

Alaska Multi-Agency Maritime Communicable Disease Emergency Response Plan

Guidelines for Response to Public Health Emergencies at U.S. Sea Ports of Entry in Alaska





This multi-agency plan was developed by a consortium of federal, state, and local agencies as well as private stakeholders. The principal parties responsible for the approval and maintenance of the plan are the United States Coast Guard (USCG) District-17, Customs and Border Protection (CBP) Area Port-Anchorage, Alaska Department of Health and Social Services (DHSS) Division of Public Health (DPH), and the Centers for Disease Control and Prevention (CDC) Anchorage Quarantine Station (AQS). This plan will be reviewed and updated as needed or on an annual basis.

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I. INTRODUCTION

- a. The vast, interconnected and complex system of transportation moves people and essential goods, and supports our critical infrastructure.
- b. Each day, more than five million travelers arrive or pass through the United States by air, sea or land. Our Nation's 317 international ports of entry represent the intersection of the transportation industry, public health, and homeland security.
- c. The U.S. water transportation industry comprises of domestic and international companies that carry freight or passengers on the open seas or inland waterways.
- d. Alaska has more coastline than all the other U.S. states combined, and its maritime industry is currently in a period of renewal and expansion with major changes in trades, fleets, gross output and employment. Alaska is the fifth most popular cruise destination in North America. Currently, 1 million out of 1.7 million summer visitors in Alaska board a cruise ship. As the northern sea ice melts, Alaska will likely experience increased maritime traffic in the Beaufort and Chukchi Seas, and more ships will transit the Northwest Passage.
- e. Because of the sheer volume of traffic flowing through this and other international ports of entry, the potential exists for the rapid and widespread dissemination of a communicable disease within the U.S. Therefore, expeditious implementation of public health measures at our seaports provides an opportunity to prevent the introduction of communicable diseases into the United States.

II. PURPOSE

- a. To prevent the introduction, transmission, or spread of communicable diseases from foreign countries into the United States.

III. LEGAL AUTHORITIES

- a. Title 42 United States Code Section 264 (Section 361 of the Public Health Service Act) gives the Secretary of the Department of Health and Human Services (HHS) responsibility for preventing the introduction, transmission, and spread of communicable diseases from foreign countries into the United States and from one state or U.S. possession into another. This statute is implemented through regulations found at 42 CFR Parts 70 and 71. Under its delegated authority, the Centers for Disease Control and Prevention (CDC), through the Division of Global Migration and Quarantine (DGMQ), is empowered to apprehend, detain, medically

examine, or conditionally release persons suspected of carrying a quarantinable disease.

- b. Under 8 U.S.C. § 1182(a)(1), DHS has authority to find inadmissible any alien “who is determined (in accordance with the regulations prescribed by the Secretary of Health and Human Services) to have a communicable disease of public health significance.” Under 8 U.S.C. § 1222(a), DHS has authority to detain aliens for the purpose of determining whether they have a communicable disease listed in Section 1182(a).
- c. The USCG has the authority to carry out obligations, when requested, in support of CDC pursuant to 14 U.S.C. § 141 and 147a, and 42 U.S.C. § 268(b). Title 14 United States Code Section 91 provides the USCG authority to control the anchorage and movement of vessels in the navigable waters of the U.S. Title 33 United States Codes Sections 1221-1236 provides the USCG with broad authority to regulate the movement, operation and equipment of vessels subject to the jurisdiction of the U.S. and authorizes the Coast Guard to order vessels to operate as directed or to anchor, and to require pre-arrival notices.
- d. The Alaska Department of Health and Social Services (DHSS) is the primary state agency responsible for preventing the introduction, transmission, and spread of communicable diseases from foreign countries into the State of Alaska. These responsibilities are carried out by DHSS’ Division of Public Health. Alaska law gives DHSS authority to investigate outbreaks of communicable diseases (AS 18.15.375) and in cases of emergency, use quarantine or isolation to control the outbreaks (AS 18.15.385(e)). DHSS has authority to seek court orders for isolation or quarantine in non-emergency situations (AS 18.05.385). In cases where the governor has declared a disaster emergency under AS 26.23.020(c) due to a disease outbreak, DHSS, in conjunction with the Department of Military and Veterans’ Affairs have additional powers to protect the public health (AS 18.15.390). The governor also has authority to respond to a communicable disease outbreak by limiting egress to or ingress from a declared disaster area (AS 26.23.020(g)(7)).
- e. Alaska law requires DHSS to carry out its duties in cooperation with the federal government when national interests are implicated (AS 18.05.030). DHSS’ duties are further defined in Title 7, Chapter 27 of the Alaska Administrative Code.

IV. BACKGROUND AND OVERVIEW

- a. Under Section 361(b) of the Public Health Service Act, DGMQ has the authority to isolate and quarantine individuals or groups of individuals who are ill with or exposed to the following diseases:

1. Cholera and suspected Cholera
 2. Diphtheria
 3. Infectious Tuberculosis
 4. Plague
 5. Smallpox
 6. Yellow Fever
 7. Viral Hemorrhagic Fevers
 8. Severe Acute Respiratory Syndrome (SARS)
 9. Influenza (novel strain with the potential for a pandemic)
- b. Current federal regulations [42 CFR 71.21(a)] requires the master of a ship destined for a U.S. port to immediately report any death or any ill person among the ship's passengers or crew to the nearest CDC Quarantine Station.
- c. To help public health officials act quickly, CDC recommends the following:
- Upon learning of a possible communicable illness or a death on board, ship staff or other reporting agencies should immediately contact the CDC Quarantine Station at or nearest the port of arrival.
 - CDC Quarantine Stations, their contact information, and areas of jurisdiction are found at:
www.cdc.gov/ncidod/dq/quarantine_stations.htm.
 - If contact cannot be made with the nearest station, phone the CDC Director's Emergency Operations Center at (770) 488-7100.
 - CDC requires the following basic information about the ill person to make an initial public health assessment: ill person's name, age, nationality, country of residence, occupation, description of signs and symptoms, travel itinerary (going back three weeks), whether the person had exposure to animals, poultry or other persons with a similar illness (going back three weeks), and suspected diagnosis, if known.
- d. A flowchart on the response to a vessel arrival with a suspected communicable disease is provided in appendix section.
- e. Notifications among responding agencies to a communicable disease incident on an international vessel should be timely and redundant. In particular, healthcare facilities/hospitals should be notified as earlier as possible and prior to transport of suspected ill persons.

