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General view of Kuwait International Airport (KIA)

State of Kuwait

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Management for a traveler who was discovered to have a communicable disease onboard during flight is a <u>costly situation to any air operator</u> when a decision is made to <u>land in unscheduled transit airport</u>.

Such a decision need to be done through a <u>mixture of regulations from IHR-</u>, <u>ICAO –SARP</u>, <u>ACI and IATA recommendations</u>.

Kuwait international Airport (KIA) manage an <u>average of 18 such cases /year</u> because of <u>the position of the airport before a flying bottle neck of around 2.30 hours flying north to Europe</u> with no suitable facilities for such landing after KIA position till next one which is Istanbul Airport ,for most of international carriers over passing the Arabian Gulf to Europe .

So we are going <u>first to highlight these related regulation</u> from IHR,ICAO,ACI and IATA ,then apply it in a practical stream line way .



Main differences from a normally arriving aircraft carrying a traveler with a communicable

disease posing a serious public health risk

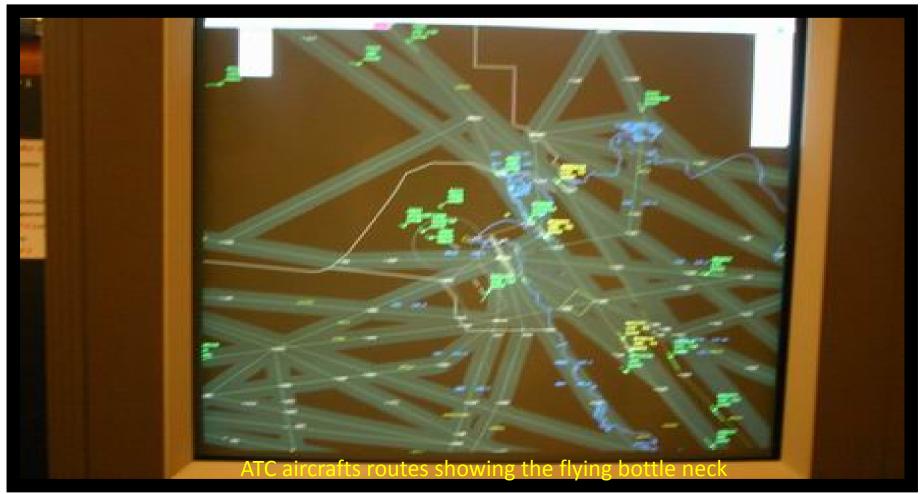
- -The medical situation for the ill traveler need ground medical attention that cannot be provided onboard.
- -Transit airport is not the schedule station.
- -The aircraft is still full of fuel and heavy with possible landing risk which needs engineering check after landing .
- -There may be no agent for the operator to service the aircraft at this transit airport.
- -Disruption and delay is expected for passengers onboard.
- -After the exit of the ill traveller and his escort ,aircraft may needs disinfection, refuelling, collection for full health cards information to be sent for original destination airport.





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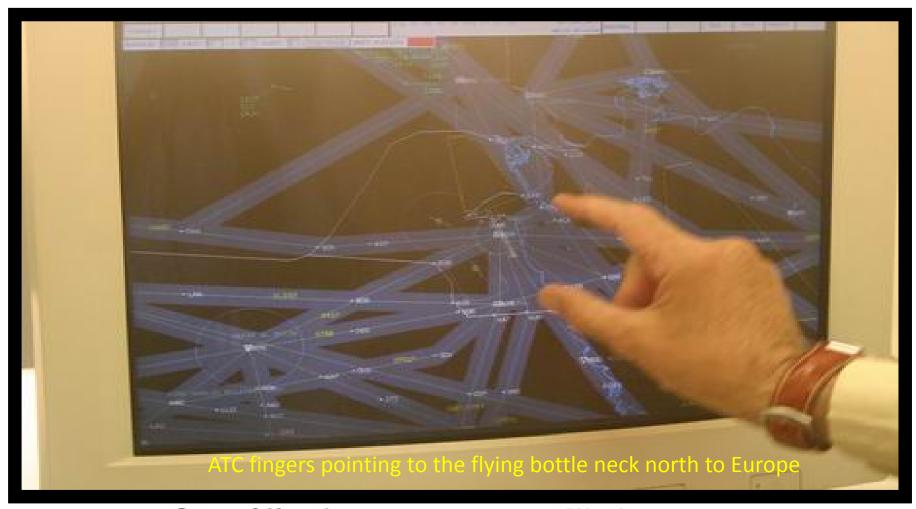


