

USCIS Policy Manual

Current as of October 16, 2018

Volume 8 - Admissibility

Part B - Health-Related Grounds of Inadmissibility

Chapter 4 - Review of Medical Examination Documentation

A. Results of the Medical Examination

The physician must annotate the results of the examination on the following forms:

Panel Physicians

Panel physicians must annotate the results of the medical examination on the Medical Examination for Immigrant or Refugee Applicant (1991 TB Technical Instructions) (Form DS-2053) or the Medical Examination for Immigrant or Refugee Applicant (2007 TB Technical Instructions) (Form DS-2054), and related worksheets. [1]

Civil Surgeons

Civil surgeons must annotate the medical examination results on the Report of Medical Examination and Vaccination Record ([Form I-693](#)).

B. Documentation Completed by Panel Physician

Since a State Department consular officer reviews the medical documentation completed by a panel physician as part of the overseas visa process, a USCIS officer may assume that the medical documentation is properly completed. [2]

If the USCIS officer notices a significant irregularity such as an omission of a particular section, the officer may issue a Request for Evidence (RFE) to have a civil surgeon in the United States complete the missing part(s) of the medical examination. A civil surgeon should address any deficiency by completing the respective parts of a [Form I-693](#) according to the Technical Instructions for Civil Surgeons issued by the Centers for Disease Control and Prevention (CDC). [3] This should only happen in rare instances.

Applicants who have already been examined abroad and are not required to repeat the medical examination in the United States may still have to show proof of the vaccination requirement. [4]

C. Documentation Completed by Civil Surgeon

1. Civil Surgeon Designation

Except for physicians who are Public Health Service officers, only physicians designated by USCIS to act as civil surgeons may conduct an immigration medical examination in the United States and complete [Form I-693](#). [5] Only doctors of medicine (M.D.) and doctors of osteopathy (D.O.) who are currently licensed to practice as

physicians may be designated.^[6]The physician must be designated as a civil surgeon at the time of the completion of the medical examination.

To determine whether the physician is designated as a civil surgeon, the officer should consult the designated civil surgeon list at www.uscis.gov/tools (via the Find a Doctor tool).

2. Complete Form

The following requirements must always be met regarding any [Form I-693](#) submitted to USCIS:

- The form must be completed legibly;
- All required parts of the form must be completed;^[7]
- The form must be signed and dated by the designated civil surgeon who conducted the medical examination;^[8]
- The form must be signed and dated by the applicant who was examined;^[9]
- If applicable, the form must be signed and dated by the physician(s) completing referral evaluations;^[10]
- The form must still be valid;^[11]and
- The form must be in a sealed envelope as detailed in the form's instructions.

If the above requirements are not met, or if there is evidence that the envelope has been tampered with, the officer must return the original [Form I-693](#) to the applicant for corrective action. Whenever an original is returned to the applicant, the officer should retain a copy.

A response to an RFE is acceptable if it is completed by a civil surgeon in one of the following ways:

- The civil surgeon annotates the original medical examination in the deficient part(s), and both the applicant and the civil surgeon re-sign and re-date their respective certifications.
- The civil surgeon re-completes an entirely new [Form I-693](#), and corrects for the original deficiency.
- The civil surgeon completes the following sections of a new form: The part containing the applicant's information,^[12]the part(s) that were deficient in the original examination, and the part containing the civil surgeon's information and certification. The civil surgeon must include the original medical examination documentation with the newly completed parts.

The applicant may return to the original civil surgeon who performed the immigration medical exam or a new civil surgeon to correct the form.

The civil surgeon must place the corrected form^[13]in a sealed envelope. The applicant must then return the sealed envelope to USCIS.

3. Signatures

The applicant, the civil surgeon, and any other health care provider who evaluated the applicant as part of the immigration medical examination should sign the form, to verify that the content of their representations is truthful.

Signature of the Civil Surgeon

The civil surgeon's signature must be an original signature. Stamps of the physician's signature or other substitutes, or copies of the civil surgeon's original signature, are not acceptable (except for blanket-designated health departments or military physicians as described below).

As outlined in CDC's Technical Instructions, the civil surgeon is only permitted to sign the [Form I-693](#) after he or she has completed the entire medical examination. An examination is not completed until any prescribed treatment for a Class A condition has been administered.