V. REQUIRED AND REQUESTED DISEASE REPORTS

- a. All deaths (regardless of cause) and ill persons displaying any of these conditions must be reported under federal regulations:
 1. Fever (a measured temperature of 100° F/37.8° C or greater) lasting more than 48 hours;
 2. Fever of any duration, plus any one of the following symptoms:
 - rash, or
 - swelling of the lymph glands, or
 - jaundice (yellowing of skin or eyes); or
 - Diarrhea (three or more loose stools or a greater than normal number of loose stools in a 24-hour period). Note: Cruise ships carrying 13 or more passengers should continue to report diarrhea cases to the CDC Vessel Sanitation Program (VSP).
- b. In addition to the required reporting above, CDC requests reports of ill persons with the following conditions, which may also indicate a serious, communicable disease:
- c. Fever (a measured temperature of 100° F/37.8° C or greater) of any duration plus any one of the following conditions:
 - difficulty breathing or suspected/confirmed pneumonia, or
 - cough for more than 2 weeks or cough with bloody sputum, or
 - headache with stiff neck, or
 - reduced level of consciousness, or
 - unexplained bleeding.

VI. EMERGENCY OPERATIONS

- a. Incident Command
 1. This plan will follow protocols and guidelines established within the National Incident Management System (NIMS). An Incident Command System (ICS) will be implemented upon the activation of this plan and used to coordinate response activities. See appendix for additional details.
- b. Vessel Mooring and Anchoring Procedures
 1. The arriving vessel may be directed to its originally scheduled berth, or it may be directed to an alternate berth or anchorage. When a vessel must be quarantined, alternate anchorages and moorings previously

identified as places of refuge should be considered. While various potential sites should be identified, circumstances will dictate whether a pre-selected site or a best available alternate will be the location of choice. Selection of a place of vessel quarantine should be made by the USCG COPT and the CDC, in consultation with other agencies and stakeholders, and will always be made on a case-by-case basis.

2. The master of the vessel will inform the crew and passengers that they will have to remain on board until the CDC or proxy have arrived and interviewed all necessary parties.
3. The master of the vessel (with the help of CDC personnel) will inform the crew and passengers as to the nature of the situation and the sequence of events.

c. Shore side Response

1. If a communicable disease emergency is suspected, the CDC Anchorage Quarantine Station personnel or their designated alternates will lead the illness response investigation, provide personal protection equipment (PPE) guidance, and direct the activities of all response staff present.
2. The composition of an initial response group to a communicable disease emergency may include one or more the following:
 - CDC Anchorage Quarantine Station
 - CBP
 - USCG COTP
 - EMS
 - Port authority representative
 - Vessel representative
3. If a quarantinable disease is suspected, and the isolation of passenger(s) or crew member(s) is required, The CDC Anchorage Quarantine Station will follow DGMQ protocols to activate standing Memorandum of Agreement (MOA) with a designated hospital. The Quarantine Station staff will request transportation by ambulance, ensure transportation personnel are briefed about the situation, and verify infection control procedures are in place.
4. Depending on the type and extent of the situation, if needed, the local and/or state Emergency Operation Centers (EOC) will be activated and one or more of the following agencies will be requested to provide additional response support:

- Local/state public health
- Local/state emergency management
- Local/state law enforcement
- Federal Bureau of Investigation (FBI)

d. Quarantine Response

1. The CDC Anchorage Quarantine Station may undertake one or more of the following in response to a report of communicable disease among passengers or crew on an arriving vessel:
 - Onboard public health assessment
 - Isolation of ill person(s)
 - Identification and diagnosis of person(s) who may have come into contact with an infected person
 - Distribution of THANs
 - Collection of passenger locator information
 - Detention, quarantine, or restriction of movement of exposed persons
 - Conditional release of potentially exposed person(s) following possible prophylactic interventions

2. In the event that quarantine is required to protect the public's health, whenever possible, onboard facilities may be used for a limited time, and if/when necessary local or state authorities will coordinate for off-site facilities.

e. Conditional Release

1. Under certain circumstances, the CDC Anchorage Quarantine Station may conditionally release those passengers not deemed close contacts of the index case(s), allowing them to continue their travel. In such situations, the CDC Anchorage Quarantine Station may request the help of local, state and federal agencies in the collection of passenger locator information, distribution of health information, possible administration of prophylaxis, and notification and tracking of the released persons.

f. Screening/Detention

1. Whenever possible, screening, detention and quarantine will be carried out onboard the vessel. In case landside screening and processing facilities for passengers or crewmembers is needed (e.g., for detention, restriction of movement, or quarantine), the State Emergency Coordination Center (SECC) will coordinate and secure the necessary infrastructure and services.

g. Media Communications

1. All responding agencies will provide a Public Information Officer (PIO), or representative. The PIOs are to coordinate talking points for press releases through the lead PIO as designated by the Incident Commander. A list of agency PIOs is included in the appendix section.

h. International Communications

1. Communication with international public health partners will be coordinated by the CDC.
2. The U.S. Department of State will be notified whenever any international person is legally detained or quarantined, to verify the status of the passenger(s) or crewmember(s), and to confirm those claiming diplomatic affiliations. If a diplomatic pouch is present on board the vessel its disposition will be determined by the U.S. Department of State in consultation with the Incident Commander (IC).

i. Decontamination

1. Any vessel and/or facility deemed by CDC and other appropriate state agencies to need decontamination will be prohibited for use until designated as safe.

j. Surge Capacity

1. In the event of a large scale public health emergency, the CDC Anchorage Quarantine Station will request the help of local, state and federal agencies to coordinate assistance with medical screening and triage, identification and assessment of ill and exposed persons, distribution of health alert notices, administration of prophylaxis, and collection of personal locator information.

VII. ASSIGNMENT OF RESPONSIBILITIES

a. Master/Crew of Vessel

1. Immediately report to the nearest CDC Quarantine Station any death or illness, suggestive of a communicable disease or as required by quarantine regulations, among passengers or crew during the voyage.
2. Seek assistance from medical professionals on board the vessel or at the next port of call to make an initial assessment of the situation and communicate pertinent information to CDC personnel.

3. Isolate the ill person(s) to the extent possible, cover rash and provide a mask if appropriate and tolerated.
- b. Vessel Company (including land-based agent)
1. Coordinate operations and maintain communication between the Master of the vessel, CBP, the COTP and CDC to monitor the status of ill person.
 2. Facilitate information exchange between CDC as well as other port authorities and ship, and provide instructions to the Master and crew on ship as necessary.
 3. Assist in facilitating testing of ill persons if necessary and implementing control measures recommended by CDC.
 4. Coordinate with CDC and state and local health departments on media relations and press management.
- c. Emergency Medical Services (EMS)
1. Immediately report to the nearest CDC Quarantine Station any death or illness suggestive of a communicable disease among ship passengers or crew.
 2. Provide first aid and other emergency medical services to ill or injured passengers or crew members.
 3. Implement the use of infection control measures to limit transmission of communicable disease on the vessel.
 4. When requested, assist public health personnel in the assessment of the ill person(s) and communicate findings with CDC.
 5. Remove the ill person from the vessel and transport by ambulance to the designated medical facility after CBP clearance or medical parole.
 6. Coordinate response with CDC as best as possible, and assist the public health responders and other on-site healthcare providers.
- d. USCG Captain of the Port (COTP)
1. Assist CDC by sharing its extensive network of maritime contacts.
 2. Issue Marine Safety Information Bulletins (MSIB) that contain a list of questions generated by CDC for vessel masters to complete voluntarily in connection with the required radio reports of illness from vessel

masters. MSIB should direct mariners to send their responses directly to the CDC and validate with the USCG that they provided the CDC with the necessary information.

3. For vessels that do not validate response to the MSIB, question the master of vessels prior to entry into port to obtain the same information as required by the MSIB.
4. Advise immediately the cognizant quarantine station having jurisdiction over the relevant port regarding a positive response indicating the presence of a suspect ill person.
5. Coordinate enforcement of CDC-issued “no sail” orders, employing all available local, state, and federal assets.
6. As required, the Captain of the Port may establish safety or security zones consistent with the CDC issued “no sail” orders.
7. When the appropriate safety measures and personal protective equipment are provided to minimize disease exposure, accompany CDC personnel when boarding a vessel under USCG authority (vessels and individuals on the navigable waters of the United States, including the territorial sea--out to 12 nautical miles--and the contiguous zone--out to 24 nautical miles) and while on waterfront facilities immediately adjacent thereto, to investigate and enforce its quarantine authorities.
8. When the appropriate safety measures and personal protective equipment are provided to minimize disease exposure, assist CDC, when requested, by escorting individuals subject to temporary detention orders or quarantine orders and CDC personnel from the vessel to shore side where the detained individual will be turned over to the appropriate federal, state, or local law enforcement personnel.
9. To the extent permitted by law and internal policies, USCG will assist CDC in the enforcement of its quarantine authorities.
10. Upon request of the CDC when their primary and usual means of maritime transportation is unavailable, the USCG operational commander, may provide Coast Guard boats and crews for purpose of transporting quarantine officials and individuals subject to quarantine orders to and from the vessel provided the appropriate safety measures and personal protective equipment are provided to minimize USCG personnel to exposure to the suspected disease. The CDC will coordinate shore side pick up of individuals requiring transport to quarantine or isolation facilities. In all other situations, the appropriate

public health agency will coordinate and provide a means for or otherwise arrange transportation of quarantine officials and individuals subject to quarantine or isolation orders from the vessel to the quarantine or isolation facility.

e. Customs and Border Protection (CBP)

1. Support initial entry screening of international passengers or crewmembers (using up-to-date information provided by CDC) for the purposes of identifying potentially infected travelers.
2. Provide enforcement and security resources during a medical response until the appropriate enforcement agency arrives at the scene.
3. For international vessels, meet the conveyance and prevent disembarkation until CDC or their designated alternate arrives.
4. Escort medical personnel and other emergency responders on to the vessel.
5. Notify the appropriate CDC Quarantine Station to initiate their medical assessment before releasing detained passengers or crewmembers.
6. Assist CDC in identifying travelers at risk and those suspected of having been in contact with an ill person by providing passenger customs declarations, Advance Notice of Arrival data, and other sources of traveler information in response to a specific request by CDC.
7. Assist CDC by providing information for use in locating people suspected of having contact with an ill person.
8. Parole, if necessary, ill non-U.S. citizens and non-permanent residents (e.g. nonimmigrant students, workers, etc.) into the United States if public health interventions are indicated.
9. Assist CDC, as necessary and as resources permit, in distributing health information at ports of entry.
10. Assist in the development of occupational health and infection control guidelines for the federal inspection site at ports of entry.
11. Provide security for individuals in quarantine or under detention awaiting federal quarantine order.