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- 1-Discovery of traveler onboard with communicable disease, crew management, captain action
- 2-ATC on route action, ATC of the transit station action.
- 3-Transit airport action.
- 4-Transit airport Health authority preparation action.
- 5-Onground aircraft and passengers management by transit airport.
- 6-Transport of the suspected traveler to local airport health center.
- 7-management for accompanying family or escort.
- 8-Aircraft engineering checks and subsequent delay management.
- 9-Release of the aircraft to destination.
- 10-Health cards information to next and departure airports health authority.



Cabin Crew are the first front main defense group for management and prevention of spread of any communicable disease in flights and from there to destination airports ,because they are the first group to discover, deal with and report it .

General Guidelines for cabin crew for Management

of Communicable Disease Events During Flight is of utmost important to help them to suspect and manage a traveler with influenza-like symptoms (communicable disease) in order to reduce the potential transmission on board and to prepare follow-up actions with airport operators and local public health authorities at destination or transit stops. They should use the GD- (Declaration of Health) as a reference for such suspicion.



GENERAL DECLARATION-Declaration of Health

A communicable disease is suspected when a traveler develop:

fever with a temperature of (38°C/100°F or greater), associated with:

- Appearing obviously unwell
 - Persistent vomiting
 - Persistent coughing
 - Skin rash
 - Impaired breathing
- Bruising or bleeding without previous injury
 - Persistent diarrhoea
 - Confusion of recent onset)

(FBBBCC DR UV)

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Cabin crew have no time to read (Declaration of Health) during flight.

It is better to train Cabin Crew **to suspect** a communicable disease when a traveler develop the following situations in this real time flight clinical order:

If a Traveler develop a Fever with a temperature of (38°C/100°F or greater),

- Appearing obviously unwell WITH Confusion of recent onset
 - Persistent coughing WITH Impaired breathing



associated with:

Persistent vomiting
Persistent diarrhoea

- Skin rash-

- Bruising or bleeding without previous injury-

If the medical situation found onboard cannot be managed, then a decision should be made to land in the nearest airport for a transit stop to evaluate the health situation of the suspected passenger, then:

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• Crew should advise the Captain of the situation, to report the suspected cases to the nearest Air Traffic Controller, who should inform the local ATC Manager in duty of the situation onboard the affected aircraft, as follow:





A)The Commander of the aircraft shall notify the Air Traffic Services Unit of Kuwait International Airport about the suspected case of communicable disease onboard the aircraft and should furnish the following information:

Aircraft Identity

Point of Departure

Airport of Arrival

Estimated Arrival time

Numbers of Passengers on Board the Aircraft

Numbers of Suspected Cases on Board the Aircraft

Nature of the Risk to the Public Health if is it Known to the Commander



• When a notification is received from the commander of the aircraft reporting that there is communicable traveler onboard his aircraft, the Air Traffic Services Unit duty supervisor shall inform the Emergency Operations Centre at Kuwait International Airport so they can prepare for receiving the suspected case.

, who should inform the local Airport Health Center. This situation should be managed under IHR regulations article - 28



B) The decision for the parking place usually will be taken by the public health authority in consultation with airline and airport operators. This should be on a remote stand, without a passenger boarding bridge attached, which have all the relevant facilities which enable continued ventilation of the aircraft and allow easy accessibility for public health personnel to assess any suspect case(s) and permit efficient clearance of passengers.

