

# Covid-19 pandemic:

## **Guide for coastal cruises along the Norwegian coastline during the Covid-19 pandemic 2020**

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(Version 2.0)

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## Introduction

This guide provides advice on how cruise businesses can operate to protect infection and prevent accidental exposure to, and the spread of, covid-19. The aim of the proposed infection control measures is to protect both passengers and crew on board cruise vessels along the Norwegian coast. Although the recommended infection control measures are implemented, cases of Covid-19 may still occur. The recommended measures will help limit the spread of infection. The guide includes operations of coastal cruises along the Norwegian coast, as well as activities and experiences related to this.

The guide is based on the national infection control rules, national guides, the law and regulations on infection control and is based on *the Guide for Expedition Cruises (coastal cruises) on and around Svalbard during the Covid-19 outbreak 2020*. This is quality assured by the Norwegian Institute of Public Health (FHI) and the Directorate of Health, June 2020.

## This guide applies to and application to Norwegian Directorate of Health.

*The Guide for coastal cruises along the Norwegian coast during the Covid-19 pandemic 2020* applies to operations with coastal cruises along the Norwegian coast, and activities related to this. The advice of the *Guide for Coastal Cruises along the Norwegian coast during the Covid-19 pandemic 2020* elaborates and complements the requirements of the Covid-19 regulations, as well as other legal and regulatory requirements for the industry.

Before they can start coastal cruises along the Norwegian coast, the various operators (businesses) must make their own plans for how to comply with the infection control rules in accordance with applicable laws and regulations and the *Guide for Coastal Cruises along the Norwegian coast during the Covid-19 pandemic 2020*. These plans shall be sent to the Directorate of Health together with the infection control list for cruise operators (the businesses) (part 3). PART 3 Checklist for infection control. The operators (businesses) must be filled in and the various routines must be attached to give evidence of routines.

The Directorate of Health will review and approve the plans and check that they meet the infection control requirements in law and regulations and the *Guide for Coastal Cruises along the Norwegian coast during the Covid-19 pandemic 2020*.

The Directorate of Health may impose a ban on coastal cruises along the Norwegian coast if the requirements of the guide are not complied with.

## General information about cruise traffic

Cruise differs from other passenger transport in that there shall be at least three different port of call, and in that it shall not be scheduled for local traffic and not carry commercial cargo. Cruises can both start and end in the same port (round trip) or start and end in different ports. Hurtigruten ordinary scheduled vessels and other scheduled transport (e.g. the ferries between Norway and abroad) are not cruises according to this definition, although the term "cruise" is often used for such voyages.

Cruise activities are part of the tourism industry but operate in part different from other activities in the tourism industry. In this way, it should be regarded as a separate industry, although of course there are important links to other parts of the tourism sector.

The experiences can be accessed either through organized excursions or by the fact that passengers are ashore on their own.

## Changes in the guide

The guide may be revised when the Government adopts changes to the national infection control rules and by changes to the health authorities' advice and provisions for infection control. In the event of a change, either in the event of a change in national rules or changes to the operator (business) where there are questions about changing any of the requirements, this shall be submitted to the Directorate of Health before any operator can apply changes to how to comply with infection control rules, applicable laws and regulations and *Guide for coastal cruises along the Norwegian coast during the Covid-19 outbreak 2020*. . .

Changes should be made to change log (part 5).

## Political decisions and the Covid-19 Regulation

On 15<sup>th</sup> May 2020, the health authorities presented updated advice for holiday and leisure trips in Norway. The advice should help ensure that it is safe to go on holiday in Norway this summer. At the same time, the Government opened the way for tourists from the mainland to travel to Svalbard from 1 June. From May 15<sup>th</sup>, there has been a general entry quarantine for persons coming from the mainland. This was lifted for tourists from the mainland on 1 June.

On 12<sup>th</sup> June 2020, the Government opened the way for coastal and expedition cruises to be carried out on and around Svalbard for vessels.

On 18<sup>th</sup> June 2020, the Minister of Health and Care Services and the Minister of Trade and Industry decided to open coastal cruises along the Norwegian coast.

Covid-19 regulations were amended on 21<sup>st</sup> June 2020. New § 10b *Requirements for the implementation of coastal cruises along the Norwegian coast*, introduces a requirement that the operators (businesses) that offer coastal cruises along the Norwegian coast shall, before the start of activity, present a plan to the Directorate of Health that describes how the activities shall ensure the implementation of infection control requirements. The Directorate of Health may impose a ban on certain tourist activities.

Thursday, June 25<sup>th</sup>, 2020 The Government decided that "they aim to allow entry for persons residing in the Schengen and EEA area from 15<sup>th</sup> June 2020. As of the same time, the requirement for entry quarantine for countries and regions with a satisfactory infection situation is" removed".

Thursday, July 9<sup>th</sup> 2020 The Government decided to allow entry from 15<sup>th</sup> July 2020 for persons residing in countries in the EEA/Schengen area who have a satisfactory situation of infection. At the same time, the requirement for entry quarantine for travelers from these countries is removed. The Government also decided that section 10 b of the Covid-19 Regulations to be amended so that "the crew and passengers of the vessel can only disembark in Norway if the crew and passengers, upon boarding, are not covered by quarantine pursuant to Section 5".

Current scheme is maintained where each operators (enterprise) is responsible to develop infection control plans with attached routines and requirements for approval of the Directorate of Health before any start of any operation of coastal cruises along the Norwegian coast.

The provision in its entirety reads:

In Regulation 27. March 2020 no. 470 on infection control measures, etc. at the Corona outbreak, new section 10 b shall read:

*§ 10 b Requirements for the implementation of coastal cruises along the Norwegian coast*

Businesses offering coastal cruises within Norway's territorial boundaries shall present to the Directorate of Health a plan that describes how the business shall ensure the safeguarding of infection control requirements as set out in the applicable legislation and regulations, national guides and guides for coastal cruises along the Norwegian coast. The first sentence means the owner of vessels to be used in coastal cruises along the Norwegian coast.

The Directorate of Health may approve the start of coastal cruises if, as mentioned in the first subsection, the company's plan describes how the business can meet the infection control requirements.

In order to prevent or limit the spread of SARS CoV-2, and to ensure the maintenance of proper health preparedness, the Directorate of Health may prohibit activities on or in connection with the vessel that cannot be carried out in a contagion-appropriate manner. The Directorate of Health may also set limits on the utilization of the vessel's maximum passenger capacity. The vessel's crew and passengers can only disembark in Norway if the crew and passengers are upon boarding, not subject to the quarantine duty pursuant to §5.

This provision does not apply to Norwegian vessels making journeys covered by section 5, third paragraph or coastal cruise covered by Section 10 a.

Individual decisions pursuant to the second and third paragraphs can be appealed to the Ministry of Health and Care Services.

II

The regulations will take effect immediately.



# PART 1 General advice and guidelines

## Introduction

There will always be a risk of infection and that cases of infection may occur even if good infection control is exercised. Infection prevention measures help reduce risk. This guide shall provide insight into, and advice on, how operations and activities can be organized at the same time as infection control is properly maintained. The guide is appropriate for both managers and employees.

## Responsibility

The cruise operators (the businesses) are responsible for ensuring that operations take place in accordance with applicable laws and regulations and the Guide for coastal cruises along the Norwegian coast.

The management of the coastal cruise vessel are responsible for ensuring a proper operation that takes into account infection control, and for allocating responsibility for various tasks in connection with the infection control advice. Management must provide the necessary training and information to employees and guests. Infection control plans must be adapted to local conditions according to the advice given by this guide, and each of the operators/businesses must have company-specific plans. In addition to the infection control measures described below, the requirements and procedures that normally apply to the business shall be followed.

If a passenger or crew is diagnosed with Covid-19, the medical doctor responsible for the vessel is responsible for follow-up and action.

Different phases of the pandemic and different spread of infection in the country may require measures to be adapted.

Information materials and posters about Covid-19 can be found on the Directorate of Health's website:

[https://www.helsedirektoratet.no/brosjyrer/vaner-som-forebygger-smitte/Vaner%20som%20forebygger%20smitte%20-%20engelsk.pdf/\\_attachment/inline/3d2b9cc7-b939-4480-96d3-b67e8d2b0eee:d0b5a7dbd4d2e54cf6707720f3edd14d51378391/Vaner%20som%20forebygger%20smitte%20-%20engelsk.pdf](https://www.helsedirektoratet.no/brosjyrer/vaner-som-forebygger-smitte/Vaner%20som%20forebygger%20smitte%20-%20engelsk.pdf/_attachment/inline/3d2b9cc7-b939-4480-96d3-b67e8d2b0eee:d0b5a7dbd4d2e54cf6707720f3edd14d51378391/Vaner%20som%20forebygger%20smitte%20-%20engelsk.pdf)

Everyone should exercise good infection control during the Covid-19 outbreak. This means that the three main principles of infection control as described in this guide must be observed both inside and outside the cruise vessel. A good collaboration between employees, visitors or others associated with the operation must be maintained.

See also the Covid-19 Regulations and related decisions and guidance here:

<https://lovdata.no/dokument/SF/forskrift/2020-03-27-470>

## How does the Coronavirus infect?

Covid-19 is primarily transmitted via drops from the respiratory tract of an infected person when talking, coughing or sneezing (droplet infection). Most slightly drops are spread no longer than 1 meter, but by coughing or heavy sneezing they can probably be spread up to 2 meters away.



The virus can also be transmitted by getting viruses on your hands, and transmitting it from there to the mucous membranes of the eyes, nose or mouth (contact infection). At the present time, there is evidence that a person who is infected can infect others from 1-2 days before she or he even develops symptoms. The probability of infecting others is greatest when one has symptoms, especially the first few days. The virus does not tolerate soap and water, nor disinfection with alcohol.

Reference is made to <https://www.fhi.no/en/id/infectious-diseases/coronavirus/>. for up-to-date and detailed information about this.

## Infection Prevention Measures

Many measures are being taken in all parts of society that together limit the spread of infection. It is important to use measures that are adapted to different situations.

The purpose of the advice is to reduce the risk of infection of covid-19.

The three principles to slow down the spread of infection:

- **Make sure that sick people are not physically present.**
- **Ensure good hygiene**
- **Reduce contact between people**

In addition, the following measures will be central to efforts to curb the spread of infection:

- **Ensure good training in infection control for employees**
- **Provide a good information to customers about the infection.**
- **Make lists of contact information on all participants/visitors in case infection tracking becomes necessary. The company is responsible for keeping lists with both name, phone number, place of residence and email**

In this context, persons are not considered "present" if they are staying in a cabin. Reduced contact involves, among other things, social distancing, division into smaller groups and measures to help ensure that people are not close together.

The most important infection control measure is that sick people stay at home and do not participate in cruises or other social activities. Cough hygiene and distance are essential to limit droplet infection, while hand hygiene, and especially avoiding touching your face with unclean hands, is important to prevent contact infection. Increased physical distance between people reduces the possibility of infection, even before symptoms of disease appear. Covid-19 is mainly transmitted via droplet and contact infection. The virus is most widely spread by coughing and sneezing. There is currently no basis for general use of facemask in healthy individuals. Non-medical face masks can be used by people who get sick when it is not possible to keep their distance to others before they can get home.

It has not been shown that the new Corona virus is transmitted via food, drink or water.

Despite well-implemented measures, however, cases of Covid-19 and other infections can occur. If infection control measures as proposed here have been implemented, the spread of infection will nevertheless be limited. The measures in the text below are a description of infection control measures that can help reduce infection risk to a minimum.

### **Cohort division**

Passengers shall be divided into cohorts at meals and all activities to prevent larger group accumulations and to limit the number of people who need to be followed up in case someone becomes infected. The cohort groups shall be consistent so that it is the same people who bypass each other during the coastal cruise along the Norwegian coast. The vessel's crew and passengers can only disembark in Norway if the crew and passengers upon boarding are not covered by the quarantine duty pursuant to § 5 of the Covid-19 Regulations. A satisfactory routine for good infection control to be conducted in accordance with the current national rules. When going ashore during the voyage, all of which should be in fixed cohorts (maximum 45 persons in each cohort).

