

	OFFICE OF MARINE AND AVIATION OPERATIONS National Oceanic and Atmospheric Administration	POLICY 1002	VERSION 1.0
		EFFECTIVE DATE 9/11/2009	
	AUTHORIZED BY: /s/ Jonathan W. Bailey	REVIEW BY 9/11/2012	
	RADM Jonathan W. Bailey Director, Office of Marine and Aviation Operations		RESPONSIBLE POSITION HS Director

MEDICAL CLEARANCE INTO FOREIGN PORTS

1. Purpose

- 1.1 This policy guides and facilitates the implementation of requirements set by the World Health Organization (WHO) regarding health and sanitation when National Oceanic and Atmospheric Administration (NOAA) ships enter a foreign port.

2. Scope

- 2.1 The policy applies to all NOAA officers, crew, and other personnel while aboard any vessel within the NOAA Fleet.

3. Definitions

No definitions required for this policy.

4. Policy

- 4.1 To be in compliance with the WHO minimum standards, NOAA ships shall follow the International Health Regulations (IHR) 2005. The IHR 2005 requires three levels of documentation to be present aboard ships for international ship travel. Until the Center for Disease Control (CDC) develops its policy, NOAA ships shall follow the U.S. Navy interim policy as guidance. This policy can be found at:
[http://navymedicine.med.navy.mil/Files/Media/directives/NOTE%206210%20\(07%20Nov%202007\).pdf](http://navymedicine.med.navy.mil/Files/Media/directives/NOTE%206210%20(07%20Nov%202007).pdf)
- 4.2 The three steps for being medically cleared to enter into a foreign port are:
- A. Documentation of vaccination against yellow fever. This applies to all embarked personnel upon entering one of the countries where vaccine is recommended by the CDC for travelers or the country itself requires it for all entering visitors (see Attachment 1). The yellow fever vaccine is highly recommended for those traveling to an area where this disease is endemic (Attachment 2 and 3). Scientists traveling via an OMAO vessel to a location where immunization is required before entering or recommended by the CDC must submit proof of immunization to NOAA Health Services before medical clearance to sail is granted. Embarked personnel planning additional travel other than the vessel's location should obtain all required immunizations for the planned destination(s).

- B. Maritime Declaration of Health. This form (U.S. Navy Declaration of Health, NAVMED 6210/3 (11-2007)) must be completed by the ship's Commanding Officer and its senior Medical Officer. In some rare cases, the senior Medical Officer may be the Executive Officer or Medical Person-In-Charge if no U.S. Public Health Service officer is onboard. This completed form will be submitted to the competent authority during the customs clearance process before any embarked personnel are permitted to disembark (Attachment 4). Some countries may also request an inventory of the controlled drugs carried aboard. The U.S. Navy Declaration of Health, NAVMED 6210/3 (11-2007) may be downloaded from the web at: [http://navymedicine.med.navy.mil/Files/Media/directives/NAVMED%206210-3%20\(11-2007\).pdf](http://navymedicine.med.navy.mil/Files/Media/directives/NAVMED%206210-3%20(11-2007).pdf)
- C. Shipboard Sanitation Control Exemption/Ship Sanitation Control Certificate (SSCEC/SSCC). This certificate is obtained after a representative from a US Navy Preventative Medicine Unit inspects the ship for safety, sanitation, and possible vectors which might transmit disease. This inspection will include a review of the following logs: (1) sick call log, (2) potable water log, (3) engineering ballast log, and (4) the safety and sanitation inspection log. Areas of focus during this inspection are outlined in Attachment 6. The SSCEC/SSCC will be granted if no evidence of infestation or illness is found or has been corrected. See Attachment 5 for U.S. Navy Preventative Medicine Unit locations.

All SSCEC/SSCC forms expire after 6 months. A 30 day extension can be filed if the certificate expires before the end of the cruise. This extension must be obtained from the same U.S. Navy Preventative Medicine Unit that granted the original SSCEC/SSCC. The NOAA safety and sanitation inspections required for fleet inspection will be used in place of NAVMED 6240 Food Safety Inspections. The potable water log requires documentation of: (1) testing for E-coli bacteria (Attachment 7), and (2) treatment such as with bromine.

