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# Guideline for regular epidemic prevention and control of COVID-19 for civil airports in China

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# Contents

# Foreword

This standard was drafted in accordance with the rules given in GB/T 1.1-2009 Directives for standardization – Part 1: Structure and drafting of standards.

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This standard was mainly drafted by the following units: Capital Airports Holding Company (CAH), Beijing Capital International Airport Hospital, Hubei Airports Group Company, First Aid Station of Wuhan Tianhe International Airport, HeiLongjiang Airports Management Group Co., Ltd., and Emergency Center of Fire Department of HeiLongjiang Airports Management Group Co., Ltd.

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This standard was issued for the first time.

# Introduction

When infectious disease epidemic outbreaks worldwide and in many countries, the principal purpose for airport operators is to protect the health and property of passengers, employees and the public, and to minimize the opportunities of infectious diseases spreading by air. Every civil airport operator should strive for better predictive ability, more thorough preparation and better coordinating and handling abilities, which plays the key role in successfully reducing any risk of infectious disease transmission. It is also true for the COVID-19 preventional and control this time. The purpose of this standard is to reduce the possibility of exposure to infectious sources in the airport, cut off the route of transmission, and to improve the prevention and control of COVID-19 by establishing a scientific decision-making and action mechanism.

In order to strengthen science-based, legal and joint prevention and control, and establish and improve a regular COVID-19 prevention and control mechanism of timely discovery, rapid transfer, precise control and effective handling in civil airports. With the active promotion by China Civil Airport Association (CCAA), the Medical Rescue Committee of China Civil Airport Association (CCAA) drafts the Guideline for regular epidemic prevention and control of COVID-19 for civil airports in China by learning from the good practices of airports across the world and solidifying the good experience and mechanism of epidemic prevention and control, in order to guide civil airports to standardize the epidemic prevention and control, reduce risk of infection of passengers, staff and the public, minimize the transmission of epidemic situation, and ensure the orderly development of air transport work.

# Guideline for regular epidemic prevention and control of COVID-19 for civil airports in China

## 1 Scope

This standard specifies the general requirements for the regular prevention and control of COVID-19 in civil airports, the construction of organizational team, materials and equipment, information management, screening of prevention and control, health management for staff, and environmental ventilation and disinfection.

This standard can be referred to when other respiratory infectious diseases occur in the airport. This standard is applicable to regular epidemic prevention and control of COVID-19 in civil airports in the People's Republic of China.

## 2 Normative References

The following referenced documents are indispensable for the application of this document. For dated references, only the edition cited applies. For undated references, the latest edition of the referenced document (including any amendments) applies.

GB 19193-2015 “General Principles of Disinfection for Infectious Foci”

WS 394 “Specification for hygiene management central air conditioning ventilation system of public place”

WS/T 396 “Specification of cleaning and disinfecting for central air conditioning ventilation system in public buildings”

## 3 Terms and Definitions

The following terms and definitions apply to this document.

### 3.1 **Regular prevention and control**

The phased epidemic prevention and control, opposite to the emergency state of epidemic prevention and control. It refers to the continuous state of prevention and control in which the epidemic prevention and control tends to be stable, and the demand for prevention and control is relatively balanced with the demand for business operation.

### 3.2 E**mergency response level**

The alert level for possible and early-warning public emergencies which is made based on the nature, the extent of harm, the emergency degree and development trend, and the scope of the public emergencies. It can be generally divided into four levels: particularly significant (level I), significant (Level II), large (level III) and general (level IV).

### 3.3 **Epidemic-related flights**

Flights in which suspected or confirmed patients with COVID-19 are reported by the flight crew,, or flights from high-risk and medium-risk countries or regions, including domestic and foreign, incoming and outgoing flights, according to information released by government.

### 3.4 P**ersonal health information code ;PHI-code**

It is bound to the Cyber Trusted Identity (CTID), which expresses the sequence of a series of numbers or letters that users authorize others or organizations to access specific personal health information temporarily. QR code is generally used as its storage medium.

[GB/T 38961-2020，Definition 3.9]

### 3.5 **Personal protective equipment, PPE**

Various barrier supplies used to protect personnel from exposure to infection factors. Including masks, gloves, goggles, face shields, isolation gowns, protective suits, etc.

[WS/T 311-2009，Definition 3.9]

### 3.6 **Alcohol-based hand rub**

Hand rub with alcohol and skin care ingredients.

Note：Dosage forms include water aqua, gel and foam.

[GB 27950-2020，Definition 3.3]

### 3.7 Cleaning

Remove contamination from an item to make it reach the extent required for its intended use or further treatment.

[WS/T 466-2014，Definition 3.25]

### 3.8 Disinfection

To kill or remove pathogenic microorganisms from the transmission media to make it harmless.

[WS/T 466-2014，Definition 3.38]

### 3.9 Preventive disinfection

Disinfection of places and items that may be contaminated by pathogenic microorganisms when there is no specific source of infection.

[WS/T 466-2014，Definition 4.49]

### 3.10 Terminal disinfection

The complete disinfection after the source of infection leaves the epidemic focus.

[WS/T 466-2014，Definition 4.55]

### 3.11 Available chlorine

It is a sign to measure the oxidation capacity of chlorine-containing disinfectant. It refers to the amount of chlorine equivalent to the oxidation capacity of chlorine-containing disinfectant (not the chlorinity of disinfectant). Its content is expressed in mg / L or % concentration (the definition and expression method of effective iodine and effective bromine correspond to available chlorine).

[WS/T 367-2012，Definition 3.20]

### 3.12 High-risk position

Positions that are involved with in the prevention and control work with passengers or the possible polluted environment has high frequency or close or long-term contact with the post.

Note 1: High-risk positions include but are not limited to airport security, first-aid emergency, ground cleaning and check-in positions.

Note 2: It can be adjusted according to the relevant civil aviation documents and the actual content of prevention and control positions.

## 4 General Principles

Airports should implement the regular epidemic prevention and control requirements of "timely discovery, rapid disposal, accurate control, and effective treatment", establish a scientific and effective regular prevention and control mechanism according to the local government’s requirements for local epidemic risk prevention and control and the operation of epidemic related flights. Airports should be fully prepared, cautious, and formulate and implement measures in an “All-Steps, All-Round and Overall Processing”manner. Differentiated epidemic prevention and control should be implemented according to the changing circumstances. Airports should also“Prevent Imported Cases and Domestic Re-infections”. To ensure the effect of normalized prevention and control, close attention should be paid to the regular epidemic prevention and control in the airport, to ensure the good civil aviation transportation order.

## 5 Construction of Organizational Team

### 5.1 Organizational Team

#### 5.1.1 Management Responsibilities

Airport authority is responsible for the organization and management of COVID-19 prevention and control, and the airport first aid agency is responsible for the professional and technical guidance.

#### 5.1.2 Organizational Structure

#### 5.1.2.1 Leading Group

An epidemic prevention and control leading group (hereinafter referred to as the leading group) should be established, which should consists of operation management, medical emergency, terminal management, safety management, material supply, human resources management, information, finance and other departments. The leader of the leading group should be the principal personnel in charge of the party and government administration of the airport, and the team members should include other members of the team.