### **Sick people should not be present**

There will be people with symptoms that are most infectious (especially when coughing and sneezing), and the infectiousness is greatest as symptoms occur. Symptoms of Covid-19 can be mild and difficult to distinguish from other respiratory infections. The most frequently described symptoms of Covid-19 are initially a sore throat, colds and light cough, in addition to malaise, headache and muscle pain. Abdominal pain and diarrhea may also occur. About 8 out of 10 adults have mild symptoms only. In children, the proportion who experience mild symptoms is probably even higher. Against this backdrop, it is important that people with even mild respiratory symptoms do not meet physically at work or in other contexts where others gather.

In some people with Covid-19, symptoms may develop further in a few days to a week or two, into a cough, fever and shortness of breath. A few may have a severe symptom requiring treatment in hospital. Severe Covid-19 disease is very rare in children.

In case of probable or confirmed Covid-19, apply separate recommendations on isolation for the sick and quarantine for close contacts, see <https://www.fhi.no/en/op/novel-coronavirus-facts-advice/facts-and-general-advice/social-distance-quarantine-and-isolation/>

The doctor responsible for the vessel is responsible for follow-up around Covid-19 cases and for determining the necessary measures. They shall define who is close to the sick person and therefore who should be followed up with quarantine or other measures (infection tracking), and whether information is needed for others.

If further measures are needed, the NMA, the Directorate of Health and the FHI are tasked with assessing and possibly imposing this.

### **People who do not need to be isolated or quarantined:**

1. People who do not have symptoms of respiratory disease
2. In case of respiratory infection for other reasons than Covid-19, employees, guests and others may meet when they have been symptom-free for 24 hours
3. In the case of the covid-19, separate advice applies to when isolation can be repealed, indicated by the health service and <https://www.fhi.no/en/op/novel-coronavirus-facts-advice/facts-and-general-advice/social-distance-quarantine-and-isolation/>

### **People with symptoms, in quarantine or isolation**

People who have symptoms of respiratory infection should not be in public spaces, nor should join the cruise, even in case of mild symptoms. In case of symptoms, they should be isolated and tested. They should not attend work until the test results are known. Persons who are in quarantine and isolation should also not join the cruise. It is important that the business communicates this to employees and guests.

### **In the event of illness while people are present in the service**

Passengers and crew who fall ill while at work/present on the cruise must be isolated in their own cabin or suitable area as soon as possible. Sick people who need to be picked up by others must wait in a separate room or out where there are no others. Sick people should not take public transport. Sick people should cover the mouth and nose if they cannot keep two meters distance to others to reduce the spread of infection.

The vessel is responsible for follow-up around cases of confirmed Covid-19 (infection tracking). They are the ones who will decide further measures and define close contacts with the sick.

## General information about good hygiene

### **Good hand and cough hygiene**

Follow hand hygiene, cough hygiene, facemask use, cleaning and laundry as described:

<https://www.fhi.no/en/op/novel-coronavirus-facts-advice/facts-and-general-advice/hand-hygiene-cough-etiquette-face-masks-cleaning-and-laundry>

There you can also find advice on how to avoid dry hands.

Good hand and cough hygiene reduce infection in all respiratory infections, including infection of Covid-19. These measures reduce infection via objects and hands, as well as infection by cough. Hygiene measures should be carried out frequently by everyone, regardless of knowledge of their own and others' infection status.

Hand washing with lukewarm water and liquid soap is an effective way to prevent infection. Dirt, bacteria and viruses detach from the skin during washing and rinse away with the water.

### **Washbasin:**

1. Wash hands frequently and thoroughly. The actual washing process should take at least 20 seconds. See: <https://www.youtube.com/watch?v=vsFQfZit0KU>
2. Wipe your hands with disposable paper towels.
3. This should be performed as a minimum on arrival, between different tasks (for example, if you move or change equipment), after toilet visits, and before and after kitchen work and eating.

### **Alternatives to hand washing:**

1. The virus is sensitive to alcohol, and alcohol-based disinfection (hand sanitizer) is an option unless hand washing options are available.

2. Hand disinfection is placed in places where there are no hand washing facilities (for example, in changing rooms, at entrances and by canteens).
3. Alcohol-based disinfection is ineffective in case of visibly dirty or wet hands, then hand washing should be carried out.

### **Other**

Shaking hands, hugging and unnecessary physical contact are avoided.

Avoid touching your face.

Cough in the elbow hook or into a paper tissue which is then thrown away. Wash hands afterwards.

### **Good cleaning routines.**

The new Coronavirus (SARS-CoV-2) is easily removed by manual cleaning with water and regular cleaning agents. The virus can survive on surfaces from hours to days, depending on the type of surface, temperature, sunlight and other factors. The virus's ability to cause disease probably decreases rapidly on surfaces, depending on the number of viruses. The risk of indirect contact infection is therefore greatest if a surface is touched immediately after it is contaminated. With the exception of surfaces heavily contaminated with respiratory secretions (saliva, snot and mucus), it is assumed that after a short time (minutes to hours) there is little risk of indirect contact infection via contaminated objects.

Review routines and cleaning plans, and make adjustments (organization, responsibility and resource needs). Exposed areas (see below) should have reinforced cleaning.

It is not necessary to use disinfectant routinely as soap and water are also good enough. If disinfection is still used, visible dirt must first be wiped away with cloth or paper towels, otherwise the disinfectant does not work. Current disinfectants are alcohol-based disinfection and chlorine bleach.

Reinforced cleaning in exposed areas:

1. Toilets and washbasins must be cleaned at least daily during daily use. Dry over surfaces such as toilet seat and faucet on the washbasin regularly, depending on how frequent it is in use.
2. Disposable paper towels and liquid soap should be available, and rubbish should be emptied regularly.
3. Pay extra attention to cleaning in the kitchen/dining room. Dining table/kitchen is washed with water and soap after use.
4. Door handles, stair rails, chairs, other table surfaces and other items that are often touched are cleaned frequently, minimum daily during daily use.
5. Equipment used by several people (e.g. working tools, touch screens, keyboards, toys, textiles, equipment for rent, etc.) is cleaned after each use.

See the FHI's advice on cleaning and disinfection to sectors outside the health service:

<https://www.fhi.no/en/op/novel-coronavirus-facts-advice/advice-and-information-to-other-sectors-and-occupational-groups/cleaning-and-disinfection/>

Reduced contact between people

Contact-reducing measures to prevent the spread of infection are important in all situations and must be maintained at all stages in meetings between guests and employees. It is easy to forget about these measures in more informal situations, such as during breaks, transport to and from etc.

Contact-reducing measures must be adapted to the individual business. See PART 2.

#### *Reception*

- Distance between employees in reception and guests should be at least 1 meter, preferably more where possible. Reception users will only stay there for a short time.
- Plexi-glass can be considered where expeditions do not already have a glass hatch. The plexiglass should then cover at least 20 cm outside face and chest height in all directions.

#### *Corridors and common areas*

- Narrow common areas should not be used for stays. If this cannot be avoided, chairs can be put forward to ensure sufficient distance and limit the number of people using it at the same time.
- People can pass each other and be a short time in the same area without further infection risk.
- Close face-to-face contact should be avoided if possible.
- If break areas are needed, ensure adaptation so that mixing people is avoided.
- Lifts should be given priority to people with mobility difficulties and goods transport, as it is hard to keep the recommended distance.
- Optionally create markings on the floor to ensure the distance between people in all rooms, changing rooms and other areas where congestion may occur.

#### *Especially for employees*

- Common equipment, working tools, computers/keyboards must be cleaned off after use.
- Pay extra attention to hygiene around the kitchen/dining room.
- Canteens can be operated according to normal kitchen hygiene routines. Have good routines for hand hygiene.
- Advice on distance between people must be observed in canteens and dining rooms.
- Restrict the use of public transport where possible.

Consider different attendance times if possible and appropriate, so that employees, guests and others are present at different times and thus can avoid being many overall and avoiding rush hour on public transport.

### **Lists of contact information**

All guests on coastal cruises along the Norwegian coast must be registered on contact lists with their name, phone number and e-mail. This is to make infection tracking as accurate as possible if the infection of Covid-19 occurs. The medical doctor for the vessel and the municipal medical leader shall be given access to the lists if necessary. Please let guests know that the contact details are stored for 3 weeks after their stay.

### **Higher Risk groups**

FHI distinguishes between groups with slightly increased risk and people with moderate to elevated risk. For up-to-date information about people who may be at higher risk of Covid-19, see the

Norwegian Institute of Public Health's website: <https://www.fhi.no/en/op/novel-coronavirus-facts-advice/facts-and-general-advice/risk-groups---advice-and-information/>

In some situations, adaptation to the work should be considered for people who are at increased risk of severe course of Covid-19. Today, this applies primarily to those who are at moderate/high risk of severe progress. If there is a lot of infection in society, this may also apply to those who are at slightly increased risk. In the event of a lot of contagion in society, sick leave may also be applicable to people at moderate/high risk if facilitation is not possible.

## PART 2 Fundamental issues

Regulations on infection control measures, etc. the Corona outbreak (Covid-19 regulations), decisions of the Health Directorate and the Norwegian Institute of Public Health (FHI) form the basis for what must be applicable in terms of health declaration / self-declaration (self-monitoring), isolation, quarantine of close contacts, testing and capacity in coastal cruise along the Norwegian coast during the Covid-19 pandemic 2020.

### Declaration of health/self-declaration (self-monitoring)

#### Current for coastal cruises along the Norwegian coast:

When booking a trip, a routine must be developed to inform guests who can travel on a coastal cruise along the Norwegian coast in the summer of 2020, and what documentation on the state of health the travelers must provide before the start of the journey, if necessary during the journey, and after the journey. Requirements for handling, storing and shredding the documentation are provided by applicable regulations.

The routine shall contain information that if there is a suspicion of Covid-19, the person cannot travel on a coastal cruise along the Norwegian coast in the summer of 2020. The assessment of travel ability will be on the FHI's definition of Covid-19 risk groups: <https://www.fhi.no/en/op/novel-coronavirus-facts-advice/facts-and-general-advice/risk-groups---advice-and-information/>.

Persons in the moderate/high risk group will not be able to cruise in Svalbard.

Persons in the group lightly increased risk must present a health certificate documenting general good health status prior to departure.

All persons must pre-boarding complete and submit a self-assessment (self-monitoring form), or **Koronasjekk.no** that maps the risk of whether the guest has been exposed to or is infected with Covid-19 for review by a doctor or nurse. If there is any suspicion of Covid-19, then the passenger shall be transported in an infection controlled manner to isolation outside the vessel.

### Isolation

The following shall apply to isolation:

Anyone with an acute respiratory infection for reasons other than Covid-19 should be isolated in a cabin or other suitable place until at least one day after symptoms cease. Additionally, people with suspected or probable Covid-19 must be isolated for at least 3 days after symptoms cease and at least 8 days after onset of symptoms.

Persons confirmed infected by SARS CoV-2 shall reside in isolation, cf Covid-19 regulations, section 11 *Isolation*.

Isolation means that the person is staying in his own cabin or at other suitable alternative in the vessel.



The person shall be isolated from other persons, and shall, where possible, not have close contact with persons in the same household, cf. Covid-19 Regulations, § 3 *Close contact*.

Persons covered by the first subsection are obliged to stay in isolation from symptoms occurring. The period of isolation shall be in accordance with the Directorate of Health's recommendations", jf covid-19-19 regulations, § 11 *Isolation*.

FHI's advice on **Distance, Quarantine and Isolation** <https://www.fhi.no/en/op/novel-coronavirus-facts-advice/facts-and-general-advice/social-distance-quarantine-and-isolation/>

### Current for coastal cruises along the Norwegian coast

Persons with symptoms of Covid-19 should be monitored / followed up by healthcare professionals on board vessels. There should be a routine for this, including the use of self-monitoring and temperature measurement up to 3 days after the symptoms cease. The documentation must be kept in accordance with applicable regulations.

The responsible medical personnel for the vessel, shall, in consultation with the municipal infection control physician, clarify whether the vessel shall be referred to one of the appointed ports, cf. regulations on the notification of and measures in case of serious incidents of importance to international public health etc. (IHR Regulations) (<https://lovdata.no/dokument/SFE/forskrift/2020-03-27-470>.)

The vessel shall, if a passenger or crew has a confirmed case of Covid-19 evacuate to the boarding/embarkation port.

The operator (the business) shall prepare a routine for the implementation of the isolation of crew/passenger in case of suspected or confirmed covid-19, and practice this regularly.

