

## EXHIBIT 60

Excerpts from the March 8, 2019  
Deposition of Donald Shell

IN THE UNITED STATES DISTRICT COURT  
FOR THE EASTERN DISTRICT OF VIRGINIA  
ALEXANDRIA DIVISION

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5 NICHOLAS HARRISON and :  
6 OUTSERVE-SLDN, INC., :  
7 Plaintiffs, :  
8 vs. : No. 1:18-cv-00641  
9 JAMES N. MATTIS, In His : LMB-IDD  
10 Official Capacity As Secretary:  
11 of Defense; MARK ESPER, In His:  
12 Official Capacity As the :  
13 Secretary of the Army; and the:  
14 UNITED STATES DEPARTMENT OF :  
15 DEFENSE, :  
16 Defendants. :

17 - - - - - x  
18 RICHARD ROE, VICTOR VOE, and :  
19 and OUTSERVE-SLDN, INC., :  
20 Plaintiffs, :  
21 vs. : No. 1:18-cv-01565  
22 JAMES N. MATTIS, In His :  
23 Official Capacity As Secretary:  
24 of Defense; HEATHER A. WILSON, :  
25 In Her Official Capacity as :  
Secretary of the AIR FORCE; :  
and the UNITED STATES :  
DEPARTMENT OF DEFENSE, :  
Defendants. :

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VIDEOTAPED 30(b)(6) DEPOSITION OF THE  
DEPARTMENT OF DEFENSE GIVEN BY DONALD SHELL  
DATE: Friday, March 8, 2019  
TIME: 9:41 a.m.  
LOCATION: Winston & Strawn  
1700 K Street, N.W.  
Washington, D.C.

1 THE WITNESS: Yes.

2 BY MR. SCHOETTES:

3 Q All right. We're going to mark the next  
4 exhibit, Exhibit 4.

5 (Shell Deposition Exhibit Number 4 was  
6 marked for identification.)

7 BY MR. SCHOETTES:

8 Q Do you recognize this document?

9 A Yes.

10 Q And what is this document?

11 A Department of Defense personnel policies  
12 regarding members of the Armed Forces infected  
13 with human immunodeficiency virus: Report to the  
14 Committees on the Armed Services of the Senate and  
15 House of Representatives, August 2018.

16 Q Did you personally assist in the creation  
17 of this document?

18 A Yes.

19 Q Which office was tasked with putting this  
20 report together?

21 A The Office of the Assistant Secretary of  
22 Defense for Health Affairs.

23 Q Who from within that office was  
24 responsible for putting the -- this 2018 report  
25 together?

1 MR. NORWAY: Objection. Form.

2 You may answer.

3 THE WITNESS: I was.

4 BY MR. SCHOETTES:

5 Q Did Tom McCaffrey have any role in  
6 putting this report together?

7 MR. NORWAY: You may answer.

8 THE WITNESS: It would be dependent on  
9 the dates that the report was published and when  
10 Mr. McCaffrey began his tenure as the Acting  
11 Assistant Secretary of Defense. So I would  
12 imagine, since the report was made final in August  
13 of 2018, Mr. McCaffrey was in that role at that  
14 time.

15 BY MR. SCHOETTES:

16 Q So if he was in the role in April of  
17 2018, would this have been -- this report have  
18 been his responsibility?

19 MR. NORWAY: Objection. Form.

20 Objection. Foundation.

21 You may answer.

22 THE WITNESS: Yes.

23 BY MR. SCHOETTES:

24 Q And were you his point of contact for  
25 putting this report together?

1           A       Through the Deputy Assistant Secretary of  
2 Defense for Health Service Policy and Oversight,  
3 yes.

4           Q       What did you do as the person responsible  
5 for pulling this report together?

6           MR. NORWAY:   Scott, are you asking -- are  
7 you asking for what he -- what duties he  
8 performed? I guess I'm confused by your  
9 question -- your use of "you" there in your  
10 question.

11           MR. SCHOETTES:   I'm sorry. Yes, I'm  
12 asking what role Dr. Shell played in putting this  
13 report together for Congress.

14           MR. NORWAY:   Objection.  
15 You can answer.

16           THE WITNESS:   As it states in the data  
17 collection section -- in the last sentence it  
18 says, "Service-level information was obtained from  
19 each of the military departments at the request of  
20 the Office of the Assistant Secretary of Defense  
21 for Health Affairs. So my role was to prepare the  
22 documentation to request the information from the  
23 services, to then receive the information from the  
24 services, and then to compile that information  
25 into the report and then to draft the report and

1 then to shepherd the processing for the approval  
2 of the report.

3 BY MR. SCHOETTES:

4 Q Was it your job to assess whether the  
5 policies reflected an evidence-based, medically  
6 accurate understanding of HIV?

7 MR. NORWAY: Objection. Form.

8 You may answer.

9 THE WITNESS: In which -- what do you  
10 mean by assess and in which policies?

11 BY MR. SCHOETTES:

12 Q If you'll look to page 1 of the document,  
13 it explains that the Committee on Armed Services  
14 of the Senate and House of representatives -- the  
15 committees -- requested that DOD provide the  
16 following in its report. So there is a  
17 description of the policies addressing the  
18 enlistment or commissioning, retention,  
19 deployment, discharge and disciplinary policies  
20 regarding individuals with this condition.

21 Correct?

22 A Yes.

23 Q An update on the status of the Department  
24 of the Army's HIV policy which was under review  
25 during the issuance of a 2014 report, right?

1 MR. NORWAY: Objection. Form.

2 You may answer.

3 THE WITNESS: Yes.

4 BY MR. SCHOETTES:

5 Q And then the third thing was an  
6 assessment of these policies, with reference to  
7 medical experts and literature, which includes how  
8 the policies reflect an evidence-based, medically  
9 accurate understanding of how this condition is  
10 contracted, how this condition can be transmitted  
11 to other individuals, the risk of transmission,  
12 and treatment regimens available.

13 I'm asking if you were responsible for  
14 creating the assessment described there?

15 MR. NORWAY: Objection. Form.

16 You may answer.

17 THE WITNESS: Not individually  
18 responsible by myself, no.

19 BY MR. SCHOETTES:

20 Q So you were partly responsible?

21 MR. NORWAY: Objection. Form.

22 You can answer.

23 THE WITNESS: I'm responsible for  
24 reviewing the information provided by the  
25 services, reviewing scientific literature,

1 conferring with infectious disease subject matter  
2 experts, and then collectively assuring that an  
3 assessment of these policies was made.

4 BY MR. SCHOETTES:

5 Q So reviewing, you said, the literature?

6 MR. NORWAY: Objection. Form.

7 You may answer.

8 THE WITNESS: Yes.

9 BY MR. SCHOETTES:

10 Q Reviewing the information provided by the  
11 services?

12 MR. NORWAY: Objection. Form.

13 You may answer.

14 THE WITNESS: Yes.

15 BY MR. SCHOETTES:

16 Q And consulting with subject matter  
17 experts regarding the topic?

18 MR. NORWAY: Objection. Form.

19 You may answer.

20 THE WITNESS: Yes.

21 BY MR. SCHOETTES:

22 Q So then who collectively, as you  
23 described, conducted the assessment?

24 MR. NORWAY: Objection. Form.

25 You may answer.



1 THE WITNESS: It would have been myself,  
2 in my role as the -- in my role in health service  
3 policy oversight and health affairs, those  
4 service-identified subject matter experts,  
5 together, and the term -- so, yes.

6 But I would ask, when you -- what is your  
7 understanding of the word -- how are you using the  
8 word "assessment"? I can tell you how we use the  
9 word "assessment."

10 BY MR. SCHOETTES:

11 Q Well, so -- yes, I want to know -- I  
12 guess I would put that question back on you. How  
13 is "assessment" used in this report?

14 A Determining, reviewing, evaluating. But  
15 it's not a formal separate -- I'm not a grammar  
16 person, but I guess the -- if you say make an  
17 assessment of, it's an evaluation of.

18 So I'd just -- simply, I'd say an  
19 evaluation of and a determination made. But not  
20 a -- not a -- providing a specific type of  
21 assessment.

22 Assessments can also be -- like -- I'm  
23 hesitating because assessments -- there are  
24 specific types of assessments. There are mental  
25 status assessments. There are different specific

1 potential similarities, but there's no one host  
2 nation requirement. But I attempted to, on my  
3 own, to be able to understand what those  
4 requirements were.

5 Q So after you submitted the 2018 report to  
6 Congress, you investigated what the host nation  
7 requirements were that might affect or -- might  
8 affect an individual's ability to deploy to a  
9 foreign nation?

10 MR. NORWAY: Objection. Form.

11 You may answer.

12 THE WITNESS: The host nation  
13 requirements that are publicly facing or publicly  
14 available address requirements for entering into a  
15 nation, may or may not address whether or not a --  
16 if they are relevant for a service member.

17 So I cannot state uniformly that all of  
18 the host nation requirements for entry for someone  
19 who is HIV-positive specifically addresses that  
20 which is available or required for someone who is  
21 HIV-positive.

22 BY MR. SCHOETTES:

23 Q But my question was, did you begin  
24 investigating the host nation requirements that  
25 may affect the deployment of a service member

1 living with HIV to a foreign nation after  
2 submission of the 2018 report to Congress?

3 MR. NORWAY: You may answer.

4 THE WITNESS: Yes. And in that  
5 self-discovery or study, then I was only able to  
6 access publicly-facing information, information  
7 that's available to the general public. I do not  
8 have access to United States or other nations'  
9 military documents that may speak directly to that  
10 point, but I was able to evaluate and look at the  
11 requirements that is -- that are posted on country  
12 sites, State Department sites, and to evaluate  
13 that information on my own study to understand  
14 host nation requirements.

15 But that does not reflect what  
16 information is available to the Department of  
17 Defense.

18 BY MR. SCHOETTES:

19 Q Why did you engage in that research on  
20 your own after submission of the report?

21 MR. NORWAY: You may answer.

22 THE WITNESS: Wanted to better understand  
23 that aspect of the criteria and what potentially  
24 is involved in that aspect of a decision that they  
25 make. I'm not in the COCOMs, I'm not in joint

1 deposition that you engaged in that research?

2 MR. NORWAY: Objection. Form.

3 You may answer.

4 THE WITNESS: Yes, it was before.

5 BY MR. SCHOETTES:

6 Q What made you include -- why was the  
7 discussion of SOFAs or host nation requirements  
8 included in the 2018 report?

9 MR. NORWAY: You may answer.

10 THE WITNESS: It is one of the factors  
11 that a combatant commander utilizes to determine  
12 the area in which service members with HIV are  
13 able to deploy.

14 BY MR. SCHOETTES:

15 Q And where did you learn that that was one  
16 of the factors?

17 MR. NORWAY: You may respond.

18 BY MR. SCHOETTES:

19 Q Or from who?

20 MR. NORWAY: Objection. Form.

21 THE WITNESS: I need to look back at the  
22 document to tell you specifically where that is  
23 included in the criteria to tell you exactly  
24 whether or not that was -- I may have come across  
25 it in the general performance of my position and

1 MR. SCHOETTES: Okay.

2 MR. NORWAY: Or we can go to redirect  
3 now.

4 MR. SCHOETTES: Well, I'm just trying to  
5 figure out --

6 MR. NORWAY: Because we -- I mean, how  
7 many -- Solomon, how long have we been on the  
8 record?

9 THE VIDEOGRAPHER: Six hours, nine  
10 minutes, 41 seconds.

11 MR. SCHOETTES: I have some more  
12 questions. I guess we'll come back to this. I'll  
13 hand you what we're marking as Exhibit 14.

