Infections due to the new Coronavirus, COVID-19

Ports and vessels

These instructions apply to all crews of vessels and all port employees and to the first responders of all ports.

The identified quarantine ports are:

The Faxa Bay ports, the port of Grundarfjordur, the port of Isafjordur, the port of Sauðarkrokur, the port of Akureyri, the port of Seydisfjordur, the Fjardabyggð ports, the port of Vestmannaeyjar, the port of Þorlakshofn.

In case of reasonable grounds to suspect transmission aboard a vessel, the Icelandic Coast Guard can order the vessel to dock at one of these ports, in consultation with the port administration in question.

Hand washing – hand hygiene

Repeat each step of the hand washing procedure at least five times

1. Rub hands palm to palm
2. Rub right palm over left dorsum and vice versa
3. Rub thoroughly between all fingers
4. Rub fingertips and fingernails of both hands together thoroughly
5. Rub thumb of each hand thoroughly
6. Rub each palm thoroughly

Guidelines from the Chief Epidemiologist for Iceland, December 2019
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1. Abbreviations

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<thead>
<tr>
<th>Abbreviation</th>
<th>Name</th>
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<tbody>
<tr>
<td>112</td>
<td>Neyðarlinan, coordinated emergency hotline for all of Iceland</td>
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<tr>
<td>NCIP-DCP</td>
<td>National Commissioner of the Icelandic Police’s Department of Civil Protection and Emergency Management</td>
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<td>DOC</td>
<td>District Operations Command</td>
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<tr>
<td>COVID-19</td>
<td>Respiratory infection due to the new Coronavirus</td>
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<tr>
<td>NCIP-CC</td>
<td>National Commissioner of the Icelandic Police’s Communication Centre</td>
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<td>ICG</td>
<td>Icelandic Coast Guard</td>
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<tr>
<td>SMS</td>
<td>Short Message Services</td>
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<tr>
<td>DCP-CC</td>
<td>Department of Civil Protection and Emergency Management’s Coordination Centre</td>
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<tr>
<td>CE</td>
<td>Chief Epidemiologist</td>
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<tr>
<td>WHO</td>
<td>World Health Organization</td>
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2. Check-list for port employees and responders due to COVID-19

Port employees and first responders of all ports means all those who work within a port area, including port employees, crews of vessels, shipping agents, service providers, police and customs officers.

When there is a risk of transmission of COVID-19, each employee must:

- Know the symptoms of a COVID-19 infection and the transmission route of the virus and acquaint themselves with instructions on acknowledged work procedures. For further information, see the Directorate of Health website: [www.landlaeknir](http://www.landlaeknir).
- The symptoms of COVID-19 are: Cough, fever, cold-like symptoms, muscle pain, fatigue, sore throat. Also loss of smell and taste has been reported.
- Notify their immediate supervisor in case of suspicion of a COVID-19 infection aboard a vessel or within a port area.
- Increase protection against infection and practice basic precautions against infection (see page 8).
- Be prepared to care for an individual who has the symptoms of COVID-19.
3. First response when COVID-19 is suspected

3.1 Communication links when a COVID-19 infection is suspected aboard a vessel before the vessel docks at the port. See image 2 on page 7.

a. Vessels are required to transmit the Captain’s Declaration of Health via SafeSeaNet; this declaration shall generally be transmitted no later than 24 hours before arrival in port. The Customs service monitors this system and informs the CE if there is suspicion of transmission aboard a vessel.

b. Additionally, the ICG shall contact the vessel before the vessel docks and request the Captain to transmit a Declaration of health – COVID-19 to the ICG. See image 1. Any suspect case occurring after the declaration has been submitted and prior to calling an Icelandic port must be reported immediately by the captain of the ship to the Icelandic Coast Guard.

c. The pilot/harbour master shall, through the communications channel of the port in question, ask if the status on board as regards COVID-19 suspect cases has changed since the declaration was submitted.

d. The ICG shall inform the CE at the email address svl@landlaeknir.is and through telephone number 510-1933 if there is suspicion of transmission before a vessel docks.

e. Immediately following this, the same information shall be sent to the port of arrival in question.

f. All responders (Chief Epidemiologist/police/ICG/Customs/port authorities of the port in question) shall consult with each other and with the Captain on not opening the vessel and not allowing passengers and crew to disembark. The vessel shall be anchored outside the port and shall not dock, or shall be docked but with no embarking or disembarking.

g. The police shall ensure that the area is monitored, in consultation with the ICG.

h. The ICG/police contacts the NCIP-CC. The NCIP-CC/112 mobilises the doctor on call at the district’s health institution.

i. The doctor on call boards the vessel and is responsible for carrying out an examination and risk assessment due to suspicion of COVID-19 infection, in consultation with the District Epidemiologist and the Chief Epidemiologist. The Chief Epidemiologist office’s contact phone number is 510 1933.

j. All the responders shall consult together to decide whether to mobilise the National Strategy Plan for Port and Vessel Quarantines.
Captain’s declaration on COVID-19 suspect cases on board vessel

Questionnaire to be completed and signed by vessel’s captain and doctor if carried.

