

**From:** (b)(6)&(b)(7)(C)  
**To:** (b)(6)&(b)(7)(C)  
**Subject:** Fwd: USBP REPORTING REQUIREMENT & ACTIONS - COVID-19 - UPDATED REQUIREMENTS - IRAN  
**Date:** Tuesday, March 3, 2020 5:26:09 PM  
**Attachments:** [Guidance to BP Sectors on Novel Coronavirus 03032020.pdf](#)  
[ATT0001.htm](#)  
[POTUS PROCLAMATION COVID-19 02292010\\_Iran.pdf](#)  
[ATT0002.htm](#)

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SBPAs, please see the attached and below update re: COVID-19 reporting, with inclusion of Iran.

(b)(6)&(b)(7)(C)

Sent from my Verizon, Samsung Galaxy smartphone

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**From:** (b)(6)&(b)(7)(C) @CBP.DHS.GOV>  
**Sent:** Tuesday, March 3, 2020, 5:21 PM  
**To:** (b)(6)&(b)(7)(C)  
**Cc:** (b)(6)&(b)(7)(C)  
**Subject:** Fwd: USBP REPORTING REQUIREMENT & ACTIONS - COVID-19 - UPDATED REQUIREMENTS - IRAN

Please see the new expanded guidance which includes screening for the following countries:

## CHINA

## IRAN

CBP National Reporting Requirement for all potential cases and contacts with persons who meet the requirements of the Guidance to BP Sectors on COVID-19 dated 03/03/2020 (attached along with other pertinent important safe handling procedures)

## **MANDATORY REPORTING REQUIREMENT:**

**Reporting Requirements (Applies to all detainees with potential/suspected COVID-19).**

**Reports must be made within 1-hour or as soon as operationally practicable.**

**Ensure contact is made with the CDC EOC Watch Desk as outlined in the attached *Guidance to BP Sector on Novel Coronavirus***

**Guidance to BP Sectors on COVID-19 Encounters - Applies to at risk countries identified in Presidential Proclamations**

(USE THE BELOW TEMPLATE ON EVERY REPORT MEETING THE GUIDELINES)

Name

A#

DOB

Date of Apprehension:

Location of Apprehension:

Travel History:

- a) Travel within **to/through/from at risk country within the last 14 days**: Y/N
- b) Details

Symptoms (fever/cough/difficulty breathing): Y/N

Consulted with CDC (if positive travel within at risk country within last 14 days): Y/N

Disposition:

- a) Referred to hospital: Y/N
- b) Segregated/Monitored: Y/N
- c) Quarantined (per CDC): Y/N
- d) Transferred to ICE/ERO: Y/N
- e) Released: Y/N

**REPORTS MUST BE ROUTED THROUGH: the CoC, USBP CORRIDOR with a CC to the following EMAIL DISTRO: (b) (7)(E)**

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- **REMINDER: CONSULTATION W/ CDC:** USBP Agents do not have to contact CDC unless the person meets the at risk country travel history requirement, within the last 14 days. Unless there are some concerns the agents on the ground feel based on their observations and they want to clear through CDC just to be on the safe side. But there is no requirement beyond that.

Consulted with CDC (if positive travel within at risk country within last 14 days): Y/N

**03/03/2020**

**CURRENT AT RISK COUNTRY GUIDANCE: (subject to change)**

**CHINA**

**IRAN**

**Guidance to BP Sectors on COVID-19 Encounters**

**Applies to at risk countries identified in Presidential Proclamations**

**Situation Summary**

CBP is working with The Centers for Disease Control and Prevention (CDC) to closely monitor an outbreak caused by a novel (new) coronavirus (2019-nCoV) first identified in Wuhan City, Hubei Province, China. The situation is evolving. For the most current information, monitor DHS and CBP messages and check the CDC information page at <https://www.cdc.gov/coronavirus/2019-ncov/index.html> frequently for updates.

While most of the people identified with 2019-nCoV have association with Wuhan City, there has been significant spread throughout China and increasingly to other countries around the world. To date there have been multiple confirmed cases in the United States; this number is expected to continue to increase. The USG has enacted strict entry restriction and screening measures for persons with travel to China and this scope will increase to other at risk countries identified in Presidential Proclamations with direct nexus to the COVID-19.

**I. CBP Workforce Health Protection Guidance**

- CBP Senior Medical Advisor continues to work with CBP OSH, DHS OCHCO, BP Safety, and BP operational leadership to monitor workforce health protection issues and PPE recommendations and requirements
- ***Updated CBP Job Hazard Analysis and PPE Assessment attached***
- ***Agents may print attached pocket cards for distribution as appropriate***
- The situation and information continue to evolve rapidly. Additional guidance or modifications will be provided as appropriate. If additional countries are added based on Presidential Proclamations or other orders as received through the CBP chain of command you will be notified in future versions of this document.

**II. Reporting Requirements (Applies to all detainees with potential/suspected COVID-19). Reports must be made within 1-hour or as soon as operationally practicable.**

**EVERY DETAINEE FROM ANY COUNTRY WITH NEXUS AND TRAVEL HISTORY TO/THROUGH/FROM AT RISK COUNTRIES OUTLINED IN PRESIDENTIAL PROCLAMATIONS RELATED TO COVID-19:**

Name

A#

DOB

Date of Apprehension:

Location of Apprehension:

Travel History:

- a) Travel within to/through/from at risk country within the last 14 days: Y/N
- b) Details

Symptoms (fever/cough/difficulty breathing): Y/N

Consulted with CDC (if positive travel within at risk country within last 14 days): Y/N

Disposition:

- a) Referred to hospital: Y/N
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- c) Quarantined (per CDC): Y/N
- d) Transferred to ICE/ERO: Y/N
- e) Released: Y/N

**REPORTS MUST BE ROUTED THROUGH: the CoC, USBP CORRIDOR with a CC to the following EMAIL DISTRO: (b) (7)(E)**

**III. Guidance for Border Patrol encounters with potential nCoV cases**

**1. During Field Encounter/Intake Processing**

- a. Ask detainees if they have traveled to/through/from at risk country in the past 14 days
- b. If no, continue regular processing to include health intake interview and medical assessment as appropriate.
- c. If yes, provide surgical mask, segregate (as a group if necessary), refer detainee to medical personnel onsite if available for health intake interview/medical assessment as appropriate, contact CDC quarantine station, and follow guidance below in consultation with medical personnel
  - i. If no medical personnel available onsite => place surgical mask, segregate (as a group if necessary), contact CDC quarantine station, and follow guidance below.
- d. For detainees with recent travel to/through/from at risk country AND signs/symptoms of illness → refer to #2 below
- e. For detainees with recent travel to/through/from at risk country AND NO signs/symptoms of illness → provide surgical mask, segregate (as a group if

necessary), monitor for flu-like symptoms (cough, difficulty breathing, shortness of breath, complains of fever).

- i. Ensure appropriate workforce PPE (Section 1 above and JHA attached)
- ii. If detainee develops flu-like symptoms, then see #2 below
- iii. **Ensure contact with CDC EOC Watch Desk/local CDC quarantine station to determine disposition prior to transfer or release**
- iv. Continue processing and coordinate expedited transfer to ICE or HHS as appropriate with proper notification and documentation of circumstances.

**2. For detainees with recent travel to/through/from at risk nation AND symptoms of respiratory illness:**

- a. Ensure a tight-fitting surgical mask is on the detainee.
- b. Isolate the detainee to the extent possible. Practice social distancing.
- c. Ensure appropriate workforce PPE (Section 1 above and JHA attached) and notify local collateral duty safety officer if additional PPE is required
- d. Promptly consult with local medical contract personnel if available
- e. Coordinate transfer to hospital for evaluation with advanced notification of circumstances (if seriously ill – activate 911/EMS with notification of circumstances)
- f. **Ensure contact with CDC EOC Watch Desk/local CDC quarantine station for disposition**

**3. For close contacts of detainees with travel to/through/from at risk country within 14 days**

- a. Provide surgical mask
- b. Implement segregation (as a group if necessary) with restricted movement
- c. **Contact CDC EOC Watch Desk/local CDC quarantine station to determine disposition**
- d. Monitor segregated detainees to observe for flu-like symptoms, if symptoms develop – see #2 above
- e. Coordinate expedited transfer to ICE or HHS as appropriate

**CDC Points of Contact:**

- CDC EOC/Watch Desk – 1-866-638-9753 Opt # 0 (24 hour ops)
- El Paso Quarantine Station – 1-915-834-5950
- San Diego Quarantine Station – 1-619-692-5665

**CBP Medical Points of Contact:**

- (b)(6)&(b)(7)(C) CBP Senior Medical Advisor - (b)(6)&(b)(7)(C)  
(b)(6)&(b)(7)(C) [REDACTED]
- (b)(6)&(b)(7)(C) CBP Medical Planner - (b)(6)&(b)(7)(C)  
(b)(6)&(b)(7)(C) [REDACTED]

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**From:** (b)(6)&(b)(7)(C)  
**Sent:** Sunday, March 8, 2020 11:42 AM  
**To:** (b)(6)&(b)(7)(C)  
**Cc:** (b)(6)&(b)(7)(C)  
**Subject:** COVID-19 Reporting

ALL,

Please cascade to all managers and ensure that the following practices are followed when dealing with COVID-19 related issues.

For the field:

To the extent operationally feasible all agents must conduct a quick health assessment (just an average agents best assessment - not a true medical evaluation) of all subjects at arrest -in the field and prior to transport. If agents suspect any signs/symptoms associated with an illness such as the flu or potentially the coronavirus (COVID-19), that individual, and those associated with the same event, should be transported separate and apart from any other subjects. They should be isolated to the maximum extent possible until a formal medical evaluation determines that they are not infected and/or contagious. If at all possible, anyone exhibiting symptoms should not be taken inside of BP facilities.

For all managers, field and professional staff:

**Immediately** notify DRT Command staff (Respective Division Chief, (A) DCPA/(A) CPA) of any **employee** that tests positive for COVID-19. Immediately means wake us up.

**Immediately** notify (Respective Division Chief, (A) DCPA/(A) CPA) of any **subject** in custody that tests positive for Covid19. Immediately means wake us up.

**Do not** make any public statements without specific approval from DRT Strategic Communications Branch, AND ask hospital staff/medical personal to do the same. Until, at a minimum, DHS/CBP and CDC leadership have been notified.

The following is standard SOP; however, please **reiterate to all personnel that they are prohibited from making any public statements and/or social media postings/comments** about any subject we have arrested and/or have in custody, who shows signs of being ill-this is extremely important when it comes to confirmed cases of COVID-19.

Lastly - please ensure all personnel that we will be transparent with them and the public, if and when we encounter an individual that is positive for COVID-19. These guidelines are simply to ensure that we manage this like the professionals that we are, and that we are meeting our responsibility to first notify the lead agency for this issue (CDC and COVID-19 Taskforce). We must insure that we are keeping them fully informed, AND that we don't exacerbate public fears.

We don't want to create panic and most of these issues are probably on the forefront of our daily operations as we attempt to be proactive concerning this latest challenge. Keep up the good work and refer any questions you have to the staff here at DRT.

Thanks

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**03/11/2020**

**CURRENT AT RISK COUNTRY GUIDANCE:**

China - Iran - Austria - Belgium - Czech Republic - Denmark - Estonia- Finland  
France - Germany - Greece - Hungary - Iceland - Italy - Latvia - Liechtenstein - Lithuania  
Luxembourg - Malta - Netherlands - Norway - Poland - Portugal - Slovakia - Slovenia - Spain  
Sweden - Switzerland

**Guidance to BP Sectors on COVID-19 Encounters**  
**Applies to at risk countries identified in Presidential Proclamations**

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- ***Agents may print attached pocket cards for distribution as appropriate***
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Name

A#

DOB

Date of Apprehension:

Location of Apprehension:

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**III. Guidance for Border Patrol encounters with potential nCoV cases**

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necessary), monitor for flu-like symptoms (cough, difficulty breathing, shortness of breath, complains of fever).

- i. Ensure appropriate workforce PPE (Section 1 above and JHA attached)
- ii. If detainee develops flu-like symptoms, then see #2 below
- iii. **Ensure contact with CDC EOC Watch Desk/local CDC quarantine station to determine disposition prior to transfer or release**
- iv. Continue processing and coordinate expedited transfer to ICE or HHS as appropriate with proper notification and documentation of circumstances.

**2. For detainees with recent travel to/through/from at risk nation AND symptoms of respiratory illness:**

- a. Ensure a tight-fitting surgical mask is on the detainee.
- b. Isolate the detainee to the extent possible. Practice social distancing.
- c. Ensure appropriate workforce PPE (Section 1 above and JHA attached) and notify local collateral duty safety officer if additional PPE is required
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- e. Coordinate transfer to hospital for evaluation with advanced notification of circumstances (if seriously ill – activate 911/EMS with notification of circumstances)
- f. **Ensure contact with CDC EOC Watch Desk/local CDC quarantine station for disposition**

**3. For close contacts of detainees with travel to/through/from at risk country within 14 days**

- a. Provide surgical mask
- b. Implement segregation (as a group if necessary) with restricted movement
- c. **Contact CDC EOC Watch Desk/local CDC quarantine station to determine disposition**
- d. Monitor segregated detainees to observe for flu-like symptoms, if symptoms develop – see #2 above
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(b)(6)&(b)(7)(C) [REDACTED]
- (b)(6)&(b)(7)(C) CBP Medical Planner - (b)(6)&(b)(7)(C)  
(b)(6)&(b)(7)(C) [REDACTED]

CBP Job Hazard Analysis (JHA) & PPE Assessment	Job Title: Exposure to Coronavirus "COVID-19"	Title: All CBP Personnel in Affected Areas	Supervisor: All	Prepared By: HRM, Occupational Safety and Health (OSH) Division CBP Senior Medical Advisor	Date: March 12, 2020	New	Revised X
Offices: All CBP	Locations: CBP Wide	Departments: All		Reviewed By: Office of Field Operations United States Border Patrol Air and Marine Operations Operations Support			
				<b>Required or Recommended Personal Protective Equipment:</b> surgical masks, nitrile gloves, N95 respirator, protective outer garments, gown, shoe coverings, face shield or non-vented goggles	<b>Approved by:</b> OSH Division Director CBP Senior Medical Advisor		

**Note:** This JHA only applies to the 2019 Novel Coronavirus (SARS-CoV-2) or the disease known as "COVID-19". The Centers for Disease Control and Prevention (CDC), World Health Organization, (WHO), Occupational Safety and Health Administration (OSHA), and other public health agencies are now considering the outbreak of COVID-19 that has spread to countries around the globe, including here in the United States, to be a Pandemic. Although the general risk to CBP personnel and the public is still considered LOW at this point, it is CRITICAL that all personnel take standard precautions recommended by CDC, outlined in this JHA and found on the [Safety and Health COVID-19 Resource Page](#) on CBPnet. References to guides, additional information and material, links, and other resources can be found on "Notes" page at the end of this document.