- f. Centers for Disease Control and Prevention (CDC)
1. Authorize the temporary detention or quarantine, through federal order as necessary, of passengers and crew members for appropriate evaluation and response to reports of illness.
 2. Provide access to administrative hearings in instances where passengers or crewmembers challenge federal orders.
 3. Notify and collaborate with other federal, state, and local agencies when ill passengers or crewmembers have been detained or paroled into the United States for evaluation or treatment of communicable diseases.
 4. Arrange or assist in the medical evaluations of ill passengers or crew members and determine the need for public health interventions.
 5. Provide advice and guidance to the public health responders, including state and local public health authorities, in caring for ill and exposed persons.
 6. Obtain information necessary for public health assessment and follow-up of ill and exposed persons (e.g., demographics, contact information, travel itinerary, illness history, and medical status) and the conveyance (number of passengers, manifest availability).
 7. Communicate with other federal, state, and local response and public health partners regarding the ill person's medical treatment.
 8. Participate in the management of media relations, in collaboration with state and local health departments and information officers from other response partners.
 9. Work with the Department of State and World Health Organization (WHO) to provide information about ill international travelers to ministries of health at their place of origin and at intermediate destinations.
 10. Work with the Department of State, as necessary, to notify applicable foreign consulates or embassies that their foreign nationals have been detained for evaluation or treatment of a quarantinable disease.
 11. Assist in the development of occupational health and infection control guidelines for the Federal Inspection Site (FIS) at ports of entry.
 12. Rescind federal quarantine orders when the public health situation allows.

g. State/Local Health Department

1. Coordinate the preliminary assessment of ill person(s) after the vessel arrives if CDC Quarantine Station staff is not available.
2. Provide support (upon request) in the preliminary assessment of ill person(s) when CDC Quarantine Station staff is available.
3. Arrange laboratory services, and coordinate with CDC Quarantine Station on recommendations.
4. Assist with the notification and tracking of travel contacts during conditional release forward of passengers or crew members.
5. Notify state medical examiner, if indicated.
6. Coordinate, as necessary, with CDC in the issuance of quarantine and isolation orders and the management of quarantine and isolation.
7. Coordinate staff to assist in managing a surge of ill persons from the quarantine site who need transportation to the hospital.
8. Assist, as needed, federal public health agencies with setting up a medical clinic for assessment, triage, prophylaxis and treatment at the quarantine site.
9. Provide guidance to designated hospitals and/or the quarantine site medical clinic on the clinical and diagnostic management of ill people, including assisting with arrangements for laboratory testing at local or state public health laboratories or at CDC.
10. Prepare strategies for mental health interventions for ill persons and persons who have been exposed and are under quarantine, their families, and service providers.
11. Assist emergency management agencies, if needed, in planning for and activating a temporary care facility and quarantine facility.
12. Provide clinical and public health information to local healthcare providers and the public.
13. Provide information and recommendations to local and state authorities.
14. Coordinate with the Incident Command (IC)/Unified Command (UC) on media relations.

15. Coordinate with CDC Quarantine Station on recommendations and guidance as needed.
- h. State and Local Emergency Management Authorities
 1. Assist and support state and local public health authorities with logistics of providing temporary care to those under quarantine and operating quarantine facilities.
 2. Work with state and local health departments to support the planning and preparation activities to operate temporary care and quarantine facilities at ports of entry.
 3. Seek assistance from the Federal Emergency Management Agency (FEMA) when appropriate.
 - i. State and Local Law Enforcement Agencies
 1. Provide security for the response staging area and control access to and from the vessel and/or facility.
 2. Escort agency representatives into and out of Incident Command Post (ICP) and the vessel as needed.
 3. Provide representatives to ICP.
 4. Maintain order.
 5. Assist in and expedite the transfer of ill persons and clinical materials for evaluation and treatment.
 6. Enforce required actions (e.g., transportation) for ill persons or persons who have been exposed to an illness if any such persons are uncooperative.
 - j. Local Health-Care Facilities
 1. Isolate, evaluate and treat ill persons when medically indicated.
 2. Institute infection control measures to limit the spread of suspected communicable disease. This may include isolation of ill persons and use of PPE by staff and visitors when medically indicated.
 3. Evaluate and treat referred ill persons. This includes obtaining specified diagnostic specimens and assuring the specimens are promptly and safely transported to designated laboratories. It also includes assessing the need for and providing prescription medications for the ill persons.

4. Evaluate exposed persons if they develop illness signs or symptoms while in quarantine.
 5. Provide clinical and laboratory information to federal, state, and local public health authorities.
 6. Work with public health authorities on media relations.
- k. Local Support (and Non-Governmental) Organizations
1. Local support organizations, including non-government organizations will provide support services to people exposed to the illness (quarantined individuals), as well as to service providers. Such support services may be modified. Support services include, but are not limited to:
 - Meals (including special meals for those under dietary restrictions)
 - Beverages (including sterile water and formula for infants)
 - Eating utensils, plates and napkins
 - Tables and chairs
 - Cots and bedding
 - Space heaters and fans
 - Portable toilet facilities and toiletries
 - Hand-washing facilities
 - Portable showering facilities
 - Parent-child needs (e.g., diapers)
 - Telephones
 - Means of communicating with family
 - Television, movies, and radio
 - Internet access and email
 - Reading materials and games
 - Public address system
 - Interpreter services
 - Mental health and spiritual support

l. Federal Bureau of Investigation (FBI)

1. The FBI has jurisdiction over all terrorist threats and events. If an incident has any indication of being a possible terrorism event, the FBI will immediately be notified. The CDC Anchorage Quarantine Station is the support public health agency in suspected smallpox incidents involving international vessels. The Alaska Division of Public Health is the support public health agency for all other suspected bioterrorism events. The CDC Anchorage Quarantine Station will play an

appropriate legal and supportive public health role as requested by local, state, and federal agencies.

m. Immigration and Customs Enforcement (ICE)

