

Body: Ministry of Health/National Health Surveillance Agency/Collegiate Board

COLLEGIATE BOARD RESOLUTION - RDC N° 584 OF 8 DECEMBER 2021 (AS AMENDED BY RDC N° 605 OF 11 FEBRUARY 2022)

It provides sanitary measures for the operation and the embarkation and disembarkation from cargo vessels and platforms in Brazilian jurisdictional waters due to the Public Health Emergency of International Concern - PHEIC resulting from the SARS-CoV-2 pandemic.

The Collegiate Board of the National Health Surveillance Agency uses the attributions conferred on it by Art. 15, III and IV, together with Art. 7, III and IV, of Law No. 9,782 of 26 January 1999, and Art. 53, VI, § 1 and § 3, of the Internal Rules, approved by the Collegiate Board Resolution - RDC No. 255 of 10 December 2018, and in view of Article 5, § 4, of Interministerial Ordinance CC-PR/MS/MJSP/MINFRA No. 660, of 27 November 2021, it decides to adopt the following Collegiate Board Resolution, as deliberated at extraordinary meeting no. 19 held on 8 December 2021, and I, Chief Executive Officer, determine its publication:

CHAPTER I

INITIAL PROVISIONS

Section I

The objectives

Art. 1. This Resolution establishes sanitary measures for the operation and the embarkation and disembarkation from platforms located in Brazilian jurisdictional waters, including those with crewmembers from another country, due to the Public Health Emergency of International Concern - PHEIC resulting from the SARS-CoV-2 pandemic.

Section II

The scope

Art. 2. This Resolution applies to port health controls ports in national territory, crewmembers, intervening authorities, pilots, shipping and protecting agents, suppliers, port operators, all service providers, platforms, cargo and maritime support ships, and other means of long-haul and cabotage waterborne transport of sanitary interest.

§ 1. This Regulation does not apply to embarkation, disembarkation, and transport of travellers on sea cruise vessels, riverboats, ferry boats, barges, rafts, and catamarans.



§ 2. This Regulation does not apply to sport and leisure boats, sailboats, and yachts.

Section III

The definitions

Art. 3. For the purpose of this Resolution, it should be considered:

I - charterer: the one who has the ship or part of it available for chartering in exchange for a remuneration;

II - shipowner: natural or legal person who, on his behalf and under his responsibility, charters out the ship for commercial purposes and may or may not prepare it to navigate;

III - health authority: competent authority in the health area, which is entrusted, in its area of operation, with the prerogative for enforcing appropriate sanitary measures following the laws and regulations in force in the national territory, treaties and other international acts to which Brazil is a signatory;

IV - Certificate of Free Pratique: permission issued by the competent federal health surveillance body for a vessel to operate cargo and stores and embark and disembark travellers;

V - close contact: the entire crew of a vessel or platform on which it is identified a suspect or confirmed case of COVID-19 on a crewmember signed in or off in the last five days; or, when it is a port facility worker, the one framed as "close contact" by the *Epidemiological Surveillance Guide - Public Health Emergency of National Concern by Coronavirus Disease*, published by the Ministry of Health, available on https://www.gov.br/saude/pt-br/coronavirus/publicacoes-tecnicas/guias-e-planos, or another that may replace it;

VI - physical distancing: minimum space necessary between individuals to ensure that, in the occurrence of a suspect or confirmed case in one of them, the other individual can be discarded, provided that the other relevant criteria are met, such as "close contact" defined in the *Epidemiological Surveillance Guide - Public Health Emergency of National Concern for Coronavirus Disease*, published by the Ministry of Health, available on https://www.gov.br/saude/pt-br/coronavirus/publicacoestecnicas/guias-e-planos, or any other that may replace it;

VII – Documento Único Virtual – DUV [Virtual Single Document]: document in which the person responsible for the vessel, the shipowner or the shipping agency provides the mandatory information for mooring and unmooring of vessels on the Brazilian coast;

VIII - Personal Protective Equipment - PPE: device or product for individual use designed to protect the health and physical integrity of the worker, per the peculiarities of each professional or functional activity;

IX - health event: a manifestation of a disease or occurrences that may endanger public health;



X - cleaning and disinfection: action to eliminate bacteria, fungi, viruses and some bacterial spores, and any other disinfectant agents available on the market, diluted solutions of household bleaches, 70° ABV alcohol solutions or, provided used as recommended by manufacturers, any other sanitising agent registered by ANVISA;

XI - long-haul navigation: carried out in unsheltered maritime waters;

XII - cabotage navigation: a between ports or terminals of Brazilian territory using the sea route or this and the inland waterways;

XIII - notification of diseases or injuries: communication to the local health authority about the occurrence of fact, proven or presumed, of a case of infectious disease, being mandatory for physicians and other health professionals in the practice of the profession;

XIV - port of sanitary control: organised ports, waterway terminals and terminals for private use, strategically defined from the epidemiological and geographical point of view, located in the national territory, where the development of health control actions is justified;

XV – *Profissionais Não Tripulantes* (PNT) [Non-Crew Professionals]: all those who, without exercising duties linked to the operation of the vessel, provide occasional services on board, such as professionals in the areas of food, hospitality, sports, leisure and entertainment;

XVI - legal representative: natural or legal person invested in legal powers to perform acts on behalf of the owner, shipowner or direct responsible, preposition to manage or oversee his business in the country, constituting his agent, servant, mandated or consignee agent;

XVII - direct responsible: natural or legal person, on behalf of which the vessel is registered or registered before the maritime authority;

XVIII - risk to public health: the probability of occurrence of an event that may adversely affect the health of the population, with emphasis on international dissemination, or that may represent a serious and direct danger;

XIX - legal representative of the vessel: natural or legal person invested in legal powers to perform acts on behalf of the owner, shipowner or direct responsible, preposition to manage or oversee his business in the country, constituting his agent, servant, mandated or consignee agent;

XX - waterway terminal: docking point of vessels, such as fishing terminals, marinas and others, not framed in the port concepts of Law No. 12,815 of 5 June 2013, located in the national territory and subject to sanitary control;

XXI - complete vaccination: is the administration of all doses necessary for the full primary vaccination schedule of COVID-19 vaccine approved by ANVISA or the World Health Organization, plus the time for the immune system to constitute a minimally protective response, which, in general, is 14 days or, if there is another specification, the period defined in the text of the vaccine package leaflet;



XXII - traveller: every passenger, crew member and non-crew member, travelling in a means of conveyance.

CHAPTER II

GENERAL REQUIREMENTS FOR EMBARKATION AND DISEMBARKATION FROM PLATFORMS AND VESSELS

Section I

On the boarding of crew members, intervening authorities, pilots, shipping and protective agents, suppliers, port operators and other service providers

Art. 4. The party legally responsible for the platform or vessel must ensure that access by crew members, pilots, shipping and protective agents, suppliers, port operators, and other service providers and professionals of any nature is subject to compliance with the following requirements:

I - presentation of proof of complete vaccination against COVID-19;

II - presentation of a document proving laboratory test for amplification of nucleic acids of type RT-PCR or RT-LAMP, for screening of Infection by SARS-CoV-2, with a negative or non-detectable result, performed in the 72 hours prior to the time of boarding, or non-reagent result by rapid antigen test performed in the 24 hours before boarding; and

II - presentation of a document proving laboratory test for amplification of nucleic acids of type RT-PCR or RT-LAMP, for screening of Infection by SARS-CoV-2, with a negative or non-detectable result, performed in the 48 hours prior to the time of boarding, or non-reagent result by rapid antigen test performed in the 24 hours before boarding; and [*Reworded by RDC 605/2022*]

III - pre-boarding screening to identify possible symptoms of COVID-19.

§ 1. Individuals not eligible by the National Immunisation Program for vaccination against COVID-19 are exempt from the presentation of the voucher provided that they undergo quarantine for 14 days before boarding.

§ 2. Professionals from the public agencies involved whose performance cannot be rescheduled and professionals engaged in interventions necessary for the safety of navigation are exempt from complying with items I and II of this article provided that they wear face masks and maintain physical distancing.

§ 3. Professionals involved in urgent and emergency health care are exempt from complying with items I and II of this article.

§ 4. The test provided for in item II of the caput must be provided by the person responsible for the vessel or platform.

§ 5. Non-crew professionals and third parties, when providing exclusive port support services, are exempt from complying with item II of the *caput*, provided they wear particulate respirators, type N95 or type PFF2, maintain physical distance from crew members embarked and are submitted to the monitoring program provided for in Item XIII of Art. 34 of this Resolution. [Added by RDC 605/2022]



§ 6. Vessels in exclusively cabotage navigation with the entire crew embarked in national territory are exempt from complying with item II of the *caput*. [Added by RDC 605/2022]

§ 7. Individuals who have had COVID-19 in the last ninety days, counted from the date of onset of symptoms or sample collection for diagnosis, after meeting the recommended isolation period after infection, are exempt from complying with item II of the caput, as long as they are fully vaccinated, with remission of symptoms, and upon presentation of a medical certificate declaring fitness for duty. [Added by RDC 605/2022]

Art. 5. The access of non-crew and third-party professionals onboard vessels and platforms must be restricted to the execution of activities strictly necessary for the operation of cargo loading and unloading.

Single paragraph. Measures should be taken to minimise contact between non-crew and third-party professionals with crew members and vessels' surfaces.