For the most up to date information about COVID-19 visit the [Centers for Disease Control \(CDC\) COVID-19 page](#).

**Risk Assessment:** Incomplete information regarding incubation, infectious period, and transmissibility, as well as evolving circumstances make a definitive risk assessment challenging. In light of this, awareness and operationally-informed precautions are warranted. In general, the overall risk to CBP personnel is still assessed to be low. However, risk increases with increased exposure to persons potentially infected with COVID-19, warranting enhanced precautions described herein. CBP will continue to monitor the situation closely in coordination with appropriate stakeholders and will adjust guidance as appropriate. CBP personnel should continue to maintain situational awareness regarding this outbreak.

While COVID-19 is a respiratory disease and the use of N95 respirators and other PPE is needed in certain conditions and work environments as outlined in this JHA, the use of PPE is but one component of COVID-19 disease prevention and the use of N95 respirators and masks is NOT the most effective or primary way of preventing disease transmission. All personnel can take these basic steps to prevent exposure to and transmission of COVID-19. All personnel should practice good hygiene, wash hands frequently, cover your cough or sneeze, stay away from work if you are ill and contact your health provider for guidance, avoid unnecessary congregate settings where COVID-19 exposure is more probable, KEEP YOUR HANDS BELOW YOUR CHIN and avoid touching mouth, eyes, nose and mucous membranes where contaminated hands can spread the disease to your respiratory system. These basic preventative measures will greatly reduce the exposure potential for ALL personnel and slow the spread of communicable diseases.

**Note:** Risk categories (Very High, High, Medium, and Low) are to be used in conjunction with this document only. They refer to the mission-specific risk relative to the hazard identified; they do not correlate to overall risk of contracting COVID-19 Disease or risk categories used by other agencies such as the Centers for Disease Control and Prevention (CDC), or in other documents such as the Workforce Health and Safety Coronavirus Health Advisories Screening Guidance, CDC Coronavirus Advisories, or Travel Health Alert Notices (T-HAN) meant for other audiences.

Operations	Risk Categories	Hazards	Protective Measures/PPE Guidance
<b>1. HQ Offices, CBP Facilities, Office Settings, Mission Support, and other Administrative Settings</b> <p>Note: This is intended for ALL CBP facilities where administrative work is being conducted and exposure to COVID-19 from a traveler, passenger, or detainee is NOT expected.</p>	<b>Low</b>	<b>Casual or Close Contact of Coronavirus cases is not expected.</b> <ul style="list-style-type: none"> <li>• <b>Signs and Symptoms of COVID-19 include;</b> <ul style="list-style-type: none"> <li>• Fever</li> <li>• Cough</li> <li>• Difficulty breathing</li> <li>• Other Flu Like Symptoms</li> </ul> </li> </ul> <p><b>Note:</b> While most COVID-19 lab confirmed cases do display these type symptoms, <b>SOME</b> persons may only display mild symptoms and they may appear at different stages of the disease.</p>	<ul style="list-style-type: none"> <li>• Stay up to date on latest information from DHS, CBP, CDC, WHS, and other COVID-19 alerts, advisories and updates. See more information on page 8.</li> <li>• Use the following disease prevention practices in ALL activities.           <ul style="list-style-type: none"> <li>• Frequent hand washing.</li> <li>• Stay home if you are ill and contact your health provider right away if you notice any signs or symptoms similar to COVID-19.</li> <li>• If you think you have been exposed to someone with COVID-19, notify your supervisor and your health provider.</li> <li>• KEEP your hands <b>BELOW</b> your chin and avoid touching mouth, nose, and eyes.</li> <li>• Cover your cough/sneeze with a tissue or cuff of your elbow, <b>NOT</b> your hands</li> <li>• Use of N95 respirators or surgical masks is <b>NOT</b> recommended.</li> <li>• Voluntary use of N95 respirators, although not recommended at the time of development of this JHA, is allowed with supervisor approval and in accordance with existing CBP policies on the use of respirators.</li> <li>• Medical Clearance and Fit Testing are <b>NOT</b> required for voluntary use. See Page 8 Notes.</li> <li>• All use of N95 respirators should be in accordance with OSHA 1910.134 and CBP OSH 5200-08B policies.</li> </ul> </li> </ul>
<b>2. Port of Entry Operations</b> <p><b>Primary Passenger Processing</b></p> <p><b>Note:</b> This includes casual contact (&gt;6 feet) or brief periods of close contact with a person at increased risk of COVID-19 during Port Operations (&lt;6feet) for short periods of time, e.g. escorting a person from one area to another during screening process, or briefly entering a room with a higher risk person.</p> <p>This section is intended for the processing and handling of persons during primary who are higher risk, but not symptomatic.</p>	<b>Medium</b>	<u>Casual Contact</u> with passengers or persons with increased risk of COVID-19;	<ul style="list-style-type: none"> <li>• Stay up to date on latest information from DHS, CBP, CDC, WHS, and other COVID-19 alerts, advisories and updates. See more information on page 8.</li> <li>• Use general disease prevention outlined in Section 1.</li> <li>• Use CBP Risk Based Exposure Guidance for Managing Contact Tracing Passive observation of persons for signs of illness.</li> <li>• Use COVID-19 R.I.N.G. Card and general precautions.</li> <li>• Separate persons with symptoms of illness or a high risk country travel nexus and send to secondary for additional processing and CDC consultation.</li> <li>• Avoid close or direct contact with passengers with a travel nexus to high risk country within the past 14 days</li> <li>• Wear disposable nitrile gloves</li> <li>• Provide surgical masks to any persons with signs of illness.</li> <li>• Voluntary use of N95 respirators may be considered per CBP policy and supervisor approval. (See HB 5200-08B, Ch.26).</li> </ul>

<p><b>3. Port of Entry Operations</b></p> <p><b>Secondary Processing, holding, and escorting of persons suspected of having COVID-19</b></p> <p><b>Note:</b> This includes limited periods of closer (&lt;6 feet) contact with a person at increased risk of having COVID-19 during the secondary phases of screening, and also includes holding, transportation operations where limited close contact would apply.</p>	<p><b>Limited Close Contact</b></p> <p>Within six (6) feet of a person with travel nexus to high-risk country within 14 days or with signs/symptoms of illness.</p> <p><b>Note:</b> This includes processing, escorting, or spending brief periods of time with more than casual contact with persons suspected of having COVID-19</p>	<ul style="list-style-type: none"> <li>• Stay up to date on latest information from DHS, CBP, CDC, WHS, and other COVID-19 alerts, advisories and updates. See more information on page 8.</li> <li>• Use general disease prevention outlined in Section 1.</li> <li>• Quickly identify and separate symptomatic passengers from others.</li> <li>• Use CBP Risk Based Exposure Guidance for Managing Contact Tracing.</li> <li>• Avoid direct contact and keep close contact to a minimum.</li> <li>• Use COVID-19 R.I.N.G. Card for general precautions.</li> <li>• Refer/escort any persons with travel nexus to high risk country within 14 days or symptoms to CDC for evaluation/interview.</li> <li>• Contact EMS for severely ill passengers (high fever, uncontrollable coughing, difficulty breathing, etc.).</li> <li>• Provide surgical masks to symptomatic passengers.</li> <li>• Wear disposable nitrile gloves.</li> <li>• Officer/Agent wear N95 respirator within six (6) feet of symptomatic passenger.</li> <li>• Wear goggles or face shield to protect eyes.</li> </ul>
<p><b>4. Port of Entry Operations</b></p>	<p><b>Very High</b></p> <p><b>Extended Close Contact</b></p> <p><b>Prolonged periods</b> within close contact (6 ft.) of a person with a travel nexus to high risk country and with symptoms</p> <p><b>Signs and Symptoms of COVID-19 include;</b></p> <ul style="list-style-type: none"> <li>• Fever</li> <li>• Cough</li> <li>• Difficulty breathing</li> <li>• Other Flu Like Symptoms</li> </ul> <p><b>Note:</b> Suspected COVID-19 cases refers to those that are symptomatic, from a high risk country and have not been lab confirmed or tested yet. This does NOT apply to persons who are from high risk countries and displaying NO symptoms or to contacts of cases of NOT lab confirmed.</p>	<ul style="list-style-type: none"> <li>• Stay up to date on latest information from DHS, CBP, CDC, WHS, and other COVID-19 alerts, advisories and updates. See more information on page 8.</li> <li>• Use general disease prevention outlined in Section 1.</li> <li>• Quickly identify and separate symptomatic passengers from others.</li> <li>• Use CBP Risk Based Exposure Guidance for Managing Contact Tracing.</li> <li>• Avoid direct contact and keep close contact to a minimum.</li> <li>• Limit time in room to critical functions.</li> <li>• Use COVID-19 R.I.N.G. Card for general precautions.</li> <li>• Refer/escort any persons with travel nexus to high risk country within 14 days and symptoms to CDC for evaluation/interview.</li> <li>• Contact EMS for severely ill passengers (high fever, uncontrollable coughing, difficulty breathing, etc.).</li> <li>• Provide surgical masks to symptomatic passengers.</li> <li>• Wear disposable nitrile gloves.</li> <li>• Officer/Agent wears N95 respirator, goggles/face shield, and disposable outer garments to prevent uniform contamination.</li> </ul> <p><b>Note:</b> While most COVID-19 lab confirmed cases do display these type symptoms, SOME persons may only display mild symptoms and they may appear at different stages of the disease</p>

<b>5. U.S. Border Patrol Operations</b>	Medium	<b>Casual Contact</b> with passengers or persons with increased risk of COVID-19;	<ul style="list-style-type: none"> <li>Stay up to date on latest information from DHS, CBP, CDC, WHS, and other COVID-19 alerts, advisories and updates. See more information on page 8.</li> <li>Use general disease prevention outlined in Section 1.</li> <li>Wear disposable nitrile gloves.</li> <li>Passive observation of persons for signs of illness.</li> <li>Use COVID-19 R.I.N.G. Card and general precautions.</li> <li>Separate persons with symptoms of illness or a high risk country travel nexus and send to secondary for additional processing and CDC consultation.</li> <li>Use CBP Risk Based Exposure Guidance for Managing Contact Tracing.</li> <li>Avoid close or direct contact with passengers with a travel nexus to high risk country within the past 14 days.</li> <li>Provide surgical masks to any persons with signs of illness.</li> <li>Voluntary use of N95 respirators may be considered per CBP policy and supervisor approval. (See HB 5200-08B, Ch. 26).</li> </ul>
<b>Line Watch, Transport, Processing, Detention, and Check Points</b>	High	<b>Limited Close Contact</b>	<ul style="list-style-type: none"> <li>Stay up to date on latest information from DHS, CBP, CDC, WHS, and other COVID-19 alerts, advisories and updates. See more information on page 8.</li> <li>Use general disease prevention outlined in Section 1.</li> <li>Quickly identify and separate symptomatic persons from others.</li> <li>Use CBP Risk Based Exposure Guidance for Managing Contact Tracing.</li> <li>Provide surgical masks to symptomatic passengers.</li> <li>Wear disposable nitrile gloves.</li> <li>Avoid direct contact and keep close contact to a minimum.</li> <li>Officer/Agent wear N95 respirator within six (6) feet of symptomatic passenger.</li> <li>Wear goggles or face shield to protect eyes.</li> <li>Use COVID-19 R.I.N.G. Card for general precautions.</li> <li>Refer/escort any persons with travel nexus to high risk country within 14 days and symptoms to CDC for evaluation/interview.</li> <li>Contact EMS for severely ill passengers (high fever, uncontrollable coughing, difficulty breathing, etc.).</li> </ul>
<b>6. U.S. Border Patrol Operations</b>	High	<b>Secondary</b>	<p><b>Note:</b> This includes escorting, processing, or spending more than casual contact with persons suspected of having COVID-19</p> <p><b>Line Watch, Escort, Processing, Detention, and Check Points</b></p> <p><b>Secondary</b></p> <p>Interdiction/processing of persons, vehicles or Cargo (Persons, driver, passengers, or stowaways with travel nexus to high risk country within 14 days)</p>

<p><b>7. U.S. Border Patrol Operations</b></p> <p><b>Being in an enclosed room/space where symptomatic person with suspected COVID-19 is being held or evaluated by CDC, or transporting a person with suspected COVID-19</b></p> <p>Note: Suspected COVID-19 cases refers to those that are symptomatic, from a high risk country and have not been lab confirmed or tested yet. This does NOT apply to persons who are from high risk countries and displaying NO symptoms or to contacts of cases of NOT lab confirmed.</p>	<p><b>Very High</b></p> <p><b>Extended Close Contact</b></p> <p>Within six (6) feet of Symptomatic or ill travelers from any affected country within the past 14 days and</p> <ul style="list-style-type: none"> <li>• Fever</li> <li>• Cough</li> <li>• Difficulty breathing</li> <li>• Flu Like Symptoms</li> </ul>	<ul style="list-style-type: none"> <li>• Frequent hand washing.</li> <li>• Stay up to date on latest information from DHS, CBP, CDC, WHS, and other COVID-19 alerts, advisories and updates. See page 8.</li> <li>• Provide surgical masks to symptomatic passengers.</li> <li>• Wear disposable nitrile gloves.</li> <li>• Agent wears N95 respirator, goggles/face shield, and disposable outer garments to prevent uniform contamination.</li> <li>• Avoid direct contact and keep close contact to a minimum.</li> <li>• Limit time in room to critical functions.</li> <li>• For symptomatic persons, use negative pressure ventilated rooms/holding facilities whenever available/possible.</li> <li>• During transportation of symptomatic persons from affected country use USBP vehicles designed for prisoner/detainee transport with separate compartment between driver/detainees (when driver and detainee cannot be separated, place a surgical mask on symptomatic detainee and driver will wear an N95 respirator)</li> <li>• Contact EMS for severely ill passengers (high fever, uncontrollable coughing, difficulty breathing, etc.).</li> <li>• Use CBP Risk Based Exposure Guidance for Managing Contact Tracing.</li> <li>• Use COVID-19 R.I.N.G. Card for general precautions.</li> </ul> <ul style="list-style-type: none"> <li>• Stay up to date on latest information from DHS, CBP, CDC, WHS, and other COVID-19 alerts, advisories and updates. See page 8.</li> <li>• Frequent hand washing.</li> <li>• Provide surgical masks to any symptomatic persons during apprehension.</li> <li>• Wear disposable nitrile gloves.</li> <li>• When Interdiction Agent/Officer is exposed to symptomatic person then wear N95 respirator and goggles or/face shield.</li> <li>• Avoid direct contact and keep close contact to a minimum.</li> <li>• Use CBP Risk Based Exposure Guidance for Managing Contact Tracing.</li> <li>• Contact EMS for severely ill passengers (high fever, uncontrollable coughing, difficulty breathing, etc.).</li> <li>• Use COVID-19 R.I.N.G. Card for general precautions.</li> </ul>
	<p><b>8. Air &amp; Marine Operations</b></p> <p>Air Branches/Stations/and All AMO Facilities and Operations</p>	<p><b>Medium</b></p> <p>Exposure to Symptomatic Persons is NOT expected</p> <p>During Most Air Interdiction/Marine Interdiction Operations</p> <p><b>Note:</b> When apprehensions or personal contacts result in Close Personal Contact (Less than &lt;6 Feet) Follow the following guidance.</p>

