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No. PHB/PHR-19/308/2019

भारत सरकार

Government of India पोत पत्तन स्वास्थ्य संघटन

Port Health Organisation

पत्तन स्वास्थ्य भवन

Pattan Swasthya Bhavan

7-मंडलीक रोड, मुंबई-400001

उप संरक्षक का कार्यालय

7- Mandlik Road, Mumbai

दिनांक/Date

7 AUG 2019

## **CIRCULAR**

All the Steamer Agents Operating in Mumbai are herewith informed that considering the spread of Ebola Virus Disease (EBVD Or EVD) in some Countries like Democratic Republic of Congo(DRC), Uganda and risk of spread to other countries and possibility of entry of disease into India, Ministry of Health & Family Welfare, Govt. of India has issued necessary Guideline.

In the view of the above, to prevent the entry of EBVD into India through the Sea Port of Mumbai it has been decided to further strengthen the actions taken by Port Health Officer, Mumbai by taking active co-operation of all the steamer Agents operating in the Port of Mumbai.

Hence all the Steamer Agents are advised that they should make it compulsory to inform Master of the vessels under their Agency coming to Port of Mumbai to provide following documents well in advance in addition to routine documents, and submit them to PHO on working hours:-

- Full details of their vessel as per standard formats of Maritime Declaration of Health with declaration of sickness on board if any.
- Port of call with names of the Countries and date of Departure within 30 days.
- <u>Duly completed Part A of Health card for Self monitoring/declaration form</u>
   (<u>Specimen copy attached for photocopy</u>), from all the crew/passengers on
   board if the vessel
  - Has visited port/ports of affected country/countries. (Refer list of affected countries from WHO website <a href="www.who.int">www.who.int</a> or <a href="http://www.who.int/csr/disease/ebola/en/">http://www.who.int/csr/disease/ebola/en/</a>)
  - Has not visited affected country but having Crew/any person /passenger originating or was in transit in affected countries and joined the vessel within 21 days.

Here specifically it is mentioned that Health card is to be obtained/ submitted only in the above conditions.

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In case of Passenger Vessels the same information regarding Passengers is also to be provided in addition to the crew.

If there is any sickness on Board the vessel from other Indian Port, Vessel will be treated a Suspected / affected /Quarantine vessel & will be anchored for further necessary action as directed by Port Health Officer.

It is advised to restrict the number of persons boarding such vessels to the minimum number necessary.

All the persons who are boarding the vessel should maintain standard infection control practices and carry on self monitoring for 21 days as precaution.

Brief note on EBVD and Health card is enclosed for information and to be forwarded to the vessels for use. Part A of Health card is to be forwarded to PHO and Part B is to be retained by person filling the card, for guidance.

For any further clarification/information visit this office during working hours.

Active co-operation of all Steamer Agents in this regards will be highly appreciated.

(DR. DEEPAK SULE) PORT HEALTH OFFICER MUMBAI

पेत पत्यन त्यास्थ्य अधिकारी PORT HEALTH OFFICER पात तरकर / GOVT. OF MELA पूर्व / MEMBA

#### Encld .:

- Brief Note on Ebola Virus Disease.
- Health Card.

Copy to:

- 1. Deputy Conservator, Mumbai Port Trust, for information and with request for wide circulation
- Traffic Manager, Mumbai Port Trust, for information and with request for wide circulation
- 3. Chief Medical Officer, MbPT Hospital, Wadala, Mumbai
- MANSA, for information and with request for wide circulation among the members
- All Steamer Agencies operates in Mumbai for circulation and strict compliance.

## Brief Note on Ebola Virus Disease (EVD)

- Ebola Virus Disease (formerly known as Ebola Hemorrhagic Fever) is a Severe, often fatal viral illness, with a death of up to 90%. The illness affects humans and non-human primates (monkeys, gorillas and chimpanzees).
- Genus Ebola Virus is 1 of 3 members of the Filoviridae family (filovirus).
- Latest updates on EVD and countries affected can be obtained from WHO website http://www.afro.who.int/en/clusters-a-programmes/dpc/epidemic-a-pandemic-alert-and-response/outbreak-news.

