



Ad-Hoc Query on Medical Examination Requirements for Third-Country Nationals

Requested by FR EMN NCP on 5th November 2012

Compilation produced on 21st December 2012

Responses from Austria, Belgium, Bulgaria, Estonia, Finland, France, Germany, Greece, Hungary, Italy, Latvia, Luxembourg, Netherlands, Slovenia, Sweden, United Kingdom (16 in Total)

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1. Background Information

The French Ministry of Interior would like to collect information on the practices of other EU Member States and Norway on medical examination of newly-arrived third-country nationals. Indeed, increased international migration and potential health risks have raised issues about best practices in this regard.

Questions:

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1) Does your Member State require a medical examination from third-country nationals before allowing them to stay on your national territory?

- If so, when was this medical examination established?
- Is it foreseen by national law or regulations?
- Is it obligatory or optional or both and in which cases?
- Can it occur in the country of origin of the third-country national prior to his/her entry on the national territory?
- Does it occur at the time of first entry on the national territory or of each issuance of a residence permit?
- Can the lack of medical examination lead to sanctions (on the issuance of a residence permit or access to social rights, etc.)?
- Is there a maximum period to undergo the medical examination?

2) Which entity is in charge of this medical examination (the treating doctor, a registered doctor (how is he/she registered?), a state or social organism, etc.)?

Is this examination free or should it be paid by third-country nationals?

3) The content of the medical examination:

- Which are the medical or technical examinations required?
- Can further examinations be required?
- Could it vary according to the public?

4) Impact of an unfavourable medical examination:

- Could an unfavourable medical examination *in the country of origin* lead to a refusal of a residence permit?
- Could it make the issuance of a residence permit conditional upon the prior requirement to be treated?
- Could an unfavourable medical examination *in the host country* lead to a refusal of a residence permit?
- Could health authorities of the host country be informed of such results?

5) Is a reflection being conducted or has been conducted with a view to change the medical examination (and if so, in what way: termination, simplification, strengthening, organizational change) in your country?

2. Responses¹

		Wider Dissemination?²	
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¹ If possible at time of making the request, the Requesting EMN NCP should add their response(s) to the query. Otherwise, this should be done at the time of making the compilation.

² A default "Yes" is given for your response to be circulated further (e.g. to other EMN NCPs and their national network members). A "No" should be added here if you do not wish your response to be disseminated beyond other EMN NCPs. In case of "No" and wider dissemination beyond other EMN NCPs, then for the Compilation for Wider Dissemination the response should be removed and the following statement should be added in the relevant response box: "This EMN NCP has provided a response to the requesting EMN NCP. However, they have requested that it is not disseminated further."

EMN Ad-Hoc Query: Medical Examination Requirements for TCNs

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	Austria	No	This EMN NCP has provided a response to the requesting EMN NCP. However, they have requested that it is not disseminated further.
	Belgium	No	This EMN NCP has provided a response to the requesting EMN NCP. However, they have requested that it is not disseminated further.
	Bulgaria	Yes	<p>1. No, the Bulgarian legislation does not require third-country nationals (TCNs) to undergo medical examination as a condition for staying on the national territory.</p> <p>However, there is the requirement for TCNs to hold a valid health insurance for the period of stay within, or transit through, the Bulgarian territory. If a TCN does not have such health insurance at the time of arrival he/she can buy the insurance at most entrance points to the Republic of Bulgaria. The minimum coverage of the health insurance must be 30.000 euros for each person concerned.</p> <p>In case the residence in the Republic of Bulgaria of a TCN or his/hers family member is granted on the basis of a health condition already in place – e.g. the purpose of the residence is health treatment, or family member of a TCN needs special care provided in the family because of a health condition, etc. – than the medical documents stating and proving the condition are required. These documents serve as a proof for the Bulgarian authorities that the condition in question is still present and not treated already. If the health condition that serves as a basis for granting residence permit cannot be confirmed than the residence permit could be denied. The medical documents proving the condition must be presented in the official language of the country (Bulgarian) or the TCN needs to get these translated by an authorised translator in order for the documents to be considered legal and binding, while bearing the costs for the translation.</p> <p>Moreover, in Article 10, paragraph 1, of the <i>Foreigners in the Republic of Bulgaria Act</i> are described the exact conditions that will result in a refusal of entry of a TCN on the territory of the Republic of Bulgaria:</p> <p>“Article 10. (1) Issuing of a visa or entry into Bulgaria shall be refused to any foreigner where:</p> <p>... 8. he might be presumed to spread an acute communicable disease; or is afflicted with a disease which according to the criteria of the Ministry of Health or of the World Health Organisation poses a threat to public health; or is not in possession of a vaccination certificate; or is coming from an area with a complicated epidemic or epizootic situation;”</p> <p>The above-described rules concerning the entry and stay of a TCN on the Bulgarian territory are applying for all cases unless other specific rules or exemptions are prescribed by international or bilateral agreement(s) with the country of origin of the TCN.</p> <p>2. Since there is no medical examination applicable in relation to the admission of TCNs to the territory of the Republic of Bulgaria there is no entity in charge.</p> <p>3. n/a</p>
	Estonia	Yes	Estonia does not require a certificate of medical examination from third-country nationals before allowing them to stay on your national territory.