<p><b>9. Disinfection and cleanup of Contaminated Surfaces – General Guidance</b></p> <p>Low</p> <p>Risk of Exposure Expected To Be Low During Routine Disinfection and Cleaning of COVID-19</p> <p>General exposure potential where <b>no lab confirmed cases of COVID-19 persons have occupied.</b></p> <ul style="list-style-type: none"> <li>• COVID-19 can live for prolonged periods (from hours to a couple days depending on conditions, temp, etc.) of time on hard surfaces, door knobs, handrails, light switches, and other frequently touched surfaces. Frequent cleaning and disinfection should be performed when working with potentially infected populations. Surface disinfection should be performed after interaction with a suspected sick individual as well as periodically through a work shift.</li> <li>• There are everyday products such as Clorox and Lysol wipes, sprays, and bottles (for large clean-up jobs) that are recommended and effective against COVID-19. These cleaning and disinfection products are effective for CBP workplaces and around the home and are readily available.</li> <li>• If apprehension was made and individual was symptomatic, Officers/Agents Duty Gear and Equipment should be disinfected IAW CDC guidelines for Law Enforcement personnel see Page 8. (Follow Agency Specific Policy for Firearms).</li> <li>• Always follow manufacturers' cleaning and disinfection guidance and use prescribed PPE for large jobs, especially where COVID-19 is known to have been present.</li> <li>• For a complete list of EPA Registered COVID-19 cleaners and disinfectants check the EPA list of COVID-19 Cleaning and Disinfection Products at <a href="https://www.epa.gov/sites/production/files/2020-03/documents/sars-cov-2-list_03-03-2020.pdf">https://www.epa.gov/sites/production/files/2020-03/documents/sars-cov-2-list_03-03-2020.pdf</a>.</li> </ul>	<p>Potential exposure to COVID-19 contaminated areas in general.</p> <p>Where <b>known</b> lab confirmed COVID-19 cases have recently been within the past 8-72 hours</p> <p><b>10. Cleaning and Disinfection of CBP facilities to include POEs, USBP Stations and Check Points, Holding and Detention Areas –</b></p> <ul style="list-style-type: none"> <li>• COVID-19 can live for prolonged periods (from hours to a couple days depending on conditions, temp, etc.) of time on hard surfaces, door knobs, handrails, light switches, and other frequently touched surfaces. Frequent cleaning and disinfection should be performed when working with potentially infected populations. Surface disinfection should be performed after interaction with a suspected sick individual as well as periodically through a work shift.</li> <li>• There are products such as Clorox and Lysol wipes, sprays, and bottles (for large clean-up jobs) that are recommended and effective against COVID-19. These cleaning and disinfection products are effective for CBP workplaces and around the home and are readily available.</li> <li>• Always follow manufacturers' cleaning and disinfection guidance and use prescribed PPE for large jobs, especially where COVID-19 is known to have been present.</li> <li>• For a complete list of EPA Registered COVID-19 cleaners and disinfectants check the EPA list of COVID-19 Cleaning and Disinfection Products at <a href="https://www.epa.gov/sites/production/files/2020-03/documents/sars-cov-2-list_03-03-2020.pdf">https://www.epa.gov/sites/production/files/2020-03/documents/sars-cov-2-list_03-03-2020.pdf</a>.</li> <li>• Wear an N95 respirator if cleaning and disinfection an area where COVID-19 was known to be present or suspected.</li> <li>• Wear non-vented goggles or face shield to cover face and eyes.</li> <li>• Wear a liquid impermeable gown (for large cleanup jobs wear</li> </ul>
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			<ul style="list-style-type: none"> <li>liquid impermeable suit/coveralls).</li> <li>Dispose of all infectious material as bio hazardous waste in accordance with local, State, or Federal guidelines.</li> </ul>
<b>11. Cleaning and Disinfection of Vessels and Ships</b>	Med	Potential exposure to COVID-19 contaminated areas in general.  <b>Note:</b> Cruise ships have higher incidence of exposure and risk levels may go up.	<ul style="list-style-type: none"> <li>COVID-19 can live for prolonged periods (from hours to a couple days depending on conditions, temp, etc.) of time on hard surfaces, door knobs, handrails, light switches, and other frequently touched surfaces. Frequent cleaning and disinfection should be performed when working with potentially infected populations. Surface disinfection should be performed after interaction with a suspected sick individual as well as periodically through a work shift.</li> <li>There are products such as Clorox and Lysol wipes, sprays, and bottles (for large clean-up jobs) that are recommended and effective against COVID-19. These cleaning and disinfection products are effective for CBP workplaces and around the home and are readily available.</li> <li>Always follow manufacturers' cleaning and disinfection guidance and use prescribed PPE for large jobs, especially where COVID-19 is known to have been present.</li> <li>For a complete list of EPA Registered COVID-19 cleaners and disinfectants check the EPA list of COVID-19 Cleaning and Disinfection Products at <a href="https://www.epa.gov/sites/production/files/2020-03/documents/cov-2-list_03-03-2020.pdf">https://www.epa.gov/sites/production/files/2020-03/documents/cov-2-list_03-03-2020.pdf</a></li> <li>Follow CDC guidance for ships/vessels here <a href="https://www.cdc.gov/quarantine/maritime/recommendations-for-ships.html">https://www.cdc.gov/quarantine/maritime/recommendations-for-ships.html</a></li> <li>Follow general precautions outlined above for general areas.</li> <li>Wear nitrile or fluid impermeable gloves while cleaning and follow all manufacturers' guidelines for cleaning products.</li> </ul>
<b>12. Cleaning and Disinfection of Kojak Fingerprint Kiosks</b>	Low	Low Risk of Exposure Due to Persons Who May Have Used Kojak Fingerprint Kiosks  General cleaning and disinfection of these areas MUST be done in accordance with manufacturers recommendations in order to avoid damage to equipment	<ul style="list-style-type: none"> <li>General cleaning and disinfection of these areas MUST be done in accordance with manufacturers recommendations in order to avoid damage to equipment.</li> <li>Specific Guidance for Cleaning and Disinfection of Kojak Fingerprint Kiosks can be found at <a href="https://cbpogov.sharepoint.com/sites/oit/pspo/training/catalog/kojak.aspx">https://cbpogov.sharepoint.com/sites/oit/pspo/training/catalog/kojak.aspx</a></li> <li>The use of alcohol based hand sanitizers or wipes will BURN the Platen and void the manufacturer's warranty.</li> <li>Only Use the following moisturizers with the Kojak Fingerprint Kiosks <ul style="list-style-type: none"> <li>Nivea Soft Moisturizing Cream</li> <li>Aveeno Daily Moisturizing Lotion</li> <li>Gold Bond Ultimate Healing Hand Cream</li> </ul> </li> </ul>

**Notes:**

1. This JHA and PPE Assessment only applies to CBP operations related to exposure to 2019 Novel Coronavirus or COVID-19. At the time of developing this JHA, new cases are being reported in countries around the globe, including the United States. See below links to CDC, WHO, OSHA, DHS, and other COVID-19 resources and information.
2. **CBP Respiratory Protection.** All CBP Frontline Personnel, Officers, and Agents who may be in work situations that place them at increased risk of exposure to COVID-19 due to processing passengers or travelers from COVID-19 affected countries who may have to wear an N95 respirator as outlined in the above risk based scenarios are considered to be in “mandatory use” N95 Respirator Programs. As such, the mandatory use of an N95 respirators requires a medical clearance, fit testing, and have a clean shaven face and no facial hair between the mask seal and the face in accordance with OSHA 1910.134 and CBP HB 5200-08B. Frontline and uniformed personnel have had these programs in place for years within CBP due to other work situations that also require an N95, such as exposure to TB, Handling of Narcotics, Ebola Response, Pandemic and PEID Response Plans, and now COVID-19.
3. **Voluntary Use of N95 Respirators.** The voluntary use of N95 respirators is allowed by employers when there is no work task that makes the N95 use “mandatory”, however circumstances such as allowing mission support, administrative, or HQ personnel that do not typically wear a respirator, who would like to wear one for protection to exposures that are not related to specific work tasks such as traveling to and from work in congregate settings such as large metropolitan transit systems, buses, etc. would be considered “Voluntary Use”. In these cases, “Voluntary Use” of N95 Respirators does not require a medical clearance or a fit test, however it does require approval from a supervisor to ensure the use won’t create a hazard for the employee, impact N95 supplies needed for critical frontline “Mandatory Use” situations, or that would cause undue confusion and conflicting policy guidance such as “Voluntary Use” by frontline officers in primary passenger processing when they aren’t performing any work that requires “Mandatory Use” as outlined above. All Respiratory Protection Program, whether “Mandatory Use” or “Voluntary Use”, situations will be run in accordance with OSHA 1910.134 standards and policies outlined in CBP HB 5200-08B, Chapter 26.
4. While COVID-19 is a respiratory disease and the use of N95 respirators and other PPE is needed in certain conditions and work environments as outlined in this JHA below, the use of PPE is but one component of COVID-19 disease prevention and the use of N95 respirators and masks is NOT the most effective or primary way of preventing disease transmission. All personnel can take these basic steps to prevent exposure to and transmission of COVID-19. All personnel should practice good hygiene, wash hands frequently, cover their cough, stay away from work if ill and contact their health provider for guidance, avoid unnecessary congregate settings where COVID-19 exposure is more probable. KEEP YOUR HANDS BELOW YOUR CHIN and avoid touching mouth, eyes, nose and mucous membranes where contaminated hands can spread the disease to your respiratory system. These basic preventative measures will greatly reduce the exposure potential for ALL personnel and slow the spread of communicable diseases.

**References:**

- CBP COVID-19 Resource Portal: [http://cbpnet.cbp.dhs.gov/HRM/Pages/covid19\\_resources.aspx](http://cbpnet.cbp.dhs.gov/HRM/Pages/covid19_resources.aspx)
- CDC COVID-19 Website: <https://www.cdc.gov/coronavirus/2019-ncov/index.html>
- CDC COVID-19 Frequently Asked Questions (FAQ's): <https://www.cdc.gov/coronavirus/2019-ncov/faq.html>
- OSHA COVID-19 Webpage: [https://www.osha.gov/SLTC/novel\\_coronavirus/](https://www.osha.gov/SLTC/novel_coronavirus/)
- CBP Respirator Medical Clearance’s Website <https://resp-eval.foh.psc.gov/login/>
- CDC Guidance For Law Enforcement Personnel: <https://www.cdc.gov/coronavirus/2019-ncov/community/guidance-law-enforcement.html#border>
- OSHA Guidance For Border Workers: <https://www.osha.gov/SLTC/covid-19/controlprevention.html#border>

CBP Job Hazard Analysis (JHA) & PPE Assessment	Job Title: Exposure to Coronavirus "COVID-19"	Title: All CBP Personnel in Affected Areas Locations: CBP Wide	Supervisor: All Departments: All	Prepared By: HRM, Occupational Safety and Health (OSH) Division CBP Senior Medical Advisor  Reviewed By: Office of Field Operations United States Border Patrol Air and Marine Operations Operations Support  Approved by: OSH Division Director CBP Senior Medical Advisor
Offices: All CBP	<b>Required or Recommended Personal Protective Equipment:</b> surgical masks, nitrile gloves, N95 respirator, protective outer garments, gown, shoe coverings, face shield or non-vented goggles			

**Note:** This JHA only applies to the 2019 Novel Coronavirus (SARS-CoV-2) or the disease known as "COVID-19". The Centers for Disease Control and Prevention (CDC), World Health Organization, (WHO), Occupational Safety and Health Administration (OSHA), and other public health agencies are now considering the outbreak of COVID-19 that has spread to countries around the globe, including here in the United States, to be a Pandemic. Although the general risk to CBP personnel and the public is still considered LOW at this point, it is CRITICAL that all personnel take standard precautions recommended by CDC, outlined in this JHA and found on the [Safety and Health COVID-19 Resource Page](#) on CBPnet. References to guides, additional information and material, links, and other resources can be found on "Notes" page at the end of this document.

For the most up to date information about COVID-19 visit the [Centers for Disease Control \(CDC\) COVID-19 page](#).

**Risk Assessment:** Incomplete information regarding incubation, infectious period, and transmissibility, as well as evolving circumstances make a definitive risk assessment challenging. In light of this, awareness and operationally-informed precautions are warranted. In general, the overall risk to CBP personnel is still assessed to be low. However, risk increases with increased exposure to persons potentially infected with COVID-19, warranting enhanced precautions described herein. CBP will continue to monitor the situation closely in coordination with appropriate stakeholders and will adjust guidance as appropriate. CBP personnel should continue to maintain situational awareness regarding this outbreak.

While COVID-19 is a respiratory disease and the use of N95 respirators and other PPE is needed in certain conditions and work environments as outlined in this JHA, the use of PPE is but one component of COVID-19 disease prevention and the use of N95 respirators and masks is NOT the most effective or primary way of preventing disease transmission. All personnel can take these basic steps to prevent exposure to and transmission of COVID-19. All personnel should practice good hygiene, wash hands frequently, cover your cough or sneeze, stay away from work if you are ill and contact your health provider for guidance, avoid unnecessary congregate settings where COVID-19 exposure is more probable, KEEP YOUR HANDS BELOW YOUR CHIN and avoid touching mouth, eyes, nose and mucous membranes where contaminated hands can spread the disease to your respiratory system. These basic preventative measures will greatly reduce the exposure potential for ALL personnel and slow the spread of communicable diseases.

**Note:** Risk categories (Very High, High, Medium, and Low) are to be used in conjunction with this document only. They refer to the mission-specific risk relative to the hazard identified; they do not correlate to overall risk of contracting COVID-19 Disease or risk categories used by other agencies such as the Centers for Disease Control and Prevention (CDC), or in other documents such as the Workforce Health and Safety Coronavirus Health Advisories Screening Guidance, CDC Coronavirus Advisories, or Travel Health Alert Notices (T-HAN) meant for other audiences.