#### Transmission

- Ebola is introduced into the human population through close contact with the blood, secretions, organs or other bodily fluids of infected animals, chimpanzee, gorilla, fruit bats, monkeys, forest antelopes and porcupines.
- Human-to human transmission, with infection resulting from direct contact (through broken skin
  or mucous membranes) with the blood, secretions, organs or other bodily fluids of infected
  people, and indirect contact with environments contaminated with such fluids, Health-care
  workers have frequently been infected while treating patients with suspected or confirmed EVD.
- The virus can be transmitted through semen of affected person upto 7 weeks after recovery from illness.
- Health-care workers have frequently been infected while treating patients with suspected or confirmed EVD. This has occurred through close contact with patients when infection control precautions are not strictly practiced.
- People are infectious as long as their blood and secretions contain the virus. Ebola virus was isolated from semen 61 days after onset of illness in a man who was infected in a laboratory.

#### Signs and symptoms

- EVD is a severe acute viral illness often characterized by the sudden onset of
  - o fever,
  - o intense weakness,
  - o muscle pain,
  - headache.
  - sore throat.
  - o vomiting,
  - o diarrhoea.
  - o rash,
  - o impaired kidney and liver function, and
  - o In some cases, both internal and external bleeding.
- Laboratory findings include low white blood cell and platelet counts and elevated liver enzymes.
- Incubation period: 2 to 21 days.

#### Case Definition EVD

### Suspected (clinical) case:

Any person ill or deceased who has or had fever with acute clinical symptoms and signs of
hemorrhage, such as bleeding of the gums, nose-bleeds, conjunctival injection, red spots on the body,
bloody stools and/or melena (black liquid stools), or vomiting blood(haematemesis) with the history
of travel to the affected area. Documented prior contact with an EBVD case is not required.

## Probable case (with or without bleeding):

- Any person (living or dead) having had contact with a clinical case of EHF and with a history of acute fever.

#### Contact:

A person without any symptoms having had physical contact with a case or the body fluids of a case
within the last three weeks. The notion of physical contact may be proven or highly suspected such
as having shared the same room/bed, cared for patient, touched body fluids, or closely participated in
a burial (e.g. physical contact with the corpse).

#### Confirmed Case:

 A suspected or probable case with laboratory confirmation (positive IgM antibody, positive PCR or Viral isolation).

#### Diagnosis

- Other diseases that should be ruled out before a diagnosis of EVD can be made include: malaria, typhoid fever, shigellosis, cholera, leptospirosis, plague, rickettsiosis, relapsing fever, meningitis, hepatitis and other viral haemorrhagic fevers.
- · Ebola virus infections can be diagnosed definitively in a laboratory through several types of tests:
- Samples from patients are an extreme biohazard risk; testing should be conducted under maximum biological containment conditions.

#### Prevention and control

### Risk of infection with Ebola virus and how to avoid it

- Casual contact in public places with people that do not appear to be sick do not transmit Ebola.
   One cannot contract Ebola virus by handling money, groceries or swimming in a pool.
   Mosquitoes do not transmit the Ebola virus.
- Ebola virus is easily killed by soap, bleach, sunlight, or drying. Ebola virus survives only a short time on surfaces that have dried in the sun.
- Instituting standard Infection control practices helps in reducing infection.

#### Reducing the risk of Ebola infection in people

- In the absence of effective treatment and a human vaccine, raising awareness of the risk factors for Ebola infection and the protective measures individuals can take is the only way to reduce human infection and death.
- Reducing the risk of wildlife-to-human transmission from contact with infected fruit bats or monkeys/apes and the consumption of their raw meat. Animals should be handled with gloves and other appropriate protective clothing. Animal products (blood and meat) should be thoroughly cooked before consumption.
- Reducing the risk of human-to-human transmission in the community arising from direct or close contact with infected patients, particularly with their body fluids. Close physical contact with Ebola patients should be avoided. Gloves and appropriate personal protective equipment should be worn when taking care of ill patients at home and should be disposed after use as per bio safety guidelines. Regular hand washing is required after visiting patients in hospital, as well as after taking care of patients at home.
- Dead patients to be handled for cremation/burial under bio safety precautions.
- Instituting specific Infection control practices.

