



**CONTINGENCY PLAN FOR CONTROL OF
COMMUNICABLE DISEASES
AT BBIAP ISLAMABAD**

STANDARD OPERATING PROCEDURE

VERSION : 1.0
DATE OF IMPLEMENTATION : 15-10-2015
OFFICE OF PRIME INTEREST : MEDICAL INSPECTION (MI) ROOM BBIAP

	NAME	DESIGNATION	SIGNATURE
PREPARED BY	DR. AJAZ AHMED	Officer In Charge MI Room, BBIAP Islamabad	
REVIEWED BY	SARDAR JAVAID ATTIQUE	Dy. Airport Manager BBIAP, Islamabad	
VERIFIED BY	FAISAL SAFDAR KHAN	Deputy Management Representative, SQMS BBIAP Islamabad	
APPROVED BY	MUHAMMAD AFSAR MALIK	Airport Manager, BBIAP Islamabad	
TYPE OF DOCUMENT	STANDARD OPERATING PROCEDURE (SOP)		
STATUS OF DOCUMENT	CONTROLLED		



A. **PURPOSE:**

This SOP describes the procedure for :

- A1. Screening of passenger suspected of showing Ebola & other communicable diseases symptoms arriving from the country where such epidemic has appeared.
- A2. Checking of passengers arriving from countries affected with communicable diseases such as Ebola, Swine Flu, Bird Flu, etc and to take precautionary measures to counter the global viral epidemic threat at BBIAP, Islamabad.
- A3. Segregation of suspected passenger showing symptoms to the quarantine area.

B. **SCOPE:**

- B1. This procedure applies to all International flights coming from such affected country (ies) to BBIAP, Islamabad.

C. **CORE RESPONSIBILITIES:**

- C1. APHO, being the incident commander, shall be responsible for:
 - C2.1. manning of public health services (PHS) space provided at PoE, i.e. near the gate of Int'l Arrival Lounge.
 - C2.2. inspection / medical examination / interview of passenger suspected of showing Ebola and other communicable diseases symptoms.
 - C2.3. the availability / coordination of designated ambulance for shifting of suspected passenger to the designated hospital(s), if required.
 - C2.4. coordination with CAA / airlines / ASF / GHAs / Customs / Immigration and designated hospitals
 - C2.5. coordination with MOH Govt of Pakistan for required resources / support.
 - C2.6. coordination with PRM CAA for dissemination of information to media (electronic / press).
 - C2.7. preparation, implementation and review of procedures regarding such emergency (ies) under guidelines provided by WHO / MoH.
- C2. AMO (CAA) shall be responsible to inform APHO of Health Department, CAA Duty Doctor at MI Room BBIAP and DFO Int'l Arrival lounge for ETA of international flight arriving from the affected country (ies).
- C3. DTM / DFO Int'l Arrival shall be responsible to arrange tape barriers at Health inspection counters (Int'l Arrival lounge) for screening of passengers in queue.
- C4. CAA duty doctor BBIAP shall be responsible to:
 - C2.1. coordinate / monitor / facilitate and act as disseminator in between health office personnel and Higher Management of CAA (APM, MM).
 - C2.2. review and update this SOP.

D. **DESCRIPTION:**

D1. **SIGNS AND SYMPTOMS:**

- D1.1 According to the WHO / PNIH, the typical symptoms of Ebola / Swine Flu / Bird Flu and other communicable diseases are (more or less):
 - D1.1.1 A sudden fever (a high body temperature of 38°C/100.4°F or above).
 - D1.1.2 A sudden cough.
- D1.2 Other symptoms, like seasonal flu may include:
 - D1.2.1 Headache / Fever
 - D1.2.2 Runny nose or stuffy nose

- D1.2.3 Sore throat
- D1.2.4 Body / muscles aches / abdominal (stomach) pain
- D1.2.5 Unexplained hemorrhage (bleeding or bruising)
- D1.2.6 Chills
- D1.2.7 Fatigue or tiredness, which can be extreme
- D1.2.8 Diarrhea and vomiting, sometimes, but more commonly seen than with seasonal flu.

D1.3 Signs of a more serious infection might include pneumonia and respiratory failure.

D1.4 More serious symptoms that would indicate that a child with Ebola and other communicable diseases would need urgent medical attention include:

- D1.4.1 Fast breathing or trouble breathing
- D1.4.2 Bluish or gray skin color
- D1.4.3 Not drinking enough fluids
- D1.4.4 Severe or persistent vomiting
- D1.4.5 Flu-like symptoms improve but then return with fever and worse cough.

D1.5 Symptoms may appear anywhere from 2 to 21 days after exposure to Ebola & Swine Flu cases, but the average is 8 to 10 days.