14 (Shell Deposition Exhibit Number 14 was  
15 marked for identification.)

16 BY MR. SCHOETTES:

17 Q Do you recognize this document?

18 A Yes.

19 Q What is it?

20 A This is a summary of my notes of my quest  
21 to understand host nation requirements, and  
22 particularly restrictions of in and out -- travel  
23 in and out of countries related to HIV in foreign  
24 nations. So these are my notes from the study --  
25 from my inquiry into the topic.

1 Q And when you say your notes, did you  
2 create this spreadsheet or -- I'll just stop  
3 there. Did you create this spreadsheet?

4 A Yes.

5 Q This spreadsheet can't be found on the  
6 State Department website?

7 A No. There was no spreadsheet, so we  
8 created it. I had a spreadsheet created because I  
9 wanted to better understand the information  
10 myself. So this information is from my work in my  
11 office.

12 Q And from where did you obtain the  
13 information that you populated this spreadsheet?

14 A Publicly-facing information available on  
15 the websites for State Department of different  
16 countries.

17 Q And when did you start putting this  
18 document together?

19 MR. NORWAY: You may respond.

20 THE WITNESS: This began in October,  
21 maybe. October 2018.

22 BY MR. SCHOETTES:

23 Q How long after -- scratch that.

24 And you said that was in response to your  
25 curiosity after submitting the 2018 report to

1 entering Afghanistan?

2 A So this, from my notes -- it says on here  
3 this is table X: HIV restrictions in foreign  
4 nations. It says on here for Afghanistan that --  
5 it says no restriction, combatant command, central  
6 command.

7 Q So let me go back first and actually ask  
8 you -- it says at the top, "The table below  
9 provides an overview of the various restrictions  
10 involved with attempting to gain residency or a  
11 work visa as an HIV-positive individual in a  
12 foreign country," correct?

13 A Yes. That's what it says.

14 Q So this table does not summarize host  
15 nation requirements or restrictions with respect  
16 to HIV-positive service members specifically,  
17 correct?

18 MR. NORWAY: Objection.

19 You may answer.

20 THE WITNESS: Yes. This is not  
21 applicable to service members. This is just in  
22 general what information is available from each  
23 nation regarding entry, work visa, or someone  
24 HIV-positive entering into that country.

25 BY MR. SCHOETTES:

1 Here it indicates that there is no HIV test  
2 required for a short-term tourist visa for an  
3 individual living with HIV; is that correct?

4 A That's correct. It also says "not  
5 allowed" for Syria.

6 Q So let's go on and explore why, so -- why  
7 it says "not allowed" in your notes. It says  
8 that, "Foreigners applying information residency  
9 in order to work or to study in Syria have to  
10 undergo HIV testing," correct?

11 A Yes.

12 Q Do you know if that applies to  
13 individuals in the military services?

14 A No, I don't. And just -- in the notes,  
15 it's "very likely that foreigners diagnosed with  
16 HIV will be expelled," but this is specific to  
17 residency work visas.

18 Q Right. So -- and you then see where it  
19 says, "Diplomats are exempt"?

20 A Yes, I see that.

21 Q So can we deduce that if there are  
22 individuals employed by the State Department in  
23 Syria, that they are not subjected to the HIV  
24 testing requirements?

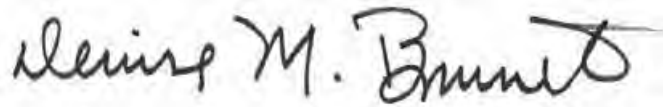
25 A I think the State Department would tell



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CERTIFICATE OF NOTARY PUBLIC

I, Denise M. Brunet, the officer before whom the foregoing deposition was taken, do hereby certify that the witness whose testimony appears in the foregoing deposition was sworn by me; that the testimony of said witness was taken by me stenographically and thereafter reduced to print by means of computer-assisted transcription by me to the best of my ability; that I am neither counsel for, related to, nor employed by any of the parties to this litigation and have no interest, financial or otherwise, in the outcome of this matter.



Denise M. Brunet  
Notary Public in and for  
The District of Columbia

My commission expires:  
December 14, 2022

## Exhibit 14 to Deposition of Donald Shell

### Table X: HIV Restrictions in Foreign Nations

## Table X: HIV Restrictions in Foreign Nations

The table below provides an overview of the various restrictions involved with attempting to gain residency or a work visa as an HIV positive individual in a foreign country. The Middle East, North Africa, and Eastern European regions have the most restrictions for HIV positive individuals. The majority of the information was collected from hivtravel.org, which cites as it's resources an aggregation of information from the United States Department of State, German Embassies, UNAIDS, and Foreign Affairs and International Trade Canada. The information was validated against additional research, including information from the US State Department. In instances where policy was undefined or in flux, or contradictory reports were identified, the country was marked as "Unclear," and an explanation was provided in the notes.

**Restrictions were categorized into:**

- (1) Not Allowed - HIV positive individuals are not allowed permanent residency in these countries
- (2) Unclear - Restrictions in these countries are difficult to define due to loosely defined policy or contradictory reports
- (3) Special Consideration - HIV positive individuals undergo unique evaluation before being admitted
- (4) Evaluation - A medical evaluation of the HIV positive individual is conducted before admittance
- (5) No Restrictions - There are no restrictions for HIV positive individuals

Country	Restriction	Notes/Overview	Combatant Command
Afghanistan	No Restriction		Central Command
Albania	No Restriction		European Command
Algeria	No Restriction		Africa Command
Andorra	No Restriction		European Command
Angola	Unclear	It is reported that a medical check-up requirement for work visa applicants ("Visto de Trabalho"); authorised under Law 2/07 and Presidential Decree 108. According to the International Organisation of Migration (IOM), the check-up does not require HIV testing. However, the Embassy of Angola in Serbia web site indicates the contrary.	Africa Command
Antigua and Barbuda	No Restriction		Southern Command
Argentina	No Restriction		Southern Command
Armenia	Special Consideration	Antiretroviral medications can be imported for personal use and for the duration of the planned stay (up to six weeks). A medical certificate including the diagnosis in Russian or Armenian language has to be presented at customs. No information on residency.	European Command

EXHIBIT  
 Shell 14  
 38-198MB  
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Aruba	Not Allowed	<p>The Government of Aruba, albeit part of the Kingdom of the Netherlands, does not provide a working permit to people living with HIV. And for living in Aruba, one needs a working and residency permit. Even marital status would not change this.</p>	Southern Command
Australia	Evaluation	<p>HIV testing for permanent visa applicants remains in force. People living with HIV are treated similarly to other people with chronic health conditions and disabilities during the country's immigration health assessment process. Applications for visas from people living with HIV will be assessed against criteria applying to anyone with a chronic health condition.</p> <p>Applicants for visas to visit or migrate to Australia are required to meet certain health requirements. These help ensure that:</p> <ul style="list-style-type: none"> <li>-Risks to public health in the Australian community are minimized</li> <li>-Public expenditure on health and community services is contained</li> <li>-Australian residents have access to health and other community services in short supply.</li> </ul>	Indo-Pacific Command
Austria	No Restriction		European Command
Azerbaijan	Not Allowed	<p>People applying for an electronic visa through the official electronic visa portal are required to confirm they are HIV-negative and free from hepatitis B and C. Without this confirmation, applicants are not able to receive a visa.</p>	European Command
Bahamas	No Restriction		Northern Command
Bahrain	Not Allowed	<p>All foreigners declared HIV positive risk immediate deportation; deportation may be applied to all "communicable diseases." Although an individual is not required to declare HIV status upon arrival, the government revokes visas of non-Bahrainis who are HIV positive. [Note: Information should be verified with the Embassy of the Kingdom of Bahrain before travelling]</p>	Central Command

Bangladesh	Unclear	There are no specific entry regulations for people with HIV/AIDS in Bangladesh (information provided by the Embassy's Attorney of confidence). Neither a medical certificate nor an HIV test result is requested. This also applies to long-term residents. It is possible however, that foreigners with HIV/AIDS are deported if the competent authorities find out about their condition.	Indo-Pacific Command
Barbados	No Restriction		Southern Command
Belarus	Special Consideration	The U.S. Department of State is unaware of any HIV/AIDS entry restrictions for visitors to Belarus on a 30-day visit. Long-term residents (those spending more than 90 days a year in Belarus) or students must obtain an HIV/AIDS test in Belarus and submit the results to the Department of Citizenship and Migration when applying for an extension of stay or residency. We recommend that you verify this information with the Embassy of Belarus before you travel.	European Command
Belgium	Special Consideration	A health certificate stating absence of a transmittable disease that would present a danger for public health is required from non-EU residency permit applicants. A residency permit can be granted regardless of HIV infection. The following conditions can be grounds for denying such a permit: <ul style="list-style-type: none"> <li>-Illnesses that require the patient to be under quarantine (as defined by WHO guidelines from May 25, 1951).</li> <li>-Active tuberculosis</li> <li>-Syphilis</li> <li>-Transmittable infectious conditions or contagious parasitic diseases</li> </ul>	European Command
Belize	No Restriction		Southern Command

Country	Special Consideration	Command
Benin	An HIV test is required when applying for a long-term residence permit. In case of a positive test result, law does not forbid the grant of a long-term residence permit. The permit is granted at the discretion of the officer dealing with the application. There are no specific residence regulations regarding people with HIV/AIDS. The Embassy can't judge how the problem is handled in practice. Nothing has been heard about controls, deportations or expulsions. It is possible that residence permits won't be extended in the case of a positive test result.	Africa Command
Bermuda	Unclear	Northern Command
Bhutan	Unclear	Indo-Pacific Command
Bolivia	No Restriction	Southern Command
Bosnia Herzegovina	No Restriction (except for one province)	European Command
Botswana	No Restriction	Africa Command
Brazil	No Restriction	Southern Command

Brunei	Not Allowed	People who wish to work or study in Brunei need a work and residence permit. On application for these permits, people must undergo a health examination in their country of origin and again within two weeks of entering Brunei. This health check includes HIV testing. No medical certificate has to be presented when entering the country. Local authorities will deport HIV-positive foreigners to their native country. A person's residence permit will be cancelled if HIV is detected.	Indo-Pacific Command
Bulgaria	No Restriction		European Command
Burkina Faso	No Restriction		Africa Command
Burundi	No Restriction		Africa Command
Cabo Verde	No Restriction		Africa Command
Cambodia	No Restriction		Indo-Pacific Command
Cameroon	No Restriction		Africa Command
Canada	Special Consideration	Under the Immigration and Refugee Protection Act ("IRPA"), foreign nationals are inadmissible as permanent immigrants to Canada if their health condition might reasonably be expected to cause an "excessive demand" on health or social services, or if their application to immigrate includes a family member in this situation. Due to the high cost of antiretroviral medications, people living with HIV are generally deemed medically inadmissible if they apply to immigrate to Canada. Today's proposed changes include increasing the cost threshold for defining what constitutes "excessive demand," to three times the current level of \$6,655 per year. This increase to the cost threshold may mean that many people living with HIV will no longer be found medically inadmissible and excluded from immigration to Canada.	Northern Command
Cayman Islands	Unclear	Although there are no specific HIV/AIDS entry restrictions for visitors to the Cayman Islands, people living with HIV/AIDS can be denied permission to land if a Health Officer certifies that their entry to the Islands would be dangerous to the community. This is according to Section 82 (c) of the Cayman Immigration Law (2007 Revision).	Southern Command
Central African Republic	No Restriction		Africa Command