Operations	Risk Categories	Hazards	Protective Measures/PPE Guidance
<b>1. HQ Offices, CBP Facilities, Office Settings, Mission Support, and other Administrative Settings</b> <p>Note: This is intended for ALL CBP facilities where administrative work is being conducted and exposure to COVID-19 from a traveler, passenger, or detainee is NOT expected.</p>	<b>Low</b>	<b>Casual or Close Contact of Coronavirus cases is not expected.</b> <ul style="list-style-type: none"> <li>• <b>Signs and Symptoms of COVID-19 include;</b> <ul style="list-style-type: none"> <li>• Fever</li> <li>• Cough</li> <li>• Difficulty breathing</li> <li>• Other Flu Like Symptoms</li> </ul> </li> </ul> <p><b>Note:</b> While most COVID-19 lab confirmed cases do display these type symptoms, <b>SOME</b> persons may only display mild symptoms and they may appear at different stages of the disease.</p>	<ul style="list-style-type: none"> <li>• Stay up to date on latest information from DHS, CBP, CDC, WHS, and other COVID-19 alerts, advisories and updates. See more information on page 8.</li> <li>• Use the following disease prevention practices in <b>ALL</b> activities.           <ul style="list-style-type: none"> <li>• Frequent hand washing.</li> <li>• Stay home if you are ill and contact your health provider right away if you notice any signs or symptoms similar to COVID-19.</li> <li>• If you think you have been exposed to someone with COVID-19, notify your supervisor and your health provider.</li> <li>• <b>KEEP</b> your hands <b>BELLOW</b> your chin and avoid touching mouth, nose, and eyes.</li> <li>• Cover your cough/sneeze with a tissue or cuff of your elbow, <b>NOT</b> your hands</li> <li>• Use of N95 respirators or surgical masks is <b>NOT</b> recommended.</li> <li>• Voluntary use of N95 respirators, although not recommended <b>at the time of development</b> of this JHA, is allowed with supervisor approval and in accordance with existing CBP policies on the use of respirators.</li> <li>• Medical Clearance and Fit Testing are <b>NOT</b> required for voluntary use. See Page 8 Notes.</li> <li>• All use of N95 respirators should be in accordance with OSHA 1910.134 and CBP OSH 5200-08B policies.</li> </ul> </li> </ul>
<b>2. Port of Entry Operations</b> <p><b>Primary Passenger Processing</b></p> <p><b>Note:</b> This includes casual contact (&gt;6 feet) or brief periods of close contact with a person at increased risk of COVID-19 during Port Operations (&lt;6feet) for short periods of time, e.g. escorting a person from one area to another during screening process, or briefly entering a room with a higher risk person.</p> <p>This section is intended for the processing and handling of persons during primary who are higher risk, but not symptomatic.</p>	<b>Medium</b>	<b>Casual Contact</b> with passengers or persons with increased risk of COVID-19; <ul style="list-style-type: none"> <li>• Casual contact (outside 6 feet) with persons with potential COVID-19 Symptoms, or</li> <li>• Who may have a travel nexus to a high risk country within the past 14 days</li> </ul>	<ul style="list-style-type: none"> <li>• Stay up to date on latest information from DHS, CBP, CDC, WHS, and other COVID-19 alerts, advisories and updates. See more information on page 8.</li> <li>• Use general disease prevention outlined in Section 1.</li> <li>• Use CBP Risk Based Exposure Guidance for Managing Contact Tracing           <ul style="list-style-type: none"> <li>• Passive observation of persons for signs of illness.</li> <li>• Use COVID-19 R.I.N.G. Card and general precautions.</li> <li>• Separate persons with symptoms of illness or a high risk country travel nexus and send to secondary for additional processing and CDC consultation.</li> <li>• Avoid close or direct contact with passengers with a travel nexus to high risk country within the past 14 days or with symptoms</li> <li>• Wear disposable nitrile gloves</li> <li>• Provide surgical masks to any persons with signs of illness.</li> <li>• Voluntary use of N95 respirators may be considered per CBP policy and supervisor approval. (See HB 5200-08B, Ch. 26).</li> </ul> </li> </ul>

3. Port of Entry Operations	High  <b>Secondary Processing, holding, and escorting of persons suspected of having COVID-19</b>	<p><b>Limited Close Contact</b> Within six (6) feet of a person with travel nexus to high-risk country within 14 days or with signs/symptoms of illness.</p> <p><b>Note:</b> This includes limited periods of closer (&lt;6 feet) contact with a person at increased risk of having COVID-19 during the secondary phases of screening, and also includes holding, transportation operations where limited close contact would apply.</p>	<ul style="list-style-type: none"> <li>• Stay up to date on latest information from DHS, CBP, CDC, WHS, and other COVID-19 alerts, advisories and updates. See more information on page 8.</li> <li>• Use general disease prevention outlined in Section 1.</li> <li>• Quickly identify and separate symptomatic passengers from others.</li> <li>• Use CBP Risk Based Exposure Guidance for Managing Contact Tracing.</li> <li>• Avoid direct contact and keep close contact to a minimum.</li> <li>• Use COVID-19 R.I.N.G. Card for general precautions.</li> <li>• Refer/escort any persons with travel nexus to high risk country within 14 days or symptoms to CDC for evaluation/interview.</li> <li>• Contact EMS for severely ill passengers (high fever, uncontrollable coughing, difficulty breathing, etc.).</li> <li>• Provide surgical masks to symptomatic passengers.</li> <li>• Officer/Agent wear N95 respirator within six (6) feet of symptomatic passenger.</li> <li>• Wear disposable nitrile gloves.</li> <li>• Wear goggles or face shield to protect eyes.</li> </ul>
4. Port of Entry Operations	Very High	<p><b>Extended Close Contact</b> Prolonged periods within close contact (6 ft.) of a person with a travel nexus to high risk country and with symptoms</p> <p><b>Signs and Symptoms of COVID-19 include:</b></p> <ul style="list-style-type: none"> <li>• Fever</li> <li>• Cough</li> <li>• Difficulty breathing</li> <li>• Other Flu Like Symptoms</li> </ul> <p><b>Note:</b> Suspected COVID-19 cases refers to those that are symptomatic, from a high risk country and have not been lab confirmed or tested yet. This does NOT apply to persons who are from high risk countries and displaying NO symptoms or to contacts of cases of NOT lab confirmed.</p>	<ul style="list-style-type: none"> <li>• Stay up to date on latest information from DHS, CBP, CDC, WHS, and other COVID-19 alerts, advisories and updates. See more information on page 8.</li> <li>• Use general disease prevention outlined in Section 1.</li> <li>• Quickly identify and separate symptomatic passengers from others.</li> <li>• Use CBP Risk Based Exposure Guidance for Managing Contact Tracing.</li> <li>• Avoid direct contact and keep close contact to a minimum.</li> <li>• Limit time in room to critical functions.</li> <li>• Use COVID-19 R.I.N.G. Card for general precautions.</li> <li>• Refer/escort any persons with travel nexus to high risk country within 14 days and symptoms to CDC for evaluation/interview.</li> <li>• Contact EMS for severely ill passengers (high fever, uncontrollable coughing, difficulty breathing, etc.).</li> <li>• Provide surgical masks to symptomatic passengers.</li> <li>• Wear disposable nitrile gloves.</li> <li>• Officer/Agent wears N95 respirator, goggles/face shield, and disposable outer garments to prevent uniform contamination.</li> </ul>
			<p><b>Note:</b> While most COVID-19 lab confirmed cases do display these type symptoms, SOME persons may only display mild symptoms and they may appear at different stages of the disease</p>

<b>5. U.S. Border Patrol Operations</b>	Medium	<b>Casual Contact with passengers or persons with increased risk of COVID-19;</b>	<ul style="list-style-type: none"> <li>• Casual contact (outside 6 feet) with persons with potential COVID-19 Symptoms, or</li> <li>• Who may have a travel nexus to a high risk country within the past 14 days</li> </ul>	<ul style="list-style-type: none"> <li>• Stay up to date on latest information from DHS, CBP, CDC, WHS, and other COVID-19 alerts, advisories and updates. See more information on page 8.</li> <li>• Use general disease prevention outlined in Section 1.</li> <li>• Wear disposable nitrile gloves.</li> <li>• Passive observation of persons for signs of illness.</li> <li>• Use COVID-19 R.I.N.G. Card and general precautions.</li> <li>• Separate persons with symptoms of illness or a high risk country travel nexus and send to secondary for additional processing and CDC consultation.</li> <li>• Use CBP Risk Based Exposure Guidance for Managing Contact Tracing.</li> <li>• Avoid close or direct contact with passengers with a travel nexus to high risk country within the past 14 days.</li> <li>• Provide surgical masks to any persons with signs of illness.</li> <li>• Voluntary use of N95 respirators may be considered per CBP policy and supervisor approval. (See HB 5200-08B, Ch. 26).</li> </ul>
<b>Line Watch, Transport, Processing, Detention, and Check Points</b>	High	<b>Limited Close Contact</b>	<p>Within six (6) feet of a person with travel nexus to high-risk country within 14 day or with signs/symptoms of illness.</p> <p><b>Note:</b> This includes escorting, processing, or spending more than casual contact with persons suspected of having COVID-19</p>	<ul style="list-style-type: none"> <li>• Stay up to date on latest information from DHS, CBP, CDC, WHS, and other COVID-19 alerts, advisories and updates. See more information on page 8.</li> <li>• Use general disease prevention outlined in Section 1.</li> <li>• Quickly identify and separate symptomatic persons from others.</li> <li>• Use CBP Risk Based Exposure Guidance for Managing Contact Tracing.</li> <li>• Provide surgical masks to symptomatic passengers.</li> <li>• Wear disposable nitrile gloves.</li> <li>• Avoid direct contact and keep close contact to a minimum.</li> <li>• Officer/Agent wear N95 respirator within six (6) feet of symptomatic passenger.</li> <li>• Wear goggles or face shield to protect eyes.</li> <li>• Use COVID-19 R.I.N.G. Card for general precautions.</li> <li>• Refer/escort any persons with travel nexus to high risk country within 14 days and symptoms to CDC for evaluation/interview.</li> <li>• Contact EMS for severely ill passengers (high fever, uncontrollable coughing, difficulty breathing, etc.).</li> </ul>
<b>6. U.S. Border Patrol Operations</b>	High	<b>Secondary</b>	<p>Line Watch, Escort, Processing, Detention, and Check Points</p> <p>Interdiction/processing of persons, vehicles or Cargo (Persons, driver, passengers, or stowaways with travel nexus to high risk country within 14 days)</p>	

7. U.S. Border Patrol Operations  <b>Being in an enclosed room/space where symptomatic person with suspected COVID-19 is being held or evaluated by CDC, or transporting a person with suspected COVID-19</b>  Note: Suspected COVID-19 cases refers to those that are symptomatic, from a high risk county and have not been lab confirmed or tested yet. This does NOT apply to persons who are from high risk countries and displaying NO symptoms or to contacts of cases of NOT lab confirmed.	<b>Very High</b> <b>Extended Close Contact</b> <p>Within six (6) feet of Symptomatic or ill travelers from any affected country within the past 14 days and</p> <ul style="list-style-type: none"> <li>• Fever</li> <li>• Cough</li> <li>• Difficulty breathing</li> <li>• Flu Like Symptoms</li> </ul>	<ul style="list-style-type: none"> <li>• Frequent hand washing.</li> <li>• Stay up to date on latest information from DHS, CBP, CDC, WHS, and other COVID-19 alerts, advisories and updates. See page 8.</li> <li>• Provide surgical masks to symptomatic passengers.</li> <li>• Wear disposable nitrile gloves.</li> <li>• Agent wears N95 respirator, goggles/face shield, and disposable outer garments to prevent uniform contamination.</li> <li>• Avoid direct contact and keep close contact to a minimum.</li> <li>• Limit time in room to critical functions.</li> <li>• For symptomatic persons, use negative pressure ventilated rooms/holding facilities whenever available/possible.</li> <li>• During transportation of symptomatic persons from affected country use USBP vehicles designed for prisoner/detainee transport with separate compartment between driver/detainees (when driver and detainee cannot be separated, place a surgical mask on symptomatic detainee and driver will wear an N95 respirator)</li> <li>• Contact EMS for severely ill passengers (high fever, uncontrollable coughing, difficulty breathing, etc.).</li> <li>• Use CBP Risk Based Exposure Guidance for Managing Contact Tracing.</li> <li>• Use COVID-19 R.I.N.G. Card for general precautions.</li> </ul>
8. Air & Marine Operations	<b>Medium</b> <p>Exposure to Symptomatic Persons is NOT expected During Most Air Interdiction/Marine Interdiction Operations</p>	<p><b>Note:</b> When apprehensions or personal contacts result in Close Personal Contact (Less than &lt;6 Feet) Follow the following guidance.</p>

<p><b>9. Disinfection and cleanup of Contaminated Surfaces – General Guidance</b></p>	<p>Low</p> <p>Risk of Exposure Expected To Be Low During Routine Disinfection and Cleaning of COVID-19</p>	<p>General exposure potential where <b>no lab confirmed cases of COVID-19 persons have occupied.</b></p> <ul style="list-style-type: none"> <li>COVID-19 can live for prolonged periods (from hours to a couple days depending on conditions, temp, etc.) of time on hard surfaces, door knobs, handrails, light switches, and other frequently touched surfaces. Frequent cleaning and disinfection should be performed when working with potentially infected populations. Surface disinfection should be performed after interaction with a suspected sick individual as well as periodically through a work shift.</li> <li>There are everyday products such as Clorox and Lysol wipes, sprays, and bottles (for large clean-up jobs) that are recommended and effective against COVID-19. These cleaning and disinfection products are effective for CBP workplaces and around the home and are readily available.</li> <li>If apprehension was made and individual was symptomatic, Officers/Agents Duty Gear and Equipment should be disinfected IAW CDC guidelines for Law Enforcement personnel see Page 8. (Follow Agency Specific Policy for Firearms).</li> <li>Always follow manufacturers' cleaning and disinfection guidance and use prescribed PPE for large jobs, especially where COVID-19 is known to have been present.</li> <li>For a complete list of EPA Registered COVID-19 cleaners and disinfectants check the EPA list of COVID-19 Cleaning and Disinfection Products at <a href="https://www.epa.gov/sites/production/files/2020-03/documents/sars-cov-2-list_03-03-2020.pdf">https://www.epa.gov/sites/production/files/2020-03/documents/sars-cov-2-list_03-03-2020.pdf</a>.</li> </ul>
<p><b>10. Cleaning and Disinfection of CBP facilities to include POEs, USBP Stations and Check Points, Holding and Detention Areas –</b></p> <p>Potential exposure to COVID-19 contaminated areas in general.</p> <p>Where <b>known</b> lab confirmed COVID-19 cases have recently been within the past 8-72 hours</p> <ul style="list-style-type: none"> <li>COVID-19 can live for prolonged periods (from hours to a couple days depending on conditions, temp, etc.) of time on hard surfaces, door knobs, handrails, light switches, and other frequently touched surfaces. Frequent cleaning and disinfection should be performed when working with potentially infected populations. Surface disinfection should be performed after interaction with a suspected sick individual as well as periodically through a work shift.</li> <li>There are products such as Clorox and Lysol wipes, sprays, and bottles (for large clean-up jobs) that are recommended and effective against COVID-19. These cleaning and disinfection products are effective for CBP workplaces and around the home and are readily available.</li> <li>Always follow manufacturers' cleaning and disinfection guidance and use prescribed PPE for large jobs, especially where COVID-19 is known to have been present.</li> <li>For a complete list of EPA Registered COVID-19 cleaners and disinfectants check the EPA list of COVID-19 Cleaning and Disinfection Products at <a href="https://www.epa.gov/sites/production/files/2020-03/documents/sars-cov-2-list_03-03-2020.pdf">https://www.epa.gov/sites/production/files/2020-03/documents/sars-cov-2-list_03-03-2020.pdf</a>.</li> <li>Wear an N95 respirator if cleaning and disinfection an area where COVID-19 was known to be present or suspected.</li> <li>Wear non-vented goggles or face shield to cover face and eyes.</li> <li>Wear a liquid impermeable gown (for large cleanup jobs wear</li> </ul>		

