

**Ebola screening at Airports –
Presentation by PH-IH Division
MoHFW – 20th May 2026**

Pre-boarding/Boarding measures

- **MHA/MEA:**

- To share list of passengers issued visa to MoHFW.
- Provide **travel history in last 21 days** in online visa form.
- Alert during immigration clearance if travel history to Ebola affected countries in last 21 days.

- **MOCA:**

- **Priority development of Air Suvidha portal.** Passengers to fill in details while ticket booking/web-checkin or boarding. Data available instantly to APHO/BoI/IDSP/SSO.
- Airlines Passenger Manifest transmission to APHO/BoI.
- Temporary filling of Self Declaration form during boarding process/Immigration (Direct flights/All flights originating from Africa with passengers to India by Transit) till the time Air suvidha portal develops

During Travel

- In-flight announcement:
 - Travel history
 - Any symptoms to be reported to crew.
 - Isolation of **suspect** with dedicated washroom.
- Temporary filling of Self Declaration form (Direct flights/high possibility flights) till the time Air suvidha portal activated.
- Infection Prevention & Control Measures to be followed routinely.

On arrival

- Collection of SDF from all passengers by airlines/Ground Handling Staff (GHS).
- Sharing of SDF to APHO/Immigration (copy).
- Thermal screening to be continued.
- In case of suspect case in flight:
 - Parking of airline in separate bay.
 - All passengers to deboard first, suspect & caretaker to deboard at last.
 - Medical team & APHO to board first.
 - Detailed SoPs to be followed.

Process for Self Declaration form

- Temporary arrangement till Air suvidha portal.
- Airline to be parked at identified bay.
- Collection of SDF from all passengers and segregation of SDF with travel history to Ebola affected country by airlines/GHS.
- Handover of SDF to APHO and further sharing with SSO/DSO.
- Immigration to identify any missed passenger while immigration clearance.

Responsibility of State Health Authority

- Identification of Quarantine Centre
- Identification of Designated referral hospital.
- Manpower deployment at airport, QC etc
- Ambulance
- Lab support
- Coordination with stakeholders.

Responsibility of APHO/Airport Management

- Thermal screening at airport arrival/ Interview/ Examination facilities.
- Display of Health Alert at prominent places
- Dedicated way for suspect travellers and ambulances to designated referral hospital identified by State Health Authority.
- Arrange/facilitate aircraft disinfection, hand rub sanitizers, disposable bags for used PPEs
- Orientation training for airport staff and all stakeholders by APHO
- Airport Entry Pass facilitation for all concerned.

Responsibilities of Airlines

▶ In flight announcement as below:

- “In view of the current Threat of Ebola Disease (BVD): which has high mortality and is currently reported in DR Congo, Uganda & South Sudan, travellers who have any fever, weakness, muscle pain, headache, sore throat, vomiting, diarrhoea, rash, bleeding should report immediately to the airlines crew and at the immigration/medical unit on arrival. This is important for early diagnosis for prompt management and preventing spread. In case any of these symptoms develop within 21 days of arrival in the country the traveller should seek medical assistance from the designated hospitals and also inform the airport health office.”



- “All travellers (passengers and crew) who have either travelled to DR Congo, Uganda & South Sudan affected countries or have transited through these countries during past 21 days will be required to fill Health cards and present the duly filled health cards at the Health desk prior to immigration clearance”.

▶ **Training of crew on public health measures during the flight**

▶ All airlines should keep

- First aid kits, universal precaution kits as per the ICAO guidelines and
- A stock of triple layer masks (25 Nos.), disposable hand gloves (around 25) hand sanitizer and disposal bags: these are to be used for any passenger reporting with symptoms of Ebola Virus Disease (EVD) and co-passengers who are likely to have contacted the disease.

Responsibilities of Immigration

- Immigration officers should ascertain that All the travellers (as mentioned above) have been examined/cleared by the Health counter.
- At all immigration counters immigration officers should screen the travel history of travellers during past 21 days.
- Send missed passengers to APHO .

Seaports

- a.) The ships coming to Indian Ports to reviewed for the following
 - Ships coming to any first Indian port from DR Congo.
 - All ships with any national who have joined from ports of DRC Congo in last 1 month or any crew or passengers who are nationals of DRC Congo or Uganda joining any ships from any ports and coming to India within 21 days or any national who have a history of travel to DRC Congo, Uganda in the last 21 days and embarking from any ports of the world.
- b.) The ships with above two criterias are to be screened by PHO first and grant free pratique. DR Congo within 1 month period is already inspected as part of the YF Suspected Ship and Ebola Disease screening also to be done.
- c.) If the ship is coming after 30 days the PHO will screen first on berthing for Ebola Disease and grant free pratique. The Pilot is to be provided SOP on safe berthing use of PPE, similar procedures followed during COVID-19.