1. Assist CDC and CBP in the enforcement of quarantine and isolation.

VIII. ANIMALS AND CARGO RELATED ISSUES

- a. Some animals and animal products are known carriers of communicable disease, and certain zoonotic importations from outside of the United States may be subject to health, quarantine, agriculture, wildlife, and customs requirements and prohibitions.
- b. Certain animals and animal products are regulated by more than one federal agencies, and/or state and local authorities.
- c. Centers for Disease Control and Prevention (CDC)
 1. Under CDC's regulations a person may not import into the United States, nor distribute after importation, any etiologic agent or any arthropod or other animal host or vector of human disease, or any exotic living arthropod or other animal capable of being a host or vector of human disease unless accompanied by a permit issued by the Director.
 2. More specifically, CDC regulations govern the importation of dogs, cats, turtles, monkeys, bats, live birds, African rodents, civets, snails, unsterilized specimens of human and animal tissue, any culture of living bacteria, virus, living insects or arthropods, non-human primate trophies, skins or skulls, goatskin products from Haiti, or other animals and animal products capable of causing human disease.
 3. In addition, any banned or restricted import coming within the provisions of this section will not be released from custody prior to receipt by the District Director of U.S. Customs Service of a permit issued by the Director of the CDC.
 4. Pets taken out of the United States are subject upon return, to the same regulations as those entering for the first time.
 5. For more information about CDC's regulations, visit:
<http://www.cdc.gov/od/eaipp/>

d. CBP and USDA

1. Under Customs and Border Protection (CBP) regulations, live animals and birds entering the United States are subject to certification, certain permits, inspection, and quarantine rules that vary greatly with the type of animal and its origin.
 2. For more information about CBP's requirements, visit:
<http://www.cbp.gov/linkhandler/cgov/toolbox/publications/travel/pets.ctt/pets.pdf>
 3. United States Department of Agriculture (USDA), Animal and Plant Health Inspection Service (APHIS) permits are required for infectious agents of livestock and biological materials containing animal material. Tissue culture materials and suspensions of cell culture grown viruses or other etiologic agents containing growth stimulants of bovine or other livestock origins are controlled by the USDA due to the potential risk of introduction of exotic animal diseases into the U.S.
 4. For more information about USDA's requirements, visit:
http://www.aphis.usda.gov/animal_health/
- e. USFWS: The U.S. Fish & Wildlife Service (USFWS) issues permits under various wildlife laws and treaties at different offices at the national, regional, and/or wildlife port levels. For more information, visit:
<http://www.fws.gov/permits/instructions/ObtainPermit.shtml>
- f. State of Alaska: Several state agencies are involved in regulating, monitoring, and responding to importation of animals from other countries.
1. The Alaska Department of Environmental Conservation (ADEC) permits and monitors the importation and export of pets, domestic livestock, poultry and veterinary biologics. In addition, ADEC conducts surveillance and control of new and emerging animal diseases, zoonotic diseases, foreign animal diseases, and agriculture based bioterrorism threats.
 2. All animals entering the state of Alaska are required to have a Certificate of Veterinary Inspection (Health Certificate). There are additional requirements (permit number, diagnostic tests) for certain species of animal. For more information, visit:
<http://www.dec.state.ak.us/eh/vet/index.htm>

3. For a listing of reportable diseases, visit:
<http://www.dec.state.ak.us/eh/docs/vet/Disease%20reporting%209-052.pdf>

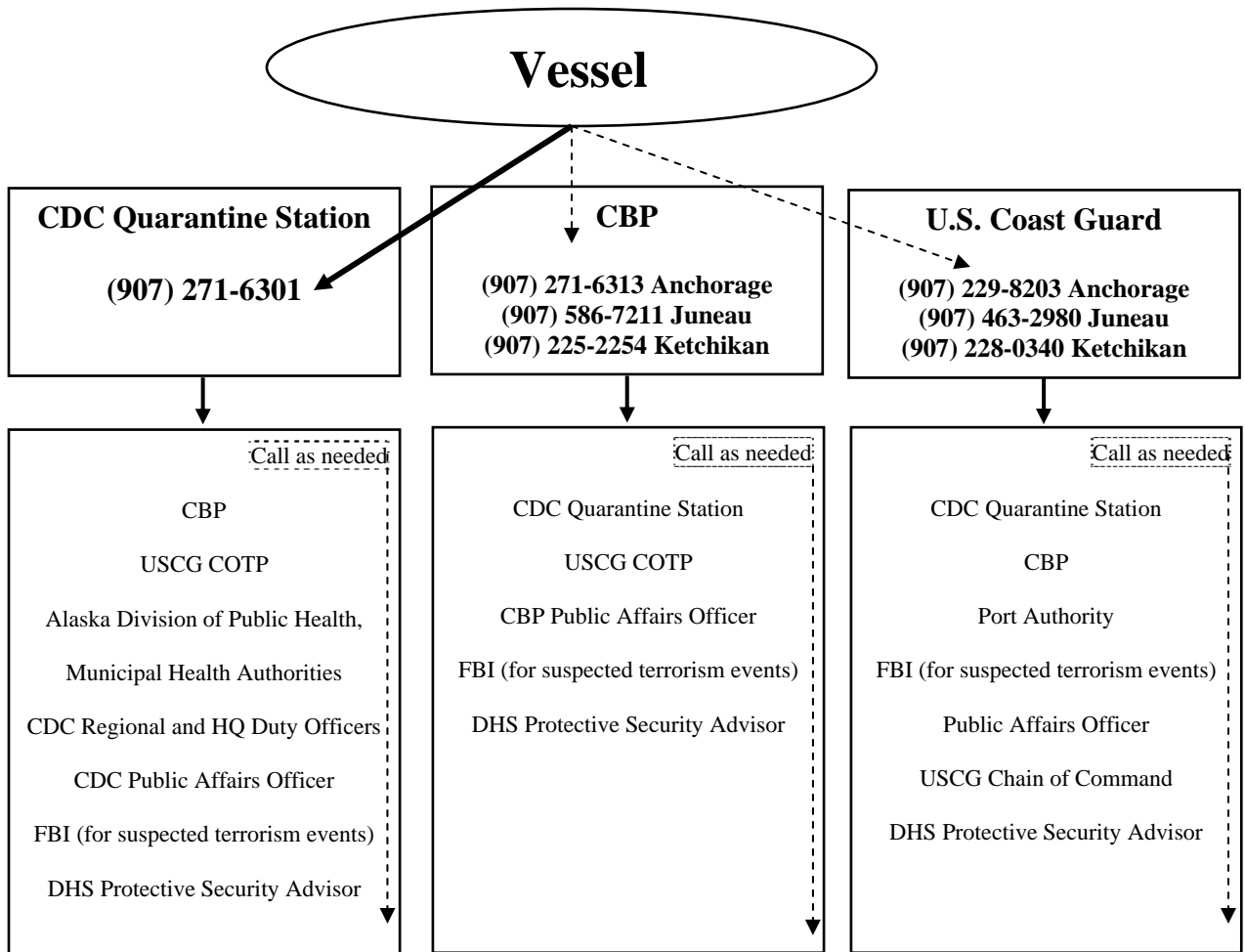
4. Contact Information:

 State Veterinarian
 Assistant State Veterinarian
Office: (907) 375-8200
Fax: (907) 929-7335

5. The Alaska Department of Health and Social Services (ADHSS) is responsible for animals that may present a zoonotic disease threat to public health. For more information, call 269-8000 or (800) 478-0084, or visit: www.epi.alaska.gov

IX. APPENDICES

A. Agency Notification List

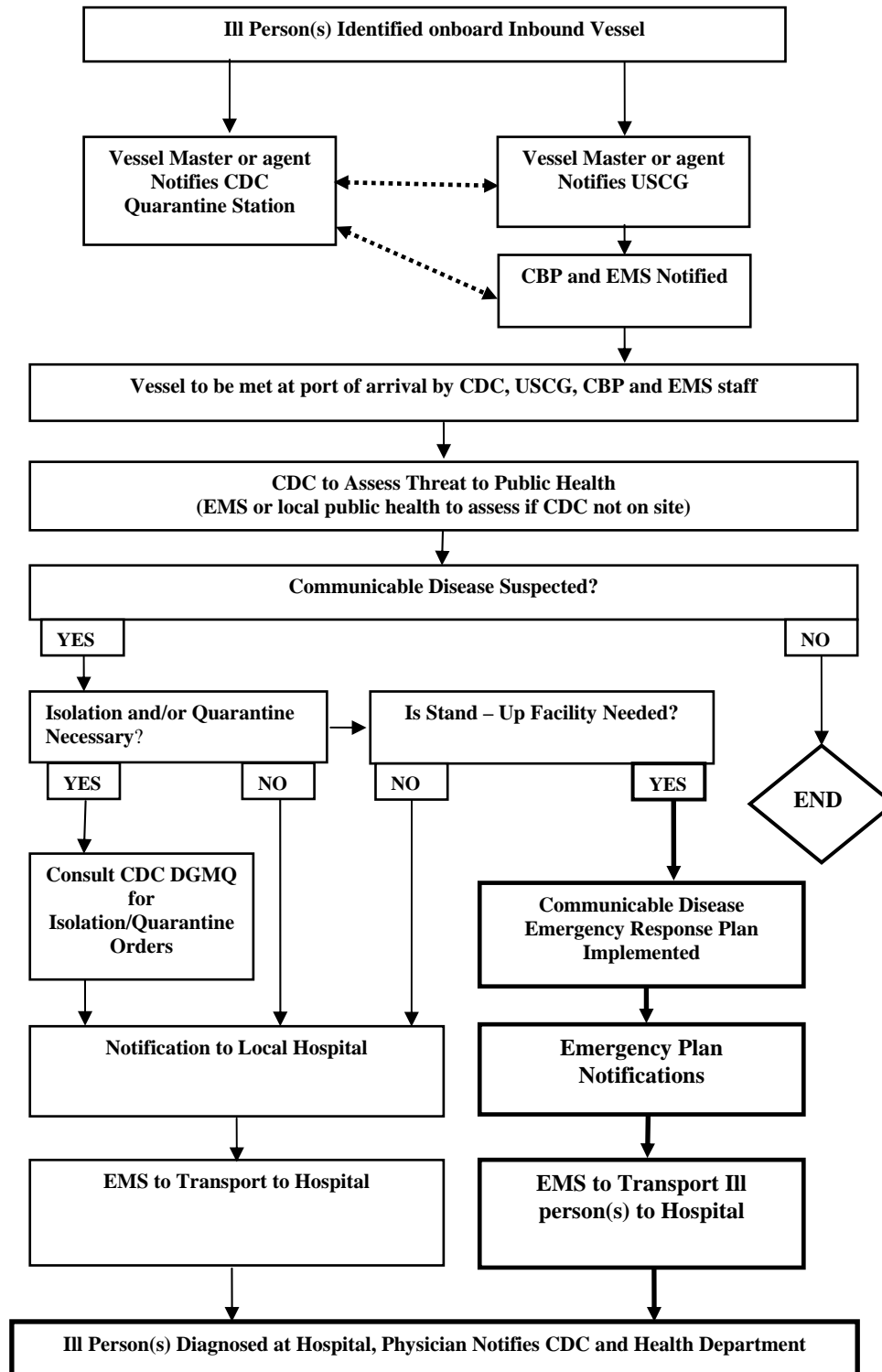


Notifications among responding agencies to a communicable disease incident on an international vessel should be timely and redundant. In particular, healthcare facilities/hospitals should be notified as earlier as possible and prior to transport of suspected ill persons.

