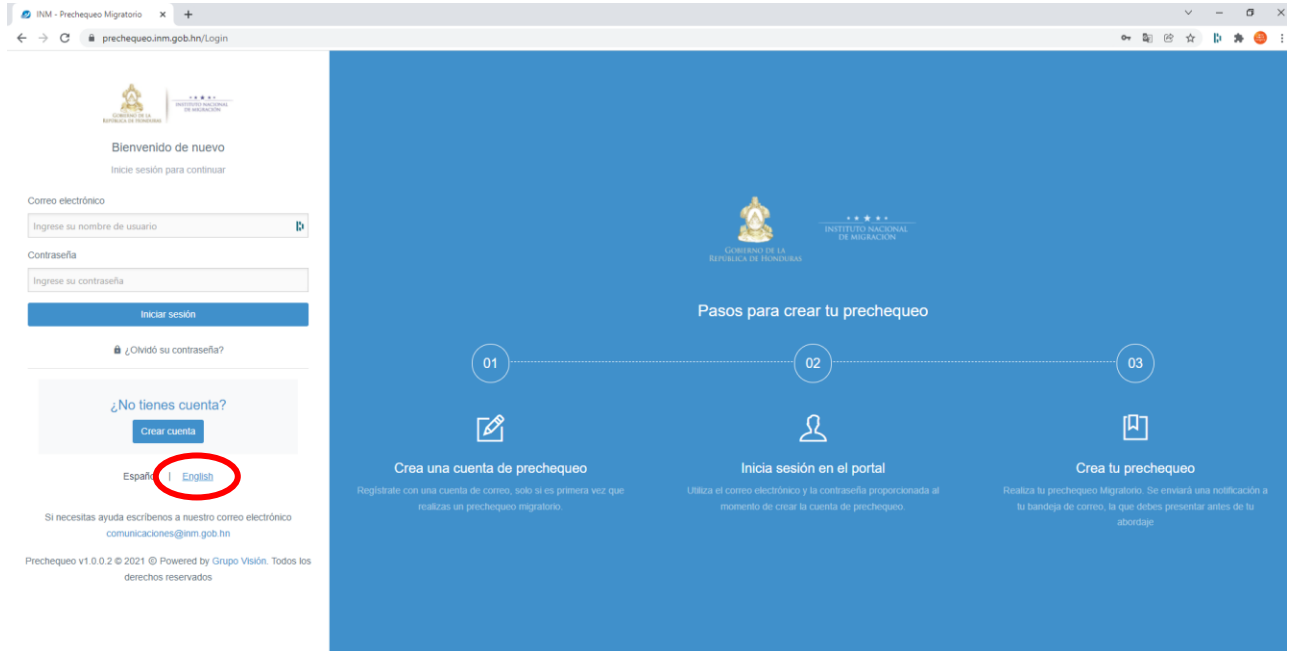
Honduras has implemented an online pre-check (Prechequeo) form and health form (Ficha de Vigilancia Epidemiológica de la Salud) place of the paper form.

Before You Start & Tips

- The Precheck form can be found here <https://prechequeo.inm.gob.hn/Login>. The link to the Health Form will pop up once the precheck form is completed.
- 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.
- All travelers must submit this form 48 hours prior to their arrival in Honduras. 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.
- Technical Issues
 - a. This site works best with Chrome, Microsoft Edge or Mozilla Firefox.
 - b. Mac users have reported issues with the site not working and also those with a Hotmail email. Internet Explorer and Safari on Android mobile devices may have issues.
 - c. If you have an issue with any other device or browser, try using Google Chrome on a PC. If you are still having issues, try another device.
 - d. If the page won't load, try turning off Wi-Fi and using your cell phone connection (either by doing it on your phone or using your computer or tablet and connection to a hotspot from your phone).
- 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.

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.