### Quarantine in close contact

The following shall apply to the follow-up of close contacts:

Household members and similar close contacts shall be quarantined, and "other close contacts" who are followed up with tests and advice. See:

<https://www.fhi.no/en/op/novel-coronavirus-facts-advice/advice-to-health-personnel/test-criteria-for-coronavirus/>

### Current for expedition cruises (coastal cruise):

Quarantine site for persons in close contact with an infected person, whether crew/passengers, shall be on board the vessel, in its own cabin or other suitable place of residence.

The operators (operations) shall prepare a routine for the implementation of quarantine in case of close contact by crew/passenger in case of suspicion or confirmed Covid-19, and practice this regularly.

### Testing on board vessels

The following shall apply to testing on board vessels:

The Norwegian Institute of Public Health recommends that all people with symptoms of Covid-19 be tested.

With symptoms means acute respiratory infection and one or more of the following symptoms; fever, cough, breathlessness, loss of taste or sense of smell, or other symptoms considered by a doctor as suspected Covid-19. One should also strive to test people with mild symptoms. This is assessed by the medical director on board, possibly in contact with the municipal medical leader.

In some situations, it may be appropriate to test asymptomatic, cf. FHI's advice on **coronavirus test criteria** <https://www.fhi.no/en/op/novel-coronavirus-facts-advice/advice-to-health-personnel/test-criteria-for-coronavirus/>

### Current for coastal cruises along the Norwegian coast

SARS-CoV-2 is the virus that causes the onset of the disease Covid-19.

The doctor responsible for the vessel is responsible for the requisition of sample of SARS-CoV-2 (covid-19).

Operator develops and applies procedure for testing those with suspicion of Covid-19.

Samples are taken by a nurse or doctor using infectious disease equipment according to procedure.

The procedure should be practiced regularly.

The coastal cruises will have 10 x testing equipment for the SARS-CoV-2. The coastal cruise vessel may have its own test equipment for the SARS-CoV-2 (covid-19). It can also be ordered upon request with the Norwegian health service.

It shall be clarified with the municipal doctor in the nearest municipality how and where the test will be sent for analysis.

The vessel can continue sailing pending the result of the Covid-19 test. Consider not sailing further if the health of the person in question deteriorates.

The doctor on board shall consult with the municipal doctor the nearest municipality if the health of the person/persons in question deteriorates, to assess whether the vessel should cancel the cruise and return to the boarding port/embarkation port, cf. regulations on the notification of and measures in case of serious incidents of importance to international public health etc. (IHR Regulations) (<https://lovdata.no/dokument/SFE/forskrift/2020-03-27-470>).

In case of acute illness with the need for hospitalization, the doctor for the vessel shall clarify this with the municipal doctor in the nearest municipality and the nearest health agency.

If the analysis shows that there is no Covid-19, and the health of the person/persons is assessed by a doctor to be satisfactory, then the vessel can continue the cruise.

Passengers with illness conditions compatible with Covid-19 should be monitored using self-monitoring and temperature measurement for three days after the symptoms cease. This is in accordance with the Privacy Policy.

If the test shows that Covid-19 exists, then the vessel shall return to the boarding port, cf. regulations on the notification of and measures in case of serious incidents of importance to international public health etc. (IHR Regulations) (<https://lovdata.no/dokument/SF/forskrift/2007-12-21-1573>)

The contagion/local leader must be informed.

The operators (businesses) shall prepare a routine for the implementation of crew/passenger testing if Covid-19 is suspected, and practice this regularly.

### Duty on notification of Covid-19

The Captain of the ship is obliged as soon as possible and at the latest upon arrival at the first arrival point in the Norway to notify of the state of health on board, as the conditions of Section 5 of the IHR Regulations have been met, cf. regulations on notification of and measures in case of serious incidents of importance to international public health etc. (IHR Regulations).

#### Section 5. *Duty of notification for the Captains of ships, aircraft and other means of transport*

"The Captain of ships or aircraft shall, as soon as possible, and at the latest upon arrival at the first arrival point in Norway notify of the state of health on board, if one of the following conditions is met:

- a) the Captain has reason to assume that there are infectious agents or other agents on board, which may constitute a serious event of importance to international public health,
- b) the vessel comes from a port or airport in an area declared affected by an infectious disease or other serious event that may affect international public health, and its arrival occurs during the incubation period,
- c) there is a person on board who has stayed in an area declared affected by an infectious disease or other serious incident that may affect international public health at such a time that the incubation period is not over upon the vessel's arrival at the Norway.

Notice pursuant by the first subsection shall be given to the control center, customs or the Norwegian Coastal Administration, which then notifies the municipal doctor or the Norwegian Institute of Public Health, cf. Section 4."

If tests of the sample on suspicion of Covid-19 shows that there is Covid-19, then the vessel shall return to the boarding port , cf. regulations on the notification of and measures in case of serious incidents of importance to international public health etc. (IHR Regulations)(  
<https://lovdata.no/dokument/SFE/forskrift/2020-03-27-470>)

### Restrictions on the number of passengers on the vessel

#### Passenger restrictions for coastal cruises along Norwegian coast

In order to comply with the contagion rules, law and regulations and *the Guide for coastal cruises along the Norwegian coast during the Covid-19 pandemic 2020*, the vessels at the start of coastal cruises along the Norwegian coast shall have a maximum of 50 percent passenger capacity utilization during the Covid-19 situation. If the experience after a certain time shows that those on the coastal cruise vessel comply with the national infection control rules, national guides and the Law and Regulations on Infection Control and *Guide for Coastal Cruises along the Norwegian coast during the Covid-19 pandemic 2020*, then after clarification with the Directorate of Health this can be increased

to 70 percent passenger capacity utilization during the Covid-19 situation. The operators (businesses) have to apply for that to the Norwegian Directorate of Health.

This applies until other decisions have been made by the Norwegian authorities.

The authorities will consider increasing occupancy rates if the spread of infection nationally remains low or reduced in line with the Government's decisions, and that the cruise operators (businesses) comply with the national infection control rules, national guides and the Law and Regulations on Infection Control and the *Guide to Coastal Cruises along the Norwegian coast during the Covid-19 pandemic 2020*.

Reference is made to the previous mention that the guide may be revised when the Norwegian Government adopts changes to the national infection control rules and changes to the health authorities' advice and provisions for infection control. In the event of change, either by changes in national rules or changes with the operator (business) where there are questions about changing some of the requirements, this shall be submitted to the Norwegian Directorate of Health before the operator (business) can make any change in how to comply with the infection control rules, applicable to laws and regulations and the Guide to Coastal Cruises along the Norwegian coast during the covid-19 outbreak 2020.

## Part 3 Checklist for infection control by cruise operators.

The various cruise operators (businesses) shall complete this checklist of the relevant measures before opening for operations using **OK** when the plan has been prepared and implemented, and **work** when work is still in progress. The various operators (businesses) are recommended to fill out the checklist weekly and save. This documentation may be presented upon inspection or if it is noticed that they have not complied with the infection control requirements set out in applicable law and regulations, national guides and *The guide for coastal cruises along the Norwegian coast during the Covid-19 pandemic 2020*.

Measures	Note
<b>Management's overall responsibility</b>	
Training of employees and others, by being made aware of the content of this guideline	
Information for users about the new routines	
Create a plan for hygiene measures and cleaning	
Consider making plans for alternate meeting time / home office	
Create a dialogue with any employees, users, or others who are at risk and who may need facilitation	
<b>Sick people should not attend the services</b>	
Sick people should stay at home (on vessels isolated), even in case of mild symptoms.	
If possible, the tourist service site should be abandoned if employees or users become ill.	
<b>Good hygiene</b>	
Ensure that there is enough soap and paper towels available at all hand washing stations and toilets	
Hanging posters about hand washing routines and cough hygiene	
Wash hands frequently and thoroughly (use or hand disinfection)	
Cough and sneeze in paper tissue and dispose of it or in the elbow box	
Plan for cleaning including frequency and method	
Reinforce cleaning in exposed areas frequent (door handles, stair rails, table tops etc.	
Place alcohol-based disinfection where no hand washing is available	
<b>Reduced contact between people</b>	
Maintain 2 meters distance between persons. If this is not possible, 1 meter should be observed	
Plan to keep distance in common areas such as changing rooms, waiting rooms, toilets and gangways	

Optionally introduce markings on floors to ensure distance in areas where congestion may occur	
Limit the number of people present to required persons only. Visitors to the ship are to be restricted where possible or appropriate	
Consider the use of rooms in relation to the number of people, use larger premises if possible, different attendance/combination of digital meetings/ home office and physical attendance	
Plan for distance between people and hygiene measures at meals/in the canteen	
Develop a good infection control plan in line with current national rules at all times, together with local providers of activities and communities when planning landings in populated areas Visits/shore landings in populated areas should be avoided as much as possible	
<b>Routines</b>	
Prepared information for passengers and routine for informing them about the three principles to slow the spread of infection:  <ul style="list-style-type: none"> <li>•Make sure that sick people are not physically present.</li> <li>•Ensure good hygiene</li> <li>•Reduce contact between people</li> </ul>	
Prepared routine for checking of self-declaration (self-monitoring forms) before boarding and routine for onshore isolation if there is a suspicion of Covid-19	
Prepared routine for isolation on suspicion of Covid-19 for crew/passenger. This should practice regularly	
Prepared routine for assistance to persons in isolation and quarantine in case of close contact with infected crew/passengers	
Prepared routine for carrying out self-monitoring and temperature measurement for up to 3 days after symptoms cease	
Prepared routine for quarantine in case of close contact for crew/ passengers. They should be practiced regularly	
Prepared routine for the implementation of the testing of crew/passenger in case of suspected Covid-19. This should practice regularly.	
10 x test kits for Covid-19 on board.	
Infection control equipment for sampling	
Prepared routine for evacuation of vessels to port on the mainland in accordance with IHR regulations	
Develop a routine for good infection control in accordance with the current national rules on landings shoreside, all of which should be in fixed cohorts (maximum 45 people in each cohort).  Food and beverages served indoors shall at all times comply with the applicable guidelines in the Regulations measures of infection protection, etc. in the corona outbreak (covid-19 regulations)	

## PART 4 Detailed infection control measures

### Introduction

This part of the guide deals with detailed infection control measures in different parts of the cruise product.



## Infection protection measures for coastal cruises

The three principles to slow down the spread of infection:

- **Make sure that sick people are not physically present.**
- **Ensure good hygiene**
- **Reduce contact between people**

In addition, the following measures will be central to efforts to curb the spread of infection:

- **Ensure good training in infection control for employees**
- **Provide a good information to customers about the infection.**
- **Make lists of contact information on all participants/visitors in case infection tracking becomes necessary. The company is responsible for keeping lists with both name, phone number, place of residence and email**

The industry standard for accommodations is established by the NHO based on the Public Health Institute's advice. Industry standards for accommodation are also relevant for ships.

This industry guide deals with the expedition cruise vessel and the expedition cruise operation. Other industry and/or business guides may be relevant to the operation, including various product and service providers, ports, pilot services, etc. Cruise operators will have to meet all relevant requirements as a result of these.

## Vessels

AREA	RISK DESCRIPTION	MEASURES
RECEPTION, COMMON AREAS, ELEVATORS, GENERAL	Congestion at entrances, check-in / check-out can entail the risk of direct infection because the guests are too close together.	Make sure that there is no congestion. Consider the need to introduce a queuing system, distance markings on the floor, etc. Consider measures to limit the number of people who come/leave at the same time, for example by giving each person their own check-in/check-out time.
	Risk of indirect contact infection by guests and staff touching on the same surfaces, such as reception counter, check-in tablet, card terminal, pen, lift buttons, etc.	Encourage everyone to wash hands upon arrival. If this is practically difficult to implement, be sure to have hand disinfection available at the entrance. Frequent washing of exposed surfaces, such as reception counter, elevator buttons, equipment used by many etc. Facilitate card payments and other electronic payment solutions. As far as possible, payment should be made contactless. Alternatively, a credit card or cash can be used. Hand hygiene is recommended after such touching.
	The general risk of infection due to the sick persons.	Guests must be informed in advance that they cannot travel on a cruise if they have symptoms of respiratory infection. See the section on the health certificate/self-declaration (self-monitoring form). Information about guests who have been on a cruise is kept for a minimum of 3 weeks for use for any infection tracking. Infection tracking shall be carried out in cooperation with the responsible infection control authority.