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	Finland	Yes	<p>Finland does not require a medical examination from third-country nationals before entry into Finland or as a prerequisite for issuing a residence permit. The following information concerns asylum seekers.</p> <ol style="list-style-type: none"> 1. An initial interview and health examination are conducted to asylum seekers in reception centers and, if necessary, a medical examination as well as treatment according to the symptoms is provided. The Act on the Reception of People Applying for International Protection and the guidelines of the Ministry of Social Affairs and Health are followed when providing health care. Screenings and medical examinations are conducted on a voluntary basis but examination and treatment against one's will is possible, in accordance with the Communicable Diseases Act, in case there is reason to suspect that a person is infected with tuberculosis. Medical examinations and screenings take place after entry when the first asylum application has been filed. The initial interview and health examination are intended to be conducted within two weeks after the entry. 2. A public health nurse of a reception center will conduct the initial health examination and guide those who are clearly sick to a medical examination. Health care is provided free of charge for asylum seekers without means. 3. The following issues are gone through in the initial health examination: the areas in which the person has resided before entering into Finland, maladies and received treatment, possible exposure to contagious diseases, medication, vaccination history, current state of health, length and weight. Furthermore, consent for screening is asked for. Those who are clearly sick, in need of first aid, under 7 years old, disabled or pregnant as well as those whose results of X-ray or laboratory tests are abnormal will be guided to a medical doctor by a public health nurse. The screening will be done in accordance with the list of countries maintained by the National Institute for Health and Welfare. The list of countries is drawn up based on the knowledge of countries in which the communicable diseases to be screened are common. 4. The authority handling the asylum application does not have access to the results of the screening tests and the results of the initial health examination made after the entry do not have an effect on the asylum process of the person in question. There are no medical requirements for entry into Finland. 5. No.
	France	Yes	<p>1) Yes. The Code on Entry and Residence of Foreigners and Right of Asylum (Code de l'entrée et du séjour des étrangers et du droit d'asile = CESEDA) provides a medical examination within the administrative procedures for the issuance of a residence permit or a work authorisation.</p> <p>It was established by the amended Decree no. 46-1576 of 30 June 1946 on the basis of Order of 2 November 1945 on entry and stay of foreigners in France.</p> <p>It is foreseen by articles R. 313-1, R. 313-4, R. 314-2 and R. 315.9 of the CESEDA for residence permits and articles L. 5221-5 and R.5221-1 of the Labour Code for work authorisations.</p> <p>The medical examination is obligatory for all categories of residence permits, including visitors. However, certain beneficiaries of residence permits are exempted: exemptions related to articles R.313-1 and R. 314-2 of the CESEDA; ill foreign nationals; foreign</p>