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Kuwait International Airport(KIA) showing outside terminal Parking Places

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Article 28 Ships and aircraft at points of entry Part 1-an aircraft

shall not be prevented for public health reasons from calling at any point of entry. However, if the point of entry is not equipped for applying health measures under these Regulations, the

aircraft may be ordered to proceed at its own risk to the nearest suitable point of entry available to it,

unless the aircraft has an operational problem which would make this diversion unsafe.



WHO--Article 28 -aircraft at points of entry

Part 1- As provided in applicable international agreements, an aircraft shall not be prevented for public health reasons from calling at any point of entry.

Part 2- As provided in applicable international agreements, aircraft shall not be refused free pratique by States Parties for public health reasons; in particular they shall not be prevented from embarking or disembarking, discharging or loading cargo or stores, or taking on fuel, water, food and supplies.

States Parties may <u>subject the granting of free pratique to inspection</u> and, if a source of infection or contamination is found on board, <u>the carrying out of necessary disinfection</u>, <u>decontamination</u>, <u>disinsection or deratting</u>, <u>or other measures necessary</u> to prevent the spread of the infection or contamination.



(Article 28-IHR):

Part-3. Whenever practicable, a State Party shall authorize the granting of free pratique by radio or other communication means to a an aircraft when, on the basis of information received from it prior to its arrival, the State Party is of the opinion that the arrival of the aircraft will not result in the introduction or spread of the disease.

Part -4. <u>Pilots in command of aircraft</u>, or their agents, shall make known to the airport Air traffic control er as early as possible <u>before arrival</u> at the airport of destination any <u>cases of illness indicative of a disease of an infectious nature</u> or evidence of a public health risk on board as soon as such illnesses or public health risks are made known to the pilot. This information must be immediately relayed to the competent authority for the airport.

<u>In urgent circumstances</u>, such information should be <u>communicated directly</u> by the pilots to the relevant airport health authority.



(Article 28-IHR):

Part -5. The following shall apply if a suspect or affected aircraft, for reasons beyond the control of the pilot in command of the aircraft, lands elsewhere than at the airport at which the aircraft was due to land:

- (a) the pilot in command of the aircraft shall make every effort to communicate without delay with the nearest competent authority;
- (b) as soon as the competent authority has been informed of the landing it may apply health measures recommended by WHO or other health measures provided in these Regulations;



(Article 28-IHR):

- (c) unless required for emergency purposes or for communication with the competent authority, <u>no traveler on board the aircraft shall leave its vicinity</u> and no cargo shall be removed from that vicinity, <u>unless authorized</u> by the competent authority; and
- (d) when all health measures required by the competent authority have been completed, the aircraft may, so far as such health measures are concerned, proceed either to the airport at which it was due to land, or if for technical reasons it cannot do so, to a conveniently situated airport.



ICAO--Action by Air Traffic Services Unit (PANS- ATM, Doc 4444)

- 1.1-When a notification is received from the commander of the aircraft reporting that there is a suspected case of a communicable disease on his aircraft, the Air Traffic Services Unit duty supervisor shall inform the Emergency Operations Centre at Kuwait International Airport so they can prepare for receiving the suspected case.
- 1.2- Coordinate with Movement Control Centre (MCC) for assigning a <u>parking location</u> for the infected aircraft in an open Parking Stand <u>not connected</u> directly by an air bridge to the airport buildings.
- 1.3- <u>Isolate the infected aircraft</u>, which has the suspected case of a communicable disease away from the aircraft movement, passengers, and airport employees.
- 1-4. Advise commander of the aircraft to <u>prepare the aircraft for landing (cabin health work)</u> including presenting passenger locator card (PLF) for the 5 passengers rows needed by health authority upon arrival).
- 1-5.Obtain information from the commander about the aircraft landing weight and what preparations he needs for such landing.



It is the abnormal, non-routine flight where landing weight can be a problem. If a flight takes off at the maximum takeoff weight and then faces a situation where it must return to the departure airport or a nearby transit airport (due to certain mechanical problems, or a passenger medical problem for instance), there will be no time to consume the fuel meant for getting to the original destination, and the aircraft may exceed the maximum landing weight to land at the departure point or nearby transit airport. If an aircraft lands at more than its maximum allowable landing weight it might suffer structural damage, or even break apart on landing. At the very least, an overweight landing would require a thorough inspection for damage.



