

DREAMVISAS INC.

CARRYING MEDICINES ABROAD:

The Complete Legal Safety Guide for
International Travelers with Prescription Medicines

Special Focus on Rules for USA, Canada & New Zealand Travelers

Education • Prevention • Documentation • Remedy

Manoj Palwe

Regulated Canadian Immigration Consultant | RCIC R422575 | CAPIC R11592
MIA Examination Qualified | 25+ Years Experience | 10,000+ Families Assisted
www.dreamvisas.com

2026 Edition

 IMPORTANT NOTICE

This eBook is for public awareness and education only. It does not constitute medical or legal advice.

Medication laws differ by country and change frequently. Always verify rules with official government/embassy sources and consult your treating doctor before travel.

How to Use This Guide

This guide is designed to be both a comprehensive reference and a practical tool you can use immediately. Here is the fastest way to get maximum value:

| Who You Are | Where to Start |
|---|--|
| First-time reader with time to read fully | Start at Foreword and read in order. The guide builds on itself. |
| Traveling soon — need quick prep | Jump to Chapter 5 (SAFE System) + Appendix B (Checklist). Come back for detail later. |
| Looking for a specific country's rules | Chapter 3 (key destinations), Chapter 4 (additional countries), or the Quick Reference in Chapter 3. |
| Student or new immigrant to USA/Canada/NZ | Read "Who This Guide Is For" + Chapter 3 USA/Canada/NZ sections + Chapter 9 Special Situations. |
| Need templates to print or fill out | Go directly to Chapter 6 (Document Templates) and Appendices A–D. |
| Want the one-page master checklist | Go to Appendix E — Master Pre-Travel Checklist (print and carry). |

ESTIMATED READ TIME

- Full read: Approximately 2–3 hours.
- Quick prep scan (key chapters + checklists): 30–45 minutes.
- Templates only (Chapter 6 + Appendices): 15 minutes.
- Recommended: Read fully once, then use Appendices as your ongoing reference toolkit.

NEED ONE-ON-ONE REVIEW?

We offer a Travel Medicine Compliance Review for USA, Canada & New Zealand travelers. If your medication list is complex, your itinerary includes high-risk countries (UAE, Japan, Singapore), or you are on an active visa or PR process, a personalized review can protect you.

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About the Author

MANOJ PALWE

President, Taurus Infotek (Dreamvisas) | RCIC Licensed Immigration Consultant

Manoj Palwe is one of the most trusted and experienced names in immigration consultancy. With over 25 years of experience since founding Taurus Infotek in 2001, he has helped more than 10,000 families successfully navigate Canadian and Australian immigration pathways. His unique intersection of immigration expertise and travel advisory experience makes him exceptionally positioned to guide travelers on the hidden legal risks of carrying prescription medicines across international borders.

What sets Manoj apart is not just his credentials — it is his deep, personal commitment to protecting every traveler from avoidable legal nightmares. Over 25 years, he has witnessed clients detained, prosecuted, and traumatized not because of visa issues, but because of something as seemingly routine as the medicines in their bag. This guide is his answer.

Professional Credentials

- Member, College of Immigration and Citizenship Consultants (CICC) — ID R422575
- Passed Migration Institute of Australia (MIA) Examination on Migration Law
- Member, Canadian Association of Professional Immigration Consultants (CAPIC) — ID R11592
- President, Taurus Infotek Inc. | Operating under the Dreamvisas brand
- Offices in Toronto, Canada and Pune, India

Recognition & Social Proof

| Achievement | Details |
|---------------------------------------|--|
| Migration Visa Consultant of the Year | 2014 — Acquisition International (UK) |
| YouTube Subscribers | 20,000+ Subscribers 600+ Educational Videos |
| LinkedIn Recommendations | 600+ verified professional recommendations |
| Google Reviews | 700+ reviews from satisfied clients globally |
| Families Assisted | 10,000+ families across Canada, Australia & beyond |

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 **FROM MANOJ'S DESK**

“Every day when I sit in my office, I consider it my first day in my consultancy business. I always try to understand my clients’ viewpoints, dreams, and difficulties — and suggest solutions that create a win-win situation.” — Manoj Palwe

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Medication laws and border policies change frequently without notice. While every effort has been made to ensure accuracy, the author and publisher assume no responsibility for errors, omissions, or changes that occur after publication. Readers are strongly advised to verify all information with official government/embassy sources.

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Foreword: Why I Wrote This Guide

In my 25+ years as an immigration consultant, I have witnessed countless travelers face unexpected nightmares at international airports — not because of visa issues, but because of something as simple as the medicines in their bag.

I remember a family from Pune who called me in tears. Their elderly father had been detained at Dubai airport for carrying his regular pain medication. He had a valid prescription from India. He had been taking this medicine for years. Yet, there he was, in a foreign detention cell — confused and scared — while his family scrambled to find lawyers.

That incident — and many like it — haunted me. I realized that while we prepare travelers meticulously for visa interviews and documentation, we rarely discuss the hidden dangers of carrying prescription medicines across international borders.

THE HARD TRUTH

The medicine that keeps you healthy at home can land you in jail abroad. This is not hypothetical. It has happened to British tourists, corporate executives, and ordinary families. It can happen to you — unless you prepare.

This guide is my attempt to bridge that gap. It is the guide I wish every one of my clients had read before traveling. It covers not just the “what” (which medications are risky) but the “how” — a practical step-by-step system to protect yourself legally, wherever you travel.

Read it. Share it with your family. And use the SAFE Travel System before every international trip.

Safe travels,

Manoj Palwe

President, Dreamvisas Inc. | RCIC R422575

Who This Guide Is For

This guide has been written for every international traveler who carries prescription medications. It has a special focus on rules affecting travelers bound for or coming from USA, Canada, and New Zealand — three destinations where medication-related border issues can have serious immigration consequences.

| Reader Profile | Why This Guide Matters | Primary Risk | Key Action |
|---|---|--|---|
| Frequent International Travelers | Navigate medication rules across multiple jurisdictions | Transit country traps | Research every stop, not just destination |
| Patients on Chronic Medications | Travel safely with diabetes, heart, mental health, pain medicines | Exceeding quantity limits | Get doctor's letter; reduce to trip-needed supply |
| Business Professionals | Avoid career-ending incidents like the Toyota executive in Japan | No advance permit | Apply for Yakkan Shoumei or MoHAP 4 weeks ahead |
| Families with Elderly Parents | Ensure heart, pain, sleep medicines don't become legal problems | Multiple medications flagged | Inventory all medications; verify each one |
| Students Going Abroad | ADHD and anxiety medications are controlled or banned abroad | Complete ban in destination | Never carry Adderall to Japan, Singapore, UAE |
| Canada PR Applicants & New Immigrants | A medication-related border incident can be flagged in CBSA records, affecting future PR or citizenship applications. Drug inadmissibility findings under IRPA are serious and can result in a 10-year bar. | CBSA record note impacting PR/citizenship | Carry CBSA-compliant documentation; declare all controlled substances; consult RCIC if detained |
| US-Bound Students & H-1B Workers | An undeclared controlled substance at US Customs can trigger a CBP secondary inspection record, visa revocation, or a finding of inadmissibility under the Immigration and Nationality Act. | CBP record; visa revocation; INA inadmissibility | Always declare; carry DEA documentation; do not assume your home-country prescription covers US entry |
| New Zealand Migrants on Work Visas | NZ Customs enforces the Misuse of Drugs Act 1975. A border drug incident can trigger a character assessment that jeopardizes your work visa or residence application under the Immigration Act 2009. | Character assessment under NZ Immigration Act 2009 | Declare all controlled medicines; obtain Medsafe/MOH advance approval where needed; notify your immigration adviser |
| Immigration Consultants & Travel Agents | Advise clients properly; reduce liability; add value to your service offering | Client detained unexpectedly | Share this guide as part of pre-travel briefing |

| Reader Profile | Why This Guide Matters | Primary Risk | Key Action |
|--------------------------------|---|--------------------------------|--|
| Indian Travelers (to UAE/Asia) | India's OTC market includes codeine, Tramadol — narcotics elsewhere | OTC in India = criminal abroad | Check every medicine against destination controlled list |

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Chapter 1: The Hidden Risk

Why Medicines Create Legal Trouble Abroad

REAL STORY: When Kindness Becomes a Crime

Laura was excited. After months of planning, she was finally flying to Egypt to see her husband Omar, who suffered from chronic back pain. As a loving gesture, she packed 290 tablets of Tramadol — a painkiller her colleague had given her. She didn't hide them. She placed them at the top of her suitcase.

After all, Tramadol was just a painkiller, legally available with a prescription in the UK.

Fourteen months later, Laura walked out of an Egyptian prison — emaciated, traumatized, and with a permanent fear of airports. Her two-week holiday had become a nightmare.

This is a true story. It happened to Laura Plummer in 2017. And it could happen to you.

Understanding the Problem

A medicine that is routine in your home country may be restricted, controlled, or completely illegal in another country. Border authorities focus on classification, quantity, packaging, and declaration — not your intentions. The gap between “legal at home” and “legal at destination” has sent innocent travelers to prison.

THE LAW THAT MATTERS IS THEIRS

The medicine may be yours — but the law is theirs. What matters is not where you bought it, but whether it is legal WHERE YOU ARE GOING. A valid prescription is proof you took it legally at home. It is NOT a universal pass at foreign borders.