#### 5.1.2.2 Joint Prevention and Control

Joint Prevention and Control Mechanism should be established in airports, including the representatives of the leading group and the local health commission and the coordination personnel of the local disease control department. The personnel of the relevant customs departments in the international port airports should also be included, among which the expert group should be established to provide professional advice for the adjustment of prevention and control decision-making and measures.

#### 5.1.2.3 Sub Working Group

The leading group should establish a sub working group according to the needs of epidemic prevention and control. The regular epidemic prevention and control working group, based on the coordination of passenger prevention and control, disinfection and quarantine, material supply, information publicity, staff protection, operation management and other departments, is responsible for the specific implementation of prevention and control.

Each working group is equipped with personnel according to the prevention and control needs, and establishes a hierarchical backup personnel response support mechanism.

### 5.1.3 Management Standards

It is necessary to establish a management system, establish and improve the responsibility system of prevention and control, and stipulate the organization and requirements of epidemic prevention and control, including working objectives, organizational structure, work duties,

working mechanism, work measures, working requirements, discipline requirements, supervision and assessment, material support, reward and punishment conditions, etc.

#### 5.1.4 Working Plan

Working plans should be formulated, including risk level confirmation and report, work procedures, work contents, supportive requirements, dynamic information collection, and adjustment of work prevention and control resources and requirements.

### 5.2 Personnel Training

#### 5.2.1 Multi-level Training

Targeted training should be set up for different positions.

The airport should conduct training about knowledge and skills of COVID-19 prevention and control for all staff, including contract staff working in the airport such as service providers, and the necessary training of handling public health emergencies.

All the staff in high-risk positions such as temperature measurement, security check and medical first aid should be trained and assessed.

#### 5.2.2 Training Content

Including but not limited to:

a) Basic knowledge of public health emergencies, including:
   1) How to identify, discover and report;
   2) How to dispose in advance, etc.;
b) Basic concept and knowledge about COVID-19;
c) Personal protective knowledge and skills about COVID-19, including:
   1) Selection and wearing of face masks;
   2) Use of gloves;
   3) Use of protective clothing;
   4) Hand hygiene;
d) Knowledge of COVID-19 environmental disinfection and waste disposal, including:

1) Selection and use of disinfectants;
2) Classification and disposal of waste, etc.;

e) The screening procedure in the airport, quality control requirements, psychological adjustment, etc.;

f) Use of information technology equipment of prevention and control.

#### 5.2.3 Training Forms

Online training, on-site face-to-face teaching, practice, exercises and other training forms by professional personnel can be used.

#### 5.2.4 Supervision of Effects

The supervision and inspection of training effects should be strengthened in order to ensure the implementation effect.

Information network of prevention and control staff should be established through training, in order to ensure the timely update and implementation of policies, requirements and processes related to prevention and control.

## 6 Materials and Equipment

### 6.1 Standards of Equipment

The dynamic reserve of prevention and control materials and equipment should be strengthened. Materials and equipment related to the work should be allocated, including temperature measuring equipment, protective materials, disinfection materials and equipment, and communication equipment. See Annex A for material and equipment allocation.

### 6.2 Standards of Management

#### 6.2.1 Main Part

Materials and equipment should be allocated, kept, maintained and updated regularly by the airport and its subordinate prevention and control units according to the needs of prevention and control. Materials and equipment resource management database should be established.

### 6.2.2 Reserve Area

Materials and equipment should be placed in a fixed designated place which is easy to access, and shall be supplemented in time after use.

### 6.2.3 Management System

Systems of material and equipment procurement management, maintenance, update, replacement, distribution, reserve, supervision and inspection should be established.

### 6.2.4 Management Account

Files of management, maintenance, update, distribution and reserve should be established, which should record the type, quantity, department, staff in charge of and direct managing the distribution, reserve and maintenance.

## 7 InformationManagement

### 7.1 Information Linkage

The leading group should establish internal and external direct or indirect communication, and publish the clear and unobstructed information contact ways within an appropriate scope.

The prevention and control screening departments and relevant security units should establish a rapid information response and linkage mechanism, interpret and implement the requirements of prevention and control policies, and quickly respond to and handle the prevention and control.

Reasonable initiative or flexibility should be given according to the characteristics of posiition responsibilities to facilitate scientific, rapid coordination and disposal of prevention and control actions.

It is suggested to establish the special prevention and control information linkage network by (visual) special interphones (channel).

### 7.2 Information Follow-up

The leading group should be responsible for coordinating or instructing relevant departments to establish information communication and feedback mechanism within the airport, between the airports and inspection units such as customs, as well as among the airport and local health management departments and linkage units, so as to follow up and handle the relevant diagnostic information of inbound and outbound passengers.

### 7.3 Information Preservation

The airport should establish a work record account for prevention and control, in which the temperature measurement record should be kept for at least 28 days in the form of paper and electronic records. It is suggested to use digital method to record, transmit, count and analyze.

### 7.4 Information Report

We should establish an information report mechanism of epidemic prevention and control, and establish a reporting system for the prevention and control including screening, transmission and diagnosis. The contents of the report include but are not limited to: risk level of prevention and control, information of diagnostic personnel, process adjustment of special area, disinfection and quarantine, problems and hidden dangers.

### 7.5 Information Publicity

#### 7.5.1 Cultivation of public awareness of prevention and control

##### 7.5.1.1 Methods and Channels

The airport should publicize the knowledge of epidemic prevention and control through posters, electronic display boards, broadcasting, ground indication signs and other methods and channels, and do well in reminding health tips and prevention and control measures.

##### 7.5.1.2 Selection of Language

The language of announcement should be the language of passengers who often travel through the airport, including at least Chinese and English.

#### 7.5.1.3 Content

It should include:

a) Knowledge of COVID-19;
b) National genral and specific policies, laws and regulations about COVID-19 prevention and control;
c) Relevant national standards, guidelines and specifications;
d) Knowledge of personal protection, physical distance requirements, etc;
e) Knowledge of airport prevention and control programs and procedures;
f) Airport-related prevention and control measures and the use of relevant equipment.

### 7.5.2 Information Notification of Outbound Passengers

#### 7.5.2.1 Notification in Advance

Close information cooperation with civil aviation, governmental prevention and control departments should be established, so that the requirements and impact of prevention and control measures on travel can be provided to passengers through a variety of information channels. Moreover, passengers and other relevant personnel can get information about flights, screening measures, etc. At the same time, potentially infectious passengers should be prevented from traveling.

#### 7.5.2.2 Trust Maintenance

Airport operators should inform the public of the situation of prevention and control of airport operation, establish and maintain public trust and confidence.

## 8 Screening of Prevention and Control

### 8.1 Health Code

#### 8.1.1 In Common Use

According to the requirements of epidemic prevention and control by national ports and local governments, “one code access” should be implemented relying on the national integrated government service platform,so that passengers can transfer in a safe and orderly manner.

