## **USCIS Requirements for I-693 Examination & Immunization**

Thank you for having your I-693 examination with us. Please read below for the age-appropriate information (subject to change).

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Vaccines Required (Subject to change by USCIS)  Please bring in original or photocopy of your immunization record if any. If you are unable to find your records, we may find them on WA state immunization registry, can do antibody blood test for certain vaccines or required vaccinations may be completed thru your doctor or pharmacy or by us for an extra charge.  Covid Vaccine update is required per CDC guidelines for all ages 6 month and up <a href="https://www.cdc.gov/immigrantrefugeehealth/civil-surgeons/vaccinations.html">https://www.cdc.gov/immigrantrefugeehealth/civil-surgeons/vaccinations.html</a> (see other required vaccines below)		Procedure/Comments: #1. This is a special examination and does not replace the need for a comprehensive physical examination and other immunization updates from your primary care physician. #2. You will be tested for Syphilis, Gonorrhea and tuberculosis depending on your age and risk level. Positive test results
65 and Over	<ol> <li>Tetanus shot (Td/Tdap) if you did not receive in last 10 years.</li> <li>Varicella (Chicken pox) vaccine if no history of disease/immunity.</li> <li>MMR (Measles, Mumps, Rubella) shots if born after 1957.</li> <li>Pneumonia Vaccine (1-2 doses).</li> <li>Flu Vaccine (during flu shot season as defined by USCIS)</li> </ol>	will be reported to health dept per applicable laws, and you will incur further expenses if confirmative tests, additional evaluation or treatments are needed. Your I 693 forms may not be completed until then.  #3. Immunizations: It is important that you provide us with your prior immunization records. Immunizations play an important role in prevention of many communicable diseases. See the immunizations required on left side. We recommend that you follow up with your personal physician to complete immunization series that may be appropriate to your age.  #4. Generally your I-693 exam can be completed in about 4-5 business days. If your test results come abnormal, then it may take longer, and it may cost you extra.  #5. Once your I 693 exam is completed, you will receive a sealed envelope and one set of copies for your records.
Between 19 - 65 yrs of age	<ol> <li>Tetanus shot (Tdap/Td) if you did not receive in last (10) years.</li> <li>MMR (Measles, Mumps, Rubella) shots if born after 1957.</li> <li>(2 doses between age 1-18 yrs or one dose as an adult)</li> <li>Varicella (Chicken pox) vaccine if no history of disease/immunity.</li> <li>Flu vaccine (during flu shot season as defined by USCIS)</li> <li>Hep B vaccine for ages 19-59 yrs</li> </ol>	
Proof/Vaccines required for kids between 6-18 yrs of age (Flu shot required during flu season (For 6 mo18 yr old)	<ol> <li>Hepatitis B vaccine series (3 doses)</li> <li>Polio vaccines (minimum 3-4 doses, with last dose after 4th B.day</li> <li>DTP (or DTaP/Td) vaccines (minimum 3-4 doses, with last dose after 4th birth day)</li> <li>MMR (Measles, Mumps, Rubella) vaccines. (2 doses, at least one month apart, between age 1-18 yrs)</li> <li>Varicella (Chicken pox) vaccine (2 doses, at least one month apart, between age 1-18 yrs) if no history of chicken pox in past.</li> <li>Flu vaccine (during flu shot season) for kids 6 mo thru 18 yr)</li> <li>Extra Vaccines as below for Kids 11 yr and older)</li> <li>Meningococcal vaccine for age 11 thru 18 yrs of age (1-2 doses)</li> <li>Tdap vaccine (if last DTP/TD &gt;5 yrs ago) (1 dose)</li> <li>Hepatitis B vaccine series (3 doses)</li> </ol>	
Proof/Vaccines required for kids between 2-5 yrs of age	<ol> <li>DTap, Polio &amp; HIB vaccines (4 doses-last dose after 4th birth day)</li> <li>MMR vaccines (2 doses by age 4, at least 1 month apart)</li> <li>Varicella (Chicken pox) vaccine (2 doses at least a month apart)</li> <li>Flu vaccine (during flu shot season) for kids 6 month thru 18 yr)</li> </ol>	
Proof/Vaccines required for kids less than 2 yrs of age	<ol> <li>Hepatitis B vaccine (starts at birth)</li> <li>DTap, Polio &amp; Hib vaccines (starts at 2 month age)</li> <li>MMR vaccines (starts after 1st birthday)</li> <li>Varicella (Chicken pox) vaccine (starts after 1st birthday)</li> <li>Rotavirus vaccine (oral) (Only for infants 6 - 32 weeks of age)</li> <li>Pneumonia vaccine (for age 2 months thru 24 months)</li> <li>Hepatitis A vaccine (only for kids 12 thru 23 months of age)</li> <li>Flu vaccine (during flu shot season for kids 6 mo thru 18 yrs)</li> </ol>	Clinic Use: (Vaccines/Ig screen needed to complete I-693 paper work & other notes by MA/provider: (See EMR notes/PE form)
I understand the information presented as above and the dates and documents provided by me are legitimate.		
Patient Name: DOB:  Pt/Guardian' s Signature: X Date:		
Interpreter's signature:  Date:		