

Interim Guidance for Ships on Managing Suspected or Confirmed Cases of Coronavirus Disease 2019 (COVID-19)



CDC's Temporary Extension & Modification of Framework for Conditional Sailing Order (CSO) expired on January 15, 2022. CDC recommends that cruise ships operating in U.S. waters choose to participate in [CDC's COVID-19 Program for Cruise Ships](#).



CDC has issued an [Order](#) that requires face masks to be worn by all travelers while on public transportation including all passengers on board and all personnel operating maritime conveyances traveling into, within, or out of the United States. Masks are also required while indoors at U.S. transportation hubs, including seaports and ferry terminals. Travelers are not required to wear a mask in outdoor areas of a conveyance. For more information on this mask requirement, see the [Frequently Asked Questions](#)

Summary of Recent Changes

February 09, 2022

Updated language for new COVID-19 Program for Cruise Ships Operating in U.S. Waters.

Key Concepts

- Preventive measures, including hand hygiene, physical distancing, and wearing [facemasks](#), are essential to maintaining ship operations during the COVID-19 pandemic.
- After a COVID-19 case is identified on a non-cruise ship, all persons on board are considered contacts because of the close living and working conditions. Due to the size and number of persons on board cruise ships, identification of contacts should be done on a case-by-case basis.
- Cleaning and disinfection protocols may reduce transmission of COVID-19 on ships.

Who this Guidance Is for

This document provides guidance for ships originating from or porting in the United States to help prevent, detect, report, and medically manage suspected or confirmed COVID-19 cases. As ships travel worldwide, ship management and medical staff need to be aware of and respond to local jurisdictional requirements. Important points to be aware of:

- Foreign-flagged cruise ships ^[1] operating in U.S. waters that have chosen to opt in to CDC's COVID-19 Program for Cruise Ships should continue to follow the recommendations and guidance in CDC's [Technical Instructions for CDC's COVID-19 Program for Cruise Ships Operating in U.S. Waters](#) and the [Operations Manual for CDC's COVID-19 Program for Cruise Ships Operating in U.S. Waters](#)
- In this guidance, *non-cruise ship* refers to cargo/container ships, bulk carriers, tanker ships, offshore ships, and special purpose ships (e.g., research vessels).
- This guidance is not intended for ships used to transit passengers (and vehicles) on short-distance routes (e.g., ferries) or seafood processing worksites.

[1] U.S.-flagged cruise ships may follow CDC's COVID-19 Program for Cruise Ships at the cruise ship operator's discretion.

Purpose

This document provides guidance for preventing the spread of COVID-19 during and after a voyage, including personal protective measures, management of sick or exposed persons on board, reporting suspected or [confirmed](#) cases, and cleaning and disinfection recommendations for common areas on the ship and areas previously occupied by individuals with suspected or [confirmed](#) COVID-19. CDC will update this interim guidance for ships as needed and as additional information becomes available.

Plans to Mitigate COVID-19 on Board Ships

Ship companies should develop, implement, and operationalize an appropriate, actionable, and robust plan to prevent, mitigate, and respond to the spread of COVID-19 on board ships. The Occupational Safety and Health Administration's webpage, [Protecting Workers: Guidance on Mitigating and Preventing the Spread of COVID-19 in the Workplace](#) [↗](#), provides ways to prevent workplace exposures to persons with COVID-19. Plans should include the following components:

- Training of all crew on COVID-19 prevention and mitigation
- On-board monitoring of crew and non-crew for [signs and symptoms](#) of COVID-19
- [COVID-19 testing](#) (onboard or onshore)
- On-board [isolation, quarantine](#), and [physical distancing](#) (maintaining at least 6 feet [2 meters] from others)
- Adequate medical staffing (this can include telehealth or telemedicine providers)
- Maintaining sufficient quantities of [Personal Protective Equipment \(PPE\)](#), oxygen, and other supplies, and the ability to obtain additional resources, if needed
- COVID-19 outbreak management and response information
- Medical arrangements for onshore evaluation and hospitalization
- Screening of embarking or disembarking crew and non-crew
- A system to notify respective national, state, and local public health authorities



Ship Crew Well-Being During COVID-19

COVID-19 Vaccinations

In the U.S., people are considered fully vaccinated for COVID-19:

- 2 weeks (14 days) after an accepted single-dose vaccine
- 2 weeks (14 days) after their second dose of an accepted 2-dose series
- 2 weeks (14 days) after they received the full series of an accepted COVID-19 vaccine (not placebo) in a clinical trial
- 2 weeks (14 days) after they received 2 doses of any "mix-and-match" combination of [accepted COVID-19 vaccines](#) administered at least 17 days apart*

* CDC has not recommended the use of mix-and-match COVID-19 vaccine primary series. However, such strategies are increasingly common in many countries outside of the United States. Therefore, for the of purpose of interpreting vaccination records for travel to the United States, CDC will accept combinations of [accepted COVID-19 vaccines](#).