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		<p>veterans; foreigners having served in the Foreign Legion.</p> <p>It could occur in the seven countries of origin where the national operator, the French Office for Immigration and Integration (OFII = Office France de l'Immigration et de l'Intégration = OFII) which manages the procedure, has a local delegation competent for controlling the seriousness of the practitioners in charge of the medical examination.</p> <p>Medical examination is carried out for first issuances of residence permits and status transfer procedures for students applying for work permits as it refers not only to the CESEDA but also to the article L. 5221-5 of the Labour Code.</p> <p>The lack of medical examination could lead to the refusal of the residence permit by the Prefect.</p> <p>Third-country nationals have to undergo medical examination within a period of three months following their entry on national territory. This period could be extended insofar as third-country nationals hold a long-stay visa equivalent to a residence permit (visa long séjour valant titre de séjour = VLS-TS) with duration of one year.</p> <p>2) Doctors recruited by or chosen under the control of OFII are responsible for this medical examination. More than 200,000 medical examinations are carried out every year (221,630 in 2011). This procedure is free for third-country nationals who paid taxes to the operator at the time of entry on the national territory.</p> <p>3) These examinations are set by decree of the Ministry of Health. They must include:</p> <p>1° A general clinical examination carried out by a doctor who can ask for expert advice and additional tests;</p> <p>2° An X-ray examination of the lungs:</p> <p>a) Are exempted:</p> <ul style="list-style-type: none"> - Children under 10 who provide a certificate of BCG vaccine and whose medical examination does not suspect tuberculosis; - Any third-country national who provides an X-ray certificate of less than three months when the clinical examination cannot identify a progressive tuberculosis. <p>b) Children under 15 coming from countries with high prevalence of tuberculosis are subject to a tuberculin test conducted within a structure defined during the medical examination.</p> <p>3° A check of vaccination status which must comply with the legislation or regulations in force;</p> <p>4° Persons presenting risk in relation to type 2 diabetes, owing to their background, age or clinical status, are subject to a conventional capillary blood glucose measurement;</p> <p>5° Based on clinical symptoms, urinary examination including protein and blood testing.</p> <p>Advice, appropriated health information and contact details of prevention and care structures are provided to beneficiaries of medical examination.</p> <p>4) In France, a third-country national cannot apply for a residence permit in his/her country of origin. The person who is medically controlled abroad and whose health status cannot immediately allow the issuance of the medical certificate has to treat himself/herself to get the certificate. His/her application is pending until the doctor ensures the person has significantly started a care process. Furthermore, in France, an application for a residence permit cannot be refused for medical reasons but the procedure of issuance of the medical certificate is suspended pending care (tuberculosis, etc.). The issuance of the residence permit is pending until necessary care has been carried out. In the meantime, the third-country national is allowed to stay as he/she holds a receipt (<i>récépissé</i>) or a long-stay visa equivalent to a residence permit (VLS-TS).</p>
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			<p>Health authorities are informed in cases of notifiable diseases.</p> <p>5) A reflexion is being conducted to 1) adapt the medical examination to the strict needs of public health which justify it and to the new diagnostic techniques 2) reduce the useless and superfluous expenditures of the operator insofar as the examination would be useless (persons who have been on the territory for a long time or legally registered in other systems (entry to university, work, etc.)).</p>
	Germany	Yes	<p>1) Yes, if there are indications that the foreigner might pose a risk to public health, a health certificate can be required in order to issue a residence permit.</p> <p>In accordance with section 5 subs. 1 No. 3 of the Residence Act granting of a residence title generally presupposes, amongst other things, that the foreigner's residence does not compromise or jeopardize the interests of the Federal Republic of Germany, which include public health. A further prerequisite for granting a title is, in accordance with section 5 subs. 1 No. 2 of the Residence Act, that no grounds for expulsion apply. Behaviour which endangers public health may constitute grounds for expulsion in accordance with section 55 subs. 2 No. 5 of the Residence Act according to a discretionary decision. The Residence Act came into force with these provisions as Article 1 of the Immigration Act on 1 January 2005. As a precondition for entry, foreigners may also not be considered a threat to public health in accordance with Article 5 §1 (e) of Regulation (EC) 562/2006 (Schengen Borders Code).</p> <p>Non-endangerment of public health as a prerequisite for granting a residence title must as a rule apply, derogations from this only being permissible in justified individual cases, for instance if a statutory right to granting a residence title exists. The presentation of a health certificate is not obligatory in each case, but is only required if there are indications of a threat to public health.</p> <p>The precondition of not jeopardizing public health applies to granting a visa abroad, at the border for entry (on the basis of the Schengen Borders Code), as well as to granting and extending a residence title within Germany. A violation of this title may also constitute grounds for expulsion during the period of validity of a residence title (see above).</p> <p>Refusal to cooperate in the examinations required to draw up the necessary health certificate or to undergo necessary medical treatment may lead to refusal to grant or extend the residence title or to the expulsion of the foreigner.</p> <p>The foreigner must comply with his/her obligation to cooperate promptly, the alien's authority (or mission abroad) being able to grant a suitable period in individual cases. Documents furnished after expiry of the deadline (such as a health certificate which is submitted late) may be ignored (section 82 subs. 1 of the Residence Act).</p> <p>2) In Germany, the alien's authority can demand a health certificate which is issued by a properly-qualified physician or by the local health office. In the visa procedure, the mission abroad may demand a suitable, reliable medical certificate, for instance issued by the official doctor of the mission abroad. As a rule, the foreigner will have to pay the costs of this him/herself unless an exemption from this is exceptionally provided for by the health office on the basis of a local regulation or a fee code of one of the <i>Federal states (Länder)</i>, for instance when assessments are ordered by an authority and carried out by the health office.</p> <p>3) Protection of public health includes prevention against the spread of communicable diseases. The diseases listed in Article 29 of Directive 2004/38/EC (Freedom of Movement Directive), and diseases with clinically severe forms which may develop into epidemics in Germany (No. 5.1.3.5.1 of the General Administrative Regulation to the Residence Act), may in particular be considered as</p>

