

**SUPPORTING STATEMENT FOR  
PAPERWORK REDUCTION ACT SUBMISSION**

**Electronic Medical Examination for Visa Applicant  
OMB Number 1405-0230  
DS-7794**

**A. JUSTIFICATION**

*1. Why is this collection necessary and what are the legal statutes that allow this?*

This collection is necessary for panel physicians to input information from medical examinations into the eMedical portal so it can be transmitted to the Department for visa adjudication and retained in the Department's systems.

INA § 221(d), 8 U.S.C. § 1201(d), requires that prior to issuance of an immigrant visa to any alien, the consular officer shall require such alien to submit to a physical and mental examination in accordance with such regulations as may be prescribed. Consular officers may require medical exams to determine whether an alien is eligible for a nonimmigrant visa pursuant to INA § 221(d), 8 U.S.C. § 1201(d). The results of medical examination are used to determine the alien's eligibility for such a visa under the INA, including the health-related visa ineligibility grounds in INA § 212(a)(1), 8 U.S.C. § 1181(a)(1).

*2. What business purpose is the information gathered going to be used for?*

This purpose of this collection is to provide an electronic means of collecting information from a medical examination, with the goal of eventually phasing out the paper-based medical examination forms (DS-2054, DS-3025, DS-3026, DS-3030).

The purpose of the medical examination report is to determine whether the applicant has a medical condition that renders the applicant ineligible to receive a visa or a medical condition which, although not constituting a specific excludable condition, represents a departure from the normal health or well-being that is significant enough to interfere with the applicant's ability to care for himself, prevent attendance at school or work, or requires extensive medical treatment or institutionalization in the future. A panel physician, selected by the consular post in accordance with instructions issued by the Centers for Disease Control and Prevention ("CDC"), performs the medical examination of the applicant and submits the electronic medical report via the eMedical system. For the purposes of this submission, the "respondent" may be the panel physician, who fills in the eMedical forms, or the visa applicant, who is the source of the medical information recorded in the collection. The medical finding by the panel physician or the CDC, if referred to that agency, is binding on the consular officer in adjudicating the alien's eligibility. The information requested on the forms is limited to the result of any diagnostic tests required for the diagnosis of the diseases identified as communicable diseases of public health significance and other evaluations identified as necessary to confirm a medical ineligibility under INA § 212(a)(1), 8 U.S.C. § 1182(a)(1).

*3. Is this collection able to be completed electronically (e.g. through a website or application)?*

The eMedical system allows collection of the information to be completed electronically. The eMedical system serves as a conduit for panel physicians to submit medical exam information to

the Department and CDC electronically. Approved panel physicians will be granted access to the eMedical system by the Department. The panel physician inputs the exam information into the eMedical portal and it is electronically transmitted to the Department for visa adjudication. Immigrant visa applicants with a completed and submitted DS-260, Electronic Application for Immigrant Visa and Alien Registration, will have their medical exam results submitted to the Department via eMedical and considered during adjudication.

4. *Does this collection duplicate any other collection of information?*

The information collected is not maintained elsewhere or otherwise available. To the extent the information collected is duplicative of information collected under OMB Control Number 1405-0113, the paper medical forms, the Department intends to collect information from individual applicants under only one collection. The electronic medical examination form (DS-7794) was initiated in a pilot program in 2018 at three posts. The pilot program was followed by the rollout in six waves; the final wave rolled out on May 11, 2020. There is an ongoing transition period during which some cases are available for use with the DS-7794 and others still require the paper medical forms. Until the full transition to the electronic medical examination, the collection may appear duplicative, but is not in practice. In addition, K, diversity visa, and nonimmigrant visa, and follow-to-join refugees and asylum applicants are not currently adapted for use with the DS-7794 and therefore require use of the paper medical forms (OMB Control No. 1405-0113).

5. *Describe any impacts on small business.*

The information collection does not involve small business or other small entities.

6. *What are the consequences if this collection is not done?*

This information collection is essential for determining the eligibility of aliens seeking immigrant or nonimmigrant visas to enter the United States. Panel physicians fill out the medical examination report, via eMedical, for each medical examination of an applicant. It is not possible to collect the information less frequently since up-to-date medical information is necessary to determine the eligibility of the applicant.

7. *Are there any special collection circumstances?*

No special circumstances exist.

8. *Document publication (or intent to publish) a request for public comments in the Federal Register*

The Department published a notice in the *Federal Register* on July 07, 2020 (85 FR 40728) soliciting public comments for a 60-day period. The Department received one comment from the International Refugee Assistance Project (IRAP) posing several questions about the proposed information collection:

- IRAP commented that neither the Notice nor the associated Federal Register Dockets provide copies of the proposed information collection and requested the Department provide copies for their review.

Response: The Department has provided IRAP copies of all proposed information collection instruments requested.

- IRAP inquired as to what information will be shared with CDC.

Response: The entire medical package (all forms that comprise the panel physician medical examination) for visa applicants identified by a panel physician as having a CLASS A or CLASS B Medicals is shared with CDC, in paper form or electronically. The only documentation related to the panel physician examination that is not shared with CDC is the X-ray results, which panel physicians provide directly to the applicants and are not a part of the visa package. None of the medical package for visa applicants who are not identified as having a CLASS A or CLASS B medical condition is systematically shared with CDC. On a case by case basis, information from the medical package could be shared with CDC if specific information is necessary for the administration or enforcement of U.S. law, consistent with INA 222(f).

- IRAP inquired whether the visa applicant would have access to the information collection about them.

Response: Neither consular officers nor panel physicians may provide copies of the completed Department of State medical forms to the applicants or other interested parties because they are visa records and confidential under INA 222(f), 8 U.S.C. § 1202(f), but panel physicians may share their own records in the form of lab reports and similar documentation with the applicant upon request.

- IRAP commented that the Notice does not provide detailed information as to the duration for which the Department will retain the information collected.

Response: The information the Department proposes to collect would be subject to the record disposition schedule for visas, and would vary based on the factors discussed in the disposition schedule. The Department's record disposition schedules are available at: <https://foia.state.gov/Learn/RecordsDisposition.aspx>

*9. Are payments or gifts given to the respondents?*

No payment or gift is provided to respondents.

*10. Describe assurances of privacy/confidentiality.*

Visa applicants will be informed that the information obtained through the panel physician as part of the collection, in the case of visa applicants, will be used to determine medical eligibility under INA § 212(a), 8 U.S.C. § 1182. In accordance with INA § 222(f), 8 U.S.C. § 1202(f), information obtained from applicants in the visa process is considered confidential and to be used only for certain purposes enumerated in statute, including the formulation, amendment, administration, or enforcement of the immigration, nationality, and other laws of the United States.

*11. Are any questions of a sensitive nature asked?*

Yes, the eMedical form collects health and medical information of a sensitive nature. The questions on the collection are designed to solicit the medical information necessary to determine

whether an applicant is eligible for a visa under INA § 212(a)(1), 8 U.S.C. § 1182(a)(1). When an applicant submits their DS-260, Electronic Application for Immigrant Visa and Alien Registration, they will be advised of the requirement to undergo the medical examination in order to assess their visa eligibility under INA §§ 212(a), 8 U.S.C. §§ 1182(a). Further, applicants will be advised that the information will be temporarily stored in the eMedical system hosted, operated, and maintained by the Australian Department of Home Affairs and is being transferred to the U.S. Government for the purposes of enabling the U.S. Department of State to determine applicants' eligibility for a U.S. visa. Applicants will be advised that the information from the medical examination may be accessible to other government agencies having statutory or other lawful authority to use such information, including for law enforcement and immigration enforcement purposes.

*12. Describe the hour time burden and the hour cost burden on the respondent needed to complete this collection*

Approximately 580,330 aliens will annually submit an electronic medical examination once the phased implementation is complete. This estimate includes most immigrant visa applicants. While nonimmigrant applicants may also be required to submit an electronic medical examination, the Department cannot estimate the number of nonimmigrant visa applicants that may be required to submit medical examinations. A panel physician completes an examination for each applicant. The estimated amount of time it takes for a medical professional to complete the medical exam is one hour. One hour is a reasonable estimate for the time it will take to complete each instance of collection. Therefore, the annual hour burden to respondents is estimated to be 580,330 hours (580,330 respondents x 1 hour). Based on the average U.S. hourly wage of \$24.98<sup>1</sup> the weighted wage hour cost burden for this collection is approximately \$21,744,965.10. This is based on the calculation of 1 hour x \$24.98 (average hourly wage) x 1.5 (weighted wage multiplier, which adjusts the average hourly wage to a "fully loaded" salary, including, e.g., benefits, etc.) x 580,330 respondents = \$21,744,965.10.

*13. Describe the monetary burden to respondents (out of pocket costs) needed to complete this collection.*

Based on an estimate of the average cost of medical examinations administered by panel physicians worldwide (\$100), average cost of vaccinations (\$350), and the number of applicants per year (580,330), the estimated annual cost burden is \$261,148,500. (\$100 medical examination + \$350 vaccinations = \$450 cost burden to applicant. \$450 x 580,330 applicants = \$261,148,500.)

*14. Describe the cost incurred by the Federal Government to complete this collection.*

The Department estimates that the cost of this information collection to the Federal Government is on average, approximately \$1,305,742 per fiscal year. This estimate is based on the current hourly charge for the consular time from the Cost of Service Module ("CoSM") of \$135, multiplied by the number of hours required to review the application and number of respondents. The design of the form allows the consular officer to thoroughly review the form for an

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<sup>1</sup> Source: Data from the U.S. Bureau of Labor Statistics' May 2018 National Occupational Employment and Wage Estimates for all occupations ([https://www.bls.gov/oes/current/oes\\_nat.htm#00-0000](https://www.bls.gov/oes/current/oes_nat.htm#00-0000)). Retrieved January 13, 2020.

indication of medical ineligibility in a period time lasting no more than one minute. Therefore, 1/60 hours x \$135 CoSM x 580,330 respondents = \$1,305,743.