What Border Officials Check

| Question | What They Check | Common Mistake | Consequence |
|-----------------------------|--|--------------------------------|----------------------------------|
| Is it legal HERE? | Classification under their law, not yours | Assuming home-country legality | Confiscation or arrest |
| Do you need a permit? | Pre-travel advance permits for controlled substances | Applying on arrival | Denial of entry or detention |
| Is the quantity reasonable? | 30–90 day supply for personal use | Carrying 6-month supply | Treated as trafficking suspicion |

| Question | What They Check | Common Mistake | Consequence |
|------------------------------|---|-------------------------------|-------------------------------------|
| Is it in original packaging? | Labels intact with your name and prescription | Pill organizers or loose bags | Immediate escalation |
| Did you declare it? | Customs declaration forms and verbal disclosure | Assuming no need to declare | Smuggling charges in some countries |

The Consequences Can Be Severe

| Consequence | Description | Real-World Example | Duration |
|----------------------------|---|--|-----------------|
| Delay & Interrogation | Hours of questioning; missed connections | Perry Coppins, UK — detained 5 weeks in UAE for excess supply | Hours to days |
| Confiscation | Medicine seized permanently | US/Mexico border — fines up to \$11,780 for undeclared substances | Permanent loss |
| Denial of Entry | Sent back on next available flight | Travelers refused entry to Japan, Singapore, UAE for banned medications | Immediate |
| Arrest & Detention | Days to months in foreign detention | Laura Plummer — 14 months in Egyptian prison for 290 Tramadol tablets | Months to years |
| Criminal Prosecution | Trial, conviction, foreign prison sentence | British men in Dubai — faced 4-year sentences for controlled medications | Years |
| Deportation & Lifetime Ban | Removed and permanently banned from country | UAE can impose lifetime re-entry bans for drug-related offences | Lifetime |

STAGGERING STATISTICS

In a 2024 traveler survey, 27% of Americans reported having medications confiscated during international travel. The problem is far more common than most people realize — and it is entirely preventable with proper preparation.

Three Real Stories: When Prescriptions Become Crimes

THE TOYOTA EXECUTIVE (Japan, 2015)

Julie Hamp, Toyota’s first senior female executive, was arrested in Tokyo after Japanese customs found 57 oxycodone tablets in a package she mailed to herself. The painkiller — legal in the US

with a prescription — is classified as a narcotic in Japan requiring advance import permission.
She spent 20 days in detention. Her mistake: assuming a legal US prescription would be accepted in Japan.

THE TRAMADOL NIGHTMARE (Egypt, 2017)

Laura Plummer, a 33-year-old shop assistant from Hull, UK, was sentenced to 3 years in Egyptian prison for carrying 290 Tramadol tablets for her husband's back pain. She served 14 months before being pardoned. Tramadol is legally prescribed in the UK — but it is treated as a serious narcotic in Egypt. Laura had no criminal intent. But intent does not matter at foreign borders.

THE SIX-MONTH SUPPLY ERROR (UAE, 2017)

Perry Coppins, a 61-year-old British man, traveled to the UAE with his prescribed anxiety medications.
He had all prescriptions and documentation. His only mistake: carrying a six-month supply instead of the permitted three-month maximum. He spent five weeks in UAE custody despite full documentation.

IMMIGRATION CONSULTANT'S PERSPECTIVE — Manoj Palwe, RCIC R422575

“In 25 years of practice, I have seen clients detained for medications in UAE, Japan, Singapore, and Egypt. None of them had criminal intent. All of them could have been protected with simple pre-travel research and documentation. The SAFE Travel System in this guide is the exact protocol I now share with every client before any international trip.”

The Immigration Consequence You May Not Know About

For travelers on active visa applications, PR processes, or immigration pathways to Canada, USA, or New Zealand, a medication-related border incident carries a second layer of risk that most people never consider: the impact on their immigration file.

In Canada, a drug-related offence — even one that results in no conviction — can appear in CBSA border system records. Under the Immigration and Refugee Protection Act (IRPA), a finding of criminality or inadmissibility related to controlled substances can result in a refusal of PR or citizenship, a 10-year bar from Canada, or a requirement for a Criminal Rehabilitation application.

In the United States, CBP officers record secondary inspection events. A sustained finding related to undeclared controlled substances can be cited as a ground of inadmissibility under Section 212(a) of the Immigration and Nationality Act (INA) — affecting H-1B renewals, Green Card applications, and even visa stamping at consulates.

In New Zealand, the Immigration Act 2009 includes a character assessment requirement. A border incident involving controlled drugs — even one where no charges are laid — can be raised during residency applications under the “good character” provisions. The Misuse of Drugs Act 1975 is strictly enforced, and ignorance of the law is not a defence.

FROM AN IMMIGRATION CONSULTANT’S DESK — How This Shows Up in Visa Files

- **HOW THIS RISK SHOWS UP:** When clients are flagged at borders for undeclared controlled substances, CBSA and CBP create records. Those records may surface during Canadian PR/citizenship applications, US Green Card or visa renewal processes, and NZ residency character checks.
- **WHAT I ADVISE MY CANADA/USA/NZ CLIENTS:** Treat your medication documentation the same way you treat your passport — carry it, protect it, and never cross a border without it. If you are ever questioned at a border regarding medications, contact your immigration consultant immediately, before your next border crossing.
- **IF YOU ARE DETAINED:** This is not just a travel inconvenience — it may be a file event. Preserve all receipts, seized medication records, and any written notices. Your immigration consultant needs this evidence to properly assess and disclose (if required) in future applications.

The SAFE System — A Preview

Every situation described in this chapter is preventable. Chapter 5 of this guide presents the complete SAFE Travel System — a 5-step protocol developed over 25 years of advising international travelers. Here is the one-paragraph overview:

| SAFE Step | What It Does |
|-----------|--|
| S — SCAN | Create a complete inventory of every medication you carry, with generic names, dosages, and quantities |

| SAFE Step | What It Does |
|----------------|---|
| A — ASK | Verify rules for EVERY country you visit or transit through from official government sources only |
| F — FIX | Adapt your plan before travel — obtain permits, switch medications, adjust quantities |
| E — EVIDENCE | Prepare your documentation package: doctor's letter, prescriptions, permits, translations |
| Pack & Declare | Keep medications in original packaging; declare where required; carry documents ready |

Full details of the SAFE System, including country-specific timing guides for permit applications, are in Chapter 5.

Chapter 1 Summary

CHAPTER TAKEAWAY

- Medicine legality is determined by the destination country's laws — not your home country's.
- Border officials focus on classification, quantity, packaging, and declaration — not intentions.
- Consequences range from confiscation to years of imprisonment.
- For Canada/USA/NZ immigrants and visa holders: a border incident can affect your immigration file.
- Real people — executives, teachers, retirees — have faced life-altering consequences.
- Indian travelers face extra risk: many India-legal OTC products are narcotics elsewhere.
- The SAFE Travel System (Chapter 5) prevents every scenario described in this chapter.

Common Mistakes to Avoid

- Assuming a prescription automatically makes medication legal everywhere
- Carrying more medication than needed for the trip duration
- Transferring pills to unmarked containers or pill organizers
- Not researching destination AND transit country laws before travel
- Relying on what worked in previous trips to different countries
- Buying OTC products in India without checking ingredients for controlled substances
- Assuming a medication-related border incident will not affect an active visa or PR application

Chapter 2: High-Risk Medicines

Red-Alert Categories That Demand Extra Caution

REAL STORY: The Student's ADHD Medication

Rahul, 22, was thrilled to receive a job offer in Singapore. He had been taking Adderall for his ADHD since age 15. He packed a three-month supply with his US prescription and doctor's letter.

At Singapore immigration, officers pulled him aside.

Hours later, he learned that Adderall — containing amphetamine — is completely prohibited in

Singapore. Possession can result in up to 10 years in prison. Rahul was allowed to surrender the

medication and leave. But his job offer was withdrawn. A three-month supply of legally prescribed

medicine cost him his career opportunity.

SHOCKING STATISTIC

In 2024, 47% of all medication-related issues at international borders involved anxiety, depression, or ADHD medications. Mental health medications are under increasing scrutiny worldwide. Never assume — always verify.

Category 1: Pain Medications & Opioids

| Generic Name | Common Brands | Risk Level | Restricted / Banned In |
|--------------|-------------------------|------------|--|
| Tramadol | Ultram, Tramal | VERY HIGH | Egypt (banned), UAE (permit required), Japan, Middle East, Indonesia |
| Oxycodone | OxyContin, Percocet | EXTREME | Japan (import certificate required), most Asian countries, Middle East |
| Codeine | Tylenol 3, cough syrups | HIGH | UAE, Greece, Japan, Russia, Indonesia — including OTC cough syrups |
| Morphine | MS Contin | EXTREME | Banned or severely restricted in most countries outside the West |
| Hydrocodone | Vicodin, Norco | VERY HIGH | Controlled substance in most countries; DEA Schedule II in US |
| Fentanyl | Duragesic patches | EXTREME | Extremely restricted globally; patches must be declared at all borders |

 **TRAMADOL WARNING**

Tramadol is the #1 medication causing legal trouble for travelers. It is routine in India, UK, and US, but banned or heavily controlled in Egypt, UAE, Indonesia, and much of the Middle East and Asia. Many Indian pharmacies sell it OTC. This makes it a particularly dangerous gap for Indian travelers.

Category 2: Anxiety & Sleep Medications (Benzodiazepines)

| Generic Name | Common Brands | Risk Level | Key Notes |
|--------------|--------------------|------------|---|
| Diazepam | Valium | HIGH | UAE and Japan require advance permits; max quantity restrictions apply |
| Alprazolam | Xanax | HIGH | Heavily scrutinized in UAE, Singapore, Japan; popular anxiety treatment in India |
| Lorazepam | Ativan | HIGH | Same restrictions as Diazepam; requires documentation for most destinations |
| Clonazepam | Klonopin, Rivotril | HIGH | Quantity limits in UAE; not permitted for transit without permits in some countries |
| Zolpidem | Ambien | MODERATE | Controlled substance requiring documentation in most countries |

Category 3: ADHD & Stimulant Medications

 **COMPLETE BAN IN MANY COUNTRIES**

ADHD medications containing amphetamines (Adderall, Vyvanse) or methylphenidate (Ritalin, Concerta) are **COMPLETELY PROHIBITED** in several countries — no permit system exists. If you carry these to Japan, Singapore, South Korea, UAE, or Saudi Arabia, you risk arrest and imprisonment regardless of your prescription.

| Generic Name | Common Brands | Countries Where BANNED |
|---------------------------|-------------------|---|
| Amphetamine (mixed salts) | Adderall, Vyvanse | Japan, Singapore, South Korea, Thailand, Indonesia, UAE, Saudi Arabia |
| Methylphenidate | Ritalin, Concerta | Middle Eastern countries; heavily controlled in Japan/Singapore; permit required in UAE |
| Lisdexamfetamine | Vyvanse | Same restrictions as amphetamines — Japan, Singapore, UAE, Saudi Arabia |

Category 4: Codeine-Based Cough Medicines

Many over-the-counter cough medicines in India contain codeine, which is controlled in numerous countries. Even small quantities — a single bottle of cough syrup — can cause serious legal problems.

