


HQBOR 120/12.16



**U.S. Customs and  
Border Protection**

JAN 05 2018

MEMORANDUM FOR: All Chief Patrol Agents  
All Directorate Chiefs

FROM: Carla L. Provost   
Acting Chief  
U.S. Border Patrol

SUBJECT: Medical Conveyances Transiting Through Checkpoints

This memorandum provides guidance when dealing with medical conveyances transiting through U.S. Border Patrol immigration checkpoints.

At certain locations, U.S. Border Patrol operates immigration checkpoints where Border Patrol agents stop motorists to engage in a brief inquiry to determine whether the individuals have a lawful basis to be in the United States. U.S. Border Patrol Checkpoint Directive OBP 50/8b-P states, in Section 2.6 that *"No person or vehicle is exempt from inspection procedures at Border Patrol checkpoints. The only exceptions shall be in cases where health, safety or exigent circumstances exist."*

Medical conveyances engaged in immediate emergency operations should always receive expedited transit through or around a checkpoint.

Sector Border Community Liaisons should engage with local medical stakeholders in order to explore the possibility for preemptive notifications. Any pre-notifications made by medical staff that suggest a traveler or accompanying passenger is in the United States illegally, should be reported immediately through your chain of command for guidance.

If the situation involves a non-urgent medical transfer, determination of alienage may be accomplished through normal processes, including through secondary inspection, if appropriate, or as operationally feasible depending on the particular circumstances of the case. At times, medical conveyances, to include those that are privately owned, arrive for inspection at the checkpoints with a passenger who is an accompanying adult, parent, relative, or spouse who is neither a patient nor part of the medical conveyance staff. These persons are not exempt from an immigration inspection, but very often factor into the decision making process of the inspection, as they may have to authorize continued critical care for the patient. Therefore, these individuals should be processed promptly when feasible along with the immediate patient and attending medical staff.

While it is difficult to outline all types of encounters, each circumstance will need to be addressed on a case-by-case basis with guidance provided by leadership. In the event that a follow-up inspection or immigration interview of the vehicle occupants is conducted at the hospital, sectors are reminded to be cognizant and familiar with the sensitive location policies when applying this guidance.

Please direct any questions regarding this matter to Acting Associate Chief Sandi Goldhamer at [sandi.i.goldhamer@cbp.dhs.gov](mailto:sandi.i.goldhamer@cbp.dhs.gov).