There may be circumstances when an applicant refuses to undergo one part of the examination, but the civil surgeon certifies the form with a notation that part of the exam is not complete. In these cases, the officer should issue an RFE to the applicant for corrective action.

The civil surgeon might also diagnose a Class A condition for which the applicant refuses treatment. The civil surgeon might then annotate the Class A condition but still certify and sign the form. In this case, the officer should not return the form for corrective action. The officer should determine that the applicant is inadmissible and ask the applicant to request a waiver, if available.^[14]

Signature of the Health Department

In agreement with CDC, USCIS granted blanket civil surgeon designation to local and state health departments in the United States. This blanket designation allows health departments to complete the vaccination portion of [Form I-693](#) for refugees seeking adjustment if they have a physician who meets the professional qualifications for a civil surgeon. If a refugee only requires the vaccination assessment, the only parts of the form that need to be completed are the applicant's information, the vaccination assessment, and the certifications. The other parts are irrelevant and do not have to be submitted.

If the health department physician is completing only a vaccination assessment for refugees seeking adjustment, the physician's signature may be either an original (handwritten) or a stamped signature, as long as it is the signature of the health department physician. The attending nurse may, but does not have to, co-sign with the physician. The signature of the physician must be accompanied by the health department's stamp or raised seal, whichever is customarily used.

If the health department does not properly sign, the officer should return the medical documentation to the applicant for corrective action.^[15]

Signature of a Military Physician designated as a Civil Surgeon for Members and Veterans of the Armed Forces

To ease the difficulties encountered by physicians and applicants in the military, USCIS issued a blanket civil surgeon designation to qualifying military physicians to permit them to perform the immigration medical examination and complete the [Form I-693](#) for eligible members and veterans of the U.S. armed forces and their dependents.^[16]

Pursuant to the understanding reached between USCIS and the CDC, military physicians who qualify under this blanket civil surgeon designation may perform the entire immigration medical examination as long as the exam is conducted in the United States on the premises of a Military Treatment Facility (MTF) and conducted for a U.S. armed forces member, veteran, or dependent who is eligible to receive medical care at the MTF.

If operating under the blanket civil surgeon designation for military physicians, a physician's signature may be either an original (handwritten) or stamped signature, as long as it is the signature of a qualifying military physician. Nurses and other health care professionals may, but are not required to, co-sign the form. The signature of the physician must be accompanied by the official stamp or raised seal of the MTF, whichever is customarily used.

If the military physician does not properly sign, the officer should return the medical documentation to the applicant for corrective action.

Signature of the Applicant

The applicant or the civil surgeon may complete the section about the applicant’s information. The civil surgeon must always verify the applicant’s identity by requiring a government-issued ID, as stated in CDC’s Technical Instructions.

The applicant must sign the certification only when instructed by the civil surgeon. By signing the form, the applicant attests that he or she consented to the medical examination and that any information provided in relation to the medical examination is truthful.

Whenever the civil surgeon orders a test that he or she does not perform personally, the civil surgeon must ensure that the physician or staff to whom the applicant is referred checks the identity of the applicant by requesting a government-issued ID.^[17]

An officer should follow the chart below to determine whether the applicant or a legal guardian must sign the form.^[18]

Signature of the Applicant	
Age of Applicant	Signature Requirement
Age 14 or Older	The applicant must sign Form I-693 . However, a legal guardian may sign for a mentally incompetent person.
Under Age 14	Either the applicant, a parent, or legal guardian may sign the Form I-693 . The officer should not reject the form as improperly completed if only the applicant, parent, or guardian signs.

Signature of Physicians Receiving Referrals for Evaluation

If the civil surgeon is unable to perform a particular medical assessment, he or she is required to refer the applicant to another physician. The physician receiving the referral is required to complete the appropriate section on [Form I-693](#) after he or she has completed the evaluation of the applicant’s condition. The civil surgeon may not sign the civil surgeon’s certification on the form until the civil surgeon has received and reviewed the report of the physician who received the referral. If the referring physician ordered treatment, the civil surgeon may not sign the certification until the treatment has been completed.

