



Manhattan Family Practice

The Medical Examination for US Immigration

Who is the medical practitioner?

Dr Albert Levy, Manhattan Family Practice, is a Civil Surgeon for the US Citizenship and Immigration Services and conducts immigrant visa medical examinations at his office at 911 Park Avenue (at 80th Street). Dr Levy has been in private practice in New York City since 1986 and is listed as a **Top Doctor** in New York and America. He is well-known for his excellent caring skills and professional knowledge. He is assisted by an experienced medical staff, including a Nurse Practitioner, and an administration team who take care of all the necessary documentation and forms. Together we ensure the process is carried out efficiently and professionally.

How do I arrange an appointment?

You may schedule an appointment by telephoning **212 288 7193** or emailing us at office@manhattanfamilypractice.com. **The office is open from Mondays through Fridays from 9am to 5pm.** You can email us at: office@manhattanfamilypractice.com. Same day appointments are sometimes available.

Where do I go for the medical?

The office is located at **911 Park Avenue**, on the SE corner of 80th Street and Park Avenue. The nearest subways are Lexington Avenue and 77th Street or Lexington Avenue and 86th. There are several parking garages located along 80th Street between First Avenue and Madison Avenue.

What does the physical examination entail?

The medical examination is conducted by the doctor and his medical staff. The doctor will record your complete **medical history** and perform a **physical examination**. All applicants 15 years of age and older are required to have **serologic (blood) tests** for syphilis, and urine tests for Gonorrhea and Chlamydia. (Applicants under age 15 may be tested for syphilis if there is reason to suspect the possibility of infection.)

All patients 2 years of age and older will be required to have a blood test for Tuberculosis. The **Quantiferon** blood test for TB is done in our office at an additional fee which is billed to you separately by the laboratory. This test can be billed to your medical insurance if they cover the code (see attached fee schedule).

Vaccine Requirements

The US government requires specific **vaccinations according to your age**. You can take these vaccines in our office or bring proof of vaccination at the time of your appointment. These vaccinations include mumps, measles, rubella, polio, tetanus, diphtheria toxoids, pertussis, varicella, hepatitis B and the influenza (flu shot). During the months of October

through March an influenza vaccine is required and is charged in our office at **\$70** if no proof of immunization is provided.

As of January 2025, US Visa applicants do not require proof of Covid-19 vaccination, only if preferred by patient.

The doctor will review your vaccination history with you to determine whether you have all the required vaccinations. Make sure you bring your vaccination records with you to your appointment if available. (See attached sheets for all age appropriate vaccination requirements and the vaccine fee schedule).

How much is the Medical Examination going to cost? (See separate fee schedule attached)

- As of November 1st, 2025 , the medical examination costs **\$350** which includes the syphilis (RPR) blood test, urine (gonorrhea and chlamydia) test and all administrative fees
- For the tuberculosis **Quantiferon** test there is an additional **\$95 fee**. This blood test can be billed to your insurance but is not necessarily covered. You may receive a bill from the laboratory if the charges are not covered by your particular insurance and you will be responsible for payment. Please check with us if you should have any questions relating to an unexpected laboratory bill.
- If you require vaccinations, these will be charged separately (see attached fee schedule)

Payment must be made at the time of the medical examination by cash, credit card or Zelle. (Most credit and debit cards are accepted).

What happens if I miss my appointment or find that I need to change it?

We ask you to ensure that cancellations or changes are made with **at least 24 hours notice** as a courtesy to our doctors and staff and so that your appointment can be given to another patient.

What do I need to bring to the medical examination?

You are required to bring:

1. **Passport or Driver's License**
2. **Vaccination Records** if available
3. **Insurance card for the Quantiferon TB test** if available
4. **Payment by credit card, cash or Zelle**
5. **Registration form (optional)**

Our office registration form is printed on page 5 of this package. You may print and fill this form out in advance and bring it with you to your appointment to save time.

How long will the examination take?

Please allow at least one hour for all the administrative and medical tasks to be completed during your appointment.

How long will it take for the medical results to be released?

In most cases, the medical report will be ready within 5-10 working days after your appointment date. You will be asked to collect your completed Form I-693 with the results in a sealed envelope to present to your lawyer or the INS. **Do not open the sealed envelope.**

Other Frequently Asked Questions**Do I need to come in fasting for the blood test?**

No, there is no need to fast before your appointment

What happens if I do not have any immunization records?

If you do not have your vaccination records, the doctor will advise you on the vaccines that are necessary to complete the process, depending on your age and as described separately. You can also do MMR titers through blood work to check on your immunity.

Do you accept my medical insurance to cover the medical examination fees?

Unfortunately the medical examination conducted for an immigrant visa application is not covered by medical insurances. We will submit some tests such as **Quantiferon and the MMR titers** to your insurance when possible. Please check with your insurance if they cover you for certain blood work as per the attached fee schedule.

Can I use the results of a recent medical examination from another practice at the time of my immigrant visa examination?

Regretfully not. Only a medical examination conducted by a Civil Surgeon and for the purpose of your immigrant visa is acceptable.