5. Guidance

Associated documents will provide policy.

6. Responsibilities

The ship's Commanding Officer and senior Medical Officer are responsible for completing and submitting the U.S. Navy Declaration of Health, NAVMED 6210/3 (11-2007).

7. References

World Health Organizational International Health Regulation 2005
http://www.who.int/csr/ihr/IHR_Areas_of_work.pdf

U.S. Navy: BUMEDNOTE 6210

[http://navymedicine.med.navy.mil/Files/Media/directives/NOTE%206210%20\(07%20Nov%202007\).pdf](http://navymedicine.med.navy.mil/Files/Media/directives/NOTE%206210%20(07%20Nov%202007).pdf)

U.S. Navy Interim Policy

[http://navymedicine.med.navy.mil/Files/Media/directives/NOTE%206210%20\(07%20Nov%202007\).pdf](http://navymedicine.med.navy.mil/Files/Media/directives/NOTE%206210%20(07%20Nov%202007).pdf)

NOAA Fleet Inspection Manual NC Instruction 5100.1B

8. Authority

OMAO Policy 1001 – Category 1000 - Medical

9. Effect on Other Documents

This document supersedes NOAA Interim Policy for Medical Clearance into Foreign Ports, dated September 2008.

Attachment 1

Countries Requiring Documentation of Yellow Fever Immunization

Angola
Benin
Bolivia (or signed affidavit at point of entry)
Burkina Faso
Burundi
Cameroon
Central African Republic
Chad
Congo
Côte d'Ivoire
Democratic Republic of the Congo
French Guiana
Gabon
Ghana
Liberia
Mali
Mauritania (for a stay >2 weeks)
Niger
Rwanda
São Tomé and Príncipe
Sierra Leone
Tanzania
Togo

Attachment 2

Locations in Africa Where Yellow Fever Vaccination is Recommended by the Centers for Disease Control



Attachment 3

Locations in South America Where Yellow Fever Vaccination is Recommended by the Centers for Disease Control



Attachment 4

Sample US Navy Declaration of Health Form

US Navy Declaration of Health

To be completed and submitted to the competent authority by the Captain of the ship entering a foreign port.