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			<p>communicable diseases. Accordingly, the medical examination must be carried out according to the medical state-of-the-art. It is also possible to demand proof that the person concerned is receiving proper medical treatment for the disease in Germany and that the necessary preventive measures are properly complied with.</p> <p>4) If a health certificate is presented which is unfavourable for a foreigner, it is at the discretion of the responsible authority – when abroad, this is the mission abroad, and in Germany the local alien’s authority – to allow him/her a period in which to undergo the necessary medical treatment, and to show a health certificate that is favourable for him/her after successful completion of the treatment, prior to a decision being taken on his/her application to grant a residence permit.</p> <p>If a health certificate indicates that a risk to public health is posed by the foreigner which can also not be eliminated by medical treatment, the public interest is to be weighed up against the personal interests of the foreigner in remaining in Germany, and a decision taken on his/her application to have a residence title granted, which may also lead to the application being rejected.</p> <p>There are duties to report in accordance with the Infection Protection Act.</p> <p>5) The “Act on the Implementation of International Health Regulations (2005) and Amending other Statutes” is currently in the legislative procedure (Federal Parliament printed paper 17/7576 at www.bundestag.de). This Act is intended to implement more effectively the previous national provisions on the implementation of the International Health Regulations (2005) adopted on 23 May 2005 by the 58th World Health Assembly. The Act does not refer to the granting of residence titles, but relates amongst other things to measures to prevent communicable diseases being brought in by travellers.</p>
	Greece	Yes	<p>1) a. Yes. Third country nationals who are interested in staying in Greece, should acquire both a visa and a residence permit. According to Law 3386/2005 “Entry, Residence and Social Integration of third country nationals “ and the ministerial decision 3497.3/550/AΣ 4000 of visa issuance, medical examination is necessary in order for someone to stay in Greek territory.</p> <p>b. it was first established in 2001 by law 2910/2001. In 2005 this was replaced by Law 3386/2005 “Entry, Residence and Social Integration of third country nationals”, which maintained though the provision of medical examination requirement.</p> <p>c. it is foreseen by articles 5 of the ministerial decision 3497.3/550/AΣ 4000 for visa issuance and 6 paragraph 4 of Law 3386/2005 for “Entry, Residence and Social Integration of third country nationals”.</p> <p>d. the medical examination is obligatory for all categories of residence permits.</p> <p>e. As far as entry procedures are concerned, medical examination should be made in the country of origin. However, after entering, the person concerned should proceed to medical examination in order for the residence permit to be issued, which takes place in Greek territory.</p> <p>f. Medical examination is solely carried out at the time of the first issuance.</p> <p>g. Lack of medical examination could lead to the refusal of visa issuance as well residence permit.</p> <p>h. The duration of the health certificate is six months (from the date of issuance), according to general administrative provisions.</p> <p>2.) As far as the issuance of visa, the entity issuing medical examinations could be either private medical centers, treating doctors or public medical centers. It is on the discretion of the authority responsible for visa issuance whether to accept the certificate, according to credibility of the issuing authority in the third country.</p> <p>Concerning residence permits, the medical examination is only issued by public medical centers.</p> <p>The medical examination is paid by third country nationals.</p>

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			<p>3.a The medical examination are set by the Ministry of Health. They must include</p> <ul style="list-style-type: none"> i. a general clinical examination ii. an x ray examination of the lungs iii. Mantoux screening test <p>b. No, unless medical services consider that further medical examinations should be carried out.</p> <p>c. Persons who are considered of high risk, are subject to further medical examination</p> <p>4. a. Yes / In the country of origin during the procedure of the visa issuance</p> <p>b. In case of an unfavorable medical examination, the application for a residence permit is rejected. The person concerned can submit a new application after treatment.</p> <p>c. Yes</p> <p>d. Health authorities are informed in cases of notifiable diseases.</p> <p>5. A reflexion is being conducted to i) adapt a medical examination system to align with the needs of public and with new health techniques b) better control of spread diseases iii) better health care for (persons who have been on the national territory) who are affected by spread diseases.</p>
	Hungary	Yes	Pursuant to Act I of 2007 on the Admission and Residence of Persons with the Right of Free Movement and Residence and the Government Decree on its implementation, the micro-region (or Budapest district) institute of the government body in charge of the healthcare system of jurisdiction may order the medical examinations of EEA nationals or their family members in order to determine whether they suffer from any infectious disease or contagious parasitic diseases.
	Italy	Yes	In Italy no medical examination is envisaged for third-country nationals before allowing them to stay on the national territory.
	Latvia	Yes	<p>1) Yes, persons should do x-ray examination before they receive their first residence permit. This provision has been included in Immigration Law and in Cabinet of Ministers Regulations on residence permits. Latvia has applied this provision for approximately 15 years, only the place of examination has changed. Initially applicants could submit a document certifying that they do not suffer from tuberculosis, from their home country. However, several times falsified documents were submitted from persons who suffered from rather heavy form of tbc. Since 1st July 2010 x-ray examination should be carried out in Latvia, before applicant picks up his/her residence permit. Examination is mandatory, but there are some exceptions – children (age has not been stipulated in the legislative acts, in practice, children up to 10 can submit a letter from family doctor) and persons for whom doctor does not advise to carry out this examination (pregnant women, people, who have been prescribed radiation therapy etc.). Examination should take place only in case of first-time permit or, if more than 6 months have passed between previous and next permit and a person has resided outside of Latvia during that period. Persons, who do not submit results of examination, do not receive a residence permit and a decision on issuance of a residence permit is annulled. Practically, there is not maximum period, allowed for an examination as persons enter Latvia with D-visa, issued for 15 days and during that time they should carry out the examination.</p> <p>2) An examination can be carried out in any legally registered medical institution of Latvia and third-country citizens should pay</p>