Chad	No Restriction		Africa Command
Chile	No Restriction		Southern Command
China	Unclear	In case of a long-term professional stay in China (longer than six months): Check the situation carefully. Until recently, a negative HIV status was mandatory for foreigners staying in China on long-term permits. Tests have also been performed in China and without consent of those concerned. A positive HIV test result led to immediate deportation, job loss and unemployment.	Indo-Pacific Command
Colombia	No Restriction		Southern Command
Comores	No Restriction		Africa Command
Congo (Brazzaville)	No Restriction		Africa Command
Congo (Kinshasa)	No Restriction		Africa Command
Costa Rica	No Restriction		Southern Command
Cote D'Ivoire	No Restriction		Africa Command
Croatia	No Restriction		European Command
Cuba	Not Allowed	There are no restrictions for people with HIV/AIDS for short-term stays of up to three months (tourist visa). An HIV test is mandatory for longer stays. An HIV test result must be presented upon application for a long-term visa. There are no controls at the border. The extension of a residency permit requires a negative HIV test result. There is no information about the consequences for a person entering the country who is detected to be HIV positive. Antiretroviral medication for non-residents can be carried along.	Southern Command
Cyprus	Not Allowed	Foreigners (non-EU citizens only) applying for a residence permit in order to work or to study must undergo a medical examination by the Health Ministry in order to exclude an infection with HIV, hepatitis B/C or syphilis. The authorities will not grant a residence permit in the case of a positive test result. For all other foreigners (EU citizens, tourists, employees of international companies, UN staff), there are no mandatory medical examinations.	European Command
Czech Republic	No Restriction		European Command
Denmark	No Restriction		European Command
Djibouti	No Restriction		Africa Command



Dominican Republic	Not Allowed	Medical checks are mandatory for people applying for work or residence permits. Residency is restricted for people with infectious diseases. A positive HIV test will result in denial of a residence permit. The same happens if a person refuses to get tested.	Southern Command
Ecuador	Not Allowed	For people applying for student permits, work permits and voluntary, missionary or religious visas, a doctor's certificate and an HIV test is required. Applicants must be free of communicable diseases.	Southern Command
Egypt	Not Allowed	An HIV test has to be performed at the Health Ministry's central laboratory for all people who apply for a residence or work permit (students, foreign employees, immigrants). Tests performed abroad are not recognized. Foreigners diagnosed with HIV while in the country are expelled. The regulations are based on a Ministerial Decree.	Central Command
El Salvador	No Restriction		Southern Command
Equatorial Guinea	Unclear	You may have to present an HIV test certificate, and HIV-positive status could lead to refusal of entry or deportation. The U.S. Department of State is unaware of any HIV/AIDS entry restrictions for visitors to or foreign residents of Equatorial Guinea. However, the Government of Equatorial Guinea is starting to require medical documentation, including the determination of the HIV status of third country nationals who are renewing or obtaining residency in Equatorial Guinea.	Africa Command
Eritrea	Unclear	Some HIV/AIDS entry restrictions exist for visitors to and foreign residents of Eritrea. Please verify this information with the Embassy of Eritrea before you travel.	Africa Command
Estonia	No Restriction		European Command
Ethiopia	No Restriction		Africa Command
Fiji	No Restriction		Indo-Pacific Command
Finland	No Restriction		European Command
France	No Restriction		European Command
Gabon	No Restriction		Africa Command
Gambia	No Restriction		Africa Command
Georgia	No Restriction		European Command
Germany	No Restriction		European Command

Ghana	No Restriction		Africa Command
Greece	No Restriction		European Command
Grenada	No Restriction		Southern Command
Guatemala	No Restriction		Southern Command
Guinea	No Restriction		Africa Command
Guinea Bissao	Unclear	The visa application form may include questions relating to infectious diseases. There is no information on whether foreigners with a known HIV infection are subject to specific residence regulations or whether there are regulations regarding the control, deportation or expulsion of those concerned.	Africa Command
Guyana	No Restriction		Southern Command
Haiti	No Restriction		Southern Command
Honduras	Evaluation	Work permit applicants must provide a medical certificate that has been issued within the six months prior to the application, indicating that the applicant does not suffer from any infectious or contagious disease. This medical certificate must be issued by a doctor in Honduras.	Southern Command
Hong Kong	No Restriction		Indo-Pacific Command
Hungary	Special Consideration	There are no laws or regulations that would formally ban people living with HIV from applying for, and receiving, long-term or permanent residency. The only requirement is that a person living with HIV has a valid social security/health insurance account with the state insurance fund. This can be done even without formal employment as long as the person pays a certain fee to the insurance fund each month. No HIV test is required for a person who seeks residency in Hungary. However, they must undergo treatment in order not to be expelled. If the person refuses to be treated for his/her HIV, then they may be expelled from the country.	European Command
Iceland	No Restriction		European Command
India	No Restriction		Indo-Pacific Command
Indonesia	No Restriction	The Indonesian Government screens incoming passengers in response to reported outbreaks of pandemic illnesses.	Indo-Pacific Command

Iran	Not Allowed	Foreigners applying for a work and residence permit, or who wish to stay for more than three months, must present a health certificate with a negative HIV test result. Exceptions are holders of diplomatic, service or special passports, and tourists and businessmen staying for less than three months.	Central Command
Iraq	Not Allowed	All foreigners are required to be tested for HIV at a state laboratory within 10 days of entry into Iraq. All stays beyond 10 days require an HIV test. Diplomats are excluded from these regulations.	Central Command
Ireland	No Restriction		European Command
Israel	Not Allowed	Work permit applicants are required to present a medical certificate of medical examinations and blood tests performed in clinics or hospitals recognized by the Israeli diplomatic post in the country of application. The certificate must cover, <i>inter alia</i> , results of tests for tuberculosis, hepatitis and HIV.	European Command
Italy	No Restriction		European Command
Jamaica	No Restriction		Southern Command
Japan	No Restriction		Indo-Pacific Command
Jordan	Not Allowed	You must undergo medical exams to obtain a residency permit. This includes mandatory testing for tuberculosis, HIV and hepatitis C. A positive HIV test leads to deportation.	Central Command
Kazakhstan	Not Allowed	Visitors applying for a work or residency permit, which is required for US citizens who wish to spend more than six months in Kazakhstan, must submit negative HIV test results with their application to the Migration Police in the city where they intend to work or reside. The results must be less than three months old.	Central Command
Kenya	Not Allowed		Africa Command
Kiribati	Unclear	No information provided.	Indo-Pacific Command
Korea (North)	Not Allowed	If a person's HIV-positive status becomes known, he/she is sent back to his/her country of origin. The reason given for this is the lack of experience with HIV/AIDS and the lack of treatment options.	Indo-Pacific Command
Korea (South)	No Restriction		Indo-Pacific Command

Kosovo	No Restriction			European Command
Kuwait	Not Allowed		If an HIV infection or HIV-related illness becomes known, the residence permit is withdrawn. The affected person has to leave Kuwait, or else is deported. Health checks at the border are not yet in effect, but the implementation of these is currently being discussed by Kuwaiti officials.	Central Command
Kyrgyzstan	Unclear		Some HIV/AIDS restrictions exist for visitors and residents in the Kyrgyz Republic. An HIV test is required to apply for a work visa. It is recommended to contact the Embassy for the Kyrgyz Republic before you travel.	Central Command
Laos	No Restriction			Indo-Pacific Command
Latvia	No Restriction			European Command
Lebanon	Not Allowed		In accordance with Lebanese labour laws, all new migrants are required to submit negative HIV and STD lab test results along with their application for a work permit. Migrant workers testing HIV positive are deported and, in accordance with the law, repatriation costs are borne by the recruitment agency. As of 2007, however, in such cases, foreigners are given access to ARV treatment prior to deportation.	Central Command
Lesotho	No Restriction			Africa Command
Liberia	No Restriction			Africa Command
Libya	No Restriction		Some HIV/AIDS entry restrictions exist for visitors to and foreign residents of Libya. Please verify this information with the Libyan Embassy before traveling.	Africa Command
Lichtenstein	No Restriction			European Command
Lithuania	No Restriction		HIV/AIDS are not a condition considered to be a threat to public health in Lithuania. HIV positive people are advised not to indicate that they have a public health threatening disease while filling in applications for residency in order to circumvent possible problems.	European Command
Luxembourg	No Restriction			European Command
Macedonia	No Restriction			European Command
Madagascar	No Restriction			Africa Command
Malawi	No Restriction			Africa Command

Malaysia	Not Allowed	A full medical check-up (HIV, hepatitis, diagnostic reference levels, drug abuse and pregnancy) is required within one month of arrival and on a yearly basis. Special provisions for migrant workers (domestic staff and low skill workers) stipulate denial of permission to enter, or expulsion, if the HIV test result is positive.	Indo-Pacific Command
Maldives	No Restriction		Indo-Pacific Command
Mali	No Restriction		Africa Command
Malta	No Restriction		European Command
Marshall Islands	Not Allowed	Some HIV entry restrictions exist for visitors to and foreign residents of the Marshall Islands. HIV testing is required for temporary visitors staying more than 30 days and applicants for residence and work permits.	Indo-Pacific Command
Mauritania	No Restriction		Africa Command
Mauritius	Not Allowed	Migrant workers have to submit results of their HIV test for employment. No employment in case the test result is positive.	Africa Command
Mexico	No Restriction		Northern Command
Micronesia	No Restriction	The U.S. Department of State is unaware of any HIV/AIDS entry restrictions for visitors to or foreign residents of the Federated States of Micronesia. No restrictions for Pohnpei State. Status of other States in Micronesia is unknown (each State has its own border control policies and regulations).	Indo-Pacific Command
Moldova	No Restriction		European Command
Monaco	No Restriction		European Command
Mongolia	No Restriction		Indo-Pacific Command
Montenegro	No Restriction		European Command
Montserrat	Unclear	Some HIV/AIDS entry restrictions may exist. Please contact the British Embassy before you travel.	Southern Command
Morocco	No Restriction		Africa Command
Mozambique	No Restriction		Africa Command
Myanmar (Burma)	No Restriction		Indo-Pacific Command
Namibia	No Restriction		Africa Command

Nauru	No Restriction	The Ministry of Health of Nauru is currently considering whether to put restrictions in place. Please inquire directly with Republic of Nauru Permanent Mission to the United Nations in New York.	Indo-Pacific Command
Nepal	No Restriction	Residence regulations for people with HIV/AIDS: Foreigners are requested to have sufficient financial resources, a health insurance and a passport. These conditions don't apply in the case of an emergency (For example if the person in question would quickly die without treatment). This policy is compatible with Article 3 of the European Human Rights Convention.	Indo-Pacific Command
Netherlands	No Restriction		European Command
New Zealand	Special Consideration	While HIV-positive people may not, prima facie, meet the definition of "acceptable standard of health", waivers of this requirement will be available for family members of New Zealand citizens and residents, and for refugees if they fulfil the criteria set by Immigration New Zealand. Applicants of temporary visas are not in general eligible for a medical waiver unless they fulfil some specific criteria. 20 HIV-positive people per year are accepted as quota refugees.	Indo-Pacific Command
Nicaragua	Special Consideration	According to the immigration authorities, extended residency will only exceptionally be granted to HIV-positive people. For example, it will be granted to people who participate in the rehabilitation programme for drug users offered by organizations established in Nicaragua (such as Patriarca)	Southern Command
Niger	No Restriction		Africa Command
Nigeria	Unclear	Some HIV/AIDS entry restrictions exist for visitors to and foreign residents of Nigeria. Nigerian authorities have the discretion to deny entry to foreigners who are "undesirable for medical reasons" and may require HIV tests for foreigners marrying Nigerian citizens. Please verify this information with the Embassy of Nigeria before you travel.	Africa Command

