

**Table of Changes
Form I-693
04-16-09**

Instructions	CURRENT LANGUAGE	PROPOSED LANGUAGE
Page 1, Section I, “What is the Purpose of Form I-693?”	Section I. Applicant’s Instructions... A list of those health grounds can be found in Section 212(a)(1) of the Immigration and Nationality Act. The list is also available in Question 7 of Section III, Frequently Asked Questions.	Section I. Applicant’s Instructions... A list of those health grounds can be found in Section 212(a)(1) of the Immigration and Nationality Act. The list is also available in Question 8 of Section III, Frequently Asked Questions.
Page 1, Section I, “What is the Purpose of Form I-693?”	How Do I Find a Designated Civil Surgeon in the Area Where I Live? To find a designated civil surgeon in your area, you can call the USCIS National Customer Service Center (NCSC) at 1-800-375-5283 and follow the instructions in the automated menu. Service is available in English and Spanish. A list of the designated civil surgeons in your area can also be generated by going to the civil surgeon page from the USCIS Web site at www.uscis.gov and clicking on the civil surgeon locator link.	How Do I Find a Designated Civil Surgeon in the Area Where I Live? To find a designated civil surgeon in your area, you can call the USCIS National Customer Service Center (NCSC) at 1-800-375-5283 and follow the instructions in the automated menu. Service is available in English and Spanish. A list of the designated civil surgeons in your area can also be generated by going to the civil surgeon page from the USCIS Web site at www.uscis.gov and clicking on the civil surgeon locator under “Immigration Medical Examinations” in the “Services and Benefits” selection choice.
Page 2, Section II. Civil Surgeon's Instructions, What Are My Responsibilities as a Designated Civil Surgeon?	2. Follow HHS Guidelines... The <i>Technical Instructions</i> are available on the CDC's website at http://www.cdc.gov/ncidod/dq/civil.htm . CDC also posts periodic updates to the <i>Technical Instructions</i> at http://www.cdc.gov/ncidod/dq/updates.htm .	2. Follow HHS Guidelines... The <i>Technical Instructions</i> (including periodic updates to the <i>Technical Instructions</i> posted by CDC) are available on the CDC Web site at http://www.cdc.gov/ncidod/dq/civil.htm .

<p>Page 3. Section II. Civil Surgeon's Instructions, What Do I Do After the Medical Exam and Follow-Up (If Required) Are Completed?</p>	<p>4.</p> <p>A. Refer the applicant to the local health department if the chest X-ray suggests TB or other circumstances are present as described in CDC's <i>Technical Instructions</i>. NOTE: CDC also recommends referral to the local health department when the chest X-ray is normal or not suggestive TB, but the applicant has a tuberculin skin test reaction of $\geq 10\text{mm}$, in order to evaluate the possible need for preventative therapy.</p> <p>Give the results to the applicant. Give the completed Form I-693 to the applicant in a sealed envelope. On the front of the envelope write in capital letters: "<u>DO NOT OPEN. FOR USCIS USE ONLY.</u>" On the back of the envelope, write your initials across the line where the flap of the envelope and the envelope meet. Then, with clear cellophane tape, place the tape with half on the flap of the envelope and half on the envelope across the envelope's entire width (and across your initials). USCIS will not accept Form I-693 if it is not in a sealed envelope or if the envelope is altered in any way. Also, you should keep a copy of the I-693 for your records.</p> <p>Return all supporting medical documents to the applicant and</p>	<p>4.</p> <p>A. Refer the applicant to the local health department if the chest x-ray suggests TB or other circumstances are present as described in CDC's <i>Technical Instructions</i>.</p> <p>Make two copies of the completed and signed Form I-693, and any supporting documentation (such as x-ray reports or other reports) that you submit to USCIS. You should keep a copy of Form I-693 and any supporting documentation that you submit to USCIS for your records. Give the other copy of the completed and signed Form I-693 and any supporting documentation to the applicant. The vaccination portion of Form I-693 will serve as the applicant's official vaccination record and may be retained by the applicant for future use in establishing compliance with vaccination requirements (example: school, day care, employment, etc.).</p> <p>Prepare the original of the completed and signed Form I-693</p>
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	<p>give them a copy of the vaccination record. Return all supporting medical documents, including chest X rays (if obtained), directly to the applicant. In addition, give the applicant a copy of the completed vaccination record in Part 2. This will serve as the applicant's official vaccination record and may be retained by the applicant for future use in establishing compliance with vaccination requirements. (Example: school, day care, employment, etc.)</p>	<p>for submission to USCIS. Place the original of the completed and signed Form I-693 and any supporting documentation (such as x-ray reports or other reports) into an envelope, and then seal the envelope. On the front of the envelope, write in capital letters: "DO NOT OPEN. FOR USCIS USE ONLY." On the back of the envelope, write your initials across the seal where the flap of the envelope and the envelope meet. Seal the entire flap with clear cellophane tape; make sure that the tape, in addition to the flap, also covers your initials. Give the sealed envelope to the applicant.</p> <p>The applicant must submit the envelope to USCIS. IMPORTANT: USCIS will not accept Form I-693 if it is not in a sealed envelope or if the envelope is altered in any way.</p> <p>Return all supporting medical documents that were not required to be included in the sealed envelope to the applicant.</p>
<p>Page 4, Section III, Frequently Asked Questions</p>	<p>[Add between Question 3 and Question 4 a new Question 4 and Redesignate subsequent questions as 5. etc.]</p>	<p>4. What if I am an asylee dependent applying for adjustment of status and already had a medical exam overseas?</p> <p>If you were admitted to the United States as an asylee dependent, you generally do not need to repeat the entire medical exam you had overseas at the time of submission of Form I-485, provided that:</p> <p>A. No Class A condition was found during the exam; and</p>