⚠️ WARNING: That bottle of cough syrup from your local chemist could land you in jail in UAE, Japan, or Greece.

Always read ALL ingredient labels. Codeine is listed as “Codeine Phosphate” in Indian OTC products. OTC in India does NOT mean legal abroad.

Category 5: Antidepressants & Psychiatric Medications

| Generic Name | Common Brands | Risk Level | Notes |
|--------------|--------------------|------------|---|
| Sertraline | Zoloft | MODERATE | Generally permitted with prescription; declare at customs in UAE |
| Fluoxetine | Prozac | LOW-MOD | Widely accepted but quantity limits may apply in Middle Eastern countries |
| Lithium | Lithobid, Eskalith | HIGH | Requires documentation; monitored substance in many jurisdictions |
| Quetiapine | Seroquel | MODERATE | Antipsychotic; requires clear documentation and original packaging |
| Clozapine | Clozaril | HIGH | Requires special permits; blood monitoring protocols may be required abroad |

Category 6: Cannabis-Based Medications

Medical marijuana and CBD products represent one of the fastest-growing risk categories. The dramatic increase in legalization in Western countries creates a dangerous false sense of security.

⚠️ ZERO TOLERANCE FOR CANNABIS PRODUCTS

Medical marijuana and CBD products are illegal in UAE, Singapore, Japan, South Korea, Thailand, Indonesia, Egypt, and Saudi Arabia — regardless of form (oil, capsule, gummy, vape). Even CBD, legal in Canada and parts of the US, can result in arrest. Do not carry any cannabis-derived product internationally without verifying legality in every country you visit or transit.

Chapter 2 Summary

CHAPTER TAKEAWAY

- Six categories pose the highest risk: opioids, benzodiazepines, ADHD stimulants, codeine products, psychiatric medications, and cannabis-based medicines.
- Mental health medications account for 47% of border medication issues globally.
- Some medications are completely banned — no permit system exists. Check before you book.
- Even over-the-counter products can contain controlled substances — especially Indian cough syrups.
- Classification varies dramatically between countries for the exact same molecule.
- Cannabis-based medications are an emerging high-risk category even for Canadian travelers.

Chapter 3: Country-by-Country Guide

Key Destinations & Their Medication Rules

REAL STORY: The Transit Trap

Dr. Sharma, a cardiologist from Mumbai, was traveling to London with a four-hour layover in Dubai.

He had researched UK medication rules thoroughly. But he hadn't thought about Dubai. During transit, he stepped out of the secure area to shop. When re-entering, his carry-on was screened.

Officials found his blood pressure medication containing a controlled ingredient.

What should have been a quick shopping trip turned into eight hours of questioning. He missed his connection and his conference presentation — not because of UK rules, but because of UAE transit rules.

TRANSIT COUNTRIES MATTER

ALWAYS research medication rules for TRANSIT countries, not just your final destination. A layover is still entry into that country's jurisdiction. Dubai, Singapore, and Japan are the highest-risk transit points globally.

United States — AT A GLANCE

| Question | Answer |
|--|---|
| Is a doctor's letter mandatory? | Not legally required, but STRONGLY recommended for all controlled substances. CBP officers have wide discretion. |
| Typical quantity without special permit | Up to 90-day supply accepted for personal use. Opioids and Schedule II substances face higher scrutiny. |
| Do you need to declare controlled drugs? | Yes. All controlled substances should be declared on CBP Form 6059B. Failure to declare can constitute a federal offence. |
| Key official links | FDA: fda.gov DEA: dea.gov CBP: cbp.gov CDC Yellow Book: cdc.gov/yellowbook |
| Key risks for Indian travelers | Tramadol and codeine products widely used in India are controlled in the US under DEA Schedule IV and Schedule V. Carry originals prescriptions and doctor's letter. |
| Key risks for Canada PR/USA visa holders | A CBP secondary inspection record related to controlled substances can be cited in immigration proceedings. If detained, contact your immigration consultant immediately. |

 **FROM AN IMMIGRATION CONSULTANT’S DESK — USA**

- **HOW THIS SHOWS UP IN VISA FILES:** CBP secondary inspections are recorded. If your H-1B or Green Card application is later reviewed, a drug-related border incident may be raised as a ground of inadmissibility under INA Section 212(a)(2)(A).
- **WHAT I ADVISE MY USA-BOUND CLIENTS:** Carry a doctor’s letter for every controlled substance. Never assume your home-country prescription overrides US federal drug law. If questioned, cooperate fully and contact your immigration lawyer before your next border crossing.

Canada — AT A GLANCE

| Question | Answer |
|--|---|
| Is a doctor’s letter mandatory? | Not mandatory but highly recommended. CBSA officers can request documentation for any controlled substance. Bilingual (English/French) documentation is preferred. |
| Typical quantity without special permit | Reasonable amount for trip duration — no fixed national maximum, but CBSA officers use discretion. Carry only what you need. |
| Do you need to declare controlled drugs? | Yes. All controlled substances must be declared to CBSA on arrival. Failure to declare a scheduled substance is a criminal offence under the Controlled Drugs and Substances Act (CDSA). |
| Key official links | Health Canada: canada.ca/health CBSA: cbsa-asfc.gc.ca Travel health: travel.gc.ca |
| Key risks for Indian travelers | Tramadol is Schedule I in Canada. Many Indian-prescribed opioids are controlled under CDSA. Carry complete prescriptions and doctor’s letter or risk seizure at the border. |
| Key risks for new immigrants / PR applicants | A CDSA violation at the border creates a CBSA record. Under IRPA, criminality or inadmissibility for drug offences can bar permanent residency and require Criminal Rehabilitation (a 5-year waiting period plus application cost). |

 **FROM AN IMMIGRATION CONSULTANT’S DESK — CANADA (RCIC R422575)**

- **HOW THIS SHOWS UP IN FILES:** I have seen clients’ PR applications delayed or refused because of undisclosed CBSA encounters. IRCC requests CBSA records as part of PR and citizenship checks. A medication-related seizure or caution can appear in these records.
- **WHAT I ADVISE:** Declare everything. A declared controlled substance with proper documentation = cleared. An undeclared controlled substance = potential inadmissibility finding. When in doubt, declare and present your documentation.
- **SPECIAL NOTE:** Cannabis is legal in Canada, but bringing any cannabis products into Canada from abroad is still a criminal offence regardless of origin. Do not bring cannabis-based medications from other countries into Canada.

New Zealand — AT A GLANCE

| Question | Answer |
|--|---|
| Is a doctor's letter mandatory? | Yes — for all controlled substances. NZ Customs and the Ministry of Health require a medical certificate for Class B and Class C controlled drugs. Apply to Medsafe at least 2–4 weeks before travel. |
| Typical quantity without special permit | Up to 3 months supply for Class C controlled substances with a medical certificate. Class A and B require Medsafe import licence. |
| Do you need to declare controlled drugs? | Yes. All prescription medicines must be declared at New Zealand Customs. Controlled drugs must have supporting documentation ready at the border. |
| Key official links | Medsafe (Ministry of Health): medsafe.govt.nz NZ Customs: customs.govt.nz Immigration NZ: immigration.govt.nz |
| Class A controlled drugs (BANNED for import) | Heroin, cocaine, methamphetamine, MDMA — no import permit system. Possession is a criminal offence. |
| Key risks for NZ work/residence visa holders | Under the Immigration Act 2009, a drug-related conviction or caution can trigger a 'good character' assessment that jeopardizes residence applications. Even a border caution (not a conviction) may be voluntarily disclosed. |

FROM AN IMMIGRATION CONSULTANT'S DESK — NEW ZEALAND (MIA Qualified)

- **HOW THIS SHOWS UP IN FILES:** New Zealand's character provisions under the Immigration Act 2009 are broad. A drug-related border incident — even without a conviction — may need to be disclosed in a Supplementary Form 1 (character waiver). Failure to disclose is misrepresentation.
- **WHAT I ADVISE MY NZ-BOUND CLIENTS:** Contact Medsafe well before departure. Get your medical certificate in writing. Declare everything at New Zealand Customs. If questioned or cautioned, notify your New Zealand Licensed Immigration Adviser (NZLIA) immediately before your next application.
- **MEDSAFE PROCESS:** Download the 'Bringing Medicines into New Zealand' form from medsafe.govt.nz. For controlled drugs, you need a Ministry of Health import licence in addition to a doctor's letter. Start this process at least 4 weeks before travel.