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			<p>the fee, determined by this institution.</p> <p>3) Document should contain information on the fact if a person suffers from tuberculosis or not. If there is a statement that person suffers from tbc, s/he could do repeated examination but then it should be carried out in specialized medical institution, practicing treatment from this disease.</p> <p>4) Impact – as stated above, examination, carried out in home country, is not valid for receiving a residence permit. If examination carried out in Latvia, shows unfavourable results, a residence permit will not be issued.</p> <p>At the moment, there are no discussions on possible changes of this policy.</p>
	Luxembourg	Yes	<p>1. Yes. In Luxembourg a medical examination is compulsory for all the third country nationals that apply for a residence permit. It consists on a general medical examination and an X-ray examination of the lungs.</p> <ol style="list-style-type: none"> The medical examination should be made before the residence permit is issued. It is foreseen by articles 40 and 41 of the Law of 29 August 2008 on free movement of persons and immigration. It is compulsory for all categories of residence permits. The medical examination can be required to a third country national even in the case that s/he will stay for less than 3 months (article 37). It is not systematically required for the third country nationals who are long-term residence in another Member State nor for its family member (article 41 (2)). No. Article 41 of the Law of 29 August 2008 requires that the medical examination is made by a doctor duly established in the Grand-Duchy of Luxembourg and that s/he is authorized to practice medicine (as a general doctor, Internal medicine specialist or a specialist in Paediatrics). As we mentioned above it occur after the person enters the territory but before the first issuance of the residence permit. The lack of medical examination in the case of a third country national that had been granted an authorisation of stay will be sanctioned with the refusal of issuance of the residence permit (article 41 (3)). Third country nationals must undergo this medical examination in the three months following the entry into the country. <p>2. Article 41 of the Law of 29 August 2008 requires that the medical examination is made by a doctor duly established in the Grand-Duchy of Luxembourg and that s/he is authorized to practice medicine (as a general doctor, Internal medicine specialist or a specialist in Paediatrics). The cost of the medical examination has to be paid by the third country national with the exception of the long-term third country nationals in another Member State and its family members (article 41 (5)).</p> <p>3. The content of the medical examination is (article 2 of the Grand-ducal regulation of 3 February 2009) :</p> <ol style="list-style-type: none"> A general clinical examination performed by a physician who can ask for expert advice and additional tests; An adequate test of latent tuberculosis screening and a chest X-ray. A blood test aimed at testing for sexually transmitted diseases in relation with the clinical symptoms of the patient, with the exception of HIV / AIDS test. A check of vaccination status. <p>The medical examination must also include:</p> <ol style="list-style-type: none"> Persons presenting risk in relation to type 2 diabetes, owing to their background, age or clinical status, are subject to a conventional capillary blood glucose measurement; Based on clinical symptoms, urinary examination including protein and blood testing. <p>4. Impact of an unfavourable medical examination</p> <ol style="list-style-type: none"> No, because the medical examination can only be performed by an authorised doctor in Luxembourg as mentioned