D2. SCREENING OF GLOBAL VIRAL SUSPECTED PASSENGER:

D2.1 The concerned airline shall be responsible to provide the list of identified / suspected passengers, in coordination with the place of departure / captain of flight before landing to APHO BBIAP Islamabad for his further actions.

D2.2 If any passenger identified as any disease like Ebola, Swine Flu, or any other communicable diseases affected or suspected in the aircraft, the Captain / Commander of that international arriving flight shall inform to DATCO, before disembarkation of passengers.

D2.3 If any international flight coming from affected country(ies), the AMO / DATCO with the coordination of Flight Captain shall inform APHO of Health Department, CAA duty doctor at MI Room BBIAP and DFO Int'l Arrival lounge prior to the arrival.

D2.4 APHO / paramedic staff shall be present at separately arranged health inspection counter in international arrival for screening of passengers suspected of showing the viral symptoms.

D2.5 During the screening, protective measures like usage of PPEs (personal protective equipment) shall be adopted by the APHO / paramedic staff.

D2.6 Every international flight arriving at BBIAP Islamabad shall be screened for suspected communicable diseases cases, in general, and the flights arriving directly from the worst affected countries, in particular.

D2.6.1 Captain / Pilot in command shall disembark the passengers as per instruction contained in IHR 2005.

D2.6.2 Then APHO / Health Inspection Team member(s), present at the Exit Door of concerned aircraft shall examine the identified passenger inside the aircraft and he / she will go through the screening procedure like filling up a questionnaire, clinical interview, non-invasive medical examination (taking oral, auxiliary or aural temperature).

D2.7 The Health Inspection Counter/ Isolation Room located in international arrival lounge (immigration area), shall further be used for screening of passengers suspected of symptoms as mentioned in **para D1** as a second level of inspection.

D2.8 If any passenger found suspected of showing the symptoms, during the screening procedure mentioned in **para D2.5.2**, the following measures shall be taken:

- D2.8.1 Passenger shall be shifted to the pre-designated quarantine ward/room at PIMS/other Govt. Hospital after immigration formalities through a dedicated ambulance.
- D2.8.2 Paramedic staff shall wear hand gloves and mask while in contact with patient and dispose of disposable items as per standards.
- D2.8.3 Provide oxygen to the suspected patient for maintaining appropriate oxygen saturation in the body.
- D2.8.4 Give anti-pyretic if needed.
- D2.8.5 Record all the activities of treatment
- D2.8.6 Record patient address & telephone / mobile numbers.

D2.1 However, for any additional information / action, APHO shall follow the WHO guidance for the surveillance of human infection with such viruses.

D3. CONSTITUTION OF INSPECTION TEAM:

D3.1 Airport Manager BBIAP shall compose the team for monitoring, identifying and controlling of communicable diseases at the airport which may comprise the following Offices / Officers (but not limit to) and the team is responsible to execute the activities mentioned in this SOP.

- D3.1.1 Govt. Airport Health Officer (Focal Point)
- D3.1.2 Incharge MI. Room CAA
- D3.1.3 Asst. Director Immigration
- D3.1.4 Asst. Director Pakistan Customs
- D3.1.5 Asst. Director Airport Security Force
- D3.1.6 Representative of Chairman AOC

D4. ROLE OF AIRLINES / OPERATORS:

D4.1 The concerned airline shall be responsible to provide the list of identified / suspected passengers, in coordination with the place of departure / captain of flight before landing to APHO BBIAP Islamabad for his further actions.

D5. ROLE OF CAA / APM BBIAP:

D5.1 APM BBIAP / MM / MI Room shall provide necessary guidance to all concerned stakeholders for effective implementation of SOP / APHO instructions and WHO Guidelines.

D5.2 CAA shall provide all logistic support and facilities such as inspection counter, isolation rooms, awareness messages / posters for the comfort of affected passengers.

D6. ROLE OF IMMIGRATION STAFF:

D6.1 The concerned official shall check/monitor the passengers/documents (if found suspected or from affective countries) inform / handover (with luggage) to APHO for screening/diagnoses.

D6.2 If the passenger is declared suspected by APHO, the concerned immigration official shall communicate their department for further necessary action as per policy/procedure.

D7. ROLE OF CUSTOMS / GROUND HANDLING STAFF:

D7.1 If the passenger is declared suspected by APHO, the concerned ground handling official / airline identify / arrange the luggage using all available Personal Protective Equipment (PPE) in coordination with APHO / Custom officials while carrying out this duty and hand over to the suspected passengers/APHO.

