

CDC's Division of Global Migration and Quarantine

The Role of CDC regarding the Technical Instructions and the Immigration Medical Exam

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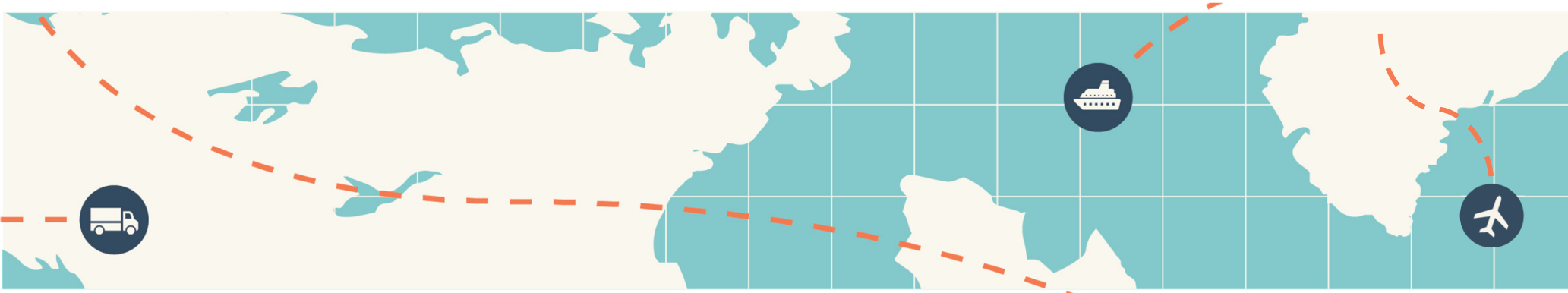
Medical Officer

Immigrant, Refugee, and Migrant Health Branch

2022 Virtual Civil Surgeon Workshop

August 31, 2022

SKROBARCEK, CS WORKSHOP SEPTEMBER 2022



Objectives

- ❖ Understand the role of CDC regarding the Technical Instructions
- ❖ Become familiar with CDC resources for Civil Surgeons

Immigration Basics

Immigration Helpful Definitions

Immigrants

- People who officially applied for and obtained US immigrant visa overseas
- Had the full immigration medical exam or IME completed overseas by a panel physician
- Become a lawful permanent residents (LPR) (“green card”) upon arrival

Status adjusters

- People applying for LPR status while already in the United States on some other kind of terms
- Must have the full IME with a civil surgeon

Immigration Helpful Definitions (cont.)