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

 Show another code
Enter the code

Register

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

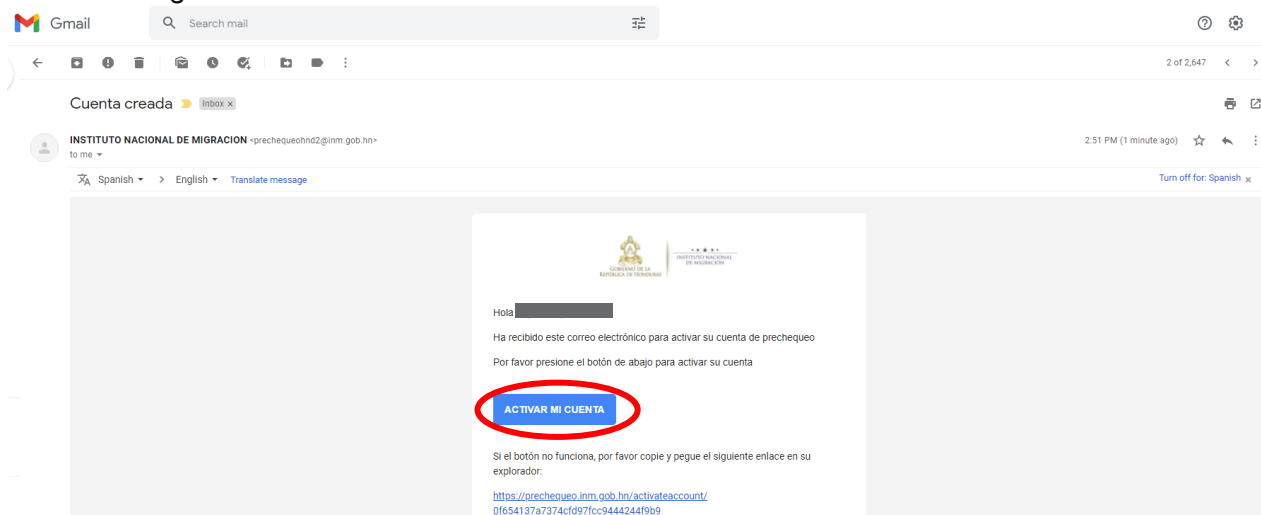
For support please email us at comunicaciones@inm.gob.hn

Prechequeo v1.0.0.2 © 2021 © Powered by Grupo Visión. Todos los derechos reservados

Completed
Account created successfully

An email has been sent with instructions to activate your account
Back to login

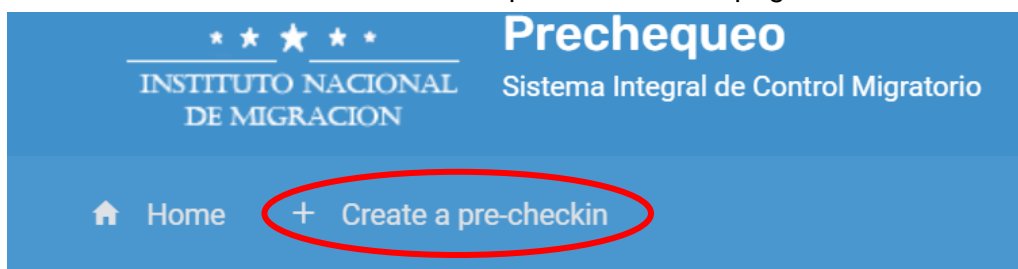
5. Check your inbox an email from *Instituto Nacional de Migracion*. In the email, click *Activar Mi Cuenta/Activate My Account*. Then, you should be redirected back to the precheck form. Click *Back to Login*.