			<ul style="list-style-type: none"> <li>liquid impermeable suit/coveralls).</li> <li>Dispose of all infectious material as bio hazardous waste in accordance with local, State, or Federal guidelines.</li> </ul>
11. Cleaning and Disinfection of Vessels and Ships	Med	Potential exposure to COVID-19 contaminated areas in general.  <b>Note:</b> Cruise ships have higher incidence of exposure and risk levels may go up.	<ul style="list-style-type: none"> <li>COVID-19 can live for prolonged periods (from hours to a couple days depending on conditions, temp, etc.) of time on hard surfaces, door knobs, handrails, light switches, and other frequently touched surfaces. Frequent cleaning and disinfection should be performed when working with potentially infected populations. Surface disinfection should be performed after interaction with a suspected sick individual as well as periodically through a work shift.</li> <li>There are products such as Clorox and Lysol wipes, sprays, and bottles (for large clean-up jobs) that are recommended and effective against COVID-19. These cleaning and disinfection products are effective for CBP workplaces and around the home and are readily available.</li> <li>Always follow manufacturers' cleaning and disinfection guidance and use prescribed PPE for large jobs, especially where COVID-19 is known to have been present.</li> <li>For a complete list of EPA Registered COVID-19 cleaners and disinfectants check the EPA list of COVID-19 Cleaning and Disinfection Products at <a href="https://www.epa.gov/sites/production/files/2020-03/documents/isarts-cov-2-list-03-03-2020.pdf">https://www.epa.gov/sites/production/files/2020-03/documents/isarts-cov-2-list-03-03-2020.pdf</a></li> <li>Follow CDC guidance for ships/vessels here <a href="https://www.cdc.gov/quarantine/maritime/recommendations-for-ships.html">https://www.cdc.gov/quarantine/maritime/recommendations-for-ships.html</a></li> <li>Follow general precautions outlined above for general areas.</li> <li>Wear nitrile or fluid impermeable gloves while cleaning and follow all manufacturers' guidelines for cleaning products.</li> </ul>
12. Cleaning and Disinfection of Kojak Fingerprint Kiosks	Low	Low Risk of Exposure Due to Persons Who May Have Used Kojak Fingerprint Kiosks  General cleaning and disinfection of these areas MUST be done in accordance with manufacturers recommendations in order to avoid damage to equipment	<ul style="list-style-type: none"> <li>General cleaning and disinfection of these areas MUST be done in accordance with manufacturers recommendations in order to avoid damage to equipment.</li> <li>Specific Guidance for Cleaning and Disinfection of Kojak Fingerprint Kiosks can be found at <a href="https://cbpgov.sharepoint.com/sites/oit/pspo/training/catalog/kojak.aspx">https://cbpgov.sharepoint.com/sites/oit/pspo/training/catalog/kojak.aspx</a></li> <li>The use of alcohol based hand sanitizers or wipes will BURN the Platen and void the manufacturer's warranty.</li> <li>Only Use the following moisturizers with the Kojak Fingerprint Kiosks <ul style="list-style-type: none"> <li>Nivea Soft Moisturizing Cream</li> <li>Aveeno Daily Moisturizing Lotion</li> <li>Gold Bond Ultimate Healing Hand Cream</li> </ul> </li> </ul>

Notes:

1. This JHA and PPE Assessment only applies to CBP operations related to exposure to 2019 Novel Coronavirus or COVID-19). At the time of developing this JHA, new cases are being reported in countries around the globe, including the United States. See below links to CDC, WHO, OSHA, DHS, and other COVID-19 resources and information.
2. **CBP Respiratory Protection**. All CBP Frontline Personnel, Officers, and Agents who may be in work situations that place them at increased risk of exposure to COVID-19 due to processing passengers or travelers from COVID-19 affected countries who may have to wear an N95 respirator as outlined in the above risk based scenarios are considered to be in "mandatory use" N95 Respirator Programs. As such, the mandatory use of an N95 respirators requires a medical clearance, fit testing, and have a clean shaven face and no facial hair between the mask seal and the face in accordance with OSHA 1910.134 and CBP HB 5200-08B. Frontline and uniformed personnel have had these programs in place for years within CBP due to other work situations that also require an N95, such as exposure to TB, Handling of Fentanyl and other Narcotics, Ebola Response, Pandemic and PEID Response Plans, and now COVID-19.
3. **Voluntary Use of N95 Respirators**. The voluntary use of N95 respirators is allowed by employers when there is no work task that makes the N95 use "mandatory", however circumstances such as allowing mission support, administrative, or HQ personnel that do not typically wear a respirator, who would like to wear one for protection to exposures that are not related to specific work tasks such as traveling to and from work in congregate settings such as large metropolitan transit systems, buses, etc. would be considered "Voluntary Use". In these cases, "Voluntary Use" of N95 Respirators does not require a medical clearance or a fit test, however it does require approval from a supervisor to ensure the use won't create a hazard for the employee, impact N95 supplies needed for critical frontline "Mandatory Use" situations, or that would cause undue confusion and conflicting policy guidance such as "Voluntary Use" by frontline officers in primary passenger processing when they aren't performing any work that requires "Mandatory Use" as outlined above. All Respiratory Protection Program, whether "Mandatory Use" or "Voluntary Use", situations will be run in accordance with OSHA 1910.134 standards and policies outlined in CBP HB 5200-08B, Chapter 26.
4. While COVID-19 is a respiratory disease and the use of N95 respirators and other PPE is needed in certain conditions and work environments as outlined in this JHA below, the use of PPE is but one component of COVID-19 disease prevention and the use of N95 respirators and masks is NOT the most effective or primary way of preventing disease transmission. All personnel can take these basic steps to prevent exposure to and transmission of COVID-19. All personnel should practice good hygiene, wash hands frequently, cover their cough, stay away from work if ill and contact their health provider for guidance, avoid unnecessary congregate settings where COVID-19 exposure is more probable. KEEP YOUR HANDS BELOW YOUR CHIN and avoid touching mouth, eyes, nose and mucous membranes where contaminated hands can spread the disease to your respiratory system. These basic preventative measures will greatly reduce the exposure potential for ALL personnel and slow the spread of communicable diseases.

**References:**

- CBP COVID-19 Resource Portal: [http://cbpnet.cbp.dhs.gov/HRM/Pages/covid19\\_resources.aspx](http://cbpnet.cbp.dhs.gov/HRM/Pages/covid19_resources.aspx)
- CDC COVID-19 Website: <https://www.cdc.gov/coronavirus/2019-ncov/index.html>
- CDC COVID-19 Frequently Asked Questions (FAQ's): <https://www.cdc.gov/coronavirus/2019-ncov/faq.html>
- OSHA COVID-19 Website: [https://www.osha.gov/SLTC/novel\\_coronavirus/](https://www.osha.gov/SLTC/novel_coronavirus/)
- CBP Respirator Medical Clearance's Website <https://esp-eval.foh.psc.gov/login/>
- CDC Guidance For Law Enforcement Personnel: <https://www.cdc.gov/coronavirus/2019-ncov/community/guidance-law-enforcement.html>
- OSHA Guidance For Border Workers: <https://www.osha.gov/SLTC/covid-19/controlprevention.html#border>

**03/03/2020**

**CURRENT AT RISK COUNTRY GUIDANCE: (subject to change)**

**CHINA**

**IRAN**

**Guidance to BP Sectors on COVID-19 Encounters**

**Applies to at risk countries identified in Presidential Proclamations**

**Situation Summary**

CBP is working with The Centers for Disease Control and Prevention (CDC) to closely monitor an outbreak caused by a novel (new) coronavirus (2019-nCoV) first identified in Wuhan City, Hubei Province, China. The situation is evolving. For the most current information, monitor DHS and CBP messages and check the CDC information page at <https://www.cdc.gov/coronavirus/2019-ncov/index.html> frequently for updates.

While most of the people identified with 2019-nCoV have association with Wuhan City, there has been significant spread throughout China and increasingly to other countries around the world. To date there have been multiple confirmed cases in the United States; this number is expected to continue to increase. The USG has enacted strict entry restriction and screening measures for persons with travel to China and this scope will increase to other at risk countries identified in Presidential Proclamations with direct nexus to the COVID-19.

**I. CBP Workforce Health Protection Guidance**

- CBP Senior Medical Advisor continues to work with CBP OSH, DHS OCHCO, BP Safety, and BP operational leadership to monitor workforce health protection issues and PPE recommendations and requirements
- *Updated CBP Job Hazard Analysis and PPE Assessment attached*
- *Agents may print attached pocket cards for distribution as appropriate*
- The situation and information continue to evolve rapidly. Additional guidance or modifications will be provided as appropriate. If additional countries are added based on Presidential Proclamations or other orders as received through the CBP chain of command you will be notified in future versions of this document.

**II. Reporting Requirements (Applies to all detainees with potential/suspected COVID-19). Reports must be made within 1-hour or as soon as operationally practicable.**

**EVERY DETAINEE FROM ANY COUNTRY WITH NEXUS AND TRAVEL HISTORY TO/THROUGH/FROM AT RISK COUNTRIES OUTLINED IN PRESIDENTIAL PROCLAMATIONS RELATED TO COVID-19:**

Name

A#

DOB

Date of Apprehension:

Location of Apprehension:

Travel History:

- a) Travel within to/through/from at risk country within the **last 14 days**: Y/N
- b) Details

Symptoms (fever/cough/difficulty breathing): Y/N

Consulted with CDC (if positive travel within at risk country **within last 14 days**): Y/N

Disposition:

- a) Referred to hospital: Y/N
- b) Segregated/Monitored: Y/N
- c) Quarantined (per CDC): Y/N
- d) Transferred to ICE/ERO: Y/N
- e) Released: Y/N

**REPORTS MUST BE ROUTED THROUGH: the CoC, USBP CORRIDOR with a CC to the following EMAIL DISTRO:(b) (7)(E)**

**III. Guidance for Border Patrol encounters with potential nCoV cases**

**1. During Field Encounter/Intake Processing**

- a. Ask detainees if they have traveled to/through/from at risk country in the past **14 days**
- b. If no, continue regular processing to include health intake interview and medical assessment as appropriate.
- c. If yes, provide surgical mask, segregate (as a group if necessary), refer detainee to medical personnel onsite if available for health intake interview/medical assessment as appropriate, contact CDC quarantine station, and follow guidance below in consultation with medical personnel
  - i. If no medical personnel available onsite => place surgical mask, segregate (as a group if necessary), contact CDC quarantine station, and follow guidance below.
- d. For detainees with recent travel to/through/from at risk country AND signs/symptoms of illness → refer to #2 below
- e. For detainees with recent travel to/through/from at risk country AND NO signs/symptoms of illness → provide surgical mask, segregate (as a group if

necessary), monitor for flu-like symptoms (cough, difficulty breathing, shortness of breath, complains of fever).

- i. Ensure appropriate workforce PPE (Section 1 above and JHA attached)
- ii. If detainee develops flu-like symptoms, then see #2 below
- iii. **Ensure contact with CDC EOC Watch Desk/local CDC quarantine station to determine disposition prior to transfer or release**
- iv. Continue processing and coordinate expedited transfer to ICE or HHS as appropriate with proper notification and documentation of circumstances.

**2. For detainees with recent travel to/through/from at risk nation AND symptoms of respiratory illness:**

- a. Ensure a tight-fitting surgical mask is on the detainee.
- b. Isolate the detainee to the extent possible. Practice social distancing.
- c. Ensure appropriate workforce PPE (Section 1 above and JHA attached) and notify local collateral duty safety officer if additional PPE is required
- d. Promptly consult with local medical contract personnel if available
- e. Coordinate transfer to hospital for evaluation with advanced notification of circumstances (if seriously ill – activate 911/EMS with notification of circumstances)
- f. **Ensure contact with CDC EOC Watch Desk/local CDC quarantine station for disposition**

**3. For close contacts of detainees with travel to/through/from at risk country within 14 days**

- a. Provide surgical mask
- b. Implement segregation (as a group if necessary) with restricted movement
- c. **Contact CDC EOC Watch Desk/local CDC quarantine station to determine disposition**
- d. Monitor segregated detainees to observe for flu-like symptoms, if symptoms develop – see #2 above
- e. Coordinate expedited transfer to ICE or HHS as appropriate

**CDC Points of Contact:**

- CDC EOC/Watch Desk – 1-866-638-9753 Opt # 0 (24 hour ops)
- El Paso Quarantine Station – 1-915-834-5950
- San Diego Quarantine Station – 1-619-692-5665

**CBP Medical Points of Contact:**

- (b)(6)&(b)(7)(C) CBP Senior Medical Advisor -(b)(6)&(b)(7)(C)  
(b)(6)&(b)(7)(C)
- (b)(6)&(b)(7)(C) CBP Medical Planner (b)(6)&(b)(7)(C)  
(b)(6)&(b)(7)(C)



# CORONAVIRUS SYMPTOMS

## Common signs:



Runny Nose   Headache   Cough   Sore Throat   Fever

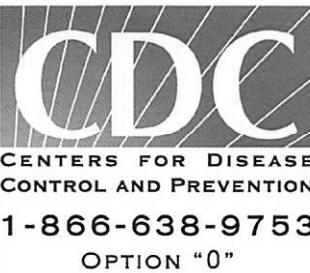
## Severe signs:

- Pneumonia
- Kidney Failure
- Breathing Difficulties
- Diarrhea

## Treatment:

There is currently no specific antiviral treatment. People infected with the Coronavirus should receive supportive care to help relieve symptoms.

