

Date: 28 June 2020 Document Code: 20-02

Version: 02

#### Guidelines

# International Passengers Departing at Airports in Pakistan

# **Objective**

To provide guidelines to the aviation authorities and crew regarding identification, management and reporting of suspected case of COVID 19 to reduce the risk of COVID 19 transmission from passengers departing from Pakistan. The is scoped for international airports and intends to evaluate health status of passengers before travel abroad by air.

#### **Rationale**

The COVID-19 outbreak is a global public health challenge, causing acute respiratory illness leading to severe pneumonia and death in a segment of the cases. Exit screening is a public health intervention used to identify persons with possible symptoms of, or risk of exposure to a communicable disease to prevent them from further travel. Screening measures are based upon risk and can be adapted for airports, land border crossings and sea (Points of Entry-PoEs).

It should however include a mass public health communications campaign to educate travelers regarding the following:

- Travelers who are sick should consider postponing travel
- Travelers should plan to arrive early at the airport
- Temperature scanning/medical examination will be required at airports
- Public Health Declaration Questionnaire may be required to be filled
- Boarding may be denied to any person with an illness consistent with Covid-19

As a general principle, travelers should be subject to Exit Screening as early as possible upon arrival at the airport. This screening is equally applicable to crew and staff of departing aircraft.

#### **Definitions**

**Contacts** are individuals engaged in activities that may put them at a higher risk of exposure to COVID-19:

- A person with travel history of high-risk areas in last 14 days.
- Any person having a direct physical contact or caring for an individual with COVID-19 in last 14 days.
- Any person working in a laboratory where COVID-19 samples are processed.
- Any person in close contact of the suspected/confirmed case.



- Any person who have been seated on an aircraft within 2 meters of another suspected/ confirmed case.
- Any person from the aircraft crew exposed to a case.

*Symptomatic* means developing the symptoms specific to a disease - COVID-19 in this case. Symptoms include fever, dry cough and/difficulty in breathing.

Asymptomatic means absence of any symptoms specific to a disease - COVID-19 in this case

## **Preparations-Administrative and Logistics**

It is of utmost importance that preparations are made well before the execution is expected:

- Average number of International departures in the past couple of years for understanding the load.
- Segregating flights, ensuring maximum workforce
- Weekly schedule of all the flights to be available with details such as:
  - o Origin and route
  - o Time of departure
- Identification of competent staff from the current stock
  - o Personnel at health counters
  - Doctors
  - o Nurses/ Paramedics
  - o Data operators
- Detailed trainings with refreshers of all the staff and clear guidelines for their roles and responsibilities
- Isolation area in departure lounge for Secondary Screening
- Establishing coordination between Central Health Establishments and
  - Airlines
  - Customs
  - o FIA/ ASF/ CAA
  - o ED/Directors of the Hospitals
  - o LEAs / NDMA
  - o Ministry/Departments of Health etc.

## **Operations**

Once administrative and logistic requirements are met with, operational modalities would need exact specifications, following is recommended:

**STEP -1:** Inside the international departure lounge, arrangements should be in place for **social distancing** i.e. distance of at least 6 feet between travelers (makings) and availability of hand washing/sanitizers.

#### **STEP -2: SCREENING**

The **Exit Screening** (as per WHO-protocol) consists of two steps:

A. Primary Screening



#### B. Secondary Screening

#### A. PRIMARY SCREENING

It identifies travelers with signs, symptoms or risk of exposure to communicable disease i.e. Covid-19 and is a process to identify:

- Temperature measurement by thermo-scanner / thermo-guns.
- Travelers exhibiting signs and symptoms of the disease.
- Review of the Public Health Declaration Questionnaire, to determine risk, if required (Annex 'A').
- A temperature threshold of 99\*F is recommended.

In case traveler is found FREE from temperature and sign/ symptoms, he will be allowed boarding as per routine.

#### **B. SECONDARY SCREENING**

The travelers detected with high temperature or signs and symptoms of COVID-19 through primary screening will be referred to secondary screening area inside lounge for further evaluation.

Boarding should be deferred until further assessment and recommendations are made during the secondary screening process.

Secondary screening includes in-depth interview by medical professional, completion of Secondary Screening Form by health person, additional temperature measurement and medical examination.

The above information if confirmatory to COVID-19 suspect, will be used to evaluate the traveler *either to*:

1. Deny boarding for 14 days at least and/or refer to medical facility for Isolation/quarantine. Public Health Authorities should also be notified.

#### 2. Traveler may continue to check-in if:

- They have no known risks for COVID-19 exposure as determined by the secondary screening.
- They do not exhibit any of the signs or report any symptoms consistent with COVID-19
- They do not have a fever as verified during the secondary screening.

#### **STEP-3: PRE-EMBARKATION**

- The aircrafts will be disinfected in accordance with procedures prescribed by PCAA at each station before passenger boarding. This procedure shall be aircraft log.
- An inventory of required PPEs (protection suit, gloves, surgical masks, N-95 masks, and goggles, etc.) shall be maintained in each aircraft.
- Passengers are to be scanned through thermal devices for COVID-19 before boarding as described in pre-screening procedure.
- Passengers must be seated with a gap of at least one adjacent seat.
- Boarding of passengers is to be done in a manner that the prescribed distance is maintained during boarding.



#### **STEP-4: DURING FLIGHT**

- All the passengers shall wear mask throughout the duration of flight.
- Passengers will only be allowed to sit in the allocated seats.
- Any passenger having sign /symptoms of COVID-19 must immediately inform the cabin crew.
- Last three rows will be kept vacant for the passengers displaying symptoms of illness.
- All cockpit and cabin crew will wear appropriate Personal Protection Equipment (PPE).
- Cabin crew will provide hand sanitizers at least twice during the flight to each passenger.
- Cabin crew will spray disinfectant in the lavatory once during the flight.
- Cabin crew shall use alcohol-based disinfection wipes.

#### STEP-5: PRECAUTIONS MEASURES FOR STAFF

Overall precautions against the spread of COVID-19 shall be observed by all the staff concerned in these guidelines. It is also important that if any of the staff members has symptoms of the disease has to be reported at the earliest and isolated as per protocols. IEC material to be explained to the staff at the airport during detailed briefs and at the same time measures ensured for the aircraft crew.

#### **STEP-6: DATA COLLECTION**

- The data of suspects as collected by CAA staff and will be forwarded to CHE for entering on Travelers Surveillance Management Information System-TSMIS at airports and forwarded to HQ Central Health, Islamabad.
- This data will then be transferred to NEOC.
- NIH and respective labs will be required to convey positive results to the CHE staff for entering the data system and for further follow up.

Note: The above recommendations are being regularly reviewed by the Ministry of National Health Services, Regulations & Coordination and will be updated based on the international & national recommendations and best practices.

The Ministry acknowledges the contribution of Dr. Irfan Tahir, Syeda Shehirbano Akhtar, and HSA/ HPSIU/ NIH team to compile these guidelines.

#### **References:**

- World Health Organization. Operational considerations for managing COVID-19 cases or outbreak in aviation, Interim guidance, March 2020
- 2. ICAO Global Aviation Safety Plan

#### For more information, please contact:

HSA/ HPSIU/ NIH, PM National Health Complex, Islamabad

http://covid.gov.pk/

http://nhsrc.gov.pk/ https://www.facebook.com/NHSRCOfficial

http://www.hsa.edu.pk/ https://twitter.com/nhsrcofficial

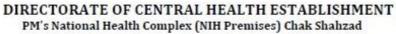
https://www.nih.org.pk/ https://www.youtube.com/channel/UCdYuzeSP4Ug1f\_\_ZZKI



#### Annex 'A'



# **GOVERNMENT OF PAKISTAN**





\*\*\*\*

# SECONDARY EXIT SCREENING FORM FOR SUSPECTED TRAVELLERS TO INTERNATIONAL FLIGHTS AT AIRPORTS

# PLEASE FILL IN COMPLETE FORM.FALSE INFORMATION OF INTENT WILL BE FOLLOWED WITH LEGAL CONSEQUENCES

Name	Sex: □Male □Female
Date of Birth	Nationality/Region
Passport No	Destination
Flight No.  1. The destination country  3. Please describe the countries and cities (1)	Seat No  2. Flight No towns) where you stayed within the last 14 days?
<ol> <li>Have you had close contact with COVID-1 and/difficulty in breathing within the last:</li> <li>If you have the symptoms and diseases,</li> <li>Fever</li></ol>	19 patients / person with Dry cough, Temperature 14 days? Yes □ No □ please mark with " √" in the corresponding "□" throat □ Fever /omiting □ Runny nose □ Breath
Signature of passenger	Date:
GENERAL PHYSICAL EXAMINATION BY M SYSTEMIC EXAMINATION BY MEDICAL OF	
FIT TO TRAVEL	UNFIT TO TRAVEL
	Health Authority  (Signature and Seal)