Process nº 25351.902304/2020-14

Provides for sanitary measures to be adopted at entry points, in
the face of cases of the new coronavirus SARS-CoV-2 (COVID-19).

1. Report - Information on the occurrence of COVID-19

On December 31, 2019, the World Health Organization was informed of a number of cases of pneumonia of unknown cause detected in the city of Wuhan, Hubei province, China. On January 7, a new coronavirus (SARS-CoV-2) was identified as the causative virus by Chinese authorities. Thereafter, WHO and its States Parties, including Brazil, monitored the emergence of cases, disease behavior and guidance on measures to minimize the spread of this disease in the world.

On January 31, 2020, following the recommendation of the Emergency Committee, the WHO declared Public Health Emergency of International Importance (ESPII) the 2019-nCov. At the moment, WHO did not recommend measures to restrict travelers or trade.

On February 4, 2020, Ordinance No. 188, of February 3, 2020, was published, which declared a Public Health Emergency of National Importance (ESPIN), due to suspected cases of Human Infection by the new Coronavirus (SARS-CoV-2).

The Ministry of Health informs that it is carrying out, through the Health Surveillance Secretariat, the daily monitoring of the situation with the WHO and also of the data provided by the Government of the People's Republic of China since the beginning of the notifications. As of January 31, 2020, the Ministry made available an update on the situation of suspected and possible confirmed cases on the platform.saude.gov.br/novocoronavirus.

Since January 22, 2020, the Emergency Operations Center - Coronavirus, coordinated by the Ministry of Health, has been operating with daily meetings. The Center has several areas in the Ministry of Health, Anvisa and other bodies of interest.

In addition, Anvisa instituted, through Ordinance No. 74, of January 27, 2020, an Emergency Public Health Group to conduct the Agency's actions, with regard to the New Coronavirus. Anvisa is also a member of the Interministerial Executive Group on Public Health Emergency of National and International Importance - GEI-ESPII, established by Decree nº 10.211, of January 30, 2020.

On February 7, 2020, Law No. 13979, of February 6, 2020, was published, which provides for measures to deal with the public health emergency of international
importance resulting from the coronavirus responsible for the 2019 outbreak. As provided in this Law, Art. 3, item VI, Anvisa is responsible for the exceptional and temporary restriction of entry and exit of the country, according to technical recommendation and justified by the agency, when this happens by roads, ports or airports.

Subsequently, this Law was regulated by Ordinance MS / GM No. 356 of March 11, 2020. This Ordinance also provides for measures to operationalize coping with COVID-19, which may involve isolation and quarantine measures. In addition, on March 17, 2020, Interministerial Ordinance No. 5 was published, which deals with the compulsory nature of measures to deal with public health emergencies. Failure to comply with the measures provided for in Law No. 13,979 of 2020 will result in civil, administrative and penal liability for the offending agents.

On February 23, the Ministry of Health confirmed the first case of Covid-19, detected in São Paulo / SP. It should be noted that the monitoring of cases can be performed on the IVIS platform (http://platform.saude.gov.br/novocoronavirus/)

On March 11, the World Health Organization declared the COVID-19 pandemic caused by SARS-CoV-2. On March 16, the first death was confirmed by COVID-19, in the State of São Paulo.

On March 17, 2020, Ordinance No. 120 dealing with the exceptional and temporary restriction on the entry of foreigners from the Bolivarian Republic of Venezuela was published.

On March 19, 2020, Ordinance No. 125 was published, which provides for the exceptional and temporary restriction on the entry of foreigners from the countries listed in the country: Argentina, Plurinational State of Bolivia, Republic of Colombia, French Republic (French Guiana), Cooperative Republic of Guyana, Republic of Paraguay, Republic of Peru and Republic of Suriname.

On the same date, Ordinance No. 126 was published, which provides for the exceptional and temporary restriction of entry into the country of foreigners from the countries listed: People’s Republic of China, Members of the European Union, Iceland, Norway, Switzerland, United Kingdom of Great Britain, Brittany and Northern Ireland, Commonwealth of Australia, Japan, Federation of Malaysia and Republic of Korea.

On March 20, 2020, Ordinance No. 454 was published, declaring, throughout the national territory, the state of community transmission of the coronavirus (covid-19) and determines in its Art. 2 that "to contain the transmissibility of the covid-19, should be adopted as a non-pharmacological measure, the home isolation of the person with respiratory symptoms and the people residing in the same address, even if they are asymptomatic, and should remain in isolation for a maximum period of 14 (fourteen) days.