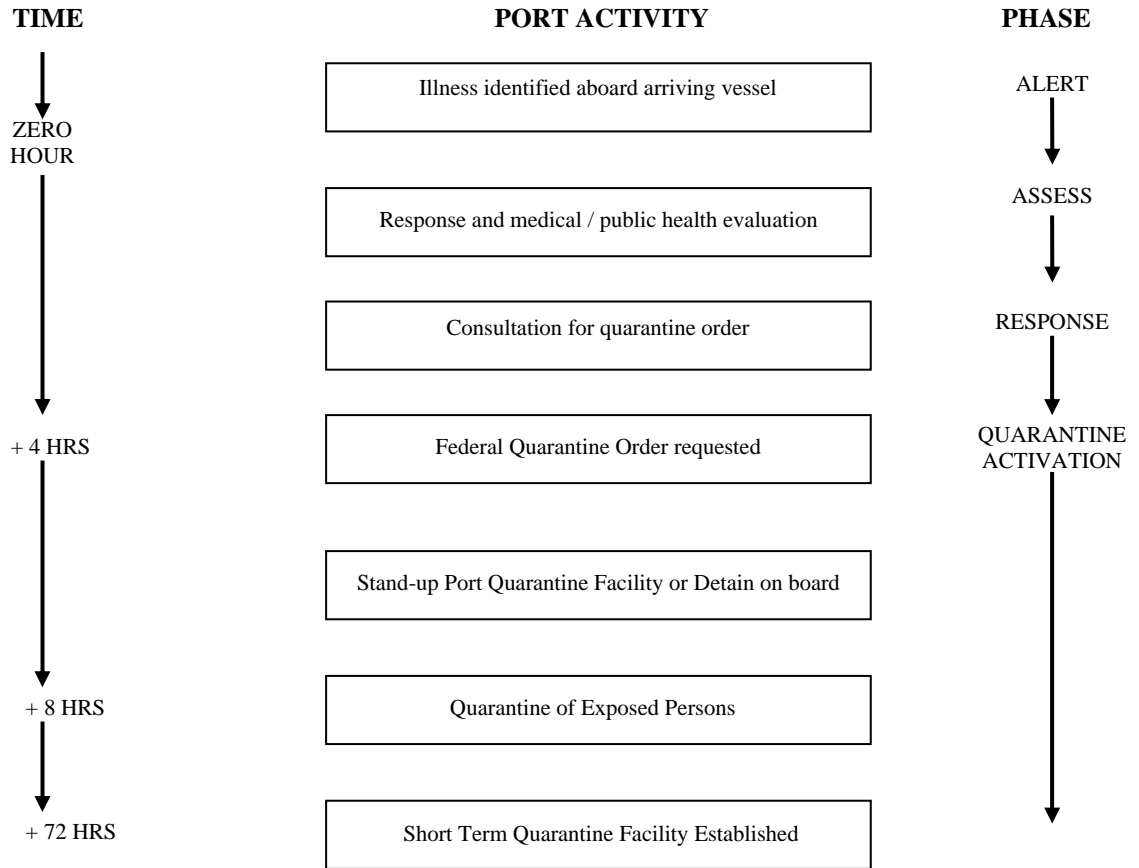
B. Public Information Officer Contact List

Agency	Name	Phone	Email
Alaska DHSS-DPH	[REDACTED]	[REDACTED]	[REDACTED]
Alaska ADEC	[REDACTED]	[REDACTED]	[REDACTED]
Alaska SECC	[REDACTED]	[REDACTED]	[REDACTED]
CBP	[REDACTED]	[REDACTED]	[REDACTED]
CDC	[REDACTED]	[REDACTED]	[REDACTED]
USCG	[REDACTED]	[REDACTED]	[REDACTED]

C. General Response Protocol



D. Port of Entry Quarantine Response Timeline



E. Definitions

Conditional Release: The release of a traveler from a public health restriction, such as quarantine and/or isolation under 42 C.F.R. part 71, provided that the traveler agrees to certain conditions. Conditional release can be accomplished through an order that is enforceable to the same extent as an order for quarantine or isolation.

Communicable Disease: As defined in 42 CFR Part 71, unless otherwise specified, is an illness due to a specific infectious agent or its toxic products which arises through the transmission of the agent or its products from an infected person or animal or a reservoir to a susceptible host, either directly or indirectly through an intermediate animal host, vector, or inanimate environment.

Communicable Period: The period of time during which an infected host remains capable of transmitting the infective agent.

Contact: A person who has been exposed to an infectious agent but does not yet exhibit any signs or symptoms of an infectious disease.

Contact Tracing: Identification and diagnosis of persons who may have come into contact with an infected person.

Detention: The temporary holding of exposed travelers and crew at a port of entry while the threat to public health is being determined, or while transportation to a quarantine facility is being arranged, or the quarantine facility is being established.

Epidemic: The occurrence of disease in a community, of cases of an illness with a frequency clearly in excess of normal expectancy.

Incubation Period: The time interval between initial exposure to an infectious agent and the first appearance of signs or symptoms associated with an infectious agent.

Isolation: Separation of ill persons who have a communicable disease from those who are healthy. Isolation restricts the movement of ill persons to help stop the spread of certain diseases.

Pandemic: A global epidemic. An epidemic occurring over a very wide area, crossing international boundaries and usually affecting a large number of people.

Quarantinable Disease: Any of the communicable diseases listed in Executive Order 13295 (i.e, cholera, diphtheria, infectious tuberculosis, plague, smallpox, yellow fever, viral hemorrhagic fevers, SARS or influenza caused by novel or re-emergent influenza viruses that are causing, or have the potential to cause, a pandemic).

Quarantine: Separation and restriction of the movement of well persons who may have been exposed to a communicable disease to see if they become ill.

Screening: Active steps to identify the existence of disease in an individual or group of individuals through visual examinations, physical examinations, laboratory tests or other methods.

Surveillance: The ongoing systematic collection and analysis of data and the provision of information which leads to action being taken to prevent and control a disease.

Suspect: An ill person whose history and symptoms suggest that he or she may have or is developing a communicable disease.

Transmission: Mechanism by which an infectious agent is spread from a source to a person.