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" or "SIGHTSEEING" 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

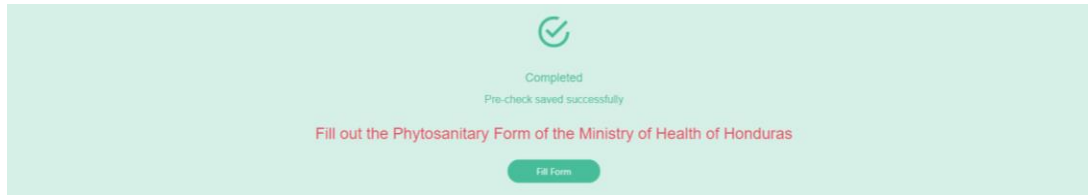
* Type of transport AEREO	* Travel date (dd-MM-yyyy) 11/01/2022	* Travel time 14:40	* Destination State FRANCISCO MORAZAN
* Immigration office AEROPUERTO DE PALMEROLA	* Travel reason TURISMO	* Destination City TEGUCIGALPA D.C.	
* Transport company AMERICAN AIRLINES	* Destination Address Nuestros Pequeños Hermanos 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.



You will also receive an email confirmation with a PDF of your form.

Prechequeo creado



This document (with the QR code) is the document that will be reviewed by the airline staff when you check into flight and when you arrive in Honduras. You will receive it in your confirmation email, as well as have the option to print (see next step).

 		
Prechequeo Migratorio		
Prechequeo No. 3352420	Usuario [Redacted]	
Fecha de Creación 07/10/2022 11:50:06		
Datos Personales		Documento de Viaje
Nombre [Redacted]	Apellidos [Redacted]	Tipo de Documento PASAPORTE
Sexo FEMENINO	Fecha de Nacimiento [Redacted]	Número [Redacted]
Nacionalidad UNITED STATES	País de Nacimiento ESTADOS UNIDOS DE NORTE AMERICA	País Emisor ESTADOS UNIDOS DE NORTE AMERICA
Profesión ENFERMERA	País de Residencia ESTADOS UNIDOS DE NORTE AMERICA	Fecha Vencimiento 16 mar. 2032
Teléfono [Redacted]	Correo personal: [Redacted]	
Información de Viaje		

7. 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.



The screenshot shows a table with columns: Movement, Travel date, Document number, Name, Lastname, Nationality, Origin country, Destination country, and Revision status. The first row contains: ENTRADA, 07/04/2021, errherher, RWRH, RHWRRWH, UNITED STATES, ESTADOS UNIDOS DE NORTE AMERICA, HONDURAS, and IMPROBADO. The 'IMPROBADO' status and the action icons (print, email, search, close) are circled in red.

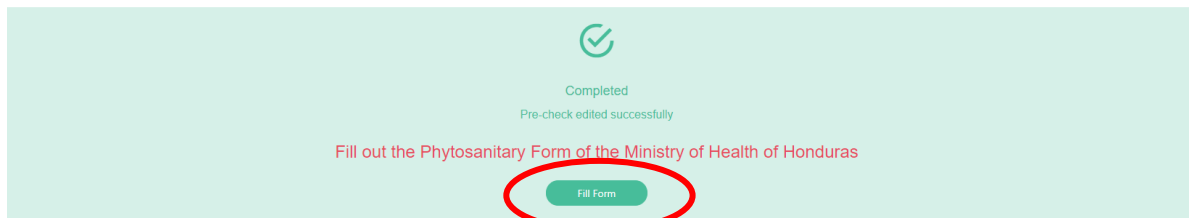
Movement	Travel date	Document number	Name	Lastname	Nationality	Origin country	Destination country	Revision status
ENTRADA	07/04/2021	errherher	RWRH	RHWRRWH	UNITED STATES	ESTADOS UNIDOS DE NORTE AMERICA	HONDURAS	IMPROBADO

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.

NOTE: *You will not receive any confirmation message or email upon submission of 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

KoboToolbox Choose Language English

Ficha de Vigilancia Epidemiológica y Declaración Jurada de Salud


GOBIERNO DE LA REPÚBLICA DE HONDURAS


SECRETARIA DE SALUD

Entry Form

Aerial
 Land
 Sea

Date of arrival
yyyy-mm-dd

Time of arrival
hh:mm

Flight Number
yyyy-mm-dd

Traveler Type
 RESIDENT
 TOURIST

- 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)
- “Resonsable 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.

NOTE: You will not receive any confirmation message or email upon submission of the health form.

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 if you have any questions or issues completing these forms.