Section II

The landing of travellers

Art. 6. The landing of travellers, Brazilian or foreigner, must meet the same requirements for the entry of international air travellers in the country, as established by the Interministerial Ordinance CC-PR/MS/MJSP/MINFRA No. 660 of 27 November 2021, or another that may replace it.

Art. 6. The landing of international travellers, Brazilian or foreigner, is conditioned to the presentation of a document proving the performance of a nucleic acid amplification laboratory test of the RT-PCR or RT-LAMP type, for SARS-CoV-2 screening, with a negative or undetectable result, performed within 72 hours prior to disembarkation, or a non-reactive result of a rapid antigen test, performed within 24 hours prior to disembarkation. [*Reworded by RDC 605/2022*]

§ 1. Crew members are exempt from completing the *Declaração de Saúde do Viajante* (DSV) Traveller's Health Declaration provided for in the Ordinance that deals with the caput. [*Revoked by RDC 605/2022*]

§ 2. Crew members authorised to disembark for urgent and emergency medical care or compliance with quarantine or shore isolation are exempt from presenting negative test results for COVID-19.

§ 3. The landing permit of foreign crew members provided for in the caput is subject, in addition, to the presentation of:

I - term of responsibility for the expenses arising from the transfer signed by the maritime agent;

II - corresponding air tickets;

III - completion of the *Termo de Controle Sanitário do Viajante* – TCSV [Traveller's Health Control Term], according to Annex IV of the Collegiate Board Resolution RDC No. 21 of 28 March 2008, or another that may replace it.



§ 4. The documentation provided for in Paragraphs 1 and 2 must be submitted to the local unit of the National Health Surveillance Agency - ANVISA with jurisdiction over the port where the landing will take place, which will be responsible for the necessary referrals for the authorisation or not of the landing, without prejudice to the performance of other intervening public agencies.

§ 4. The documentation provided for in the *caput* and in § 3 of this article must be presented to the local unit of the National Health Surveillance Agency -ANVISA responsible for the port where the disembarkation will take place, which will be responsible for the necessary referrals for the authorisation or not of the disembarkation, without prejudice to the performance of other intervening public bodies. [*Reworded by RDC 605/2022*]

§5 In compliance with §3, at the discretion of the health authority, updates of the maritime health declaration and records of the ship's medical book may be required, in addition.

CHAPTER III

NON-PHARMACOLOGICAL MITIGATION MEASURES

Art. 7. Legal guardians of port facilities, port terminals, vessels, platforms, and other public transport vehicles that circulate within the port area must ensure:

I - the use of a face mask by all those involved in the operation, except outdoors by crew members on vessels and platforms and provided that the other non-pharmacological mitigation measures are guaranteed;

II - ensure the availability of 70° ABV alcohol dispensers for hand hygiene, especially in spaces with a large flow of people, such as boarding and disembarking areas, restaurants, elevators, stairs, corridors, cabins, changing rooms, leisure areas and toilets;

III - the adoption of measures to ensure physical distancing whenever possible.

Art. 8. Masks should be worn adjusted to the face, covering the nose, chin and mouth, minimising spaces that allow air and respiratory droplets to enter or outflow.

Single paragraph. It is forbidden the use of:

I - acrylic or plastic masks;

II - masks with expiration valves, including N95 and PFF2;

III - scarves, cloth bandanas or any other material that is not characterised as a protective mask for professional use or non-professional use;

IV - face shield alone;

V - non-professional use protective masks made with only one layer or that do not meet the minimum requirements of ABNT PR 1002 - basic requirements guide for testing, manufacturing and use methods.



Art. 9. Regular reports should be published reinforcing the need for the correct adoption of non-pharmacological measures to combat COVID-19.

Single paragraph. Parties legally responsible for port facilities, port terminals, vessels, platforms, and other public transport vehicles must ensure that the communications of the *caput* reach all those involved in their operations.

Art. 10. The air conditioning systems of port facilities, public transport, vessels, and platforms must operate with maximum air renewal capacity. In places with air conditioning systems without air renewal, keep doors and windows open whenever possible.

Art. 11. Parties legally responsible for port facilities, port terminals, vessels, platforms, and other public transport vehicles, must ensure that Cleaning and Disinfection Plans (CDP) are prepared in such a way as to ensure that the procedures adopted are safe and effective to mitigate the risk of transmission of COVID-19 through contact with contaminated surfaces and objects.

§ 1. A specific cleaning and disinfection plan for COVID-19 case situations identified on board should be established and simulated by a team trained periodically.

§ 2. Cleaning workers must wear disposable gloves and aprons for all tasks in the cleaning process, including handling clothes and garbage.

§ 3. Particular attention should be paid to the cleaning and disinfection of cabins, bathrooms and common areas used or visited by a suspect or confirmed cases of COVID-19, with a focus on frequently touched surfaces.

§ 4. A minimum of 24 hours before the start of cleaning and disinfection of cabins unoccupied by confirmed cases of COVID-19 must be observed.