People are considered not fully vaccinated if they have not completed a two-dose vaccination series or have not received a single-dose vaccine, regardless of age, including children under the age of 12. For the purposes of this guidance, those that are not fully vaccinated are referred to as unvaccinated.

As the majority of non-cruise ships are flagged in other countries, for the purposes of this guidance, maritime crew members *on board* a non-cruise ship are considered fully vaccinated if they have received the appropriate series of a vaccination authorized by a national government authority. If the maritime crew member disembarks the non-cruise ship at a U.S. port, CDC's definition of fully vaccinated will apply.

Pre-Boarding Procedures for Ships

Before anyone boards, conduct verbal or written screening in appropriate languages and in a private environment to determine whether persons have had [signs or symptoms](#) of COVID-19 or a known exposure ([close contact](#)) to a person with COVID-19 within the past 14 days. In addition, temperature checks should be used to identify any person with a temperature of 100.4°F (38°C) or greater.

Persons with [signs or symptoms](#) of COVID-19: Persons with signs or symptoms of COVID-19 who intend to board the ship should be denied boarding, regardless of vaccination status. These symptomatic persons should be assessed by medical personnel and either be determined not to have COVID-19 or complete isolation for COVID-19 before they are allowed to board.

Close Contacts: Unvaccinated persons who were exposed to a person with COVID-19 should be denied boarding until they complete a 14-day quarantine period.

Fully vaccinated persons who were exposed to a person with COVID-19 are not recommended to quarantine, but they should monitor their health until 14 days after their last exposure and follow guidance for testing and facemask wearing as detailed in CDC's guidance for [fully vaccinated persons](#). Allowing boarding is at the ship operator's discretion but a negative test at 5-7 days after exposure is recommended before boarding.

People who recovered from COVID-19 in the past 3 months do not need to quarantine or be tested after an exposure but should take the following precautions:

- Wear a facemask indoors in public for 14 days after exposure.
- Monitor for COVID-19 symptoms and isolate immediately if symptoms develop.
- Consult with a healthcare provider for testing recommendations if new symptoms develop.

Anyone who develops symptoms of COVID-19 after an exposure should isolate until it is safe for them to be around others or they are determined by medical personnel to not have COVID-19.

Because SARS-CoV-2 the virus that causes COVID-19, can spread from persons without symptoms, ship operators should consider having embarking crew who are not [fully vaccinated](#) quarantine for 14 days immediately before or upon boarding the ship to prevent introduction of the virus on board. If testing is feasible, crew members should be tested using a [viral COVID-19 test](#) with a result available prior to boarding.

Preventive Measures for Ship Operators

Shipping involves the movement of people from different geographic areas in settings with inevitable close contact. Like other close-contact environments, ships may facilitate transmission of respiratory viruses from person to person through exposure to respiratory droplets or small particles that contain the virus or contact with contaminated surfaces.

To reduce spread of respiratory infections including COVID-19, CDC recommends that ship operators take the following actions:

- Explore options to vaccinate crew for COVID-19. This includes encouraging crew to get a COVID-19 vaccine and working with local authorities to make arrangements for crew to get vaccinated while the ship is at port. Ship operators should keep records of the vaccination status of all crew.
- Educate all persons on board about the [signs and symptoms](#) of COVID-19.
- Assign crew to single-occupancy cabins with private bathrooms, if possible.
- Implement [physical distancing](#) of persons when working or moving through the ship (maintaining at least 6 feet [2 meters] from others).

MEASURES FROM OTHERS).

- Instruct persons to wear a [facemask](#) when outside of individual cabins (unless work duties prevent their safe use or necessitate personal protective equipment for hazardous reasons).
- Modify meal service to facilitate [physical distancing](#) (e.g., reconfigure dining room seating, stagger mealtimes, encourage in-cabin dining).
- Eliminate self-serve dining options at all meals.
- Minimize shore leave; if shore leave occurs, [preventive measures](#) are recommended.
- Discourage handshaking and instead encourage the use of non-contact methods of greeting.
- Promote [hand hygiene](#) and [cough etiquette](#).
- Place hand sanitizer (containing at least 60% alcohol) in multiple locations and in sufficient quantities to encourage [hand hygiene](#).
- Ensure handwashing facilities are well-stocked with soap, paper towels, and a waste receptacle or air dryer.
- Place [posters](#) that encourage [hand hygiene](#) and [physical distancing to help stop the spread](#) in high-trafficked areas.
- Educate workers that use of cigarettes, e-cigarettes, pipes, or smokeless tobacco can lead to increased contact between potentially contaminated hands and their mouths, and that avoiding these products may reduce their risk of infection.