#### Recommendations for ships

In case of a passenger presenting with symptoms compatible with EVD (fever, weakness, muscle pain, headache, sore throat, vomiting, diarrhoea, bleeding) on board of a ship, the following precautions must be applied:

- Keep his/her cabin doors closed, if not placed in a medical isolation room on board.
- Provide information about the risk of Ebola transmission to persons who will take care of the patient or enter the isolation area.
- · A log listing all people entering the cabin should be maintained.
- Anyone who enters the cabin to provide care to the person in isolation or to clean the cabin must wear PPE with:
- A surgical protection mask; and eye protection or a face shield
- Non-sterile examination gloves or surgical gloves;
- Disposable impermeable gown to cover clothing and exposed skin. A waterproof apron should be worn
  over a non-impermeable gown or when coming in close contact with the person in isolation

- Before exiting the isolation the PPE should be removed in such a way as to avoid contact with the soiled items and any area of the face.
- Limit the movement and transport of the patient from the cabin for essential purposes only. If transport is necessary, the patient should wear a surgical mask.
- Clean and disinfect spills without spraying or creating aerosol. Used linen, cloths, eating utensils laundry
  and any other item in contact with a patient's body fluids should be collected separately and disinfected in
  such a way as to avoid any creation of aerosol or any contact with persons or contamination of the
  environment. Effective disinfectant is a dilution of Sodium Hypochlorite at 0.05 or 500 ppm available
  Chlorine, with a recommended contact time of 30 minutes.
- All waste produced in the isolation cabin must be handled according to the protocol of the ship for clinical
  waste. If incinerator is available on board, then waste must be incinerated. If waste must be delivered
  ashore, then special precautions are needed and the port authority should be informed before waste
  delivery.
- Start case investigation immediately. Protective equipment is not required when interviewing asymptomatic individuals, when a distance of one meter is maintained.
- Close contacts should be identified and asked to do passive self-monitoring of temperature (e.g.
  monitoring temperature only if feeling feverish) and symptoms or active self-monitoring (e.g. by regular
  temperature measurement twice a day and for 21 days.

In the event of a suspected diagnosis of EVD on a ship, immediate expert medical opinion should be sought and the event must be reported as soon as possible to the next port of call by the Captain. The patient should disembark in such a way as to avoid any contact with healthy travellers and wearing a surgical mask. Personnel in contact with the patient during the medical evacuation should wear a surgical protection mask and PPE.

The competent authority at port may need to arrange depending on the situation: medical evacuation or special arrangements for disembarkation and hospitalization of the patient and laboratory diagnosis. Passengers, crew members and cleaning staff who have been identified through contact tracing should be assessed for their specific level of exposure. Passive self-monitoring of temperature (e.g. monitoring temperature only if feeling feverish) and symptoms or active self-monitoring (e.g. by regular temperature measurement twice a day) for those at higher risk level should be continued for 21 days.

#### Frequently Asked Questions

1. What is Ebola Virus Disease (EBVD)?

Ebola Virus Disease is caused by Ebola virus.

2. Which are the affected countries?

Confirmed cases of Ebola Virus Disease have been reported from Democratic Republic of Congo, Uganda, so far No case has been reported from India.

3. What is the incubation period?

Incubation period of EBVD is 2-21 days.

4. Can a person transmit the disease during incubation period?

No

5. What are the symptoms of EBVD ?

It presents as fever, headache, joint and muscle aches, weakness, diarrhea, vomiting, stomach pain, lack of appetite, and abnormal bleeding. Symptoms may appear with in 2 to 21 days (commonly between 8-10 days) after exposure to ebolavirus.

6. What is the source of infection?

In Africa, fruit bats are considered to be the natural hosts of the Ebola virus. It is transmitted to humans through the close contact with the blood secretions, organs or other body fluids of infected person and animals like chimpanzees, gorillas,monkeys, fruit bats etc

7. How is human to human transmission of Ebola Virus occurring?

Ebola virus is transmitted through direct contact with the blood or bodily fluids of an infected symptomatic person or though exposure to objects (such as needles) that have been contaminated with infected secretions. It is not transmitted through air.

8. Who is most at risk?

During an outbreak, those at higher risk of infection are:

- Health care workers (if they handle the patients without observing recommended universal precautions)
- Contacts and family members of the patients coming in contact with blood or other secretions and body fluids of the patient.
- Mourners who have direct contact with the bodies of the Ebola virus infected people as part of cremation/burial ceremonies;
- 9. Can a person get Ebola virus disease from contaminated food or water?

No. Ebola is not a food borne Or a waterborne illness.

10. Can the Ebola virus disease be transmitted by a person who is infected but doesn't have any symptoms? No. Individuals who are not symptomatic are not contagious. In order for the virus to be transmitted, an individual would have to have direct contact with an individual who is experiencing symptoms.