*15. Explain any changes/adjustments to this collection since the previous submission*

The burden has increased from the last submission to OMB, reflective of recent statistics of visa applicants undergoing medical exams. The Department will make numerous revisions to each of the forms in this collection. The changes are as follows:

| <b>Section</b>                            | <b>Current Form</b>  | <b>New Form</b>  |
|---|--|--|
| <b>Pre-exam: Health Case Details page</b> |  | Addition of <i>Country of nationality</i> as a mandatory drop-down list containing the ICAO Country Codes                                |
| <b>501: Past Medical History page</b>     |  | Introduce ability to capture multiple instances of <i>Diagnosed</i> and <i>Treatment Completed</i> dates for <i>Tuberculosis history</i> |
|   | Obstetrics question:<br><i>When does the client expect to give birth?</i>              | replaced with <i>Estimated delivery date</i>   |
|   |  | Addition of <i>Normal/Abnormal</i> question in association with <i>Fundal Height</i>   |
|   |  | Addition of <i>Food or drug allergies</i> and associated <i>Specify</i> field  |
| <b>501: Basic Questions</b>               | For Visual acuity testing, No (applicant under 15)                                     | For Visual acuity testing, No (applicant under 15)   |
|   | <i>Visual acuity testing</i> recorded for both <i>Uncorrected</i> and <i>Corrected</i> | <i>Visual acuity testing</i> recorded for either <i>Uncorrected</i> or <i>Corrected</i> but not both                                     |
| <b>501: Detailed Questions</b>            |  | Addition of <i>Remarks</i> as an optional, free-text field   |

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|--|--------------------------|---|
|  |                          |   |
| <b>501: Classification and Examiner Declaration</b>        |                          | Introduce ability to classify the Health Case as <i>B0 TB, Pulmonary</i>  |
|  |                          | Introduce ability to record <i>General Supporting Comments</i> under <i>Remarks</i>   |
| <b>106: Mental Health Report</b>                           |                          | Label Changes   |
| <b>603: Investigation of current state of Tuberculosis</b> | Confirm identity section | Remove <i>Confirm identity</i> section  |
|  |                          | Remove capture of <i>Second line tests recorded</i> flag. System will use presence of results to determine whether report should be attached. |
| <b>607: Continued Tuberculosis Treatment</b>               |                          | <i>Exam name</i> change   |
|  |                          | Remove <i>Confirm identity</i> section  |
|  |                          | Question text change to <i>Treated at approved DOT site</i>   |
| <b>712: Syphilis Test (VDRL or RPR)</b>                    | Confirm Identity Section | Remove <i>Confirm identity</i> section  |
|  |                          | Introduce ability to record <i>Repeat Titer</i> for the <i>Confirmatory</i> testing   |

|   |                                      |  |
|---|--------------------------------------|--|
| <b>713: Gonorrhea</b>                     | Confirm Identity Section             | Remove <i>Confirm identity</i> section   |
| <b>714: Hansen's Disease</b>              |                                      | Addition of ability to record <i>Test name, Date result reported</i> and <i>Test Result</i>            |
| <b>719: TB Screening Test-TST or IGRA</b> | Confirm identity section             | Remove <i>Confirm identity</i> section   |
|   |                                      | Addition of ability to record the specific results for <i>QuantiFERON</i> and <i>T-Spot</i> IGRA tests |
|   | Free text field under <i>Details</i> | Remove corresponding (redundant) free-text field for <i>Details</i>                                    |
| <b>951; Vaccination</b>                   | <i>Confirm Identity section</i>      | Remove <i>Confirm identity</i> section   |

16. Specify if the data gathered by this collection will be published.

A quantitative summary of all Department of State visa activities is published in the annual Report of the Visa Office. The Report of the Visa Office is an annual report providing statistical information on immigrant and nonimmigrant visa issuances by consular offices, as well as information on the use of visa numbers in numerically limited categories. The Visa Office currently has annual reports available from 2000 to 2019. The link to the site is: <https://travel.state.gov/content/travel/en/legal/visa-law0/visa-statistics.html>.

17. If applicable, explain the reason(s) for seeking approval to not display the OMB expiration date.

The Department will display the expiration date for OMB approval of the information collection.

18. Explain any exceptions to the OMB certification statement below.

The Department is not requesting any exception to the certification statement.

**B. COLLECTION OF INFORMATION EMPLOYING STATISTICAL METHODS**

This collection does not employ statistical methods.