Preventive Measures for Persons on Board the Ship

CDC recommends that all crew get a COVID-19 vaccine when one is available to them.

Persons who are fully vaccinated can follow CDC's [guidance for fully vaccinated people](#).

Persons who are not fully vaccinated (i.e., unvaccinated) should do the following to protect themselves and others:

- Avoid sharing personal items with other persons, such as blankets, laptops, video games, tablets and other hand-held devices.
- Wear a [facemask](#) indoors and when outside of individual cabins.
- Maintain a distance of at least 6 feet (2 meters) from others when working or moving through the ship. Note: If a 6-foot (2-meter) distance cannot be maintained in narrow corridors, then allow persons to pass completely before entering.
- Avoid physical contact with other people, including shaking hands, giving hugs, and cheek kissing.
- Avoid touching eyes, nose, and mouth with unwashed hands.
- [Wash hands](#) often with soap and water for at least 20 seconds.
- Use hand sanitizer (containing at least 60% alcohol) if soap and water are not available.

CDC has free, simple [posters available to download](#) and print, some of which are translated into different languages. The [Stop the Spread of Germs poster](#)  [PDF – 1 page] is also available in [Spanish](#)  [PDF – 1 page].

Symptomatic Persons on Board the Ship

Identifying and isolating persons with possible symptoms of COVID-19 as soon as possible is essential to minimize transmission of the virus. Educate crew to self-monitor for [symptoms of COVID-19](#). Sick persons, regardless of vaccination status or previous recovery from COVID-19, should self-isolate immediately and inform the Captain or medical designee if they develop a fever (100.4°F / 38°C or higher), begin to feel feverish, or develop acute respiratory symptoms (cough or difficulty breathing) or other [symptoms of COVID-19](#). All persons on board should be educated on, and aware of, the [emergency warning signs for COVID-19](#).

Ship medical personnel and telemedicine providers should reference CDC's COVID-19 website, [Information for Healthcare Professionals](#), for the latest information on infection control, clinical management, collecting clinical specimens, evaluating patients who may be sick with or who have been exposed to COVID-19, and identifying [close contacts](#). On non-cruise ships, all crew members are considered close contacts if a person with known or suspected COVID-19 is on board or disembarked within the past 14 days.

Isolation of Sick Persons or Confirmed Cases and Quarantine of Close Contacts

Persons with [symptoms of COVID-19](#), regardless of vaccination status or previous recovery from COVID-19, should be isolated using the same procedures as a person with confirmed COVID-19 until testing can be conducted and results are available. Symptomatic persons who test positive or who are not tested should be isolated until they meet [criteria to end isolation](#).

Quarantine of unvaccinated persons without symptoms who are identified as [close contacts](#) of sick persons (until COVID-19 test results are available) or confirmed cases is also needed to minimize on-board transmission. On non-cruise ships, all crew members are considered close contacts. Please see table below for quarantine options for crew on non-cruise ships.

- Isolate or quarantine persons in single-occupancy cabins, with private bathrooms, with the door closed, if possible. Persons should wear a facemask, i.e., [facemask](#) or surgical mask, any time they are outside of isolation or quarantine.
- Isolated or quarantined persons should have no direct contact with other persons except for medical designee.
- Designated ship medical personnel or other personnel should wear [proper personal protective equipment \(PPE\)](#) when in proximity to isolated or quarantined persons. Breaches in PPE or any potential exposures should be reported to the appropriate medical designee.
- Meals should be packaged in disposable dining ware with single-use cutlery and delivered to individual cabins with no face-to-face interaction during this service.
- To the extent possible, cabins housing isolated or quarantined persons should not be cleaned by other persons. Supplies such as paper towels, cleaners, [disinfectants](#) [↗](#), and extra linens can be provided to isolated or quarantined persons so they can clean their own cabin as necessary.
- Food waste and other garbage should be collected and bagged by the isolated or quarantined person and placed outside the cabin during designated times for transport to the garbage/recycle room for incineration or offloading.
- Soiled linens and towels should be handled by the isolated or quarantined person and placed outside the cabin in labeled bags during designated times for transport to the laundry room.

Fully vaccinated persons who were exposed to a person with COVID-19 are not recommended to quarantine but they should monitor their health until 14 days after their last exposure and follow guidance for testing (if possible) and wear a facemask, as detailed in CDC's [guidance for fully vaccinated persons](#).

People who recovered from COVID-19 in the past 3 months do not need to quarantine or be tested after an exposure but should take the following precautions:

- Wear a facemask indoors in public for 14 days after exposure.
- Monitor for COVID-19 symptoms and isolate immediately if symptoms develop.
- Consult with a healthcare provider for testing recommendations if new symptoms develop.