11. When should someone seek medical care?

If a person has been in an area known to have Ebola virus disease or in contact with a person known or suspected to have Ebola and they begin to have symptoms within 21 days of contact, they should seek medical care immediately by reporting to nearest designated hospital.

12. What is the treatment?

There is currently no specific treatment for this disease. However, by intensive supportive care the mortality can be reduced as well as the spread of the disease can be prevented by instituting specific infection control practices.

13. Can Ebola be prevented?

Yes, Ebola can be prevented by observing the following:

- Close contact taking care of the patients should follow standard infection control practices.
- Any person coming from Ebola affected Areas or coming in contact with suspected or confirmed EBVD and develops symptoms within 21 days should immediately report to health care facility.
- EBVD patient after cure should continue to follow infection control practices for a period of about two months.



# Ministry of Health and Family Welfare Government of India

# to Passengers/ Crew on Ebola Virus Health Card and Advisory Disease

All persons coming to India from countries reporting human cases of Ebola Vras Disease (EVD) such as Democratic Republic of CompgOREC). Ugands and any other country declared as EVD affected country by WHO will fill-up this proforms. You are requested to provide the following information to safeguard your own health.

00	2	0	5	4	12	
Name of Shapping	Port of final destination	Port and crumpy of origin of Journey	Date of Arrival	Passport No.	Name of Vessel	Danson

# Contact Address in India for Indian Nationals:

0	96	7	0	LA	+	w	10	-
E mail ID	Mobile Number	Residence Number	Pin	State	District/ City	Tehsil	Street/Village	House Number

9 E	N	\$ 95 30	- R
E mail ID	Mobile Number	ddress of country of origin	Residence / Hotel (in India)

## (PART-A)

# SCREENING FOR HUMAN CASES OF EBOLA VIRUS DISEASE (EVD)

Have you visited/transited from EVD affected countries\* in the last 21 days.

Yes/No

Have you experienced fever, muscle pain, headache, sore throat, vomiting, darrhea, body rash an the past 21 days.

Yes/No

Signature of the Crew /Passenger

Signature and Stamp of Master

For update on the list of affected countries please visit: http://www.who.mt/csn/disease/ebola/en/ \*Presently Democratic Republic of Congo(DRC), Uganda

(To be submitted to Port Health Officer)

14

Yes/No

facility for EVD.

Have you or any of your family member cared for or lived with or come in contact with a case of EVD or visited or worked in a hospital where cases of EVD are being

from Ebola Virus Disease to protect yourself, your Turn over to find easy ways family and your dear ones

Ugends are affected Democratic Republic of Congo(DRC),

For update on the list of affected countries please visit http://www.who.int/csr/disease/ebola/es/

If you are travelling from / transiting a country's reporting human cases of EVD and have fever at the time of embarkation, consider cancellation of the

If you develop fever during flight, inform the

cabin attendant immediately

weakness, muscle pain,

Report to health authorities

infected person!! fluids or secretions of an avoiding contact with body You can protect yourself by

vomiting, body rash etc!!! body ache, nausea, symptoms of fever, early if you notice Government of India would be conducting screening for all passengers travelling to India from countries reporting human cases of Ebola Virus Disease (EVD)

Important Information to Passengers:

is severe, often fatal disease! Ebola Virus Disease

At Home, self monitor your health. Record body temperature morning and evening

You would be discharged from health quarantine facility after the laboratory tests are found negative. In case the reports confirm EVD, you will be treated in isolation

admitted to a specified hospital for medical quarantine facility for observation or You may have to remain at the airport immigration check, a doctor would attend on you. Please answer his/her questions. necessary guidance At the time of disembarkation, before The cabin staff would provide you with

outcomes!!!!

helps in better treatment

Early case reporting

If you develop fever within 30 days of your arrival in India:

Convey them your travel history and the guidance received at the airport. Isolate yourself in a separate room. Contact local health authorities immediately

++ Do not allow family members to come in

Restrict entry of visitors to your house.

400

Wash your bands frequently.

Inform the Outbreak Montsoring Cell, National Centre for Disease Centrel at Tel No. 011-23921401

## for help! 011-23061302 011-23063205 011-23061469

outbreak country that has been affected by the Ebola virus disease If you have travelled from a

# You must !!!

- daily for 30 days body temperature twice Keep Record of your
- fever. and water frequently people if you develop places and meeting Stay away from public Wash hands with soap
- immediately. Government hospital Contact nearby