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			<p>above.</p> <p>b. Normally the person has to be treated and during this time the application for the residence permit will be pending until s/he obtains the medical certificate of the doctor indicating that the person is in good health, with the exception if the medical certificate considers that the person is not apt to perform the tasks for the residence permit that the person had applied for.</p> <p>c. Yes. As mentioned above if the medical certificate indicates that the applicant cannot perform the tasks for which s/he the authorisation of stay was granted (i.e. salaried worker, independent worker, highly skilled worker) the residence permit can be refused (article 4 e) of the Grand-ducal regulation of 3 February 2009).</p> <p>d. Yes. According to article 41 (4) of the Law of 29 August 2008 and article 4 of the Grand-ducal regulation of 3 February 2009 the doctor must inform the Managing doctor (médecin délégué) of the Ministry of Health.</p>
	Netherlands	Yes	<p>5. No.</p> <p>1. Tuberculosis is the only infectious disease, which the Aliens law connects consequences. It is (under more) foreseen by article 16 of the Aliens Act 2000, article 3.79 of the Aliens Decree 2000 and Aliens Act Implementation Guidelines.</p> <p>In context of the admission procedure foreigners must be willing to undergo a tuberculosis test (TB test) and, if necessary, undergo treatment of tuberculosis, if the foreigner is applying for a regular residence permit for the first time. The obligation to undergo the TB test does not apply if the foreigner has the nationality of one of the following countries: The Member of States of the EU or the EEA, Australia, Canada, Israel, Japan, Monaco, New Zealand, Surinam, United States of America, and Switzerland (including Liechtenstein). You are also not obliged to undergo a TB test if you have an EC residence permit for long-term residents issued by another EU Member State or if you are a family member of the long-term resident and you have already been admitted to another EU Member State as a family member of the long-term resident.</p> <p>In order to be granted a regular residence permit, the foreigner must be willing to undergo a tuberculosis test (TB test) and – if necessary - to undergo treatment of tuberculosis. If he/she encloses the Declaration of Intent to Undergo a Tuberculosis Test filled in by the application when he/she is submitting it to the Immigration and Naturalisation Service (INS) (and also comply with all other conditions), the INS will grant the foreigner a residence permit. The Foreigner will then receive this permit under the explicit condition that he/she will actually undergo a TB test within three months. If it turns out after the issue of the residence permit that he/she has failed to undergo a TB test within the period of three months, this may result in the withdrawal of the residence permit granted.</p> <p>The mere fact that there is a positive result will not lead to reject application/the withdrawal of the residence permit granted.</p> <p>2. In context of the admission procedure foreigners must take tuberculosis test and, if necessary, undergo treatment. A foreigner must prove this with an original recent Tuberculosis Test Reference Form filled in and signed by the Dutch Municipal Health Service (GGD) if the foreigner is applying for a regular residence permit for the first time. So the test takes place at the Dutch Municipal Health Service (GGD) and this body determines the methods.</p> <p>Costs of the test: this question can not be answered by the INS. It is known that in some GGD's, the person must pay the cost for the screening itself.</p> <p>3. The test takes place at the Dutch Municipal Health Service (GGD) and this body determines the methods.</p>

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			4. See the answers to question 1. 5. No
	Slovenia	Yes	<p>1. According to Slovenian legislation medical examination is not a pre-condition to obtain a residence permit. A potential health risks it could be a case for refusal to issue a residence permit if during the procedure for the issuing of a first temporary residence permit it is determined that the alien comes from regions where infectious diseases with epidemic potential are prevalent and listed in the international health rules of the World Health Organization or from regions where there exist infectious diseases which could pose a threat to the health of people and which require the prescribed measures to be adopted pursuant to the Act governing infectious diseases (the Alien Act, Article 55 (1) para.8).</p> <p>In case of applicants for international protection they are subject to preventive medical examination.</p> <ul style="list-style-type: none"> - Medical examination was established after adoption of the first Alien Act in 1991. - It is foreseen in International Protection Act, 38. Article "<i>After a sanitary-medical preventive examination and after submitting his complete application which has to be done in the shortest possible time, the applicant is accommodated in Asylum Centre</i>". - It is obligatory. - No. - It occurs before every application for international application. - Person who does not want to cooperate at medical examination can not file his international protection application. - Examination must be done before filing international protection application. <p>2. Medical examination for international protection applicants is done in Centre for Foreigners or in Asylum Centre, both are under authority of Ministry of Internal Affairs. Examination is made by a doctor that works under contract for Asylum Centre. Medical examination for asylum seekers is always free of charge for foreigners.</p> <p>3.</p> <ul style="list-style-type: none"> - 1.) Medical history of contagious diseases contacts with infected persons 2.) Information on vaccinations and medication 3.) Basic medical exam (skin, mucosa, throat, lymph nodes) for potential contagious diseases 4.) Other urgent examinations regarding medical situation of patient. - In case of serious diseases that can not be treated in Asylum centre persons who want to file asylum application must go to hospital. - No. <p>4.</p> <ul style="list-style-type: none"> - We do not have medical exam in country of origin. - Some diseases must be treated before foreigner can file application for international protection. - No, disease has no impact on international protection status procedure. - Yes in some cases of serious contagious diseases.