United Kingdom

| Aspect | Details |
|--------------|---|
| General Rule | Personal licence required for controlled drugs; apply to Home Office in advance for Schedule 2–4 substances |

| Aspect | Details |
|----------------------|--|
| Quantity Limit | Up to 3 months supply generally accepted; beyond 3 months requires personal export/import licence |
| Licence Required For | Strong opioids, benzodiazepines, stimulants, some sleeping pills — apply via gov.uk at least 2 weeks before travel |
| Official Source | GOV.UK — Controlled Drugs Personal Licences, Home Office |

Germany & Schengen Area

| Aspect | Details |
|-----------------|---|
| General Rule | Schengen Certificate (medical attestation) required for narcotic and psychotropic substances across all 27 Schengen countries |
| Quantity Limit | Personal need — typically up to 30 days within Schengen zone; Schengen Certificate issued for this period |
| Documentation | Schengen Certificate obtained from your national health authority; required for morphine, opioids, strong sleep medications |
| Official Source | German Customs (Zoll.de), INCB, individual country health ministries |

Australia

| Aspect | Details |
|------------------|--|
| General Rule | Traveler's exemption allows personal use medications; ALL prescription medications must be declared at customs |
| Quantity Limit | Up to 3 months supply for most medications; some substances require advance TGA permit |
| Requirements | Original packaging, valid prescription, declaration at customs. DO NOT use pill organizers — declare everything. |
| Official Sources | Office of Drug Control, Therapeutic Goods Administration (TGA), Australian Border Force (ABF) |

United Arab Emirates — HIGH RISK

ZERO TOLERANCE POLICY

The UAE has one of the world's strictest drug enforcement policies. Even trace amounts in your bloodstream from medication legally taken elsewhere can result in criminal charges.

MoHAP (Ministry of Health and Prevention) permits **MUST** be obtained **BEFORE** travel. Do not assume you can obtain permission on arrival. Penalties are severe and immediate. Fines: AED 10,000–100,000+. Prison: 4+ years. Risk of lifetime re-entry ban.

| Aspect | Details |
|--------------------|--|
| General Rule | Electronic permit from UAE Ministry of Health and Prevention (MoHAP) required BEFORE travel for all controlled medications |
| Quantity Limit | Controlled drugs: 30 days maximum. Non-controlled: up to 3 months. Exceeding limits = criminal offence. |
| Banned Medications | All amphetamine-based ADHD medications, many codeine products, some antidepressants, multiple sleeping pills |
| Permit Process | Apply through mohap.gov.ae — allow minimum 2 weeks. Bring printed approval with original prescription and doctor's letter. |
| Official Source | mohap.gov.ae — mandatory first stop for any traveler to UAE with prescription medications |

Japan — HIGH RISK


| Aspect | Details |
|------------------------------|---|
| General Rule | Yakkan Shoumei (import certificate) required for most prescription medications — even common ones. Apply in advance. |
| Completely Banned | All amphetamine-based medications (Adderall, Vyvanse, Dexedrine) — NO exceptions, NO permit system exists |
| Controlled (Permit Required) | Codeine, opioids, benzodiazepines, methylphenidate — all require Yakkan Shoumei certificate |
| Application Process | Submit to nearest Japanese Regional Bureau of Health and Welfare minimum 2 weeks before travel |
| Quantity Limit | 1 month supply for prescription medications; 2 months for certain non-prescription medications |
| Official Source | Ministry of Health, Labour and Welfare — mhlw.go.jp/english |

Singapore — EXTREME RISK

| Aspect | Details |
|--------------|--|
| General Rule | One of the world's strictest drug enforcement regimes; Misuse of Drugs Act carries mandatory death penalty for trafficking |

| Aspect | Details |
|--------------------------------|---|
| Completely Banned | ALL amphetamines, cannabis products (including CBD), Adderall, Vyvanse — possession = criminal charge |
| Controlled (Approval Required) | Sleeping pills, opioid painkillers, anxiety medications — require HSA pre-approval before travel |
| Quantity Limit | Up to 3 months supply with valid prescription and HSA approval; all must be in original packaging |
| Official Source | Health Sciences Authority Singapore — hsa.gov.sg |

India (for Outbound Indian Travelers)

 **SPECIAL NOTE FOR INDIAN TRAVELERS**

India has a uniquely liberal OTC market. Many medications freely available at your local chemist — including codeine cough syrups, Tramadol, and some benzodiazepines — are narcotics, controlled substances, or completely banned in most destination countries. Indian travelers are disproportionately represented in international medication detention statistics.

Rule: Check every medication you are carrying against your destination country’s controlled substances list before you travel. Never rely on “I bought it at the pharmacy.”

Quick Reference: Country Comparison Chart

| Country | Max Supply | Permit Required? | Key Risk Items |
|------------------|--------------------|--|---|
| USA | 90 days | Declare; DEA permit for some | Undeclared controlled substances; CBP record affects immigration |
| Canada | Trip duration | Declare; Health Canada permit possible | CDSA violation record impacts PR/citizenship; declare everything |
| New Zealand ★ | 3 months (Class C) | Medsafe certificate REQUIRED | Good character assessment; Misuse of Drugs Act 1975 strictly enforced |
| UK | 3 months | Home Office personal licence | Schedule 2–4 substances; Tramadol, opioids, benzodiazepines |
| Germany/Schengen | 30 days | Schengen Certificate required | Narcotics, psychotropics; certificate covers all 27 Schengen states |

| Country | Max Supply | Permit Required? | Key Risk Items |
|--------------|----------------------|------------------------------|--|
| Australia | 3 months | TGA permit for some | ALL Rx meds must be declared; no pill organizers |
| UAE ⚠️ | 30 days (controlled) | MoHAP permit MANDATORY | ADHD meds banned; codeine restricted; bloodstream traces = criminal charge |
| Japan ⚠️ | 1 month (Rx) | Yakkan Shoumei required | Amphetamines BANNED; most Rx meds need advance import certificate |
| Singapore ⚠️ | 3 months | HSA approval required | Amphetamines BANNED; death penalty for trafficking threshold |
| Saudi Arabia | 30 days | SFDA permit for narcotics | All controlled substances require advance approval; strict enforcement |
| Egypt | 1 month | Advanced notification needed | Tramadol BANNED; opioids BANNED; strict enforcement |

★ New Zealand: Class A drugs (heroin, cocaine, meth) have no import permit system — possession is a criminal offence. Class B and C require Medsafe medical certificate. A border incident can trigger a character assessment affecting residency applications.

Chapter 4: 5 More High-Risk Countries You May Not Expect

Lesser-Known But Equally Dangerous Destinations

Many travelers focus only on the well-publicized risks of UAE, Japan, and Singapore. But several other countries have equally strict or surprising medication laws that can catch unprepared travelers off guard.

Greece

| Aspect | Details |
|------------------------|--|
| Risk Level | MODERATE-HIGH |
| Key Restriction | Codeine-containing medications are controlled and require a medical certificate; many common cough syrups are restricted |
| Controlled Items | Opioids, benzodiazepines, codeine products — require documentation even for short visits |
| Documentation Required | Doctor's letter with generic names; original prescription; carry no more than 1 month supply |
| Official Source | Greek National Organization for Medicines (EOF) — eof.gr |

Indonesia

| Aspect | Details |
|------------------------|---|
| Risk Level | HIGH |
| Key Restriction | Tramadol is heavily controlled and any quantity without proper documentation can lead to arrest; Bali drug laws are especially enforced |
| Controlled Items | Tramadol, codeine products, benzodiazepines, opioids; cannabis is completely banned with severe penalties |
| Documentation Required | Original prescription, doctor's letter with generic names, permit for controlled substances; apply through Indonesian consulate |
| Important Note | Indonesian drug laws carry mandatory minimum sentences; "Bali Nine" case demonstrates zero-tolerance enforcement |

Thailand

| Aspect | Details |
|------------------------|--|
| Risk Level | HIGH |
| Key Restriction | Thailand has undergone significant drug law changes; while cannabis was decriminalized for domestic use, import of cannabis products remains illegal |
| Controlled Items | Amphetamines (including ADHD medications) completely banned; kratom is controlled; opioids require advance permits |
| Documentation Required | Carry maximum 30-day supply; original prescriptions required; some medications require import permit from FDA Thailand |
| Official Source | Thai Food and Drug Administration — fda.moph.go.th |

Russia

| Aspect | Details |
|------------------------|--|
| Risk Level | HIGH |
| Key Restriction | Codeine products are heavily controlled; carrying without permit is a criminal offence; psychotropic medications require special documentation |
| Controlled Items | Codeine products (including many common cough medicines), opioids, benzodiazepines, ADHD stimulants |
| Documentation Required | Medical certificate from certified Russian translator; notarized translation of prescription; no more than 3 months supply |
| Important Note | Import permit required for Schedule II-III psychotropic substances; apply through Russian consulate |

South Korea

| Aspect | Details |
|------------------------|--|
| Risk Level | HIGH |
| Key Restriction | Narcotics Act strictly enforced; amphetamine-based ADHD medications completely prohibited |
| Completely Banned | Adderall, Vyvanse, and all amphetamine-based medications — no permit system exists |
| Controlled Items | Opioids, benzodiazepines, methylphenidate (permit may be possible with advance application) |
| Documentation Required | Import permit for controlled substances from Ministry of Food and Drug Safety (MFDS); doctor's letter required |

| Aspect | Details |
|-----------------|---|
| Official Source | Ministry of Food and Drug Safety — mfds.go.kr |

 **CHAPTER TAKEAWAY**

- Greece, Indonesia, Thailand, Russia, and South Korea all enforce strict medication laws that surprise travelers.
- Indonesia and Thailand carry severe mandatory minimum sentences for drug offences.
- South Korea bans amphetamine-based medications with no permit pathway.
- Always research the specific countries on your route, including stops you consider “routine.”
- When in doubt: contact the destination country’s embassy or consulate before travel.

Chapter 5: The SAFE Travel System

Your 5-Step Protection Protocol

✔ SUCCESS STORY: How Preparation Saved Meera

Meera, 45, takes medication for anxiety and chronic pain. When planning a trip to Dubai with a

layover in Singapore, she used the SAFE Travel System from this guide.

She discovered one medication required a UAE permit and another needed to be switched for Singapore.

Three weeks before travel, she had her doctor prescribe alternatives and obtained the UAE MoHAP permit.

