New Arrivals with Class B TB Designation

1. What is the Overseas Pre-Immigration Medical Examination?

All newly arrived immigrants and refugees are required to have a pre-immigration medical examination to rule out diseases of public health significance, including an evaluation for TB disease. An applicant can't just go to any doctor to have these visa medical exams completed. Panel physicians designated by the U.S. Department of State provide these examinations in the person's country of origin using standardized protocols developed by the Centers for Disease Control and Prevention (CDC). Adults age 15 years or older are required to have a chest x-ray (CXR), and children ages 2 through 14 years old are required to have a TB skin test (TST) or an Interferon Gamma Release Assay (IGRA). Individuals with any abnormal CXR finding or positive TB test during this overseas screening receive additional evaluation to rule out active pulmonary TB disease prior to resettlement.

2. Who is required to have an overseas medical examination?

The major groups of people that need an overseas medical examination include immigrants, refugees, asylees and parolees.

- Immigrant: A person who has been granted lawful permanent residence in the U.S.
- Refugee: A person who left their home country and is immigrating to the U.S. due to fear or persecution in their country of origin based on race, religion, nationality, membership in a particular social group, or political opinion.
- Asylee: A person who is currently in the U.S. unable to return to her/his country of origin due to fear or persecution in their country of origin based on race, religion, nationality, membership in a particular social group, or political opinion.
- Parolee: A person allowed into the U.S. for urgent humanitarian reasons or when that person's entry is determined to be of significant public benefit. Parole is a temporary status and not a formal admission.

3. What happens after the pre-immigration medical examination?

If the pre-immigration TB exam is negative, no further follow-up is needed upon arrival in the U.S. If infectious TB disease is diagnosed during the pre-immigration exam, full treatment is required before the individual is cleared for travel. If the pre-immigration TB exam has positive findings other than infectious TB disease, a TB Class B designation is given according to the exam results:

- Class B0 TB: The individual was diagnosed with TB by the panel physician or presented to the panel physician while on TB treatment and successfully completed Division of Global Migration and Quarantine (DGMQ)-defined directly observed therapy (DOT) prior to departure.
- Class B1 TB: The patient had an abnormal CXR consistent with TB and/or has a history of treatment for TB disease.
- Class B2: The patient was diagnosed with TB infection; these are typically children whose TST result was positive and CXR was normal.
- Class B3: The patient is a recent contact of an infectious TB case; an individual can have this designation along with another TB Class designation.

4. Why do Class B TB arrivals need a follow-up evaluation in the U.S.?

The CDC recommends that persons with a Class B TB designation receive a full TB evaluation soon after arriving in the U.S. The purpose is to evaluate the person for pulmonary TB (TB in the lungs), extrapulmonary TB (TB outside the lungs), and TB infection, and to treat these conditions if found. This evaluation should be done within 30 days after arrival in the U.S., if possible.

Adapted from the Minnesota Department of Health https://www.health.state.mn.us/diseases/tb/lph/lphclassb.html

March 2025