Contracted services used by the civil surgeon to complete a step in the medical examination are not considered referrals. Therefore, the referral section can be blank in such cases.^[19] For example, if the civil surgeon uses a contractor to draw blood, the referral section does not have to be completed. However, if the Technical Instructions require a referral to the Health Department because the applicant has TB, the officer must make sure that the referral section is completed.

4. Validity Period of [Form I-693](#) (Including Use of Prior Versions)

Evidentiary Value

A person seeking an immigration benefit and who is subject to the health-related grounds of inadmissibility must establish that he or she is not inadmissible on health-related grounds.^[20] In general, those applying for immigration benefits while in the United States must use [Form I-693](#) to show they are free from any conditions that would render them inadmissible under the health-related grounds.

An officer may determine that the applicant has met the burden of proof required to establish that he or she is free from a medical condition that would render the applicant inadmissible on health-related grounds if all of the following criteria are met:

- A USCIS-designated civil surgeon performed the immigration medical examination in accordance with HHS regulations;
- The civil surgeon and the applicant properly completed the current version of Form I-693;^[21]
- The Form I-693 that the applicant submitted is signed by a civil surgeon no more than 60 days before the date the applicant filed the application for underlying immigration benefit;^[22]
- The Form I-693 establishes that the applicant does not have a Class A medical condition and has complied with the vaccination requirements or is granted a waiver;^[23] and
- USCIS issues a decision on the underlying immigration benefit application no more than 2 years after the date the civil surgeon signed Form I-693.^[24]

In general, if any one of the above criteria is not met, the applicant has not met the burden of proof required to establish that he or she is free of a medical condition that would render the applicant inadmissible to the United States on health-related grounds. In this case, the officer should follow standard operating procedures regarding issuance of a denial or an RFE or Notice of Intent to Deny (NOID) to address the deficiency.

Additionally, even if all of the above criteria are met, but the officer has reason to believe that the applicant's medical condition has changed since submission of the Form I-693 such that the applicant's admissibility could be affected, the officer, in his or her discretion, may request that the applicant submit a new Form I-693.

Special rules may apply to certain foreign nationals who were examined overseas, including certain nonimmigrant fiancé(e)s or spouses of U.S. citizens (K visa), spouses of lawful permanent residents (V visa), refugees, and asylee dependents. Such foreign nationals usually do not need to repeat the full immigration medical exam in the United States for purposes of adjustment of status.^[25]

Generally, the only acceptable version of [Form I-693](#) is the version in use at the time of the medical examination.^[26] Prior versions of [Form I-693](#) are generally not acceptable because they may lack necessary information.^[27]

Form I-693 Submitted to USCIS Before November 1, 2018

In 2018, USCIS revised its policy regarding the extent to which a Form I-693 retains its evidentiary value. This policy is effective November 1, 2018. Before November 1, 2018, the validity period policy provided Form I-693 retained its evidentiary value as long as it was submitted to USCIS within 1 year of the civil surgeon's signature and USCIS issued a final decision on the underlying immigration benefit application within a year of the Form I-693 submission to USCIS. This policy contained a maximum 2-year period during which Form I-693 retained its evidentiary value.

Due to increasing caseloads and more complex adjudications, USCIS observed an increasing number of cases where benefit applications could not be decided within 1 year from the date the Form I-693 was submitted. In these cases, USCIS would have to request a new Form I-693, further delaying processing the underlying application and inconveniencing the applicant.

The new policy, effective November 1, 2018, addresses these issues by realigning the existing 2-year period (during which Form I-693 retains its evidentiary value) to require applicants to complete their immigration medical examination closer in time to the filing of the underlying benefit application. This revised policy is intended to reduce the need for USCIS to request an updated Form I-693, thereby streamlining case processing and minimizing inconveniences to applicants.

Certain Form I-693 submitted to USCIS before November 1, 2018 may be subject to the previous validity period policy as noted in the section below.

A completed Form I-693 submitted to USCIS before November 1, 2018 retains its evidentiary value to support a finding that an applicant is not inadmissible based on health-related grounds if it meets any of the following scenarios:

- The civil surgeon signs Form I-693 more than 60 days before the applicant files the underlying benefit application with USCIS, but the applicant submits Form I-693 to USCIS no more than 1 year after the civil surgeon signed Form I-693; and USCIS issues a decision on the underlying benefit application no more than 1 year after the date the applicant submitted Form I-693 to USCIS.
- The civil surgeon signs Form I-693 no more than 60 days before the applicant files the underlying benefit application with USCIS; and USCIS issues a decision on the underlying benefit application no more than 2 years after the date of the civil surgeon's signature.
- The civil surgeon signs Form I-693, and the applicant submits Form I-693, after the applicant files the benefit application with USCIS; and USCIS issues a decision on the underlying benefit application no more than 2 years after the date of the civil surgeon's signature.

