- The role of Port Health
- Services Provided
- Procedure for bringing a sick passenger in the country
- A case study involving a transgression
- Conclusion
ROLE OF PORT HEALTH

- The role of Port Health is to serve as the first line of Defence to protect the citizens of South Africa and visitors against the entry of communicable diseases associated with cross border movement of people, conveyances, baggage, cargo and imported consignments.
PORT HEALTH SERVICES

- The service is rendered by Environmental Health Practitioners (EHP), Professional Nurses (PN) and Medical Officers (MO).

- There is regular communication with the district, provincial and national CDC’s who form part of the Outbreak Response Team (ORT).

- Port Health Services are regulated by an International Health Regulation (IHR2005) that coordinates health services between countries.
SERVICES PROVIDED BY Lanseria Port Health Clinic

- Screening of known sick passengers brought in by Mercy Flights from countries outside South Africa.
- Medical screening of passengers coming in through International Arrivals who have been detected to be having raised temperatures by thermal scanners installed within the airport premises.
- Raised temperature is a high indicator of infectious diseases that may include formidable diseases like the Viral Hemorrhagic Fevers
SERVICES (CONT.)

- Provision of Yellow Fever Vaccination to travelers requesting this
- Provision of Emergency Care services to patients in and around the airport as the need arises
- HIV and AIDS counseling and testing
- Provision of family planning services
- Skeletal Primary Health Care Services
AC1 and AC2 forms (Medical details forms) are forwarded to Port Health staff by aero medical companies stating diagnosis of the patient and asking for permission to bring in the patient to South Africa for advanced medical care.

A medical report stating the condition of the patient, investigations and treatment given also accompany these forms.

The Professional nurse on duty will do the necessary evaluation of the above documents for informed decision and approval of the patient to be transported into the country.
If the PN is in doubt and cannot make the decision she will consult the medical officer on site or on call for further evaluation of the report.

If necessary the medical officer then consults the consultant or senior medical advisor.

No sick passenger may leave his/her country before permission has been obtained and communicated to aero medical company by port health.

On arrival of the patient the nurse on duty does a visual observation of the patient to detect any visible signs suggesting any communicable disease.
The conditions that sick passengers present with range from
- trauma,
- acute life threatening conditions,
- chronic conditions
- wide range of communicable diseases some of which are notifyable
For patients with communicable diseases, the Port Health Nurse will discuss the case with the matron/infection control nurse of the receiving hospital. This is to ensure that the infection control precautionary measures are put in place at the receiving hospital before the arrival of the patient.

The concerned district communicable disease coordinator (CDC) is informed when the patient lands.

For those with communicable diseases requiring notification they are notified, and weekly zero reporting done every Wednesday.
UNANOUNCED MERCY FLIGHT PASSENGERS

- PN to gather information from referring and receiving doctors
- Inform Medical Officer
- Medical Officer to inform Clinical Advisor and NICD if passenger suspected to have formidable communicable disease
- All Medical Personnel to adhere to intensive infection control measures
- Case to be notified then closed
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<tr>
<th>CRITICAL TELEPHONE NUMBERS</th>
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<tr>
<td>PORT HEALTH : 011 701 3309</td>
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<tr>
<td>PORT HEALTH CLINIC : 011 701 2077</td>
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<td>NICD HOTLINE : 082 883 9920</td>
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<td>SENIOR MEDICAL ADVISOR : 082 330 1490</td>
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<td>PROVINCIAL CDC MANAGER : 082 335 3134</td>
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<td>CHARLOTTE MAXHEKE HOSPITAL : 011 488 4911</td>
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<td>COJ EMS : 011 375 5711</td>
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INFRARED THERMAL SCREENING

- All passengers picked up by the scanner with a raised temperature are escorted to the clinic for further assessment.
- At the clinic further evaluations are carried out by the attending professional nurse and medical officer.
- Depending on the findings, the passenger will be evaluated, treated, isolated, referred for further medical care or discharged home and health information given.
CHALLENGES

- Acute Staff Shortage.
- Effective and Speedy IT Communication system:
- Some Aero medical companies (New Operators) often do not disclose the conditions of their sick passengers. They are inclined to be dishonest about their symptoms in order to gain clearance for evacuations.
- Some Aero medical companies (New Operators) bringing in sick passengers without prior approval.
Some passengers do not disclose their correct home addresses. These make follow-up of those with communicable diseases quite difficult.

Sick passengers using commercial flights or chattered planes
With the growth of our airports and global travel the demand for the service is increasing.

The present Ebola outbreak is challenging our systems and procedures as well as our readiness for execution of our mandate.

With the co-operation of all stakeholders service delivery is reviewed continuously.
On 04/10/2014 23h07 Lanseria Port Health Clinic informed the Medical Officer (MO) on call that there was a request from one of the new operators to evacuate a sick passenger with a diagnosis of Sickle Cell Anemia.
CLINICAL PRESENTATION

- She had presented on 28th September 2014 at the hospital for routine hematology follow up.
- She was febrile, temp 38.2 C; jaundiced, pale, petechial rashes and ecchymosis
- Blood results: Hb 5.3; Plat 15; WCC 14.8 Absolute lymphocytes 72%
- LFT: Total Bili 7.8; Direct Bili 3.1; AST 358; ALT 109; GGT 235; ALP 140
- Ebola PCR - Negative
- Blood cultures no growth
The MO at Lanseria discussed the case with NICD and was advised that evacuation for this passenger be declined.

The message was duly communicated to the Aero medical company who had sent the initial request.

Later that morning Port Health Clinic was informed that the patient was already enroute.

Head of NICD and advisor from NDOH then advised that the sick passenger not to be turned back.
The receiving hospital and EMS were informed to take extra ordinary infection control measures and have the patient isolated.

The patient was subsequently taken to a Hospital in Pretoria.

This was a serious transgression of the existing procedures.

Attempt were undertaken to look at the gaps in our systems and plot the way forward.
- Ongoing discussions are held with all stakeholders
- NDOH has set a NatHoc for assessment of cases high risk countries
- Surveillance has been intensified at all ports of entry
- Ebola Preparedness training is ongoing in all provinces
- Simulation exercises are ongoing
- Discussions were held with the operator in questions and matter resolved
THANK YOU