

Thank you for your recent referrals and work in refugee health. We see incomplete screening and variation in testing. We hope to ensure screening is consistent with the [2016 Refugee Guidelines](#), with relevant updates for new arrival groups.

The following tests are recommended for **adults** arriving in Australia as refugees/seeking asylum. Please see the full guidelines (and [RACGP Red Book](#)) for other areas of screening.

All	<p>FBE/film</p> <p>Hepatitis B serology HBsAg, HBsAb and HBcAb - note 'chronic hepatitis B'</p> <p>Strongyloides serology <i>*not Ukraine</i></p> <p>HIV serology</p> <p>TB screening TST or IGRA ≤ 35 years, older if clinical risk - note 'contact history' on IGRA request</p> <p>Consider MMR and Varicella serology to assess vaccination status</p> <p>Faecal specimen - cysts, ova, parasites <i>*not Ukraine</i></p>
Risk-based	<p>Ferritin - women, men with risk factors</p> <p>Vitamin D - lack of sun, dark skin, covered</p> <p>Active B12/folate - arrived < 6 months <u>and</u> vegan or food insecurity, all Afghanistan, Iran, Gaza, Bhutan, Rohingya</p> <p>Rubella serology - women childbearing age</p> <p>Syphilis serology - risk factors</p> <p>Chlamydia/gonorrhoea - NAAT urine/low vaginal swabs - risk factors</p> <p>Helicobacter pylori faecal antigen - if upper GIT symptoms or FHx gastric cancer</p>
Country-based	<p>Schistosoma serology - endemic: Africa, Myanmar, Bangladesh, Iraq, Syria; not other Middle East/ Afghanistan/Ukraine/other Asian countries</p> <p>Malaria RDT and thick/thin films - arrival < 3 m endemic area (< 12 m if fever): Africa (<i>except Egypt</i>), Myanmar, Bangladesh, Bhutan, India, Pakistan, Afghanistan; not Middle East/Egypt/Sri Lanka/Ukraine</p> <p>Hepatitis C serology HCVAb - endemic: Congo, Egypt, Iraq, Pakistan, Rohingya cohorts, consider Syria, Ukraine; not other African/Middle East/Afghanistan/Asian countries</p> <p>Hepatitis A serology - all Gazan and Rohingya arrivals until more information available</p> <p>Extended nutrition screen - suggest ferritin/B12/folate/vitamin A/zinc (+/- others) in all Gazan and Rohingya arrivals, and consider if risk factors in other groups</p> <p>Pb - all Gazan and Rohingya until further information, consider if Hx thanaka use (Myanmar, Rohingya)</p>
Other NCD screens* Red Book 10 th ed	<p>CVD risk - 45-79 years, each 5 years, BP 18y+ opportunistically each 2 years</p> <p>Lipids - 45y+, frequency varies with risk</p> <p>Diabetes - general risk: > 40 y using AUSDRISK, each 3 years; high risk: BSL or HbA1C, each 3 years, more often (+extra tests) if abnormal results</p> <p>Kidney disease - based on risk, Albumin:creatinine & eGFR, each 1-2 years (CKD handbook)</p> <p>Bowel cancer - FOBT 45-74 years, each 2 years, extra screening high risk</p> <p>Breast cancer - Mammogram women 50-74y, each 2 years; ≥ 40 y if moderately increased risk</p> <p>Cervical cancer - HPV test women 25-74y, each 5 years (clinician or self-collected)</p>

IGRA = interferon gamma release assay, NCD = non communicable diseases, TST = tuberculin skin test

*These areas reflect the 2016 Refugee Guidelines, however we suggest referring to the more detailed and [updated tables](#) in the Red Book 10th ed. which include multiple other areas, and also the [2024 CKD Handbook](#). Please contact the refugee fellows at RMH and Monash Health for further information on adult screening.