The Commander of the aircraft shall decide his aircraft landing method in **3 scenarios**:

- 1- <u>Jettison of fuel</u> for light landing (with ATC permission).
- 2- Jettison of fuel is not allowed or not economic, then over weight landing is expected.
- <u>3-Jettison fuel nozzle is not equipped in his aircraft</u>, then over weight landing is expected.
- **A-**For <u>over weight landing or if aircraft G-limit is exceeded</u>, then <u>special engineering check</u> should be done by an(Authorized Frame and Type Rating Engineer) for the landing gear ,check for tail skid ,and fuel tanks integrity ,who may be not available at the airport or has to be called uponn from another airport ,or the aircraft may need Hanger inspection , then this subsequently will cause a long delay .
- **B** <u>Delay of the aircraft leads to disembarkation for the rest of travelers</u> to a special isolation hall equipped with all available needs including food, drink, resting and communication facilities ,toilets and for longer period a separate gender sleeping compartments areas.
- <u>C-Delay is more complicated if the aircraft have no designated service provider</u> at this landing airport, so the commander has to deal directly with all aircraft logistic, including payment for any catering, disinfection, engineering service or fuel provided.









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- Measures to be taken before the aircraft landing-IATA (Cabin Health work):
- Page for medical assistance on board or contact medical ground support
- Relocate the traveler to isolated area with cleared two rows front & back
 - do not reuses his vacated seat
 - Designate one cabin crew to look after the ill traveler
 - designate a specific lavatory for the exclusive use of the ill traveler
- clean and disinfect the commonly touched surfaces of the lavatories (faucet, door handles, and waste bin cover, counter top) after each use by the ill traveller.



 Measures to be taken before the aircraft landing-IATA (Cabin Health work):

Advise the ill traveler to:

- use tissues to cover the mouth and nose when speaking,
 sneezing or coughing.
 - practice proper hand hygiene
- air sick bag to be used for the safe disposal of used tissues
- Wear face mask, not be reused and disposed safely after use



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- Measures to be taken before the aircraft landing-IATA (Cabin Health work):
 - The designated cabin crew member should:
 - wear disposable gloves
 - should wear a mask
 - Avoid hand-face contact or repeated mask adjustment
- Avoid touching his ears, eyes and mouth as much as possible after shaking hands or touching any possible disinfected surface or person.
 - disposed used mask safely, practice proper hand hygiene
- Store soiled used items in a biohazard bag or sealed plastic bag.

--All surfaces that may have been in contact with a sick traveler need to be appropriately treated. Removable materials should be handled with biohazard precautions.

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- Measures to be taken before the aircraft landing-ACI (Cabin Health work):
- f) A traveler having a communicable respiratory disease should wear a surgical mask unless the traveler is unable to tolerate it.
- g) If the ill traveler cannot tolerate a mask, the designated cabin crew member(s) or any other person in close contact (less than 1 meter) with the ill person should wear a medical (surgical or procedure) mask.





Full Cabin aircraft makes separation of a sick traveler with a communicable disease unpractical to deal with

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any other person in close contact (less than 1 meter) with the ill person should wear nose mask (Similar to this situation)



- Measures to be taken before the aircraft landing-IATA (Cabin Health work):
 - The designated cabin crew member should:
- Ask accompanying traveler(s) if they have any similar symptoms
- Ensure hand carried cabin baggage identified ,follows the ill traveler and

comply with public health authority's request after landing

• ask <u>all travelers seated in the same row, and two rows in front</u> and two rows behind the ill traveler (i.e. a total of five rows) at least to complete a <u>Passenger Locator Form(PLC or PLF</u>), (but for unscheduled <u>Transit stops all passengers</u>).