CABINS	Risk of indirect contact infection by not cleaning cabins well enough between guests.	<p>Good cleaning routines. Seek any assistance from the supplier of washing equipment Ordinary detergents can be used. Remember to wash all common touch points, e.g. light switches, door handles, remote control etc. Good routines should be provided for normal hand hygiene performed with soap and water or hand disinfectant when cleaning. Remove decorative pillows in bed and bedspreads that are not washed regularly.</p> <p>In case of confirmed infection, good cleaning of cabins and other areas where the guest is reported to have stayed is carried out. Consult with the supplier of cleaning agents. Read also the FHI's cleaning supervisor: <a href="https://www.fhi.no/en/op/novel-coronavirus-facts-advice/advice-and-information-to-other-sectors-and-occupational-groups/cleaning-and-disinfection/">https://www.fhi.no/en/op/novel-coronavirus-facts-advice/advice-and-information-to-other-sectors-and-occupational-groups/cleaning-and-disinfection/</a></p>
RESTAURANTS		
Arrival guests	Congestion at entrances may result in an increased risk of infection.	Organization of queues. In the event of a tendency to congestion, an employee must be dedicated to keeping track of the queue. Consider marking lines for queues on the ground/floor that maintain appropriate distance.
Serving food indoors	Increased risk of infection if people stay too close together, either by the possibility of congestion at the bar/serving counter, and/or because people are standing/sitting too close together/too many people in the room.	<p>There should be at least 1 meter distance between tables, and guests should have the opportunity to keep sufficient distance at the table. Where fixed tables do not allow distance between tables, a 1-metre distance between groups of guests shall be ensured.</p> <p>Consider how many guests the restaurant can accept and still comply with the above measures.</p> <p>Organization of queues at the bar/serving counter, either in the form of a dedicated employee keeping order, or postings and markings on the floor. Guests must not stand tightly together in the room, but mainly sit at tables. Limit of 5-6 guests at each table, but the company can make exceptions for large families/groups living together, or by taking</p>

		<p>compensatory measures in the form of greater distance between guests, greater distance to the next table layout etc.</p> <p>Food and beverages served indoors shall at all times comply with the applicable guidelines in the Regulations measures of infection protection, etc. in the corona outbreak (covid-19 regulations)</p>
	<p>The risk of indirect contact infection by several people being in contact with the same items, such as menus, salt cellars, ketchup bottles, water jugs, etc. The same applies to contact surfaces such as bar counter, door handles, table surfaces etc.</p>	<p>Facilitate card payments and other electronic payment solutions. As far as possible, payment should be made contactless. Alternatively, a credit card or cash can be used. Hand hygiene is recommended after such touching.</p> <p>Use a whiteboard, bulletin, or one-time menu, prevent many guests from touching the same menu. When using laminated menus, the menus can be washed/disinfected between each guest. Guests are not allowed to supply themselves with accessories/spices/ketchup/water jugs/coffee jugs etc. Served by employees or using disposable solutions. Frequent washing of bar counters, door handles and other exposed surfaces with ordinary detergents. Table surfaces are washed with ordinary detergents between each guest group. Use disposable wipes or clean wipes that wash after use. Avoid using the same cloth on multiple surfaces/change cloth frequently. Consider wearing gloves when serving. Wearing gloves requires training in proper glove use. Good hand hygiene must be maintained by the staff anyway.</p>
Serving food outdoors on vessels	<p>There is thought to be less risk of infection outdoors, compared to indoor.</p>	<p>Feel free to facilitate outdoor dining if possible. Follow the same advice as when serving indoors.</p> <p>Food and beverages served indoors shall at all times comply with the applicable guidelines in the Regulations measures of infection protection, etc. in the corona outbreak (covid-19 regulations)</p>
COMMON ROOMS (Lecture Hall, Cinema, Library, Science Rooms, Exhibition Rooms)	<p>Risk of guests transmitting infection upon contact with others, or when using shared objects.</p>	<p>Social distance with min. 1 meter distance applies to common rooms such as library, lecture hall/cinema, science rooms, exhibition rooms and the like.</p>

		<p>When lending books and magazines, loaned objects should be put back in separate sorting. They should then be wiped off or put away for 24 hours before new lending.</p> <p>Other cleanable common equipment can still be used provided that special cleaning protocols are introduced.</p>
WELLNESS AREA, FITNESS ROOM, POOL, SPA, ETC.	Risk of guests transmitting infection by contact with others directly or indirectly through damp surfaces	<p>From June 15, pools, spas, fitness rooms etc are allowed to open.</p> <p>The Covid-19 regulation now reads:</p> <p>§ 15b. Requirements for contagious professional operations at other companies Amusement parks, swimming pools, water parks, spa facilities, hotel pools, fitness centers, bingo halls, games halls and the like must, in order to stay open, carry out infection prevention work properly. By contagious professional operation, it is meant that the business must ensure that visitors and personnel can keep at least 1 meter distance to people who are not in the same household, that the business has established procedures for good hygiene and good cleaning, and that the routines are adhered to.</p> <p>See advice from FHI: <a href="https://www.fhi.no/nettpub/coronavirus/?chapter=89178">https://www.fhi.no/nettpub/coronavirus/?chapter=89178</a></p>

SHOP	Risk of guests transmitting infection upon contact with other persons and items in the store.	Shop staff must ensure that sufficiently recommended distance is maintained between guests in the shop room and dressing room. Consider dividing into several small groups. Hand disinfectant or hand wash facilities with soap and water must be available. Frequently affected contact surfaces are washed or disinfected after using the room with ordinary cleaning agents.
	Further risk of indirect infection in that many people take on the same surfaces.	Table surfaces are washed with ordinary detergents between each guest group. Frequent washing of other exposed surfaces. Use disposable wipes or clean wipes that wash after use. Avoid using the same cloth on multiple surfaces/change cloth frequently.
	Increased risk of direct infection by people staying too close together.	Consider how many guests the place can accept and still comply with the above-mentioned measures. There should be at least 1 meter distance between tables, and guests should have the opportunity to keep sufficient distance between each other.
		<b>Otherwise, all measures under the point above "Serving indoors" apply.</b>
TOILETS	Increased risk of infection in the event of congestion because many people will use few toilets.	If the premises are so aligned that there may be congestion at the toilets, consider the organization of queues, for example when marking on the floor.
	Risk of indirect contact infection related to surfaces that many touch on.	Make sure there is always enough soap and hand drying paper so guests can wash their hands. Hang up posters where one encourages guests to good hand washing and the use of paper towels to close the faucet etc. Frequent and regular cleaning of frequently affected contact surfaces, such as door handles, flushing button, faucet, soap dispenser, toilet paper holder, toilet seat etc. Intervals for cleaning are determined by the individual business depending on the design of the premises and the number of guests.

SUPPLY, BUNKERING, WASTE	Risk of infection of or from ships in connection with supplies, bunkering or disposal of waste	<p>The ships shall initially not go to port in Norway during coastal cruises along the Norwegian coast.</p> <p>The ships are allowed to go to port for necessary bunkering or to take on board supplies, crew or passengers are not allowed to leave the ship. The vessel's crew and passengers can only disembark in Norway if the crew and passengers at boarding are not covered by the quarantine rules pursuant to §5 of the Covid-19 Regulations.</p> <p>All goods and supplies are delivered to the dock. Packaging is removed or cleaned before supplies are brought on board. When stacking and disposal of ordinary waste, contact between the crew and the receiving device is avoided.</p> <p>The handling itself requires that both the shore side handling operator, and the crew onboard will be in contact with goods within a short handling time period.</p> <p>Routines should be set up with the use of protective equipment:</p> <ul style="list-style-type: none"> <li>• Mask and disposable gloves when crew and receiving device handle the same item of objects at a good distance. The receiving unit is on a quay / supply boat and the crew is on board the ship with a minimum of 3-5 meters distance to each other during handling.</li> <li>• Mask, suit, disposable gloves to be used, when crew and the shore side handling operator of the goods in question must for a short period handle the transfer of the item together.</li> </ul>



INFECTIOUS WASTE	Risk of infection from infectious waste	Infectious waste is handled and stored in accordance with vessel rules and procedures and is disposed of via an appropriate reception facility.
CLEANING PLAN	Risk of indirect contact infection in case of inadequate cleaning	There should be written cleaning plans with a focus on exposed surfaces, with clear definition of responsible, cleaning zones, frequency and cleaning agents.

NHO Reiseliv The procurement chain's supplier Lilleborg has developed this overview of hygiene measures and important focus areas when cleaning during the corona outbreak



## Number of Health professionals to be on board.

Cruise vessels will be staffed under the Covid-19 pandemic by the following healthcare professionals:

1-99 persons on board	Minimum 1 nurse on board
100-300 persons on board	Minimum 1 doctor on board Minimum 1 nurse on board
301-500 persons on board	Minimum 2 doctor on board Minimum 2 nurse on board
More than 500 persons on board	Minimum 2 doctor on board Minimum 2 nurse on board

In addition, the operator/business must have an agreement with a doctor who may be required for analysis of any samples in case of suspected Covid-19.

## Workers on board

The three principles to slow down the spread of infection:

- **Make sure that sick people are not physically present.**
- **Ensure good hygiene**
- **Reduce contact between people**

In addition, the following measures will be central to efforts to curb the spread of infection:

- **Ensure good training in infection control for employees**
- **Provide a good information to customers about the infection.**
- **Make lists of contact information on all participants/visitors in case infection tracking becomes necessary. The company is responsible for keeping lists with both name, phone number, place of residence and email**

Any business shall draw up plans for people who cannot board due to a health situation or suspected infection, so that these can be followed up in accordance with infectious disease protocols.

**Operators shall follow the Public Health Institute's advice to sectors where workers live on site (including ships) as far as possible:**

Workplaces where employees live for periods in are close to each other, will be particularly susceptible to transmission of infection. Therefore, it is especially important to intensify hygiene measures and limit contact between employees in these workplaces.

People with symptoms of respiratory infection must not go to work or stay in normal living areas. A person with light respiratory symptoms is not tested for COVID-19, but should avoid contact with colleagues up to 24 hours after symptoms are gone. See <https://www.fhi.no/en/op/novel-coronavirus-facts-advice/advice-to-health-personnel/test-criteria-for-coronavirus/>

People who have been diagnosed with COVID-19 should be at home isolated. If they cannot return home, a separate area must be set aside for this purpose. There should be a separate bathroom/toilet available. Food should be served in the room. Otherwise, follow the general advice for isolation of the area. Afterwards, the rooms, toilets and other areas where people have been in isolation should be cleaned with normal cleaning products. Medical personnel are responsible for following up COVID-19 cases and for contact tracking in accordance with applicable guidelines.

People identified as close contacts should be quarantined. See <https://www.fhi.no/en/op/novel-coronavirus-facts-advice/facts-and-general-advice/social-distance-quarantine-and-isolation/>

If they cannot return home, a separate area must be set aside for this purpose. People in quarantine should not live in common living areas with others. They need to be extra alert for respiratory symptoms that may occur.

Consider reducing the number of employees working at the same time to reduce contact between employees and to reduce the risk of infection at work.

If there is a shared canteen or dining room, you need to limit the number of people eating at the same time, to reduce the contact between employees.

Limit the number of people living in common areas.

Where possible, try to have different teams of workers who are not in contact with each other, and avoid mixing different teams. In this way, infection in one team will not have consequences for the other team

AREA	RISK DESCRIPTION	MEASURES
ORGANISING THE WORK ROTATION	Risk of quarantined many employees if infection is detected.	As far as possible, employees should work in regular "crew" so that they have as few people as possible from their colleagues. In addition to infection control considerations, too many employees could be quarantined at the same time.
ON-SIGNING	Risk of bringing infection on board travelling to vessel and at the time of embarking	Crew members and other employees must complete a self-monitoring form for Covid-19 symptoms. Employees should be instructed in social distancing and personal hygiene during travel to the ship.
TRAINING	Increased risk of infection if employees are not familiar with recommended and implemented infection control measures.	The company must provide training and information on implemented infection control measures for all employees. In addition to training, routines should be hung up in relevant places.
SYMPTOM CONTROL	Risk of employees with symptoms exposing others on board to infection	All employees to be checked for symptoms and the health professional responsible on board assess the need for systematic temperature measurements. Employees with respiratory symptoms or other Covid-19 symptoms are isolated and are supervised by the ship.
RESPONSIBILITY	Important to ensure that the company has a conscious attitude towards the implementation of the measures.	The general manager has the overall responsibility for creating a risk assessment and implementing infection control conditions and preparing and implementing routines. The CEO also has the overall responsibility for ensuring that the company complies with the infection control measures. The Safety Representative shall assist in this work.

