



U.S. Citizenship  
and Immigration  
Services

June 20, 2011

Addressee's Name

Business Address

Street Address

City, State Zip

RE: Clarification of Signature Policy

Dear Dr. [LAST NAME]:

This letter is to clarify the signature policy for Form I-693, *Report of Medical Examination and Vaccination Record*.

In July 2010, U.S. Citizenship and Immigration Services (USCIS) sent a letter to all civil surgeons regarding the issuance of new Technical Instructions for Physical or Mental Disorders with Associated Harmful Behaviors and Substance-Related Disorders by the Department of Health and Human Services Centers for Disease Control and Prevention (CDC). This letter also included guidance on completing the July 20, 2010 version of Form I-693.

Page 3 of the letter instructed civil surgeons on how to complete the signature parts of Form I-693, and inadvertently stated that stamped signatures are acceptable when a designated civil surgeon completes Form I-693 after conducting a medical examination. This statement was incorrect.

**We are now sending this letter to correct this error.**

**The civil surgeon's signature in the Civil Surgeon's Certification section of Form I-693 *must* be an original, pen-and-ink, signature, not a stamped signature. If there is a referral, the referral physician must also use an original, pen-and-ink signature in the Referral Evaluation section. A stamped signature is acceptable *only* when a physician on the staff of a local or State health department completes the Form I-693 on behalf of a refugee applying for adjustment of status.**

As a reminder, neither the civil surgeon nor the applicant should sign the Form I-693 until the applicant has been examined, finished any follow-up treatment, and is medically cleared for immigration purposes.

USCIS apologizes for any confusion that may have resulted from the July 2010 letter. In response, USCIS offices have been temporarily accepting stamped signatures but will resume rejecting Form I-693s based on stamped signatures within 30 days of this letter.

We appreciate the service you provide to the immigrant community and your ongoing efforts to stay informed of all medical exam requirements and your responsibilities as a civil surgeon.

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If you have any questions or concerns, please contact [Civil Surgeon Coordinator] at [Contact Information].

Sincerely,

[Name of Civil Surgeon Coordinator, Field Office, or District Director]