Options for Managing Non-Cruise Ships with One or More Confirmed Cases of COVID-19

The following table provides management options for non-cruise ships and their crew after a confirmed case of COVID-19 is identified. Decisions regarding the best option for managing an individual ship and exposed crew on board should take into account various factors (e.g., the industry, seaport location, itinerary, and the availability of alternate crew).

Note: The ship should be allowed to come into port for all disembarkations, disinfection, and embarkations. There is an increased safety risk, to the crew and port partners, associated with embarking or disembarking a ship while at anchorage (i.e., keeping the ship at sea). In addition, quarantine of crew while the ship is at anchorage can be difficult due to the increased number of essential crew needed to safely maintain ship operations at anchor (i.e., operations are minimized on a ship while it is at a dock, which allows crew to quarantine more safely).

Options for Managing Non-Cruise Ships with One or More Cases of COVID-19

	Contact Management	Case Management

	Contact Management	Case Management
Option 1: Crew Change Out	<ul style="list-style-type: none"> • All unvaccinated crew disembark for 14-day shoreside quarantine[†] • Frequently touched surfaces (e.g., door handles, handrails, light switches, phones) in shared spaces on board are cleaned and disinfected, then • New crew[‡] embark ship to resume operations 	<ul style="list-style-type: none"> • First case: isolation (ideally shoreside)
Option 2: Working Quarantine	<ul style="list-style-type: none"> • Onboard 14-day “working” quarantine[¥] of all unvaccinated crew without signs or symptoms (crew without symptoms who are fully vaccinated or who recovered from COVID-19 in the past 3 months do not need to quarantine)** <ul style="list-style-type: none"> ◦ Strict physical distancing ◦ Mandatory facemask • Frequently touched surfaces (e.g., door handles, handrails, light switches, phones) in shared spaces on board are cleaned and disinfected • If any unvaccinated crew on board, ship operations resume with ship remaining close to shore (i.e., within approximately 1-hour medivac distance) for potential medical evacuations of crew 	<ul style="list-style-type: none"> • First case: isolation (ideally shoreside) • Additional symptomatic crew (regardless of vaccination status) to be isolated in cabins[§]
Option 3: Temporarily Discontinue Operations	<ul style="list-style-type: none"> • Onboard 14-day quarantine of non-essential, unvaccinated crew • “Working” quarantine[¥] of essential unvaccinated crew without signs or symptoms (crew without symptoms who are fully vaccinated or who recovered from COVID-19 in the past 3 months do not need to quarantine) <ul style="list-style-type: none"> ◦ Strict physical distancing ◦ Mandatory facemask • Frequently touched surfaces (e.g., door handles, handrails, light switches, phones) in shared spaces on board are cleaned and disinfected • Ship operations suspended (i.e., ship stays at dock, berth, or anchorage) 	<ul style="list-style-type: none"> • First case: isolation (ideally shoreside) • Additional symptomatic crew (regardless of vaccination status) to be isolated in cabins[§]

* Ships with 100% of crew fully vaccinated are exempt from contact management options above (i.e., do not need to choose an option) but should manage crew according to CDC’s [guidance for fully vaccinated persons following an exposure](#).

** Fully vaccinated persons who were exposed to a person with COVID-19 are not recommended to quarantine but they should monitor their health until 14 days after their last exposure and follow guidance for testing (if possible) and wear a facemask, as detailed in CDC’s [guidance for fully vaccinated persons](#). People who recovered from COVID-19 in the past 3 months do not need to quarantine or be tested after an exposure but should monitor their health until 14 days after their last exposure.

† Approval for quarantine facility required from local health department.

‡ Preferable that all new crew are fully vaccinated for COVID-19

¥ For a “working” quarantine, follow the [CDC Critical Infrastructure Guidance](#). Unvaccinated crew who have been exposed to COVID-19 but remain without symptoms may continue to work, provided they adhere to additional safety precautions.

§ If emergency medical evacuations are needed, U.S. Coast Guard (USCG) and/or Customs and Border Protection (CBP) should be notified.

Monitoring after a Suspected or Confirmed Case Is Identified

If a person with known or suspected COVID-19 is on board or disembarked within the past 14 days, then all close contacts who are not fully vaccinated should have twice daily temperature checks. If ship operators can provide thermometers, self-temperature checks are preferable. Temperature checks should be reported to and recorded by the ship's designated medical personnel or the Captain at least daily. Additionally, persons on board should be aware of the [signs and symptoms](#) of COVID-19 and the importance of immediately self-isolating in cabins if they experience signs or symptoms.

Discontinuation of Isolation

Isolation may be discontinued for sick persons with suspected or confirmed COVID-19, or persons without symptoms but with laboratory-confirmed COVID-19, once criteria outlined in CDC's guidance for [Discontinuation of Isolation for Persons with COVID-19 Not in Healthcare Settings](#) are met.

