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February 28, 2020

Coronavirus Infection Update

Dear Future Care Clients,

Please refer to our prior four updates for complete information.

Current statistics – although evolving by the moment.

83,650 confirmed cases (78,959 in China)

2,858 deaths

52 countries with cases

Core individual recommendations for your crewmembers:

- Sanitize your hands often. Use water and soap and scrub them when possible. Use an alcohol-based hand cleaner if soap and water are not available.
- Avoid touching your eyes, nose, and mouth
- Cover your cough or sneeze with a tissue, if possible. Then, throw the tissue in the trash.
- Clean and disinfect frequently touched objects and surfaces in the workplace using a regular household cleaning spray or hospital disinfectant wipes. Sodium hypochlorite and anything containing 60%+ alcohol are highly effective within one minute.

Facemasks are not recommended if the crewmember is not himself sick. Only N-95 masks are useful and they need to be replaced every few hours. There is a risk of contamination of the hands while taking them off and thereafter touching the face with contaminated hands. The N-95 should only be used by persons with a respiratory illness, especially those recently returned from a high risk country, with respiratory symptoms, while going outside to seek care or to protect close contacts (those persons coming within 6 feet of the crewmember).

Maintaining good health is a primary focus; crewmembers should be encouraged to:

- Get Flu vaccine
- Get plenty of sleep
- Exercise increase general immunity
- Healthy diet
- Optimize all co-morbidities – diabetes, high blood pressure, asthma, autoimmune disorders, etc. – make sure you are at your healthiest
- Compliance with all of your medications
- Stay home if sick

Regarding the status of the virus:

Statements by the World Health Organization (WHO) should be closely monitored. They have declared a public health emergency of international concern with a “Pandemic potential”.

However, there is no sustained and intensive community transmission. There is no large-scale severe disease or death and containing the virus has not yet been abandoned. Nine (9) countries have actually not had additional cases in two (2) weeks. The highest areas of concerns at present are Italy - due to secondary spread to at least Algeria, Austria, Croatia, Germany, Spain, Switzerland, and Brazil; and Iran – due to secondary spread to at least Bahrain, Iraq, Kuwait and Oman and the questionable ability of Iran to be able to contain the virus. The WHO is very concerned with the social and economic impact of a pandemic, as well as the stigmatization of individuals with the virus leading to a failure to report illness until very sick.

There are still many questions, such as:

- What is the receptor(s)? This will affect many decisions by the healthcare community. Every virus must find a receptor within the host in order to attach and begin to cause illness.
- How communicable is the virus? We are beginning to be able to quantify this as the virus spreads.
- What is the role of asymptomatic or pre-symptomatic carriers?
- Who are the infectors — how do the infected person's age, the severity of illness, and other characteristics of a case affect the risk of transmitting the infection to others? Who are the superinfectors capable of best spreading the disease, if any?
- When and for how long is the virus present in respiratory secretions?
- What are the risk factors for severe illness or death? And how can we identify groups most likely to have poor outcomes so that we can focus prevention and treatment efforts? So far it seems to be those over 60 with co-morbidities or underlying lung problems, especially those over 80 and with a slightly higher percentage of males, especially male smokers.
- Are children an important source of transmission? There does not appear to be any transmission from infected mother to fetus during pregnancy or delivery.
- How long does the virus survive on surfaces? We know this is very dependent on surfaces and on copper for example, it is a matter of minutes. However, it has been reported as long as 9 days depending on the surface, the ambient temperature (longer in cold) and humidity (longer in moist environments).

MOST IMPORTANTLY there is no need to panic. We suggest that you advise your captains and crew to be mindful of rumors and information that is published by a non-authoritative medical source. It is important to remember that 90% of individuals have mild illness or no symptoms. Those with severe symptoms are usually older and with associated medical problems and should be identified and monitored closely

Recommendations and some thoughts

- Employees coming from China, Italy, Iran, and South Korea within the last 14 days should be self-quarantined and not come to work during the remainder of the 14-day quarantine period.
- U.S. crewmembers traveling outside of the United States should notify shoreside human resources personnel prior to returning to work to receive clearance. Non-essential travel to at risk countries should be avoided.

- If a crewmember has traveled and are presenting with symptoms, direct him or her to the nearest emergency department or urgent care center immediately for medical attention.
- Educate crewmember and monitor for illness
- Isolate crewmember before boarding if at any risk due to travel or contacts
- Consider developing “Sick crew” policies – how will you seek care for sick or injured crew members in ports where you either do not want to disembark crew or they do not want your crewmember ashore (at least not without 14 day quarantine)
- Crew - keep healthy and require vaccinations
- Personal Protective Equipment (PPE) on board and Respiratory Isolation contingency plans
- Identify port risks – every port should have an up to date risk assessment prior to arrival
- Minimize local contact in ports
- Sanitization plans for cargo
- Develop contingency plans for quarantine – supplies and medications – consider what will be needed if a ship is quarantined for 14 days – how will you arrange for supplies and medications possibly needed by the crew?

For additional information please contact physicians@futurecareinc.com. To refer a specific crewmember medical incident please continue to email our Contact Center at <firstresponse@futurecareinc.com> .

Thank you.

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