§ 5. Cleaning and disinfection of tableware, non-disposable, must be described in a specific protocol and performed by trained personnel under constant supervision.

§ 6. Formal records must be generated for the cleaning and disinfection performed and signed by the respective responsible for their execution.

Art. 12. The vessel, port facilities and platforms must have a Solid Waste Management Plan (SWM) and record the execution of related procedures.

Single paragraph. The solid waste generated, when there are suspect or confirmed cases of COVID-19, should be treated as infectious, and should be incinerated onboard, or collected by a specialised company, holder of the *Autorização de Funcionamento de Empresas* (AFE) [Operating Authorisation of Companies], for proper treatment and final disposal of waste.

Single paragraph. When there are suspect or confirmed cases of COVID-19 on board, solid waste classified as infectious that is part of item I, art. 7 of Resolution of the Collegiate Board RDC - No. 56, of 6 August 2008, or whichever replaces it, must be submitted to shipboard management, in accordance with the Solid Waste Management Plan, and must be technically treated onboard by a methodology that guarantees the microbiological inactivation, or collected, packaged and transported by a specialised



company, holder of a Business Operation Permit (AFE), for proper treatment and final disposal of waste. [Reworded by RDC 605/2022]

Art. 13. All those involved in the operation of ports, vessels and platforms should receive periodic training on non-pharmacological measures to cope with COVID-19 and its signs and symptoms.

Single paragraph. Training records should contain at least the date of performance, name of participants and the results of learning assessments.

CHAPTER IV

RESPONSE TO PUBLIC HEALTH EVENTS ON PLATFORMS AND ON VESSELS

Section I

Contingency plans and procedures

Art. 14. The owners, operators, and charterers of vessels and those responsible for the platforms must keep up-to-date a Contingency Plan to deal with COVID-19, which should provide for procedures for:

I - boarding, disembarking and changing crew;

II - access control of non-crew professionals and third-parties;

III - communication with the local ANVISA unit responsible for the port;

IV - compulsory notification of suspect and confirmed cases of COVID-19 onboard and other health events;

V - isolation and quarantine on board;

VI - cleaning and disinfection.

Art. 15. The owners, operators, and charterers of vessels and those responsible for the platforms must ensure stock and availability of PPE for the use of all workers.

Single paragraph. PPE used by crew members and other individuals on board must be appropriate to their activities.

Art. 16. Those responsible for vessels and platforms must keep all records of health monitoring carried out on board containing at least the results of:

I - pre-shipment screening procedures;

II - clinical and laboratory evaluation of quarantined and isolated travellers, if applicable;

III - contact tracking;

IV - tests carried out on board; and

V - health, clinical and laboratory evaluations.

§ 1- There must be a formal designation of those responsible for the measures provided for in the *caput* paragraphs.



§ 2. Records of the training of all involved in the activities provided for in the caput's paragraphs must be generated and kept.

§ 3. A crew communication protocol must be implemented with those responsible for the vessel or platform to immediately report the identification of signs and symptoms or suspect cases of COVID-19.

Section II

Notification of suspect and confirmed diseases or cases of COVID-19

Art. 17. The master or person responsible for the vessel or platform must immediately notify the ANVISA unit responsible for the port of the occurrence of cases of COVID-19, flu-like syndrome, severe acute respiratory syndrome, acute diarrheal disease and other compulsory notification diseases defined by the Ministry of Health.

§ 1. Vessels must start reporting health events at least 24 hours in advance and a maximum of 36 hours of the estimated arrival at the first Brazilian port, using the fastest means available.

§ 2. The vessel and platform must update, or supplement notifications already made, in the following situations:

I - in the occurrence of atypical behaviour of events on board;

II - increase in the number of cases or severity of an event; and

III - when there is a need for disembarkation for health care or death on board.

Section III

Management of COVID-19 suspect, confirmed cases and close contacts

Art. 18. The confirmed or suspect case of COVID-19 must be kept in isolation and comply with the provisions of the *Guia de Vigilância Epidemiológica* - *Emergência de Saúde Pública de Importância Nacional pela Doença pelo Coronavírus* [Epidemiological Surveillance Guide - Public Health Emergency of National Concern for Coronavirus Disease], published by the Ministry of Health, available in https://www.gov.br/saude/pt-br/coronavirus/publicacoes-tecnicas/guias-e-planos, or another that may replace it.

Art. 18. The confirmed or suspect case of COVID-19 must be kept in isolation for the period provided for in the Interministerial Ordinance MTP/MS No. 20 of 18 June 2020, its amendments or any other that may replace it. [*Reworded by RDC 605/2022*]

§ 1. The symptomatic crew member with a negative result by rapid antigen test must have a new sample collected for RT-PCR or RT-LAMP testing.