On the same day, Provisional Measure nº. 926, which amended Law No. 13,979, of February 6, 2020, to provide for procedures for the acquisition of goods, services and supplies intended to deal with the public health emergency of international importance resulting from the coronavirus.

After the publication of MP nº. 926, it was determined that the National Health Surveillance Agency is the competent body to issue technical recommendations regarding exceptional and temporary restrictions on entering and leaving the country through highways, ports and airports, as well as interstate and intercity transportation.

Still on the same date, through Decree no. 10,282, public services and essential activities were defined.

Thus, this technical note details the technical guidelines for tackling the pandemic at points of entry.
2. Analysis - Adoption of measures at entry points

Considering the emergence of the new SARS-CoV-2 virus, Anvisa started to adopt recommendations and actions, in view of its performance in airports, ports and borders, based on the International Health Regulations and the Collegiate Board Resolutions published (Resolution - RDC 02 2003 and Resolution - RDC 21 of 2008 and Resolution - RDC 72 of 2009). Among the actions triggered for the performance of health surveillance at entry points, due to the situation of ESPII and ESPIN declared, are:

- Observe and follow WHO guidelines for entry points;
- Ensure adequate coverage of health surveillance activities at Guarulhos International Airport, which concentrates the largest volume of international flights arriving;
- Institution on call 24h, for health surveillance at international airports, which receive international night flights (from 4:30 pm to 7:00 am);
- Intensify surveillance of suspected cases of COVID-19 at entry points, for immediate guidance on home isolation and reporting to epidemiological surveillance agencies, according to local or community transmission link. The definition of a suspected case is:


1. Situation 1 - TRAVELER: person who, in the last 14 days, returned from international travel from any country AND presents:
   - Fever
   - At least one of the respiratory signs or symptoms (coughing, difficulty breathing, sputum production, nasal or conjunctival congestion, difficulty swallowing, sore throat, runny nose, O2 saturation <95%, signs of cyanosis, flapping of the nose, intercostal circulation and dyspnoea)

2. Situation 2 - NEXT CONTACT: person who, in the last 14 days, had close contact with a suspected or confirmed case for COVID-19 AND presents:
   - Fever
   - At least one respiratory sign or symptom (cough, difficulty in breathing, sputum production, nasal or conjunctival congestion, difficulty in swallowing, sore throat, runny nose, O2 saturation <95%, signs of cyanosis, flapping of the nose, intercostal circulation and dyspnoea)

**Observations:**

**Fever**

above 37.8 ° is considered fever.

It is warned that fever may not be present in some cases, for example, in young, elderly, immunosuppressed patients or that in some situations they may have used antipyretic medication. In these situations, the clinical evaluation must be taken into account and the decision must be recorded in the notification sheet. Consider the fever reported by the patient, even if not measured.
Close contact with suspected or confirmed COVID-19 cases:

A person who has had direct physical contact (for example, shaking hands);
A person who has unprotected direct contact with infectious secretions (for example, being coughed, touching used paper tissues with his bare hand);
A person who has had face-to-face contact for 15 minutes or more and at a distance of less than 2 meters;
A person who has been in a closed environment (eg, classroom, meeting room, hospital waiting room, etc.) for 15 minutes or more and at a distance of less than 2 meters;
A healthcare professional or other person who takes care of a COVID-19 case directly or laboratory workers who handle samples of a COVID-19 case without recommended personal protective equipment (PPE) or with a possible violation of the PPE;
An aircraft passenger seated in the two-seat radius (in either direction) of a confirmed case of COVID-19, his companions or caregivers, and the crew members who worked in the section of the aircraft in which the case was sitting.

* A passenger on board a vessel will be considered a close contact if it meets one of the following criteria:
  i. share the same cabin as a suspected or confirmed COVID-19 case;
  ii. Have close contact within 2 meters or have been in a closed environment with a suspected or confirmed case of COVID-19.
  - For passengers, consider participating in common activities on board the ship, being a member of a group that traveled together or shared a table in a restaurant.
  - For the crew, consider participation in common activities, as well as working in the same area of the ship as the suspected or confirmed case of COVID-19.
  iii. Health worker or person who provided care for a suspected or confirmed COVID-19 case. (adapted from OMS)

• Provide and monitor audible warnings in English, Portuguese, Mandarin and Spanish about signs and symptoms and basic care, such as regular hand washing, covering the mouth and nose when coughing and sneezing.