F. Abbreviations

AQS	Anchorage Quarantine Station
CBP	Customs and Border Protection
CDC	Centers For Disease Control and Prevention
COTP	USCG Captain of the Port
DGMQ	Division of Global Migration and Quarantine
DOS	US Department of State
EMS	Emergency Medical Services
EOC	Emergency Operation Center
FBI	Federal Bureau of Investigation
FIS	Federal Inspection Services
FEMA	Federal Emergency Management Agency
HHS	Department of Health and Human Services
IC	Incident Commander
ICE	Immigration and Customs Enforcement
ICP	Incident Command Post
ICS	Incident Command System
LHD	Local Health Department
MSIB	Maritime Safety Information Bulletin
MOA	Memorandum of Agreement
MOU	Memorandum of Understanding
NIMS	National Incident Management System
PIO	Public Information Officer
PLF	Passenger Locator Form
PPE	Personal Protective Equipment
SHD	State Health Department
TSA	Transportation Security Administration
THAN	Traveler's Health Alert Notice
UC	Unified Command
USCG	United States Coast Guard
WHO	World Health Organization

G. CDC Bulletin Notification to Public Health Authorities of Ill Passengers or Crew on Ships Destined for the United States

Federal regulations

Pursuant to 42 CFR 71.21(a), CDC requires the master of a ship destined for a U.S. port to report immediately any death or any ill person among the ship's passengers or crew. This includes those who have disembarked or have been removed from the ship due to illness or death. You must report immediately to the CDC Quarantine Station at or closest to the U.S. port of arrival any illnesses or deaths that occur during the 15 days before the ship arrives at the port, or during the period *since* the ship left a U.S. port (whichever period of time is shorter).

Required reporting

Ill persons displaying any of these conditions *must* be reported under federal regulations:

- 1) **fever** (a measured temperature of 100° F [37.8° C] or greater) lasting more than 48 hours;
- 2) **fever** of any duration, **plus** any one of the following symptoms:
 - **rash,**
 - **swelling of the lymph glands,** or
 - **jaundice (yellowing of skin or eyes);** or
- 3) **diarrhea** (three or more loose stools or a greater than normal number of loose stools in a 24-hour period). *Note:* Cruise ships carrying 13 or more passengers should continue to report diarrhea cases to the CDC-Vessel Sanitation Program (VSP).

Requested reporting

In addition to the required reporting above, CDC **requests** that you report ill persons with the following conditions, which may also indicate a serious, communicable disease:

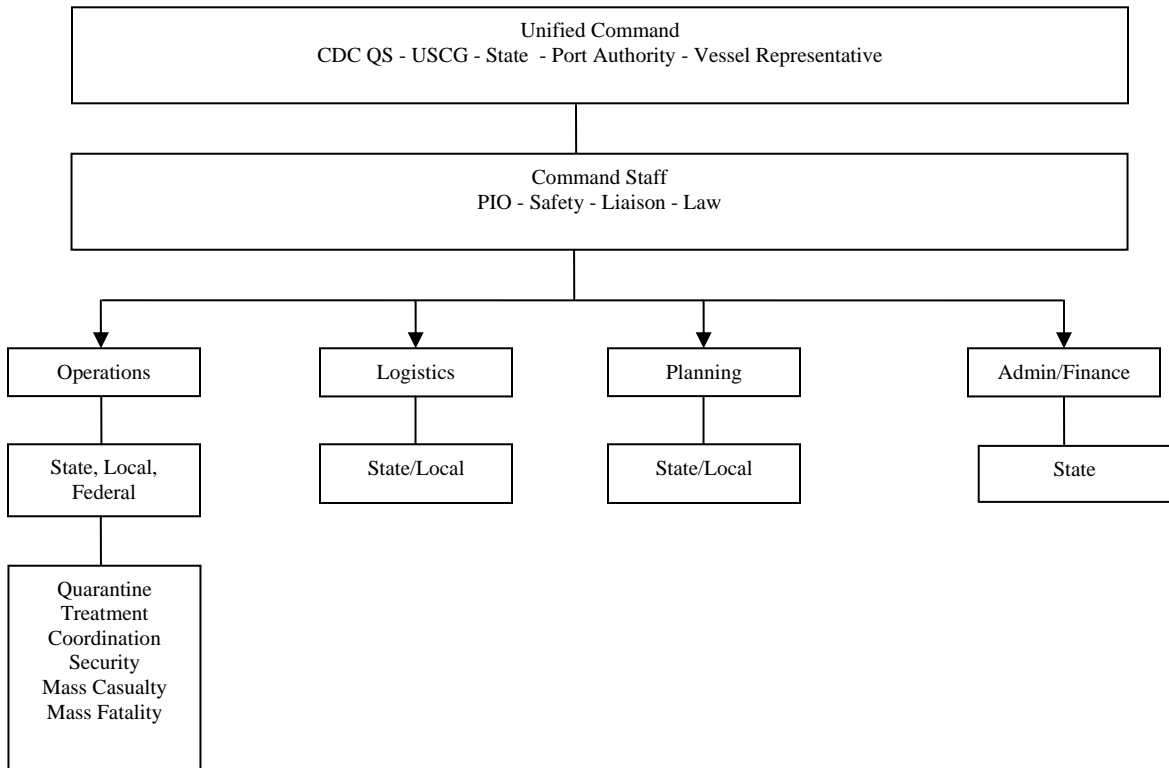
- 1) **fever of any duration, plus** any one of the following conditions:
 - **difficulty breathing or suspected/confirmed pneumonia,** or
 - **cough for more than 2 weeks or cough with bloody sputum,** or
 - **headache with neck stiffness,** or
 - **reduced level of consciousness,** or
 - **unexplained bleeding.**

To ensure reporting: The ship or its agent should immediately contact the CDC Quarantine Station at or nearest the port of arrival. CDC Quarantine Stations, their contact information, and areas of jurisdiction are found at:

http://www.cdc.gov/ncidod/dq/quarantine_stations.htm.

If contact cannot be made with the nearest station, please call the CDC Quarantine Duty Officer on call at 866-694-4867.

H. Incident Command/Unified Command Organization



I. Alaska Pandemic Influenza Multi Agency Coordination Group Organizational Chart

