

## Utah's Domestic Refugee Health Medical Screening Guidelines Checklist\* (as of 12.8.22)

Activity	All	Adults	Children	
<b>History &amp; Physical Exam</b>				<b>Complete?</b>
History <small>(includes review of overseas medical records)</small>	✓			
Physical Exam & Review of Systems <small>(includes mental health, dental, hearing, and vision screening; nutritional, reproductive assessment; health education and anticipatory guidance, etc.)</small>	✓			
Height, weight, BP	✓			
Visual Acuity Results		✓ All adults	✓ All children able to be screened	
Social History (Tobacco or Alcohol Use)	✓			
Mental Health	✓	<a href="#">Screened with RHS-15 (14+)</a>	<a href="#">Screened via questions and discussion between provider and guardian.</a>	
<b>Laboratory Tests</b>				
Complete Blood Count with Differential and Platelets	✓			
Diabetes Screening (PGL test for diabetes or marked "Low Risk" in RHOS)		✓ <small>Screen if the patient is at high risk for diabetes and/or in accordance with the <a href="#">US Preventive Services Task Force</a> guidelines.</small>	✓ <small>Screen if the patient is at high risk for diabetes and/or in accordance with the <a href="#">US Preventive Services Task Force</a> guidelines.</small>	
Urinalysis <small>(if old enough to provide clean-catch urine specimens)</small>	✓			
Cholesterol & Lipid Disorder Screening		✓ <small>In accordance with the US Preventive Services Task Force guidelines</small>		
Pregnancy Testing		✓ <small>Women of childbearing age; using opt-out approach</small>	✓ <small>Girls of childbearing age; using opt-out approach or with consent from guardian</small>	

\*For specifics, see CDC guidelines at: <http://www.cdc.gov/immigrantrefugeehealth/guidelines/domestic/domestic-guidelines.html>. These *screening* guidelines are for *asymptomatic* refugees. Refugees with signs or symptoms should receive diagnostic testing and refer to overseas medical screening notes from EDN regarding follow-up at final destination. Or utilize [CareRef](#), which is a tool to determine screening tests recommended.

## Utah's Domestic Refugee Health Medical Screening Guidelines Checklist\* (as of 12.8.22)

Activity	All	Adults	Children
HIV Testing	✓ Opt-out approach		
Hepatitis B Testing	✓		
Hepatitis C Testing		✓ All adults 18+	✓ Children with risk factors (e.g., hepatitis C -positive mothers, etc.)
Blood Lead Level		✓ Pregnant or Lactating mothers	✓ All children and infants (16 years old or younger)
Syphilis Testing (read more <a href="#">here</a> )		✓ Domestic Syphilis testing is not required if there's an overseas negative result for Syphilis.	✓ Children 15 years or older; children under 15 years old with risk factors (if there isn't a negative overseas result)
Syphilis Confirmation Test <sup>1</sup>		✓ Individuals with positive VDRL or RPR tests	✓ Children with positive VDRL or RPR tests
Chlamydia and GC Testing (read more <a href="#">here</a> )		✓ Women ≤ 25 years who are sexually active or those with risk factors and do not have documented pre-departure testing.	✓ Girls under 18 years old who are sexually active or those with risk factors and do not have documented pre-departure testing.
Newborn Screening Tests <sup>2</sup>			✓ Within the first year of life
<b>Preventive Health Interventions &amp; Other Screening Activities</b>			
Tuberculosis Screening <sup>3</sup>	✓		
Immunizations <sup>4</sup>		✓ Individuals with incomplete or missing immunization records upon review of overseas records OR Serology results.	✓ Children with incomplete or missing immunization records upon review of overseas records OR Serology results.
COVID-19 Vaccines		✓ All adults should be offered the COVID-19 vaccine at the initial screening (if not completed overseas)	✓ Children 12-18 years old should be offered the Pfizer vaccine (if not completed overseas), Children 5-11 should be offered pediatric Pfizer vaccine (if not completed overseas)
Review & Enter Overseas Immunizations into USIS, acknowledge in RHOS.	✓		

<sup>1</sup> Note: Nontreponemal testing (VDRL/RPR) may have a false-negative result during primary syphilis in the very early stages or tertiary syphilis in the very late stages. Suggest presumptive treatment, and retest if clinical suspicion is high. See [CDC Sexually Transmitted Diseases Treatment Guidelines](https://www.cdc.gov/std/tg2015/).