• Intensify cleaning and disinfection procedures in terminals and means of transportation, reinforcing the use of PPE - Personal Protective Equipment, as provided in the Resolution of the Collegiate Board - RDC nº 56, of August 6, 2008. The workers who carry out this activity should be alerted to pay greater attention to the provisions of this resolution.

• Reinforce the use of Personal Protective Equipment for workers who perform sanitary sewage of means of transport and septic tank.

• Sensitize health surveillance teams and medical posts at entry points to define suspicious cases and recommendations for home isolation. The use of Personal Protective Equipment - PPE for standard precautions, by contact and droplets, must be followed according to guidelines defined by the Ministry of Health.

• Isolation should be indicated for a period of 14 days for all suspected symptomatic cases. Isolation can be performed in the hospital or home environment, according to the clinical picture presented.
• Travelers who are classified as suspected cases should be instructed to wear a mask.

• Anvisa must issue the Term of Sanitary Control of the Traveller informing the unauthorized shipment of the suspected case to the company of the means of transport that would carry out the final journey. The suspected case must be isolated in the transit city. The Federal Police can be contacted for assistance in fulfilling this determination, pursuant to Interministerial Ordinance No. 5.

• The traveller must be notified of the isolation measure according to the model in Annex II of Ordinance MS / GM No. 356 of March 11, 2020.

• Pay attention to possible requests for lists of travellers, flights and boats, aiming at the investigation of suspicious cases and their contacts, adopting the pertinent measures, according to the flow defined by the Ministry of Health.

• Update of the Contingency Plans for responsiveness, observing the provisions of the internal guidance (Service Orientation No. 76, of October 7, 2019) and the Collegiate Board Resolution - RDC No. 307, of September 27, 2019. The model contingency plan and protocols are available at http://portal.anvisa.gov.br/coronavirus.

• Terminal administrators must increase the number of places for hand hygiene or make points with gel alcohol available. It is important that locals have soap and running water to encourage proper hand hygiene and paper towels for drying proper.


2.1. General recommendations for servers and port and airport workers:

We emphasize that, in any situation, regardless of whether PPE is used or not, port, airport and border workers must always adopt preventive measures, such as:

• Frequent hand hygiene with water and soap;
• When hands are not visibly dirty, alcoholic hand gel can be used;
• Respiratory label:
  a) Use disposable tissue for nasal hygiene;
  b) Cover nose and mouth when sneezing or coughing;
  c) Avoid touching mucous membranes of the eyes, nose and mouth;
  d) Hand wash after coughing or sneezing.
2.2. Individual protection equipment (PPE):

- Anvisa, Federal Revenue of Brazil (RFB), Federal Police of Brazil (PF), of the International Agricultural Surveillance System (Vigiagro) servers and workers who approach the means of transport must:
  - if there is no report of the presence of a suspected case, use a surgical mask;
  - if there is a report of the presence of a suspected case, use a surgical mask, apron, goggles and gloves;
- Workers in the following categories are recommended to wear surgical masks:
  - crew members;
  - airport agents who work in connection with international flights or civil aviation protection operators - APAC;
  - duty-free store employees.

- To the other workers, so far, there is no indication for the use of PPE.

Note 1: All of these measures are based on current knowledge about cases of SARS-CoV-2 infection and can be changed if new information about the virus becomes available.

Note 2: Wearing a surgical mask is one of the preventive measures to limit the spread of respiratory diseases, including the new coronavirus (2019-nCoV). However, only the use of the surgical mask is insufficient to provide the safe level of protection and other equally relevant measures must be adopted, such as hand hygiene with water and liquid soap or alcoholic preparation before and after using the masks. Wearing masks, when not indicated, can generate unnecessary costs and create a false sense of security, which can lead to neglecting other measures, such as hand hygiene practices. In addition, the mask must be properly adjusted to the face to ensure its effectiveness and reduce the risk of transmission. All professionals should be instructed on how to use, remove, dispose of them and on hand hygiene actions before and after use.

Note 3: In addition to the above measures, it is recommended, if possible, to keep a distance of at least 2 meters from travelers with coughing or sneezing.