Comment [rbf1]: Deletion (see below) are based on DOMO comments that asked what we are trying to say. Whether the following was meant:

Seal the entire flap with tape and ensure that the initials are covered, too?

Comment [rbf2]: Comment by DOMO: Is it preferable to refer to "derivative asylee"?

		<p>B. You have applied for adjustment of status within one year of eligibility to file.</p> <p>You will, however, be required to comply with the vaccination requirement and complete Part 1, Information About You, and submit the vaccination section of Part 2 with your adjustment of status application. A designated civil surgeon must complete the vaccination section and Part 5, Civil Surgeon Certification.</p>
<p>Page 5, Section III. Frequently Asked Questions, Communicable Diseases of Public Health Significance, Chart, Tuberculosis (TB)</p>	<p>All applicants two years of age and older are required to have a tuberculin skin test (TST) given by the Mantoux technique. (Civil surgeons may require an applicant younger than two years to undergo a TST if there is evidence of contact with a person known to have tuberculosis or other reasons to suspect tuberculosis.) After the skin test, the applicant will need to return to the civil surgeon within 48 to 72 hours to have the results read. If you have a reaction of four millimeters or less, generally you will not need any further tests for TB. A chest X-ray is required when the reaction to the TST is five millimeters or more. The civil surgeon will explain the medical requirements to you in more detail.</p>	<p>All applicants two years of age and older are required to be tested for TB with an initial screening test. Civil surgeons may require an applicant younger than two years of age to undergo testing if there is evidence of contact with a person known to have tuberculosis or other reasons to suspect tuberculosis. The physician may administer only one of the following initial screening tests:</p> <ol style="list-style-type: none"> 1. Tuberculin Skin Test (TST) given by the Mantoux technique. After the skin test, you will need to return to the civil surgeon within 48 to 72 hours to have the result read. If you have a reaction of four millimeters or less, generally, you will not need any further tests for TB. A chest x-ray is required when the reaction to the TST is five millimeters or more. The civil surgeon will explain the medical requirements to you in more detail. 2. QuantiFERON®-TB Gold (QFT-G) Test. This blood test is an option for most but not all applicants (see update to <i>Technical Instructions</i> at