EMN Ad-Hoc Query: Medical Examination Requirements for TCNs

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			5. No.
	Sweden	Yes	<ol style="list-style-type: none"> 1. NO (– although asylum seekers have the right to a free medical examination provided by the regional health care authorities) 2. Not applicable 3. Not applicable 4. Not applicable 5. Not to the best of our knowledge
	United Kingdom	Yes	<p>1) Does your Member State require a medical examination from third-country nationals before allowing them to stay on your national territory?</p> <p>There are powers for Entry Clearance Officers abroad and Border Force Officers at ports of entry to refer any migrant for medical examination before being allowed to enter the UK. Please see Schedule 2 of the Immigration Act 1971 http://www.legislation.gov.uk/ukpga/1971/77/contents and the Immigration Rules (rules) at paragraphs 36 to 39, 51 and 320 onwards http://www.ukba.homeoffice.gov.uk/policyandlaw/immigrationlaw/immigrationrules/</p> <p>Migrants applying for leave to enter the UK for more than six months from specified countries with a high incidence of tuberculosis (TB) can be required to be screened for active pulmonary TB before they come to the UK. Screening can take place at a port of entry or in advance of the lodging of an application for entry clearance (visa). The screening consists of a chest x-ray and, where necessary abroad, laboratory testing. Other migrants arriving from high risk countries may be identified for medical referral after entry under longstanding arrangements whereby details of new entrants are collected from some ports by health bodies.</p> <p>There are no provisions in the rules for a person to come to or stay in the UK in order to access care at the National Health Service (NHS). Many migrants here for a short period of time, such as visitors and short term students cannot seek to extend their stay on the basis of requiring medical care unless they are using private medical healthcare providers, can afford these costs and the costs of remaining in the UK. The UK Border Agency may commission a medical examination in such circumstances, however, the onus is upon the applicant to demonstrate that they meet the requirements of the rules (paragraph 51 of the rules) and as such a medical examination is not mandatory.</p> <p>- If so, when was this medical examination established?</p> <p>The power to require a medical examination was established in the Aliens Act 1905, following a Royal Commission in 1903 which examined the migrant health screening programmes utilised in a number of other countries.</p> <p>- Is it foreseen by national law or regulations?</p> <p>The Immigration Acts and Immigration Rules set out the powers and, in terms of screening for tuberculosis, the requirements upon migrants wishing to travel to the UK. The Acts and rules are enacted through the UK (Westminster) Parliament.</p> <p>- Is it obligatory or optional or both and in which cases?</p>