In all cases, a Form I-693 submitted to USCIS more than 1 year after the date of the civil surgeon's signature is insufficient for evidentiary purposes as of the time of its submission to USCIS. The table below illustrates these scenarios.

Form I-693 Submitted to USCIS <i>Before</i> November 1, 2018		
When did civil surgeon sign?	When was underlying benefit application filed with USCIS?	I-693 retains evidentiary value through
No more than 1 year before I-693 submitted to USCIS	More than 60 days after civil surgeon signed the I-693	1 year from date applicant submitted I-693 to USCIS
No more than 60 days before underlying benefit application filed with USCIS	No more than 60 days after civil surgeon signed the I-693	2 years from date civil surgeon signed I-693
After the benefit application was filed with USCIS	Before the civil surgeon signed the I-693	2 years from date civil surgeon signed I-693
More than 1 year before I-693 submitted to USCIS	<i>N/A – I-693 not valid at time applicant submits I-693 to USCIS</i>	

Form I-693 Submitted to USCIS On or After November 1, 2018

A completed Form I-693 submitted to USCIS on or after November 1, 2018 retains its evidentiary value to support a finding that an applicant is not inadmissible based on health-related grounds if it meets any of the

following scenarios:

- The civil surgeon signs Form I-693 no more than 60 days before the applicant files the underlying benefit application with USCIS; and USCIS issues a decision on the underlying benefit application no more than 2 years after the date of the civil surgeon's signature.
- The civil surgeon signs the Form I-693, and the applicant submits Form I-693, after the applicant files the benefit application with USCIS; and USCIS issues a decision on the underlying benefit application no more than 2 years after the date of the civil surgeon's signature.

In all cases, a Form I-693 signed by a civil surgeon more than 60 days before the applicant files the underlying benefit application is insufficient for evidentiary purposes as of the time of its submission to USCIS. The table below illustrates these scenarios.

Form I-693 Submitted to USCIS <i>On or After</i> November 1, 2018	
When did civil surgeon sign?	I-693 retains evidentiary value through
No more than 60 days before applicant filed underlying benefit application with USCIS	2 years from date civil surgeon signed I-693
After applicant filed benefit application with USCIS	2 years from date civil surgeon signed I-693
More than 60 days before applicant filed benefit application with USCIS	<i>N/A – I-693 not valid at time applicant submits I-693 to USCIS</i>

Timing of the Submission of the Medical Examination Report

Applicants may submit the Form I-693 medical examination report to USCIS:

- Concurrently with the immigration benefit application; or
- At any time after filing the immigration benefit application but before USCIS finalizes adjudication of that application. If not submitted simultaneously with the immigration benefit application, applicants may bring the medical examination report to an interview or wait until USCIS issues an RFE requesting the medical examination report.

Place of Submission of the Medical Examination Report

The medical examination report should be submitted to the appropriate location.^[28]

Footnotes

1. As of October 1, 2013, panel physicians only use DS-2054. The DS-2053 is no longer used after that date.
2. The Technical Instructions for Panel Physicians may differ from the Technical Instructions for Civil Surgeons. As long as the DS

form is properly completed, the officer should accept the finding of the consular officer as correct.

3. In this case, because the DS form was completed by a panel physician, the officer should retain the original document. The RFE must specify which sections of [Form I-693](#) have to be completed by a civil surgeon.
4. See Chapter 3, Applicability of Medical Examination and Vaccination Requirement [[8 USCIS-PM B.3](#)] for specific information on who is required to be examined and to what extent.
5. [Form I-693](#) can only be used for immigration benefits that are granted in the United States.
6. See [INA 232](#) and [8 CFR 232](#).
7. Some parts of the form may not be required. For example, if an applicant is not required to undergo a chest X-ray in the TB section of the medical examination report, the chest X-ray section would not have to be completed.
8. See Subsection 3, Signatures [[8 USCIS-PM B.4\(C\)\(3\)](#)].
9. See Subsection 3, Signatures [[8 USCIS-PM B.4\(C\)\(3\)](#)].
10. See Subsection 3, Signatures [[8 USCIS-PM B.4\(C\)\(3\)](#)].
11. See Subsection 4, Validity Period of Form I-693 (Including Use of Prior Versions) [[8 USCIS-PM B.4\(C\)\(4\)](#)].
12. As part of completing the [Form I-693](#), the civil surgeon must ensure that the applicant has signed the applicant's certification.

