Guidelines for Importation of Human Remains of COVID-19 Patients/Suspects

The **Human Remains** here means the dead body and the exhumed body of confirmed/suspected COVID – 19 patients.

**Standard Operating Procedures**

1. **Importation of Human Remains of Confirmed/Suspected COVID -19 cases:**

   The importation of the Human Remains of confirmed/suspected COVID -19 case into India is not recommended.

2. **Human remains suspected or confirmed of COVID -19, if landing at Indian Airports:**

   Contrary to the above mentioned recommendation, if human remains of the suspected /confirmed case of COVID -19 arrive at Indian Airports the following procedures shall be carried out by the concerned Airport Health Officer (APHO) –

   **2.1 Documents to be inspected /examined: The APHO will verify the following:**
   
   
   b. No objection certificate (NOC) for the transportation of Human Remains of the deceased issued by the Indian Embassies / High Commissions / Consulates.
   
   c. Embalming certificate issued by an authorized agency.

   **2.2 Examination of Packaging of Human Remains -**

   a. The concerned airline shall ensure that the external packing of human remains (Coffin) is undamaged. APHO to verify the documents as mentioned in Point 2.1 above, and inspect the packing in accordance with the provisions under the Indian Aircraft (Public Health) Rules, 1954.

   b. If there are any obvious signs of damage to the external packing (coffin), the handlers shall use full PPE, cover the coffin in plastic sheets to avoid any contact with the body/ body fluids before hand-over of the human remains to the concerned authority for final burial/incineration.

   c. The personnel handling the human remains should follow the laid down procedures for donning and doffing of Personal Protective Equipment and follow other protective measures for COVID-19 like, hand-washing with soap and water, etc. to ensure that they remain protected during the procedure.

   d. The packaging (coffin) shall be buried / incinerated following the norms for burial / incineration for Human Remains with high risk pathogens. The handlers would be monitored for 28 days and the designated vehicle shall be disinfected as per the norms.

   e. In all such cases, the APHO shall direct the concerned airline (carrying the damaged packing containing human remains) to carry out the disinfection of the aircraft as per the norms. In addition, the staff handling the cargo (Human remains in question) shall be quarantined for 28 days.

3. **The transportation of the ASHES of the cremated person died of Confirmed/Suspected COVID -19 case-**

   The ashes remaining after cremation pose no risk to the relatives who handle such mortal remains and will be cleared in accordance with the provisions under the Indian Aircraft (Public Health) Rules, 1954.
4. **In case of any onboard death during COVID-19 Pandemic**-

   a. Any death onboard during the COVID-19 pandemic, is to be suspected of COVID-19, unless proved otherwise.

   b. The pilot in command of the Aircraft has to inform about the death onboard to APHO for taking appropriate measures.

   c. The crew will cover the dead body with sheets / blankets and move the passengers from nearby seats to other seats.

   d. If the remaining flight time is more than 8 hours, the pilot would seek permission to land at the nearest airport.

   e. Whether the aircraft lands within the Indian territory, the following procedures would be opted:

      i. The pilot in command of the Aircraft has to mention in the General Declaration, the details of any illness / symptoms reported / experienced by the deceased prior to death and submit it to the APHO.

      ii. All passengers shall disembark before the dead body is handled inside the Aircraft.

      iii. Trained staff from the Airport, using full PPE, shall move the deceased from the aircraft seat to a wheelchair. The wheelchair shall be taken out onto the tarmac.

      iv. At the tarmac, a nasal swab shall be taken by the State Health Authorities and sealed in triple layered package (refer to guidance on sample collection and packaging) for testing at a designated lab.

      v. Thereafter, the body shall be placed in an air-borne pathogen resistant body bag and hermetically sealed.

      vi. The personnel handling the dead body shall follow the laid down procedure for donning and doffing of Personal Protective Equipment and follow other protective measures for COVID-19 like, hand-washing with soap and water, etc. to ensure that they remain protected during the procedure.

      vii. The law enforcement agencies to be informed as per the provisions of the rules.

      viii. The relatives of the deceased, if not co-passenger(s), will be informed immediately.

      ix. If applicable, APHO will issue a brought/received-dead certificate.

      x. If a delay in arrival of relatives of the deceased is expected/ till the report of COVID-19 is received, the dead body shall be kept in mortuary of the designated hospital, with full sanitization process. Further, the body would be transported in a designated vehicle to the burial ground / crematorium. The guidelines for the disposal of a highly infectious dead body are to be followed.

      xi. The APHO should properly counsel the family members/ DSO (District Surveillance Officer) & Local Police officer, for careful handling and not to damage/temper/change the packaging of the human remains.

      xii. Autopsy in confirmed COVID -19 cases is not recommended. If report is COVID-19 negative, natural process as per law to be adopted.

   f. The disinfection & decontamination of the Aircraft is to be done as per the approved procedures. Also, the vehicle used for carrying the dead body needs to be disinfected. The tarmac area where the body is kept while drawing sample and during sealing, is also to be disinfected.

   g. Airlines will provide the detailed list of passengers and crew to the APHO for further surveillance by the IDSP for next 28 days.


6. **Role of DSO (District Surveillance Officer)** - The counseling of the family members, collecting list of all possible contacts & keeping them under surveillance for a period of 28 days.

The disposal of PPEs and Surface disinfection should be as per Standard guidelines available at MOHFW website.