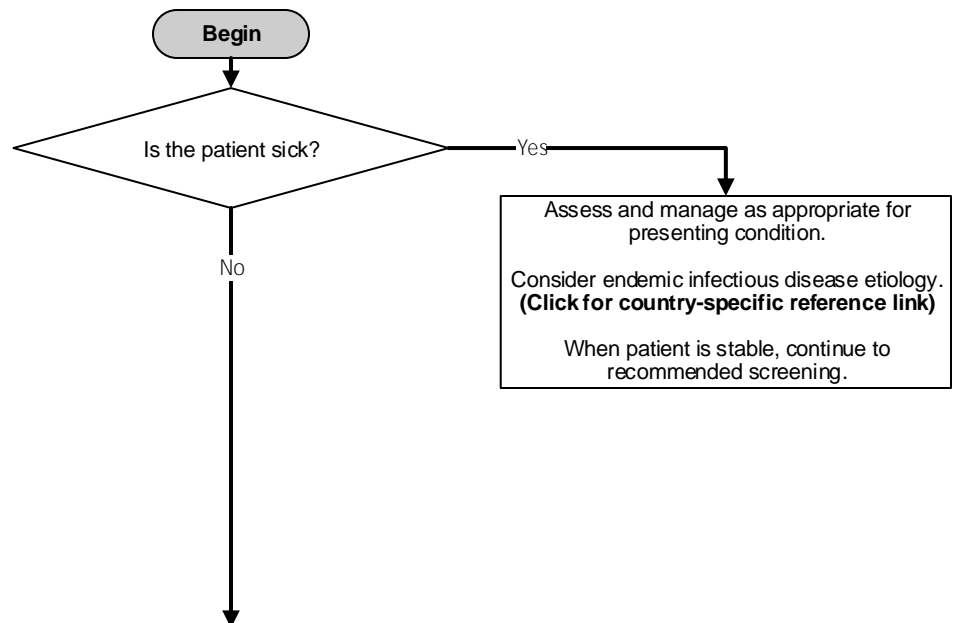


Clinical Algorithm for the Care of the Immigrant Patient

Laboratory Screening of Immigrants

- Inclusion Criteria**
- Foreign-born patients who have no screening results available (either screening never done or results not accessible)
- Note:* Refugees who enter through the US Refugee Resettlement program receive screening through the Harris County Refugee Health Screening Program.
- Exclusion Criteria**
- Pregnant patients



Screening Labs for All Immigrants (in Addition to Laboratory Evaluation for Presenting Condition)

Use Screening Labs for All Immigrants Order Set [3432]

- CBC with differential
- Tuberculosis testing:
 - Preferred for all ages: Interferon-Gamma Release Assay (IGRA)
 - Note: Due to stability of test, do not draw this specimen after 2pm on a Friday and do not collect on Saturday, Sunday, or on a weekday preceding a holiday.*
 - Second-line: Tuberculin Skin Test (TST)
 - Note: Ensure health care provider reading of test between 48 and 72 hours after TST placement.*
- Lead level (up to 16 years of age)
- Hepatitis Diagnostic Panel (Hepatitis A, B, and C)
- HIV:
 - <18 months of age: HIV RNA Confirmation by PCR
 - 18 months of age: HIV Diagnostic Panel
- Syphilis:
 - <12 months of age: Syphilis Screen Congenital (RPR)
 - 12 months of age: Syphilis Screen (Treponemal Ab)
- Soil-transmitted helminths*
 - <12 months of age: Ova & parasite x 3 at least 24 hours apart
 - 12-23 months of age: 200 mg albendazole PO once for empiric treatment
 - 2 years of age: 400 mg albendazole PO once for empiric treatment
 - If albendazole is contraindicated (e.g., seizures of unknown etiology or allergy), ova & parasite x 3 (If albendazole is not accessible, consider empirically treating with pyrantel pamoate 11 mg/kg of pyrantel base once daily x 3 2 years of age, maximum 1,000 mg/dose.)
- Strongyloides IgG* (If unable to test, consider empirically treating with ivermectin 0.2 mg/kg once daily x 2 days for 15 kg. *Note: Empiric ivermectin is contraindicated if from a Loa loa-endemic country.***)

Additional Screening Based on Age

If <12 months of age:

- Newborn screen

If <6 years of age:

- TSH
- Free T4

12 years of age (or younger if any history of sexual activity or abuse):

- Gonorrhea/Chlamydia PCR (urine)
- Pregnancy test (urine beta-hCG) for females

Additional Screening Based on Regional Exposure

If born in or traversed through Mexico, Central America, 1 of the following: Immunosuppressed, mother with known Chagas disease, or with history of blood/blood product transfusion or organ transplantation:

- Chagas IgG

If born in or traversed through sub-Saharan Africa:

- Schistosoma IgG*

**May omit if have documentation that he/she received presumptive treatment during pre-departure overseas medical exam.*

***Loa loa-endemic countries include: Angola, Cameroon, Central African Republic, Chad, Congo, Democratic Republic of Congo, Ethiopia, Equatorial Guinea, Gabon, Nigeria, and South Sudan.*

References:

Centers for Disease Control and Prevention (CDC). (2012). Summary checklist for the domestic medical examination for newly arriving refugees. Retrieved from: <https://www.cdc.gov/immigrantrefugeehealth/guidelines/domestic/checklist.html>

American Academy of Pediatrics (AAP). (n.d.) Immigrant health toolkit: Medical screening and treatment recommendations for newly arrived immigrant children. Retrieved from: https://www.aap.org/en-us/Documents/3_AAP_MedicalScreening.pdf