#### 8.1.2 Confirmation of Health Code

According to the requirements of epidemic prevention and control by national port and local government, passengers’ health code should be scanned before entering the airport, and their health status should be confirmed through the national network data。

According to the requirements of epidemic prevention and control by national port and local government, passengers with abnormal health codes should be prevented from entering the airport.They should normatively wear medical mask or masks with higher protective level and register their personal information. Moreover, it is suggested that they should go to the designated hospitals in time for screening, and the place should be cleaned and disinfected in time.

### 8.2 Temperature Screening

#### 8.2.1 General Principle

The temperature screening mechanism should be established, and all open entry, exit and domestic transit channels in airports should be equipped with temperature measuring equipment, so that all passengers can be checked.

#### 8.2.2 Screening Equipment

For large airports, non-contact temperature measuring equipment (hereinafter referred to as the thermometer) that has been certified and within the validity periodshould be used for temperature screening. Airports above level 6 (inclusive) should be equipped with infrared temperature measuring and screening equipmentequipped with automatic calibration, automatic counting, automatic photographing, and automatic storage.

Smaller airports with can be equipped with temperature measuring equipment such as temperature guns for prevention, control and screening.

Quality control standards and files should be established for the equipment.

### 8.2.3 Screening Site

Screening area and temporary quarantine area should be established, with relatively good ventilation and sufficient area. If mechanical ventilation is used in the screening area, the airflow direction should be controlled so that the those tested can be in the downwind position.

Notification signs in Chinese, English, Japanese, Korean and other languages should be set at the entrance of the screening area and temporary quarantine area.

### 8.2.4 Screening Procedure

Screening should be conducted according to the following procedures:

a) Non-contact screening for all should be conducted with temperature measuring equipment;
b) Re-checking for the those alarmed by the temperature measuring equipment;
c) Confirming that febrile passengers confirmed by re-check should wear surgical masks or more protective masks, and informing the airport first-aid personnel to guide those passengers to the temporary quarantine area for on-site screening;
d) The airport medical emergency department is responsible for, or contact the social medical institutions responsible for, conducting the on-site screening for febrile passengers confirmed by re-check. For those ruled out, information registration and passing should be conducted; for those need to be transferred to fever clinics as required by the local government, those provisions shall prevail;
e) After screening, those who need to be transferred to the designated hospitals need to be transferred to the ambulance through the specific path. The airport first-aid units or social transfer force should transfer them to the designated hospitals;

f) For those who need to be transferred to the designated hospitals after screening but temporarily cannot leave the site, they should stay in the temporary quarantine area and wait for transfer;

g) The airport screening staff should record and keep the medical documents during the disposal process, and sign and register when handing over with the receiving unit.

## 8.3 Screening Requirements

### 8.3.1 Equipment

#### 8.3.1.1 Quality Control

See Annex B.

#### 8.3.1.2 Disinfection

Disinfection items with suitable types and dosage forms should be provided. Preventive disinfection is required for equipment that may contact people. If there is direct contact, disinfection should be conducted in time.

#### 8.3.1.3 Backup

A certain proportion of backup equipment should be equipped according to the flow and process, and stored in the area convenient for rapid deployment and replenishment.

### 8.3.2 Staff

8.3.2.1 The staff directly related to the prevention and control, such as temperature measuring staff and screening staff, are collectively referred to as the prevention and control staff.

8.3.2.2 It is necessary to establish working procedures for temperature measuring staff, as well as matched work requirements such as standard language and standard guiding gestures.

8.3.2.3 Temperature measuring staff should complete the pre-job training on equipment operation, protective knowledge, working procedures, position requirements and also pass the corresponding examinations.

8.3.2.4 Daily temperature management system of temperature measuring staff should be established, and necessary and sufficient supplies should also be provided.

8.3.2.5 If permitted, the prevention and control staff should maintain the protective distance throughout the whole process, protect themselves, clean their hands in time, and standardize the disposal of waste protective equipment.

8.3.2.6 The screening staff should notify the screened path and stay area in time, and start the disinfection mechanism.

8.3.2.7 The composition of prevention and control staff should be improved. Minority language communication support mechanism for foreign passengers can be established, and multilingual translators or equipment can be provided if permitted.

## 8.4 Epidemic-related Flights

### 8.4.1 Area Setting

8.4.1.1 The areas of parking the aircraft should be set up based on the principles including "the shortest path, the minimal impact" and reducing the cross-contact among passengers. The epidemic-related flights should be arranged to the Remote Boarding Gate, so that the areas can be classified and passengers and luggage can be accurately transfered.

8.4.1.2 For international epidemic-related flights, it is necessary to coordinate with local customs, set up quarantine areas, and properly arrange inbound and outbound procedures and routes.

8.4.1.3 For inbound people (including passengers and flight crew) from epidemic-related flights, close-loop management of centralized transfer should be arranged together with local government.

8.4.1.4 Temperature measuring area, screening area, transferring area, special luggage area and other areas should be set in the quarantine area.

### 8.4.2 Working Procedure

The working procedure is as follows:

a) According to the prevention and control requirements by the local government and the Civil Aviation Administration, the entry (exit) route of people from epidemic-related flights should be set up separately, and a separate working procedure should also be established;

b) The airport strictly prevents cross infection by simplifying check-in procedures, adopting non-contact boarding, setting up special channels, and providing special personnel to accompany throughout the whole process, etc.;

c) Airport accompanied staff should wear medical surgical masks or more protective masks, disposable rubber gloves, goggles or faceshields;

d) After the passengers leave, the quarantine area should be cleaned and disinfected;

e) The screening staff should protect themselves well when asked to get on the plane to do the screening;

f) For those who need to be transferred to the designated hospitals for further screening, a proper procedure should be established. First-aid staff should leave the site from the specified route by following the principle of "the shortest path, the minimal impact”; if permitted in some airports, the transfer can be carried out by the ambulances from the local hospitals under the supervision and guidance of the relevant departments;

g) The basic living needs of all passengers should be taken into consideration. They should be provided with food, drinking water and other daily necessities; and for those who have to stay, comfortable living conditions should be provided;

h) The communication mechanism with passengers and other relevant staff should be established. Passengers should be informed og relevant policy requirements so that they can know, understand and cooperate with the prevention and control;

i) The airport should establish a communication mechanism with the operating airlines which epidemic-related flights belong to, so that they can provide the information related to epidemic prevention and control in a timely manner;

j) Airports, airlines, ground handling agents and other relevant units should timely inform and share relevant information with each other; the information about domestic

passenger and destination airports should also be informed so that the disposal can be well prepared;

k) It should be confirmed that passengers in the epidemic-related flights should wear medical surgical masks or more protective ones;

l) All surfaces that may be contaminated should be cleaned and disinfected;

m) The waste from the epidemic-related flights should be disposed by following the requirements in Appendix E.4.3.

## 8.5 Emergency Disposal

8.5.1 Emergency areas, such as areas beside the security check channel, should be set up; when people in public areas outside the screening area have fever, cough and other suspected symptoms, the staff should lead them to the above-mentioned area for temporary quarantine.

8.5.2 The staff who find the emergency should report the information to the relevant departments, and the airport first-aid staff should take the relevant people to the temporary quarantine area for screening according to the principle of "the shortest path, the minimal impact".

