Cruise Ship Op	erator:
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NSO Elements	Cruise Operator Response
1) The cruise ship operator has developed, implemented, and	
operationalized, an appropriate, actionable, and robust plan to prevent,	
mitigate, and respond to the spread of COVID-19 on board cruise ships.	
2) The cruise ship operator has made the plan available to HHS/CDC and	
USCG personnel within seven (7) days of the publication of the No Sail	
Order in the Federal Register.	
An appropriate plan is one that adequate	y prevents, mitigates, and responds to the spread of COVID-19 on board cruise ships and that, at a minimum, must a
3 a) Onboard surveillance of passengers and crew with acute respiratory	
illnesses, influenza-like illnesses, pneumonia, and COVID-19, including	
reporting to HHS/CDC on a weekly basis on overall case counts, methods	
of testing, and number of persons requiring hospitalization or medical	
evacuation (weekly submission of the Enhanced Data Collection form	
fulfills this requirement)	
3 b) Reports on the number of persons onboard the cruise ship and any	
increase in the numbers of persons with COVID-19 made to HHS/CDC	
and USCG on a daily basis for as long as the cruise ship is within waters	
subject to the jurisdiction of the United States (routine ANOA reporting	
to USCG fulfills this requirement)	
3 c) Onboard monitoring of passengers and crew through temperature	
checks and medical screening, including addressing frequency of	
monitoring and screening	
3 d) Training of all crew on COVID-19 prevention, mitigation, and	
response activities	
3 e) Protocols for any COVID-19 testing that aligns with current CDC	
recommendations, including details relating to the shore-side transport,	
administration, and operationalization of laboratory work if onboard	
laboratory work is not feasible	
3 f) Onboard isolation, quarantine, and social distancing protocols to minimize the risk of transmission and spread of COVID-19	
3 g) Onboard medical staffing, including number and type of staff, and	
equipment in sufficient quantity to provide a hospital level of care (e.g.,	
ventilators, facemasks, personal protective equipment) for the infected	
without the need for hospitalization onshore (plan should include an	
inventory of available resources currently onboard ships and strategies	
to obtain additional resources)	
3 h) An outbreak management and response plan to provision and assist	
an affected cruise ship that relies on industry resources, e.g.,	
mobilization of additional cruise ships or other vessels to act as	
"hospital" ship for the infected, "quarantine" ship for the exposed, and	
"residential" ship for those providing care and treatment, including the	
ability to transport individuals between ships as needed	
3 i) Categorization of affected individuals into risk categories with clear	
stepwise approaches for care and management of each category	
3 j) A medical care plan addressing onboard care versus evacuation to	
on-shore hospitals for critically ill individuals, specifying how availability	
of beds for critically ill at local hospitals will be determined in advance	
and how the cruise ship operator will ensure acceptance at local medical	
facilities to treat the critically ill in a manner that limits the burden on	

address the following elements:

eren parmo ouspendea eraise emp operations.	Please use the space below for any additional plan elements considered by the cruise line.
including the <u>Interim Guidance for the Mitigation of COVID-19 Among</u> Crew During Suspended Cruise Ship Operations.	
and guidance for any public health actions related to COVID-19,	
5) The plan is consistent with the most current CDC recommendations	
government, or the U.S. healthcare system.	
4) The plan minimizes to the greatest extent possible any impact on U.S. government operations or the operations of any State or local	
3 n) Cleaning and disinfection protocols for affected cruise ships	
intrastate waterways subject to the jurisdiction of the United States	
3 m) Plan execution in all U.S. geographical areas – all plans must be capable of being executed anywhere in international, interstate, or	
governments	
COVID-19 without resource burden on Federal, State, or local	
industry/cruise line management of suspected or confirmed cases of	
the impact and engage with these authorities; all plans must provide for	
government and public health authorities and steps taken to minimize	
3 I) The projected logistical and resource impact on State and local	
Among Crew During Suspended Cruise Ship Operations	
consistent with CDC's Interim Guidance for the Mitigation of COVID-19	
within or from the United States, is prohibited). The plan must be	
take to ensure those involved in the transport are not exposed; (the use of commercial flights to evacuate or repatriate individuals, both	
transport and flights, including the steps the cruise ship operator will	
home countries via foreign government or industry-chartered private	
U.S. citizens and foreign nationals, to their respective communities and	
3 k) Detailed logistical planning for evacuating and repatriating, both	
with the U.S. Coast Guard	
accept such evacuees. All medical evacuation plans must be coordinated	
arrangements made with a designated medical facility that has agreed to	
(e.g., ship tender, chartered standby vessel, chartered airlift) and	
arrangements for evacuation must be made with commercial resources	
ossible, medivac situations. If medical evacuation is necessary	

TO BE COMPLETED BY CDC

Received Date: Click or tap to enter a date.

Reviewed Date:Click or tap to enter a date.

Final Disposition Date: Click or tap to enter a date.

Final Disposition:

