

Many refugees originate from countries with a high occurrence of tropical and infectious diseases, lack of access to medical care, and high exposure to physical and psychological trauma. Undiagnosed and/or untreated health conditions, including emotional and mental health issues, are common within refugee populations.

**OVERSEAS PRE-DEPARTURE
MEDICAL EXAMINATION:**

The medical screening of refugees seeking to enter the U.S. is overseen by the **Center for Disease Control's** Division of Global Migration and Quarantine (DGMQ), based on regulations set by the Dept. of Health and Human Services. The screening focuses on preventing the introduction or spread of communicable diseases from foreign countries into the U.S. During the pre-departure medical visit, refugees are screened for certain key infectious illnesses as well as for severe behavioral or psychiatric disturbances. They may also receive immunizations and/or presumptive treatment for parasitic infections. The exam happens anytime up to a year before departure, so a lag can occur from the time of assessment to the date of arrival in the U.S.

There are certain medical conditions, such as TB or STIs that deem a refugee inadmissible to the U.S. or require immediate follow-up. These "Class A and Class B Conditions" are defined in the adjacent column.

Class A and Class B Conditions

Class A: A physical or mental disorder (including a communicable disease of public health significance or drug abuse/addiction) that renders him or her ineligible for a visa. Persons with a class A condition are not permitted to immigrate, but can obtain waivers under special circumstances.

Class B: A physical or mental disorder that is significant enough to interfere with the person's ability to care for himself or herself, that may require extensive medical treatment or institutionalization, but is not an excludable condition.

A panel physician will identify in section 4 of the DS-3026 form the type of follow up care needed for Class A or Class B conditions.

The pre-departure medical requirements for refugees, called "technical instructions for panel physicians," are updated periodically, and can be found on the Center for Disease Control website at the following link:

<http://www.cdc.gov/immigrantrefugeehealth>

DOMESTIC HEALTH SCREENING

An initial health visit is to occur **within 3 months of arrival** in the U.S. The purpose of the visit is to conduct medical screening; follow-up on conditions identified overseas; health education; orientation to local health services; and referral to a primary care provider. Primary care should be established as early as possible due to the limited duration of medical benefits (8 months for newly arrived refugees).

In **King County**, refugee screening occurs at Public Health Seattle & King County (PHSKC) Refugee Screening Clinic in downtown Seattle.

Typically, this evaluation includes:

- Follow-up assessment
- Referral for class A & B conditions
Note: class A + waiver should report within 7 days. Class B conditions report within 1-6 months.
- Triage of acute health issues including dental, nutritional and psychiatric problems.
- Documentation of immunizations and catch-up administration of Hepatitis and Varicella vaccines as needed.
- Screening for emotional distress, as well as tuberculosis, hepatitis B, and HIV.

Domestic screening guidelines for newly arrived refugees are available on the <http://www.cdc.gov/immigrantrefugeehealth/guidelines/domestic/domestic-guidelines.html>

Screening practices differ across counties in the United States based on funding and other issues.

Provider Tips for Obtaining Records

In King County, refugees are encouraged to bring health records to their primary care provider. All refugees have a copy of their pre-departure exam, their public health assessment, and an immunization card.

If you are unable to obtain these from the patient, you may request:

1. Copies of the pre-departure exam, and public health assessment from the refugee resettlement agency. (*see Community Resource List*)
2. Medical Records from the Public Health Refugee Screening Clinic:
Tele: 206-296-4744 Fax: 206-296-0184
3. Results of the TB screening, hepatitis B, varicella serologies and immunizations are posted in the **Washington State Immunization Information System** previously called **CHILD PROFILE Immunization Registry** (including adults) at:
<http://www.doh.wa.gov/YouandYourFamily/Immunization/ChildProfile.aspx>