	This is best secured by using existing systems for HSE work, and leadership.	An infection control officer should be appointed for each ship, who has a special responsibility to ensure that the measures are followed up.
GALLEY	Increased risk of infection if employees work too closely.	Employees shall be able to keep at least 1 meter distance when working. It is allowed to pass each other for short periods of time, one at a time. Avoid close face-to-face contact if possible.
EQUIPMENT, ACCESS	Further risk of indirect contact infection as a result of several people using the same equipment and/or practicing poor hygiene. Inexperienced employees.	Cleaning equipment between each employee who will use it. Consider whether everyone should work with their own equipment. No external ones in the kitchen. Also applies to suppliers. Establish routines for goods to be received outdoors. See also point about employees below. Frequent hand washing.
GOING ASHORE	Risk of transporting infection ashore or on board from shoreside	<p>The vessel's crew and passengers can only disembark in Norway if the crew and passengers at boarding are not covered by the quarantine rules pursuant to §5 of the Covid-19 Regulations.</p> <p>A routine for good infection control shall be developed in accordance with the current national rules when going ashore, all of which should be in fixed cohorts (maximum 45 persons in each cohort).</p> <p>The crew's possibilities to go ashore should be limited.</p> <p>The crew is instructed in social distancing, avoiding contact with many people ashore.</p>

The three principles to slow down the spread of infection:

- **Make sure that sick people are not physically present.**
- **Ensure good hygiene**
- **Reduce contact between people**

In addition, the following measures will be central to efforts to curb the spread of infection:

- **Ensure good training in infection control for employees**
- **Provide a good information to customers about the infection.**
- **Make lists of contact information on all participants/visitors in case infection tracking becomes necessary. The company is responsible for keeping lists with both name, phone number, place of residence and email**

Any business shall draw up plans for people who cannot board due to a health situation or suspected infection, so that these can be followed up in accordance with infectious disease protocols.

The consequences of Covid-19 coming aboard a cruise ship can be huge. Preventive measures must therefore be taken to ensure that infection is not carried on board. In addition, it is important that in the event of an infection, this is not spread to other people on board. Therefore, measures should also be taken aimed at detecting symptoms as early as possible by monitoring for signs of disease on a daily basis.



## PREVENTIVE MEASURES

ACTIVITY TYPE/AREA	RISK DESCRIPTION	MEASURES
Declaration of health/self-declaration		
WHEN ORDERING	The risk of travelers bringing infection on board vessels.	<p>Guest should be informed about who can travel on an expedition cruise to Svalbard in the summer of 2020, and what documentation of health condition is required before, during and if necessary, after the journey. Inform guests that people with symptoms are not allowed on board.</p> <p>Not everyone will be able to travel to Svalbard on expedition cruise and the criteria are based on the FHI's definition of COVID19 risk groups:</p> <p><a href="https://www.fhi.no/en/op/novel-coronavirus-facts-advice/facts-and-general-advice/risk-groups---advice-and-information/">https://www.fhi.no/en/op/novel-coronavirus-facts-advice/facts-and-general-advice/risk-groups---advice-and-information/</a></p> <p>The measures for each group are described in the table below.</p>
BEFORE DEPARTURE		<p>Persons in the moderate/high risk group will not be able to cruise in Svalbard.</p> <p>Persons in the lightly increased risk must present a health certificate documenting general good health status.</p> <p>All persons shall complete and submit a self-declaration (self-monitoring form) related to health and Covid-19.</p>
BOARDING		All persons must, upon boarding, complete and submit a self-monitoring form that maps the risk that the guest has been exposed to or infected with Covid-19.

## Criteria risk groups

Based on FHI criteria for classification into risk groups <https://www.fhi.no/en/op/novel-coronavirus-facts-advice/facts-and-general-advice/risk-groups---advice-and-information/>

<b>People in the moderate / high risk group</b>	Will not be able to travel on expedition cruises on Svalbard
<b>People in the slightly increased risk group</b>	Will have to present a health certificate that documents general good health and self-declaration (self-monitoring form) regarding Covid-19 symptoms when booking and boarding
<b>All Travelers</b>	Self-declaration (self-monitoring form) when booking and boarding

## On-boarding / disembarking

<b>ACTIVITY TYPE/AREA</b>	<b>RISK DESCRIPTION</b>	<b>MEASURES</b>
TRANSPORT FROM AIRPORT	Risk of infection of guests travelling from airport to ship and from ship to airport.	There should be specified agreement with the local carrier on cleaning the bus before and after transport. Guests meeting at the airport are instructed in good hygiene practice and social distance. Upon arrival, there should be a direct transfer from the airport to the ship or hotel. Upon return, there should be a clear agreement with local authorities on the rules for local excursions and shopping.
LUGGAGE	Risk of infection being brought on board with baggage	It should be considered whether the baggage should be cleaned or disinfected before it is brought on board.

## During the voyage aboard

AREA	RISK DESCRIPTION	MEASURES
SYMPTOM CONTROL	Risk of guests exposing others on board to infection	<p>All checked for symptoms and the health professional responsible on board considers the need for systematic temperature checks.</p> <p>Logged information about the temperature of guests who have been on a cruise to be kept for a minimum of 3 weeks for use by healthcare professionals in the event of any development of symptoms, and for use for any infection tracking.</p> <p>Guests with respiratory symptoms or other Covid-19 symptoms are isolated and are supervised by the ship.</p>

The three principles to slow down the spread of infection:

- **Make sure that sick people are not physically present.**
- **Ensure good hygiene**
- **Reduce contact between people**

In addition, the following measures will be central to efforts to curb the spread of infection:

- **Ensure good training in infection control for employees**
- **Provide a good information to customers about the infection.**
- **Make lists of contact information on all participants/visitors in case infection tracking becomes necessary. The company is responsible for keeping lists with both name, phone number, place of residence and email**

**Provided the possibility in the future, landings are permitted, the following shall apply.** In connection with expedition cruises, it is common for guests to take part in activities outside the vessel. Guests are divided into smaller groups to be transported by small boats/tender vessels to shore or on sightseeing, and possibly for kayak trips. After disembarking, guests may be invited to participate in hiking, beach cleaning, visits to cultural sites, or the like. Sub-measures apply to all activities.

ACTIVITY TYPE/AREA	RISK DESCRIPTION	MEASURES
BRIEFING ROOM	In briefing rooms sitting persons close together for a long time, touching the same contact surfaces.	Briefing is preferably done out in the wild with a distance between guests, alternatively inside the suitable premises where the guideline provides facilitation for 1 meter distance. In this case, contact surfaces in the briefing room are cleaned with normal cleaning agents and aired if possible after each group.

TRAINING/INFORMATION	Guides/staff and guests are not familiar with infection control measures/applicable regulations and their implementation in practice.	Employees shall be informed about and trained in the implementation of infection control measures for the relevant activity. Guests should be informed of measures and infection protection at briefing/welcome. Guests with visible symptoms are rejected participation in trip/activity.
CHANGING ROOM	In the changing room, persons often stay close together, touching the same contact surfaces.	Guides must ensure that sufficiently recommended distance is maintained between the persons in the changing room. Consider dividing the group into several small groups. Hand disinfectant or hand wash facilities with soap and water must be available. Frequently touched contact surfaces are washed or disinfected after using the room with ordinary cleaning agents. Different groups cannot use the same room at the same time.

EQUIPMENT LOAN	Lending equipment is used by several people over time and can lead to contact infection.	<p>Both the guest and the guide shall have clean hands when handing out and handling lending equipment. Lending equipment is provided by the guide to each individual. The equipment is handled safely after use. It should be washed at the highest possible temperature if washable. Equipment that is not washable should be disinfected.</p> <p>Equipment that is in contact with the face should be washed if possible, and if not possible, disinfected. When putting on a dry suit or other garment that comes close to the mouth and nose, persons should wear their own buff, scarf, Balaklava, or other garment that covers their mouth to prevent contact infection via the collar of the cover suit.</p> <p>See the FHI's recommendations on cleaning equipment: <a href="https://www.fhi.no/en/op/novel-coronavirus-facts-advice/advice-and-information-to-other-sectors-and-occupational-groups/cleaning-and-disinfection/">https://www.fhi.no/en/op/novel-coronavirus-facts-advice/advice-and-information-to-other-sectors-and-occupational-groups/cleaning-and-disinfection/</a></p>
SIGHTSEEING AND TRANSPORT IN TENDER VESSELS AND OTHER SMALL VESSELS.	Sightseeing, and transport with tender vessels and other small vessels to and from ships can result in close contact between guests and guides in the vessel	<p>Guests must sit with one free seat between themselves and the next if they do not travel together as family / friends.</p> <p>The vessel is cleaned with ordinary detergents, in particular at touch points. Any cloths are frequently changed and boil washed.</p> <p>Distance between persons must be ensured during queuing.</p>

VISITS IN SETTLEMENTS	Visits to settlements can bring guests and locals into contact, thereby increasing the risk of contact infection to and from communities	<p>The vessel's crew and passengers can only disembark in Norway if the crew and passengers at boarding are not covered by the quarantine rules pursuant to §5 of the Covid-19 Regulations.</p> <p>Any visit to local communities must follow national guidelines and <i>the Guide for Coastal Cruises along the Norwegian coast during the 2020 Covid-19 epidemic</i>.</p> <p>Contact between guests and local residents will take place only if desired and under clear directions from local communities.</p> <p>During visits to the settlement, information on good hygiene and social distancing should be reinforced and everyone should be moving in cohorts (maximum 45 persons in each cohort).</p>
CONTACT AT ACTIVITY	At walking people can be sweet and breath more intensive.	The Guide have to keep 1 meter distance between the persons.
FOOD & DRINK	<p>Joint meals with close contact can increase the risk of infection.</p> <p>During food breaks, there is a risk of contact infection if the guests help themselves to food from the same containers and takes on the same surfaces.</p>	<p>When serving any food/drinks/snacks, the guide ensure that food is served in a protective manner with properly social distancing, cleaning and protection of food, ref covid regulation section §14a . Guides must have good hand hygiene when handling food. Guests should eat at a minimum distance of 1 meter. Guides must ensure that there is access to hand disinfectant.</p>

## First Aid

First Aid	<p>If there is a need to carry out first aid, then everyone must consider whether there is a risk of infection from person to guide, and vice versa.</p> <p>It is important to make sure that the guidance on life-saving first aid is based on what is good practice at all times and then adapts this to the situation of infection.</p> <p>"Common" time-critical emergency medical conditions are: heart attack, stroke, cardiac arrest and serious injuries.</p> <p>This is a risk of infection by a lack of infection control or sanitation control.</p>	<p>All guide should have mouth to mouth mask in the pocket of the jacket, or in other easily accessible space.</p> <p>If there is no basis for suspecting infection, life-saving measures can be given in the usual way as the risk of infection is generally low in society.</p> <p>For those who are not a healthcare professional, the 113 dispatcher takes a decision on the likelihood of the patient being infected, and thus decides whether to take infection control measures in the current situation.</p> <p>In any case, medical emergency phone 113 should be contacted for alerting of resources and for guidance on life-saving first aid measures. This is always important and must be prioritized.</p> <p>Guides should wear disposable gloves and have hand disinfectant available.</p> <p>After contact with a possible infect person in connection with first aid and CPR, the first aiders should always perform good hand hygiene, wash their face and, if possible, change clothes.</p> <p><b>See life-saving first aid attachments</b></p>
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## Measures in case of suspected infection

The three principles to slow down the spread of the infection:

- **Make sure that sick people are not physically present.**
- **Ensure good hygiene**
- **Reduce contact between people**

In addition, the following measures will be central to efforts to curb the spread of infection in Svalbard:

- **Ensure good training in infection control for employees**
- **Provide good information to customers about the infections.**
- **Make lists of contact information on all participants/visitors in case infection tracking becomes necessary. The company is responsible for keeping lists with both name, phone number, place of residence and email**

If any of the passengers show signs of illness that may cause suspicion of Covid-19, they should be immediately isolated in their own cabin on board, and close contacts, after assessment by a healthcare professional, are quarantined pending investigation and test response, cf. section on isolation and quarantine and <https://www.fhi.no/en/op/novel-coronavirus-facts-advice/advice-to-health-personnel/follow-up-close-contacts/>.

