



# Immigrant Health Screening Test Results

UR NUMBER  
SURNAME  
GIVEN NAME  
DATE OF BIRTH

Affix patient label

## Screening Tests

GP

Arrival date:

Pre-departure information

Test	Date	Where	Result
Full blood exam			
Ferritin mcg/L			
Vitamin A mmol/L			
Vitamin D nmol/L			
ALP U/L			
Calcium mmol/L			
Liver function			
Hepatitis B			
Strongyloides			
Schistosoma			
Malaria film/RDT			
Faecal specimen			
Diphtheria IgG IU/mL			
Tetanus IgG IU/mL			
Rubella IgG IU/mL			
Measles IgG			
Other			

## Vitamin D

Normal range 50 – 160 nmol/L

Standard dose assumed: 150,000 IU oral (75,000 IU in children <12 months)

Date	Levels	Dose										

## Immunisation

BCG  location Mantoux status  diameter: date:

**Vaccine**                      **Normal primary course**                      **Doses needed**                      **Dates given**

DTPa/ADT	4 DTPa (< 8y), 3 ADT (≥ 8y)		
IPV	3		
MMR	2		
MCCV	1		
Hepatitis B	3 if <11y, 2 if 11-15y, 3 if ≥16y		
Hib	1 if 15 m-5 y, more if younger		
7vPCV	varies with age, funded > 1/04		
VZV	1 in < 13 y, funded > 11/05		
BCG	only if BCG neg, TST neg, complex		
Hep A	recommended if Hepatitis B positive		