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35. TRAVEL COMPANIONS - NON-FAMILY: Also include name of group (if any)

(3) (4)

Last (Family) Name

(1)

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First (Given) Name



Group (tour, team, business, other)

 Measures to be taken before the aircraft landing-IATA (Cabin Health work):

All Crew should practice Proper hygiene:

- hand cleansing, by means of applying an antiseptic hand rub
- Washing hands with soap and water for at least 15 seconds.
- Avoid touching ears, eyes and mouth as much as possible after shaking hands or touching any possible disinfected surface or person.
 - Avoid kissing and shaking hands as much as possible.
 - Cover mouth and nose with paper napkins/tissue after sneezing or coughing and ensure safe disposal of the same.
 - Keep galleys surface, working places and equipment disinfected at all times







Preparation for landing is complete



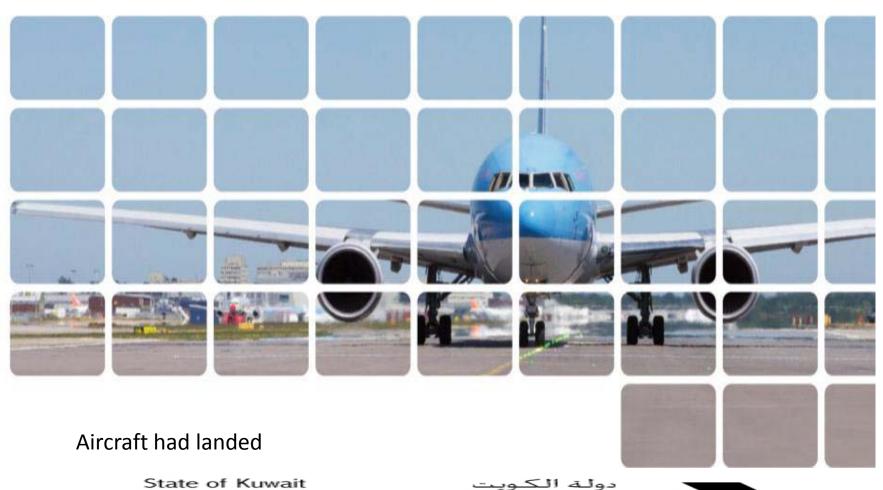


Aircraft is landing with over weight

Action by the Emergency Operations Center

- 1 Call the Kuwait International <u>Airport Medical Center</u> so they can prepare for the suspected case.
- 2 Call The Maine Emergency Operation Medical Center for initiating the necessary measures.
- Inform Airport Facilitation Center about the suspected case so they can initiate the necessary measures and formalities.
- 4 Inform the Airline Company or the aircraft operator which are entitled to the suspected case .
- Inform the Airport Security Department (Police) to arrange a cordon around the parking stand of the arriving aircraft to prevent getting close to the infected aircraft except for the specialized staff.









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Action by the Emergency Operations Center-ACI

- c) Flight and ground crew need to be advised concerning the opening of aircraft doors, disembarkation and what information should be given to travelers prior to the arrival of the medical team.
- d) Public health officials need quick and efficient access to the aircraft.
- e) Personal protective equipment (PPE) appropriate to the suspected communicable disease, the mode of transmission and the nature of duties being performed by aviation personnel, should be worn. For many communicable diseases, disposable gloves and good hand hygiene (at times in combination with surgical masks) are sufficient.





Medical team is onboard checking affected traveler for temperature degree





Personnel protective equipments appropriate for the nature of suspected communicable disease should be worn

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Action by the Emergency Operations Center-ACI

- f) A traveler having a communicable respiratory disease should wear a surgical mask unless the traveler is unable to tolerate it.
- I) Before disembarkation, travelers and crew on the same aircraft as the sick traveler should be segregated from other travelers until traveler seating details, contact details and destination have been obtained and they have been advised by public health authority staff of any necessary precautionary measures.
- g) <u>All surfaces that may have been in contact with a sick traveler</u> need to be appropriately treated. Removable materials should be handled with biohazard precautions.
 - h) A sick traveler should be appropriately escorted from the aircraft to an area for further assessment/treatment.