2.3 About the use of PPE

Before dressing up, wash your hands.
When dressing up, observe the following sequence:
1. Apron

2. Mask;

3. Glasses;


For the removal of PPE, observe the following sequence:

1. Gloves;

2. Glasses;

3. Apron;

4. Mask

After removing PPE, wash your hands.

2.3.1 Recommendations by type of PPE

- Apron:
  - Choose suitable size;
  - The opening should be on the back;
  - Hold by the collar and waist;
Apron removal:

- Untie the strips;
- Remove from the neck and shoulders;
- Turn the contaminated face inward;
- Fold or roll the apron;
- Discard in white plastic bag.

• **Mask**
  - Position the mask over the nose and mouth; Adjust the flexible part over the nose;
  - Adjust the elastic or straps;
  - Replace the masks with a new, clean and dry mask as soon as it becomes wet and whenever you sneeze or cough (ask for help if you are wearing gloves);
  - Do not touch the mask after putting it on;
  - Remove the mask using the appropriate technique (ie, do not touch the front, always remove from the back) and do not pull the mask onto your neck after the procedure.
- Do not reuse disposable masks;
- Do not remain with the mask after use hanging from the neck.

**Luvas**

- Choose suitable size;
- Put on gloves;
- Adjust the cuff over the apron sleeve;
- Do not wash or use the same pair of gloves again; Do not bring your gloved hands to your face;
- Avoid touching or adjusting other PPE with gloved hands;
- Never touch surfaces and materials (such as telephones, door handles, doors) unnecessarily when wearing gloves to avoid transferring microorganisms to other people or environments;
- If the gloves are torn, remove and wash your hands before putting on new gloves; The use of gloves is not a substitute for hand hygiene;
- Change gloves whenever you contact the individual compatible with the definition of a suspected case and / or to be monitored;
- Proceed to hand hygiene immediately after removing the gloves, to avoid transferring microorganisms to other people or environments;
Observe the correct gloves removal technique to avoid hand contamination, described below:

- Remove the gloves by pulling the first one from the outside of the wrist with the fingers of the opposite hand.
- Hold the removed glove with the other gloved hand.
- Touch the inside of the gloved hand’s wrist with the opposite index finger (without gloves) and remove from the inside to form a bag for the two gloves.

The PPE used to answer suspicious cases must be treated as Group A waste, in accordance with the provisions of the Resolution of the Collegiate Board - RDC No. 56, of August 6, 2008.
The surgical masks used only for receiving travellers, without the presence of suspicious cases, can be discarded as common waste (Group D), according to the Resolution of the Collegiate Board - RDC nº 56, of August 6, 2008.

Ref: CDC, Guidance for the selection of Personal Protective Equipment (PPE) in healthcare settings; [https://www.cdc.gov/hai/pdfs/ppe/ppeslides6-29-04.pdf](https://www.cdc.gov/hai/pdfs/ppe/ppeslides6-29-04.pdf) accessed on 02/08/2020;

### 2.4. Cargo, shipments and accompanied baggage

So far, there is no evidence to support the transmission of COVID-19 associated with imported goods, due to the low survival capacity of these coronaviruses on the surfaces, and there are no recorded cases of this form of transmission. New information regarding the ways of transmission of the new coronavirus will be provided on the Anvisa Portal [http://portal.anvisa.gov.br/].

Considering the low risk of transmission through surfaces, there is no recommendation for workers working in the treatment of express and postal shipments and in the physical inspection of cargo from countries with local transmission to take additional precautions, such as the use of surgical masks and gloves.

Anvisa, RFB, PF and Vigiagro servers and workers who carry out accompanied baggage inspection, in the presence of travelers, must wear a surgical mask and gloves.

### 2.5. Activities to be carried out at International Airports:

- Audible warnings with guidance on signs and symptoms of COVID-19 and basic care such as regular hand washing, mouth and nose cover when coughing and sneezing must be read on all international flights by the crew before landing and international disembarkation as per text below in Portuguese, English, Spanish and Mandarin.

**Idioma Português:**

Se você tiver febre, tosse ou dificuldade para respirar, **em até 14 dias após viagem para o exterior**, você deve procurar a unidade de saúde mais próxima e informar a respeito da sua viagem. Para proteger sua saúde, siga medidas simples: Lave as mãos frequentemente com água e sabão. Se não tiver água e sabão, use álcool gel. Cubra o nariz e a boca com lenço descartável ao tossir ou espirrar. Descarte o lenço no lixo e lave as mãos. Evite aglomerações e ambientes fechados, procurando mantê-los ventilados. Não compartilhe objetos de uso pessoal, como talheres, pratos, copos ou garrafas.

**Idioma Inglês:**

If you feel sick and present fever, cough, or difficulty of breathing, and have travelled abroad in the last 14 days, you should seek medical care and tell health professionals about your recent travel. Adopt the following measures to avoid the spread of diseases: Wash your hands often with soap and water for at least 20 seconds. Use an alcohol-based hand sanitizer if soap and water are not available. Cover your mouth and nose with disposable tissue or your sleeve (not your hands) when coughing or sneezing. Discard the tissue in the garbage bin and wash your hands. Avoid crowded or closed places. Do not share personal belongings such as cutlery, plates, glasses or bottles. Seek medical care if you had any symptoms and tell about your trip.

Idioma español:

Si tiene fiebre, tos o dificultad para respirar, dentro de los 14 días de viaje al extranjero, debe buscar el centro de salud más cercano e informar acerca de su viaje. Para proteger su salud, siga pasos simples: Lávese las manos con frecuencia con agua y jabón. Si no tiene agua y jabón, use alcohol en gel. Cubrarse la nariz y la boca con un pañuelo desechable al toser o estornudar. Deseche el pañuelo en la basura y lávese las manos. Evite aglomeraciones y ambientes cerrados, tratando de mantenerlos ventilados. No comparta artículos personales, como cubiertos, platos, vasos o botellas.

- The following notice must also be read on domestic flights prior to landing. The same warning must also be transmitted in the national arrivals areas of airports.

To protect your health from the new coronavirus, follow simple steps: Wash your hands frequently with soap and water. If you don't have soap and water, use gel alcohol. Cover your nose and mouth with a disposable tissue when coughing or sneezing. Discard the tissue in the trash and wash your hands. Avoid agglomerations and closed environments, keeping them ventilated. Do not share personal items, such as cutlery, plates, glasses or bottles. If you have a fever, cough, or difficulty breathing, avoid crowded places, call 136, or go to a health facility.

To protect your health from the new coronavirus, follow simple steps: Wash your hands frequently with soap and water. Use an alcohol-based hand sanitizer if soap and water are not available. Cover your nose and mouth with a disposable tissue when coughing or sneezing. Discard the tissue in the trash and wash your hands. Avoid agglomerations and closed places, keeping them ventilated. Do not share personal belongings such as cutlery, plates, glasses or bottles. If you have a fever, cough, or difficult of breathing, avoid crowded places, call 136 or seek a health facility.

- Disclosure regarding the PPE recommendations to the servers of the Federal Revenue, Federal Police and Vigiagro and other workers who are in direct contact with travellers.

- It is recommended that servers and workers who have direct contact with travellers keep a distance of at least 2 meters with other people, especially those who are coughing or sneezing.

- The distance of 2 meters must also be observed among travellers, while waiting in lines for check-in and boarding procedures.

- Considering the reduction in the number of travellers on commercial flights, imposed by the social distance measures adopted so far, it is recommended that airlines, whenever possible, allocate travellers distant from each other inside the aircraft.

- Airlines should be instructed to strictly comply with the provisions of Article 34 of the Resolution of the Collegiate Board - RDC nº 2, of January 8, 2003, in relation to the care of objects for personal use, such as blankets, pillows and headphones.

- Anvisa must approach flights, prioritizing those with passengers with symptoms compatible with the definition of a suspected case. Anvisa must monitor the transmission of audible warnings in the landing areas and inside the aircraft.
• The commander or agent authorized by the airline must deliver the Aircraft General Declaration, completely filled out, of all international flights arriving in Brazil, to the airport's health authority.

• In identifying a passenger who meets the definition of a suspected case on board the aircraft, Anvisa must use a simplified instrument to collect data from nearby contacts, including flight attendants, from flight passengers, containing the name of the traveller, city of residence, telephone, email and seat on the aircraft.

• Whoever is classified as a suspected case of COVID-19 will be evaluated by the medical team and given a 14-day home isolation when in good general health. The traveller should be instructed to wear a mask when traveling to their home and seek health care in the event of a worsening of their general condition, especially shortness of breath.