Early implementation of measures in case of suspected infection may help prevent the further spread of COVID19 among guests and crew. Personal protective equipment is an important measure to prevent the spread of infection. To have the desired effect, the right equipment must be used correctly and at the right time

## Infection Control Equipment

ACTIVITY TYPE/AREA	RISK DESCRIPTION	MEASURES
EQUIPMENT TO BE AVAILABLE	Prevent spread of infection, protect personnel who are directly in contact with the contagious person(s)	The Norwegian Institute of Public Health consider the following: Surgical facemask (type II or IIR), eye protection (goggles or visor), coat with long sleeves and gloves are to be available for all personnel who have tasks in the isolation zone.

USED INFECTION CONTROL EQUIPMENT	Risk of spreading infection.	Infectious waste is handled and stored in accordance with the rules and procedures of vessels, and is disposed of to an appropriate reception facility.

## Testing and isolation

The Institute of Public Health recommends that all people with symptoms of Covid-19 be tested.

By symptoms is meant acute respiratory infection and one or more of the following symptoms; fever, cough, wheezing, loss of taste or smell, or suspected by a doctor as displaying Covid-19 symptoms. You may also consider testing people with mild symptoms. This can be assessed by a medical officer on board, possibly in contact with the municipal doctor.

In some situations, testing may be asymptomatic, cf. FHI's advice on Coronavirus Test Criteria <https://www.fhi.no/en/op/novel-coronavirus-facts-advice/advice-to-health-personnel/test-criteria-for-coronavirus/>

ACTIVITY TYPE/AREA	RISK DESCRIPTION	MEASURES
TEST EQUIPMENT	Any infection on board vessels must be detected at the earliest possible time.	The vessels shall have 10 x test equipment Sampling equipment can be ordered in agreement with the health authorities in Norway.
COMMUNICABLE DISEASES EQUIPMENT	Any infection on board vessels must be detected at the earliest possible time	The vessel shall have infection control equipment x 10
SAMPLING ROUTINE	Any infection on board vessels must be detected at the earliest possible time	The vessels must make their own documented routine for sampling
EXERCISE ON SAMPLING	You must ensure that samples are taken correctly and do not expose the sampler to the risk of infection.	Practice must be carried out on the procedure for sampling

TESTING	SARS-CoV-2 is the virus that causes the onset of the disease Covid-19	<p>SARS-CoV-2 is the virus that causes the onset of the disease Covid-19.</p> <p>The responsible physician for the vessel is responsible for the requisition of sample of SARS-CoV-2 (covid-19).</p> <p>Operator develops and applies procedure for testing those with suspicion of covid-19.</p> <p>Samples are taken by a nurse or doctor using infectious disease equipment according to procedure.</p> <p>It should be practiced regularly on the procedure.</p> <p>The vessels will have 10 x test equipment for the SARS-CoV-2.</p> <p>Sampling equipment can be ordered upon request with the Norwegian health authority.</p> <p>The test is sent for analysis to the health trust by appointment.</p> <p>The health trust should be notified so that they are prepared to analyze the sample as soon as practicable.</p> <p>The vessel can continue sailing pending the result of the Covid-19 test. Consider not sailing further if the health of the person in question deteriorates.</p> <p>The doctor responsible for the vessel will determine, in cooperation with the nearest municipal supervisor and if necessary the nearest health agency, whether the vessel should cancel the cruise along the Norwegian coast and return to <b>the boarding port</b> or nearest municipality with the capacity to accept the cruise boat, cf. regulations on the notification of and measures in case of serious incidents of importance to international public health etc. (IHR Regulations) (<a href="https://lovdata.no/dokument/SFE/forskrift/2020-03-27-470">https://lovdata.no/dokument/SFE/forskrift/2020-03-27-470</a>.)</p> <p>If the analysis shows that there is no Covid-19, and the health of the person/persons is assessed by a doctor to be satisfactory, then the vessel can continue the cruise.</p> <p>Passengers with illness conditions compatible with Covid-19 should be monitored using self-monitoring influenced</p>
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		<p>temperature measurement for three days after symptoms cease. This is in accordance with the Privacy Policy.</p> <p>If the analysis shows that Covid-19 exists, then the vessel shall return to the boarding port, cf. regulations on the notification of and measures in case of serious incidents of importance to international public health etc. (IHR Regulations)</p> <p><a href="https://lovdata.no/dokument/SFE/forskrift/2020-03-27-470">https://lovdata.no/dokument/SFE/forskrift/2020-03-27-470</a></p> <p>The municipality must be informed.</p>

<p>IN CASE OF SUSPECTED OR CONFIRMED INFECTION (ISOLATION)</p>	<p>Prevent infection from spreading</p>	<p>Anyone with an acute respiratory infection for reasons other than Covid-19 should be home-isolated until at least one day after symptoms. Additionally, people with confirmed or probable Covid-19 must be isolated for at least 3 days after symptom end and at least 8 days after onset of symptoms. Persons confirmed infected by SARS CoV-2 shall reside in isolation, cf. covid-19 regulation, § 11 <i>Isolation</i>. Isolation means that the person is staying in his own home or other suitable place of residence, here in vessels. The person shall be isolated from other persons, and shall, where possible, not have close contact with persons in the same household, cf. covid-19 Regulations, § 3 <i>Close contact</i>. Persons covered by the first subsection are obliged to stay in isolation from symptoms occurring. The period of isolation shall be in accordance with the Directorate of Health's recommendations", cf. the Covid-19 Regulations, Section 11 <i>Isolation</i>. Reference is also made to: FHI's advice on <b>Distance, Quarantine and Isolation</b> (<a href="https://www.fhi.no/en/op/novel-coronavirus-facts-advice/facts-and-general-advice/social-distance-quarantine-and-isolation/">https://www.fhi.no/en/op/novel-coronavirus-facts-advice/facts-and-general-advice/social-distance-quarantine-and-isolation/</a>)</p> <p>Persons with symptoms should be monitored by health professionals on board vessels, and the state of health should be discussed with the municipal doctor if necessary, or by calling 113.</p> <p>The medical doctor on the vessel decides, in cooperation with the nearest municipal doctor if necessary and the nearest health agency, whether the vessel is to cancel the cruise along the Norwegian coast and return to the boarding port, cf. regulations on the notification of and measures in case of</p>
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		<p>serious incidents of importance to international public health etc. (IHR Regulations)  <a href="https://lovdata.no/dokument/SFE/forskrift/2020-03-27-470">https://lovdata.no/dokument/SFE/forskrift/2020-03-27-470</a> .)</p> <p>If the analysis shows that covid-19 exists, then the vessel shall return to the boarding port, cf. regulations on the notification of and measures in case of serious incidents of importance to international public health etc. (IHR Regulations)  <a href="https://lovdata.no/dokument/SFE/forskrift/2020-03-27-470">https://lovdata.no/dokument/SFE/forskrift/2020-03-27-470</a> .)</p>
PLACE OF ISOLATION		<p>An infected person is isolated to a cabin in its own zone on board, where there is no passing traffic of anyone other than the crew dealing with suspected infected persons, or in a designated defined area for the purpose of isolation.</p>

QUARANTINE ON BOARD		<p>The following shall apply to the follow-up of close contacts: House-hold members and similar close contacts shall be quarantined, and "other close contacts" who are followed up with tests and advice.</p> <p><a href="https://www.fhi.no/en/op/novel-coronavirus-facts-advice/facts-and-general-advice/social-distance-quarantine-and-isolation/">https://www.fhi.no/en/op/novel-coronavirus-facts-advice/facts-and-general-advice/social-distance-quarantine-and-isolation/</a></p> <p>The quarantine site for those crew/passengers who have been in close contact with the infected person, shall be on board the vessel. In own cabin or designated defined area for the purpose of isolation.</p>
CRITICALLY ILL PERSON(S)	Deteriorating condition and risk of death	The health professional responsible for the vessel consults with the nearest municipal medical leader and the nearest health agency and follow the instructions.
EVACUATION/MEDEVAC		In case of acute illness/exacerbation, the health professional on board shall consult with the nearest municipal doctor and the nearest health agency about any hospitalization.



### Serving food to people in isolation

ACTIVITY TYPE/AREA	RISK DESCRIPTION	MEASURES
FOOD SERVICE	Prevent spread of infection, protect personnel who are directly in contact with the contagious person(s)	Serving shall only be done by the dedicated crew dealing with suspected infected persons. Normal cleaning of crockery and cutlery.
WASTE MANAGEMENT	Risk of infection	Infectious waste is handled and stored in accordance with the rules and procedures of vessels and disposed of to appropriate reception facilities.

## Part 5 Change log

The Guidance Plan may be revised when the Government adopts changes to the national infection control rules and changes to the health authorities' advice and provisions for infection control. In the event of change, either by change in national rules or changes by operator (business) where there are questions about changing some of the requirements, this shall be submitted to the Directorate of Health before the operator (business) can make a change in how to comply with the infection control rules, applicable laws and regulations and the Guide to Coastal *Cruises along the Norwegian coast during the Covid-19 outbreak 2020..*

Changes should be entered into the change history.

### **2020.07.12 Regulatory change of covid-19 regulations**

The Government's decision on 9 July to open for entry from 15 July for persons resident in countries in the EEA/Schengen area who have a satisfactory situation of infection. At the same time, the requirement for quarantine for travelers from these countries was removed. The Government also adopted section 10 b of the Covid-19 Regulations to be amended so the “vessel's crew and passengers can only disembark in Norway if the crew and passengers at boarding are not covered by the quarantine rules pursuant to §5” of the Covid-19 Regulations.

The Government also agreed to lift the ban on ability to serve food by buffet in the Covid-19-regulations.

## Appendix 1 Contact Information Overview

### Covid-19

If a passenger or crew is detected covid-19, then the coastal cruise vessel shall return to **the boarding port**, cf. regulations on the notification and action in the event of serious incidents of importance to international public health, etc. (IHR Regulations) (<https://lovdata.no/dokument/SFE/forskrift/2020-03-27-470>)

1. Municipal doctors – see **Appendix 2 Overview of infection control manager and/or emergency manager in coastal municipalities**

### On notice of infection

The Captain of the ship is obliged as soon as possible and at the latest upon arrival at the first arrival point in the Norway to notify of the state of health on board, if the conditions of Section 5 of the IHR Regulations are met, cf. regulations on notification of and measures in case of serious incidents of importance to international public health etc. (IHR Regulations) (<https://lovdata.no/dokument/SFE/forskrift/2020-03-27-470>)

Such a notice shall be given to the control centre, customs or the Norwegian Coastal Administration, which then notifies the municipal doctor or the Norwegian Institute of Public Health, cf. Section 4 of the IHR Regulations.

1. Port of the municipality
2. Tollvesenet
3. Municipal doctor – see **Appendix 2 Overview of infection control manager and/or emergency manager in coastal municipalities**
4. Samfunnsmedisinsk beredskapsvakt, FHI: **Telefon: +47 477 81 880**

### Testing on board vessels

The coastal cruise vessels will have 10 x test kits for the SARS-CoV-2. The coastal cruise vessel may have its own test equipment for the SARS-CoV-2 (Covid-19). It can also be ordered upon request with the Norwegian health service.

The doctor responsible for the vessel requests the sample and shall send information to the municipal superior in the nearest municipality for the forwarding of the sample for analysis.

### If first aid is needed – assessment in case of suspected infection

For those who are not a healthcare professionals, the **113** control will take a decision on the likelihood of the patient being infected, and thus decide whether to take infection control measures in the current situation.

In any case, the medical emergency call **113** should be contacted for emergency resources and guidance on life-saving first aid measures. This is always important and must be prioritized.