\*For specifics, see CDC guidelines at: <https://www.cdc.gov/immigrantrefugeehealth/guidelines/domestic/domestic-guidelines.html>. These *screening* guidelines are for *asymptomatic* refugees. Refugees with signs or symptoms should receive diagnostic testing and refer to overseas medical screening notes from EDN regarding follow-up at final destination. Or utilize [CareRef](#), which is a tool to determine screening tests recommended.

## Utah's Domestic Refugee Health Medical Screening Guidelines Checklist\* (as of 12.8.22)

Activity	All	Adults	Children
Stool Ova and Parasite Testing <sup>5,8</sup>		✓ Refer to EDN and CDC guidance. Individuals who had contraindications to albendazole at pre-departure (e.g., women in the first trimester of pregnancy) or who weren't screened overseas should be screened domestically and/or provided presumptive treatment based on results.	✓ Refer to EDN and CDC guidance. Children who had contraindications to albendazole at pre-departure (e.g., under 1year) or who weren't screened overseas should be screened domestically and/or provided presumptive treatment based on results.
Strongyloides Testing and/or Presumptive Treatment <sup>5, 6, 8</sup>		✓ Refer to EDN and CDC guidance. Individuals who did not receive pre-departure presumptive treatment or testing should be screened domestically and/or provided presumptive treatment based on results.	✓ Refer to EDN and CDC guidance. Individuals who did not receive pre-departure presumptive treatment or testing should be screened domestically and/or provided presumptive treatment based on results.
Schistosomiasis and/or Presumptive Treatment <sup>5, 7, 8</sup>		✓ Refer to EDN and CDC guidance. Individuals from sub-Saharan Africa who had contraindications to presumptive treatment at pre-departure (e.g., pre-existing seizures) that are not resolvable should be tested rather than treated.	✓ Refer to EDN and CDC guidance. Children from sub-Saharan Africa who had contra-indications to presumptive treatment at pre-departure (e.g., under 4 years) should be tested domestically.
Malaria Testing <sup>5, 7, 8</sup>		✓ Refer to EDN and CDC guidance. Individuals from sub-Saharan Africa who had contraindications to presumptive treatment at pre-departure (e.g., pregnant, lactating)	✓ Refer to EDN and CDC guidance. Children from sub-Saharan Africa who had contraindications to presumptive treatment at pre-departure (e.g., < 5 kg)
Vitamins		✓ Individuals with clinical evidence of poor nutrition	✓ Individuals with clinical evidence of poor nutrition
<b>RHOS Data Entry</b>			
Screenings Results Entered?	✓		
Screening Provider Comments	✓		
Referrals Attached / Follow-Up Noted in RHOS	✓		

<sup>2</sup> According to state standards; see: <https://newbornscreening.health.utah.gov/>

<sup>3</sup> Tuberculosis screening may include IGRA or TST/PPD testing and/or chest x-ray

<sup>4</sup> Serological testing is an acceptable alternative

<sup>5</sup> Presumptive treatment is an acceptable alternative to testing, provided the contraindication has resolved

<sup>6</sup> Ivermectin is the drug of choice, but is contraindicated in refugees from Loa loa endemic areas of Africa. In African refugees from Loa loa endemic areas, presumptive treatment is more expensive and complicated (e.g. high dose albendazole) and it may be more feasible to conduct serologic testing with treatment of those found to have infection

<sup>7</sup> Presumptive treatment is only recommended in refugees from sub-Saharan Africa. Currently, all sub-Saharan refugees without contraindications are receiving pre-departure treatment.

<sup>8</sup> For additional support navigating the domestic parasite screening guidance, please refer to an interactive tool created by the Mass. Refugee Health Program: <https://arcq.is/1jj4LC0>

\*For specifics, see CDC guidelines at: <http://www.cdc.gov/immigrantrefugeehealth/guidelines/domestic/domestic-guidelines.html>. These screening guidelines are for asymptomatic refugees. Refugees with signs or symptoms should receive diagnostic testing and refer to overseas medical screening notes from EDN regarding follow-up at final destination. Or utilize [CareRef](#), which is a tool to determine screening tests recommended.