• In the case of aircraft with detection of suspected cases, it is recommended that items such as pillows and seat covers located 2 rows in front and 2 rows behind the suspected case and family group be sent for hygiene in hospital laundries.

• Anvisa does not recommend performing temperature screening based on the available scientific literature, according to the attached document. It is recommended to disseminate official information materials available at http://portal.anvisa.gov.br/coronavirus and https://saude.gov.br/saude-de-a-z/novocoronavirus for guidance, especially visual, on signs, symptoms and basic care to prevent COVID-19, especially in convergence areas for travelers (eg immigration line and baggage claim).

2.6. Activities to be carried out in ports with the arrival of international vessels:

• Request to vessels in international transit the Medical Logbook to evaluate the issue of Free Prati qu e Certificates;
• The Maritime Health Declaration - DMS must be filled out correctly and in a complete form for evaluation regarding the issuance of Free Prati que. A careful analysis of the document by the sanitary authority is essential to allow the commencement of the operations;
• There is no impediment for pilots to perform the manoeuvre of mooring the ships, as long as the preventive measures and use of surgical mask are observed as a protective barrier;
• Cargo vessels on an international route will only be able to berth and operate if no crewmember disembarks for 14 days from the date of arrival of the vessel at the first national port, with the exception of landings that are essential to the operation. The minimum contact of the crew with Brazilian port workers must also be enforced during this period, restricted to the limits of the terminal.
• In case of suspicion of COVID-19 on the vessel, the issuance of Free Prati que must be carried out on board. The traveler must be kept in a private place, preferably in the cabin, and a surgical mask should be available until an evaluation by the health authority is carried out with the epidemiological surveillance or medical health team, as defined in the local Contingency Plan. After assessing the case, it will be decided whether the traveler will be excluded as a suspected case, kept on board in isolation or removed to the health service.

• In the event of a health event on board related to COVID-19, during the journey or during the vessel's stay in the port, the crew will not be able to disembark for another 14 days from the last case, unless serious cases requiring medical assistance. Other health events will be assessed for landing authorisation.
• The embarkation of new crew members, coming from abroad, which usually occurs by air, must be suspended, in compliance with the provisions of Ordinance No. 126, of March 19, 2020.
• Operations for the supply of water, food, removal of solid waste and sanitary rejects will occur normally, provided they are authorised by Anvisa.
• The dissemination of information material in Portuguese and English is recommended, as available on the official pages, http://portal.anvisa.gov.br/coronavirus and https://saude.gov.br/saude-de-a-z/novocoronavirus, with general recommendations for the port community.
• Inform the recommendations regarding the use of PPE for pilots, servants of the Federal Revenue Service, the Federal Police, Vigiagro and the Brazilian Navy and other workers who are in direct contact with the vessels.
• It is recommended that servers and workers, including pilots, keep a distance of at least 2 meters from the crew, especially those who are coughing or sneezing.

2.6.1 National Cruise Ship Season

• We recommend the immediate suspension of new embarking on cruise ships that are already in the Brazilian coast.
• We recommend preventing the operation and disembarkation of cruise ship travelers on a long-haul voyage with a stopover in Brazil.
• Cruise ships will be allowed to disembark asymptomatic Brazilian passengers and crew. Everyone should be instructed to perform home isolation for at least 14 days.
• The disembarkation of asymptomatic foreign crew members will only occur after 14 days from the date of arrival of the vessel in the port.
• The disembarkation of foreign crew members or foreign passengers will only be allowed after 14 days of isolation or when the arrangements for repatriation are agreed and organised between the relevant authorities.
• Notify the vessels' medical teams to detect suspicious cases and the use of Personal Protective Equipment - PPE, standard precaution, by contact and droplets, according to guidelines defined by the Ministry of Health.
• Carefully evaluate the daily notifications sent by the vessels, according to the flow defined in the Cruise Ship Sanitary Guide (available at http://portal.anvisa.gov.br/cruzeiros/guiasanitario) when the ship is berthed in a Brazilian port.
• In case of isolation of a suspected case on board, observe the recommendations available in the protocol "Use of Personal Protective Equipment - PPE and Isolation".
• As provided for in Law No. 13,979, of February 6, 2020, a vessel that indicates the presence of a suspected or confirmed case for COVID-19 will be prevented from operating or leaving the port.