Discontinuation of Quarantine

Quarantine (when recommended) may be discontinued for persons without symptoms who have had close contact with suspected or confirmed COVID-19 cases under the following conditions:



- 14 days have passed since their last exposure to a suspected or confirmed case (considering the last exposure date to case as Day 0); and
- the exposed person has not developed [signs or symptoms](#) of COVID-19

Disembarking Persons on Board to Obtain Medical Care or for Isolation on Shore

Ship operators and shipping agents are responsible for the medical care of sick or infected persons on board, including those who need hospitalization. For persons who need emergency medical attention that cannot be provided on the ship, ship operators and shipping agents should coordinate with the shoreside healthcare facility, port authority, U.S. Coast Guard, and state and local health department, if required.

- Medical transport to the shoreside medical facility must be arranged in advance in coordination with the receiving facility.
- Sick persons should wear a facemask during the disembarkation process and throughout transportation to the shoreside healthcare facility, if they can tolerate a facemask.
- If a sick person is known to have COVID-19 or has symptoms compatible with COVID-19:
 - All escorting personnel should wear [appropriate PPE](#).
 - The gangway should be cleared of all other personnel until the sick person has disembarked.
 - The pathway used for disembarkation, any potentially contaminated surfaces (e.g., handrails) along the pathway, and any equipment used (e.g., wheelchairs) should be cleaned and disinfected immediately after disembarkation (see [Cleaning and Disinfection](#) section below).

Use of commercial transportation by individuals who are determined to have fully recovered from COVID-19 based on [CDC criteria](#) for discontinuing isolation, and thus do not present a public health risk, may occur as follows:

- Medical personnel are responsible for providing the individual with a medical certificate stating that the person has recovered from COVID-19 and met CDC's criteria for discontinuing isolation.
- The medical certificate must meet the requirements of [Department of Transportation regulations](#)  [\[PDF – 958 pages\]](#)  (14 Code of Federal Regulations § 382.23(c)(2)).

Disembarking Crew without Symptoms from Ships after a Confirmed Case Is Identified

During the COVID-19 pandemic, the following should be observed by ships disembarking crew in the United States (cruise ships operating under CDC's COVID-19 Program for Cruise Ships should continue to follow the recommendations and guidance in CDC's [Technical Instructions for CDC's COVID-19 Program for Cruise Ships Operating in U.S. Waters](#) and the [Operations Manual for CDC's COVID-19 Program for Cruise Ships Operating in U.S. Waters](#)).

What Maritime Pilots Need to Know about COVID-19

- Before disembarking crew, the ship operator or shipping agent should get advance approval from the local and state health departments with jurisdiction over:
 - the port of disembarkation, and
 - the state and county of residence for any quarantine locations
- Ship operator or shipping agent should inform ship pilots and ground transportation of the situation and confirm the operators have plans in place to notify and protect the health and safety of their staff.
- Ship operator or shipping agent should provide [facemasks](#) to disembarking crew members or confirm that they have their own. Crew members without symptoms should wear facemasks during disembarkation and while taking ground transportation until they reach their final destination.
- Ship operator or shipping agent should instruct disembarking unvaccinated crew members to stay in [quarantine](#) and should arrange for accommodation, meals, garbage collection, and laundry services during that time. Facility and housekeeping personnel must be aware of the situation and precautions should be in place to prevent their exposure.
- Ship operator or shipping agent should ensure that disembarking unvaccinated crew members:
 - will not use public transportation (including taxis or ride-share services) to get to the quarantine destination
 - will have no interaction with the public during their travel to quarantine location (e.g., rental car companies, restaurants)

Disembarking Non-crew without Symptoms from Ships after a Confirmed Case Is Identified

During the COVID-19 pandemic, the following should be observed by ships in the U.S. (cruise ships operating under CDC's COVID-19 Program for Cruise Ships should continue to follow the recommendations and guidance in CDC's [Technical Instructions for CDC's COVID-19 Program for Cruise Ships Operating in U.S. Waters](#) and the [Operations Manual for CDC's COVID-19 Program for Cruise Ships Operating in U.S. Waters](#)).

- Ship operator or shipping agent should provide [facemasks](#) to disembarking non-crew or confirm that they have their own.
- Ship operator or shipping agent should instruct disembarking unvaccinated non-crew members to stay in [quarantine](#) after they reach their destination. Ship operator or shipping agent should ensure that disembarking non-crew who are not fully vaccinated:
 - will not stay overnight in a hotel (unless pre-arranged with hotel and local public health)
 - will have private transportation procured (non-crew will not use commercial air or public transportation, including taxis or ride-share services)
 - will have no interaction with the public during their disembarkation (e.g., rental car companies, restaurants)
 - will follow <https://www.cdc.gov/coronavirus/2019-ncov/travelers/cruise-travel-during-covid19.html>

In addition, the ship operator should follow all state and local stipulations for disembarking non-crew.