8.5.3 If someone is necessary to be transferred to the designated hospitals after screening, he/she should be transferred to the designated hospitals for further inspection according to the principle of "the shortest path, the minimal impact", and the relevant areas should be disinfected in time.

8.5.4 For the suspected and confirmed cases, the places they have passed by or stayed should be terminal disinfected by professional staff.

## 8.6 Proactive Measures

8.6.1 When entering the airport, passengers should wear masks according to relevant requirements by local government and civil aviation, and keep wearing masks in crowded areas.

8.6.2 Interval signs or landmarks should be set in the airports to keep the physical distances between passengers and between passengers and staff.. Non-contact automatic identification and

verification equipment can be applied to certain airports if permitted, in order to reduce direct contact with personnel

8.6.3 The number, scope and requirements of access ways, activity areas and commercial facilities should be adjusted dynamically to control the density in certain areas. Equipment out of service should experience the corresponding check procedures before re-activating.

8.6.4 Hand cleaning and disinfection products such as alcohol-based hand rub should be provided to passengers at the temperature measuring areas at the entrance of the terminal, arrival areas, check-in counter, self-service equipment, security check areas, toilet, information counter and stores.

8.6.5 Alcohol-based hand rub should be provided to passengers at the boarding gate to promote good hand hygiene and proper disposal of relevant wastes.

# 9 Health Management for Staff

## 9.1 Protection Standard

Differentiated prevention and control should be implemented according to the operating flights of the airport and the risk level of the airport; and protective equipment should be provided accordingly.

It is necessary to set up protection standards for staff of different risk levels and different working positions, and establish and implement the supervision mechanism.

Adequate and scientific protective equipment (including hand washing facilities or cleaning and disinfection equipment) should be provided for airport staff.

When working positions are adjusted, the staff should be equipped with protective equipment according to the corresponding position standard.

See Annex C for protective equipment.

## 9.2 Judgment and Disposal of Protection Failure

### 9.2.1 Failure Prevention

The guidance and supervision mechanism for the standardized use of protective equipment should be established, and the prevention requirements for abnormal cases such as the damage of protective equipment should be confirmed, so as to prevent occupational exposure such as slippage of mask, rupture of protective clothing, skin or mucous membrane contacting with passengers' sputum and blood.

#### 9.2.2 Judgment and Disposal

Records shall be made correspondingly for the exposure due to abnormal protective equipment, and tracing and psychological counseling should be carried out depending upon the situation.

The judgment and disposal methods after exposure are shown in Annex D.

### 9.3 Daily Management

#### 9.3.1 Physical Quarantine

Mutual prevention management mechanism and risk warning mechanism should be established to quarantine staff. On this basis, path quarantine in key areas such as disposal areas for epidemic-related flights should be strengthened.

#### 9.3.2 Monitoring and Reporting

It is necessary for staff to monitor their temperature twice a day, to establish the system of daily reporting and zero reporting, and establish the self reporting mechanism for epidemiological history.

#### 9.3.3 Requirements of Attendance

Those whose body temperature reaches or exceeds 37.3 ℃ are not allowed to work.

When staff are found with abnormal conditions such as fever, cough, fatigue, etc., the investigation mechanism should be carried out and they can only return to work without such abnormal conditions. Those who need further diagnosis and treatment should be disposed according to relevant regulations.

Staff in high-risk positions can take nucleic acid testing (NAT).

## 10 Environmental Ventilation and Disinfection

### 10.1 Indoor Air

The management of indoor air in the airport should be respectively formulated according to the response level. The use of central air conditioning should comply with relevant national standards and specifications. See Annex E for specific operation.

### 10.2 Cleaning and Disinfecting

The environmental management in the airport mainly focuses on cleaning and preventive disinfection. The cleaning and disinfection system should be formulated and the responsibility should be assigned to each person so that the cleaning and disinfection work can be fully implemented under the circumstance of regular prevention and control. See Annex E for specific operation.

### 10.3 Evaluation on Effects

According to the needs of prevention and control, if necessary, professional institutions need to be invited to evaluate the effect of environmental disinfection in the airport.

# Annex A
（Normative Annex）
Prevention and Control Supplies and Equipment

See Table A.1

Table A.1

| Type | Sub-item | Category |
|---|---|---|
| Temperature Screening Equipment | | Mercury Thermometer |
| | | Temperature Gun |
| | | Infrared Temperature Measuring and Screening Equipment |
| Prevention and Control Supplies and Equipment | | Disposable Medical Mask |
| | | Medical Surgical Mask |
| | | Medical Protective Mask |
| | | KN95/N95 Respirator |
| | | Disposable Working Cap |
| | | Latex/Nitrile Gloves |
| | | Long-sleeved Gloves |
| | | Goggles |
| | | Faceshield |
| | | Disposable Isolation Gown |
| | | Disposable Protective Suit |
| | | Boot/Shoe Covers |
| | | Waterproof Boots |
| | | Positive Pressure Respiratory Protective Equipment [a] |
| Environmental Disinfection Supplies and Equipment | Environmental Disinfection | Chlorine-containing Disinfectant |
| | | Disinfectant Wipe |
| | | Medicinal Alcohol |
| | | Process NPD |
| | | Peroxyacetic Acid [a] |
| | Hand Hygiene Supplies | Alcohol-based Hand Rub |
| | | 0.5% Iodine |
| | | Hand Sanitizer or Soap |
| | Disinfection Equipment | Ordinary Sprayer |
| | | Aerosol Sprayer[a] |
| | | Ultraviolet Radiator |

Table A.1 (Continued)

| Type | Sub-item | Category |
|---|---|---|
| Environmental Disinfection Supplies and Equipment | Waste Disposal Supplies | Medical Waste Bag[b] |
| | | (Treadle-operated) Medical Waste Can |
| | | Hazardous Waste Sign |
| Communication Equipment | | Interphone |
| | | Interpretation/Translation Equipment[a] |
| [a] Operational<br>[b] Various Specifications | | |

# Annex B

(Normative Annex)

Quality Control of Temperature Screening

## B.1 Infrared Temperature Measuring and Screening Equipment

### B.1.1 Training of Use

Training of setting, operating and maintaining the equipment should be carried out by the manufacturer. The staff therefore can master the condition of usage, performance characteristics, error range, testing quality assurance, troubleshooting and other aspects of the equipment, so as to ensure the effect of temperature measuring and screening.

### B.1.2 Equipment Verification

#### B.1.2.1 In use

Temperature measuring equipment with automatic calibration function should be calibrated automatically every time it starts.

The temperature measuring equipment without automatic calibration function shall be compared and registered according to the requirements of the temperature measuring equipment every time it starts, and the comparison shall be conducted regularly during the process of using. In case of interference such as changes in external conditions, the comparison and registration shall be conducted at any time.

#### B.1.2.2 Regular Verification

The temperature measuring equipment should be regularly verified by the legal measurement technical organizations with corresponding qualifications.

### B.1.3 Function Setting

#### B.1.3.1 Sensitivity

B.1.3.1.1 The warning temperature of equipment with warning function should be set according to the fluctuation range of temperature measuring to ensure sufficient sensitivity, and the alarm temperature setting had better be lower. By following the quality control principle of "fully ensure sensitivity without any missing", the credibility and effectiveness of temperature screening can be ensured.