Norway	No Restriction	Foreigners with a known HIV infection are not subject to specific residence regulations. Persons who stay in Norway for longer than 3 months are offered a tuberculosis test and an HIV test, in order to arrange for any necessary treatment as quickly as possible.	European Command
Oman	Not Allowed	All long-term visa applications (employment, residence, etc.) require a medical exam, including an HIV test. Persons testing HIV positive are expelled.	Central Command
Pakistan	No Restriction		Central Command
Panama	No Restriction	The authorities still require a "certificate of good health" from people intending to stay in Panama for more than three months. This certificate can be issued to a person living with HIV.	Southern Command
Papua New Guinea	Not Allowed	The Government of Papua New Guinea imposes HIV/AIDS entry restrictions for visitors and foreign residents. If you request residency or intend to remain long term in Papua New Guinea, you are required to have an HIV test performed at a US medical facility.	Indo-Pacific Command
Paraguay	Special Consideration	Anyone applying for permanent residency in Paraguay is required to undergo HIV testing at the regional medical laboratory. No residence permit is granted if the HIV test result is positive, except when the patient can pay for his own treatment.	Southern Command
Peru	No Restriction		Southern Command
Philippines	No Restriction		Indo-Pacific Command
Poland	Special Consideration	HIV testing is mandatory for longer stays (beyond 3 months), independent of purpose of stay. All pregnant women suspected to be infected and also children born from women suspected if being infected have to undergo testing. There are no controls at the border, and no certificates have to be presented. There are no regulations about the control or deportation of people with HIV.	European Command
Portugal	No Restriction		European Command

Qatar	Not Allowed	An HIV test is required for everybody intending to stay for more than one month. There is no HIV testing on entry. Those testing HIV positive will be denied work visas and will be deported (exception: residents who contract HIV during residence).	Central Command
Romania	No Restriction		European Command
Russia	Not Allowed	A negative HIV test result is required for long-term stays (more than three months), for students and for foreign employees. Foreign residents found to be HIV positive are expelled.	European Command
Rwanda	No Restriction		Africa Command
Samoa	Evaluation	An HIV test is required for residency or work permit applicants. Visitors indicating they have tested HIV positive will be subject to questioning by a health professional upon entry.	Indo-Pacific Command
San Marino	No Restriction		European Command
Sao Tome and Principe	Unclear	No information provided.	Africa Command
Saudi Arabia	Not Allowed	A negative HIV test result is required for residence and work permit applicants. Deportations of people diagnosed with HIV have been reported.	Central Command
Senegal	No Restriction		Africa Command
Serbia	No Restriction		European Command
Seychelles	Unclear	To work on the Seychelles, a work permit is required. A full medical examination is required and all tests are compulsory, including HIV. Discrimination has been known to occur with HIV positive individuals.	Africa Command
Sierra Leone	No Restriction		Africa Command
Singapore	Not Allowed	An HIV test is mandatory for stays beyond 90 days. Foreign workers applying for an employment pass are required to undergo a medical screening for HIV and a positive test will result in the rejection of a foreign worker's application.	Indo-Pacific Command
Slovakia	No Restriction		European Command
Slovenia	No Restriction		European Command



Solomon Islands	Not Allowed	Some HIV/AIDS entry restrictions exist for visitors to and foreign residents of the Solomon Islands. According to the Solomon Islands Immigration Act, an immigration officer can bar you from entering the country or deport you if you refuse to submit to an examination by a government medical officer after being required to do so. Border officers may require a medical certificate. An HIV test is required for stays over 90 days. Deportation is possible.	Central Command
Somalia	No Restriction		Africa Command
South Africa	No Restriction		Africa Command
South Sudan	No Restriction		Africa Command
Spain	No Restriction		European Command
Sri Lanka	Evaluation	The U.S. Department of State is unaware of any HIV/AIDS entry restrictions for visitors to or foreign residents of Sri Lanka; however, Sri Lankan law does allow immigration officials to refer visitors and foreign residents to a physician for examination if a public health risk is suspected. In practice this is a rare occurrence, but travelers should be aware that Sri Lankan law allows for the denial of entry to any foreigner who, upon referral from an immigration officer, is certified by a physician as posing a public health risk. Travelers who refuse a medical examination under these circumstances may be refused entry. Please verify this information with the Embassy of Sri Lanka before traveling.	Indo-Pacific Command
St. Kitts and Nevis	Unclear	Some HIV/AIDS entry restrictions may exist. Please contact the Embassy of Saint Kitts and Nevis before you travel.	Southern Command
St. Lucia	No Restriction		Southern Command
St. Vincent and Grenadines	Unclear	Some HIV entry restrictions may exist. Please contact the Embassy of Saint Vincent and the Grenadines before you travel. HIV-positive foreigners have no access to treatment and services.	Southern Command
Sudan	Not Allowed	Some HIV entry restrictions exist for visitors and foreign residents of Sudan. Sudanese law requires a negative HIV test result in order to obtain a work or residence visa.	Africa Command

<p>Suriname</p>	<p>Special Consideration</p>	<p>On May 5, 2008, the Republic of Suriname adopted a new law establishing entry restrictions targeting people with HIV from certain countries and regions.                  Citizens from countries in Africa, Asia and Eastern Europe, who require a visa to enter Suriname, must present evidence of health and travel insurance plus a health certificate stating the absence of leprosy, sexually transmitted diseases, hepatitis B, HIV and tuberculosis.                  The Foreign Ministry has sent a note in this regard to its missions abroad. Most likely, short-term visitors will not face any problems when entering the country. There are no border controls.                  Working migrants do not need to present a negative HIV test result when applying for a work permit. However, it may be possible that employers demand such a test. There is no law forbidding that.</p>	<p>Southern Command</p>
<p>Swaziland Sweden</p>	<p>No Restriction Unclear</p>	<p>There are no specific entry or residence regulations for people with HIV/AIDS. Neither a medical certificate nor an HIV test result is required when entering the country. Foreigners with a known HIV infection are not subject to specific residence regulations. There are no regulations regarding the control, deportation or expulsion of those concerned. In case of doubt, the health authorities may force a foreign national to undergo an HIV test.</p>	<p>Africa Command  European Command</p>
<p>Switzerland</p>	<p>No Restriction</p>		<p>European Command</p>

Syria	Not Allowed	No HIV test is required for a short-term tourist visa. Tourist visas (multiple entry visas) are granted for up to six months. Foreigners applying for residency in order to work or to study in Syria have to undergo HIV testing. This also applies to a person married to a Syrian national and intending to take residence in the country. Diplomats are exempt. It is very likely that foreigners diagnosed with HIV will be expelled.	Central Command
Tadjikistan	No Restriction		Central Command
Taiwan	No Restriction		Indo-Pacific Command
Tanzania	No Restriction		Africa Command
Thailand	Evaluation	Users of this site reported that teacher recruitment agencies require health checks including HIV tests. The HIV test is not essential for obtaining a work permit from the authorities.	Indo-Pacific Command
Timor Leste	No Restriction		Indo-Pacific Command
Togo	No Restriction		Africa Command
Tonga	Evaluation	An HIV test is required for stays of more than 90 days. It is unclear	Indo-Pacific Command
Trinidad and Tobago	No Restriction		Southern Command
Tunisia	Not Allowed	There are no specific regulations concerning short-term stays in Tunisia. However, the granting of work and residency permits can be subject to health checks, and their granting may be denied in the presence of HIV. The regulations target foreign employees and immigrants.	Africa Command
Turkey	No Restriction		European Command
Turkmenistan	Unclear	The U.S. Department of State is unaware of any HIV/AIDS entry restrictions for visitors to or foreign residents of Turkmenistan. A positive HIV test result may lead to deportation.	Central Command
Turks and Caicos Islands	Unclear	Residence and work permit applicants are required to submit a local medical certificate with their application. Please contact the Turks and Caicos embassy before traveling.	Northern Command
Tuvalu	Unclear	No information provided.	Indo-Pacific Command
Uganda	No Restriction		Africa Command

Ukraine	No Restriction		European Command
United Arab Emirates	Not Allowed	In principle, people with HIV/AIDS are not allowed to enter or stay in the United Arab Emirates. Health exams, including an HIV test, are performed when applying for a residency permit. A later detected HIV-infection may lead to deportation.	Central Command
United Kingdom and Gibraltar	No Restriction		European Command
United States of America	No Restriction		Northern Command
Uruguay	No Restriction		Southern Command
Uzbekistan	No Restriction		Central Command
Vanuatu	No Restriction		Northern Command
Vatican, Holy See	Unclear	There are no proper entry regulations for the Vatican, as inner state affairs are delegated to the authorities of Italy.	European Command
Venezuela	Special Consideration	The presentation of an HIV test result is not required when entering Venezuela. There are no specific entry or residence regulations for people with HIV/AIDS. Art. 32 of the law on foreigners (Ley de Extranjeros) partially prohibits the entry of people who have a disease. It is possible that this measure could be applied to people with HIV. However, no such case is known.	Southern Command
Vietnam	No Restriction		Indo-Pacific Command
Virgin Islands	Evaluation	A medical test is required for work and residence permits. Excerpt from "Immigration Medical requirements", effective from January 1, 2018: ... persons are no longer mandated to have medical certificates upon entry to the territory but can opt to have their medicals done locally in order to be deemed free of infectious diseases such as tuberculosis, yellow fever, malaria, plague, viral haemorrhagic fever and West Nile virus. Although HIV is not specifically listed and mentioned, the physician is also asked to report sexually transmitted diseases on the medical form.	Northern Command

Yemen	Not Allowed	Independent of purpose and duration of stay, people with known HIV infections are not allowed to enter Yemen. Tourists staying less than 3 months are not controlled, whether on entry nor during their stay. Residence or work permit applicants need to undergo HIV-testing in order to receive their permits. The regulations target students, foreign employees, refugees and immigrants.	Central Command
Zambia	No Restriction		Africa Command
Zimbabwe	No Restriction		Africa Command

## Special Consideration Restriction

Country	Restriction	Notes/Overview	Combatant Command
Armenia	Special Consideration	Antiretroviral medications can be imported for personal use and for the duration of the planned stay (up to six weeks). A medical certificate including the diagnosis in Russian or Armenian language has to be presented at customs. No information on residency.	European Command
Belarus	Special Consideration	The U.S. Department of State is unaware of any HIV/AIDS entry restrictions for visitors to Belarus on a 30-day visit. Long-term residents (those spending more than 90 days a year in Belarus) or students must obtain an HIV/AIDS test in Belarus and submit the results to the Department of Citizenship and Migration when applying for an extension of stay or residency. We recommend that you verify this information with the Embassy of Belarus before you travel.	European Command
Belgium	Special Consideration	<p>A health certificate stating absence of a transmittable disease that would present a danger for public health is required from non-EU residency permit applicants. A residency permit can be granted regardless of HIV infection. The following conditions can be grounds for denying such a permit:</p> <ul style="list-style-type: none"> <li>-Illnesses that require the patient to be under quarantine (as defined by WHO guidelines from May 25, 1951).</li> <li>-Active tuberculosis</li> <li>-Syphilis</li> <li>-Transmittable infectious conditions or contagious parasitic diseases</li> </ul>	European Command