## Appendix 2 Overview of the infection control manager and/or emergency manager in coastal municipalities

Oversikt over smittevernleder og/eller beredskapsleder i kystkommunene

Havn	Navn	Institusjon	Rolle	Mail	Mobil	Kommentar
Bergen	Ivar Konrad Lunde	Bergen kommune	Leder - Seksjon for samfunnssikkerhet og beredskap	<a href="mailto:ivar.lunde@bergen.kommune.no">ivar.lunde@bergen.kommune.no</a>	98804112	
Florø	Terje Heggheim	Kinn kommune	Kommunedirektør/rådmann	<a href="mailto:terje.hegheim@kinn.kommune.no">terje.hegheim@kinn.kommune.no</a>	91101266	
Måløy	NA	Kinn kommune	NA	NA		
Torvik	NA	Herøy kommune	NA	NA		
Ålesund	Olav Mestad	Ålesund kommune	Kommuneoverlege	<a href="mailto:Olav.Mestad@alesund.kommune.no">Olav.Mestad@alesund.kommune.no</a>		
Molde	Cato Rolland Innerdal	Molde kommune	Kommuneoverlege	<a href="mailto:cato.innerdal@molde.kommune.no">cato.innerdal@molde.kommune.no</a>	92621245	
Kristiansund	Kai Grimstad	Kristiansund kommune	Kommuneoverlege	<a href="mailto:Kai.Grimstad@kristiansund.kommune.no">Kai.Grimstad@kristiansund.kommune.no</a>	71575431	
Trondheim	Eli Sagvik	Trondheim kommune	Overlege smittevern	<a href="mailto:eli.sagvik@trondheim.kommune.no">eli.sagvik@trondheim.kommune.no</a>	952 63 814	
Rørvik	Sabine Moshövel	Nærøysund kommune	Kommuneoverlege	NA	959 93 300	Sentralbord
Brønnøysund	NA	Brønnøy kommune	NA	NA		
Sandnessjøen	Thor Bredvold	Alstahaug kommune	Kommunelege	<a href="mailto:thor.bredvold@alstahaug.kommune.no">thor.bredvold@alstahaug.kommune.no</a>	75 07 51 00	
Nesna	Ilkka Maapaalo	Nesna kommune	Kommunelege	<a href="mailto:ilkka.heiskanen@nesna.nhn.no">ilkka.heiskanen@nesna.nhn.no</a>		
Ørnes	NA	Meløy kommune	NA	NA	NA	
Bodø	Kai Brynjar Hagen	Bodø kommune	Kommuneoverlege smittevern	NA	975 05 010	
Stamsund	Sigve Olsen	Vestvågøy kommune	Næringsjef/beredskapskoordinator	<a href="mailto:sigve.olsen@vestvagoy.kommune.no">sigve.olsen@vestvagoy.kommune.no</a>	481 55 003	
Svolvær	Jan Håkon Juul	Vågan kommune	Kommuneoverlege	<a href="mailto:jan.hakon.juul@vagan.kommune.no">jan.hakon.juul@vagan.kommune.no</a>	90 59 13 41	
Stokmarknes	Ingebjørn Bleidvin	Hadsel kommune	Kommuneoverlege	NA	41 43 44 64	
Sortland	Mette Røkenes	Sortland kommune	Kommuneoverlege	<a href="mailto:Mette.Rokenes@sortland.kommune.no">Mette.Rokenes@sortland.kommune.no</a>	76 10 90 00	Sentralbord
Risøyhamn	Anders Stave	Andøy kommune	Kommuneoverlege	NA	76 11 50 00	Sentralbord
Harstad	Jonas Holte	Harstad kommune	Kommuneoverlege	NA	92208814	48205755
Finnsnes	NA	Senja kommune	NA	NA	NA	
Tromsø	Trond Brattland	Tromsø kommune	Kommuneoverlege	NA	99235534	
Skjervøy	NA	Skjervøy kommune	NA	NA	NA	
Øksfjord	Frank Bækken	Loppa kommune	administrasjonssjef	<a href="mailto:frank.baekken@loppa.kommune.no">frank.baekken@loppa.kommune.no</a>	92886202	

## Appendix 3 Information poster from the FHI and the Directorate of Health

Link to information poster in English and other languages:

[https://www.helsedirektoratet.no/brosjyrer/vaner-som-forebygger-smitte/Vaner%20som%20forebygger%20smitte%20-%20engelsk.pdf/\\_attachment/inline/3d2b9cc7-b939-4480-96d3-b67e8d2b0eee:d0b5a7dbd4d2e54cf6707720f3edd14d51378391/Vaner%20som%20forebygger%20smitte%20-%20engelsk.pdf](https://www.helsedirektoratet.no/brosjyrer/vaner-som-forebygger-smitte/Vaner%20som%20forebygger%20smitte%20-%20engelsk.pdf/_attachment/inline/3d2b9cc7-b939-4480-96d3-b67e8d2b0eee:d0b5a7dbd4d2e54cf6707720f3edd14d51378391/Vaner%20som%20forebygger%20smitte%20-%20engelsk.pdf)

# Habits which help prevent **infection**



**A paper tissue**  
over your mouth and nose protects others when you cough or sneeze. Throw the tissue away immediately. Then wash your hands.



**Use a flexed elbow**  
when you cough or sneeze and do not have a tissue handy.



**Wash your hands**  
thoroughly and often, particularly when around other people.



**Hand disinfection**  
with alcohol-based products is a good alternative when you are unable to wash your hands, for example when you are travelling.



## Appendix 4 Life-saving first aid

It is important to make sure that the guidance on life-saving first aid is based on what is good practice at all times and then adapts this to the situation of infection.

"Common" time-critical emergency medical conditions are: heart attack, stroke, cardiac arrest and serious injuries.

Early warning of **medical emergency phone 113** for the alerting of resources and guidance in life-saving first aid measures is always important and must be given priority.

For further description of symptoms and first aid, we have posted readily available information about this on [www.113.no](http://www.113.no) see:

Symptoms of myocardial infarction, which often come on suddenly:

- chest pain that gets worse with activity
- heavy breath
- pale, cold and damp skin, cold sweat
- nausea
- feeling of fainting

One may experience different symptoms and not necessarily all.

Symptoms of a stroke:

- impaired consciousness or unconscious
- sudden confusion
- suddenly difficult to breathe or very heavy breathing
- pale, cold and damp skin
- in case of illness or injury sudden chest pain, lasting more than five minutes
- suddenly unusually severe headache

First aid will be limited to early warning of 113

In case of severe injury/bleeding, the following applies:

- Ensure free airway in case of unconsciousness
- Keep the person calm
- Stop large external bleeding by pressing bandage or clean cloth directly against the bleeding, and press with your fingers against the wound.
- Try to reduce heat loss (important for the ability of the blood to clot, that is the ability to limit/stop bleeding)

In case of cardiac arrest, the following applies:

- In case of sudden lifelessness: call 113 and put your phone on speaker.
- Ensure free airway and check if the person is breathing normally
- If it is not or there is abnormal breathing, start cardiac pulmonary rescue (CPR)
- Give 30 chest compressions at about 100 compressions per minute.

- Make 2 gentle blow-ins.
- Connect defibrillator if available
- Continue with 30 compressions and 2 blow-ins until the paramedics take over or it is considered futile to continue attempts at resuscitation
- Important to be aware that people who are very refrigerated (e.g. who have fallen in cold water or been buried in avalanches) can survive cardiac arrest even after a long time of CPR.

Adaptations if at risk of Covid19 infection:

The Norwegian Resuscitation Council, the Norwegian First Aid Council and the Council for *Together save lives* have made the following recommendations on CPR:

For those who are not a healthcare professionals, the **113 dispatcher takes a decision on the likelihood of the patient being infected**, thus considering whether to take infection control measures in the current situation..

**If there is no basis for suspecting infection, life-saving measures can be given in the usual way as the risk of infection is generally low in society.** Outside hospitals, most lifesavers will be in family or acquaintances of the patient and probably have shared infection already, so in such cases, guidance in CPR can be done in the usual way.

We recommend the following procedure if you come across a lifeless person.

- Call 113 and put your phone on speaker.
- 113 will guide you through opening the respiratory tract and assessing whether the patient breathes normally or not. If the patient breathes normally, 113 will guide in placing the person in the recovery position. The assessment of whether breathing is normal occurs by watching, listening and feeling for the patient's breathing, but at the risk of **infection, it is sufficient to assess by seeing if the breast moves normally.**
- If the patient is not breathing normally, 113 will guidance in CPR.
- **Defibrillator is connected and used normally.** 113 will guide you to where the nearest defibrillator is located (The Defibrillator Register on the 113.no).
- If there is a risk of infection during CPR, the following should be done:
  - **Mouth-to-mouth or mouth-to-mask ventilation should generally not be given (separate recommendations for children). Therefore, chest compressions should only be given until an ambulance arrives.**
  - If possible, the patient should have his mouth covered with a light piece of cloth to limit the spread of aerosols from the mouth and nose.

After contact with a possible infected people in connection with first aid and CPR, the first aider should always perform good hand hygiene, wash their face and, if possible, change clothes.

## Appendix 5 Example Self-Declaration – Self-Monitoring Form

### Egenerklæring for påstigende gjester og mannskap

Gjester eller mannskap, uansett nasjonalitet, som i løpet av de 14 siste dager før ombordstigning, har hatt nær kontakt med eller hjulpet med å ta vare på personer som mistenkes eller er diagnostisert for å kunne ha Coronavirus (COVID-19), eller som for tiden er underlagt helseovervåking for mulig eksponering for COVID-19, vil bli nektet adgang ombord på skipet.

For å hjelpe oss med å beskytte helse og sikkerheten for passasjerer og mannskap på denne seilingen, krever vi at du svarer på følgende spørsmål:

**Navn:** \_\_\_\_\_

**Alder:** \_\_\_\_\_ **Nasjonalitet:** \_\_\_\_\_

**Kjønn:** \_\_\_\_\_

**Dato ombordstigning:** \_\_\_\_\_ **Signatur:** \_\_\_\_\_

1. Har du eller noen som er oppført ovenfor, hatt symptomer som kan relateres til COVID19, siden du leverte forrige egenerklæring?

Ja / Nei

- 1.1 Om ja, hvilke symptomer har du hatt? (sett ring rundt symptomene nedenfor)

Hoste – Feber – Sår Hals – Hodepine – Tett eller rennende nese – Muskelsmertesmerter  
– ~~Tungpust~~ – Magesmerter/Kvalme/Diare – Tap av smak eller luktesans.

- 1.2 Hvilke dag fikk du symptomer .....

- 1.3 Hvordan er formen din i dag? (sett ring rundt form forslagene nedenfor)

Som vanlig

Er mer sliten enn vanlig, men er for det meste oppe.

Trenger mye hvile, men er oppe innimellom

2. Har du, eller noen som er oppført ovenfor, hatt nær kontakt med eller hjulpet med å ta vare på noen som er mistenkt eller diagnostisert som COVID-19, eller med noen som for tiden er utsatt for helseovervåking for mulig eksponering for COVID-19 fra du sendte siste egenerklæring?

Ja / Nei

- 2.1 Om ja, hva var siste gang du var i kontakt (Dag/Måned/År) \_\_\_\_\_

Jeg bekrefter herved at erklæringen ovenfor er sann og korrekt, og at en samlet vurdering av mine svar kan føre til nektet ombordstigning av hensyn til helse og smittevern.

Jeg forstår at uriktige svar kan ha alvorlige folkehelsekonsekvenser.

**Signatur:** \_\_\_\_\_

#### Ansvar:

Informasjonen i dette spørreskjemaet kan rapporteres til relevante offentlige helsemyndigheter. Ilandstigning fra skipet kan skje for enhver person som bevisst og med vilje avgir en falsk, uriktig eller ureddelig erklæring.



## Appendix 6 Example Health Statement

### HELSEERKLÆRING

Kjære gjest,

Tiden for avreise nærmer seg. Det er svært viktig at du er oppmerksom på at tilgangen til avansert medisinsk tilbud i området vi reiser til, er svært begrenset. Selv om vi har kvalifisert helsepersonell som del av mannskapet, og selv om sykestuen om bord har basismedikamenter og -utstyr, er likevel god helse en forutsetning for å delta på denne turen.

Gjester som ikke er i god form og som har helsemessige plager, herunder handikap, hjertesykdom eller andre sykdommer, bes spørre sin fastlege om det er tilrådelig å delta. Noe annet vil være å utsette seg selv for urimelig risiko som også kan redusere reiseopplevelsen for andre medpassasjerer.