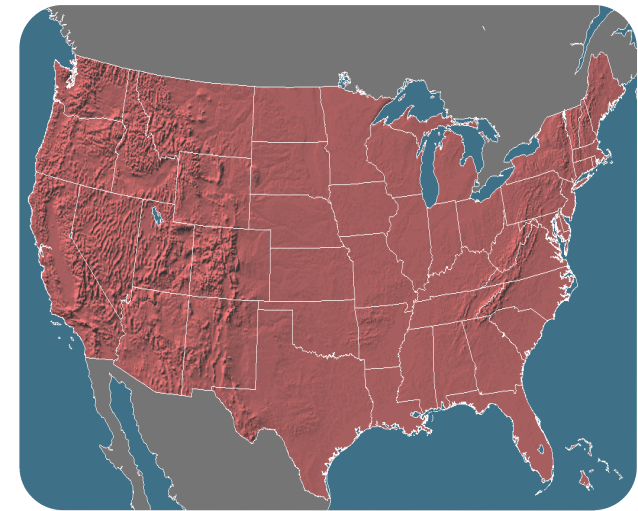
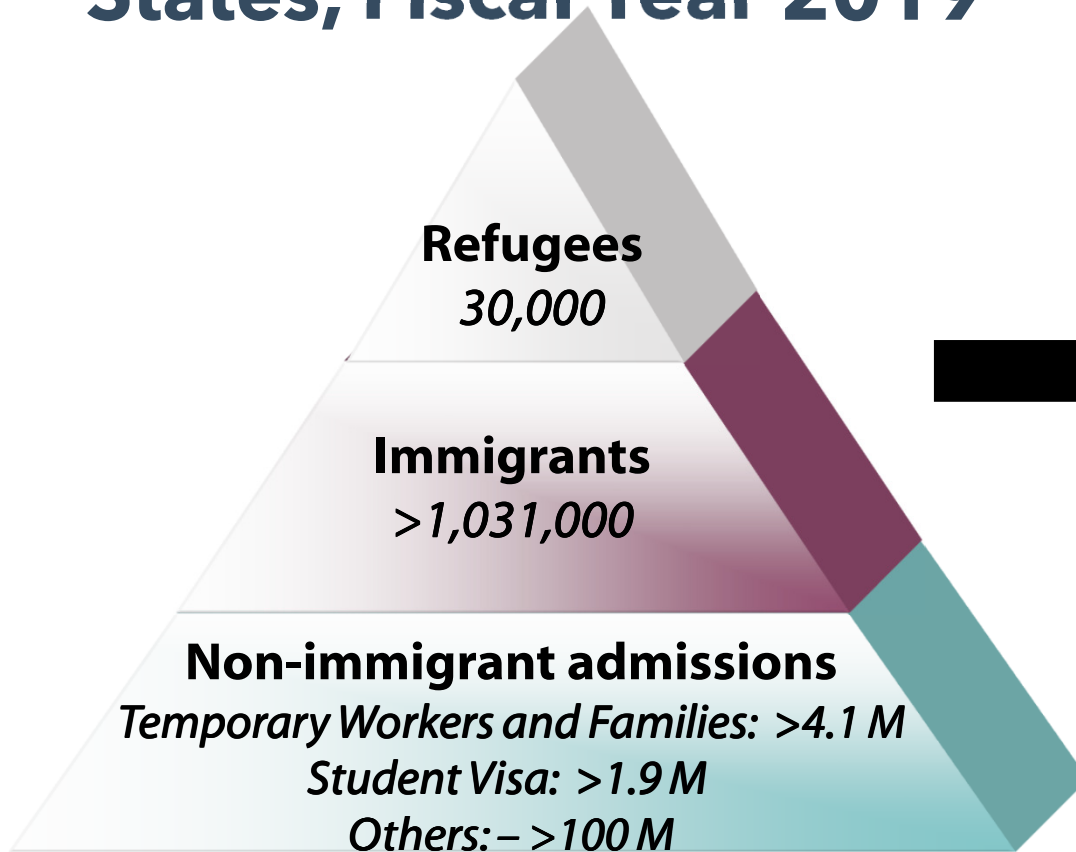
Refugees

- People who applied for admission to the United States in order to avoid persecution in their country of origin
- Had the full IME completed overseas by a panel physician, except that vaccinations were voluntary
- Those who are granted refugee status enter the U.S. under a protected status and must apply for adjustment of status to LPR one year after arrival

Naturalization

- Refer to persons aged 18 years and over who become citizens of the United States
- Most LPRs are eligible to apply for naturalization within 5 years after obtaining LPR status

Estimated Annual International Arrivals, United States, Fiscal Year 2019



Source: 2019 Yearbook of Immigration Statistics, Department of Homeland Security.

https://www.dhs.gov/sites/default/files/publications/immigration-statistics/yearbook/2019/yearbook_immigration_statistics_2019

CDC's Role in Immigration Processing

DGMQ Public Health Mission

To reduce morbidity and mortality among immigrants, refugees, travelers, expatriates, and other globally mobile populations, and to prevent the introduction, transmission, and spread of communicable diseases through regulation, science, research, preparedness, and response



CDC/DGMQ's Regulatory Authority

- International & interstate movement of people, animals, & cargo
- Prevent importation & spread of cholera, yellow fever, plague, viral hemorrhagic fevers, smallpox, diphtheria, pandemic influenza, infectious TB, SARS, measles

Immigration and Nationality Act 1968

- Required medical exam
- Inadmissible conditions (TB, Hansen's disease, STIs, harmful behavior, substance use disorder of controlled substance)
- Vaccines required

National Quarantine Act 1878

Refugee Act 1980

- Prevent & control infectious diseases at origin
- Diseases of PH significance
- Meet at ports of entry
- Notification of state/local HD