Action by the Emergency Operations Center-ACI

- l) Consideration should be given to <u>the comfort of all passengers</u>, particularly if placed in isolation, or <u>detained</u> on board the aircraft. Provision should be made for <u>food</u>, <u>water and other essentials</u>.
- m) <u>Communication with affected travelers</u> is vital to ensuring that discord is not created. <u>Travelers should be kept informed</u>, and staff should be available to reply to questions.
- n) A procedure for transporting a sick traveler to hospital needs to be in place.



Action by Airport Medical Centre

- 1 <u>Up on receiving a notification</u> regarding a suspected communicable case onboard an aircraft, the <u>Airport medical Centre Team shall proceed immediately to the parking location</u> and start all initial medical examinations to determine whether the traveler has got a possible Communicable disease case or not.
- If the condition is prove to be a suspected case of communicable disease, the patient shall be transferred to the Airport medical Center, isolated from other passengers, travelers, and airport employees for initiating the medical treatment process.
- The transfer for the affected traveler from the aircraft shall be done by what we call (Bare Ambulance car) or simple equipped ambulance car i.e. ambulance car with a minimal equipments onboard, like only oxygen cylinders, to avoid the necessary costly sterilization for the equipments later after traveler departure,
- 4 with a <u>similar fully equipped second ambulance car waiting standby</u> from which we can get any equipment as needed.
- 5 <u>Gather extra information</u> from the patient relatives who are traveling with him at the aircraft or at the airport medical center, and collect the PLC for the needed 5 rows around the affected traveler.









Traveler patient is in his way to the airport medical center after transport from the aircraft



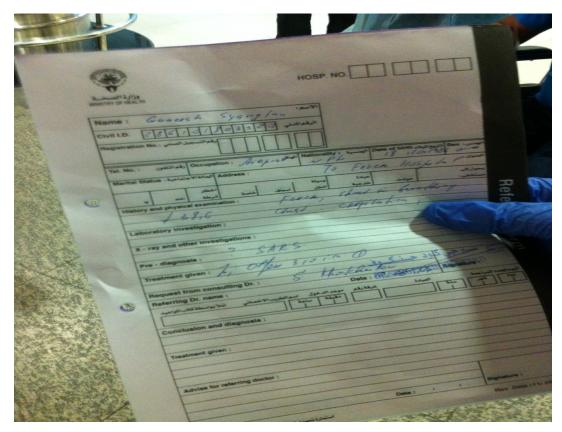
Traveler patient is in the airport medical center

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Action by Airport Medical Centre

- 5 <u>Contact the regional Medical Hospital to transfer the patient</u> and to finalize his treatment.
- **Coordinate with the Airport Operation Department Coordinator** with regard to the suspected case latest updates and facilitation process needed .
- 7 <u>collect PLC information for the rest of passengers on board as if this transit stop is the final destination airport</u> for sending it later for destination airport (as the aircraft become a clean aircraft).
- 8 <u>Create an isolated infected passengers area(Quaratin) before transporting them to the Airport medical Centre</u> if there is long waiting delay time for the aircraft du to engineering technical situation.
- 9 Provide all necessary preventive Medical Supplies for protecting the passengers and airport staff.
- Before disembarkation, travelers and crew on the same aircraft as the sick traveler should be segregated from other travelers until traveler seating PLC details, contact details and destination have been obtained and they have been advised by public health authority staff of any necessary precautionary measures.





Traveler patient Transfer reference letter to the regional Hospital







Traveler patient is in his way to the regional medical hospital after referral





It is important that Transit stop airport Health Authority to perform the same duties as if this is the destination airport including PLF for all of the rest of passengers, as when the affected traveler is taken out from the aircraft and then aircraft go back to its destination, then it is not going to be considered as an aircraft with a communicable disease traveler on board but as any normal (Clean) aircraft, so no health precautions is going to be imposed on this aircraft upon arrival, and so if the transit stop did not perform all duties as the scheduled destination then all traveler PLF information shall be lost for follow-up.

-<u>If the aircraft engineering check up is acceptable with minimal delay</u>, then no need to get PLF from the rest of passengers after consultation with WHO(Focal Point) Local representative at destination airport.