D8. ROLE OF THE INSPECTION TEAM:

- D8.1** Carry out surprise inspection regarding the process described in this SOP.
- D8.2** Oversee the all related processes with regard to communicable diseases as per WHO guideline.
- D8.3** Review and recommend new procedure if required.
- D8.4** Upkeep the record of suspected passengers or passengers from affected countries to evaluate/check the trend and propose suggestion/recommendation if required.
- D8.5** Update MOH for the status of suspected pax sent for Quarantine / PIMS (or any other designated Govt. hospital) for further checks until they depart the country (in coordination with immigration) or recover from the disease.

D9. PREVENTIVE MEASURES FOR CAA / ASF / CUSTOMS / ANF / IMMIGRATION / AIRLINE OFFICIALS / PARAMEDIC STAFF:

It is not possible to differentiate between seasonal influenza / fever / flu and global communicable viral without medical help. Typical symptoms are similar to seasonal viruses. However, the following preventive measures shall be suggested / implemented to protect other passengers / Airline / Airport officials / ASF / Paramedic staff for transmission of the global virus.

- D9.1** Avoid close contact with people who carry influenza / viral like symptoms (maintain a distance of about one meter, if possible)
- D9.2** Avoid touching mouth and nose.
- D9.3** After handling / treatment of a passenger having the symptoms, the mask, gloves etc. and any material, which was in contact with the passenger, shall be disposed off properly as per standards.
- D9.4** Wash your hands often with soap and water or alcohol sanitizer - this will kill most germs.
- D9.5** If anybody develops, fevers of 100.5F or higher, call your doctor right away (day or night) and start drinking plenty of fluids. Stay well hydrated and get a diagnosis and treatment for whatever is causing your fever.
- D9.6** If any official have cough or sneeze, he must cover his nose and mouth with a tissue paper / mask and then throw it out. Used tissue paper should not be kept in hands. Turn the face into the crook of your elbow, to keep germs from flying away.
- D9.7** Avoid people / passengers who have a fever, cough, or sneezing, or complain of any flu-like symptoms.
- D9.8** If any airport / airline official feels like he / she is developing flu symptoms, don't wait to see if it will just go away. Call your doctor or Medical Officer and ask for advice.

D10. MASS LEVEL MEDICAL EMERGENCY WRT COMMUNICABLE DISEASES:

In case of mass level emergency with respect to communicable diseases following additional actions / measures shall be taken:

- D10.1** If required, domestic arrival lounge shall be used for the handling of affected passengers.
- D10.2** SFO / OIC Medical Management CAA BBIAP shall coordinate with immigration, customs and ASF for appropriate manning of the domestic arrival lounge.

E. EVIDENCES (ACRONYMS / RECORDS / REFERENCES):

E1. ACRONYMS:

AOC	Airline operating committee
APHO	Airport Health Officer
AMO	Apron Management Office / Officer
APM	Airport Manager
ASF	Airport Security Force
BBIAP	Benazir Bhutto International Airport
CAA	Civil Aviation Authority
DATCO	Duty Air Traffic Control Officer (Tower)
DFO	Duty Facilitation Officer
ETA	Estimated Time of Arrival
GHA	Ground Handling Agent
Govt	Government
IHR	International Health Regulations
MI	Medical Inspection
MM	Medical Management
MOH	Ministry of Health
OIC	Officer In Charge
PIMS	Pakistan Institute of Medical Sciences
PNIH	Pakistan National Institute of Health
PoE	Point of Entry
SFO	Senior Facilitation Officer
SOP	Standard Operating Procedure
VTM	Viral Transport Medium
WHO	World Health Organization

E2. RECORDS:

- E2.1** Passenger Declaration Form / Questionnaire
- E2.2** Doctor's Logbook
- E2.3** Flight Movement Record at AMO
- E2.4** Health Inspection Office operation logbook

E3. REFERENCES:

- E3.1** WHO Guidance in respect of Ebola & Other Communicable diseases
- E3.2** WHO Patient Care Checklist (June 2009)
- E3.3** F.1 – 2/Admin/NIP/2008 – 766. (PNIH, Islamabad)
- E3.4** No. 12 -1/2009- AT- II (Ministry of Defence)



IMPLEMENTATION:

This SOP is issued with the approval of **Airport Manager, BBIAP Islamabad** and implemented with effect from 15/10/2015.

Dated: - **October, 2015**

(MUHAMMAD AFSAR MALIK)
Airport Manager, BBIAP Islamabad
Pakistan Civil Aviation Authority

(DR. AJAZ AHMED)

Officer Incharge,
MI Room, BBIAP Islamabad

Dated: - **October, 2015**

File No. BBIAP/1411-11/020/RNMM/I