B.1.3.1.2 Ifthere are special requirements from manufacturers on the setting of warning temperature, the manufacturers' requirements shall prevail. Eliminate interference factors when setting. In case of any fault that cannot be eliminated, it is necessary to contact the manufacturer and equipment managers in time for further troubleshooting.

### B.1.3.2 Data Storage

For temperature measuring equipment with automatic recording function, the recording capacity should cover 28 days, or the mechanism of regular data export and storage should be established.

## B.2 Temperature Gun

When using the temperature gun, the appropriate mode setting and temperature calibration should be selected. The error range of temperature gun should be considered in the judgment of results to ensure the accuracy of the measured results.

## B.3 Requirements of Channels

Diversion signs should be set up at the temperature measuring site in order to guide people to pass in sequence.

The on-duty staff with on-site temperature measuring equipment should use standard words or gestures to remind the screened passengers of taking off their hats and remove their facial masks.

The number of parallel screened passengers at a time should be limited according to the upper limit of the temperature measurement equipment; under the single temperature screening system, only one passenger can pass at a time.

According to the maximum temperature measurement distance and angle, special attention should be paid to whether the passing children or passengers with lower or higher height can be tested. If necessary, temperature measurement can be conducted with hand-held temperature gun.

# Annex C
（Normative Annex）
Protection for Staff in Airports

## C.1 Conventional Protection

Staff, especially working in the positions close to passengers or passengers'excreta should use the protective equipment in a proper way, especially in the positions of close contact with passengers and disposal of secretions and excreta of passengers, such as security inspection, medical first aid, check-in, cleaning and other personnel, and the use of protective equipment should be adjusted according to the risk situation. Environmental cleaning and disinfection staff should protect themselves from the corresponding chemical disinfectant.

## C.2 Allocation of Protective Equipment

See table C.1 for personal protective supplies of airport staff.

Table C.1

| Type of Staff | Risk Level of Airports | Disposable Medical Mask or Medical Surgical Mask | KN95/ N95 Respirators | Medical Protective Mask | Goggles /Faceshield | Disposable Protective Suit | Disposable Medical Rubber Gloves | Disposable Shoe Covers | Disposable Hat |
|---|---|---|---|---|---|---|---|---|---|
| Check-in and Accompanied Staff | Low | √ | | | | | √ | | |
| | High | | √ | | √ | | √ | | √ |
| Ground Cleaning Staff | Low | √ | | | √ | | √ | | √ |
| | High | | √ | | √ | √ | √ | √ | √ |
| Security Staff | Low | √ | | | √ | | √ | | √ |
| | High | | √ | | √ | | √ | | √ |
| Airport Medical Staff | Low | √ | | | √ | | √ | | √ |
| | High | | √ | | √ | √ | √ | √ | √ |
| Emergency Staff | | | | √ | √ | √ | √ | √ | √ |
| Staff with Indirect | | √ | | | | | | | |

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| Contact with Passengers | | | | | | | | |
| Note: "√" refers to "equipped" | | | | | | | | |

## C.3 Use of Protective Equipment

### C.3.1 Wearing Masks

C.3.1.1 Masks should be close to the face and completely cover the mouth and nose. And pass the airtight testing after wearing

C.3.1.2 Do not use hands to touch the outside part of mask when putting on and taking off the mask in order to avoid hand contamination;

C.3.1.3 When the mask is contaminatedby secretions and becomes invalid, it should be replaced immediately, and hands should be cleaned and disinfected before and after replacement;

C.3.1.4 The mask should be replaced every 4 hours at work and can be replaced every 8 hours away from work. If the mask is contaminated by secretions, it should be replaced immediately.

C.3.1.5 It is advisable to carry the original packaging bag or disposable food bag with you for storage when the mask is not in use to ensure that it is not deformed.

### C.3.2 Procedure of Putting on and Taking off the Protective Suit

#### C.3.2.1 Put on Protective Suit

The protective suit should be put on in the following order:

a) Clean and disinfect hands;

b) Put on hats;

c) Put on masks;

d) Put on gloves (first layer);

e) Put on protective suit;

f) Put on boots cover;

g) Put on goggles;

h) Clean and disinfect hands;

i) Put on gloves (second layer);

C.3.2.2 Take off Protective Suit

The protective suit should be taken off in the following order:

a) Clean and disinfect hands;

b) Take off goggles;

c) Disinfect hands;

d) Take off protective suit (the second layer of gloves and boot covers);

e) Clean and disinfect hands;

f) Take off masks;

g) Disinfect hands;

h) Take off gloves (the first layer);

i) Disinfect hands;

j) Take off hats;

k) Clean and disinfect hands;

C.3.3 Goggle Disinfection

The reusable goggles should be cleaned, disinfected and dried every time after using.

Goggles with antifogging films shouldn’t be wiped with disinfectant. After washed with clean water, goggles should be disinfected by directly exposed to ultraviolet lamp within 1 m distance for more than 30 min in the empty room.

C.3.4 Disinfection of Working Uniforms

After duty every day, the staff in high-risk positions should be unified to disinfect their working uniform by high-temperature steam for 20 min-40 min, or by boiling for 30 min, or by soaking in 500 mg/L chlorine-containing disinfectant for 30 min and then cleaning.

C.3.5 Disposal of Preventional and Control Waste

The airport should set up a special waste can for discarded masks, which should be classified as “other waste” for disposal.

Disposable protective equipment, or other discarded masks that may be contaminated, used by the staff in high-risk positions should be disposed standardly as medical waste.

## C.4 Hand Hygiene

### C.4.1 Hand Hygiene Time

including:

a) Before and after contacting with passengers;
b) Before putting on protective equipment;
c) Before, after and between each step of taking off protective equipment;
d) Before leaving the relatively contaminated area;
e) Before entering and after leaving the room;
f) Before eating and drinking;
g) Before and after defecation;
h) After contact with the disposal waste;
i) After coughing or sneezing;
j) After exposure to body fluids.

### C.4.2 Ways of Hand Hygiene

including:

a) Hand hygiene includes hand washing and hand disinfection. Hands should be washed with hand sanitizer or soap under flowing water with apparent contaminant; while in other cases, hands can be washed or rubbed with quick drying hand disinfectant;
b) If possible, inductive hand disinfection facilities can be equipped.

### C.4.3 Methods of Hand-Washing

The six-step hand-washing method from the following a) to f) should be carried out; and the seven-step hand-washing method from a) to g) can be carried out if permitted:

a) Rub hands palm to palm together;
b) Interlace fingers and clean the back of each hand with the palm of your opposite hand in a rotating manner;
c) Interlace fingers and rub hands together;
d) Interlock fingers and rub the backs of fingers of both hands;
e) Rub thumb in a rotating manner followed by the area between index finger and thumb for both hands;
f) Rub fingertips on palm for both hand
g) Rub both wrists in a rotating manner.

### C.4.4 Mucosal Protection

Avoid touching your mouth, nose and eyes with hands when you are not sure whether your hands are clean or not.