PORT NAME:		DATE (DD MMM YYYY):	
SHIP NAME:	HULL NUMBER:	GROSS TONNAGE:	ARRIVING FROM:
NATIONALITY: USA		CAPTAIN'S NAME:	
Valid Sanitation Control Exemption / Control Certificate on Board?	<input type="checkbox"/> YES <input type="checkbox"/> NO	ISSUED AT	DATE (DD MMM YYYY):
Is Re-Inspection Required?	<input type="checkbox"/> YES <input type="checkbox"/> NO		
Has ship / vessel visited an affected area identified by the World Health Organization?	<input type="checkbox"/> YES <input type="checkbox"/> NO	PORT NAME:	DATE OF VISIT (DD MMM YYYY):
List ports of call from commencement of voyage with dates of departure, or within past 30 days, whichever is shorter:		PORT NAME:	DEPARTURE DATE:
NUMBER OF CREW ON BOARD:		NUMBER OF PERSONS OTHER THAN CREW ON BOARD:	
HEALTH QUESTIONS			
1. Has any person died on board during the voyage other than as a result of accident? If yes, state particulars in attached schedule. Total Number of Deaths: _____		<input type="checkbox"/> YES <input type="checkbox"/> NO	
2. Is there on board or has there been during the international voyage any case of disease which you suspect to be of a reportable infectious nature (e.g., Medical Event Report submitted)? If yes, state particulars in attached schedule.		<input type="checkbox"/> YES <input type="checkbox"/> NO	
3. Has the total number of ill persons during the voyage been greater than normal / expected? Total Number of ill persons? _____		<input type="checkbox"/> YES <input type="checkbox"/> NO	
4. Is there any ill person on board now? If yes, state particulars in attached schedule.		<input type="checkbox"/> YES <input type="checkbox"/> NO	
5. Was a medical practitioner consulted? If yes, state particulars of medical treatments or advice provided in attached schedule.		<input type="checkbox"/> YES <input type="checkbox"/> NO	
6. Are you aware of any condition on board which may lead to infection or spread of disease? If yes, state particulars in attached schedule.		<input type="checkbox"/> YES <input type="checkbox"/> NO	
7. Has any sanitary measures (e.g., quarantine, isolation, disinfection or decontamination) been applied on board? If yes, specify type, place and date: _____		<input type="checkbox"/> YES <input type="checkbox"/> NO	
8. Have any stowaways been found on board? If yes, where did they join the ship (if known): _____		<input type="checkbox"/> YES <input type="checkbox"/> NO	
NOTE: In the absence of a surgeon, the Captain/Master should regard the following symptoms as grounds for suspecting the existence of a disease of an infectious nature: a. fever, persisting for several days or accompanied by (1) prostration; (2) decreased consciousness; (3) glandular swelling; (4) jaundice; (5) cough or shortness of breath; (6) unusual bleeding; or (7) paralysis. b. with or without fever: (1) any acute skin rash or eruption; (2) severe vomiting (other than sea sickness); (3) severe diarrhea; or (4) recurrent convulsions.			
I hereby declare that the particulars and answers to the questions given in this Declaration of Health (including the schedule) are true and correct to the best of my knowledge and belief.			
CAPTAIN NAME:		SENIOR MEDICAL DEPT. REP. (When Applicable):	
CAPTAIN SIGNATURE:	DATE (DD MMM YYYY):	SENIOR MEDICAL DEPT. REP. SIGNATURE:	DATE (DD MMM YYYY):

NAVMED 6210/3 (11-2007)

Cut and paste onto browser:

[http://navymedicine.med.navy.mil/Files/Media/directives/NAVMED%206210-3%20\(11-2007\).pdf](http://navymedicine.med.navy.mil/Files/Media/directives/NAVMED%206210-3%20(11-2007).pdf)

Attachment 5

List of Preventive Medicine Departments Responsible for SSCEC Inspections

Fleet Concentration Area	Preventive Medicine Asset	Mailing Address	Telephone/e-mail
U.S. Naval Academy, Annapolis, MD	NHC Annapolis, MD	NHC Annapolis U. S. Naval Academy 250 Wood Road Annapolis, MD 21402-5050	Prev Med: 410-293-4122 DSN: 281-4122 NHC Annapolis 800.475.9365
NSA Bahrain	BMCN Bahrain	BMCN Bahrain PSC 836 BOX 2670 - FPO AE 09636	Prev Med: 318-439-4457/3160 Prev Med local cell: +973-36-662-395 DSN: 318-439-4457/3160 BHC Bahrain: 011-973-1785-4457/3160
NSB Bangor, WA	BHC Bangor	BHC Bangor 2850 Thresher Ave. Silverdale, WA 98315	Prev Med: 360-315-4471 DSN: 322-4471 BHC Bangor: 360-315-4453
NAS Brunswick, ME	NBHC Brunswick, ME	NBHC, Brunswick 650 Seawall St. Brunswick, ME 04011	Prev Med: (207) 921-2646 DSN: 476-2646 NBHC Brunswick: 207-921-2662
NS Charleston, SC	NHC Charleston, SC	3600 Rivers Ave North Charleston, SC 29405- 7769	Prev Med: 843-743-7111 DSN: 563-7111 prevmed4@med.navy.mil NHC Charleston 843-743-7000
MCAS Cherry Point, NC	NHC Cherry Point	PSC 8023 Cherry Point, NC 28533	Prev Med: 252-466-6530/2528 DSN: 582-6530-2528 NHC Cherry Point: 252-466-0266
NAS Corpus Christie, TX	NH Corpus Christie	NH Corpus Christi 10651 E St. Corpus Christi, TX 78419	Preventive Medicine: 361-961-6139 DSN: 861-6139 NH Corpus Christi: 361-961-2688
NSA Diego Garcia	BMCN Diego Garcia	BMCN Diego Garcia PSC 466, Box 3 FPO AP 96595-0003	Prev Med: 011-246-370-4218 DSN: 315-370-4218 BHC Diego Garcia: 011-246-370-4211
NWS Earle, NJ	NHC Earle, NJ	NHC Earle Bldg C3 201 Rte 34 S Colts Neck, NJ 07722	Prev Med: 732-866-2274 DSN: 449-2274 NHC Earle: 732-866-2300
NS Everett, WA	BHC Everett	BHC Everett 2000 W. Marine View Dr. Everett, WA 98207	Prev Med: 425-304-4084/5 DSN: 727-4084/5 NHC Everett: 425-304-4040