REMEMBER: Please allow 5-10 working days for the results and paperwork to be prepared. You will then be asked to collect your completed Form I-693 with the results in a sealed envelope to give to your lawyer or the INS. **Do not open the sealed envelope.**

Thank you for choosing Manhattan Family Practice and we look forward to helping you with this important step in the immigration process.

If you have further questions please do not hesitate to call us on 212 288 7193

MANHATTAN FAMILY PRACTICE
Albert Levy, M.D., FAAFP

FEE SCHEDULE
FOR US IMMIGRATION EXAMINATION

Physical Examination as of November 1st, 2025

(includes some blood & urine tests and ALL administrative fees)

\$350.00

If duplicate I-693 form requested

\$75.00

(per person)

Quantiferon TB blood test (or sent to patient's insurance)*

\$ 95.00

Immunizations if needed and if age appropriate:

Influenza vaccine (required between Oct 1st - March 31st)

\$ 70.00

TDAP (tetanus)

\$ 90.00

MMR (Measles, Mumps and Rubella)**

\$120.00

Pneumococcal – Adult

\$150.00

Polio (IPV)

\$175.00

Varicella ***

\$200.00

Hepatitis B

\$130.00

Meningococcal MCV

\$130.00

***Check with your insurance if it covers the Quantiferon blood test –**

CPT code: 86480. You will be responsible to pay the laboratory bill if the charges are not covered by your particular insurance. Please call us if you have any questions on any laboratory bills you receive.

****Please provide proof of immunizations. If not available, you can either receive the vaccines here or do titers applicable through blood work to check on your immunity.**

Check your insurance for coverage of this blood work with CPT codes: 86735, 86765, 86762, 86787

ALBERT LEVY, MD
MANHATTAN FAMILY PRACTICE IMMIGRATION
Patient Information Form

Last Name: _____ First Name: _____

Date of Birth: _____ - _____ - _____ Sex: Male / Female (circle)

Address: _____

City: _____ State: _____ Zip: _____

Marital Status: Single / Married / Divorced / Widowed

Email Address: _____ @ _____ . _____

Home Phone: (____)-____-____ Work Phone: (____)-____-____ ext: _____

Mobile Phone: (____)-____-____

EMERGENCY CONTACT

Name: _____ Primary Phone Number: (____)-____-____

Relationship to patient: _____

NOTICE OF PRIVACY PRACTICES ACKNOWLEDGMENT

We will not disclose your medical records to others without your consent or unless the law authorizes or compels us to do so. Our **Notice of Privacy Practices** describes in greater detail how your health information may be used and disclosed. (Copies are available at the reception.)

I understand that I am financially responsible for the payment of medical services received. I may be responsible for any balance not covered by my insurance and I hereby authorize Manhattan Family Practice to furnish any necessary medical or incidental information concerning my medical care and treatment to my insurance carriers.

SIGNED: _____ DATE: _____
(Parent or Guardian if patient is a minor)

Table 1: Vaccine Requirements According to Applicant Age for Civil Surgeons

Effective: March 11, 2025

Vaccines by applicant age	Birth–1 month	2–11 months	12 months–6 years	7–10 years	11–17 years	18–64 years	≥ 65 years
DTP/DTaP/DT	NO		YES		NO	YES	
Tdap/Td		NO		Sometimes*	Refer to ACIP Tdap/Td notes for adults without history of primary vaccination series		
Polio	NO		Refer to ACIP Poliovirus notes for adults without history of primary vaccination series				
Measles, Mumps, and Rubella		NO		YES, if born in 1957 or later			
Rotavirus***	NO	YES Six weeks to eight months		NO			
Hib	NO	YES 2 through 59 months old		NO			
Hepatitis A		NO		YES 12 months through 18 years old		NO	
Hepatitis B		YES, through 59 years old					NO
Meningococcal (MenACWY)		NO		YES 11 through 18 years old		NO	
Varicella		NO		YES			
Pneumococcal	NO	YES, 2 through 59 months old (Administer PCV)		NO		YES	
Influenza	NO, if less than six months old	YES, ≥6 months (Annually. See ACIP notes for more information)					

DTaP=pediatric formulation diphtheria and tetanus toxoids and pertussis vaccine; DTaP=pediatric formulation diphtheria and tetanus toxoids and acellular pertussis vaccine; diphtheria toxoids and acellular pertussis vaccine; Td=adult formulation tetanus and diphtheria toxoids; Tdap=adolescent and adult formulation tetanus and pertussis-containing vaccine; Catch-Up Guidance and other job aids on CDC's website for additional information; IPV=inactivated poliovirus vaccine (killed); Hib=*Haemophilus influenzae* type b conjugate vaccine; MenACWY=quadrivalent meningococcal conjugate vaccine; PCV=pneumococcal conjugate vaccine; PPV23=pneumococcal polysaccharide vaccine; ***Rotavirus vaccination should not be initiated for infants aged 15 weeks 0 days or older.

This table describes vaccine requirements for U.S. status adjustment applicants and does not include recommendations for other clinical purposes. See the Immunization Schedules on CDC's website for number and spacing of doses for required vaccines.