<table>
<thead>
<tr>
<th>Captain’s name:</th>
<th>Vessel name:</th>
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<tr>
<td>Vessel Call Sign:</td>
<td>Vessel IMO number:</td>
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**Questions**

<table>
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<tr>
<th>Has anyone on-board your vessel, crew or passengers, within the past 14 days, to the best of your knowledge ...</th>
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<tbody>
<tr>
<td>… been in a [COVID-19 defined area with risk of infection]? YES [ ] NO [ ]</td>
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<tr>
<td>if YES, do these persons show symptoms of COVID-19 (cough, fever, cold-like symptoms, muscle pain, fatigue, sore throat)? YES [ ] NO [ ]</td>
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<tr>
<td>Comments:</td>
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<tr>
<th>… had close contact with anyone diagnosed as having coronavirus disease (COVID-19)?</th>
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<tr>
<td>YES [ ] NO [ ]</td>
</tr>
<tr>
<td>Comments:</td>
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<tr>
<th>… provided care for someone with COVID-19 disease or worked with a healthcare worker infected with COVID-19 disease?</th>
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<tr>
<td>YES [ ] NO [ ]</td>
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<td>Comments:</td>
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<tr>
<th>… visited or stayed in close proximity to anyone with COVID-19 disease?</th>
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<td>YES [ ] NO [ ]</td>
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<tr>
<td>Comments:</td>
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<tr>
<th>… worked in close proximity to or shared the same classroom environment with someone with COVID-19 disease?</th>
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<td>YES [ ] NO [ ]</td>
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<tr>
<td>Comments:</td>
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<th>… travelled with a patient with COVID-19 disease in any kind of conveyance?</th>
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<tr>
<td>YES [ ] NO [ ]</td>
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<td>Comments:</td>
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<tr>
<th>… lived in the same household as a patient with COVID-19 disease?</th>
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<tr>
<td>YES [ ] NO [ ]</td>
</tr>
<tr>
<td>Comments:</td>
</tr>
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</table>

Date and captain’s signature Date and doctor’s signature (if carried)

When form has been filled in and signed, scan and mail to sar@ice.is, Icelandic Coast Guard.

Any suspect case occurring after the declaration has been submitted and prior to calling an Icelandic port must be reported immediately to the Icelandic Coast Guard.

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Image 1. Declaration of health – COVID-19
3.2 Communication links when a COVID-19 infection is suspected in a passenger or crew member who has disembarked and is inside the port’s dispatch area/customs territory. 
(See image 2 on page 7)

a. The police, customs employees and port authorities of the port in question shall close all dispatch centres and customs gates and, in cooperation with the Captain, all passengers and crew who have not been processed through shall be sent back to the vessel.

b. The police shall inform the Chief Epidemiologist of the case through phone no. 510 1933 and also send a message to the email address: svl@landlaeknir.is

c. The police shall inform the ICG’s communication centre through the NCIP-CC.

d. The police shall ensure that the port area is monitored as well as wherever else it is considered necessary.

e. The police shall contact the NCIP-CC. The NCIP-CC/112 mobilises the doctor on call at the district’s health institution.

f. The doctor on call is responsible for carrying out an examination and risk assessment due to suspicion of COVID-19 infection, in consultation with the District Epidemiologist and the Chief Epidemiologist. The Chief Epidemiologist office’s contact phone number is 510 1933.

g. Port and customs employees will be given further information/instructions at a previously decided area at the customs premises.

h. The port administration shall set up a watch in the port area to ensure that no-one can exit or enter the area.

i. The district police shall set up external barriers if necessary and turn back any buses that may have already set off from the port and direct the passengers to reembark.

j. The police/customs officers shall contact the vessel’s agent and request cooperation in contacting the vessel’s passengers.

k. The 112 emergency hotline shall send an SMS to all mobile phones within a defined area at the request of the district police.

l. All the responders shall consult together to decide whether to mobilise the National Strategy Plan for Port and Vessel Quarantines.