Annex 9-8.15.1 Recommended Practice.— When a public health threat has been identified, and when the public health authorities of a Contracting State require information concerning passengers' and/or crews' travel itineraries or contact information for the purposes of tracing persons who may have been exposed to a communicable disease, that Contracting State should accept the "Public Health Passenger Locator Card" reproduced in Appendix 13 as the sole document for this purpose.



(Article 42-IHR) Implementation of health measures

Health measures taken pursuant to these Regulations shall be initiated and completed without delay, and applied in a transparent and nondiscriminatory manner.

(Article 43 –IHR).

This delay, should <u>not be more than</u> 24 hours.

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Action by KIA (Kuwait Airport- Facilitation Center)

- Airport Facilitation Center Staff shall take the necessary measures to protect the passengers and airport employees from becoming contagious and coordinate with Ground Handling Agent Representative to help in the isolation of the suspected cases so the disease will not spread.
- Assign a coordinator from the Airport Facilitation Center specialized in dealing with this type of cases and to coordinate with Head of Medical Team, Airline Company Representative and Ground Handling Agent to facilitate all necessary measures needed for the affected traveler and the rest of aircraft onboard travelers.
- Facilitate in exiting the patient from the airport when he needs to be transfer to the Regional Medical Hospital in coordination with the Airport medical Centre and KIA Passport Department (Immigration office).
- 4 <u>Facilitate disembarking the rest of passengers</u> from the aircraft for any unexpected delay for the aircraft to depart to its destination.



Action by the Aircraft Operator - Airline Company

1 <u>The Commander of the aircraft</u> shall notify <u>the Air Traffic Services Unit</u> of the Kuwait International Airport about the Epidemic or the viral case on the aircraft and should furnish the following information:

Aircraft Identity
Point of Departure
Airport of Arrival
Estimated Arrival time

Numbers of Passengers on Board the Aircraft Numbers of Suspected Cases on Board the Aircraft

Nature of the Danger to the Public Health if is it Known to the Commander

- 2 <u>Cabin Crew should implement all approved in flight or ground company procedures</u> related the management of onboard communicable diseases.
- The Commander of the aircraft shall inform the Ground Handling Agent with all the information he knows about the suspected case.
- 4 Coordinate with the Airport Medical Centre with regards to health situation of the suspected case.
- 5 Coordinate with the Airport Medical Centre and the Ground Handling Agent to <u>sterilize the aircraft after</u> evacuation of the suspected case and performing all necessary procedures.
- 6 <u>Ground agent should Follow up on the suspected case situation</u> at <u>the regional medical hospital</u> until he leaves and depart from the country.







An Aircraft had scud the tail during over weight landing

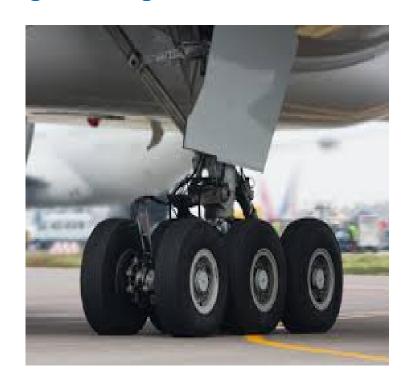




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Landing Gear and Tires needs full inspection for damage or burst after over weight landing













Airside Transit Hotel at KIA can be used for lay over of delayed travelers







Measures to be taken after the aircraft landing:

j) Procedures need to be in place for <u>obtaining baggage</u>, <u>customs</u> and <u>security clearance of a sick traveler</u>,

All surfaces that may have been in contact with a sick traveler need to be appropriately treated. Removable materials should be handled with biohazard precautions.

** Ambulance car used should be also appropriately treated.





General overview for what is really needed for an aircraft disinfection









Aircraft Interior Cleaning and disinfection





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Aircraft flying Back to its original destination

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Thank you

Dr. Mubarak Aldoub

Consultant Aviation Medicine
Directorate General Of Civil Aviation-Kuwait
Safety Department-Kuwait International Airport

