#### A MESSAGE FROM HEALTH CANADA

#### INBOUND VIDEO

### Air Flight Cabin Crew Instructions

Health Canada has developed the accompanying video to help prevent the spread of Severe Acute Respiratory Syndrome (SARS).

This video outlines to your passengers:

- The symptoms of SARS
- What to do if they are experiencing symptoms of SARS
- An outline of Health Canada strategies to screen for SARS:
  - The white Travellers' Contact Information Form and directions for completing the Notice and the Form
  - The yellow Health Alert Notice
- Simple Public Health Measures

Your airline will also provide you with the two forms to be distributed during flights coming to Canada, to be completed by your passengers.

Please distribute both forms to your passengers early in the flight before showing the video. We ask that this be done within <u>two</u> (2) hours of departure. Some passengers may need help completing the forms.

It is important that the white Traveller Contact Information form be completed by all passengers and by all crews. Health Canada needs the addresses where passengers will be staying, and the telephone numbers where they can be contacted during the next two weeks of the flight date. The form will be collected when passengers and crews deboard their planes.

There are three questions to answer on the yellow Health Alert Notice. This form will be handed to Canadian Customs officials (CCRA) at the Customs Primary Inspection Line.

As more information about the etiology, communicability and transmission of this illness becomes available, the recommendations provided in this document may change

#### SARS FACT SHEET

The following fact sheet has been developed to help airline cabin crew assess potential cases of SARS and to provide guidelines to prevent transmission of the disease during flight.

### **Suspect Case of SARS:**

A person with:

• Fever (over 38 degrees Celsius)

#### And

• One or more respiratory symptoms including cough, shortness of breath, and difficulty breathing

### And

One or more of the following:

- Close contact\* within 10 days of onset of symptoms with a suspect or probable case
- Recent travel within 10 days of onset of symptoms to a WHO reported "affected area" in Asia
- Recent travel or visit within 10 days of onset of symptoms to a defined setting that is associated with a cluster of SARS cases

### And

- No other known cause of current illness
- \*Close contact means having cared for, lived with, or had face-to-face (within one metre) contact with, or having had direct contact with respiratory secretions and/or body fluids of a person with SARS.

## For your information only

A "probable" case of SARS is similar to a suspect case, but often the case has a more severe illness, with progressive shortness of breath and difficulty breathing, and in some cases, chest x-rays shows signs of acute respiratory distress syndrome with no known cause.

The above descriptions of a probable and suspect case are provided for communication purposes and not for scientific purposes At this time, the cause of the illness remains unknown, however national and international laboratory testing and collaboration are ongoing.

### **In-flight Protocol:**

- 1. Any passenger who appears to have a fever and respiratory symptoms such as coughing or difficulty breathing, should be interviewed by a member of the in-flight cabin crew to obtain additional information about (1) their symptoms, (2) their recent travel history, and (3) possible contact with a person who has been diagnosed with SARS. The interview should be conducted in a private place onboard.
- 2. Should the passenger meet the suspect case definition of SARS, he/she should be treated as a suspect case of SARS, and the infection control measures listed below should be followed.
- 3. Inform the pilot of the suspect SARS case. He/she will inform the airline and the airport of designation that there is a suspect case of SARS aboard.
- 4. The airport health authority or Port Authority will determine the course of action when the flight approaches its destination.
- 5. Where possible, move the passenger to the back of the plane to isolate him/her from the other passengers. Designate one toilet facility to be used only by the sick passenger. Where possible, minimize the contact between the other passengers and the suspect case of SARS.

#### **Infection Control Measures:**

Hand washing is the most important hygiene measure to prevent the spread of infection.

- Hands must be washed:
  - After any direct contact with a sick passenger,
  - Before contact with the next passenger,
  - After contact with body fluids, secretions and excretions, such as saliva,
  - After contact with items known or considered likely to be in touch with respiratory secretions (e.g. tissues, napkins, drink containers, etc.)
- Instruct the passenger believed to be a suspect case in proper hand washing procedures.
- Plain soap may be used for routine hand washing.
- Waterless antiseptic hand rinses should be available as an alternative to hand washing.
- If hands are soiled with body fluids, they should be washed with soap and water before using waterless antiseptic hand rinses. If soap and water are unavailable, cleanse hands first with detergent-containing towelettes.

## **Protective Respirators (Masks)**

- A passenger believed to be a suspect case should wear a N95 respirator or equivalent. Masks should be changed if they become moist, hard to breath in, physically damaged or visibly soiled.
- It is advisable for the airline cabin crew in close contact with the passenger to wear an N95 respirator or equivalent while providing services to the passenger crew believe may be a suspect case.
- If a N95 respirator or the equivalent is unavailable, a surgical mask is a lesser alternative.

# **Cleaning Procedures**

As major cleaning cannot be undertaken until the aircraft arrives at its destination, cabin crew should be supplied with materials to use to clean any surfaces in contact with respiratory secretions of the suspect case of SARS.

- Soiled linen: Linen, such as pillows or blankets, should be transported in leak resistant, closed laundry bags.
- Waste: Dispose of all waste in a plastic garbage bag and seal the bag. Double bagging of waste is not necessary. Appropriate hand washing is required after handling waste such as tissues or napkins, or drink containers..
- Airsickness containers: Used containers should be stored during the flight in the toilet compartment. They should be removed from the aircraft by the toilet servicing team and disposed of along with the aircraft toilet wastes.
- Destroy magazines, newspapers and toys if there is any possibility that they may have been in contact with the suspects case of SARS.