4. If the decision is made to quarantine a vessel

The National Strategy Plan for Port and Vessel Quarantines shall be put into action for the port in question. The Minister concerned shall be informed. The DOC shall be activated and shall supervise the matter in cooperation with the port administration, ICG, CE, DCP-CC and other concerned parties.
Image 2. Procedure that is put into action when suspicion of a COVID-19 infection arises aboard a vessel or within a port area.
5. Basic precautions against infection

Basic precautions against infection shall at all times be observed for all persons, whether or not they are showing signs of illness. **Quarantine ports shall possess protective gear and cleaning tools which shall be kept by the district police:**

- Disposable gloves.
- Disposable protective aprons.
- Face protection (or protective masks and goggles).
- Dry disinfectant powder that is sprinkled over liquid transmissible agents, turning the liquid into a gel-like substance.
- Antiseptic liquid for cleaning surface areas (Virkon).
- Trash bags.
- Paper towels.
- Signs and tapes for closing off a contaminated area (optional).

**Basic precautions against infection include:**

- General cleaning of hands, i.e. hand-washing and/or using hand sanitiser.
- Easy access to hand-washing facilities and hand sanitiser.
- Easy access to disposable gloves. Hands shall be sanitised after using those.
- Wearing disposable gloves and, a plastic apron and using a disposable cleaning rag for mopping up blood, vomit or other bodily fluids. Using face protection if there is a risk of bodily fluids being transmitted to the face. Taking precautions when coughing or sneezing.
- Putting used disposable equipment into a closed bag that may be disposed off into general waste.

**When there is general illness aboard a vessel or within a port area:**

- Adapt the surroundings and conditions to the patient’s symptoms.
- Call for assistance from a health-care institution if necessary.
- Separate the patient from the other passengers/crew members.
- Have on hand paper towels to mop up any potential transmissible agents, like blood, as well as plastic bags and vomit bags if the patient is vomiting.
- Ensure that the patient has access to a lavatory only he or she uses.
- Have a disinfectant and cleaning rag on hand (Virkon or chlorine solution, 500–1000 ppm strength).

All persons caring for the patient shall use protective gear suited to the illness. Use a protective mask and gloves during all nursing activities. Use a protective smock and apron as necessary, such as when there is risk of contact with contaminated body fluids (e.g. projectile vomiting). If the protective gear is contaminated by potential transmissible agents, it must be taken it off and clean gear put on, followed by hand-washing. Hands shall be washed and disinfected with hand sanitiser following all touching of the patient. Disposable gloves should not be washed or disinfected with hand sanitiser, but changed, with washing of the bare hands between changes. Limit any touching of the patient and keep all contact to a minimum. If at all possible, only one person should be in contact with the patient (unless he or she is very sick and needs two people to nurse him or her). Contaminated clothing shall be put into a closed bag and may be washed normally in a washing machine.
6. Care for patients and the involvement of a doctor at the port or aboard a vessel on its way into port

a. Port employees/vessel’s crews shall use basic precautions against infection (page 8) and use protective gear when caring for the patient.

b. Quarantining infected individuals is considered to be the most effective measure to prevent the spread of COVID-19 infection. The patient shall be moved to the vessel’s/port’s sick room that includes access to a lavatory meant only for the patient. Limit any contact with the patient.

c. Provide the patient with the following:
   - A vomit bag
   - Paper towels
   - A plastic waste bag for waste that can be disposed of into general trash (used protective gear, vomit bags, paper towels).
   - Hand sanitiser
   - Disinfectant (Virkon)

d. The patient shall be given instructions on precautions when coughing (cough/sneeze into a paper towel, dispose of it into a bag and apply sanitiser to hands). Put a fine-particulate respirator mask **without a vent** (at least FFP2) over the patient’s nose and mouth. If such a mask is too tight, a surgical mask shall be used.

e. The doctor on call shall arrive at the port/vessel and put on a protective smock, gloves, goggles and a fine-particulate respirator mask (at least FFP2/N95). The doctor shall carry out an examination and make a risk assessment in consultation with the District Epidemiologist for the port in question and the CE, through phone no. 510 1933, and the infectious disease specialist on call at the National University Hospital of Iceland, phone no. 543 1000.

f. The patient shall be given detailed information on transmission routes and the symptoms of a COVID-19 infection.

g. If a transmissible agent gets into the surrounding area (i.e. body fluids) it shall be wiped off with a disposable towel, the surface shall be cleaned with soapy water and then wiped down with a disinfectant (Virkon).

h. Used protective gear and other waste that has cumulated during patient care (e.g. used vomit nags, dirty towels) shall be put into a closed trash bag and disposed of in general waste.

i. Paramedics shall follow the instructions of the doctor on call, the district physician or the CE on precautions against infection when transporting a patient. A doctor shall accompany a patient during transportation if it is considered necessary.