Benin	Special Consideration	<p>AN HIV TEST IS REQUIRED WHEN APPLYING FOR A LONG-TERM RESIDENCE PERMIT. IN case of a positive test result, law does not forbid the grant of a long-term residence permit. The permit is granted at the discretion of the officer dealing with the application. There are no specific residence regulations regarding people with HIV/AIDS. The Embassy can't judge how the problem is handled in practice. Nothing has been heard about controls, deportations or expulsions. It is possible that residence permits won't be extended in the case of a positive test result.</p>	Africa Command
Canada	Special Consideration	<p>Under the Immigration and Refugee Protection Act ("IRPA"), foreign nationals are inadmissible as permanent immigrants to Canada if their health condition might reasonably be expected to cause an "excessive demand" on health or social services, or if their application to immigrate includes a family member in this situation. Due to the high cost of antiretroviral medications, people living with HIV are generally deemed medically inadmissible if they apply to immigrate to Canada. Today's proposed changes include increasing the cost threshold for defining what constitutes "excessive demand," to three times the current level of \$6,655 per year. This increase to the cost threshold may mean that many people living with HIV will no longer be found medically inadmissible and excluded from immigration to Canada.</p>	Northern Command
Hungary	Special Consideration	<p>There are no laws or regulations that would formally ban people living with HIV from applying for, and receiving, long-term or permanent residency. The only requirement is that a person living with HIV has a valid social security/health insurance account with the state insurance fund. This can be done even without formal employment as long as the person pays a certain fee to the insurance fund each month. No HIV test is required for a person who seeks residency in Hungary. However, they must undergo treatment in order not to be expelled. If the person refuses to be treated for his/her HIV, then they may be expelled from the country.</p>	European Command

New Zealand	Special Consideration	<p>While HIV-positive people may not, prima facie, meet the definition of "acceptable standard of health", waivers of this requirement will be available for family members of New Zealand citizens and residents, and for refugees if they fulfil the criteria set by Immigration New Zealand. Applicants of temporary visas are not in general eligible for a medical waiver unless they fulfil some specific criteria. 20 HIV-positive people per year are accepted as quota refugees.</p>	Indo-Pacific Command
Nicaragua	Special Consideration	<p>According to the immigration authorities, extended residency will only exceptionally be granted to HIV-positive people. For example, it will be granted to people who participate in the rehabilitation programme for drug users offered by organizations established in Nicaragua (such as Patriarca).</p>	Southern Command
Paraguay	Special Consideration	<p>Anyone applying for permanent residency in Paraguay is required to undergo HIV testing at the regional medical laboratory. No residence permit is granted if the HIV test result is positive, except when the patient can pay for his own treatment.</p>	Southern Command
Poland	Special Consideration	<p>HIV-testing is mandatory for longer stays (beyond 3 months), independent of purpose of stay. All pregnant women suspected to be infected and also children born from women suspected if being infected have to undergo testing. There are no controls at the border, and no certificates have to be presented. There are no regulations about the control or deportation of people with HIV.</p>	European Command



<p>Suriname</p>	<p>Special Consideration</p>	<p>On May 5, 2008, the Republic of Suriname adopted a new law establishing entry restrictions targeting people with HIV from certain countries and regions.</p> <p>Citizens from countries in Africa, Asia and Eastern Europe, who require a visa to enter Suriname, must present evidence of health and travel insurance plus a health certificate stating the absence of leprosy, sexually transmitted diseases, hepatitis B, HIV and tuberculosis.</p> <p>The Foreign Ministry has sent a note in this regard to its missions abroad. Most likely, short-term visitors will not face any problems when entering the country. There are no border controls.</p> <p>Working migrants do not need to present a negative HIV test result when applying for a work permit. However, it may be possible that employers demand such a test. There is no law forbidding that.</p>	<p>Southern Command</p>
<p>Venezuela</p>	<p>Special Consideration</p>	<p>The presentation of an HIV test result is not required when entering Venezuela. There are no specific entry or residence regulations for people with HIV/AIDS.</p> <p>Art. 32 of the law on foreigners (Ley de Extranjeros) partially prohibits the entry of people who have a disease. It is possible that this measure could be applied to people with HIV. However, no such case is known.</p>	<p>Southern Command</p>

## Restrictions are Unclear

Country	Restriction	Notes/Overview	Combatant Command
Angola	Unclear	It is reported that a medical check-up requirement for work visa applicants ("Visto de Trabalho"), authorised under Law 2/07 and Presidential Decree 108. According to the International Organisation of Migration (IOM), the check-up does not require HIV testing. However, the Embassy of Angola in Serbia web site indicates the contrary.	Africa Command
Bangladesh	Unclear	There are no specific entry regulations for people with HIV/AIDS in Bangladesh (information provided by the Embassy's Attorney of confidence). Neither a medical certificate nor an HIV test result is requested. This also applies to long-term residents. It is possible however, that foreigners with HIV/AIDS are deported if the competent authorities find out about their condition.	Indo-Pacific Command
Bermuda	Unclear	The U.S. Department of State is unaware of any HIV/AIDS entry restrictions for visitors to or foreign residents of Bermuda. However, visitors with visible indicators of any communicable disease can be refused entry into Bermuda.	Northern Command
Bhutan	Unclear	Some HIV/AIDS entry restrictions exist for visitors to and foreign residents of Bhutan. For stays longer than two weeks, applicants must present the results of an HIV/AIDS test completed within the six months prior to their visit. The test can also be administered by Bhutanese officials upon arrival.	Indo-Pacific Command
Cayman Islands	Unclear	Although there are no specific HIV/AIDS entry restrictions for visitors to the Cayman Islands, people living with HIV/AIDS can be denied permission to land if a Health Officer certifies that their entry to the Islands would be dangerous to the community. This is according to Section 82 (c) of the Cayman Immigration Law (2007: Revision).	Southern Command

China	Unclear	In case of a long-term professional stay in China (longer than six months): Check the situation carefully. Until recently, a negative HIV status was mandatory for foreigners staying in China on long-term permits. Tests have also been performed in China and without consent of those concerned. A positive HIV test result led to immediate deportation, job loss and unemployment.	Indo-Pacific Command
Equatorial Guinea	Unclear	You may have to present an HIV test certificate, and HIV-positive status could lead to refusal of entry or deportation. The U.S. Department of State is unaware of any HIV/AIDS entry restrictions for visitors to or foreign residents of Equatorial Guinea. However, the Government of Equatorial Guinea is starting to require medical documentation, including the determination of the HIV status of third country nationals who are renewing or obtaining residency in Equatorial Guinea.	Africa Command
Eritrea	Unclear	Some HIV/AIDS entry restrictions exist for visitors to and foreign residents of Eritrea. Please verify this information with the Embassy of Eritrea before you travel.	Africa Command
Guinea-Bissao	Unclear	The visa application form may include questions relating to infectious diseases. There is no information on whether foreigners with a known HIV infection are subject to specific residence regulations or whether there are regulations regarding the control, deportation or expulsion of those concerned.	Africa Command
Kiribati	Unclear	No information provided.	Indo-Pacific Command
Kyrgyzstan	Unclear	Some HIV/AIDS restrictions exist for visitors and residents in the Kyrgyz Republic. An HIV test is required to apply for a work visa. It is recommended to contact the Embassy for the Kyrgyz Republic before you travel.	Central Command
Montserrat	Unclear	Some HIV/AIDS entry restrictions may exist. Please contact the British Embassy before you travel.	Southern Command

Nigeria	Unclear	Some HIV/AIDS entry restrictions exist for visitors to and foreign residents of Nigeria. Nigerian authorities have the discretion to deny entry to foreigners who are "undesirable for medical reasons" and may require HIV tests for foreigners marrying Nigerian citizens. Please verify this information with the Embassy of Nigeria before you travel.	Africa Command
Sao Tome and Prinicipe	Unclear	No information provided.	Africa Command
Seychelles	Unclear	To work on the Seychelles, a work permit is required. A full medical examination is required and all tests are compulsory, including HIV. Discrimination has been known to occur with HIV positive individuals..	Africa Command
St. Kitts and Nevis	Unclear	Some HIV/AIDS entry restrictions may exist. Please contact the Embassy of Saint Kitts and Nevis before you travel.	Southern Command
St. Vincent and Grenadines	Unclear	Some HIV entry restrictions may exist. Please contact the Embassy of Saint Vincent and the Grenadines before you travel. HIV-positive foreigners have no access to treatment and services.	Southern Command
Sweden	Unclear	There are no specific entry or residence regulations for people with HIV/AIDS. Neither a medical certificate nor an HIV test result is required when entering the country. Foreigners with a known HIV infection are not subject to specific residence regulations. There are no regulations regarding the control, deportation or expulsion of those concerned. In case of doubt, the health authorities may force a foreign national to undergo an HIV test.	European Command
Turkmenistan	Unclear	The U.S. Department of State is unaware of any HIV/AIDS entry restrictions for visitors to or foreign residents of Turkmenistan. A positive HIV test result may lead to deportation.	Central Command
Turks and Caicos Islands	Unclear	Residence and work permit applicants are required to submit a local medical certificate with their application. Please contact the Turks and Caicos embassy before traveling.	Northern Command
Tuvalu	Unclear	No information provided.	Indo-Pacific Command
Vatican, Holy See	Unclear	There are no proper entry regulations for the Vatican, as inner state affairs are delegated to the authorities of Italy.	European Command

## Evaluation Required

Country	Restriction Evaluation	Notes/Overview	Combatant Command
Australia	Evaluation	<p>with HIV are treated similarly to other people with chronic health conditions and disabilities during the country's immigration health assessment process. Applications for visas from people living with HIV will be assessed against criteria applying to anyone with a chronic health condition.</p> <p>Applicants for visas to visit or migrate to Australia are required to meet certain health requirements. These help ensure that:</p> <ul style="list-style-type: none"> <li>-Risks to public health in the Australian community are minimized</li> <li>-Public expenditure on health and community services is contained</li> <li>-Australian residents have access to health and other community services in short supply.</li> </ul>	Indo-Pacific Command
Honduras	Evaluation	<p>Work permit applicants must provide a medical certificate that has been issued within the six months prior to the application, indicating that the applicant does not suffer from any infectious or contagious disease. This medical certificate must be issued by a doctor in Honduras.</p>	Southern Command
Samoa	Evaluation	<p>An HIV test is required for residency or work permit applicants. Visitors indicating they have tested HIV positive will be subject to questioning by a health professional upon entry.</p>	Indo-Pacific Command

Sri Lanka	Evaluation	<p>The U.S. Department of State is unaware of any HIV/AIDS entry restrictions for visitors to or foreign residents of Sri Lanka; however, Sri Lankan law does allow immigration officials to refer visitors and foreign residents to a physician for examination if a public health risk is suspected. In practice this is a rare occurrence, but travelers should be aware that Sri Lankan law allows for the denial of entry to any foreigner who, upon referral from an immigration officer, is certified by a physician as posing a public health risk. Travelers who refuse a medical examination under these circumstances may be refused entry. Please verify this information with the Embassy of Sri Lanka before traveling.</p>	Indo-Pacific Command
Thailand	Evaluation	<p>Users of this site reported that teacher recruitment agencies require health checks including HIV tests. The HIV test is not essential for obtaining a work permit from the authorities.</p>	Indo-Pacific Command
Tonga	Evaluation	<p>An HIV test is required for stays of more than 90 days. It is unclear</p>	Indo-Pacific Command
Virgin Islands	Evaluation	<p>A medical test is required for work and residence permits. Excerpt from "Immigration Medical requirements", effective from January 1, 2018: ... persons are no longer mandated to have medical certificates upon entry to the territory but can opt to have their medicals done locally in order to be deemed free of infectious diseases such as tuberculosis, yellow fever, malaria, plague, viral haemorrhagic fever and West Nile virus. Although HIV is not specifically listed and mentioned, the physician is also asked to report sexually transmitted diseases on the medical form.</p>	Northern Command

