

Helpful Tips for Civil Surgeons: I-693 Forms for Refugee Populations

General Information

1. When a Refugee Requests Permanent Residency Status:

Refugees should be adjusting status after they have been physically present in the U.S. for one year.

If a refugee was admitted to the United States and now applying for adjustment of status, one year following their date of arrival, the refugee does not need to repeat the entire medical exam that they had overseas, unless a Class A medical condition was found during that exam.

2. Refugees do not have to present proof of vaccination when applying for admission to the U.S.:

Refugees must, however, satisfy the vaccination requirements when they apply for adjustment of status, one year following their admission. **Refugees only need to complete Pg. 1 (Part 1 & 3) and Pg. 5 of the I-693, Report of Medical Examination and Vaccination Record.**

3. I-693 Form:

For a copy of the I-693 form and instructions go to the following link:

<http://www.uscis.gov/portal/site/uscis/menuitem.5af9bb95919f35e66f614176543f6d1a/?vgnextoid=eb1f3591ec04d010VgnVCM10000048f3d6a1RCRD&vgnnextchannel=db029c7755cb9010VgnVCM10000045f3d6a1RCRD>

This signed document is valid for one year.

4. CDC's 2009 Technical Instructions for Vaccination for Civil Surgeons:

Detailed information about vaccinations required for adjustment of status can be found at: <http://www.cdc.gov/immigrantrefugeehealth/exams/ti/civil/vaccination-civil-technical-instructions.html>. The 2009 Technical Instructions for Vaccination for Civil Surgeons replaced the 2009 Vaccination Technical Instructions on December 14, 2009.

5. All Other Refugee Populations Require an Examination by a Civil Surgeon:

Asylees and other refugee or immigrant populations who did not receive an overseas medical exam by a Panel Physician will require the full medical exam by a Civil Surgeon. https://egov.uscis.gov/crisgwi/go?action=offices.type&OfficeLocator.office_type=CIV

Completing the I-693 Form

1. What should the refugee bring to the appointment?

- a. Identification: Picture ID, Social Security Card, I-94 for each individual applying
- b. Any vaccination records the refugee may have

Recommendation: Do not set an appointment unless the refugee confirms that he/she will bring the above information (you may be wasting your time if they do not bring this information and a subsequent appointment may be needed).

2. General info:

Since this is for a refugee, only pages 1 and 5 need to be submitted. Pages 2, 3 and 4 do not need to be submitted. USE BLACK INK ONLY.

3. Verifying Identity:

The refugee should bring a government-issued photo I.D. with them to the appointment. (Example: valid passport, driver's license, or state ID.) For applicants under 14 years, USCIS will accept original immigration records such as the I-94, refugee travel documents and/or a work authorization card.

4. I-693 Form Completion by the Refugee

- a. Part 1. Information about you: (info about the refugee) All sections on part 1 need to be filled in by each applicant (due to immigration fraud concerns, staff can only assist the refugee by writing exactly what the refugee tells them to, after each item in Part I).
- b. Legal Requirements for the Refugee's Signature:
Refugees must sign their respective applications and petitions. The signature must be an original signature or fingerprint. Parents and legal guardians may sign for children under age 14. Legal guardians may sign for individuals who are incompetent to sign. Children between 14 and 18 years old should sign the I-693 in addition to the parent or legal guardian.

Go directly to page 5 - Vaccinations. (Skip pages 2, 3, and 4 - not needed.)

5. Form I-693; Page 5: Vaccinations

See the CDC's 2009 Technical Instructions for Vaccination for Civil Surgeons

<http://www.cdc.gov/immigrantrefugeehealth/exams/ti/civil/vaccination-civil-technical-instructions.html>. The 2009 Technical Instructions for Vaccination for Civil Surgeons

replaced the 2003 Vaccination Technical Instructions December 14, 2009. See page 12 for a nice concise table that lists the vaccination requirements by vaccine and age.

- a. Fill in the refugee's name and alien number from page 1.
- b. **Remember:** This is a "snapshot" of the refugee as you are reviewing him/her on the date of application.
- c. Copy the dates of all acceptable documented vaccinations given previously and/or written records in the appropriate "Date Received" column. Any vaccine given by the health clinic at the time of completion of this form should be recorded in the "Vaccine Given/Date Given by Civil Surgeon" column. Doses should be recorded chronologically (month, day, and year as numbers corresponding to mm/dd/yyyy), from left to right.