At Dubai airport, she was briefly questioned. She calmly presented her permit, doctor's letter, and

prescriptions. Within five minutes, she was through. Preparation made all the difference.

"I would have been detained without this guide." — Meera, frequent traveler

S — SCAN Your Medicines

Before you research anything, create a complete inventory of every medication you plan to travel with. Use Appendix A as your worksheet.

| Information Needed | Why It Matters | Example | Where to Find It |
|-----------------------|---|----------------------------|----------------------------------|
| Generic Name | Border officers recognize generic (INN) names, not brand names | Alprazolam, not "Xanax" | Prescription label or pharmacist |
| Strength / Dose | Determines if quantity is reasonable for trip duration | 0.5mg tablets | Prescription label |
| Daily Dosage | Justifies the quantity being carried relative to trip length | One tablet twice daily | Doctor's letter |
| Quantity Carried | Must match trip duration; excess quantity is a red flag | 60 tablets for 30-day trip | Count your supply |
| Controlled Substance? | Determines which research and permits are required for each country | Check DEA/WHO Schedule | DEA.gov or WHO website |

A — ASK the Destination

For EVERY country you will visit OR transit through, verify rules using OFFICIAL sources only. Do not rely on travel blogs, social media, or what worked for someone else.

Verification Hierarchy

- Destination government/embassy website — Most authoritative
- Customs/border authority official pages — Specific import rules
- Public health/drug control agency — Medical regulations
- Travel health guidance (CDC Yellow Book, INCB) — General guidelines
- Consulate phone call or email — Direct written confirmation

DO NOT RELY ON UNOFFICIAL SOURCES

Do NOT rely on travel blogs, forums, or “what worked for a friend.” Laws change frequently. One incorrect piece of advice from an unverified source could cost you your freedom. Always go to official government sources. Get written confirmation where possible.

F — FIX the Plan

If your research reveals problems — banned medications, required permits, or quantity issues — adapt before you travel. Do not leave problems for the airport.

| Situation | Possible Solutions |
|---------------------------------------|--|
| Medication is banned at destination | Ask doctor for a travel-safe therapeutic alternative that serves the same medical purpose |
| Permit required | Apply immediately — UAE and Japan permits can take 2–4 weeks to process |
| Quantity exceeds limits | Reduce to allowed amount; arrange to obtain remaining medication at destination through local prescription |
| Transit country has stricter rules | Consider alternate routing; research transit-country-specific rules even for airside transits |
| Medication is in OTC cough syrup | Switch to a codeine-free formulation before travel; carry only the alternative |
| Medication has no equivalents allowed | Carry documentation of medical necessity; contact destination country’s health authority in advance |

ALWAYS CONSULT YOUR DOCTOR FIRST

Always consult your doctor BEFORE changing medications for travel. Never stop or switch without medical guidance — your health comes first. A doctor who understands travel medicine can often suggest safe, equivalent alternatives.

E — EVIDENCE (Documentation)

Documentation is your protection. Think of it as your “medication passport.” Keep all documents together in a dedicated folder, separate from your other travel documents.

| Document | What It Must Include | Priority |
|----------------------------|--|----------------|
| Doctor's Letter | Patient name, passport number, diagnosis, generic names, dosage, quantity, trip duration, doctor's registration number, official stamp | ESSENTIAL |
| Prescription Copies | Original prescriptions with patient name, medication details, and prescribing doctor's details | ESSENTIAL |
| Permits/Certificates | Schengen Certificate, Yakkan Shoumei, MoHAP permit, HSA approval — as required per destination | WHERE REQUIRED |
| Medical Summary | Brief medical history for chronic conditions — helps establish medical necessity | RECOMMENDED |
| Travel Itinerary | Shows trip duration to justify medication quantity carried | HELPFUL |
| Translated Doctor's Letter | Required for non-English destinations: Japan (Japanese), UAE (Arabic), Germany (German) | HIGH VALUE |

Pack & Declare

Packing Rules

- ALWAYS keep medications in original pharmacy-labeled packaging with labels intact
- Never transfer pills to unmarked containers, zip-lock bags, or pill organizers
- Carry medications in your carry-on bag so they are accessible for inspection
- Keep medication quantity reasonable — only what you need plus a small buffer (10–20%)
- Keep a separate “medication folder” with all documents near your medications
- Store digital copies of all documents on your phone AND backed up to email

⚠️ LOOSE PILLS = IMMEDIATE SUSPICION

Loose pills in a plastic bag look like contraband — even if legal. Extended questioning is almost guaranteed. Original packaging with your name and prescription details is your first line of defence at any border checkpoint.

Declaration Rules

| Country | Declaration Requirement |
|-----------|--|
| Australia | MANDATORY: Declare ALL prescription medications on arrival card regardless of type |
| UAE | MANDATORY: Declare all controlled medications; have MoHAP permit ready BEFORE being asked |
| USA | Controlled substances should be declared; CBP officers may ask |
| Japan | Declare anything requiring Yakkan Shoumei; have certificate ready at customs |
| Canada | Declare controlled substances; CBSA may request to see prescriptions |
| Singapore | Declare all medications requiring HSA approval; proactive disclosure is your best strategy |

Chapter 5 Summary — The SAFE System

| Step | Action | Key Question | Timing |
|--------------|--|--------------------------------|-------------------------|
| S — SCAN | Create complete medication inventory using Appendix A | What exactly am I carrying? | 8 weeks before travel |
| A — ASK | Verify rules for each country (visit AND transit) from official sources | Is it legal where I am going? | 6–8 weeks before travel |
| F — FIX | Adapt plan if research reveals problems — permits, alternatives, quantity adjustment | What needs to change? | 4–6 weeks before travel |
| E — EVIDENCE | Prepare all documentation: doctor’s letter, prescriptions, permits, translation | Can I prove medical necessity? | 2–4 weeks before travel |

| Step | Action | Key Question | Timing |
|----------------|---|--------------------------------|---------------|
| Pack & Declare | Original packaging; medications in carry-on; declare where required | Am I presenting this properly? | Day of travel |

CHAPTER 5 ACTION CHECKLIST

- I have completed my Medicine Inventory (Appendix A).
- I have verified rules for ALL countries — including transit points.
- I have consulted my doctor about any needed alternatives or quantity adjustments.
- I have applied for any required permits (UAE MoHAP / Japan Yakkan Shoumei / UK Home Office).
- I have my doctor’s letter with generic names, dosages, and quantities.
- All medications are in original pharmacy-labeled containers.
- I know what to declare and at which borders.
- I have digital backups of all documents on my phone and email.


Chapter 6: Document Templates

Ready-to-Use Formats for Your Protection

These templates have been developed based on years of experience advising travelers. Use them exactly as shown and customize the blank fields. Always print on official letterhead when applicable.

Template 1: Doctor's Letter

Request this letter from your prescribing physician. Print it on clinic/hospital letterhead with official stamp. This is the single most important document you can carry.

 **DOCTOR'S LETTER TEMPLATE**

[CLINIC / HOSPITAL LETTERHEAD]

Date: _____

TO WHOM IT MAY CONCERN

This is to certify that the following patient is under my medical care and is prescribed medications for ongoing treatment of a diagnosed medical condition:

Patient Full Name: _____ Date of Birth: _____
Passport Number: _____ Nationality: _____
Medical Condition(s): _____

The patient has been prescribed the following medications for personal therapeutic use during travel:

1. Generic: _____ | Brand: _____ | Strength: _____ | Dose: _____ | Qty: _____
2. Generic: _____ | Brand: _____ | Strength: _____ | Dose: _____ | Qty: _____
3. Generic: _____ | Brand: _____ | Strength: _____ | Dose: _____ | Qty: _____
4. Generic: _____ | Brand: _____ | Strength: _____ | Dose: _____ | Qty: _____

These medications are medically necessary and intended solely for the personal use of the above

patient during their travel from _____ to _____ (Dates: _____ to _____).


Physician Name: _____ Specialty: _____ Reg. No.: _____

Clinic/Hospital: _____ Phone: _____ Email: _____

Signature & Official Stamp: _____ Date: _____

Template 2: Self-Declaration for Customs

Use this when no specific permit is required but you want to have a brief, organized statement ready.

 **SELF-DECLARATION TEMPLATE**

MEDICATION SELF-DECLARATION

I, [Full Name], passport number [____], nationality [____], am traveling from [Origin Country] to [Destination Country] on [Date].

I am carrying the following prescription medications for my personal medical use:

1. [Generic Name] ([Brand Name]), [Strength], [Quantity] — prescribed for [Condition]
2. [Generic Name] ([Brand Name]), [Strength], [Quantity] — prescribed for [Condition]

All medications are in original pharmacy-labeled packaging. I have the original prescriptions and a doctor's letter available for inspection upon request.

Signed: _____ Date: _____

Template 3: UAE MoHAP Permit Checklist


Before applying for your MoHAP permit at mohap.gov.ae, ensure you have all required documents.

| Required Item | Status |
|---|-----------------------------------|
| Completed MoHAP online application form | <input type="checkbox"/> Complete |

| Required Item | Status |
|--|------------------------------------|
| Copy of valid passport (data page) | <input type="checkbox"/> Attached |
| Original prescription with doctor's signature and registration number | <input type="checkbox"/> Attached |
| Doctor's letter on official letterhead with generic names and quantities | <input type="checkbox"/> Attached |
| Medical summary or diagnosis documentation | <input type="checkbox"/> Attached |
| Travel itinerary (confirming trip duration for quantity justification) | <input type="checkbox"/> Attached |
| Submitted minimum 2 weeks before travel date | <input type="checkbox"/> Confirmed |
| Printed copy of approval to carry at airport | <input type="checkbox"/> Printed |

Template 4: Japan Yakkan Shoumei Checklist

| Required Item | Status |
|---|------------------------------------|
| Completed Yakkan Shoumei application form | <input type="checkbox"/> Complete |
| Original prescription translated into Japanese (by certified translator) | <input type="checkbox"/> Attached |
| Doctor's letter stating medical necessity (translated if possible) | <input type="checkbox"/> Attached |
| Submitted to Japanese Regional Bureau of Health and Welfare minimum 2 weeks before travel | <input type="checkbox"/> Confirmed |
| Certificate printed and carried with medications | <input type="checkbox"/> Printed |
| Confirmed quantity does not exceed 1-month supply (prescription Rx) | <input type="checkbox"/> Confirmed |

 **PRO TIPS FOR A STRONGER DOCTOR'S LETTER**

1. Always use generic (INN) drug names — these are universally recognized at borders.
2. Request the letter on official letterhead with the doctor's registration number.
3. Ask for the letter to be dated within 3 months of travel for maximum credibility.
4. For UAE, Japan, and Singapore: request a separate translated letter in Arabic/Japanese/English.
5. Ask your doctor to include their direct phone number for border officer verification.
6. Request a separate letter for each country if laws differ significantly.
7. Have the letter notarized for high-risk destinations (UAE, Singapore, Indonesia).