# Annex D
（Normative Annex）
Judgment and Disposal of Protection Failure

Note：Quote from “Consensus on Personal Protection in Different Areas and Different Working Positions of the Medical Institutions during the COVID-19Outbreak”

## D.1 Judgment of Protection Failure

### D.1.1 High-risk exposure refers to:

a) exposed skin, directly contaminated by visible body fluids, blood, secretions, or excrement;

b) exposed mucosal (such as eyes, respiratory tract), directly contaminated by visible body fluids, blood, secretions, or excrement;

c) sharp injury, punctured by sharps contaminated by body fluids, blood, secretions or excrement of the confirmed patients;

d) direct exposure of the respiratory tract: exposed mouth or nose sue to the falloff of the mask within 1 m of a confirmed patient who is not wearing a mask, exposing the mouth or nose. Direct exposure of the respiratory tract should be managed as close contacts.

### D.1.2 Low-risk exposure refers to：

a) exposed skin because of damaged gloves but not directly contacted with visible contamination;

b) skin or hair contacted with outer protective equipment without any visible contamination;

c) damaged protective clothing without any visible contamination directly touching the skin;

d) masks falling off 1m away from the confirmed patients or in front of patients wearing masks.

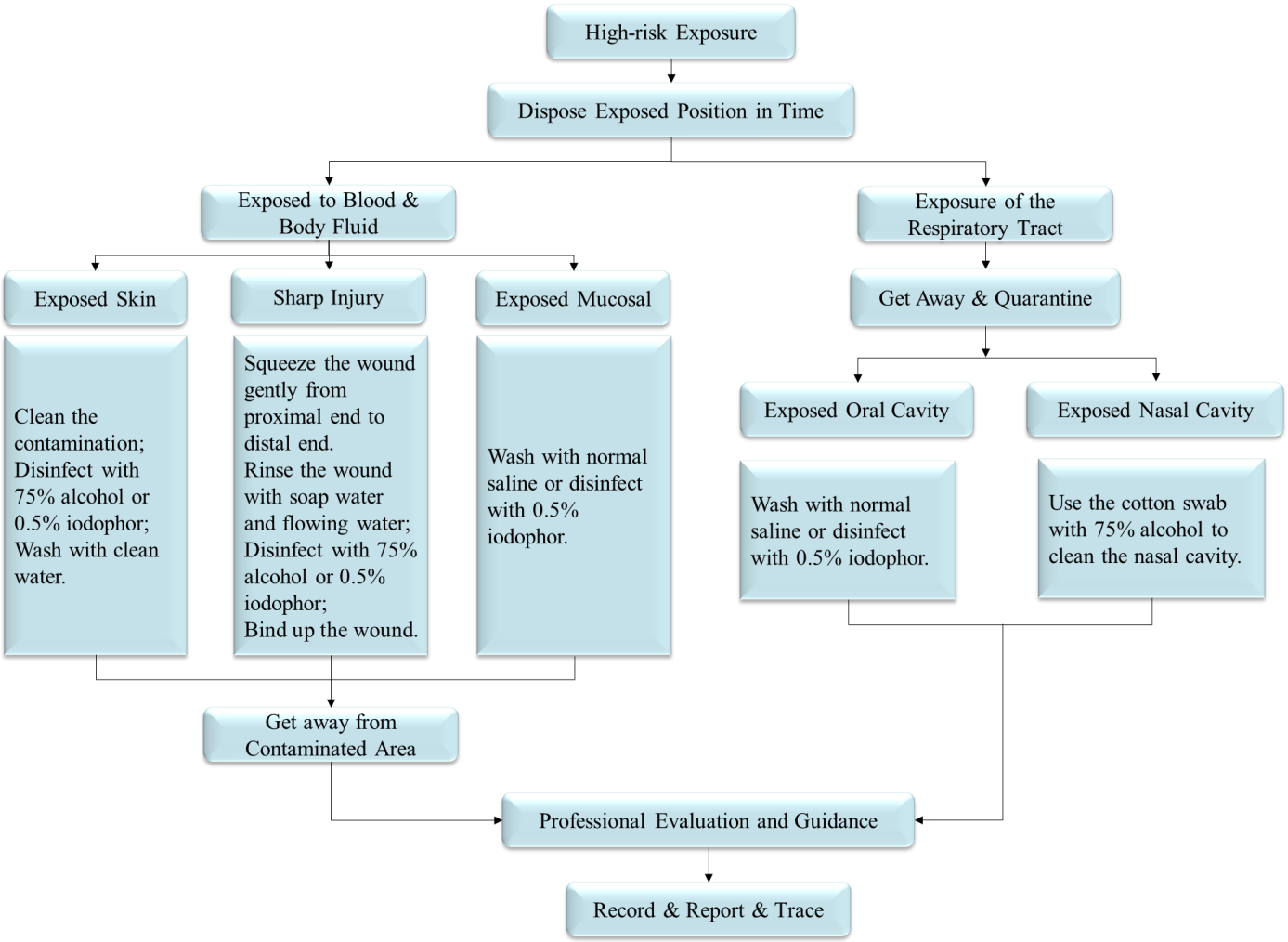
## D.2 Disposal of Protection Failure

### D.2.1 Low-risk Exposure Handling Process

In case of low-risk exposure, it can be handled according to the abnormal handling process of personal protective equipment depending on the circumstances. There is no need to self-isolate while self-monitoring symptoms remain necessary, and symptoms should be reported at any time.

### D.2.2 High-risk Exposure Handling Process

See Figure D.1 for high risk exposure disposal process.




图D.1

# Annex E

（Normative Annex）

Environmental Cleaning and Disinfection in the Airports

Note：Appendix E includes the basic requirements of preventive disinfection for airport indoor air and environmental cleaning and disinfection according to regular epidemic prevention and control.According to the level of emergency response, the requirements of fresh air volume and disinfection frequency need to be improved timely.

## E.1 Indoor Air

Management of air conditioning system and natural ventilation in public places such as terminals should be strengthened. Feasible measures should be taken to strengthen air circulation based on the terminal structure, layout and local climate.

### E.1.1 Ventilation

#### E.1.1.1 Natural Ventilation

Natural ventilation is always the first choice with appropriate conditions and temperature.

#### E.1.1.2 Ventilation by Exhaust Fan

For the office areas, elevator cars, toilets and other relatively closed spaces that cannot be naturally ventilated, exhaust fans should be opened.The exhaust fans should be cleaned and disinfected once a month and should be sprayed or wiped for more than 30 minutes by using 250 mg/ -500 mg/L chlorine-containing disinfectant.

### E.1.2 Air Conditioning Operational Requirements

#### E.1.2.1 Fresh Air

##### E.1.2.1.1 All-air conditioning System

When the air conditioning and ventilation system is all air conditioning system, all fresh air can be operated depending on the circumstances, and the exhaust system can be opened to keep the air clean.

When the indoor temperature can not meet the requirements, the air volume can be reduced.

Facing a large amount of passengers, the fresh air and exhaust system of the air conditioning system should continue to be operated for a period of time after flights every day.

#### E.1.2.1.2 Fan Coil with Fresh Air System

The fresh air should be directly taken from the outside, not the machine room, corridor or ceiling.