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			<p>A migrant is obliged to fulfil any requirements in the rules and to comply with any requirements placed upon them by Entry Clearance Officers and Border Officers.</p> <p>- Can it occur in the country of origin of the third-country national prior to his/her entry on the national territory?</p> <p>The medical examination or screening for tuberculosis is currently applied at both ports of entry or abroad before an entry clearance application is made. The UK government announced an expansion of screening for tuberculosis to cover 82 high incidence countries. It is envisaged that in time, with most new migrants undergoing screening abroad, there will be grounds to cease screening by x-rays at our ports although other medical examinations will still be available. Please see paragraph A39 of the rules and this announcement made in May 2012 at http://www.ukba.homeoffice.gov.uk/sitecontent/newsarticles/2012/may/42-tb-test.</p> <p>- Does it occur at the time of first entry on the national territory or of each issuance of a residence permit?</p> <p>Pre-entry screening for TB takes place before the first entry or at the point of entry. Entry Clearance Officers abroad and Immigration Officers at ports of entry have the power to require a migrant too undergo a medical examination (or screening). There are no general requirements for a migrant already in the UK to undergo further medical examinations as a part of the immigration control.</p> <p>- Can the lack of medical examination lead to sanctions (on the issuance of a residence permit or access to social rights, etc.)?</p> <p>Yes. The migrant will normally be refused permission to come to or enter into the UK. There are no further sanctions once a migrant has arrived into the UK save for the powers outlined at paragraph 38 of the rules in relation to returning residents. That is, an application for an extension of stay is not normally dependent upon a requirement to undergo a medical examination.</p> <p>- Is there a maximum period to undergo the medial examination?</p> <p>No but entry will not normally be permitted until after the screening or examination has taken place. A TB screening result has a limited validity and the UK Border Agency requires Medical Officers and TB screening providers to undertake the screening or medical examination within a matter of days.</p> <p>2) Which entity is in charge of this medical examination (the treating doctor, a registered doctor (how is he/she registered?), a state or social organism, etc.)?</p> <p>Pre entry screening for TB is undertaken by clinics which have been authorised by UK Border Agency to undertake the screening process. They are required to follow a technical specification and are subject to quality assurance. The medical qualifications of clinical personnel may be examined by the Agency. The Health Protection Agency (England) is responsible for managing the clinical personnel at Heathrow Airport.</p>
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			<p>Is this examination free or should it be paid by third-country nationals?</p> <p>The fee for pre entry screening of TB or any medical examination is paid by the migrant. Migrants are not charged for any screening or medical examination undertaken at port of arrival.</p> <p>3) <u>The content of the medical examination:</u></p> <p>- Which are the medical or technical examinations required?</p> <p>Pre-entry screening consists of a chest x-ray followed, when necessary, by the laboratory testing of sputum. Screening for TB at Heathrow Airport only consists of a chest x-ray. Other medical examinations are performed in accordance with the circumstances of the individual case. Please see paragraphs 36-39 and 51 of the rules.</p> <p>The UK TB Technical Instructions (for screening providers abroad) can be found here http://www.homeoffice.gov.uk/publications/immigration/tuberculosis-testing/?view=Standard&pubID=1074554.</p> <p>- Can further examinations be required?</p> <p>When active pulmonary TB is identified through pre entry screening, the migrant will be required to undertake a course of treatment and then be retested. Only when the migrant is clear of active pulmonary TB will s/he be permitted to come to the UK. Other medical examinations are performed in accordance with the circumstances of the individual case. Paragraph 38 relates to limited additional requirements that may be placed upon returning residents.</p> <p>- Could it vary according to the public?</p> <p>Pre screening for TB is performed in accordance with a specific technical instruction. Other medical examinations are performed in accordance with the circumstances of the individual case.</p> <p>4) <u>Impact of an unfavourable medical examination:</u></p> <p>- Could an unfavourable medical examination <i>in the country of origin</i> lead to a refusal of a residence permit?</p> <p>Yes in respect of migrants who are subject to immigration control and applying to come to or enter into the UK. In most cases, however, a migrant with TB or a public health condition will delay applying for an entry clearance and an application will only be refused if the migrant chooses to make a formal application to travel in full knowledge that they have been identified as requiring further laboratory testing or as suffering with a public health condition, such as TB.</p>
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			<p>- Could it make the issuance of a residence permit conditional upon the prior requirement to be treated?</p> <p>No. Entry or entry clearance may be refused if an individual is detected with a public health condition and has failed to demonstrate that they have completed treatment, normally through a further medical examination or screening. There is no requirement for a migrant to undergo a medical examination of they are already in the UK and wish to extend their stay.</p> <p>- Could an unfavourable medical examination <i>in the host country</i> lead to a refusal of a residence permit?</p> <p>For those subject to immigration control, yes if before or on arrival, the medical condition is considered to adversely effect the migrant's ability to maintain or accommodate themselves whilst in the UK or there is a concern about public health.</p> <p>There are no requirements for a medical examination after the migrant has arrived into the UK (save for the circumstances outlined above about access to the NHS).</p> <p>- Could health authorities of the host country be informed of such results?</p> <p>Abroad (home),</p> <p>Yes in respect of TB screening and where there is a public health risk identified abroad and where there is a requirement for medical professionals to report such incidences. The UK Border Agency Medical Officers (abroad) and TB screening providers abroad are required to comply with the respective health rules, regulations and policies of the home country.</p> <p>UK (host),</p> <p>The UK Border Agency will share the results of screening for TB with the Health Protection Agency. This will assist in ensuring that local health bodies are aware that a new migrant will be living in their area and allow for the health body to connect with the new migrant and consider monitoring and surveillance in the community, particularly where a new migrant has evidence of a past history of TB or where the results, whilst not amounting to an identification of active TB, may give rise to concerns. The National Institute for Health and Clinical Excellence provides guidance to medical practitioners as to the need to consider the specific needs of new migrants. This link, for instance, sets out the guidance in relation to TB http://guidance.nice.org.uk/CG117/Guidance/pdf/English (so please see, for instance, page 29).</p> <p>5) Is a reflection being conducted or has been conducted with a view to change the medical examination (and if so, in what way: termination, simplification, strengthening, organizational change) in your country?</p> <p>The UK Border Agency conducted a review of the migrant TB screening programme in 2011 and this review informed the government's decision to expand TB screening abroad and to improve upon the sharing of information about new migrants between the UK Border Agency and Health Protection Agency. The intention is that the UK Border Agency will share information on new migrants from high</p>
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			incidence TB countries who travel to the UK with an entry clearance and migrants who arrive into the UK by irregular means. The review document and associated documentation can be accessed here http://www.homeoffice.gov.uk/publications/?publication_SearchTerm=tuberculosis&view=Search+results&pagetype=Main+Branch&view=Search+results .
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