		<p>http://www.cdc.gov/ncidod/dq/updates.htm). You will not have to return to the civil surgeon's office for the result to be read; the result is generally available within 24 hours. If the test is negative, you generally will not need any further tests for TB. Depending on the result of the test, further evaluation with a chest x-ray may be required. The civil surgeon will explain the medical requirements to you in more detail.</p> <p>3. T-SPOT® TB test. This blood test is an option for most but not all applicants (see update to <i>Technical Instructions</i>). You will not have to return to the civil surgeon's office to have the result read; the results are generally available within one day. If the test is negative, you generally will not need any further tests for TB. Depending on the result of the test, further evaluation with a chest x-ray may be required. The civil surgeon will explain the medical requirements to you in more detail.</p>
<p>Page 5, Section III. Frequently Asked Questions. “How do I know whether a doctor is a designated civil surgeon?”</p>	<p>6. How do I know whether a doctor is a designated civil surgeon? You can obtain a list of the designated civil surgeons by calling the USCIS National Customer Service Center at 1-800-375-5283, visiting the civil surgeon page from the USCIS Web site at www.uscis.gov, and clicking on the civil surgeon locator link, or by visiting your local USCIS office.</p>	<p>6. How do I know whether a doctor is a designated civil surgeon? You can obtain a list of the designated civil surgeons by calling the USCIS National Customer Service Center at 1-800-375-5283, visiting the civil surgeon page from the USCIS Web site at www.uscis.gov, and clicking on the “Civil Surgeon Locator” under “Immigration Medical Examinations” of the “Services and Benefits” section, or by visiting your local USCIS office.</p>
<p>Page 5, Section III. Frequently</p>	<p>8. What are the medical grounds of inadmissibility? The medical grounds of</p>	<p>8. What are the medical grounds of inadmissibility? The medical grounds of</p>

Asked Questions. “What are the medical grounds of inadmissibility?”	inadmissibility under U.S. immigration laws are divided into four categories communicable diseases of public health significance, lack of required vaccinations, physical or mental disorders with harmful behavior, and drug abuse/drug addiction. The civil surgeon is required to perform a general physical exam and specific evaluations, as described below.	inadmissibility under U.S. immigration laws are divided into four categories: (a) Communicable diseases of public health significance; (b) Lack of required vaccinations; (c) Physical or mental disorders with harmful behavior; (d) Drug abuse or addiction. The civil surgeon is required to perform a general physical examination and specific evaluations, as described below.
Page 6, Vaccination Requirements.	Vaccination Requirements ...HHS has determined that a vaccine is “not medically appropriate” if (a) the vaccine is not recommended for your specific age group;(b) there is a medical reason why it would not be safe to have the vaccine (for example, allergies to eggs and yeast, pregnancy, hypersensitivity to prior vaccines, or other medical reasons); or (c) you are unable to complete the entire series of a required vaccine within a reasonable amount of time.	Vaccination Requirements ...HHS has determined that a vaccine is “not medically appropriate” if: (a) the vaccine is not recommended for your specific age group; (b) There is a medical reason why it would not be safe to have the vaccine (for example, allergies to eggs and yeast, hypersensitive to prior vaccines, other medical reasons; (c) You are unable to complete the entire series of a required vaccine within a reasonable amount of time. (d) For the influenza vaccine, it is not the flu season.
FORM	CURRENT LANGUAGE	PROPOSED LANGUAGE
Page 1, Part 2, 2. Communicable Diseases of Public Health Significance.	A. Tuberculosis (TB) <input type="checkbox"/> Tuberculin Skin Test (TST) (Required for applicants 2 years of age and older: for children under 2 years of age, see pp. 11-12 of Technical Instructions at http://www.cdc.gov/ncidod/dq/civil.htm .) Date TST Applied	A. Tuberculosis (TB): An initial screening test (TST, QFT-G, T-SPOT) is required for all applicants 2 years of age and older; for children under 2 years of age, see <i>Technical Instructions</i> at http://cdc.gov/ncidod/dq/civil.htm . The civil surgeon should perform one type of initial screening test only , followed by further evaluation, if needed (chest x-rays).