Role of CDC in the IME

- Uses regulatory authority to govern the requirements of the IME
- Writes Technical Instructions to outline the requirements of the examination
- Serves as the subject matter expert for the immigration medical exam
 - USCIS
 - Civil Surgeons

Who we are



Division of Global Migration and Quarantine

Immigrant, Refugee, and Migrant Health Branch

Medical Assessment and Policy Team

- Physicians
- Public health specialists
- Epidemiologists
- Laboratorian
- Health Education Specialists

Immigration Medical Exam

Medical Exam for Public Health Purposes

- Identify the presence or absence of certain disorders that could result in exclusion from the United States under the provisions of the Immigration and Nationality Act
 - Class A Conditions
 - Class B Conditions
- The medical examination in the Technical Instructions only screens for conditions required by US immigration laws and regulations and is not a complete medical evaluation

Class A Condition

<https://www.ecfr.gov/current/title-42/chapter-I/subchapter-C/part-34>

<https://www.cdc.gov/immigrantrefugeehealth/about/medical-exam-FAQs.html>

- A physical or mental disorder that renders the applicant ineligible for admission or adjustment of status
 - Communicable disease of public health significance, including but not limited to:
 - Tuberculosis, infectious
 - Syphilis, infectious
 - Gonorrhea
 - Hansen’s Disease
 - Failure to show proof of required vaccinations
 - Physical or mental disorder associated with harmful behavior
 - Substance use disorder abuse of a controlled substance

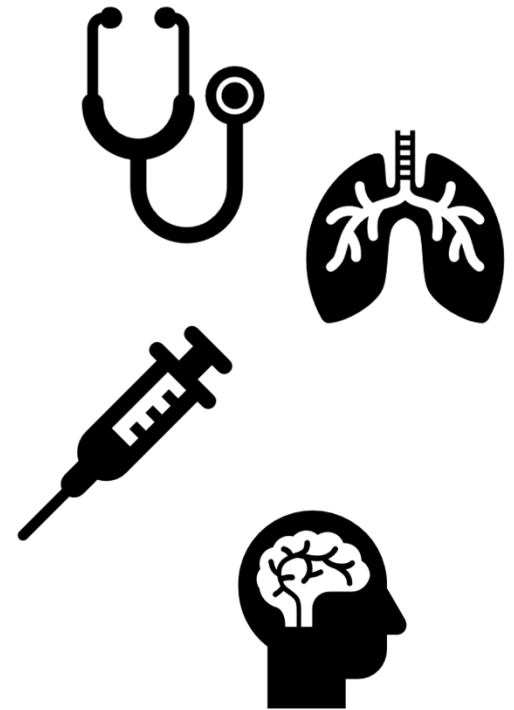
Class B Condition

- A physical or mental disorder that is not a Class A condition but represents a departure from normal health or well-being that is significant enough to:
 - Interfere with ability to care for self
 - Disrupt attendance at school or work
 - Or require extensive medical treatment or institutionalization in the future

Technical Instructions (TIs)

<https://www.cdc.gov/immigrantrefugeehealth/civil-surgeons.html>

- The Technical Instructions stipulate to Civil Surgeons how the IME is to be performed
 - Medical History
 - Physical Exam
 - Chest X-rays
 - Laboratory tests
 - Vaccinations
 - Mental health assessment
- Our team consults with other subject matter experts within CDC when writing instructions for each component



Who gets the exam?

- Status Adjusters are those applying for lawful permanent resident (LPR) status while already in the United States on other terms
 - Required to have full medical screening with vaccinations with a civil surgeon here in the United States
- Certain exceptions to this rule:
 - K or V Visa: Medical exam overseas is valid for one year but need vaccinations with civil surgeon if not done overseas
 - Refugees: Vaccinations to be completed by civil surgeon
 - Only need to repeat medical exam if panel physician identified a Class A condition overseas

Resources

Quality Assessment Program (QAP) Mailbox

The best way to contact our team is via the CDC QAP mailbox



- Civil surgeons can send questions concerning TIs and other immigration medical exam issues
- Monitored by CDC staff daily Monday — Friday
- Questions are answered in the order that they are received
- Responses can be delayed by staff shortages due to response deployments