13. Along with the original [Form I-693](#), if separate from the corrected form.
14. See Volume 9, Waivers, Part C, Waivers for Health-Related Grounds of Inadmissibility [[9 USCIS-PM C](#)] for more on waivers.
15. See Part C, Civil Surgeon Designation and Revocation [[8 USCIS-PM C](#)] for more information on the blanket civil surgeon designation for health departments.
16. See Part C, Civil Surgeon Designation and Revocation [[8 USCIS-PM C](#)] for more information on the blanket civil surgeon designation for military physicians.
17. By signing the form, the civil surgeon certifies that he or she has examined the applicant according to the procedures and requirements outlined in the Technical Instructions, [Form I-693](#), and form instructions. Officers do not need to verify whether the civil surgeon instructed the referring physician to check the applicant's identity.
18. See [8 CFR 103.2\(a\)\(2\)](#).
19. Civil surgeons are, however, still responsible for ensuring that the contractor properly checks the applicant's ID.
20. See [INA 212\(a\)\(1\)](#).
21. See Section C, Documentation Completed by Civil Surgeon [[8 USCIS-PM B.4\(C\)](#)].
22. For example, Form I-485. Certain Form I-693 submitted to USCIS before November 1, 2018 may be subject to the previous policy in effect. See below for more information.
23. For more information on determining inadmissibility based on medical grounds, see Chapter 5, Review of Overall Findings [[8 USCIS-PM B.5](#)] through Chapter 11, Inadmissibility Determination [[8 USCIS-PM B.11](#)].

24. USCIS considers the date the civil surgeon signed the [Form I-693](#) as the date the civil surgeon completed the examination. Certain Form I-693 submitted to USCIS before November 1, 2018 may be subject to the previous policy in effect. See below for more information.

25. See Chapter 3, Applicability of Medical Examination and Vaccination Requirement [[8 USCIS-PM B.3](#)] for more information on these special considerations.

26. In other words, the Form I-693 must be a valid form version as of the date the civil surgeon signed the form.

27. See <http://www.uscis.gov/i-693> for the current and accepted version(s) of the form.

28. See <http://www.uscis.gov/i-693> for location information.

Appendices

Updates

POLICY ALERT – Validity of Report of Medical Examination and Vaccination Record (Form I-693)

October 16, 2018

U.S. Citizenship and Immigration Services (USCIS) is updating policy guidance in Volume 8, Part B of the USCIS Policy Manual regarding the period of time during which a Form I-693 submitted in support of a related immigration benefits application is considered valid.

POLICY ALERT – Definition of Certain Classes of Medical Conditions and Other Updates Relating to Health-Related Grounds of Inadmissibility

November 02, 2016

U.S. Citizenship and Immigration Services (USCIS) is updating guidance regarding health-related grounds of inadmissibility in accordance with the U.S. Department of Health and Human Services (HHS) rulemaking updating Title 42 of the Code of Federal Regulations, part 34 (42 CFR 34).

POLICY ALERT – Validity Period of the Medical Certification on the Report of Medical Examination and Vaccination Record (Form I-693)

May 30, 2014

U.S. Citizenship and Immigration Services (USCIS) is issuing an update to policy guidance in the USCIS Policy Manual addressing the validity period of civil surgeon endorsements on the Report of Medical Examination and Vaccination Record, Form I-693.

POLICY ALERT – Health-Related Grounds of Inadmissibility and Waivers

January 28, 2014

U.S. Citizenship and Immigration Services (USCIS) is issuing guidance in the USCIS Policy Manual on the health-related grounds of inadmissibility under INA 212(a)(1) and corresponding waivers under INA 212(g).