Chapter 7: If Things Go Wrong

Airport Emergency Protocol

✓ **SUCCESS STORY: The Critical First 60 Seconds**

When customs officers at Singapore airport pulled Priya aside and found her anxiety medication, her heart pounded. Instead of arguing, she took a deep breath, stayed calm, and handed over her document folder.

“These are my prescribed medications. Here is my doctor’s letter, my prescription, and my HSA approval.”

The officers reviewed her documents, made a phone call, and within 15 minutes, she was on her way.

Those first 60 seconds made all the difference.

THE FIRST 60 SECONDS MATTER MOST

Stay calm. Speak slowly. Show documents immediately. Your demeanor in the first minute shapes the entire encounter. An officer who sees preparation and calm cooperation is more likely to resolve the situation quickly.

The DO List

| DO | Why It Matters |
|--|--|
| Stay calm and composed | Agitation signals potential guilt. A calm, organized traveler projects legitimacy. |
| Speak slowly and clearly | Officers may not be fluent in your language. Clear speech prevents misunderstandings. |
| Hand over documents immediately | Don’t wait to be asked. Proactively showing documents demonstrates preparation and transparency. |
| Point to generic names on your doctor’s letter | Generic names are universally recognized. Brand names may be unfamiliar to foreign officers. |
| Be respectful and cooperative | Cooperation is noted in reports. Uncooperative behavior can escalate minor issues. |
| Ask for a supervisor if needed | If questioning continues unreasonably, politely request a senior officer or supervisor. |

The DON'T List

| DON'T | Why It Causes Problems |
|---|--|
| Argue "It's legal in my country!" | This is perceived as disrespectful of local law and can immediately escalate the situation. |
| Get emotional, defensive, or confrontational | Emotional responses delay resolution and may lead to further inspection or detention. |
| Sign documents you don't understand | You may unknowingly be confessing to an offence. Request translation or legal counsel first. |
| Offer bribes | This is a criminal offence in virtually all countries and can turn a minor issue into serious charges. |
| Leave medication unattended | Keep all medications and documents with you at all times during border processing. |
| Make assumptions about embassies rescuing you | Embassies support — they cannot override local laws or guarantee early release. |

If Medication Is Not Allowed

| Option | What It Means | When to Choose |
|------------------|--|--|
| Declare Now | Officially declare; may be held and returned to you on departure | Medication is controlled but not banned; you have valid permits; you need it during the trip |
| Surrender | Give up medication permanently; proceed without it | Medication is prohibited but not essential; you can manage the trip without it |
| Return to Origin | Return on next flight back to your departure point | Medication is medically essential and you cannot complete the trip safely without it |

If Detained: Step-by-Step Protocol

- Request to speak with a lawyer IMMEDIATELY. Do not answer further questions without legal representation.
- Request consular assistance — contact your home country's embassy or consulate.
- Do NOT sign any documents you don't fully understand. Request a certified translation.
- Do not admit to anything beyond confirming you are carrying the medications.
- Stay calm — detention does not necessarily mean prosecution. Preparation and cooperation matter.
- Ask for a written receipt if any medications are seized.
- Do not contact or rely on advice from fellow detainees — seek only qualified legal counsel.

BEFORE EVERY INTERNATIONAL TRIP

Save your home country's embassy contact for every destination in your phone under a label like "Embassy UAE" or "Consulate Tokyo". You may need it quickly. Embassy numbers for Indian travelers: MOIA.gov.in | For Canadians: travel.gc.ca/assistance | For NZ-bound: mfat.govt.nz/embassies

If You Are on a Visa or PR Process — What to Do

A medication-related border incident while you are on an active immigration application for Canada, USA, or New Zealand requires immediate, careful action. This section is specifically for applicants on PR pathways, pending visa renewals, citizenship applications, or work visa holders.

Step 1: Preserve All Evidence Immediately

- Ask border officers for a written record of any seizure, caution, or detention — get the officer's name and badge number if possible
- Photograph or note the exact language used in any written notice
- Keep every piece of paper issued to you at the border, including receipts for seized medications
- Write a dated personal memo of everything that happened within 24 hours — while the details are fresh

Step 2: Contact Your Immigration Consultant Before Your Next Application

- In Canada: Contact your RCIC before submitting or updating any IRCC application. Drug-related border incidents may need to be disclosed in PR, citizenship, or certain visa applications.
- In USA: Contact your immigration attorney before any CBP interaction, visa stamp appointment, or USCIS filing. A CBP secondary record may surface in background checks.
- In New Zealand: Contact your Licensed Immigration Adviser (LIA) immediately. Good character declarations in residency applications require disclosure of border cautions, not just convictions.

Step 3: Understand the Disclosure Question

Many immigration application forms ask whether you have ever been involved in a drug-related offence, arrested, detained, or cautioned. Border incidents — even where no charges were laid — may need to be disclosed depending on the country and application type. Non-disclosure of a disclosable event is misrepresentation, which carries its own serious consequences.

 **FROM AN IMMIGRATION CONSULTANT'S DESK — On Evidence Preservation**

- **THE SINGLE BIGGEST MISTAKE I SEE:** Travelers do not preserve records of border incidents and then face impossible questions in immigration forms months or years later.
- **WHAT I ADVISE:** Treat every piece of paper from a border incident like a legal document. Keep it permanently. If you are ever asked on an immigration form whether you have been detained or cautioned, you need to be able to describe the incident accurately.
- **THE GOOD NEWS:** A properly documented, isolated incident involving a personal-use medication, where you were cooperative and transparent, is very different from a criminal conviction. But you need proper legal and immigration advice to handle it correctly. Do not attempt to navigate disclosure questions alone.

Airport Emergency Card

Print this card and keep it with your medications at all times:

 **AIRPORT EMERGENCY CARD — If Stopped for Medicines: SHOW THIS FIRST**

“These are prescription medicines for my personal medical use. I have a prescription and a doctor’s letter with generic names. All medicines are in their original packaging.”

✓ **DO:** Stay calm | Show documents immediately | Point to generic names | Ask about options
(declare/surrender/return) | If seized, request written receipt

✗ **DON'T:** Argue “It’s legal in my country” | Carry loose pills | Sign documents you don’t understand
| Offer bribes | Answer questions without a lawyer if detained

My Embassy Contact: _____ Phone: _____

My Doctor Contact: _____ Phone: _____

My Immigration Consultant/Lawyer: _____ Phone: _____

Chapter 8: Frequently Asked Questions

Q1: I have a valid prescription. Isn't that enough?

No. A prescription proves the medication was legally prescribed to you in your home country. It does not guarantee legality at your destination. A prescription is helpful documentation, but it does not override the destination country's controlled substances laws. Always verify rules for your specific destination country.

Q2: What if I'm just transiting through a country?

Transit counts as entry into that country's legal jurisdiction — in most cases, even for airside transits where you do not technically pass through immigration. UAE, Japan, and Singapore are particularly strict on this point. Always research transit country rules for any medication. If in doubt, route through a lower-risk transit hub.

Q3: How far in advance should I prepare?

Start at least 4–6 weeks before travel. UAE MoHAP permits, UK Home Office personal licences, and Japan Yakkan Shoumei certificates can each require 2–4 weeks processing time. Leave yourself enough time for the permit to be granted, questions to be answered, and alternatives to be arranged if needed.

Q4: Can I use a pill organizer for travel?

Strongly discouraged. Loose pills without original pharmacy labels look suspicious at every border checkpoint. Keep medications in original pharmacy-labeled containers at all times. The original label is part of your documentation chain — it connects the medication to your prescription.

Q5: What about over-the-counter medications I bought in India?

Treat every OTC medication with the same scrutiny as a prescription medication. Many Indian OTC products contain codeine, pseudoephedrine, or other substances that are controlled or banned internationally. Always check the full ingredient list of any OTC medication against your destination country's controlled substances list before packing.

Q6: I'm traveling to Dubai. What medications are banned?

UAE bans or heavily restricts: all amphetamine-based ADHD stimulants (Adderall, Vyvanse), many codeine products, some antidepressants, and multiple sleeping pills and anxiety medications. The permitted list changes. Always apply for a MoHAP permit online before travel at mohap.gov.ae. Do not attempt to determine this on your own — verify with the official source.

Q7: Can I bring my ADHD medication to Japan?

Amphetamine-based medications including Adderall and Vyvanse are completely banned in Japan — no permit or exception system exists. If you carry them, you will face arrest. Consult your doctor before travel about non-amphetamine alternatives such as Strattera (atomoxetine), which are permitted in Japan with a Yakkan Shoumei certificate.

Q8: My medication was seized. What do I do?

First: do not panic. Request to speak with a lawyer and contact your embassy immediately. Request a written receipt for any seized items. Do not attempt to purchase controlled substances locally without a proper local prescription from a licensed physician. Ask border authorities about legal options for obtaining an equivalent medication locally through proper channels.