## REFER SUSPECT CASES TO:



# CORONAVIRUS SYMPTOMS

## Common signs:



Runny Nose   Headache   Cough   Sore Throat   Fever

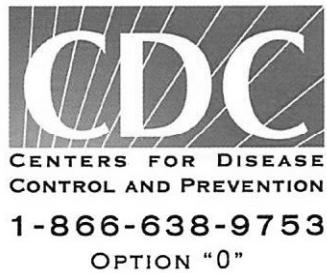
## Severe signs:

- Pneumonia
- Kidney Failure
- Breathing Difficulties
- Diarrhea

## Treatment:

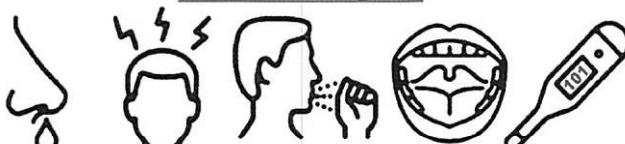
There is currently no specific antiviral treatment. People infected with the Coronavirus should receive supportive care to help relieve symptoms.

## REFER SUSPECT CASES TO:



# CORONAVIRUS SYMPTOMS

## Common signs:



Runny Nose   Headache   Cough   Sore Throat   Fever

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- Pneumonia
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- Breathing Difficulties
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## Treatment:

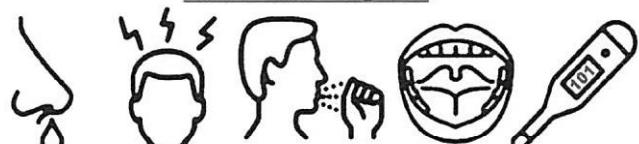
There is currently no specific antiviral treatment. People infected with the Coronavirus should receive supportive care to help relieve symptoms.

## REFER SUSPECT CASES TO:



# CORONAVIRUS SYMPTOMS

## Common signs:



Runny Nose   Headache   Cough   Sore Throat   Fever

## Severe signs:

- Pneumonia
- Kidney Failure
- Breathing Difficulties
- Diarrhea

## Treatment:

There is currently no specific antiviral treatment. People infected with the Coronavirus should receive supportive care to help relieve symptoms.

## REFER SUSPECT CASES TO:



## U. S. Customs and Border Protection (CBP) COVID-19 Exposure-Risk-Decision Guidance

U.S. Customs and Border Protection's (CBP) Occupational Safety and Health (OSH) Division and CBP Senior Medical Advisor have developed a comprehensive coronavirus disease 2019 (COVID-19) Job Hazard Analysis (JHA)/PPE Assessment to identify specific work tasks, risk categories, and recommendations for Personal Protective Equipment (PPE) measures, to mitigate occupational exposure to COVID-19. The CBP JHA is posted on the CBP COVID-19 Dashboard. [http://cbpnet.cbp.dhs.gov/HRM/Pages/covid19\\_resources.aspx](http://cbpnet.cbp.dhs.gov/HRM/Pages/covid19_resources.aspx)

This document serves as an adjunct to the CBP JHA and provides guidance for supervisors and personnel to assess risk from potential COVID-19 exposure and inform recommended actions based on the Center for Disease Control and Prevention's (CDC) risk assessment guidance and adapted for CBP mission environment. Due to the nature of the evolving situation, not every scenario can be accounted for. In the event of a concern regarding potential COVID-19 exposure, employees and supervisors should use the guidance below to determine risk level and recommended actions. For further questions or clarification, contact the CBP COVID-19 Emergency Operations Center (EOC) at **(b)(6)&(b)(7)(C)**

Exposure / Risk Level	Recommended Action - Workplaces
<p><b>Low Risk Exposure</b></p> <p>The overall risk for exposure to COVID-19 at work or home remains low for CBP personnel.</p> <p>NOTE: COVID-19 may be able to be transmitted while a person is asymptomatic, but the preponderance of risk for exposure occurs while persons are actively symptomatic.</p> <p>NOTE: Symptoms of COVID-19 include fever, cough, difficulty breathing, or general flu-like symptoms</p> <p>Low risk exposure – at work or home – is generally characterized as:</p> <ul style="list-style-type: none"><li>• Being in general proximity (beyond 6 feet) to someone with suspected, or confirmed COVID-19, who is either asymptomatic, or symptomatic.</li><li>• Being in close proximity (within six feet) to someone who has or may</li></ul>	<p><b>Recommended Actions for Low Risk Exposure</b></p> <p><b>EMPLOYEE:</b></p> <p>Continue standard precautions (NOTE 1)</p> <p>Notify Supervisor</p> <ul style="list-style-type: none"><li>• <b>If symptoms develop:</b><ul style="list-style-type: none"><li>○ Stay home; notify supervisor; consult medical provider</li></ul></li><li>• <b>If asymptomatic:</b><ul style="list-style-type: none"><li>○ Continue normal work and home routine</li><li>○ Self-observation (Definitions) for symptoms until 14 days after exposure</li></ul></li><li>• <b>If exposure was work-related:</b><ul style="list-style-type: none"><li>○ Notify your supervisor.</li><li>○ Contact your Injury Compensation Coordinator – (NOTE 2)</li></ul></li></ul> <p><b>SUPERVISOR:</b></p> <ul style="list-style-type: none"><li>• <b>If employee is symptomatic:</b></li></ul>

<p>have COVID-19, but is not symptomatic at the time of exposure.</p> <ul style="list-style-type: none"> <li>• Being exposed to someone who may have been exposed to someone with COVID-19, but is asymptomatic.</li> </ul> <p>Examples of low risk exposure include:</p> <ul style="list-style-type: none"> <li>• Being in the same building with someone with COVID-19, but not within 6 feet or direct contact.</li> <li>• Being on the same airplane as someone with COVID-19, but not within 3 seats/rows of the person.</li> </ul>	<ul style="list-style-type: none"> <li>○ Advise employee to stay home and consult medical provider</li> <li>○ Leave guidance – (NOTE 3)</li> </ul> <ul style="list-style-type: none"> <li>• If employee is asymptomatic: <ul style="list-style-type: none"> <li>○ Advise employee to continue normal work and home routine</li> <li>○ Self-observation (See Definitions) for symptoms until 14 days after exposure</li> </ul> </li> </ul> <ul style="list-style-type: none"> <li>• If exposure was work-related: (NOTE 4)</li> </ul>
<p><b><u>Moderate Risk Exposure</u></b></p> <p>Moderate risk exposure is generally characterized as:</p> <ul style="list-style-type: none"> <li>• Being in an enclosed space (e.g. room), beyond 6 feet, with a symptomatic person with COVID-19 for a prolonged period of time, while not wearing appropriate PPE.</li> <li>• Close contact (within 6 feet) with a symptomatic person with COVID-19, with appropriate PPE</li> <li>• Direct contact (touching) with a person symptomatic with COVID-19 or with their secretions, while wearing appropriate PPE.</li> </ul>	<p><b><u>Recommended Actions for Moderate Risk Exposure</u></b></p> <p><b>EMPLOYEE:</b> Continue standard precautions – (NOTE 1) Notify supervisor Stay at home Practice social distancing (Definitions)</p> <ul style="list-style-type: none"> <li>• If symptomatic: <ul style="list-style-type: none"> <li>○ Notify supervisor</li> <li>○ Consult medical provider</li> <li>○ Home isolation (Definitions) pending guidance from medical provider/health department</li> </ul> </li> <li>• If asymptomatic: <ul style="list-style-type: none"> <li>○ Home quarantine/Self-monitoring (Definitions) for symptoms until 14 days after exposure</li> </ul> </li> <li>• If exposure was work-related: <ul style="list-style-type: none"> <li>○ Notify your supervisor.</li> <li>○ Contact Injury Compensation Coordinator – (NOTE 2)</li> </ul> </li> </ul> <p><b>SUPERVISOR:</b></p> <ul style="list-style-type: none"> <li>• If employee symptomatic:</li> </ul>

	<ul style="list-style-type: none"> <li>○ Direct employee to stay home, practice social distancing, consult medical provider</li> <li>○ Leave guidance – (NOTE 3)</li> <li>• If employee is asymptomatic:           <ul style="list-style-type: none"> <li>○ Direct employee to stay home, practice social distancing, self-monitor for symptoms until 14 days after exposure (see definitions)</li> <li>○ Provide telework guidance – (NOTE 5)</li> <li>○ If exposure was work-related: (NOTE 4)</li> </ul> </li> </ul>
<p><b><u>High Risk Exposure</u></b></p> <p>A high-risk exposure is generally characterized as:</p> <ul style="list-style-type: none"> <li>• Close (within 6 ft) or direct (touching) contact with a person symptomatic with COVID-19, while not wearing appropriate PPE.</li> </ul> <p>Examples of High Risk Exposure:</p> <ul style="list-style-type: none"> <li>• Living in the same household as, an intimate partner of, or caring for a person in a non-healthcare setting (such as a home) to a person symptomatic with COVID-19, while not wearing appropriate PPE.</li> <li>• Direct contact with secretions from a person with COVID-19</li> </ul>	<p><b><u>Recommended Actions for High Risk Exposure</u></b></p> <p><b>EMPLOYEE:</b></p> <p>Stay at home Continue standard precautions – (NOTE 1) Practice social distancing Notify supervisor</p> <ul style="list-style-type: none"> <li>• If Symptomatic:           <ul style="list-style-type: none"> <li>○ Home isolation (Definitions)</li> <li>○ Consult medical provider/local health department for guidance/disposition</li> </ul> </li> <li>• If Asymptomatic           <ul style="list-style-type: none"> <li>○ Home quarantine/self-monitoring (Definitions)</li> <li>○ Consult medical provider/local health department for guidance/disposition</li> </ul> </li> <li>• If exposure was work-related:           <ul style="list-style-type: none"> <li>○ Notify your supervisor.</li> <li>○ Contact Injury Compensation Coordinator – (NOTE 2)</li> </ul> </li> </ul> <p><b>SUPERVISOR:</b></p> <ul style="list-style-type: none"> <li>• If employee is Symptomatic:           <ul style="list-style-type: none"> <li>○ Home isolation (Definitions)</li> </ul> </li> </ul>

	<ul style="list-style-type: none"> <li>○ Ensure employee contacts medical provider/local health department for guidance/disposition</li> <li>● If employee is Asymptomatic           <ul style="list-style-type: none"> <li>○ Home quarantine/self-monitoring (Definitions)</li> <li>○ Ensure employee contacts medical provider/local health department for guidance/disposition</li> <li>○ Leave guidance – (NOTE 3)</li> <li>○ Provide telework guidance – (NOTE 5)</li> <li>○ If exposure was work-related: (NOTE 4)</li> </ul> </li> </ul>
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**NOTES:**

**NOTE 1: Standard infection precautions:**

- Avoid contact with sick persons
- Wash hands frequently for 20 seconds with soap and water (or use alcohol-based hand sanitizer)
- Cover coughs or sneezes with a tissue or elbow
- Keep hands below chin – avoid touching eyes, nose, mouth
- If you are sick – stay home, notify supervisor, consult medical provider

**NOTE 2: Exposure Claim/Worker's Compensation Guidance – EMPLOYEE**

- Contact your local workers' compensation point of contact (Injury Compensation Coordinator) to guide you on the process to file a workers' compensation claim and which form to use.
  - CA-1 - claim of traumatic injury (exposure on a specific date, time and location, within one 8-hour shift); or
  - CA-2 - claim of occupational disease (exposure over time or multiple exposures on more than one date, time and location).

**NOTE 3: Leave Procedures – SUPERVISOR**

- Approve weather and safety leave until it is determined whether the employee has COVID-19. If diagnosed with COVID-19, approve sick leave, annual leave, or other absence category available to the employee such as compensatory time off, credit time, etc.

#### **NOTE 4: Exposure Claim/Worker's Compensation Guidance – SUPERVISOR**

- Complete an incident report (CBP Form 502) in CBP eCOMP.
  - Complete supervisor portion of the CA-1 or CA-2 in CBP eCOMP as soon as possible, but no later than 24 hours after the employee completes their portion of the CA-1 or CA-2

#### **NOTE 5: Telework Guidance – SUPERVISOR**

- If not telework ready, approve weather and safety leave until it is determined whether the employee has COVID-19.
  - If diagnosed with COVID-19, approve sick leave, annual leave, or other absence category available to the employee such as compensatory time off, credit time, etc.

#### **Definitions Used in this Guidance:**

**Note:** Definitions listed below are adapted from CDC guidance and may or may not fit exactly into each CBP specific work environment or job requirement.

**Symptoms compatible with COVID-19 infection:** Include subjective or measured fever, cough, or difficulty breathing, general flu-like symptoms

**Self-observation:** Remain alert for subjective fever, cough, or difficulty breathing. If they feel feverish or develop cough or difficulty breathing during the self-observation period, they should take their temperature, limit contact with others, and seek health advice by telephone from a healthcare provider or their local health department to determine whether medical evaluation is needed.

**Self-monitoring:** Monitor themselves for fever by taking their temperatures twice a day and remain alert for cough or difficulty breathing. Anyone on self-monitoring should be provided a plan for whom to contact if they develop fever, cough, or difficulty breathing during the self-monitoring period to determine whether medical evaluation is needed.

**Home Isolation:** Separation, at home, of a person or group of people known or reasonably believed to be *infected with a communicable disease and potentially infectious* from those who are not infected to prevent spread of the communicable disease. Isolation for public health purposes may be voluntary or compelled by federal, state, or local public health order.

**Home Quarantine:** Separation, at home, of a person or group of people reasonably believed to have been *exposed to a communicable disease but not yet symptomatic*, from others who have not been so exposed, to prevent the possible spread of the communicable disease.

**Social distancing:** Remaining out of congregate settings, avoiding local public transportation (e.g., bus, subway, taxi, ride share), and maintaining distance (approximately 6 feet or 2 meters) from others. If social distancing is recommended, presence in congregate settings or use of local public transportation should only occur with approval of local or state health authorities.

**Tucson Sector**  
**Muster Module: COVID-19**

**Instructions:** This information will be read and discussed at each muster for all different work schedules or at unit/program meetings as appropriate, until the next update is provided. Hard copies of the muster module should be posted in all muster areas, breakrooms, and common areas.

**Date of Issuance:** **Thursday, March 12, 2020**

**Reference Materials:** Guidance to BP Sectors on Novel Coronavirus \_03032020  
CBP Coronavirus JHA 4 Feb 2020 V2 Final  
COVID 19 Exposure Risk Assessment SMA Final Draft 2  
Best Practices, Employee Protection \_UAS Influx  
Safety and Health COVID-19 Resource Page  
CDC: Coronavirus Disease 2019 (COVID-19)

**Top Line Message:** The safety of our workforce and the American people remains our top priority; *the immediate risk level remains listed as low.*

**Frequency of Updates:** Updates are expected each Monday; the frequency can and will increase as information updates are provided.