Fleet Concentration Area	Preventive Medicine Asset	Mailing Address	Telephone/e-mail
NS Great Lakes	NHC Great Lakes	NHC Great Lakes 3001A 6 th St. Great Lakes, IL 60088	847-688-4535 DSN792-4535 NHCGreatLakes-Prevmed-nhegl@med.navy.mil NH Great Lakes: 847-688-4560
NSB Groton, CT	Naval Health Clinic New England, Groton, CT	NBHC ATTN: Code 11G P.O. Box 600 Groton, CT 06349	Prev Med: 860-694-2945 DSN: 694-2945 NHCNE, Groton: 860-694-4123
NS Guantanamo Bay	NH Guantanamo Bay	NH Guantanamo Bay Prev Med Dept FPO AE 09589	Prev Med: (011)-5399-72990 DSN: 660-2998, press 1 for hosp, then ext 72990 NH Guantanamo Bay: (011) 5399-72360
NS Guam	NH Guam	U.S. Naval Hospital Guam PSC 490 FPO AP 96538-9340	Prev Med: 671-344-9787 DSN: 344-9525 Naval Hospital Guam: (671) 344-9340
NS Ingleside, TX	BHC Ingleside	327 Coral Sea, Suite123, Ingleside, TX, 78362	Prev. Med. 877-776-1369 DSN: 776-1369 BHC Ingleside: 877-776-1374
Key West, FL	BHC Key West	1300 Douglas Circle Key West, FL 33040	Prev Med: 305-293-4600 ext. 1353 DSN: 483-4600 ext 1353 BHC Key West: 305-293-4600
Kings Bay, GA	BHC Kings Bay, GA	881 USS James Madison Rd King's Bay, GA 31547-2531	Prev Med: 912-573-4253 DSN: 573-4235 BHC: 912-573-4215
NAB Little Creek, VA	Navy Environmental and Preventive Medicine Unit 2	Fleet and FMF Support 1887 Powhatan St, Norfolk, VA 23511	Comm: 757-953-6600 DSN: 377-6600 NEPMU2Norfolk- FleetandFMFSupport@med.navy.mil NEPMU2: 757-953-6600

Attachment 5 (continued)