§ 2. The symptomatic crew member, even with a negative result by RT-PCR or RT-LAMP, must remain in isolation until symptoms are remised.



§ 2. The symptomatic crew member, even with a negative result by RT-PCR or RT-LAMP, must remain in isolation until medical evaluation. [*Reworded by RDC 605/2022*]

Art. 18-A. It is incumbent upon the legal party responsible for the vessel or platform to identify COVID-19 suspect, confirmed cases and close contacts, through internal protocols that define epidemiological screening criteria for the current health event. [Added by RDC 605/2022]

Art. 19. Close contacts to the suspect or confirmed case that are not fully vaccinated should be kept in quarantine for 14 days or until the infection is ruled out or confirmed.

Art. 19. Close contacts to the suspect or confirmed case who are not fully vaccinated must be kept in quarantine for the period defined in the Interministerial Ordinance MTP/MS No. 20 of 18 June 2020, its amendments or any other that may replace it, until the infection is ruled out or confirmed. [*Reworded by RDC 605/2022*]

Art. 20. Close contacts to the suspect or confirmed cases who are fully vaccinated should monitor themselves for 14 days.

Art. 20. Contacts close to the suspect or confirmed case who are fully vaccinated must self-monitor for a period of 14 days and are exempt from quarantine, provided they reinforce non-pharmacological measures to prevent the transmission of SARS-CoV-2, adding the following measures: [*Reworded by RDC 605/2022*]

Single paragraph. Close contacts referred to in the *caput* should strengthen non-pharmacological measures to prevent transmission of SARS-CoV-2 by adding the following measures: [Revoked by RDC 605/2022]

I - mandatory use of professional face masks, including outdoors;

II - perform your meals, preferably, in their cabins;

III - not to attend collective and recreation areas;

IV - not to participate in meetings or any other activity that may lead to agglomeration of people;

V - be submitted to daily health assessment before beginning daily activities.

V - be submitted to periodic health assessments. [Reworded by RDC 605/2022]

Art. 21. All close contacts, regardless of the vaccination status, should be tested for the diagnosis of COVID-19.

§ 1. Samples for the test referred to in the *caput* must be collected between the 5th and 7th day of the last contact with the confirmed case, without prejudice to the possibility of adoption by those responsible for the ship of complementary tests performed at other times.

§ 2. The close contacts referred to in the *caput*, are exempt from the continuity of the measures established in the Arts. 19 and 20, provided that they are



asymptomatic and present negative or undetectable results in the tests provided for in the *caput*.

§ 3. Asymptomatic, fully vaccinated individuals, embarked in accordance with § 7, article 4, are exempt from the testing provided for in the *caput* for a period of ninety days, counted from the date of onset of symptoms or sample collection for diagnosis. [Added by RDC 605/2022]

Art. 22. The local ANVISA unit responsible for the port may determine a 14day quarantine for crew members, regardless of the vaccination situation, if identified:

Art. 22. The local ANVISA unit responsible for the port may determine the quarantine of the crew member, regardless of the vaccination status, for the time defined in the Interministerial Ordinance MTP/MS No. 20 of 18 June 2020, its amendments or any other that may come to replace it, if identified: [*Reworded by RDC 605/2022*]

I - inconsistency in epidemiological or laboratory investigation;

II - presentation of inconclusive diagnostic reports;

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III - negative result with sample collection performed before the 5th day or after the 7th day of contact with the confirmed or suspect case of COVID-19.

Section IV

II - presentation of an inconclusive diagnosis report; [Reworded by RDC

The landing of suspect, confirmed cases and close contacts

Art. 23. It is allowed to disembark confirmed, suspect cases and close contacts not vaccinated against COVID-19 for continuity of compliance with sanitary measures on land.

Art. 23. The disembarkation of confirmed, suspect cases and close contacts is allowed, regardless of the vaccination status against COVID-19, for continuity of compliance with sanitary measures ashore. [*Reworded by RDC 605/2022*]

§ 1. The permission referred to in the *caput* must be provided for in the Port Contingency Plan for Public Health Emergency and is subject to the prior authorisation of the local unit of ANVISA responsible for the port.

§1 The permission referred to in the *caput* must be provided for in the Contingency Plan for Public Health Emergency of the port or airport of disembarkation and is subject to prior authorisation of the local ANVISA unit. [*Reworded by RDC 605/2022*]

§ 2. The authorisation to quarantine or isolate crew members on land is conditional on the favourable manifestation of the municipal health authority, and notification to the competent health authority of any suspect and confirmed cases identified after the completion of operation of the vessel must be ensured.

§ 3. The landing provided for in the *caput* may be made without the authorisations provided for in Paragraphs 1 and 2 in cases of urgency and health



emergency, provided that the safety protocols agreed on the Port Contingency Plan for Public Health Emergencies are observed.