**Message:**

- ***Symptoms:*** Mild to severe respiratory illness with fever, cough, and difficulty breathing.
- ***Disease Spread:*** Close contact (about 6 feet) with infected persons increases the risk of contracting disease; transmission occurs via respiratory droplets, i.e., coughing/sneezing.
- ***Protection Protocols:***
  - Clean your hands often, avoid close contact with others, stay home if you're sick,
  - Cover coughs and sneezes, increase the regularity of your work area sanitization, and
  - Exercise social distancing to protect yourself and to prevent spread.
  - Each station has personal protection equipment (PPE) on hand to include:
    - N95 Masks,
    - Nitrile gloves for employees, and
    - Surgical masks for persons suspected of being infected.
  - All employees should have unfettered access to PPE, and
  - All Agents should have PPE with them at the *point of apprehension* or the first contact with aliens.
- ***Field Encounter/Intake Processing Guidance:***
  - Ask detainees if they have traveled from or through China in the past 14 days,
    - If no, continue regular processing to include health intake interview and medical assessment as appropriate after arrival to your processing center.
    - If yes, provide surgical mask segregate (as a group if necessary), contact CDC quarantine station (b)(6)&(b)(7)(C)

For further questions or concerns, please contact TCA Health and Safety POCs:  
Operations Officers (b)(6)&(b)(7)(C) or (b)(6)&(b)(7)(C) at, (b)(6)&(b)(7)(C)

**Tucson Sector**  
**Muster Module: COVID-19**

- Additionally, every detainee from China or with history of travel to China must answer questionnaire and be reported within one hour to  
    (b) (7)(E)  
○ More information listed in the “Guidance to BP Sectors on Novel Coronavirus”.
- ***Reporting Requirements:***
  - ALL USBP sites **MUST** report USBP employees or contractors who have been ordered quarantined, self-quarantined, placed on administrative leave, or are teleworking now due to a potential exposure to the COVID-19 through direct or indirect contact with a family member or other person (s) who may have been exposed to someone who had a positive COVID-19 test result.
- ***Additional information:***
  - For more information, visit the [Safety and Health COVID-19 Resource Page](#).
  - COVID-19 Dashboard by Johns Hopkins University:  
<https://www.arcgis.com/apps/opsdashboard/index.html#/bda7594740fd40299423467b48e9ecf6>
  - Centers for Disease Control (CDC) and Prevention COVID-19:  
<https://www.cdc.gov/coronavirus/2019-ncov/index.html>
  - CDC FAQs: <https://www.cdc.gov/coronavirus/2019-ncov/faq.html>
- ***Points of Contact:***
  - Tucson Sector Health and Safety  
    (b)(6)&(b)(7)(C)  
    Operations Officer (OO) (b)(6)&(b)(7)(C)  
    Operations Officer (b)(6)&(b)(7)(C)

For further questions or concerns, please contact TCA Health and Safety POCs:  
Operations Officers (b)(6)&(b)(7)(C) or (b)(6)&(b)(7)(C) at, (b)(6)&(b)(7)(C)

## **Guidance to BP Sectors on Novel Coronavirus, Wuhan, China**

**CBP Senior Medical Advisor**

### **2/6/20 - Situation Summary**

CBP is working with The Centers for Disease Control and Prevention (CDC) to closely monitor an outbreak caused by a novel (new) coronavirus (2019-nCoV) first identified in Wuhan City, Hubei Province, China. The situation is evolving. For the most current information, monitor DHS and CBP messages and check the CDC information page at <https://www.cdc.gov/coronavirus/2019-ncov/index.html> frequently for updates.

While most of the people identified with 2019-nCoV have association with Wuhan City, there has been significant spread throughout China and increasingly to other countries around the world. To date there have been multiple confirmed cases in the United States; this number is expected to continue to increase. The USG has enacted strict entry restriction and screening measures for persons with travel to China.

### **I. CBP Workforce Health Protection Guidance**

- CBP Senior Medical Advisor continues to work with CBP OSH, DHS OCHCO, BP Safety, and BP operational leadership to monitor workforce health protection issues and PPE recommendations and requirements
- ***Updated CBP Job Hazard Analysis and PPE Assessment attached***
- ***Agents may print attached pocket cards for distribution as appropriate***
- The situation and information continue to evolve rapidly. Additional guidance or modifications will be provided as appropriate.

### **II. Reporting Requirements (Applies to all detainees with potential/suspected nCoV). Reports must be made within 1-hour or as soon as operationally practicable.**

#### **EVERY DETAINEE FROM CHINA OR WITH HISTORY OF TRAVEL TO CHINA:**

Name

A#

DOB

Date of Apprehension:

Location of Apprehension:

Travel History:

- a) travel within mainland China within last 14 days: Y/N
- b) Details

Symptoms (fever/cough/difficulty breathing): Y/N

Consulted with CDC (required if positive travel history in China within last 14 days): Y/N

Disposition:

- a) Referred to hospital: Y/N
- b) Quarantined (per CDC): Y/N

- c) Transferred: Y/N To: \_\_\_\_\_
- d) Released: Y/N

- **REPORTS MUST BE ROUTED THROUGH: the CoC, USBP CORRIDOR with a CC to the following EMAIL DISTRO: (b) (7)(E)**

### **III. Guidance for Border Patrol encounters with potential nCoV cases**

#### **1. During Field Encounter/Intake Processing**

- a. Ask detainees if they have traveled from or through China in the past 14 days
- b. If no, continue regular processing to include health intake interview and medical assessment as appropriate.
- c. If yes, provide surgical mask, segregate (as a group if necessary), refer detainee to medical personnel onsite if available for health intake interview/medical assessment as appropriate, contact CDC quarantine station, and follow guidance below in consultation with medical personnel
  - i. If no medical personnel available onsite => place surgical mask, segregate (as a group if necessary), contact CDC quarantine station, and follow guidance below.
- d. **For detainees with recent travel to China AND signs/symptoms of illness → refer to #2 below**
- e. **For detainees with recent travel to China AND NO signs/symptoms of illness → provide surgical mask, segregate (as a group if necessary), monitor for flu-like symptoms (cough, difficulty breathing, shortness of breath, complains of fever).**
  - i. Ensure appropriate workforce PPE (Section 1 above and JHA attached)
  - ii. If detainee develops flu-like symptoms, then see #2 below
  - iii. **Ensure contact with CDC EOC Watch Desk/local CDC quarantine station to determine disposition prior to transfer or release**
  - iv. Continue processing and coordinate expedited transfer to ICE or HHS as appropriate with proper notification and documentation of circumstances.

#### **2. For detainees with recent travel to China AND symptoms of respiratory illness:**

- a. Ensure a tight-fitting surgical mask is on the detainee.
- b. Isolate the detainee to the extent possible. Practice social distancing.
- c. Ensure appropriate workforce PPE (Section 1 above and JHA attached) and notify local collateral duty safety officer if additional PPE is required
- d. Promptly consult with local medical contract personnel if available
- e. Coordinate transfer to hospital for evaluation with advanced notification of circumstances (if seriously ill – activate 911/EMS with notification of circumstances)
- f. **Ensure contact with CDC EOC Watch Desk/local CDC quarantine station for disposition**

**3. For close contacts of detainees with travel to China within 14 days**

- a. Provide surgical mask
- b. Implement segregation (as a group if necessary) with restricted movement
- c. **Contact CDC EOC Watch Desk/local CDC quarantine station to determine disposition**
- d. Monitor segregated detainees to observe for flu-like symptoms, if symptoms develop – see #2 above
- e. Coordinate expedited transfer to ICE or HHS as appropriate

**CDC Points of Contact:**

- CDC EOC/Watch Desk – 1-866-638-9753 Opt # 0 (24 hour ops)
- El Paso Quarantine Station – 1-915-834-5950
- San Diego Quarantine Station – 1-619-692-5665

**CBP Medical Points of Contact:**

- (b)(6)&(b)(7)(C) CBP Senior Medical Advisor (b)(6)&(b)(7)(C)  
(b)(6)&(b)(7)(C) [REDACTED]
- (b)(6)&(b)(7)(C) CBP Operational Medicine Advisor - (b)(6)&(b)(7)(C)  
(b)(6)&(b)(7)(C) [REDACTED]
- (b)(6)&(b)(7)(C) CBP Medical Planner (b)(6)&(b)(7)(C)  
(b)(6)&(b)(7)(C) [REDACTED]

Job Hazard Analysis (JHA) & PPE Assessment	Job Title: Exposure to 2019 Novel Coronavirus (nCoV)	Title of person who does job: All CBP Personnel in Affected Areas.	Office: All CBP	
				<p><b>Prepared By:</b>            HRM, Occupational Safety and Health (OSH) Division            CBP Senior Medical Advisor</p> <p><b>Reviewed By:</b>            Office of Field Operations            United States Border Patrol</p> <p><b>Approved by:</b>            OSH Division Director            CBP Senior Medical Advisor</p> <p><b>Note:</b> This JHA only applies to the 2019 Novel Coronavirus (nCoV) outbreak linked to Wuhan, China which is being investigated by the Centers for Disease Control (CDC), World Health Organization, (WHO), Occupational Health Administration (OSHA), and other public health agencies. Although the initial outbreaks of the 2019 novel Coronavirus are believed to be linked to exposure to shellfish and meat markets in Wuhan, China, new cases of the 2019-nCoV disease have been confirmed in neighboring countries, including some as far away as here in the United States. Cases of person-to-person transmission have been increasing, with spread to multiple countries, including 11 confirmed cases in the USA. Health authorities in Wuhan, China and surrounding areas are monitoring this disease closely and steps are being taken to contain the disease locally. As of February 4, 2020 all modes of transportation leaving China (air, rail, sea, etc.) are being restricted and every effort is being taken to conduct exit screening at surrounding area airports. Additional restrictions have been implemented in the United States to prevent the spread of disease including flight restrictions into a limited number of airports and self-monitored home quarantine for 14 days for anyone returning from affected areas.</p> <p>More information about Coronavirus can be found here at the CDC Coronavirus link <a href="https://www.cdc.gov/coronavirus/index.html">https://www.cdc.gov/coronavirus/index.html</a></p> <p><b>Summary Risk Assessment:</b> Incomplete information regarding incubation, infectious period, and transmissibility, as well as evolving circumstances make a definitive risk assessment challenging. In light of this, awareness and operationally-informed precautions are warranted. In general, the overall risk to CBP personnel is assessed to be low. However, risk increases with increased exposure to persons potentially infected with nCoV, warranting enhanced precautions described herein. CBP will continue to monitor the situation closely in coordination with appropriate stakeholders and will adjust guidance as appropriate. CBP personnel should continue to maintain situational awareness regarding this outbreak.</p> <p><b>Note:</b> Risk categories (Very High, High, Medium, and Low) are to be used in conjunction with this document only. They refer to the risk relative to the hazard identified; they do not correlate to overall risk of contracting Coronavirus Disease or risk categories used by other agencies such as the Centers for Disease Control (CDC), or in other documents such as the Workforce Health and Safety Coronavirus Health Advisories Screening Guidance, CDC Coronavirus Advisories, or Health Alert Notices (HAN) meant for other audiences.</p>

Operations	Risk Category	Hazards	PPE/Recommendations
<b>1. Office Settings, Administrative, and HQ Staff</b>	Low	Casual or Close Contact of Coronavirus cases is not expected.	<ul style="list-style-type: none"> <li>Stay up to date on latest information from DHS, CBP, CDC, WHS, and other Coronavirus alerts, advisories and updates. See page 5.</li> <li>Frequent hand washing.</li> <li>Stay home if you are ill.</li> <li>Cover your cough/sneeze.</li> <li>Use of surgical mask or N95 is NOT recommended.</li> <li>Voluntary use of surgical masks is allowed with supervisor approval, widespread use NOT recommended. See Page 5 Notes.</li> </ul>
<b>2. Airport Operations</b>	Medium	<u>Casual Contact</u> with passengers or persons with increased risk of exposure; Who may have had a travel nexus to China within the past 14 days May be able to transmit disease while asymptomatic	<ul style="list-style-type: none"> <li>Frequent hand washing.</li> <li>Wear disposable nitrile gloves.</li> <li>Stay up to date on latest information from DHS, CBP, CDC, WHS, and other Coronavirus alerts, advisories and updates. See page 5.</li> <li>Passive screening of passengers for signs of illness.</li> <li>Use R.I.N.G. Card and general precautions.</li> <li>Separate passengers with a China travel nexus and send to CDC, other medical screeners, or secondary</li> <li>Avoid close or direct contact with passengers with a travel nexus to China within the past 14 days.</li> <li>Provide surgical masks to any passengers with signs of illness.</li> <li>Voluntary use of N95 respirators may be considered per CBP policy and supervisor approval. (See HB 5200-08B, Ch. 26).</li> </ul>
<b>3. Airport Operations</b>	High	<u>Limited Close Contact</u> Within six (6) feet of any traveler from anywhere in China within 14 days <b>Secondary Passenger Processing</b>	<ul style="list-style-type: none"> <li>Frequent hand washing.</li> <li>Stay up to date on latest information from DHS, CBP, CDC, WHS, and other Coronavirus alerts, advisories and updates. See page 5.</li> <li>Quickly identify and separate symptomatic passengers from others.</li> <li>Provide surgical masks to symptomatic passengers.</li> <li>Wear disposable nitrile gloves.</li> <li>Avoid direct contact and keep close contact to a minimum.</li> <li>Officer/Agent wear N95 respirator within six (6) feet of symptomatic passenger.</li> <li>Use R.I.N.G. Card for general precautions.</li> <li>Refer/escort any travelers from China within 14 days to CDC for evaluation/interview.</li> <li>Contact EMS for severely ill passengers (high fever, uncontrollable coughing, difficulty breathing, etc.).</li> </ul>