	<p>Date TST Read</p> <p>Size of Reaction (<i>mm</i>)</p> <p><input type="checkbox"/> Chest X-Ray - Required ONLY for TST reactions equal of ≥ 5 mm or if specific TST exception criteria met, or for any applicant with TB symptoms or immunosuppression (e.g., HIV). Attach copy of X-Ray Report.</p> <p>Date Chest X-Ray Taken</p> <p>Date Chest X-Ray Read</p> <p>Results</p> <p><input type="checkbox"/> Normal</p> <p><input type="checkbox"/> Abnormal (Describe results in remarks.)</p> <p>Findings: ...</p>	<p>1. Tuberculin Skin Test (TST):</p> <p><input type="checkbox"/> Not administered (TST exception applies)</p> <p>Date TST Applied</p> <p>Date TST Read</p> <p>Size of Reaction (<i>mm</i>)</p> <p>Result:</p> <p><input type="checkbox"/> Negative (4mm or less of induration)</p> <p><input type="checkbox"/> Positive (≥ 5 mm; chest x-ray required)</p> <p>2. QuantiFERON®-TB Gold (QFT-G Test):</p> <p>Date/Time Sample Drawn</p> <p>Date/Time Testing Initiated (within 12 hrs of sample being drawn)</p> <p>IU/ml:</p> <p>Result:</p> <p><input type="checkbox"/> Negative</p> <p><input type="checkbox"/> Positive (ESAT-6 and/or CFP-10 responsiveness detected)(chest x-ray required)</p> <p><input type="checkbox"/> Indeterminate (If test result is indeterminate, proceed as stated in CDC's <i>Technical Instructions</i> Updates at http://www.cdc.gov/ncidod/dq/civil.htm.)</p>
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<p>Page 2, Part 2, D. Other Class A/Class B Conditions for Communicable Diseases of Public Health Significance</p>	<p>[ADD]</p>	<p><input type="checkbox"/> No Class A/B Condition</p>
<p>Page 2, Part 2, 3. Physical or Mental Disorders With Associated Harmful</p>	<p><input type="checkbox"/> Physical/Mental Disorder, With Associated Harmful Behavior, Class A</p> <p><input type="checkbox"/> Physical/Mental Disorder, Without Associated Harmful</p>	<p><input type="checkbox"/> No Class A or B Physical or Mental Disorder</p> <p><input type="checkbox"/> Physical/Mental Disorder, With Associated Harmful Behavior, Class A</p>

Behavior	Behavior, Class B	<input type="checkbox"/> Physical/Mental Disorder, Without Associated Harmful Behavior, Class B
Page 2, Part 2, 4. Drug Abuse/Drug Addiction	<input type="checkbox"/> Substance (Drug) Use, Listed in Section 202 of Controlled Substance Act, Class A <input type="checkbox"/> Substance (Drug) Use, Not Listed in Section 202 of Controlled Substance Act, But With Associated Harmful Behavior, Class A <input type="checkbox"/> Prior Substance (Drug) Use in Remission, Class B	<input type="checkbox"/> No Class A or B Drug Abuse/Addiction <input type="checkbox"/> Substance (Drug) Use, Listed in Section 202 of Controlled Substance Act, Class A <input type="checkbox"/> Substance (Drug) Use, Not Listed in Section 202 of Controlled Substance Act, But With Associated Harmful Behavior, Class A <input type="checkbox"/> Prior Substance (Drug) Use in Remission, Class B
Page 3, Part 2, 5. Vaccination Chart, Give Copy to Applicant	Name (<i>Type or print your name</i>)	Name of Applicant Remarks: (If needed, provide any remarks, e.g. reason for contraindication)
Page 4, Part 3. Referral to Health Department Or Other Doctor/Facility	Type or Print Name of Doctor or Health Department	Type or Print Name of Doctor or Health Department Receiving Referral
Page 5, Part 5. Civil Surgeon's Certification	I certify under penalty of perjury....; that I performed the examination in accordance with the Centers for Disease Control and Prevention's <i>Technical Instructions</i> , and all supplemental information or updates provided to me...	I certify under penalty of perjury...that I performed the examination in accordance with the Centers for Disease Control and Prevention's <i>Technical Instructions</i> , and all supplemental information or updates...
Page 5, After Part 6.	[ADD]	Part 7. FOR USCIS USE ONLY (Not to be completed by the civil surgeon)

		<input type="checkbox"/> 212(g)(2)(B) Blanket Waiver for Vaccination Granted Remarks (if needed):
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