Fleet Concentration Area	Preventive Medicine Asset	Mailing Address	Telephone/e-mail
NS Mayport, FL	BHC Mayport	PO BOX 280148 NAS Mayport, FL 32228	Prev Med: 904-270-4346 DSN: 960-1346 Phone: (904) 270-4303
NS Naples, Italy	NH Naples	U.S. Naval Hospital Naples, Italy PSC 827, Box 1000 FPO AE 09617-1000	Prev Med: 011-39-081-811-6299 DSN: 629-6299 NH Naples: 011-39-081-6000/1
NS Norfolk, VA	Navy Environmental and Preventive Medicine Unit 2	Fleet and FMF Support 1887 Powhatan St, Norfolk, VA 23511	Comm: 757-953-6600 DSN: 377-6600 NEPMU2Norfolk- FleetandFMFSupport@med.navy.mil NEPMU2: 757-953-6600
NAS North Island, CA	Navy Environmental and Preventive Medicine Unit 5	NEPMU5 3235 Albacore, Alley San Diego, CA 92136	Fleet Support: (619) 556-5906 DSN 526-7070 FleetSupport@med.navy.mil NEPMU5: (619) 556-7070
NAS Pensacola	BHC NAS Pensacola	Naval Hospital Pensacola 450 Turner St. Pensacola, FL 32508	Prev Med: 850-452-5242 ext 220 DSN: 922-5242 ext 220 BHC NAS Pensacola: 850-452-5242
NS Pearl Harbor, HI	Navy Environmental and Preventive Medicine Unit 6	NEPMU-6 1215 North Road Pearl Harbor, HI 96860	Fleet & FMF Support: 473-0555 DSN: 315-473-0555 NEPMU6FLEET/FMFSUPPORT@med.navy.mil NEPMU6: 808-473-0555
NS Point Loma, CA	Navy Environmental and Preventive Medicine Unit 5	NEPMU5 3235 Albacore, Alley San Diego, CA 92136	Fleet Support: (619) 556-5906 DSN 526-7070 FleetSupport@med.navy.mil NEPMU5: (619) 556-7070
NCB Port Hueneme/Naval Base Ventura County, CA	BHC Port Hueneme, CA	BHC Port Hueneme, CA 162 First Street, Port Hueneme, CA 93043-4316	Prev Med: (805) 982-6347 DSN: 551-6347 BHC Port Hueneme: (805) 982-6370
NS Portsmouth, NH	NBHC Portsmouth, NH	NBHC Portsmouth, NH 1 Ayres Circle Bldg H-1, PNS Portsmouth, NH 03804-5000	Prev Med: 207-438-1998 DSN: 684-1998 NBHC Portsmouth: 207-438-4940
Fleet Concentration Area	Preventive Medicine Asset	Mailing Address	Telephone/e-mail
Puget Sound Naval Shipyard, Bremerton, WA	BHC Bangor	BHC Bangor 2850 Thresher Ave. Silverdale, WA 98315	Prev Med: 360-315-4471 DSN: 322-4471 BHC Bangor: 360-315-4453
NS Rota, Spain	NH Rota, Spain	U. S. Naval Hospital Rota PSC 819 Box 18 FPO, AE 09645-0018	Prev Med: 011 (34) 956-82-3110 DSN: 314-727-3110 Preventive.Medicine@rota.med.navy.mil NH Rota: 011 (34) 956-82-3305
San Diego, CA	Navy Environmental and Preventive Medicine Unit 5	NEPMU5 3235 Albacore, Alley San Diego, CA 92136	Fleet Support: (619) 556-5906 DSN 526-7070 FleetSupport@med.navy.mil NEPMU5: (619) 556-7070
FA Sasebo, Japan	BHC Sasebo	BHC Sasebo PSC 476, Box 25 FPO AP 96322	Prev Med: 011-81-956-50-2586 DSN: 252-2586 BHC Sasebo: 011-81-956-50-2550
NS Sigonella, Italy	NH Sigonella, Italy	NH Sigonella PSC 836 BOX 2670 - FPO AE 09636	Prev Med: 011-39-095-56-6231 DSN: 314-624-6231 prevmed5@med.navy.mil NH Sigonella: 011-39-095-56-3842
NSA White Beach, Okinawa, Japan	NH Okinawa	US Naval Hospital Okinawa PSC 482 FPO AP 96362-1600	Prev Med: 01181-611-743-3028/7808 DSN: 315-643-3028/7808 NH Okinawa: 01181-611-743-7555
NSA Yokosuka, Japan	NH Yokosuka, Japan	US Naval Hospital Yokosuka PSC 475, Box 1 FPO AP 96350-1600	Prev Med: 011-81-468-16-2608 DSN: 315-243-2608 NH Yokosuka: 011-81-468-16-7144

Attachment 6

Areas of Focus for US Navy Preventative Medicine Unit Inspections for Issuance of the Shipboard Sanitation Control Exemption / Ship Sanitation Control Certificate