## No Restriction

Country	Restriction	Notes/Overview	Combatant Command
Afghanistan	No Restriction		Central Command
Albania	No Restriction		European Command
Algeria	No Restriction		Africa Command
Andorra	No Restriction		European Command
Antigua and Barbuda	No Restriction		Southern Command
Argentina	No Restriction		Southern Command
Austria	No Restriction		European Command
Bahamas	No Restriction		Northern Command
Barbados	No Restriction		Southern Command
Belize	No Restriction		Southern Command
Bolivia	No Restriction		Southern Command
Bosnia Herzegovina	No Restriction (except for one province)	The Republika Srpska (province of Bosnia Herzegovina) has a law on population protection from infectious diseases. The law requires that foreigners with long-term residency status (i.e., staying for more than three months) have to perform regular medical examinations. Related testing includes HIV, syphilis and hepatitis B and C. At application, test results should be no older than three months.	European Command
Botswana	No Restriction		Africa Command
Brazil	No Restriction		Southern Command
Bulgaria	No Restriction		European Command
Burkina Faso	No Restriction		Africa Command
Burundi	No Restriction		Africa Command
Cabo Verde	No Restriction		Africa Command
Cambodia	No Restriction		Indo-Pacific Command
Cameroon	No Restriction		Africa Command
Central African Republic	No Restriction		Africa Command
Chad	No Restriction		Africa Command

Chile	No Restriction		Southern Command
Colombia	No Restriction		Southern Command
Comores	No Restriction		Africa Command
Congo (Brazzaville)	No Restriction		Africa Command
Congo (Kinshasa)	No Restriction		Africa Command
Costa Rica	No Restriction		Southern Command
Cote D'Ivoire	No Restriction		Africa Command
Croatia	No Restriction		European Command
Czech Republic	No Restriction		European Command
Denmark	No Restriction		European Command
Djibouti	No Restriction		Africa Command
El Salvador	No Restriction		Southern Command
Estonia	No Restriction		European Command
Ethiopia	No Restriction		Africa Command
Fiji	No Restriction		Indo-Pacific Command
Finland	No Restriction		European Command
France	No Restriction		European Command
Gabon	No Restriction		Africa Command
Gambia	No Restriction		Africa Command
Georgia	No Restriction		European Command
Germany	No Restriction		European Command
Ghana	No Restriction		Africa Command
Greece	No Restriction		European Command
Grenada	No Restriction		Southern Command
Guatemala	No Restriction		Southern Command
Guinea	No Restriction		Africa Command
Guyana	No Restriction		Southern Command
Haiti	No Restriction		Southern Command
Hong Kong	No Restriction		Indo-Pacific Command
Iceland	No Restriction		European Command
India	No Restriction		Indo-Pacific Command



Indonesia	No Restriction	The Indonesian Government screens incoming passengers in response to reported outbreaks of pandemic illnesses.	Indo-Pacific Command
Ireland	No Restriction		European Command
Italy	No Restriction		European Command
Jamaica	No Restriction		Southern Command
Japan	No Restriction		Indo-Pacific Command
Korea (South)	No Restriction		Indo-Pacific Command
Kosovo	No Restriction		European Command
Laos	No Restriction		Indo-Pacific Command
Latvia	No Restriction		European Command
Lesotho	No Restriction		Africa Command
Liberia	No Restriction		Africa Command
Libya	No Restriction	Some HIV/AIDS entry restrictions exist for visitors to and foreign residents of Libya. Please verify this information with the Libyan Embassy before traveling.	Africa Command
Lichtenstein	No Restriction		European Command
Lithuania	No Restriction	HIV/AIDS are not a condition considered to be a threat to public health in Lithuania. HIV positive people are advised not to indicate that they have a public health threatening disease while filling in applications for residency in order to circumvent possible problems.	European Command
Luxembourg	No Restriction		European Command
Macedonia	No Restriction		European Command
Madagascar	No Restriction		Africa Command
Malawi	No Restriction		Africa Command
Maldives	No Restriction		Indo-Pacific Command
Mali	No Restriction		Africa Command
Malta	No Restriction		European Command
Mauritania	No Restriction		Africa Command
Mexico	No Restriction		Northern Command

Micronesia	No Restriction	The U.S. Department of State is unaware of any HIV/AIDS entry restrictions for visitors to or foreign residents of the Federated States of Micronesia. No restrictions for Pohnei State. Status of other States in Micronesia is unknown (each State has its own border control policies and regulations).	Indo-Pacific Command
Moldova	No Restriction		European Command
Monaco	No Restriction		European Command
Mongolia	No Restriction		Indo-Pacific Command
Montenegro	No Restriction		European Command
Morocco	No Restriction		Africa Command
Mozambique	No Restriction		Africa Command
Myanmar (Burma)	No Restriction		Indo-Pacific Command
Namibia	No Restriction		Africa Command
Nauru	No Restriction	The Ministry of Health of Nauru is currently considering whether to put restrictions in place. Please inquire directly with Republic of Nauru Permanent Mission to the United Nations in New York.	Indo-Pacific Command
Nepal	No Restriction		Indo-Pacific Command
Netherlands	No Restriction	Residence regulations for people with HIV/AIDS: Foreigners are requested to have sufficient financial resources, a health insurance and a passport. These conditions don't apply in the case of an emergency (For example if the person in question would quickly die without treatment). This policy is compatible with Article 3 of the European Human Rights Convention.	European Command
Niger	No Restriction		Africa Command
Norway	No Restriction	Foreigners with a known HIV infection are not subject to specific residence regulations. Persons who stay in Norway for longer than 3 months are offered a tuberculosis test and an HIV test, in order to arrange for any necessary treatment as quickly as possible.	European Command
Pakistan	No Restriction		Central Command

Panama	No Restriction	The authorities still require a "certificate of good health" from people intending to stay in Panama for more than three months. This certificate can be issued to a person living with HIV.	Southern Command
Peru	No Restriction		Southern Command
Philippines	No Restriction		Indo-Pacific Command
Portugal	No Restriction		European Command
Romania	No Restriction		European Command
Rwanda	No Restriction		Africa Command
San Marino	No Restriction		European Command
Senegal	No Restriction		Africa Command
Serbia	No Restriction		European Command
Sierra Leone	No Restriction		Africa Command
Slovakia	No Restriction		European Command
Slovenia	No Restriction		European Command
Somalia	No Restriction		Africa Command
South Africa	No Restriction		Africa Command
South Sudan	No Restriction		Africa Command
Spain	No Restriction		European Command
St. Lucia	No Restriction		Southern Command
Swaziland	No Restriction		Africa Command
Switzerland	No Restriction		European Command
Tadjikistan	No Restriction		Central Command
Taiwan	No Restriction		Indo-Pacific Command
Tanzania	No Restriction		Africa Command
Timor Leste	No Restriction		Indo-Pacific Command
Togo	No Restriction		Africa Command
Trinidad and Tobago	No Restriction		Southern Command
Turkey	No Restriction		European Command
Uganda	No Restriction		Africa Command
Ukraine	No Restriction		European Command

United Kingdom and Gibraltar	No Restriction		European Command
United States of America	No Restriction		Northern Command
Uruguay	No Restriction		Southern Command
Uzbekistan	No Restriction		Central Command
Vanuatu	No Restriction		Northern Command
Vietnam	No Restriction		Indo-Pacific Command
Zambia	No Restriction		Africa Command
Zimbabwe	No Restriction		Africa Command

## HIV Positive Individuals Not Allowed

Country	Restriction	Notes/Overview	Combatant Command
Aruba	Not Allowed	The Government of Aruba, albeit part of the Kingdom of the Netherlands, does not provide a working permit to people living with HIV. And for living in Aruba, one needs a working and residency permit. Even marital status would not change this.	Southern Command
Azerbaijan	Not Allowed	People applying for an electronic visa through the official electronic visa portal are required to confirm they are HIV-negative and free from hepatitis B and C. Without this confirmation, applicants are not able to receive a visa.	European Command
Bahrain	Not Allowed	All foreigners declared HIV positive risk immediate deportation; deportation may be applied to all "communicable diseases." Although an individual is not required to declare HIV status upon arrival, the government revokes visas of non-Bahrainis who are HIV positive. [Note: Information should be verified with the Embassy of the Kingdom of Bahrain before travelling]	Central Command
Brunei	Not Allowed	People who wish to work or study in Brunei need a work and residence permit. On application for these permits, people must undergo a health examination in their country of origin and again within two weeks of entering Brunei. This health check includes HIV testing. No medical certificate has to be presented when entering the country. Local authorities will deport HIV-positive foreigners to their native country. A person's residence permit will be cancelled if HIV is detected.	Indo-Pacific Command

Cuba	Not Allowed	<p>There are no restrictions for people with HIV/AIDS for short-term stays of up to three months (tourist visa). An HIV test is mandatory for longer stays. An HIV test result must be presented upon application for a long-term visa. There are no controls at the border. The extension of a residency permit requires a negative HIV test result.</p> <p>There is no information about the consequences for a person entering the country who is detected to be HIV positive. Antiretroviral medication for personal use can be carried along.</p>	Southern Command
Cyprus	Not Allowed	<p>Foreigners (non-EU citizens only) applying for a residence permit in order to work or to study must undergo a medical examination by the Health Ministry in order to exclude an infection with HIV, hepatitis B/C or syphilis. The authorities will not grant a residence permit in the case of a positive test result. For all other foreigners (EU citizens, tourists, employees of international companies, UN staff), there are no mandatory medical examinations.</p>	European Command
Dominican Republic	Not Allowed	<p>Medical checks are mandatory for people applying for work or residence permits. Residency is restricted for people with infectious diseases. A positive HIV test will result in denial of a residence permit. The same happens if a person refuses to get tested.</p>	Southern Command
Ecuador	Not Allowed	<p>For people applying for student permits, work permits and voluntary, missionary or religious visas, a doctor's certificate and an HIV test is required. Applicants must be free of communicable diseases.</p>	Southern Command
Egypt	Not Allowed	<p>An HIV test has to be performed at the Health Ministry's central laboratory for all people who apply for a residence or work permit (students, foreign employees, immigrants). Tests performed abroad are not recognized. Foreigners diagnosed with HIV while in the country are expelled. The regulations are based on a Ministerial Decree.</p>	Central Command