QAPcivilsurgeons@cdc.gov

Note: Mailbox address should not be shared with the public

Email Blasts

- Stay informed via email announcements
 - Changes to Technical Instructions
 - Upcoming trainings
- We use an email list given to us by USCIS
- Make sure that you provide a valid email address to USCIS and update them if it changes
 - In addition, you may also email QAPcivilsurgeons@cdc.gov to update our list

Webinars

- Educational webinars regarding Technical Instructions and other relevant parts of the medical exam
- Upcoming webinars will be announced via email blast
- Can either view live or access recordings on web later
- [https://ftp.cdc.gov/pub/Civil Surgeons/T.I.P.S.%20Webinars/](https://ftp.cdc.gov/pub/Civil_Surgeons/T.I.P.S.%20Webinars/)

CDC Immigrant, Refugee, and Migrant Health Branch Website

<https://www.cdc.gov/immigrantrefugeehealth/index.html>

The screenshot shows the homepage of the CDC Immigrant, Refugee, and Migrant Health Branch website. At the top, there is a dark teal header with the text "Immigrant, Refugee, and Migrant Health" and social media icons for Facebook, Twitter, LinkedIn, and YouTube. The main content area features a large hero image of a healthcare worker in blue scrubs smiling and talking to two women, one wearing a hijab. Overlaid on this image is a white box with the text "Ensuring Healthy Migration Worldwide" and a "Learn More" button. To the right of the hero image is a "Quick Links" section with a teal header and four bullet points: "Electronic Disease Notification System", "Tuberculosis and Adoption FAQs", "Migrant Serum Bank", and "U.S.- Mexico Binational Health". Below the quick links is a circular teal badge with a heart icon and the text "WORLD REFUGEE DAY". At the bottom, there are three navigation cards: "About Immigrant, Refugee, and Migrant Health" with a group of people icon, "Health Education and Communication Tools" with a wrench and screwdriver icon, and "Laws and Regulations" with a scales of justice icon. Below these cards are three small image thumbnails showing healthcare interactions.

Technical Instructions for Civil Surgeons

<https://www.cdc.gov/immigrantrefugeehealth/civil-surgeons.html>

Immigrant, Refugee, and Migrant Health

CDC > Immigrant, Refugee, and Migrant Health

Immigrant, Refugee, and Migrant Health

About Immigrant, Refugee, and Migrant Health

Migration and Border Health

Health Education and Communication Tools

Refugee Health Profiles

Refugee Health Guidance

Panel Physicians

Civil Surgeons

- Introduction and Background
- Medical History and Examination
- COVID-19
- Syphilis
- Gonorrhea

Sept. 2021

July 2022

Technical Instructions for Civil Surgeons

The Centers for Disease Control and Prevention (CDC), United States Public Health Service (PHS), is responsible for ensuring that noncitizens entering the United States do not pose a threat to the public health of this country. The medical examination required by CDC regulations is a means of evaluating the health of persons applying for admission or adjustment of status as permanent residents in the United States.

[I-693 Form](#) [PDF - 14 pages]
Form is distributed by USCIS

Technical Instructions

These instructions are in accordance with CDC regulations and are for surgeons evaluating persons applying for adjustment of status for US and other persons required to have a medical examination.

Medical History and Physical Examination	COVID-19	Vaccinations
Mental Health	Gonorrhea	Tuberculosis
Syphilis	Hansen's Disease (Leprosy)	Other Physical or Mental Abnormality, Disease or Disability

Recent Updates to the Vaccination Technical Instructions



Table 1: Vaccination Requirements According to Applicant Age

Vaccines by applicant age	Birth– 1 month	2–11 months	12 months–6 years	7–10 years	11–17 years	18–64 years	≥ 65 years
DTP/DTaP/DT	NO	YES		No			
Td/Tdap	NO			Sometimes*	YES, substitute 1-time dose of Tdap for Td booster; then boost with Td or Tdap every 10 years		
Polio** (IPV/OPV)	NO	YES				NO	
Measles, Mumps, and Rubella	NO		YES, if born in 1957 or later			NO	
Rotavirus***	NO	YES 6 weeks through 8 months	NO				
Hib	NO	YES 2 through 59 months old		NO			
Hepatitis A	NO		YES 12 months through 18 years old			NO	
Hepatitis B	YES, through 59 years old					NO	
Meningococcal (MenACWY)	NO			Yes 11 through 18 years old		NO	
Varicella	NO		YES				
Pneumococcal	NO	YES, 2 through 59 months old (administer PCV)		NO			One dose PCV15 followed by PPSV23 or one dose PCV20
Influenza	NO, if less than six months old		YES, ≥ 6 months (annually when flu vaccine is available in country of exam)				
COVID-19	See the COVID-19 Technical Instructions for the details of this requirement.						

