



National Border Patrol Council

Local 2366 - Del Rio, Texas

Supplemental information for medical professionals

Note to employees – use this letter with your personal physician if you are ill and believe you got sick at work and the agency will not send you for medical treatment at the agency's expense.

To Whom It May Concern:

Border Patrol agents across the country are facing an elevated risk for contracting infectious diseases through their increased contact with populations from countries across the globe. From January through May 2019, approximately 492,302 immigrants have been arrested with 144,278 being arrested in the month of May alone, an amount not seen in well over a decade. Immigrants in record numbers continue to cross the southwest border, so the trend continues.

Immigrants have been discovered to be ill¹ in unprecedented numbers² and after being examined and treated in a hospital, some have been diagnosed with illnesses not frequently encountered in the United States, such as measles, mumps, tuberculosis, scabies, body lice, chicken pox, avian influenza, swine influenza, and other less-common illnesses, along with pneumonia, the common cold, influenza, strep throat, and other respiratory illnesses. Some Border Patrol stations have been quarantined because of flu outbreaks³ and the overcrowding and prolonged detention of immigrants “represent[s] an immediate risk to the health and safety of DHS agents and officers, and to those detained,” according to a DHS OIG report from July 2, 2019.⁴

As illness continues to break out in stations across the country, it is taking a toll on the agents⁵ who take immigrants into their custody and those who process them in the stations and processing centers. This has caused agents to take sick leave in record numbers, frequently resulting in them having to pay for medical care out of their own pocket because Customs and Border Protection does not have an adequate medical surveillance or treatment program in place. There exists a mechanism by which employees can get the Department of Labor (DOL) to cover these illnesses, but that requires an employee's personal physician to first evaluate and determine that the employee's illness is more likely than not to have been contracted at work as part of the employee's duties.

If you, as the employee's physician, believe the illness presented to you by your patient is likely to have been contracted at work, it would be incredibly beneficial to your patient if you would indicate this in your documentation and why you think your patient contracted the illness at work. Your patient will then have a better chance of getting reimbursed for medical care and having additional treatment covered by DOL's Office of Workers' Compensation Programs (OWCP). If you have additional questions about the conditions at work, your patient will surely be able to expand on the ever-increasing number of sick immigrants in our custody and agents at work.

To assist with your patient's ability to submit a claim to OWCP for reimbursement, your medical report will need to contain the following information, in accordance with 20 CFR 10.330:

- 1) Dates of examination and treatment;
- 2) History given by the employee;
- 3) Physical findings;
- 4) Results of diagnostic tests;
- 5) Diagnosis;
- 6) Course of treatment;
- 7) A description of any other conditions found but not due to the claimed injury;
- 8) Treatment given or recommended for claimed injury;
- 9) The physician's opinion, with medical reasons, as to causal relationship between the diagnosed condition(s) and the factors or conditions of the employment;
- 10) The extent of disability affecting the employee's ability to work due to the injury;
- 11) The prognosis for recovery; and
- 12) All other material finding.

¹ Trump says Congress needs to get off their 'a—' <http://bit.ly/MedRef1>

² Mumps, other outbreaks force U.S. detention centers to quarantine over 2,000 migrants <http://bit.ly/MedRef2>

³ Border Patrol quarantines migrants at McAllen facility amid flu outbreak <http://bit.ly/MedRef3>

⁴ DHS Needs to Address Dangerous Overcrowding & Prolonged Detention of Children and Adults in RGV <http://bit.ly/MedRef4> (PDF)

⁵ Border Patrol agents fall prey to illnesses plaguing migrant holding centers <http://bit.ly/MedRef5>