- d. Completing the vaccination series:
1. **Be sure to place a response on each row.**
 2. Complete: If the applicant has completed the vaccination series, the “Completed Series” box for each vaccine must be checked.
 - If as a result of a laboratory test, the applicant is identified as fully immunized, write “+ titer, with the month, date, and year” of the test and check the “Completed Series” box for each applicable vaccine. If a reliable written or oral history of varicella disease is given, “VH” (varicella history) must be written in the “Completed Series” box for varicella.
 3. Not age appropriate: For each vaccine for which administration is not age appropriate, the “Not age appropriate” waiver box must be checked. For all applicants, this box will need to be checked for at least one vaccine. For example, infants and adults do not need meningococcal vaccine, and adults do not need Hib vaccine.
 4. Contraindication: If an applicant has contraindications to specific vaccines, the “Contraindication” waiver box for that vaccine must be checked. For example, a patient that is pregnant cannot receive live vaccines. **Note: A person that received zoster does not need the varicella series. Check contraindication and document in the remarks that the patient received zoster with date.**
 5. Insufficient time interval between doses: If the minimum time interval between the last documented dose and the next required dose has not passed, the “Insufficient Time Interval” waiver box must be checked to indicate that additional doses will be needed to complete the series for that vaccine.
 6. Not flu season: Influenza vaccine is required for all age groups during the influenza season October 1 through March 31. The “Not Flu Season” waiver box must be checked at other times of the year.
- e. Completing “Results” section: After reviewing entries for all vaccines, only one appropriate box under “Results” must be checked.
1. Applicant may be eligible for blanket waiver(s): If any of the boxes under the “Not Medically Appropriate” heading was checked, the “Applicant may be eligible for blanket waiver(s) as indicated above” box must also be checked.
 2. Applicant may request an individual waiver based on religious or moral convictions: If an applicant objects to vaccination based on religious or moral convictions, the “Applicant will request an individual waiver based on religious or moral convictions” box must be checked. This is not a blanket waiver, and the applicant will have to submit a waiver request to USCIS.
 3. Vaccine history is complete for each vaccine: If the applicant has met the vaccination requirements, the “Vaccine history complete for each vaccine, all requirements met” box must be checked.
 4. Applicant does not meet immunization requirements: If an applicant’s vaccine history is incomplete and the applicant refuses administration of a single dose of any required vaccine that is medically appropriate and is a required vaccine for that applicant, the “Applicant does not meet immunization requirements” box must be checked. (Hopefully this will not be the case as USCIS will send a letter to the refugee asking for them to comply and receive the necessary vaccines.)

Return to page 1

6. I-693 Form; Page 1, Part 3. Civil Surgeon Identifying Information:

- a. A nurse may complete the vaccination page, but the attending physician needs to sign here*.
- b. *The attending physician signature must be original. It cannot be a copy.

7. I-693 Form Copies: Copy pages 1 and 5 and give to the refugee for his/her records. You may also keep a copy for your records. Make sure the ORIGINAL copy, with appropriate signatures, is placed in the sealed envelope (see below).

8. Sealing the Envelope Containing Completed, Original I-693 Form: On the front of the envelope write: "REFUGEE-" and the refugee's name. Then on the back of the envelope, write "DO NOT OPEN, FOR USCIS USE ONLY" across the line where the flap of the envelope and the envelope meet. With clear tape, place the tape with half on the flap of the envelope and half on the envelope across the envelope's entire width. USCIS will not accept this form if it is not in a sealed envelope or if the envelope is altered in any way.

INSTRUCT REFUGEE TO NOT OPEN THE ENVELOPE. Immigration requires that this be sealed by the local health department. If altered in any way it will be returned to the refugee and the health department will have to reseal in a new envelope.

9. Vaccine Documents: Return all of the refugee's vaccination documents to the client. Keep the copies, as desired, for your files. You may also enter the information into CIIS, if staff are available to do so.

If you should have questions about completing this form for refugees, please call Leslie Douglass 720.956.2171 or Shelby Chapman 720.956.2179.