Areas	Guidance	Navy References
Galley	Food is from approved sources, properly stored, prepared and handled per preventive medicine policies	NAVMED P-5010-1, Food Safety
Pantry (galley stores)		
Stores		
Hold(s) Cargo	No evidence of insect , or rodent infestations	NAVMED P-5010-8, Navy Entomology and Pest Control Technology
Quarters	Habitability, living spaces are maintained in clean and sanitary conditions.	OPNAVINST 9640.1A, Shipboard Habitability Program
- crew		
- officers		
- embarked personnel		
Potable Water	Shipboard potable water system is properly operated, maintained and medical surveillance to include daily halogen measurement and bacteriological weekly testing is carried out.	Naval Ships Technical Manual 533, Potable Water Systems NAVMED P-5010-6, Potable Water Afloat
Sewage	Shipboard Marine Sanitation Device is properly operated and maintained, and discharges restrictions followed.	OPNAVINST 5090.1 series Chapter 19, Environmental Compliance Afloat. Confirm with Ship Engineering Department
Ballast Water	Ballast water is properly managed and discharged.	OPNAVINST 5090.1 series Chapter 19, Environmental Compliance Afloat. Confirm with Ship Engineering Department.
Solid and Medical Waste	Solid waste is properly handled and disposed in accordance with naval policies.	OPNAVINST 5090.1 series Chapter 19, Environmental Compliance Afloat.
Standing Water	Standing water not allowed to accumulate, providing condition for insect problems	NAVMED P-5010-8 Navy Entomology and Pest Control Technology
Engine Room	No evidence of rodent or insect infestation.	NAVMED P-5010-8 Navy Entomology and Pest Control Technology
Medical Facilities	Medical facilities are properly maintained and clean.	TYCOM Instruction 6000 series: Shipboard Medical Procedures Manual

Recommended Minimum Shipboard Documents to review:

NAVMED 6240 Food Safety Inspections	Potable Water Log
Medical Log	Engineering Ballast Log

Attachment 7

Procedure for Potable Water Testing

Testing of the ship's water for the presence of E-coli bacteria is performed once a month unless there is medical evidence to warrant more frequent testing. The Navy defines medical evidence in this instance as two or more people with gastrointestinal symptoms or a positive finding on a water test for E-coli. In the event of a positive finding on a water test for E-coli, corrective action must be taken followed by two negative E-coli tests performed two weeks apart.

All needed supplies for water testing for E-coli using the Colilert test are supplied by NOAA Health Services. They are listed below.

Colilert Reagent powder.

Sterile transparent noncolored container that has a measured line to indicate 100ml.

Temperature controlled incubator

Colilert Presence/Absence Comparator

6 watt 365 nanometer ultraviolet lamp

Ultraviolet light protective eyewear

Directions

(More detailed instructions are included in the Colilert Test Kit.)

1. Obtain a 100ml sample from two different water sources on the ship. Each sample is to be placed in a clear non-colored container.
2. Add one packet of reagent to each container and mix well.
3. Place the two 100ml samples into the incubator for 24 hours.
4. Remove the two samples from the incubator after 24 hours and compare the color with the Colilert Comparator. If the color of the water sample is clear or is less yellow than the Colilert Presence/Absence Comparator, the result is considered negative for both coliforms and E-coli. If the color of the water sample is as yellow or more or darker yellow than the Colilert Presence/Absence Comparator, the result is considered positive for coliforms.
5. The sample(s) that tested positive for coliforms must be further tested for the presence of E-coli. This is done by viewing the coliform positive sample with an ultraviolet light in a dark room. If the sample fluoresces at an intensity equal to or less than the Comparator, it is considered negative for E-coli. If the sample fluoresces at an intensity greater than or equal to the Comparator, it is considered positive for E-coli.
6. All results must be read within 24-28 hours from sample collection time.
7. Record the results of the test.
8. Wash and clean all equipment.
9. Dispose of positive samples according to local regulations.