Iran	Not Allowed	Foreigners applying for a work and residence permit, or who wish to stay for more than three months, must present a health certificate with a negative HIV test result. Exceptions are holders of diplomatic, service or special passports, and tourists and businessmen staying for less than three months.	Central Command
Iraq	Not Allowed	All foreigners are required to be tested for HIV at a state laboratory within 10 days of entry into Iraq. All stays beyond 10 days require an HIV test. Diplomats are excluded from these regulations.	Central Command
Israel	Not Allowed	Work permit applicants are required to present a medical certificate of medical examinations and blood tests performed in clinics or hospitals recognized by the Israeli diplomatic post in the country of application. The certificate must cover, inter alia, results of tests for tuberculosis, hepatitis and HIV.	European Command
Jordan	Not Allowed	You must undergo medical exams to obtain a residency permit. This includes mandatory testing for tuberculosis, HIV and hepatitis C. A positive HIV test leads to deportation.	Central Command
Kazakhstan	Not Allowed	Visitors applying for a work or residency permit, which is required for US citizens who wish to spend more than six months in Kazakhstan, must submit negative HIV test results with their application to the Migration Police in the city where they intend to work or reside. The results must be less than three months old.	Central Command
Kenya	Not Allowed		Africa Command
Korea (North)	Not Allowed	If a person's HIV-positive status becomes known, he/she is sent back to his/her country of origin. The reason given for this is the lack of experience with HIV/AIDS and the lack of treatment options.	Indo-Pacific Command
Kuwait	Not Allowed	If an HIV infection or HIV-related illness becomes known, the residence permit is withdrawn. The affected person has to leave Kuwait, or else is deported. Health checks at the border are not yet in effect, but the implementation of these is currently being discussed by Kuwaiti officials.	Central Command

Lebanon	Not Allowed	In accordance with Lebanese labour laws, all new migrants are required to submit negative HIV and STD lab test results along with their application for a work permit. Migrant workers testing HIV positive are deported and, in accordance with the law, repatriation costs are borne by the recruitment agency. As of 2007, however, in such cases, foreigners are given access to ARV treatment prior to deportation.	Central Command
Malaysia	Not Allowed	A full medical check-up (HIV, hepatitis, diagnostic reference levels, drug abuse and pregnancy) is required within one month of arrival and on a yearly basis. Special provisions for migrant workers (domestic staff and low skill workers) stipulate denial of permission to enter, or expulsion, if the HIV test result is positive.	Indo-Pacific Command
Marshall Islands	Not Allowed	Some HIV entry restrictions exist for visitors to and foreign residents of the Marshall Islands. HIV testing is required for temporary visitors staying more than 30 days and applicants for residence and work permits.	Indo-Pacific Command
Mauritius	Not Allowed	Migrant workers have to submit results of their HIV test for employment. No employment in case the test result is positive.	Africa Command
Oman	Not Allowed	All long-term visa applications (employment, residence, etc.) require a medical exam, including an HIV test. Persons testing HIV positive are expelled.	Central Command
Papua New Guinea	Not Allowed	The Government of Papua New Guinea imposes HIV/AIDS entry restrictions for visitors and foreign residents. If you request residency or intend to remain long term in Papua New Guinea, you are required to have an HIV test performed at a US medical facility.	Indo-Pacific Command
Qatar	Not Allowed	An HIV test is required for everybody intending to stay for more than one month. There is no HIV testing on entry. Those testing HIV positive will be denied work visas and will be deported (exception: residents who contract HIV during residence).	Central Command
Russia	Not Allowed	A negative HIV test result is required for long-term stays (more than three months), for students and for foreign employees. Foreign residents found to be HIV positive are expelled.	European Command



Saudi Arabia	Not Allowed	A negative HIV test result is required for residence and work permit applicants. Deportations of people diagnosed with HIV have been reported.	Central Command
Singapore	Not Allowed	An HIV test is mandatory for stays beyond 90 days. Foreign workers applying for an employment pass are required to undergo a medical screening for HIV, and a positive test will result in the rejection of a foreign worker's application.	Indo-Pacific Command
Solomon Islands	Not Allowed	Some HIV/AIDS entry restrictions exist for visitors to and foreign residents of the Solomon Islands. According to the Solomon Islands Immigration Act, an immigration officer can bar you from entering the country or deport you if you refuse to submit to an examination by a government medical officer after being required to do so. Border officers may require a medical certificate. An HIV test is required for stays over 90 days. Deportation is possible.	Central Command
Sudan	Not Allowed	Some HIV entry restrictions exist for visitors and foreign residents of Sudan. Sudanese law requires a negative HIV test result in order to obtain a work or residence visa.	Africa Command
Syria	Not Allowed	No HIV test is required for a short-term tourist visa. Tourist visas (multiple entry visas) are granted for up to six months. Foreigners applying for residency in order to work or to study in Syria have to undergo HIV testing. This also applies to a person married to a Syrian national and intending to take residence in the country. Diplomats are exempt. It is very likely that foreigners diagnosed with HIV will be expelled.	Central Command
Tunisia	Not Allowed	There are no specific regulations concerning short-term stays in Tunisia. However, the granting of work and residency permits can be subject to health checks, and their granting may be denied in the presence of HIV. The regulations target foreign employees and immigrants.	Africa Command

United Arab Emirates	Not Allowed	In principle, people with HIV/AIDS are not allowed to enter or stay in the United Arab Emirates. Health exams, including an HIV test, are performed when applying for a residency permit. A later detected HIV-infection may lead to deportation.	Central Command
Yemen	Not Allowed	Independent of purpose and duration of stay, people with known HIV infections are not allowed to enter Yemen. Tourists staying less than 3 months are not controlled, whether on entry nor during their stay. Residence or work permit applicants need to undergo HIV-testing in order to receive their permits. The regulations target students, foreign employees, refugees and immigrants.	Central Command

## Exhibit 15 to Deposition of Donald Shell

### HIV Country Restrictions, Summary of Findings

## HIV Country Restrictions, Summary of Findings

### **Request 1: Identify country entry and exit requirements for Service members deployed to a Foreign Nation (e.g., VISA requirements)**

BLUF: The regulations for Service members entering and exiting a country to perform their duty are often determined by Status of Forces Agreements (SOFAs), which typically require Service members to provide a military ID and military orders upon entry and exit.

#### Summary of findings:

Status of Force Agreements establish the framework for US military personnel to operate in a foreign country, which include the foreign jurisdiction and applicable legislation toward US personnel.<sup>1</sup> These agreements often determine the requirements needed for Service members to enter or exit the country, and typically include a military ID and military orders.

A detailed review of each SOFA is required to determine similarities and differences of agreements; however, preliminary review of four separate agreements (between the US and Japan, South Korea, Iraq, and Afghanistan) indicate that each agreement: require Service members and dependents to enter and exit the country through designated facilities; and require Service members to present a military ID and orders for entrance and exit. The Korean SOFA contains an additional provision, which requires dependents to have a Korean VISA. Furthermore, the preliminary review suggests that military personnel and dependents must obtain a passport if they wish to travel for personal matters (e.g., tourism); consequently, this would require Service members to meet host nation requirements for civilian entry.

### **Request 2: Review of international policy for Military and/or US government personnel to perform professional duties in a host nation if the individual presents with HIV positive status**

BLUF: Individual or multilateral treaties or agreements specifically addressing requirements associated with communicable diseases or HIV status were unable to be identified. Similarly, SOFAs, which establish the framework for US military personnel to operate in a host nation, do not appear to have specific requirements regarding HIV status. However, a SOFA typically states that U.S. personnel must obey host nation law, which would include restrictions on residency and employment.

#### Summary of findings:

International and host nation policy that specifically address requirements associated with military or government personnel and HIV status were unable to be identified. Current policy for US Defense personnel includes the requirement for safeguards in order to enter a foreign country and perform professional duties.<sup>2</sup> These requirements are typically implemented through Status of Force Agreements (SOFAs)<sup>2</sup>, which are multilateral or bilateral agreements that establish the framework for U.S military personnel to operate in a foreign country, and provides the manner by which host nation laws are applied toward U.S personnel, often including their dependents (with some limitations).

1. USAF Academy Legal Office, *Status of Forces Agreement*, 1.
2. International Security Advisory Board, *Report on Status of Forces Agreements*, (2015), 1.



Currently, the US has a SOFA with over 100 nations<sup>3</sup>, which includes SOFAs that are classified.<sup>4</sup> A detailed review of each SOFA is required to determine similarities and differences of agreements; however, preliminary review of four separate agreements (between US and Japan, South Korea, Iraq, and Afghanistan) illustrate that U.S. personnel are required to obey the laws of the host country. Although no specific requirements regarding communicable disease, including HIV, were identified, it can be inferred that host nation laws associated with HIV status would be applicable to US military and government personnel.

Research performed on international treaties and agreements revealed ambiguity regarding the interaction of US military personnel in an environment without an established SOFA. Although Treaties in Force (TIF) provide information on HIV and AIDS, the scope of a TIF is associated with international development and HIV education, and do not appear to establish requirements for US military personnel.<sup>5</sup>

**Request 5: Identify reported cases of a US Service member being expelled from a country or host nation due to HIV status.**

BLUF: No publicly available information was identified regarding the deportation of a Service member by a country due to a change in HIV positive status.

Summary of findings:

Restrictions and policies associated with host nations regarding HIV positive status is country-specific. A review of publically available information revealed that these policies and regulations vary greatly between countries; however, no information was identified that indicate an Active Duty Service Member (ADSM) was deported due to a change in HIV status.

To enable military readiness, DoD policies are developed to address deployability, which includes the ability of a Service member to enter or remain in a host nation. Consequently, policy associated with the ability of an ADSM to deploy should reflect host nation requirements.

3. International Security Advisory Board, *Report on Status of Forces Agreements*, (2015), 1.
4. International Security Advisory Board, *Report on Status of Forces Agreements*, (2015), 58.
5. United States Department of State, *Treaties in Force A List of Treaties and Other International Agreements of the United States in Force on January 1, 2018*, (2018).

## EXHIBIT 61

CDC, Understanding the Care Continuum

# Understanding the HIV Care Continuum

## Overview

Recent scientific advances have shown that antiretroviral therapy (ART) not only preserves the health, quality of life, and life expectancy of people living with HIV, but people living with HIV who take HIV medicine as prescribed and get and keep an undetectable viral load have effectively no risk of transmitting HIV to their HIV-negative sexual partners.

These developments have transformed the nation's approach to HIV prevention. By ensuring that everyone with HIV is aware of their infection, receives the treatment they need, and achieves sustained viral suppression, we can sharply reduce new infections in the United States.

This vision is a core focus of CDC's [high-impact HIV prevention strategy](#), which aims to achieve the greatest possible reductions in HIV infections by making sure that resources go to the regions, populations, and prevention strategies where they will have the greatest impact.

To help gauge progress towards national goals (see sidebar) and direct HIV prevention resources most effectively, CDC tracks the "HIV care continuum." The continuum is the series of

steps from the time a person receives a diagnosis of HIV through the successful treatment of their infection with HIV medications. This fact sheet explains the various approaches and data used to develop the HIV care continuum, how it is used to improve outcomes for people living with HIV in the United States, and how it helps guide the nation's response to HIV.

## National HIV/AIDS Strategy, 2020 Objectives on HIV Diagnosis and Care

At the national level several specific goals related to early HIV diagnosis and effective care include:

- 90%** Increasing the number of HIV-positive individuals aware of their status to 90%.
- 85%** Increasing the proportion of persons with newly diagnosed HIV who are linked to care within one month to 85%.
- 80%** Increasing the proportion of HIV-diagnosed individuals whose virus is effectively suppressed to 80%, with an emphasis on youth and persons who inject drugs.

## What is the HIV Care Continuum?

The ultimate goal of HIV treatment is to achieve viral suppression, which means the amount of HIV in the body is very low or undetectable. This is important for people with HIV to stay healthy, have improved quality of life, and live longer. People living with HIV who maintain viral suppression have effectively no risk of passing HIV to others.