The fresh air system should be operated all day to ensure the normal operation of the exhaust system.

For rooms with large depth, measures should be taken to ensure the ventilation within the internal area; if the fresh air volume is insufficient (less than 30 $m^3$/h), the personnel density should be reduced.

#### E.1.2.1.3 Split Air Conditioner（operating in summer）

Clean and check the machine before use.

Every day before using the split air conditioner, open the doors and windows should be for 20-30 minutes for ventilation before turning on the air conditioner. It is suggested that the doors and windows can be closed only when the air conditioner is operated for more than 5-10 minutes with maximum air volume; after turning off the split air conditioner, open the doors and windows for ventilation.

If the split air conditioner is operated for a long time in densely populated areas, ventilation should be conducted for about 20-30 minutes every 2-3 hours.

It is suggested that the indoor temperature should not be lower than 26 ℃. If it the requirements of indoor temperature regulation can be met, it is recommended that the doors and windows should not be completely closed when the air conditioner is running.

#### E.1.2.1.4 Fan Coil without Fresh Air System or VRV System

Refer to split air conditioner for relevant operation and management requirements.

#### E.1.2.1.5 Fresh Air Outlet

The fresh air inlet and its surrounding environment should be clean so that the fresh air won’t be polluted.

A safety protection zone should be set up 10m away from the fresh air outlet of central air conditioning, and irrelevant personnel should be away from the zone.

A certain distance should be set between outdoor fresh air outlet and exhaust outlet to avoid short circuit.

The fresh air outlet should be prevented from the contamination of cooling tower and heat pump exhaust.

#### E.1.2.1.6 Water Seal

Sewer, water seal of air handling units, floor drain of toilet and the U-shaped pipes of condensate drain pipe of air conditioning unit should be checked regularly. Replenish water in time when lacking in order to avoid air mixing between different floors.

#### E.1.2.1.7 Security Check Area

It is necessary to strengthen the air conditioning system and natural wind management in the security check areas, keep the air clean and provide relevant equipment for the civil aviation security check channel to strengthen the ventilation.

### E.1.2.2 Out of Service of Air-conditioning

If the COVID-19 suspected cases or confirmed cases were found, the centralized air-conditioning ventilation system insuch areas should be immediately shut down. Moreover, under the guidance of the local disease control department,the central air-conditioning ventilation system in such ares should be immediately disinfected and cleaned, and should bot be reused without the quialified results of hygienic detection and evaluation.The cleaning of central air conditioning ventilation system shall meet the requirements of WS / T 396.

E.1.2.3 Cleaning and Disinfection of Air-conditioning

E.1.2.3.1 The air conditioning and ventilation system should be cleaned and disinfected according to the requirements of WS/T 396. It should be sprayed, soaked or wiped with 250 mg/L-500 mg / L chlorine (bromine)-containing or chlorine dioxide disinfectant for 10-30 minutes.For the metal parts that need to be disinfected, quaternary ammonium salt disinfectant is preferred.

E.1.2.3.2 Before operating the system, the air filter should be cleaned or replaced; the heating (surface cooling) coil of the air-conditioning should be cleaned and sterilized.

E.1.2.3.3 During the process of system operation, the air filter should be cleaned, disinfected and sterilized frequently. The air inlets and outlets in air-conditioned rooms should be wiped regularly; indoor air conditioners (including fan coil units) should be cleaned and disinfected regularly; condensate water trays of air conditioners should always be clean. And if possible, the system should be equipped with low resistance, medium efficiency and above level filtering device, and the differential pressure should be monitored.

E.1.2.3.4 The filter should be cleaned first and then disinfected. Quaternary ammonium salt disinfectant or 500 mg/L chlorine-containing disinfectant can be used for spraying or wiping.

E.1.2.3.5 The tuyere and air handling unit shall be cleaned first and then disinfected. Chemical disinfectant can be used for wiping and disinfection. Metal parts are preferred be disinfected with quaternary ammonium salt disinfectant by following the concentration for surface disinfection specified in the instruction manual. Non-metal parts is preferred to be disinfected with500 mg / L chlorine containing disinfectant.

E.1.2.3.6 The surface cooler and heater (humidifier) should be cleaned first and then disinfected. Quaternary ammonium salt disinfectants can be used for spraying or wiping according to the concentration for surface disinfection specified in the instruction manual.

E.1.2.3.7 The condensate pan should be cleaned first and then disinfected. Quaternary ammonium salt disinfectants can be used for spraying or wiping according to the concentration for surface disinfection specified in the instruction manual.

E.1.2.3.8 The air duct should be cleaned first and then disinfected. Chemical disinfectant can be used for wiping and disinfection. Metal parts are preferred be disinfected with quaternary ammonium salt disinfectant by following the concentration for surface disinfection specified in the instruction manual. Non-metal parts is preferred to be disinfected with500 mg / L chlorine containing disinfectant.

E.1.2.3.9 The sanitary quality of air supply should be tested if permitted, and the test results should meet the relevant requirements of WS 394.

## E.2 Environmental Cleaning and Disinfection

### E.2.1 Object Surface

E.2.1.1 Keep the environment clean and tidy, mainly clean and pay attention to keep dry; when there are visible contaminants on the surface of objects, the contaminants should be completely removed before cleaning.

E.2.1.2 Cleaning and disinfection should be strengthened for the surface of objects in crowd gathering area or frequently contacted (such as self-service/manual check-in counters, certificate check counters, self-service equipment, luggage tray, automatic door, elevator button, handrail, etc.). Chlorine containing disinfectant with effective chlorine of 250 mg/l-500 mg/l can be used for spraying or wiping, and should be cleaned with clean water after 30 minutes.

E.2.1.3 Every day after daily operation, the security check areas, garbage cans and other areas and facilities should be wet cleaned and comprehensively disinfected to keep them clean and tidy. Key areas (such as verification counters, luggage sorting areas, luggage baskets, hand-held metal detectors) and civil aviation security check facilities and equipment should also be disinfected. Moreover, alcohol-based hand rub should be providedin security inspection channel.

E.2.1.4 The sanitary appliance can be sprayed or wiped with chlorine-containing disinfectant with effective chlorine of 500 mg/L and cleaned with clean water. Chlorine-containing disinfectants should not be mixed with other preparations (such as toilet cleaning chemicals)

E.2.1.5 Cleaning and disinfection appliances should be used in different areas, and attention should be paid to cleaning and drying. Each pair of appliances should only be used in one area and should be disinfected separately without any cross use.

E.2.1.6 Effective and less irritating disinfectants, such as quaternary ammonium salt disinfectants, should be used for disinfection of mother and infant rooms.

E.2.2 Tableware

E.2.2.1 The airport food and beverage departments should follow the food safety requirements of the food industry.

E.2.2.2 The reusable meal tableware should be disinfected once used by one person.

E.2.2.3 After removing food residues from the tableware, sterilize it by boiling or circulating steam for 15-30 minutes; or by thermal disinfection cabinets or other disinfection methods; or by immersing in 250 mg/L chlorine-containing disinfectant for 30 minutes and then washing the remaining disinfectant with water. Keep it dry and store it in a clean and sealed container.