Hepatitis A Vaccine Update

**Routine vaccination
12 months to <24 months**



**Catchup vaccination
<19 years old**

**New age range
12 months through 18 years**

Hepatitis B Vaccine Update

- Hepatitis B vaccine previously only recommended for ages 19–59 years as a special situation

Morbidity and Mortality Weekly Report (*MMWR*)

CDC



Universal Hepatitis B Vaccination in Adults Aged 19–59 Years: Updated Recommendations of the Advisory Committee on Immunization Practices — United States, 2022

Weekly / April 1, 2022 / 71(13);477–483

Please note: This report has been corrected.

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Hepatitis B Vaccine Update

**Previous age range
Birth through <19 years**



**New age range
Birth through < 60 years**

Pneumococcal Vaccine Update: Adults \geq 65 years

Morbidity and Mortality Weekly Report (*MMWR*)

CDC



Use of 15-Valent Pneumococcal Conjugate Vaccine and 20-Valent Pneumococcal Conjugate Vaccine Among U.S. Adults: Updated Recommendations of the Advisory Committee on Immunization Practices — United States, 2022

Weekly / January 28, 2022 / 71(4);109-117

Pneumococcal Vaccine Update: Adults \geq 65 years

Previous requirement
PPSV23



New requirement
One dose PCV15 followed by PPSV23
or
One dose PCV20

- Above recommendation is for those who have not previously received PCV or whose previous vaccination history is unknown
- For guidance for patients who have already received a previous dose of PCV13 and/or PPSV23, see <https://www.cdc.gov/mmwr/volumes/71/wr/mm7104a1.htm>

PCV= pneumococcal conjugate vaccine; PPSV= pneumococcal polysaccharide vaccine

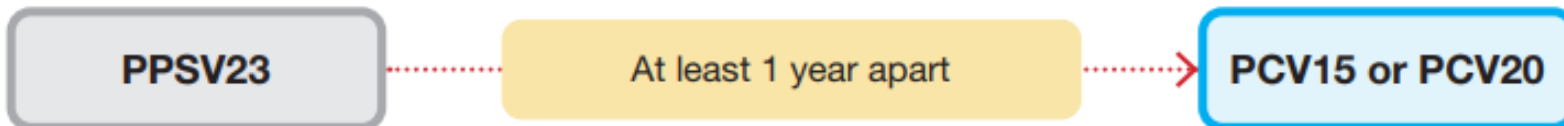
Pneumococcal Vaccine Update: Adults \geq 65 years

For those who previously received PPSV23 but who have not received any pneumococcal conjugate vaccine (e.g., PCV13, PCV15, PCV20)

You may administer one dose of PCV15 or PCV20.

Regardless of which vaccine is used (PCV15 or PCV20):

- The minimum interval is at least 1 year.
- Their pneumococcal vaccinations are complete.



Pneumococcal Vaccine Update: Adults \geq 65 years

For those who have previously received PCV13

Adults 65 years or older without an immunocompromising condition, cerebrospinal fluid leak, or cochlear implant

PCV13
(at any age)

At least 1 year apart

PPSV23
(at \geq 65 years)

CDC recommends 1 dose of PPSV23 at age 65 years or older.**

Administer a single dose of PPSV23 at least 1 year after PCV13 was received. Their pneumococcal vaccinations are complete.

** For adults who have received PCV13 but have not completed their recommended pneumococcal vaccine series with PPSV23, one dose of PCV20 may be used if PPSV23 is not available. If PCV20 is used, their pneumococcal vaccinations are complete.

Thank you!

Questions?

QAPcivilsurgeons@cdc.gov

For more information, contact CDC
1-800-CDC-INFO (232-4636)
TTY: 1-888-232-6348 www.cdc.gov

The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.