§ 4. In the event of disembarkation pursuant to § 3 of the caput, the local ANVISA unit responsible for the port of destination or operation must be informed within four (4) hours of disembarkation.

§ 4. In the event of disembarkation pursuant to § 3 of the *caput*, the local ANVISA unit responsible for the port or airport of destination or operation must be informed within a period of up to 4 (four) hours of disembarkation. [*Reworded by RDC* 605/2022]

§ 5. The application for the landing permit provided for in Paragraph 1 must contain the following information:

I - full name of the traveller;

II - nationality;

III - identification document number;

IV - date of birth;

V - date and place of embarkation;

VI - function on board;

VII - reason for landing;

VIII - name of the company responsible for removal and transportation;

IX - name, address and telephone number of the traveller's destination health service;

X - tests performed and results;

XI - date of landing;

XII - number generated in individual Compulsory Notification, if relevant.

§ 6. When the crew member disembarks by air, the captain or the party responsible for the vessel or platform must notify the case to the State Coordination of ANVISA located in the federative unit of disembarkation. [*Reworded by RDC 605/2022*]

Art. 24. The landing is subject to the previous protocol, with the local unit of ANVISA responsible for the port of landing, detailed procedures on:

I - the safe transport of travellers to the facilities where they will complete the quarantine or isolation period, and the use of public transport and passenger transport services by applications is forbidden;

II - the continuity of compliance with the quarantine or isolation period in a designated installation ashore approved by the health authority of the municipality or state;

III - the commitment of the company responsible for the vessel on the supply of logistics and to bear the costs of the landing operation;



IV - the commitment of the company responsible for the vessel to ensure health support infrastructure and the presentation of a plan for the repatriation of travellers, when necessary;

V - the presentation of the Traveller's Health Control Term - TCSV, completed, according to Annex IV of the Collegiate Board Resolution - RDC No. 21 of 28 March 2008, or another that may replace it.

Single paragraph. The clinical monitoring report of hospitalised traveller should be sent to the ANVISA unit whenever there are updates on the clinical status of the traveller.

Art. 24-A. Confirmed and suspect cases must be disembarked from platforms located within Brazilian jurisdictional waters, as soon as possible, without prejudice to labour standards and regulations of the National Agency of Petroleum, Natural Gas and Biofuels. [Added by RDC 605/2022]

Art. 25. Air taxi companies authorised to perform aeromedical services for the evacuation of crew members must comply with the provisions of the Guide for Aeromedical Passenger Transport Services with COVID-19, published by ANVISA and available at the e-mail address http://antigo.ANVISA.gov.br/guias#/visualizar/463890, or other that may replace it.

CHAPTER V

COMPLEMENTARY SPECIFIC PROVISIONS

Section I

Vessels' Certificate of Free Pratique and Notice of Arrival

Art. 26. For the granting of the Certificate of Free Pratique and consent of Arrival Notice, those responsible for the vessel must present the documents provided for in Article 9 of Resolution RDC No. 72 of 29 December 2009, or another that may replace it.

§ 1. Those responsible for the vessel must present the Medical Logbook containing the records of health occurrences on board for the last 30 days at the time of the application for the Certificate of Free Pratique or the Notice of Arrival.

§ 2. In case of the absence of a record of health occurrences on board in the last 30 days, the master or crew member designated by him must attest in the Medical Logbook on the date of the last record.

§ 3. Those responsible for the vessel must inform whether she operates under the vessel management rules with one or more cases of COVID-19 provided for in the Annex to this Resolution.

§ 4. The issuance of the Certificate of Free Pratique is conditional on completing all fields and signing the Maritime Declaration of Health (MDH) by the master or designated officer.

Art. 27. The local unit of ANVISA responsible for the port can grant authorisation for mooring of the vessel in cases where there is a health event on board,



making a record of impediment of operation and undocking in the Virtual Single Document (DUV) to ensure prior communication to all those indicated in the Port Contingency Plan for Public Health Emergencies.

Single paragraph. The decision to moor or anchor the vessel must follow the Port Contingency Plan for Public Health Emergencies.

Section II

Options to manage vessels with one or more cases of COVID-19

Art. 28. The presence of suspect or confirmed cases of COVID-19 on board the vessel implies the adoption of one of the measures provided for in the Annex to this Resolution.

§ 1. The choice of the option provided for in the Annex must be made by the party legally responsible for the vessel, which must consider the location of the port, the itinerary, the availability of alternative crew and the operational and logistical capacity necessary to operationalise the chosen option.

§ 2. The choice provided for in Paragraph 1 must be approved in advance by the ANVISA unit responsible for the port, which, when considering the epidemiological scenario of the vessel and the information presented by the person responsible for the vessel provided for in §1, may decide on another of the options provided for in the Annex to this Resolution.