Reporting



CDC requires that ships destined for a U.S. port of entry immediately report any death on board or illness that meets CDC's definition of "ill person," including confirmed or suspected cases of COVID-19, to the [CDC Quarantine Station](#) with jurisdiction for the port.

Additional information for non-cruise ships: If the person's signs and symptoms are consistent with CDC's standard [required reporting](#) requirements, please have the following information available before notifying the nearest [CDC Quarantine Station](#):

1. List of the sick person's [signs and symptoms](#) including onset dates

1. List of the sick person's [signs and symptoms](#), including onset dates.
2. If the sick traveler has been in contact with a person with COVID-19 or a sick person.
3. Has this sick traveler been fully vaccinated for COVID-19? If yes, please confirm vaccine type/name and dates of administration.
4. Will the sick travelers be medically disembarked? If deceased, will the body be transferred to the medical examiner?
5. Are there any other sick persons on the ship with similar symptoms? If so, have they been isolated?
6. How many travelers onboard are fully vaccinated for COVID-19 and how many are not fully vaccinated?

Ships that are *not* arriving from a foreign port of entry should notify the local or state health department with jurisdiction over the arrival seaport. Passenger-carrying ships on interstate voyages within the United States should notify the Federal Drug Administration (FDA) [Interstate Travel Program](#) .

For illnesses or deaths occurring onboard ships on international voyages to countries other than the United States, complete the Maritime Declaration of Health and send it to the competent authority for the destination port, according to the [2005 International Health Regulations](#)  [\[PDF – 32 pages\]](#)  and the national legislation of the country of disembarkation.

Port Staff Interactions with Ships after a Suspected or Confirmed Case is Identified on Board

CDC recommends that port staff who will board the ship do **not** have contact with persons on board. Crew members should not disembark unless they need medical care or will be isolated shoreside.

Persons at [higher risk for severe illness](#) should not board the ship.

Per CDC's [Order](#), port staff and travelers are required to wear facemasks while indoors at seaports and ferry terminals. Facemasks are also required in indoor areas of a conveyance (including vessels destined for or departing from a U.S. port), except as noted in the [Frequently Asked Questions](#). For more information, see [Requirement for Face Masks on Public Transportation Conveyances and at Transportation Hubs](#).

Due to the current COVID-19 pandemic, CDC recommendations include the following precautions for port staff:

1. [Wash your hands](#) often with soap and water for at least 20 seconds after disembarking the ship or after interacting with crew, touching a potentially contaminated surface, blowing your nose, coughing, or sneezing, or using the toilet, and before eating or drinking.
2. If soap and water are not readily available, use a hand sanitizer containing at least 60% alcohol. Cover all surfaces of your hands and rub them together until they feel dry.
3. Avoid touching your eyes, nose, and mouth with unwashed hands (or while wearing gloves, if used).
4. Keep distance (at least 6 feet) between yourself and persons on board or disembarking to the extent possible.
5. If you use gloves, wash your hands before putting them on and immediately after removing them.

Due to the current COVID-19 pandemic, port staff should remember the [signs and symptoms](#) of COVID-19 and know [what to do if they get sick](#).

Supplies

Ships should ensure availability of conveniently located dispensers of alcohol-based hand sanitizer containing at least 60% alcohol. Where sinks are available, ensure handwashing supplies (such as soap and disposable towels and waste receptacle, or air dryer) are consistently available.

Ships should carry a sufficient quantity of:

- [Personal Protective Equipment \(PPE\)](#), including facemasks, [NIOSH-approved](#) disposable N95 filtering facepiece respirators or higher, eye protection such as goggles or disposable face shields that cover the front and sides of the face, and disposable medical gloves and gowns.

- If [NIOSH-approved](#) disposable N95 filtering facepiece respirators or higher are required, an [OSHA or equivalent respiratory protection program](#) [↗](#) that includes medical clearance and fit testing should be implemented.
- Facemasks to meet day-to-day needs.
- [Medical supplies](#) to meet day-to-day needs. Have contingency plans for rapid resupply during outbreaks.
- Sterile viral transport media and sterile swabs to [collect nasopharyngeal and nasal specimens](#) for diagnostic testing if COVID-19 is suspected.
- Maintain adequate onboard supplies of antipyretics (fever-reducing medications such as acetaminophen, paracetamol, or ibuprofen), routine antiviral and antimicrobial medications, and supplemental oxygen. Please note that during the COVID-19 pandemic, this may vary from what is stipulated under the [Guidelines on the Medical Examinations of Seafarers](#) [📄](#) [\[PDF – 70 pages\]](#) [↗](#) (Appendix H, Standard A4.1, #4).

These optimal recommendations can be modified to reflect individual ship capabilities and characteristics.