The HIV care continuum consists of several steps required to achieve viral suppression. Specifically, CDC tracks:



National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention  
Division of HIV/AIDS Prevention



\* Linked to care is calculated differently from other steps in the continuum, and cannot be directly compared to other steps. See Table 1 on page 5 for details.  
 \*\* Receipt of medical care was defined as ≥1 test (CD4 or viral load [VL]) in 2016.  
 \*\*\* Retained in continuous medical care was defined as ≥2 tests (CD4 or VL) ≥3 months apart in 2016. Viral suppression was defined as <200 copies/mL on the most recent VL test in 2016. See Table 1 on page 5 for details.

## Two Ways to Monitor the Continuum

CDC currently uses two different approaches to monitor the HIV care continuum. The two approaches are used for different purposes, and both are essential to monitor the nation’s progress and identify key HIV prevention and care needs.

The major difference between the two approaches is that they have **different denominators**. That is, they measure progress among different groups of people living with HIV:

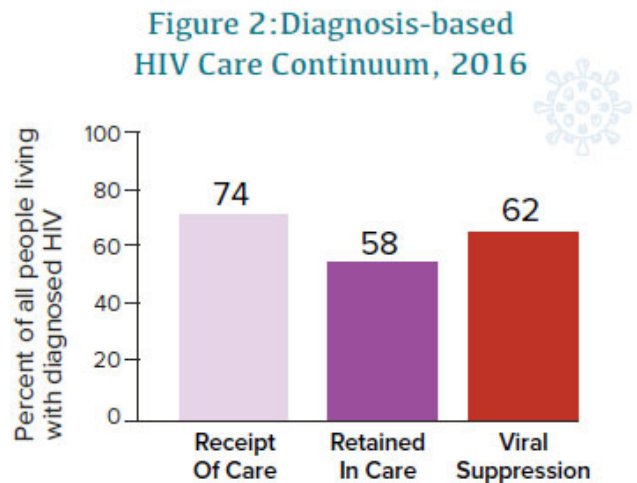
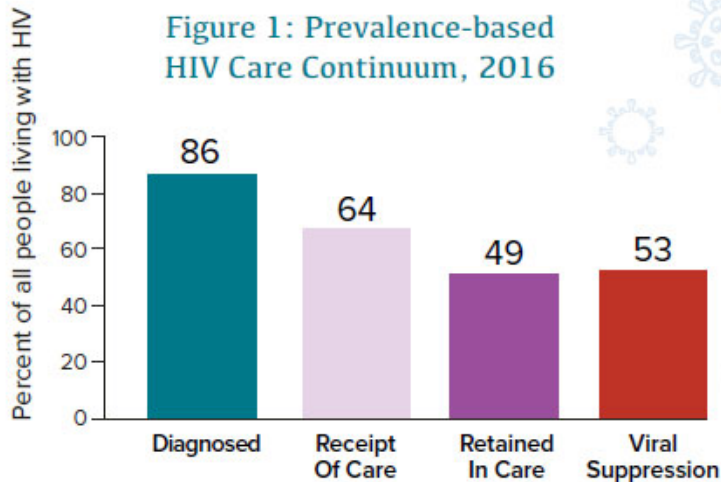
**The prevalence-based HIV care continuum** describes the number of people who are at each step of the continuum as a percentage of the **total number of people living with HIV** (known as HIV prevalence). Prevalence includes both people whose infection has been diagnosed and those who are infected but don’t know it.

This approach allows us to monitor elements of the care continuum by measuring the care outcomes among all Americans living with HIV. It can also monitor outcomes for broad populations, such as African Americans or men who have sex with men (MSM). However, because of certain statistical limitations, this approach does not allow more segmented analyses within those populations, such as young black MSM. See Figure 1 for the 2016 prevalence-based HIV care continuum.

**The diagnosis-based HIV care continuum** shows each step as a percentage of the number of people living with diagnosed HIV.

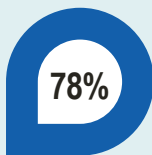
This approach gives us more detailed information about persons who are living with diagnosed HIV and provides a way to look at the continuum within subgroups of affected populations, for example young black MSM. For the 2016 diagnosis-based continuum, see Figure 2.

**The difference is in the denominators** • All people living with HIV (includes persons with diagnosed and undiagnosed infection) is used as the denominator for the prevalence-based continuum. People living with **diagnosed** HIV is the denominator used for the diagnosis-based continuum.



### Linked to Care

- In 2017, 78% of persons receiving a diagnosis of HIV were linked to care within 1 month.
- Defined as linked to care within 1 month of HIV diagnosis.
  - Denominator is persons receiving a diagnosis of HIV in a measurement year



- Numerator is the number of persons who were linked to care within 1 month.
- Because it has a different denominator, it cannot be directly compared to other steps in the continuum.

**See Table 1 on page 4 for additional details**





## Different Approaches for Different Needs

CDC's current approaches draw on the best data available.

It is **important to know how the continuum will be used**. Some uses of the **prevalence-based continuum** include:

- Monitoring testing efforts in the U.S. and demonstrating the importance of diagnosing HIV infections to achieve viral suppression
- Monitoring how the U.S. is doing among **all** persons living with HIV
- Comparing U.S. data to other countries who monitor the continuum among all persons living with HIV

Some uses of the **diagnosis-based continuum** include:

- Monitoring U.S. progress in comparison to national 2020 goals
- Monitoring U.S. progress in comparison to the UNAIDS 90-90-90 goals
- Monitoring disparities by examining data among sub-groups of the population
- Monitoring data at a local level to understand local progress and identify additional action steps to meet national level goals

Ways of presenting the continuum also will continue to evolve over time, as better and more complete data become available.

## How CDC Develops the Continuum

The data for both the prevalence- and diagnosis-based continua of care approaches come from:

**The National HIV Surveillance System (NHSS)**, which provides a range of information on people who have diagnosed HIV or have died with HIV. Data are from every U.S. state and territory and the District of Columbia and include sex, race/ethnicity, route of transmission, and age. The data are reported to CDC by state and local health departments. This is the source of data for both the prevalence and diagnosis denominators. Data from the states and D.C. that have complete laboratory reporting are used to calculate some measures of the continuum.

For more information, details on the two continuum approaches are found in Table 1 below. Some of these indicators are also used to monitor progress toward the national goals. For more information on national indicators, please see <https://www.cdc.gov/hiv/pdf/library/factsheets/cdc-hiv-national-hiv-care-outcomes.pdf>.

## What is CDC doing to improve the outcomes at every step of the HIV Care Continuum?

CDC is undertaking many initiatives including:

- **Directly funding health departments to implement a comprehensive HIV surveillance and prevention program** – to prevent new HIV infections and achieve viral suppression among persons living with HIV. The integrated approach promotes and supports improving health outcomes for persons living with HIV through achieving and sustaining viral suppression, and reducing health-related disparities by using quality, timely, and complete surveillance and program data to guide HIV prevention efforts. Priority activities include HIV testing; linkage to, re-engagement in, and retention in care and support for achieving viral suppression; support for pre-exposure prophylaxis (PrEP); community-level HIV prevention activities; and HIV transmission cluster investigations and outbreak response efforts.
- **Directly funding community-based organizations (CBOs)** – to increase HIV testing, improve linkages to care and support improvement of viral suppression for persons living with HIV, and improve linkages to PrEP and other prevention services for persons who are at risk for HIV.
- **Providing technical assistance** – to help health departments and CBOs develop the tools and skills to successfully implement effective HIV prevention activities for people living with HIV in their communities.
- **Improving surveillance capability and technology** – to assist states in outbreak response and improving completeness of laboratory data that are needed to assess many of the steps in the HIV care continuum and the selected national HIV care outcomes.
- **Researching new approaches** – to include studies of clinical, behavioral and structural interventions to help people with HIV stay in care, get back in care if they fall out of care, and adhere to their medications.
- **Developing guidelines** – to assist health care providers with HIV testing, care, treatment, and prevention.
- **Launching educational campaigns and an HIV Risk Reduction Tool** – to implement social marketing campaigns and provide educational resources; to help health care providers, at-risk populations, people with HIV, and the general public to reduce HIV stigma; increase HIV testing, prevention, and treatment; and understand risks for getting or transmitting HIV.

Continuum Step	
<b>Diagnosed</b>	<p>Measures the percentage of the total number of people living with HIV whose infection has been diagnosed.</p> <p>The denominator for this continuum step is HIV prevalence, which is the total number of people living with HIV (includes both those with diagnosed infection and those with undiagnosed infection). HIV prevalence is estimated through statistical modeling using National HIV Surveillance System (NHSS) data from all U.S. states and the District of Columbia (DC).</p>
<b>Receipt of Care</b>	<p>NHSS data from states and DC with complete reporting of CD4 and viral load test results are used to estimate “receipt of care” and “retained in care.”</p> <p>Receipt of care is measured as the percentage of persons with diagnosed HIV who had at least one CD4 or viral load test.</p> <p>The denominator for the prevalence-based continuum is all persons living with HIV (HIV prevalence). The denominator for the diagnosis-based continuum is all persons living with diagnosed HIV (diagnosed prevalence*).</p>
<b>Retained in Care</b>	<p>NHSS data from states and DC with complete reporting of CD4 and viral load test results are used to estimate “receipt of care” and “retained in care.”</p> <p>Retained in care is measured as the percentage of persons with diagnosed HIV who had two or more CD4 or viral load tests, performed at least three months apart.</p> <p>The denominator for the prevalence-based continuum is all persons living with HIV (HIV prevalence). The denominator for the diagnosis-based continuum is all persons living with diagnosed HIV (diagnosed prevalence*).</p>
<b>Viral Suppression</b>	<p>NHSS data from states and D.C. that have complete laboratory reporting are used to determine viral suppression.</p> <p>Viral suppression is measured as a viral load test result of &lt;200 copies/mL at the most recent viral load test during measurement year.</p> <p>The denominator for the prevalence-based continuum is all persons living with HIV (HIV prevalence). The denominator for the diagnosis-based continuum is all persons living with diagnosed HIV (diagnosed prevalence*).</p>
<b>Linked to Care</b>	<p>NHSS data from states and DC with complete reporting of CD4 and viral load test results are used to determine “linked to care.”</p> <p>Linked to care measures the percentage of people <i>receiving a diagnosis of HIV in a given calendar year</i> who had one or more documented CD4 or viral load tests <i>within 30 days (1 month) of diagnosis</i>.</p> <p>Because this measure is limited to people with HIV diagnosed in a single year, it cannot be directly compared to other steps in the continuum. This means that the denominator for linkage to care is <b>different</b> from the denominators used to calculate the other steps in the continuum. It is also important to note that an individual who enters care more than 30 days after diagnosis may still be included in subsequent steps of the continuum, but would not be counted as “linked to care.”</p>



\*Diagnosed prevalence is defined as the number of persons with HIV diagnosed through the end of 1 year and are living through the end of the next year (e.g. diagnosed prevalence for 2016 is defined as persons receiving a diagnosis of HIV by end of 2015 and living through the end of 2016).

EXHIBIT 62

5/17/2017 Email fr. Col. P. Danaher, M.D. to G. Palumbo  
(Roe, ECF No. 235-4)

UNDER SEAL

EXHIBIT 63

2/7/2018 Email fr. L. Trout to Col. P. Danaher  
(Roe, ECF No. 235-5)

UNDER SEAL