§ 3. Vessels with one hundred per cent (100%) of fully vaccinated crew are exempt from adopting the measures provided for in the *caput*, as long as all measures outlined in this Resolution are adopted for the management of the suspect or confirmed cases and close contacts.

§ 4. The local ANVISA unit responsible for the port may impose option 3 provided for in the Annex, regardless of the vaccination status of the crew, when possible risks to public health are identified or if there are indications of cases on board related to a variant of concern (VOC) or interest (VOI) of the SARS-CoV-2 that is not in sustained transmission in the national territory.

§ 4. The local ANVISA unit responsible for the port may impose option 3 provided for in the Annex, regardless of the vaccination status of the crew when there are indications of cases on board related to a variant of concern (VOC) or of interest (VOI) of the SARS-CoV-2 that is not in sustained transmission in the national territory. [*Reworded by RDC 605/2022*]

Art. 29. The vessel quarantined, under option 3 of the Annex, if moored in the port, must remain in an isolated area with the gangway ladder raised, not being allowed access of people without the express consent of the local unit of ANVISA responsible for the port.

§ 1. The person responsible for the vessel is exempted from compliance with the provisions of the *caput* in emergencies essential to the safety of navigation and human life, provided that the correct use of PPE is observed.



§ 2. For the purpose of compliance with the vessel quarantine (option 3 of the Annex), The deadline begins counting from the date of onset of symptoms of the suspect case or the date of collection of the material for diagnostic examination of the last confirmed case on board.

§ 3. The identification of a new laboratory-confirmed case implies the need for a new choice, which must be made in accordance with Art. 28.

Art. 30. The loading and unloading operation of the vessel must be approved by the local ANVISA unit responsible for the port, which must consider, for decision-making, the levels of exposure of port workers to the affected crew during the operation.

Single paragraph. The control measures to be adopted during the operation must be in accordance with the Contingency Plan of the waterway terminal and the shipowner, considering the precautionary recommendations against COVID-19 and the type of operation.

Art. 31. Records of cleaning and disinfection provided in the Annex must be generated and minimally contain the date, sanitising agents used and those responsible for the activity.

Art. 32. The operations of water, food supply, removal of solid waste and sanitary effluents can normally occur, provided that it is authorised by the local unit of ANVISA responsible for the port, upon presentation of an operational plan pointing out operating flows that ensure the application of non-pharmacological measures.

Art. 33. The closure of the measures provided for in the Annex to this Resolution is determined by the local unit of ANVISA responsible for the port upon request of the person responsible for the vessel.

Section III

Port administrators, consignees, lessees, or landlords

Art. 34. Port administrators, consignees, lessees, or landlords are responsible for:

I – ensuring proof of complete vaccination against COVID-19 of workers, except for individuals not eligible by the National Immunisation Program;

II - disseminating information materials about COVID-19 to the port community;

III - Immediately reporting to the local ANVISA unit responsible for the port about the occurrence of a suspect or confirmed case of COVID-19 in the port as provided for in the Port Contingency Plan for Emergencies in Public Health;

IV - in the event of the provisions of item III, ensuring the conduct of epidemiological investigation and compliance, by its employees and service providers, with all quarantine and isolation measures provided for in the Epidemiological Surveillance Guide - Public Health Emergency of National Importance for Coronavirus



Disease, published by the Ministry of Health, available in https://www.gov.br/saude/ptbr/coronavirus/publicacoes-tecnicas/guias-e-planos, or another that may replace it;

IV - in the event of the provisions of item III, ensure that the epidemiological investigation is carried out and that its employees and service providers comply with all the quarantine and isolation measures provided for in the Interministerial Ordinance MTP/MS No. 20 of 18 June 2020, its amendments or another that replaces it. [*Reworded by RDC 605/2022*]

V - ensuring the availability of 70° AVC alcohol dispensers for hand hygiene, especially in spaces with a large flow of people, such as boarding and disembarking areas, restaurants, elevators, stairs, corridors, cabins, changing rooms, leisure areas and toilets;

VI - ensuring that all port workers use PPE appropriate to the activities they carry out;

VII - supervising the cleaning and disinfection teams regarding the application of the procedures adopted in the cleaning routine and compliance with current legislation;

VIII - ensuring the physical distance between the tables, from the back of the chair, in the cafeterias and food services located in the port area;

IX - organising shift changes and work intervals in order to reduce the number of workers simultaneously indoors, such as changing rooms, cafeterias and resting spaces;

X - following the Port Contingency Plan for Emergencies in Public Health for the disembarkation of crew members and passengers;

XI - ensuring compliance with the Maintenance, Operation and Control Plan - MOC of the air conditioning systems installed in the port, especially concerning the maintenance of sanitised filters, as provided for in Ordinance MS No. 3,523 of 28 August 1998, or another that replaces it; and

XII - updating the Port Contingency Plan for Public Health Emergencies, ensuring the basic response capabilities, observing the provisions of the Resolution of the Collegiate Board RDC No. 307 of 27 September 2019, or another that may replace it.