2.7. Activities to be carried out at land borders:
• Suspension of border transit between Brazil and Venezuela based on Ordinance No. 120, of March 17, 2020, which deals with the exceptional and temporary restriction on the entry of foreigners from the Bolivarian Republic of Venezuela into the country. The determination is in place for 15 days from 17/03/20. Note that the restriction is not valid for: Brazilians, born or naturalized; immigrants with a permanent residence permit in Brazilian territory; to the foreign professional on a mission at the service of an international organization, provided that he is properly identified and a foreign official accredited with the Brazilian government. The suspension is not valid for road freight traffic and humanitarian actions.

• Foreigners from Argentina, Plurinational State of Bolivia, Republic of Colombia, French Republic (French Guiana) are restricted for fifteen days from March 19, 2020. Cooperative Republic of Guyana, Republic of Paraguay, Republic of Peru and Republic of Suriname, under the terms of Ordinance No. 125. The restriction on entry into the country does not apply to:
  o Brazilian, born or naturalized;
  o immigrant with previous residence permit in Brazilian territory;
  o foreign professional on mission in the service of an international organism, as long as duly identified; foreign official accredited to the Brazilian Government.
  o foreigner who fits the hypothesis of family reunion with a natural or naturalized Brazilian citizen who is in national territory;
  o foreigners whose entry is specifically authorized by the Brazilian Government in view of the public interest;
  o foreigner holding a National Migration Registry; or
  o charge transport.

• Follow-up with the Municipal Health Secretariat and other agencies that work on the border, regarding the ability to attend assistance services and the presence of serious cases in the municipality.

• Articulation with the authorities of the neighboring country and, if pertinent, twin cities, seeking to coordinate the measures of detection, evaluation, surveillance response and awareness of the flows established in the local Contingency Plan.


• For bus trips, the distance of 2 meters between travelers must be observed, while waiting in lines for the boarding procedure.

• It is recommended that the displacements of buses take place with a capacity not exceeding 50% of their capacity.

• Considering the reduction in the number of travelers in transit between the borders, imposed by the social distance measures adopted until now, it is recommended that, whenever possible, the travelers are distant from each other, inside the buses.

• Bus transfers should preferably be carried out with the windows open.

• It is reinforced the importance that the air conditioning system of the buses are in satisfactory conditions of cleaning, maintenance, operation and
control, as indicated by the manufacturer or the need arising from the demand during use.

- In case of detection of a suspected case on board a bus or at the border crossing, follow the guidelines of the "Protocol for Coping with COVID-19 in Ports, Airports and Borders" (available at http://portal.anvisa.gov.br/coronavirus) and home isolation guidelines for other passengers and drivers.


- Disclosure of PPE recommendations to servers and workers who are in direct contact with suspected COVID-19 travelers.

- It is recommended that servers and workers who have direct contact with travelers keep a distance of at least 2 meters with other people, especially those who are coughing or sneezing.

2.4. Registration of activities performed by Anvisa servers

Non-routine activities must be recorded in the Work flow as an event of the type "Complaint or Health Incident", as instructed Next:

- "Title" field: follow the following pattern:

  "Coronavirus - <Local> - <action taken>
  Ex:
  "Coronavirus - XXXXX Airport - Flight XXXXX Approach"
  "Coronavirus - Port of XXXXX - Meeting with XXXX"

- Field Description: objectively describe the activity carried out, including, at least, the following information: date, time, servers involved, action taken, number of travellers served (if applicable);

- Coordinating Field: post or coordination;

- Field: Responsible: server responsible for the activity;

- Fields Involved: state coordination, regional coordination and Gimtv;

In the "Progress" tab, inform possible developments or attach documents that are relevant to the action taken, before completing the event.

If a suspicious case is found during the activity, an event of the type "Public Health Event" should also be opened, the from the "Associated Events" tab following the provisions of Service Guideline 76, of October 7, 2019.
3. Conclusion

At this moment, with the declaration of the pandemic of COVID-19 and Public Health Emergency of International Importance, the Organization World Health Organization did not issue any additional measures. However, several Brazilian states have determined measures to restrict population circulation and reduce social contact in order to mitigate the risk of spreading SARS-CoV-2.

In addition, from the declaration, throughout the national territory, of the state of community transmission of the coronavirus (covid-19) and the publication of the ordinances that provide for the exceptional and temporary restriction on the entry of foreigners into the country, the sanitary measures applied at entry points they were reviewed, which has been happening with each change in the epidemiological scenario.

To superior consideration.


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