E.2.2.4 The disinfection and monitoring management of frequently used public facilities such as airport drinking fountains should be strengthened.

E.2.3 Vomit

E.2.3.1.1 When there is someone vomiting, the vomit should be immediately covered and disinfected with disposable absorbent material and sufficient disinfectant (such as 5,000 mg/L-10 000 mg/L chlorine-containing disinfectant) or high-level disinfectant wipes; when the amount of vomiting or diarrhea is large, it is advisable to use 2 times the amount of bleaching powder to cover it completely, stir it and then remove it after 2 hours.

E.2.3.2 After removing the vomit, use an effective quaternary ammonium salt disinfectant or chlorine-containing disinfectant to disinfect the object surface.

E.2.4 Transportation

E.2.4.1 Air-conditioning System

E.2.4.1.1 If possible, drive at a low speed with windows open and keep natural ventilation.

E.2.4.1.2 If air conditioning system is used, air supply safety and sufficient fresh air input should be ensured.

E.2.4.1.3 Comply with the full load rate of the vehicles required by the local government and it is possible to increase the number of shifts to avoid crowds, and to sit in separate seats if permitted.

E.2.4.2 Object Surface

E.2.4.2.1 Preventive disinfection should be carried out after the daily shutdown. The surface of objects frequently contacted with passengers such as rings, armrests, seats should be wet cleaned by wipe disinfection, and wiped or sprayed with the 250 mg/L～500 mg/L chlorine-containing disinfectant for 15-30 minutes. Then wipe the residual disinfectant with clean water and a clean cloth. The tires do not need to be disinfected.

E.2.4.2.2 When there is someone vomiting, the vomit should be immediately covered and disinfected with disposable absorbent material and sufficient disinfectant (such as 5,000 mg/L-10 000 mg/L chlorine-containing disinfectant) or high-level disinfectant wipes; when the amount of vomiting or diarrhea is large, it is advisable to use 2 times the amount of bleaching powder to cover it completely, stir it and then remove it after 2 hours.

E.2.4.2.3 If a suspected or confirmed patient was found in certain vehicles, terminal disinfection should be performed by professionals.

E.2.4.3 Linen

E.2.4.3.1 Seat covers and handrail covers should be clean and should be cleaned regularly.

E.2.4.3.2 Uperization should be carried out regularly. For non-decoloring and corrosion-resistant linen materials, 500 mg/L chlorine-containing disinfectant can be used for soaking before cleaning.

E.2.4.3.3 Disinfectants for clothes should not be mixed with other preparations (such as washing liquid) when disinfecting clothes.

E.2.5 Terminal Disinfection

If suspected or confirmed patients were found at the airport, they should be terminally disinfected by professionals. The terminal disinfection should be carried out in accordance with Appendix A of GB 19193-2015. On-site disinfection personnel should take personal protection when preparing and using chemical disinfectants.

## E.3 Hand Hygiene

### E.3.1 Hand Disinfection

Alcohol-based hand rub should be equipped in passenger stay areas such as terminal entrance temperature measuring areas, arrival areas, check-in counter, boarding gate, security check area, toilet, information desk, transfer counter, bus ticket office, storefront, etc. Induction hand disinfection facilities can be equipped if permitted.

### E.3.2 Hands Washing

The hand washing device should be non-contact hand washing facilities, the normal operation of the facilities should be ensured and supplies such as hand sanitizer and dry toilet paper should be all in readiness.

## E.4 Waste Disposal

### E.4.1 Non-medical Disposal

E.4.1.1 The classification management of garbage and the recycling of used masks should be strengthened, they should be timely collected and removed.

E.4.1.2 The cleaning of garbage cans and other garbage containers should be strengthened, and they should be disinfected regularly. They can be wiped or sprayed with the 500 mg/L chlorine-containing disinfectant or disinfectant wipes.

### E.4.2 Medical Waste Disposal

E.4.2.1 Supplies that are or may be contaminated by staff in high-risk positions at the airport during the period of prevention and control, including protective equipment such as used masks

(including medical surgical masks, N95 masks and other ordinary masks), gloves, protective clothing, hats, shoe covers or other contaminated items should be disposed in accordance with the requirements for medical waste disposal in the "Regulations on the Administration of Medical Wastes."

E.4.2.2 The disposal of medical waste should be in accordance with the requirements of the "Regulations on the Administration of Medical Wastes" and the " Measures for Medical Wastes Management of Medical and Health Institutions", standardize the use of double-layer yellow medical waste collection bags after packaging, and follow the conventional disposal process for disposal.

E.4.3 Disposal of Waste in Epidemic-related Flights

E.4.3.1 Collecting Waste in Epidemic-related Flights

E.4.3.1.1 Tightly packaged, the waste from epidemic-related flights should be transported to the transshipment site by using special transport vehicles assigned by the airline or its designated professional unit.

E.4.3.1.2 International aviation waste disposal should be carried out in accordance with the requirements of the airport customs inspection and quarantine department. The international flight waste from epidemic-related flights c should be sanitized under the supervision of the customs inspection and quarantine department before exiting the cabin. According to the requirements of "Regulations on the Administration of Medical Wastes" and the " Measures for Medical Wastes Management of Medical and Health Institutions", it is standardized to use double-layer yellow medical waste collection bags to be encapsulated, and then to be disposed of in accordance with the conventional disposal process and handed over to professional units for acceptance.

E.4.3.1.3 The waste from epidemic-related flights should be collected by a professional organization with relevant qualifications one by one.

E.4.3.1.4 Sealed, intact, clean and environmentally-friendly vehicles should be used for collection.

E.4.3.1.5 During the waste collection process of the epidemic-related flights, it should not be sorted. The waste should be sealed in special bags in special vehicles, disposed in accordance with standardized procedures, and sealed with special labels to avoid scattering of waste or mixing with other waste.

E.4.3.1.6 The airport waste collection and transportation unit should establish a registration system for waste removal or temporary storage.

E.4.3.2 Transportation and Disinfection of Waste in Epidemic-related Flights

E.4.3.2.1 The waste should be disposed in accordance to the method of “specializedperson for supervision, specialized bag for collection, specialized vehicle for transportation, cleaning up in time”, and should be cleaned and transported by airport garbage collection and transportation unit with relevant qualifications.

E.4.3.2.2 Special transport vehicles should be used, or vehicles that have been temporarily modified with reference to the requirements of medical waste transport vehicles.

E.4.3.2.3 The transfer rover requirements should be confirmed. The transportation route should be away from densely populated areas as much as possible, and the time of transportation should avoid the rush hour.

E.4.3.2.4 Transport vehicles should be in good condition to avoid secondary pollution during loading and transportation.

E.4.3.2.5 After the transportation operation is completed, the transportation vehicles should be cleaned and disinfected in time, and the vehicles should be sprayed and disinfected with 1,000 mg/L chlorine-containing disinfectant.

E.4.3.2.6 The transport vehicleshould transport the waste to the specific waste temporary storage place every day, and carry out the handover and double-signing procedures with the temporary storage staff. The waste should be sealed and transported bytimely disinfected vehicles provided by service provider with qualifications for waste removal and transportationin accordance with the specifications.