Single paragraph. The communication provided for in item III of the caput must contain information on:

I - suspect and confirmed cases with details;

II - dates of occurrences;

III - names, telephone numbers and addresses of those affected;

IV - results of the tests performed;

V - daily evolution and outcome of suspect and confirmed cases;

VI - name of the hospital unit to which the case was referred;



VII - number generated in the Compulsory Notification;

VIII - place and time of isolation;

IX - sanitary measures adopted; and

X - company in which the suspicious or confirmed case provides services.

XIII - Establish a health monitoring program for port workers that includes periodic testing protocols to screen SARS-CoV-2 infection. [Added by RDC 605/2022]

Section IV

The maritime platforms

Art. 35. Those responsible for maritime platforms, when identifying two or more confirmed cases of COVID-19 within up to five days, must take the following additional actions:

I - apply and revaluate the contingency plan of the unit;

II - strengthen cleaning and disinfection actions;

III - conduct new training and internal communications on the need to reinforce physical distance measures, use of appropriate masks and correct handwashing; and

IV - suspend boardings, except for professionals necessary to perform critical or essential functions of the platform.

CHAPTER VI

FINAL PROVISIONS

Art. 36. The omitted cases related to the application of this Resolution will be solved by the Fifth Board of ANVISA upon the prior technical manifestation of the General Management of Ports, Airports, Borders and Customs Spaces -GGPAF/DIRE5/ANVISA.

Art. 37. The activities of vessels, platforms and ports provided for in this Resolution may be suspended, by determination of ANVISA, due to the identification of risks to public health or non-compliance with current health standards.

Art. 38. Failure to comply with the provisions contained in this Resolution constitutes a health offence, pursuant to Law No. 6,437 of 20 August 1977, without prejudice to the applicable civil, administrative and criminal liabilities.

Art. 39. The validity of this Resolution will automatically cease from the recognition by the Ministry of Health that the situation of Emergency in Public Health of National Concern declared by Ordinance No. 188/GM/MS of 3 February 20 is no longer configured.

Art. 40. This Resolution must enter into force on the date of its publication.

ANTONIO BARRA TORRES

Director-President



ANNEX

Options for managing vessels with one or more cases of COVID-19

Options	Management of close contacts
1 Change of crew	 All unvaccinated crew are disembarked for a 14-day quarantine ashore. Then, all frequently touched surfaces (e.g. doorknobs, handrails, light switches, telephones) in shared spaces on board should be cleaned and disinfected. A new crew sign on the vessel to resume operations.
<u>2</u> Quarantine at work	 Quarantine of 14 days onboard while essential unvaccinated crew remain at work, as long as they are asymptomatic. o- Rigorous physical distancing. o- Mandatory mask in all rooms, except cabins. Frequently touched surfaces (e.g. doorknobs, handrails, light switches, telephones) in shared spaces onboard must be cleaned and disinfected. If there is unvaccinated crew on board, the ship's operations may resume with the ship remaining close to shore (i.e. within approximately 1 hour of the crew's potential medical evacuations).
Option 3: Operations suspended (Vessel quarantine)	 Quarantine of 14 days onboard of the non-essential unvaccinated crew. Quarantine at work of essential crew with no signs or symptoms. Rigorous physical distancing. Rigorous physical distancing. Mandatory mask in all rooms, except cabins. Frequently touched surfaces (e.g. door knobs, handrails, light switches, telephones) in shared spaces on board should be cleaned and disinfected. Vessel operations suspended (i.e. the vessel remains on the dock, berth or anchorage).



ANNEX [Reworded by RDC 605/2022]

Options for managing vessels with one or more cases of COVID-19

Options	Management of close contacts
1 Change of crew	 All unvaccinated crew are disembarked for a 14-day quarantine ashore. Then, all frequently touched surfaces (e.g. doorknobs, handrails, light switches, telephones) in shared spaces onboard should be cleaned and disinfected. A new crew sign on the vessel to resume operations. The need to carry out the tests provided for in art. 21 does not prevent the vessel from continuing its operations.
2 Quarantine at work	 Quarantine at work aboard of the essential unvaccinated crew, provided they are asymptomatic. Strict physical distancing. Mandatory use of masks in all rooms, except in cabins.
Option 3: Operations suspended (Vessel quarantine)	 Quarantine on board of the non-essential and non-vaccinated crew members. Quarantine at work of essential crew with no signs or symptoms. Strict physical distancing. Mandatory use of masks in all rooms, except in cabins. Frequently touched surfaces (e.g. doorknobs, handrails, light switches, telephones) in shared spaces onboard must be cleaned and disinfected. Vessel operations suspended (ie the vessel remains at the dock, quay or anchorage).