j. The District Epidemiologist or his/her proxy shall inform the patient of the outcome of the risk assessment for acute pneumonia and contact tracing.

k. All staff who have taken care of the patient shall put on clean workwear after the patient has left the area. Dirty workwear can be washed normally in a washing machine.
7. Risk assessment and contact tracing

A doctor shall assess the transmission risk for port employees, vessel crew and others aboard the vessel. Those at risk for exposure are:

a. Employees who report direct contact with the infected person or contact with a transmissible agent (port employees/crew who cared for the patient, and others they were in contact with).

b. Everyone who has been in close contact with the patient, within 1 meter and not wearing protective clothing.

c. Those responsible for cleaning the area that was possibly contaminated, if protective clothing was not worn.

The doctor who carried out the examination can be expected to accompany the patient to the healthcare institution and the District Epidemiologist or his/her proxy is responsible for distributing information relating to risk assessment and contact tracing. The CE shall keep a record of those exposed to infection and provide further information on precautions against infections and behaviour in the following two weeks. Those belonging to this group who will be dwelling in Iceland for the next two weeks after exposure to infection shall follow the following instructions:

Quarantine of individuals that have been in close contact with COVID-19 patients.

- A health-care worker will give detailed information on transmission routes and the symptoms of a COVID-19 infection.
- The exposed individual shall remain in quarantine in his or her home until 14 days have passed since the possible infection occurred.
- If the individual experiences symptoms of COVID-19 infection he or she must call the health care centre (1700) and follow the instructions received.

Those who show no symptoms can continue on their way with the vessel, but shall be in contact with the health-care authorities in the country where they will stay for the next two weeks. **If it turns out that the person with which the individual has been in close contact with does not have the COVID-19 infection, all measures shall be suspended.**

8. Cleaning after a sick individual has left the premises

Cleaning shall begin as soon as the sick individual has left the premises. The premises shall be cleaned according to instructions from the CE and in cooperation with the port administration/Captain. Employees shall have received the relevant training to put on and take off protective gear, as well as in appropriate clean-up/disposal. It is unknown for how long the Coronavirus can survive outside the human body (hours or days). It generally depends on the surface, moisture and temperature.

8.1 Personal precautions against infection for those who clean areas where there is suspected contamination due to Coronavirus:

a. Basic precautions against infections are to be applied in cases of suspected COVID-19 infections.

b. When cleaning, the following protective equipment shall be used:
   i. Disposable gloves (two pairs)
   ii. A disposable apron
iii. Face protection if there is a risk of contaminated matter being transmitted to the face.

c. When the work is over, the used protective equipment shall be put into a plastic bag that shall be thoroughly closed, and may be disposed of in general waste.

d. Hands shall be washed and sanitiser applied to them as soon as the gloves have been disposed of into a closed bag that may be disposed off into general waste.

e. Clean workwear shall be put on once the work is finished. Dirty workwear can be washed normally in a washing machine.

8.2 Cleaning an area where there is suspicion of contamination by a dangerous transmissible agent:

a. The contaminated area shall be defined and all general traffic kept away from it.

b. The area where the patient was situated shall be cleaned, as well as the nearby surrounding areas.

c. Compressed air may not be used, as it can swirl the transmissible agent into the air.

d. Have a trash bag on hand.

e. Use an approved cleaning and disinfection agent (1 % Virkon). Use the correct strength.

f. Use paper towels to clean up any visible hazardous material. Change gloves if they have visible hazardous material on them.

g. Start by washing with soapy water and then repeat with a disinfectant (1 % Virkon).

h. Start cleaning at the top and move downwards. Start by spreading soapy water over the area, using a paper towel or a sprayer. When the whole area has been covered in soapy water, use paper towels to mop it up and dispose of those in a bag, close the bag and dispose of it into general waste. Then cover the whole area with paper towels and wet the towels with a chlorine solution. Wait for the time indicated by the manufacturer and then remove the towels and put them into a closed bag that may be disposed off into general waste. Finally, flush the area with hot water (60 °C) and dry it.

i. Paper and other disposable items from the area where the patient was kept shall also be put into a bag that may be disposed off into general waste.

j. Switch wash rags when going from one area to another and at the end of the work dispose of them into a bag that may be disposed off into general waste.

k. The following shall be cleaned inside lavatories used by patients:

   i. The doorknob
   ii. The lock
   iii. The faucet and sink
   iv. The adjacent walls and tabletop
   v. Lastly, the toilet seat and around it

l. Protective gear and gloves shall be disposed of into a bag and put in the general waste.
9. Further information


3. Information regarding COVID-19 at the Directorate of Health website