Hvis du regelmessig tar medisin, ber vi deg sørge for at du har med tilstrekkelig kvote for hele reisen. Du kan ikke påregne at tilsvarende medisin er tilgjengelig om bord. Du bør ha reiseforsikring som dekker kostnader for deg.

Skipets lege og Kaptein forbeholder seg retten til å nekte gjester ombordstigning dersom de ikke er helsemessig tilstand til å være med.

Vær oppmerksom på at all informasjon i legeattesten er ment som en medisinsk referanse for skipslegen. Attesten vil derfor bli oppbevart av legen under hele reisen.

Takk for samarbeidet.

**Er man i gruppen lett økt risiko jfr. definert av FHI må man fylle ut hele skjemaet.**

**(<https://www.fhi.no/nettpub/coronavirus/fakta/risikogrupper>)**

**Vennligst fyll ut vedlagte skjema. Legeattesten må sendes inn senest en uke før avreise.**

# MANDATORY HEALTH DECLARATION

## General insurance information

Medical evacuation, if available, is expensive; therefore, it is necessary for you to have a Travel Protection Plan/travel insurance that will reimburse you for this cost. If you have taken out a Travel Protection Plan/travel insurance, can you please provide the below details.

NAME OF THE COMPANY:	
COMPANY'S EMERGENCY NUMBER:	
POLICY NUMBER:	

In declining the purchase of a Travel Protection Plan/travel insurance, I will not hold Hurtigruten AS responsible for any additional expenses/losses incurred resulting from my cancellation of this trip, accident, sickness, medical evacuation, lost or damaged baggage, or any other contingency that would have been covered by the insurance protection recommended.

DATE: .....

SIGNATURE: .....

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## Part I: Health Declaration

**This part of the form must be completed in English or using international medical terms.  
Please do not abbreviate any words.**

I attest that I am in good general health, and capable of performing normal activities on this expedition. I further attest that I am capable of caring for myself during the expedition, and that I will not impede the progress of the expedition or the enjoyment of others aboard. I understand that this expedition will take me far from the nearest medical facility and that all travelers must be self-sufficient. With that understanding, I certify that I have not been recently treated for, nor am I aware of, any physical or other condition or disability that would create a hazard to myself or other members of the expedition.

EXPEDITION:	
DEPARTURE DATE:	
NAME:	
DATE:	

SIGNATURE: .....

## Part 2: Medical Information

DATE OF BIRTH (DD/MM/YYYY)	
BLOOD TYPE (IF KNOWN):	
HEIGHT:	
WEIGHT:	

<b>EVALUATE YOUR GENERAL HEALTH (PLEASE CHECK THE APPROPRIATE BOX):</b>							
POOR	<input type="checkbox"/>	FAIR	<input type="checkbox"/>	GOOD	<input type="checkbox"/>	EXCELLENT	<input type="checkbox"/>
<b>EVALUATE YOUR PHYSICAL CONDITION/STAMINA (PLEASE CHECK THE APPROPRIATE BOX):</b>							
POOR	<input type="checkbox"/>	FAIR	<input type="checkbox"/>	GOOD	<input type="checkbox"/>	EXCELLENT	<input type="checkbox"/>

<b>HAVE YOU TAKEN OUT TRAVEL PROTECTION WITH SUFFICIENT COVERAGE FOR MEDICAL REPATRIATION FROM THE DESTINATION IN WHICH YOU ARE TRAVELING? PLEASE CHECK THE APPROPRIATE BOX.</b>			
YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
<b>DO YOU REQUIRE OXYGEN THERAPY ON A REGULAR BASIS? PLEASE CHECK THE APPROPRIATE BOX.</b>			
YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
<b>IF YOUR ANSWER IS YES, PLEASE DESCRIBE THE CONDITION:</b>			
<div style="border: 1px solid black; height: 40px; width: 100%;"></div>			

Do you have, or have you had in the past 5 years, any of the conditions listed below? Please check the appropriate box.

CONDITION	YES	NO
High blood pressure	<input type="checkbox"/>	<input type="checkbox"/>
Cardiac/heart disease: Cardiac valvulopathy, Coronary acute syndrome, Cardiac tamponade or any other	<input type="checkbox"/>	<input type="checkbox"/>
Heart surgery	<input type="checkbox"/>	<input type="checkbox"/>
Pulmonary conditions: Asthma/bronchitis, COPD-chronic obstructive pulmonary disease, pulmonary thrombosis	<input type="checkbox"/>	<input type="checkbox"/>
Blood disorder: hemorrhage (excessive bleeding), clots, anemia or any other	<input type="checkbox"/>	<input type="checkbox"/>
Diabetes: Type 1 or Type 2	<input type="checkbox"/>	<input type="checkbox"/>
Digestive disorder: stomach ache, stomach ulcers, heartburn, bleeding, constipation, diarrhea, or any other	<input type="checkbox"/>	<input type="checkbox"/>
Skin problem: sores, blisters, skin rash, burns, eruptions, itchiness or any other	<input type="checkbox"/>	<input type="checkbox"/>
Allergies: dust, latex or any other	<input type="checkbox"/>	<input type="checkbox"/>
Infectious/ contagious diseases	<input type="checkbox"/>	<input type="checkbox"/>
Severe headaches - migraines	<input type="checkbox"/>	<input type="checkbox"/>
Ear/nose/throat problems: hearing loss, earache, sinusitis, nosebleeds, or any other	<input type="checkbox"/>	<input type="checkbox"/>
Restricted mobility/difficulty walking, use crutches, a walking stick or wheelchair	<input type="checkbox"/>	<input type="checkbox"/>
Amputation	<input type="checkbox"/>	<input type="checkbox"/>
Do you have a prosthesis or joint replacement?	<input type="checkbox"/>	<input type="checkbox"/>
Fractures/dislocations	<input type="checkbox"/>	<input type="checkbox"/>
Stroke	<input type="checkbox"/>	<input type="checkbox"/>
Eye/vision problems: pain, dryness, redness, glaucoma, blurred vision, double vision or any other	<input type="checkbox"/>	<input type="checkbox"/>
Autoimmune disorders: Lupus, Psoriasis, Celiac Disease(sprue) or any other	<input type="checkbox"/>	<input type="checkbox"/>

Are you currently pregnant?		
Thyroid problems such as hypothyroidism /hyperthyroidism or any other		
Psychiatric disorders such as depression, anxiety or any other		
Tumors benign/malign: breast, lungs, intestine or any other		
Urinary system: pain, infections, prostatic hyperplasia (in men), kidney stones, renal failure or any other		
Spinal column and back problems: muscle contracture, herniated disk, sciatic nerve compression, spinal stenosis, scoliosis or any other		
Neurological disorders such as loss of consciousness, loss of memory/ balance problems (Alzheimer/Parkinson), epilepsy/seizures, dizziness/fainting or any other		
Musculoskeletal system: pain in joints, muscle pain, weakness, osteopenia/osteoporosis, swollen ankles/knees or any other		

**IF YOU ANSWERED YES TO ANY OF THE ABOVE, PLEASE DESCRIBE BELOW:**


**DO YOU HAVE ANY OTHER MEDICAL CONDITIONS NOT MENTIONED ABOVE? PLEASE DESCRIBE BELOW:**


**DO YOU HAVE ANY MEDICAL ILLNESSES, DISABILITIES OR INFIRMITIES THAT REQUIRE THE REGULAR CARE OF A DOCTOR?**


**LIST ALL MEDICATIONS THAT YOU ARE TAKING AT THIS TIME, THE DOSAGES AND THE CONDITION THAT IS BEING TREATED:**

MEDICATION	DOSAGE	WHAT ARE YOU TAKING THIS MEDICATION FOR?

**HAVE YOU BEEN HOSPITALIZED OR HAD SURGERY IN THE LAST FIVE YEARS? IF YES, WHEN AND WHAT KIND OF SURGERY?**


**DO YOU HAVE ANY DRUG ALLERGIES? IF YES, WHAT ARE THEY?**


**DO YOU HAVE ANY DIETARY RESTRICTIONS OR FOOD ALLERGIES? IF YES, WHAT ARE THEY?**

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**DO YOU HAVE ANY OTHER PHYSICAL OR MENTAL LIMITATIONS, OR HANDICAPS NOT MENTIONED ABOVE?**

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**DO YOU HAVE ANY MOBILITY ISSUES THAT WOULD PREVENT YOU FROM CLIMBING IN AND OUT OF A RUBBER INFLATABLE BOAT (RIB), I.E. "ZODIAC" OR A RIGID HULL LANDING CRAFT I.E. POLAR CIRCLE BOAT (PLEASE CHECK THE APPROPRIATE BOX)?**

YES ☐ NO ☐

**IF YOU REPLIED YES TO THE PREVIOUS QUESTION, PLEASE CHECK THE FOLLOWING:**

CANE ☐ WALKER ☐ WHEELCHAIR ☐ PROSTHETIC LIMB ☐

EMERGENCY CONTACTS	NAME	RELATIONSHIP	PHONE NUMBER
CONTACT 1:			
CONTACT 2:			

On studying the information, we reserve the right to contact your doctor about health issues that could affect the journey.

☐ Please check the box if you prefer to be contacted first before we contact your doctor.

☐ I hereby authorize that Hurtigruten can use the information provided in this document for the purpose of which it is intended. Ref Article 7. Hurtigruten will delete/destroy the information on completion of the voyage or as soon as possible when the information is no longer needed for medical purposes.

## Part 3: Medical Doctor's Opinion

**Please give this form along with your itinerary to a medical doctor. Please check our webpage for an updated list of destinations where a doctor's opinion is required.**

Dear Doctor,

Our traveler is planning an expedition cruise to the areas where sophisticated medical facilities are unavailable. Each vessel carries a doctor and a small infirmary. While not strenuous, travelers who participate on excursions must negotiate a steep gangway, get in and out of landing boats with assistance and be capable of walking a short distance over uneven and slippery terrain ashore. The areas being travelled in are very remote and where medevacs are possible can take up to 2 days and in some cases (such as South Georgia) medevacs are impossible, as the area is out of the range of helicopters and/or landing strips.

References to our Expedition Voyages: we ask you to take a quick look at the following links, just to give you an idea what kind of journey this is:

[https://www.youtube.com/watch?v=PSJMTtp\\_6kQ](https://www.youtube.com/watch?v=PSJMTtp_6kQ)

<https://www.youtube.com/watch?v=ADwZDRriSHs>

According to our regulations, passengers in "poor" health condition are in high risk of complications during the trip and therefore they should not join the voyage. Master and Doctor will deny passengers to come onboard with a medical form incomplete and/or with an unstable physical health condition.

We would like to be sure that each of our passengers is in adequate medical condition for the voyage and that our shipboard doctor is fully alerted to any potential health problems.

**WE WOULD APPRECIATE YOUR EVALUATION OF THE TRAVELERS' OVERALL PHYSICAL CONDITION (PLEASE CHECK THE APPROPRIATE BOX):**

POOR	<input type="checkbox"/>	FAIR	<input type="checkbox"/>	GOOD	<input type="checkbox"/>	EXCELLENT	<input type="checkbox"/>
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**THE TRAVELERS' ABILITY TO PARTICIPATE IN THIS EXPEDITION AND EXCURSIONS:**

POOR	<input type="checkbox"/>	FAIR	<input type="checkbox"/>	GOOD	<input type="checkbox"/>	EXCELLENT	<input type="checkbox"/>
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**PLEASE ELABORATE ON ANY MEDICAL CONDITIONS THAT YOU FEEL OUR SHIPBOARD DOCTOR SHOULD BE AWARE OF:**


Thank you for your help.

<b>DOCTOR'S NAME (BLOCK LETTERS)*:</b>			
<b>CODE:</b>		<b>REGISTRY NUMBER:</b>	
<b>TELEPHONE*:</b>		<b>E-MAIL:</b>	
<b>CITY, STATE, COUNTRY*:</b>			

**DATE\*:** .....

**DOCTOR'S SIGNATURE\*:** .....

The doctor is not responsible for any medical occurrences during the voyage. By signing the medical form, the doctor is merely complying with the requirement that guests are fit for travel on the above-noted date.

*\*mandatory fields.*

**DOCTOR'S STAMP:**

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