Operations	Risk Category	Hazards	PPE/Recommendations
4. Airport Operations Secondary Passenger Processing  “Entering an enclosed room/space where symptomatic person is being held or evaluated by CDC”	Very High	<b>Extended Close Contact</b> Within six (6) feet of any Symptomatic or ill passengers with travel to China within 14 days <ul style="list-style-type: none"> <li>• Runny Nose</li> <li>• Coughing</li> <li>• Headache</li> <li>• Sore Throat</li> <li>• Fever</li> <li>• Flu Like Symptoms</li> </ul>	<ul style="list-style-type: none"> <li>• Frequent hand washing.</li> <li>• Stay up to date on latest information from DHS, CBP, CDC, WHS, and other Coronavirus alerts, advisories and updates. See page 5.</li> <li>• Provide surgical masks to symptomatic passengers.</li> <li>• Wear disposable nitrile gloves.</li> <li>• Officer/Agent wears N95 respirator, goggles/face shield, and disposable outer garments to prevent uniform contamination.</li> <li>• Avoid direct contact and keep close contact to a minimum.</li> <li>• Limit time in room to critical functions.</li> <li>• Use R.I.N.G. Card for general precautions.</li> </ul>
5. Land Border Operations/ Border Patrol Check Points  <b>Primary</b> Interdiction/processing of persons, vehicles or cargo. (Persons, Drivers, passengers, or stowaways with travel nexus to China within 14 days)	Medium	<b>Casual Contact</b> with passengers or persons with increased risk of exposure; <ul style="list-style-type: none"> <li>• Who may have had a travel nexus to China within the past 14 days</li> <li>• May be able to transmit disease while asymptomatic</li> </ul>	<ul style="list-style-type: none"> <li>• Frequent hand washing.</li> <li>• Stay up to date on latest information from DHS, CBP, CDC, WHS, and other Coronavirus alerts, advisories and updates. See page 5.</li> <li>• Wear disposable nitrile gloves.</li> <li>• Passive lookout for signs of illness.</li> <li>• Use R.I.N.G. Card for general precautions.</li> <li>• Refer persons with travel to China within 14 days to medical personnel, local health system, CDC as appropriate for risk assessment.</li> <li>• Avoid close or direct contact with persons with a travel nexus to China within 14 days.</li> </ul>
6. Land Border Operations/ Border Patrol Check Points  <b>Secondary</b> Interdiction/processing of persons, vehicles or Cargo (Persons, driver, passengers, or stowaways with travel nexus to China within 14 days)	High	<b>Limited Close Contact</b> Within six (6) feet of any traveler from	<ul style="list-style-type: none"> <li>• Frequent hand washing.</li> <li>• Stay up to date on latest information from DHS, CBP, CDC, WHS, and other Coronavirus alerts, advisories and updates. See page 5.</li> <li>• Quickly identify and separate symptomatic persons from others.</li> <li>• Provide surgical masks to symptomatic persons.</li> <li>• Avoid direct contact or extended close contact.</li> <li>• Wear disposable nitrile gloves.</li> <li>• Officer/Agent wears N95 respirator within 6 (six) feet of symptomatic persons.</li> <li>• Use R.I.N.G. Card for general precautions</li> <li>• Refer persons with travel to China within 14 days to medical personnel, local health system, CDC as appropriate for risk assessment</li> </ul>

<p><b>7. Land Border Operations/ Border Patrol Check Points</b></p> <p><b>"Entering an enclosed room/space where symptomatic person is being held pending evaluation by CDC or public health personnel"</b></p>	<p><b>Very High</b></p> <p><b>Extended Close Contact</b> Within six (6) feet of Symptomatic or ill travelers from China within 14 days</p> <ul style="list-style-type: none"> <li>• Runny Nose</li> <li>• Coughing</li> <li>• Headache</li> <li>• Sore Throat</li> <li>• Fever</li> <li>• Flu Like Symptoms</li> </ul> <p><b>High</b></p> <p><b>8. Disinfection and cleanup of Contaminated Surfaces</b></p>	<ul style="list-style-type: none"> <li>• Frequent hand washing.</li> <li>• Stay up to date on latest information from DHS, CBP, CDC, WHS, and other Coronavirus alerts, advisories and updates. See page 5.</li> <li>• Provide surgical masks to symptomatic passengers.</li> <li>• Wear disposable nitrile gloves.</li> <li>• Officer/Agent wears N95 respirator, goggles/face shield, and disposable outer garments to prevent uniform contamination.</li> <li>• Avoid direct contact and keep close contact to a minimum.</li> <li>• Limit time in room to critical functions.</li> <li>• Use R.I.N.G. Card for general precautions.</li> </ul> <ul style="list-style-type: none"> <li>• Coronaviruses can live for long periods on surfaces, so regular cleaning and disinfection should be performed when working with potentially infected populations. Surface disinfection should be performed after interaction with a suspected sick individual as well as periodically through a work shift.</li> <li>• Use an EPA-registered disinfectant suitable for non-enveloped viruses (e.g. adenovirus, norovirus, poliovirus) to treat spills and to disinfect surfaces after bulk spill material has been removed. See <a href="https://www.epa.gov/sites/production/files/2016-12/documents/list_a_sterilizer.pdf">https://www.epa.gov/sites/production/files/2016-12/documents/list_a_sterilizer.pdf</a></li> <li>• If an EPA-registered disinfectant is not available, use a 10% common household bleach-water solution (one (1) part chlorine bleach to nine (9) parts of water) to treat spills and to disinfect surfaces.</li> <li>• Nitrile or fluid impermeable gloves.</li> <li>• Wear an N95 respirator.</li> <li>• Eye protection (non-vented goggles) or face shield to cover nose and mouth.</li> <li>• Liquid impermeable gown (for large cleanup jobs wear liquid impermeable suit/coveralls).</li> <li>• Closed toe shoes and fluid impermeable shoe covers.</li> <li>• Dispose of all infectious material as bio hazardous waste in accordance with existing guidance.</li> </ul>
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**Notes:**

1. This JHA and PPE Assessment only applies to CBP operations related to exposure to 2019 Novel Coronavirus (2019-nCoV). This JHA only applies to operations that involve travelers and people who have traveled to, from or through countries identified as being affected by the Novel Coronavirus (2019-nCoV). At the time of developing this JHA, cases were being reported daily. See the CDC website below for current information on the 2019-nCoV Coronavirus Disease.
2. **CBP Respiratory Protection.** All CBP Officers and Agents who wear a respirator must be medically cleared and fit tested per the CBP Respiratory Protection Program Policy (See HB 5200-08B) and below link for respirator clearances website. All Voluntary Use of respirators will be per CBP policy as outlined in HB 5200-08B, CH 26.
3. The highest risk of contracting the 2019-nCoV Coronavirus Disease appears to be from persons infected by the disease through coughing/sneezing in close contact with other people. Protecting yourself through droplet and respiratory protection much like other respiratory illnesses such as influenza is the best way to prevent the spread of Coronavirus Disease.
4. The HRM, OSH Division will monitor the 2019-nCoV Coronavirus Disease outbreak and will make recommendations to CBP leadership based on information received from DHS Workforce Health and Safety (WHS), CDC, OSHA, WHO and others.

**References:**

- CBP Muster on Coronavirus: [CBP/CDC Muster 2019 Coronavirus](https://www.cdc.gov/coronavirus/2019-nCoV/muster/)
- CDC Coronavirus Website: <https://www.cdc.gov/coronavirus/2019-nCoV/index.html>
- CDC Coronavirus Frequently Asked Questions (FAQ's): <https://www.cdc.gov/coronavirus/2019-nCoV/faq.html>
- OSHA Coronavirus Webpage: [https://www.osha.gov/SLTC/novel\\_coronavirus/](https://www.osha.gov/SLTC/novel_coronavirus/)
- CBP Respirator Medical Clearance's Website <https://resp-eval.foh.psc.gov/login/>
- EPA List of Disinfectants for Coronavirus: [https://www.epa.gov/sites/production/files/2016-12/documents/list\\_a\\_sterilizer.pdf](https://www.epa.gov/sites/production/files/2016-12/documents/list_a_sterilizer.pdf)
- OSHA Fact Sheet – Protecting Workers During Pandemics: <https://www.osha.gov/Publications/OSHAFAQS-3747.pdf>

## **U. S. Customs and Border Protection (CBP)** **COVID-19 Exposure-Risk-Decision Guidance**

U.S. Customs and Border Protection's (CBP) Occupational Safety and Health (OSH) Division and CBP Senior Medical Advisor have developed a comprehensive coronavirus disease 2019 (COVID-19) Job Hazard Analysis (JHA)/PPE Assessment to identify specific work tasks, risk categories, and recommendations for Personal Protective Equipment (PPE) measures, to mitigate occupational exposure to COVID-19. The CBP JHA is posted on the [CBP COVID-19 Dashboard](https://cbpgov.sharepoint.com/sites/HRM/osh/TNG/Pages/Safety-and-Health-COVID-19-Resource-Page.aspx).

This document serves as an adjunct to the CBP JHA and provides guidance for supervisors and personnel to assess risk from potential COVID-19 exposure and inform recommended actions based on the Center for Disease Control and Prevention's (CDC) risk assessment guidance and adapted for CBP mission environment. Due to the nature of the evolving situation, not every scenario can be accounted for. In the event of a concern regarding potential COVID-19 exposure, employees and supervisors should use the guidance below to determine risk level and recommended actions. For further questions or clarification, contact the CBP COVID-19 Emergency Operations Center (EOC) at (b)(6)&(b)(7)(C)

Exposure / Risk Level	Recommended Action - Workplaces
<p><b><u>Low Risk Exposure</u></b></p> <p>The overall risk for exposure to COVID-19 at work or home remains low for CBP personnel.</p> <p>NOTE: COVID-19 may be able to be transmitted while a person is asymptomatic, but the preponderance of risk for exposure occurs while persons are actively symptomatic.</p> <p>NOTE: Symptoms of COVID-19 include fever, cough, difficulty breathing, or general flu-like symptoms</p> <p>Low risk exposure – at work or home – is generally characterized as:</p> <ul style="list-style-type: none"><li>• Being in general proximity (beyond 6 feet) to someone with suspected, or confirmed COVID-19, who is either asymptomatic, or symptomatic.</li></ul>	<p><b><u>Recommended Actions for Low Risk Exposure</u></b></p> <p><b>EMPLOYEE:</b></p> <p>Continue standard precautions (NOTE 1)</p> <p>Notify Supervisor</p> <ul style="list-style-type: none"><li>• <b>If symptoms develop:</b><ul style="list-style-type: none"><li>○ Stay home; notify supervisor; consult medical provider</li></ul></li><li>• <b>If asymptomatic:</b><ul style="list-style-type: none"><li>○ Continue normal work and home routine</li><li>○ Self-observation (Definitions) for symptoms until 14 days after exposure</li></ul></li><li>• <b>If exposure was work-related:</b><ul style="list-style-type: none"><li>○ Notify your supervisor.</li><li>○ Contact your Injury Compensation Coordinator – (NOTE 2)</li></ul></li></ul> <p><b>SUPERVISOR:</b></p> <ul style="list-style-type: none"><li>• <b>If employee is symptomatic:</b></li></ul>

<ul style="list-style-type: none"> <li>• Being in close proximity (within six feet) to someone who has or may have COVID-19, but is not symptomatic at the time of exposure.</li> <li>• Being exposed to someone who may have been exposed to someone with COVID-19, but is asymptomatic.</li> </ul> <p>Examples of low risk exposure include:</p> <ul style="list-style-type: none"> <li>• Being in the same building with someone with COVID-19, but not within 6 feet or direct contact.</li> <li>• Being on the same airplane as someone with COVID-19, but not within 3 seats/rows of the person.</li> </ul>	<ul style="list-style-type: none"> <li>○ Advise employee to stay home and consult medical provider</li> <li>○ Leave guidance – (NOTE 3)</li> <li>• If employee is asymptomatic: <ul style="list-style-type: none"> <li>○ Advise employee to continue normal work and home routine</li> <li>○ Self-observation (See Definitions) for symptoms until 14 days after exposure</li> </ul> </li> <li>• If exposure was work-related: (NOTE 4)</li> </ul>
<p><b><u>Moderate Risk Exposure</u></b></p> <p>Moderate risk exposure is generally characterized as:</p> <ul style="list-style-type: none"> <li>• Being in an enclosed space (e.g. room), beyond 6 feet, with a symptomatic person with COVID-19 for a prolonged period of time, while not wearing appropriate PPE.</li> <li>• Close contact (within 6 feet) with a symptomatic person with COVID-19, with appropriate PPE</li> <li>• Direct contact (touching) with a person symptomatic with COVID-19 or with their secretions, while wearing appropriate PPE.</li> </ul>	<p><b><u>Recommended Actions for Moderate Risk Exposure</u></b></p> <p><b>EMPLOYEE:</b></p> <p>Continue standard precautions – (NOTE 1)  Notify supervisor  Stay at home  Practice social distancing (Definitions)</p> <ul style="list-style-type: none"> <li>• If symptomatic: <ul style="list-style-type: none"> <li>○ Notify supervisor</li> <li>○ Consult medical provider</li> <li>○ Home isolation (Definitions) pending guidance from medical provider/health department</li> </ul> </li> <li>• If asymptomatic: <ul style="list-style-type: none"> <li>○ Home quarantine/Self-monitoring (Definitions) for symptoms until 14 days after exposure</li> </ul> </li> <li>• If exposure was work-related: <ul style="list-style-type: none"> <li>○ Notify your supervisor.</li> <li>○ Contact Injury Compensation Coordinator – (NOTE 2)</li> </ul> </li> </ul> <p><b>SUPERVISOR:</b></p> <ul style="list-style-type: none"> <li>• If employee symptomatic:</li> </ul>

	<ul style="list-style-type: none"> <li>○ Direct employee to stay home, practice social distancing, consult medical provider</li> <li>○ Leave guidance – (NOTE 3)</li> <li>● If employee is asymptomatic:           <ul style="list-style-type: none"> <li>○ Direct employee to stay home, practice social distancing, self-monitor for symptoms until 14 days after exposure (see definitions)</li> <li>○ Provide telework guidance – (NOTE 5)</li> <li>○ If exposure was work-related: (NOTE 4)</li> </ul> </li> </ul>
<b><u>High Risk Exposure</u></b>	<p><b><u>Recommended Actions for High Risk Exposure</u></b></p> <p><b>EMPLOYEE:</b></p> <p>Stay at home Continue standard precautions – (NOTE 1) Practice social distancing Notify supervisor</p> <ul style="list-style-type: none"> <li>● If Symptomatic:           <ul style="list-style-type: none"> <li>○ Home isolation (Definitions)</li> <li>○ Consult medical provider/local health department for guidance/disposition</li> </ul> </li> <li>● If Asymptomatic           <ul style="list-style-type: none"> <li>○ Home quarantine/self-monitoring (Definitions)</li> <li>○ Consult medical provider/local health department for guidance/disposition</li> </ul> </li> <li>● If exposure was work-related:           <ul style="list-style-type: none"> <li>○ Notify your supervisor.</li> <li>○ Contact Injury Compensation Coordinator – (NOTE 2)</li> </ul> </li> </ul> <p><b>SUPERVISOR:</b></p> <ul style="list-style-type: none"> <li>● If employee is Symptomatic:           <ul style="list-style-type: none"> <li>○ Home isolation (Definitions)</li> </ul> </li> </ul>