Additional Considerations

- Develop role-based policies to protect employees and provide training to all crew and cleaning staff before they begin work. Follow applicable guidance for [bloodborne pathogens](#), PPE, and hazards associated with cleaning, disinfection and other chemicals used.
- Educate employees to recognize the [signs and symptoms](#) of COVID-19 and provide instructions on what to do if they develop [symptoms](#).
- Instruct crew members and other staff who may have contact with people with symptoms of COVID-19 in the [proper use, storage, and disposal of PPE](#). Incorrect use or handling of PPE can increase the spread of disease. All crew who are required to wear PPE as part of their job should be trained on the following topics:
 - An understanding of when to use PPE
 - What PPE is necessary and why for each role (see above for PPE recommendations)
 - How to [properly don \(put on\), use, and doff \(take off\) PPE](#)
 - How to properly dispose of PPE
- If a U.S.-based crewmember is a confirmed case, maintain the person's confidentiality as required by the [Americans with Disabilities Act](#) [↗](#) (ADA).

Cleaning and Disinfection

Numerous researchers have studied how long SARS-CoV-2 can survive on a variety of porous and non-porous surfaces. On porous surfaces, [studies report](#) the inability to detect viable virus within minutes to hours; on non-porous surfaces, viable virus can be detected for days to weeks. Cleaning of visibly dirty surfaces followed by disinfection helps prevent COVID-19 transmission.






In addition to using routine cleaning and disinfection strategies, ships should focus on cleaning and disinfecting common areas where persons may come into contact with infectious persons. Consider frequent, routine cleaning and disinfection of commonly touched surfaces, such as handrails, countertops, and doorknobs, with an [EPA-registered disinfectant](#) [↗](#) effective against coronaviruses.

Timing and location of cleaning and disinfection of surfaces



- Follow CDC's [Cleaning and Disinfecting Your Facility](#) recommendations.
- Close off areas used by sick persons after they are vacated and wait as long as practical before beginning cleaning and disinfection to minimize potential for exposure to respiratory droplets or small particles that contain the virus:
 - Use the ship's ventilation system to exhaust as much air as possible from indoor areas and, if possible, open outside doors and windows to increase air circulation in the area.
 - If possible, wait up to 24 hours before beginning cleaning and disinfection.
- Cleaning staff should clean and disinfect all areas (e.g., cabins, bathrooms, and common areas) used or visited by the sick persons, focusing especially on frequently touched surfaces (see PPE guidance below).

In areas where sick persons are being housed in isolation, follow CDC's guidance for [cleaning and disinfecting after someone is sick](#). This includes focusing on cleaning and disinfecting common areas where crew members providing services may come into contact with sick persons. To the extent possible, cabins housing sick or quarantined persons should not be cleaned by other crew members. Supplies (e.g., paper towels, cleaners, disinfectants) can be provided to sick or quarantined persons, to the extent possible, so they can clean their own cabins as necessary. If cleaning by another person is essential, the person should be trained to use PPE, provided with the necessary PPE, and trained on safe cleaning procedures.

How to Clean and Disinfect Surfaces

- Clean all high-touch surfaces in the sick person's cabin (e.g., counters, tabletops, doorknobs, light switches, bathroom fixtures, toilets, phones, keyboards, tablets, bedside tables)
- If surfaces are dirty, they should be cleaned using a detergent or soap and water prior to disinfection.
- For disinfection, diluted household bleach solutions, alcohol solutions with at least 70% alcohol, and most common [EPA-registered disinfectant](#)  should be effective.
 - Diluted household bleach solutions can be used if appropriate for the surface. Follow manufacturer's instructions for application and proper ventilation. Check to ensure the product is not past its expiration date. Never mix household bleach with ammonia or any other cleanser. Unexpired household bleach will be effective against coronaviruses when properly diluted.
 - Prepare a bleach solution by mixing:
 - 5 tablespoons (1/3 cup) bleach per gallon of water or
 - 4 teaspoons bleach per quart of water
 - Products with [EPA-approved emerging viral pathogens claims](#)  are expected to be effective against SARS-CoV-2 based on data for harder-to-kill viruses. Follow the manufacturer's instructions for all cleaning and disinfection products (e.g., concentration, application method, contact time).
 - For soft (porous) surfaces such as carpeted floor, rugs, and drapes, remove visible contamination if present and clean with appropriate cleaners indicated for use on these surfaces. After cleaning:
 - If the items can be laundered, launder them in accordance with the manufacturer's instructions using the [warmest appropriate](#)  [\[PDF – 9 pages\]](#)  water setting for the items and then dry items completely.
 - Otherwise, use products with the [EPA-approved emerging viral pathogens claims](#)  that are suitable for porous surfaces.