Q9: Does cannabis-based medication count? (CBD oil, medical marijuana)

Yes — and it is among the highest-risk items to carry internationally. Medical marijuana and CBD products are illegal in UAE, Singapore, Japan, South Korea, Thailand, Indonesia, Egypt, Saudi Arabia, and most of the Middle East — regardless of the form (oil, capsule, gummy, vape). Even CBD, which is legal in many Western countries, can result in arrest.

Q10: I'm a senior citizen with multiple medications. Where do I start?

Start with Appendix A — the Medicine Inventory Worksheet. List every medication including vitamins and supplements. Identify which are prescription vs OTC. Then cross-reference the high-risk categories in Chapter 2 against your list. The SAFE Travel System in Chapter 5 provides a step-by-step approach designed exactly for travelers managing multiple medications.

Q11: What happens to my medications when I change planes?

If you are leaving the secure airside area of a transit airport, you enter that country's jurisdiction and your medications are subject to their laws. If you remain completely airside without passing through customs or immigration, risk is lower — but some countries (including the UAE) screen even airside transiting passengers. When in doubt, treat transit as entry.

Q12: Can I ship medications to my destination ahead of time?

This is highly risky and generally discouraged for controlled substances. Mailing controlled medications internationally can violate both the origin country's export laws and the destination country's import laws simultaneously — as the Toyota executive case demonstrated. Consult a pharmacist and the destination country's drug control authority before attempting this.

MYTH vs FACT

MYTH: "If I'm detained, my embassy will get me out immediately."

FACT: Embassies can provide critical support — connecting you with lawyers, notifying your family, and advocating for fair treatment. But they cannot override local laws or guarantee early release. Your best protection is preparation before travel. Prevention always beats rescue.

Chapter 9: Special Situations

Tailored Guidance for Seniors, Families, Students & Long-Stay Travelers

The SAFE Travel System applies to all travelers — but certain groups face unique challenges that deserve specific guidance. This chapter addresses four common special situations.

Senior Travelers & Elderly Parents

Senior travelers often carry the highest medication burden: blood pressure medicines, heart medications, sleep aids, pain relievers, and diabetes treatments. Many of these overlap with controlled substance categories in international law.

Senior Traveler Action Plan

- Create a comprehensive medication inventory BEFORE booking travel — the itinerary may need to change based on what you carry
- Contact your cardiologist or primary care physician specifically about international travel and your full medication list
- Request a comprehensive doctor's letter covering all medications, not just controlled ones
- Consider a pre-travel appointment with a travel medicine specialist (especially for multi-country trips)
- Research whether your chronic condition medications are available locally in case of an emergency
- Carry a typed, laminated medication list in your wallet or purse at all times
- Inform your family of your complete medication list and keep a copy with them at home

HIGH-RISK FOR SENIORS: HEART & BLOOD PRESSURE MEDICATIONS

Beta blockers, ACE inhibitors, and certain cardiac drugs can contain components controlled in some countries. Morphine-based pain patches are extremely restricted. Always verify every medication, not just the obvious ones.

Family Travel with Children

Traveling with children adds complexity: ADHD medications are among the most restricted globally, pediatric formulations may differ in classification, and parents may not realize that common children's cough syrups contain codeine.

Family Travel Considerations

- ADHD medications for children (Ritalin, Concerta, Adderall) face the same restrictions as adult formulations — check each destination
- Children’s codeine-containing cough syrups: confirm whether the destination permits them; many countries have stricter rules for codeine in pediatric formulations
- Get a separate doctor’s letter for each child’s medications
- Ensure each child’s medications are clearly labeled with the child’s name, not a parent’s name
- Research whether pediatric medical care is available at your destination in case a child needs a different formulation

Students Going Abroad

Students traveling abroad for study — particularly those managing anxiety, depression, or ADHD — face some of the highest risks because they may be carrying medications long-term and crossing into some of the most restrictive jurisdictions (Japan, Singapore, South Korea, UAE).

Student Pre-Departure Checklist

- Contact the student health or international office at your destination institution — they can advise on local medication laws
- If your ADHD medication is banned at your destination, consult your psychiatrist immediately about permitted alternatives
- Research whether you can obtain your prescription locally (and whether equivalent medications exist)
- Carry no more than a 30-day supply when arriving for the first time; renew through local medical channels once established
- Register with your home country’s embassy or consulate at your study destination
- Carry copies of your medical records in case you need to establish care with a local doctor

Long-Stay & Multi-Country Travelers

Business travelers, digital nomads, and long-term travelers face unique challenges: supply limits, permit renewals, finding equivalent medications in unfamiliar healthcare systems, and navigating multiple countries’ laws in a single trip.

Long-Stay Strategy

- For stays exceeding 30–90 days in high-risk countries, plan to establish local medical care and obtain medications through local prescription channels
- Research whether your medication is available under the same or similar generic name in your destination country
- Contact your health insurer about international coverage for prescription medications

- For multi-country trips: create a country-by-country permit calendar with application deadlines 6–8 weeks before your first border crossing
- Consider carrying a translation of your prescription and medical summary in the languages of every country you will visit
- Designate a trusted contact person at home who has copies of all your medical records and can assist in an emergency

Chapter 10: Building Your Medication Passport

A System for Every Trip, Every Time

The concept of a “Medication Passport” — a comprehensive, organized set of documents specifically for your medications — is one of the most powerful tools any international traveler can have. Think of it as your medication’s equivalent of a visa: official, prepared in advance, and ready to present.

What Goes Into Your Medication Passport

| Document | Purpose |
|--|--|
| Master Medication List (Generic Names) | Universal reference that border officers worldwide can read and verify |
| Doctor’s Letter(s) | Official medical authorization from your prescribing physician |
| Original Prescriptions | Legal proof the medications were prescribed to you |
| Country-Specific Permits | Mandatory pre-approvals (MoHAP, Yakkan Shoumei, Schengen Certificate, HSA, etc.) |
| Medical Summary | Brief history of your conditions establishing medical necessity |
| Travel Itinerary | Justifies the quantity of medications being carried |
| Embassy Contacts | Emergency contacts for every country you visit or transit |
| Translated Documents | Doctor’s letter translated into destination country’s language |
| Laminated Quick Reference | The Airport Emergency Card (Chapter 7) in your wallet |
| Digital Backup | All documents saved to cloud storage AND emailed to yourself |

Maintaining Your Medication Passport

- Update your medication passport before every international trip — even if your medications haven’t changed
- Doctor’s letters should be dated within 3 months of travel for maximum credibility
- Permits expire — check validity dates and renew in advance
- Laws change — re-verify destination rules even for countries you have visited before
- Keep a master digital folder labeled “Medication Passport” with subfolders by country
- Share the digital backup with one trusted family member in case you are unable to access your phone



THE GOLDEN RULE OF MEDICATION TRAVEL

Prepare your medication passport with the same care and attention you give to your visa and passport. A traveler who arrives with organized, complete documentation sends a clear message: this person has nothing to hide. That alone can transform a potentially difficult situation into a smooth border crossing.

Digital vs Physical: What to Keep Where

| Document Type | Recommendation |
|---|---|
| Original prescriptions | Physical original in medication folder; digital scan in cloud + email |
| Doctor's letters | Physical original + 2 photocopies; digital scan in cloud + email |
| Country permits (MoHAP, Yakkan Shoumei, etc.) | Printed official copy in medication folder; digital copy in cloud |
| Embassy contacts | Saved in phone under "Embassy [Country]"; also in physical card in wallet |
| Airport Emergency Card | Laminated physical card kept WITH medications at all times |
| Medical summary | Physical copy in medication folder; digital in cloud |
| Travel itinerary | Physical printout; also accessible on phone |



A NOTE FROM MANOJ

"In 25 years of helping people cross borders, the single most common reason travelers face problems is not malicious intent — it is lack of preparation. The travelers who sail through border checks are not the ones who got lucky. They are the ones who prepared. They know what they are carrying, why they are carrying it, and how to prove it. That is the entire purpose of this guide. Carry your medications with pride and documentation. You have every right to travel with your health."
 — Manoj Palwe, RCIC R422575

Appendix A: Medicine Inventory Worksheet

Complete this worksheet before every international trip. Use one row per medication. This is Step S of the SAFE Travel System.

| Field | Medication 1 | Medication 2 | Medication 3 |
|-----------------------|--|--|--|
| Generic Name | | | |
| Brand Name | | | |
| Strength (mg) | | | |
| Daily Dosage | | | |
| Quantity Carrying | | | |
| Condition Treated | | | |
| High-Risk Category? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Controlled Substance? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Permit Required? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Doctor Name | | | |
| Doctor Contact | | | |

Trip Details

| Field | Your Information |
|-----------------------------|--|
| Travel Dates | From: _____ To: _____ |
| Primary Destination | |
| Secondary Destinations | |
| Transit Countries | (Research medication rules for EACH transit country) |
| Trip Duration | _____ days Quantity justified: _____ days supply |
| Embassy Contact — Country 1 | Country: _____ Phone: _____ Address: _____ |
| Embassy Contact — Country 2 | Country: _____ Phone: _____ Address: _____ |

Appendix B: Pre-Travel Document Checklist

Essential Documents (Must Have)

- Doctor's letter in English — with generic names, dosages, quantities, trip dates, doctor's registration number, and official stamp
- Original prescriptions for all medications — with patient name, medication details, and prescribing doctor
- Country-specific permits where required — Schengen Certificate, Yakkon Shoumei, MoHAP permit, HSA approval

Recommended Documents (Should Have)

- Medical summary for chronic conditions — brief history establishing medical necessity
- Purchase invoices or pharmacy receipts for all medications
- Confirmed travel itinerary — justifies quantity being carried
- Translation of doctor's letter — in destination language (Japanese, Arabic, German, etc.)
- Embassy contact information for every country you visit or transit
- Copy of your doctor's medical registration certificate

Packing Verification

- ALL medications in ORIGINAL pharmacy-labeled containers — no pill organizers
- No loose pills or unlabeled containers of any kind
- Medications in carry-on bag — accessible and ready for inspection
- Dedicated "medication folder" kept with your medications at all times
- Photos of all documents saved on phone AND backed up to email
- Airport Emergency Card printed and kept with medications (see Chapter 7)

Pre-Departure Verification

- Rules verified for destination country from official government website
- Rules verified for ALL transit countries from official sources
- Permits applied for with sufficient lead time (minimum 2–4 weeks)
- Doctor consulted about any required alternatives or adjustments
- Know exactly what needs to be declared at each border
- Family member or trusted contact briefed on your medications and has copies of all documents

Appendix C: Official Reference Sources by Country

International Resources

| Resource | What It Provides | Website |
|-------------------------|--|---|
| CDC Yellow Book | US travel health guidance for travelers | cdc.gov/yellowbook |
| INCB Travel Guidelines | International guidelines for controlled medicines travelers | incb.org/incb/en/travellers |
| WHO Essential Medicines | Global classification of medicines and controlled substances | who.int/medicines |
| IATA Dangerous Goods | Aviation regulations for carrying medical items | iata.org/dgr |

Country-Specific Official Sources

| Country | Authority | Website |
|--------------|---|---|
| USA | FDA, DEA, CBP (Customs and Border Protection) | fda.gov dea.gov cbp.gov |
| Canada | Health Canada, CBSA | canada.ca travel.gc.ca |
| UK | Home Office, Border Force | gov.uk/travelling-controlled-drugs |
| Germany | German Federal Institute for Drugs (BfArM), German Customs | bfarm.de zoll.de |
| Australia | Therapeutic Goods Administration, Australian Border Force | tga.gov.au abf.gov.au |
| UAE | Ministry of Health and Prevention (MoHAP) | mohap.gov.ae (permits here) |
| Japan | Ministry of Health, Labour and Welfare; Regional Health Bureaux | mhlw.go.jp/english |
| Singapore | Health Sciences Authority (HSA) | hsa.gov.sg |
| Saudi Arabia | Saudi Food and Drug Authority (SFDA) | sfda.gov.sa |
| Indonesia | National Agency of Drug and Food Control (BPOM) | pom.go.id |

| Country | Authority | Website |
|-------------|---|----------------|
| Thailand | Thai Food and Drug Administration | fda.moph.go.th |
| South Korea | Ministry of Food and Drug Safety (MFDS) | mfds.go.kr |
| India | Central Drugs Standard Control Organisation (CDSCO) | cdsco.gov.in |

Appendix D: High-Risk Medication Quick-Check Card

Tear out or photograph this card and keep it with your travel documents. Check your medications against this list before every international trip.

| Medication Category | Key Countries to Research Before Traveling |
|---|---|
| Tramadol (any strength) | UAE, Egypt, Indonesia, Japan, Middle East — many ban or heavily restrict |
| Oxycodone, Morphine, Fentanyl | Japan (import certificate required), most of Asia, Middle East |
| Codeine (including in cough syrups) | UAE, Greece, Japan, Russia, Indonesia — including OTC products |
| Adderall, Vyvanse (amphetamines) | Japan, Singapore, UAE, Saudi Arabia, South Korea, Thailand — COMPLETELY BANNED |
| Ritalin, Concerta (methylphenidate) | Japan, Singapore, UAE (permit possible); many Middle Eastern countries |
| Xanax, Valium, Ativan (benzodiazepines) | UAE, Japan, Singapore, South Korea — permits required |
| Zolpidem (Ambien) | Controlled in most countries; documentation required for all international travel |
| CBD oil or medical cannabis | Illegal in UAE, Singapore, Japan, South Korea, Thailand, Egypt, Saudi Arabia, Indonesia |
| Lithium | Documentation required; monitored in many countries |
| Any Indian OTC cough syrup | Check for codeine phosphate in ingredients — controlled or banned abroad |

WHEN IN DOUBT: CONTACT THE DESTINATION EMBASSY

If you cannot find a clear answer from official government websites, call or email the destination country's embassy or consulate in your home country BEFORE travel. Request written confirmation and keep it with your other travel documents. This extra step has saved travelers from detention in countries with poorly documented online rules.

Appendix E: Master 1-Page Pre-Travel Checklist

Print this page and carry it with your medication folder. Check every item before every international trip. This combines the essential actions from all 10 chapters into one scannable reference.

| <input type="checkbox"/> Action | When to Complete |
|---|-------------------------|
| <input type="checkbox"/> Create complete Medicine Inventory (Appendix A) using generic names | 8 weeks before travel |
| <input type="checkbox"/> Identify which medications are controlled substances in each destination | 8 weeks before travel |
| <input type="checkbox"/> Verify rules for EVERY destination AND transit country from official government websites | 6–8 weeks before travel |
| <input type="checkbox"/> Apply for UAE MoHAP permit at mohap.gov.ae (if traveling to UAE) | 6–8 weeks before travel |
| <input type="checkbox"/> Apply for Japan Yakkan Shoumei certificate at mhlw.go.jp/english (if traveling to Japan) | 6–8 weeks before travel |
| <input type="checkbox"/> Apply for Singapore HSA approval at hsa.gov.sg (if traveling to Singapore) | 6–8 weeks before travel |
| <input type="checkbox"/> Apply for NZ Medsafe certificate at medsafe.govt.nz (if traveling to NZ) | 6–8 weeks before travel |
| <input type="checkbox"/> Apply for UK Home Office personal licence at gov.uk (if traveling to UK with Schedule 2–4) | 4–6 weeks before travel |
| <input type="checkbox"/> Obtain Schengen Certificate from national health authority (if traveling Schengen zone) | 4–6 weeks before travel |
| <input type="checkbox"/> Consult your doctor about any needed medication alternatives or quantity adjustments | 4–6 weeks before travel |

| ☐ Action | When to Complete |
|---|-------------------------|
| ☐ Request updated doctor's letter (dated within 3 months of travel) with generic names, dosages, quantities, trip dates, doctor's registration number, and official stamp | 3–4 weeks before travel |
| ☐ Request translated doctor's letter in destination language (Arabic for UAE, Japanese for Japan) | 3 weeks before travel |
| ☐ Collect original prescriptions for every medication you are carrying | 2 weeks before travel |
| ☐ Save embassy contact numbers for every country you visit or transit into your phone | 1 week before travel |
| ☐ Confirm all permits have arrived and are printed (not just digital copies) | 3–5 days before travel |
| ☐ Pack all medications in ORIGINAL pharmacy-labeled containers — no pill organizers | Day before travel |
| ☐ Place all medications in carry-on bag — accessible for inspection at any checkpoint | Day before travel |
| ☐ Place document folder (letters, prescriptions, permits, translations) WITH medications in carry-on | Day before travel |
| ☐ Save digital backup of all documents to cloud AND email to yourself | Day before travel |
| ☐ Print Airport Emergency Card (Chapter 7) and place in wallet or medication folder | Day before travel |
| ☐ Know exactly what must be declared at each border on your route | Day before travel |
| ☐ For Canada/USA/NZ visa holders: notify your immigration consultant you are traveling internationally | 1 week before travel |

 **IF STOPPED AT ANY BORDER — IMMEDIATE ACTION**

Stay calm. Hand over documents immediately. Speak slowly. Point to generic names on your doctor's letter.

Do not argue. Do not sign anything you do not understand. Request a written receipt if anything is seized.

If detained: request a lawyer AND contact your embassy AND contact your immigration consultant.


About Dreamvisas Services

Dreamvisas Inc. (Taurus Infotek) is a Canadian-registered immigration consultancy with offices in Toronto, Canada and Pune, India. Founded in 2001 by Manoj Palwe, RCIC R422575, the firm has assisted 10,000+ families across Canadian, Australian, and international immigration pathways.

This guide is one of many educational resources produced by the Dreamvisas team as part of their mission to give every traveler and aspiring immigrant the information they need to move through the world safely and legally.


How We Can Help You


| Service | Who It Is For |
|--|---|
| Travel Medicine Compliance Review | Travelers bound for UAE, Japan, Singapore, NZ or carrying complex medication lists who want a personalized review of their documentation before departure |
| Pre-Landing Briefing for Canada | New immigrants and PR holders preparing to land in Canada for the first time; covers settlement, CBSA declaration, and medication compliance |
| Pre-Landing Briefing for USA / NZ | Students, H-1B workers, and skilled migrants arriving in the USA or New Zealand who need practical on-arrival guidance |
| Personal Evaluation Report (PER) | Anyone considering Canadian immigration who wants a professional written assessment of their eligibility, options, and recommended pathway — no commitment required |
| Visa Strategy & Application Assistance | Skilled workers, students, families, and business owners navigating Express Entry, PNP, spousal sponsorship, LMIA, and other pathways |
| Border Incident Immigration Review | Visa and PR applicants who have had a border incident that may need to be disclosed in future immigration applications — assessment by RCIC |


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PERSONAL EVALUATION REPORT (PER)

For a professional assessment of your specific immigration case, consider a Personal Evaluation Report (PER) with Manoj Palwe at dreamvisas.com. Get clarity on your options before making any major immigration decision.

A Small Favour That Helps Fellow Travelers

If this book helped you understand your options or avoid a costly mistake, please leave an honest Amazon review. Two minutes — it helps the next person in the same situation find the information they urgently need.

LEAVE AN HONEST REVIEW

Your review helps other travelers discover this guide and stay safe. Whether you are a frequent flyer, a worried parent, or a professional managing your health abroad — your experience matters. Thank you.

Remember: The Medicine Is Yours, But the Law Is Theirs.

Thank you for reading. Safe travels.

Manoj Palwe

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