Laundered Items (e.g., linens, clothing)

- Do not shake dirty laundry; this minimizes the possibility of dispersing SARS-CoV-2, the virus that causes COVID-19, through the air.
- Wash items as appropriate in accordance with the manufacturer's instructions. If possible, launder items using the [warmest appropriate](#)  [\[PDF – 9 pages\]](#)  water setting and dry items completely. Dirty laundry that has been in contact with a sick person can be washed with other people's items.
- If possible, have the sick person place laundry in a disposable plastic bag for transport to the laundry facilities.
- Clean and disinfect hampers or other carts for transporting laundry according to guidance above for hard or soft surfaces.

Other areas



- No additional cleaning is needed for the ship's supply-and-return ventilation registers or filtration systems.
- No additional [treatment of wastewater](#) is needed.

Personal Protective Equipment (PPE) and Hand Hygiene for Cleaning Staff

Cleaning staff should:




- Wait 24 hours or as long as practical before beginning cleaning and disinfection of cabins vacated by persons with confirmed COVID-19.
- Wear disposable gloves and gowns for all tasks in the cleaning process, including handling laundry and garbage.
 - If cleaning occurs soon after the departure of the person with COVID-19, consider all using respiratory protection and eye protection.
 - Gloves and gowns should be compatible with the disinfectant products being used per the manufacturers' directions.
 - Additional PPE might be required based on the cleaning/disinfectant products being used and whether there is a risk of splash.
 - Gloves and gowns should be removed carefully to avoid contamination of the wearer and the surrounding area. Be sure to [perform hand hygiene](#) after removing gloves.
- Remove and replace PPE that has been breached (e.g., tear in gloves). Report breaches in PPE or any potential exposures to the supervisor.
- [Perform hand hygiene](#) often, including immediately after removing gloves and after contact with a sick person, by washing hands with soap and water for 20 seconds. If soap and water are not readily available, use an alcohol-based hand sanitizer containing at least 60% alcohol. Always wash hands with soap and water if hands are visibly dirty.

Other environmental considerations include:

- Launder soiled linens and towels collected from cabins occupied by isolated or quarantined persons in washing machines set at the [warmest appropriate](#)  [\[PDF – 9 pages\]](#)  water setting for the items, and dry items completely.
- Identify pathways to minimize risk of respiratory transmission when persons are required to move in and out of isolation or quarantine corridors and during the transport of waste and soiled linens generated by isolated or quarantined persons.
- Clean and disinfect designated trolleys/carts used for the transportation of waste and soiled linens from isolation or quarantine cabins with an effective disinfectant after each use.
- Properly dispose of items that cannot be effectively cleaned and disinfected or laundered.

Resources for More Information

Stay informed. Use these sources for more information on COVID-19:

- [NIOSH Workplace Safety and Health Topic website](#)
- [Food Safety and Coronavirus Disease 2019 \(COVID-19\)](#)
- [CDC COVID-19 website](#)
- [OSHA COVID-19 website](#) 
- [USCG Marine Safety Information Bulletin 2020](#) 
- World Health Organization (WHO): [Operational Considerations for Managing COVID-19 Cases/Outbreak on Board Ships](#) 

Summary of Past Changes

On November 5, 2021, the criteria for people considered fully vaccinated against COVID-19 was updated.

On November 1, 2021, the definition of cruise ships was narrowed by adding “foreign-flagged,” in accordance with the minor modifications made in the [Temporary Extension & Modification of the CSO](#). Additionally, the criteria for people considered fully vaccinated against COVID-19 was updated.

On October 25, 2021 the COVID-19 Vaccination guidance was updated to align with updated [guidance for fully vaccinated people](#)

On September 23, 2021 this guidance was updated to clarify CDC's recommendations for crew members who are [fully vaccinated](#).

On September 17, 2020, this guidance was updated to clarify CDC's recommendation for non-cruise ships upon entry into a U.S. port after one or more confirmed cases of COVID-19 is identified.

On July 20, 2020, this guidance was updated to provide the following:

- Specific guidance for ships when one or more suspected or confirmed cases of COVID-19 is identified.
 - Clarified disembarkation recommendations for ships after one or more suspected or confirmed cases of COVID-19 is identified.
 - Supplemental guidance on cleaning and disinfection.
-

Revisions were made on February 18, 2020 to reflect the following:

- Clarified guidance on laundry and disposal of used PPE and other disposable items.
-

Revisions were made on February 13, 2020 to reflect the following:

- Updated guidance title to include "Suspected"
- Updated 2019-nCoV to "Coronavirus Disease 2019 (COVID-19)"
- Updated guidance on managing sick passengers or crew when boarding and onboard to isolate passengers or crew onboard who are suspected of having COVID-19.
- Updated guidance on preventing infection in crew members to include asking the sick person to wear a facemask if tolerated, any time they leave their cabin or interact with other people.
- Updated guidance on additional items to report for non-cruise ships.