**International Travel: Illness and Death Reports for Foreign Quarantine Regulations (42 CFR 71)**

**(OMB Control No. 0920-0134)**

**Supporting Statement B**

**Request for Revision of Currently Approved Information Collection**

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# B. Collections of Information Employing Statistical Methods

There are no statistical methods used in the collection of information.

# 1. Respondent universe and Sampling Methods

There are no sampling methods employed in this information collection. The regulations at 42 CFR part 71 outline the respondent universe, which is:

* any pilot in command of an aircraft or maritime vessel operator with an ill person meeting certain criteria, or death aboard
* any individual who is subject to federal quarantine or isolation
* any ill traveler who is reported by the airlines, Customs and Border Protection, or EMS to CDC or the local public health authority that meets the definition of ill person

CDC requires certain signs and symptoms suggestive of communicable disease, and any death, to be reported by air and sea conveyance operator before arriving in the United States. U.S. Quarantine Stations are located at 20 ports of entry and land-border crossings where international travelers arrive. The jurisdiction of each Station includes air, maritime, and/or land-border ports of entry. Quarantine Station staff work in partnership with international, federal, state, and local agencies and organizations to fulfill their mission to reduce morbidity and mortality among immigrants, refugees, travelers, expatriates, and other globally mobile populations. This work is performed to prevent the introduction, transmission, and spread of communicable diseases from foreign countries into the United States.

# 2. Procedures for the Collection of Information

Reporting of death or illness onboard aircrafts can be reported via Air Traffic Control, who will notify CDC’s Emergency Operations Center (EOC) through the Domestic Events Network; the EOC will notify the appropriate CDC Quarantine Station and the local health department of jurisdiction. Quarantine staff will communicate with the airline’s designated point of contact to obtain necessary information about the death or ill traveler. Alternatively, the aircraft operator may communicate with the airline’s land-based point of contact (e.g., Operations Center, Flight Control, airline station manager). The airline’s point of contact will notify CDC by contacting the Quarantine Station with jurisdiction for the arrival airport or CDC Emergency Operations Center, who will notify the appropriate Quarantine Station.

Reporting of illness or death aboard maritime conveyances is accomplished by the use of the Maritime Illness and Death Investigation Form or the Maritime Conveyance Cumulative Influenza/Influenza-Like Illness (ILI) Form, or through radio or email as long as all the required data elements are present. These forms are then emailed to CDC containing information sufficient to determine if further public health actions is needed.

For routine operations at ports of entry and for reports of illness that come to CDC after travel has been completed, DGMQ has developed illness response forms for the three different types of ports of entry – air, maritime, and land border. These forms include 1) the Maritime Conveyance Illness Investigation or Death Report Form and 2) the Land Border Travel Illness or Death Investigation Form. An Air Travel Illness or Death Investigation Form is also used, however approval for that form is currently under OMB Control 0920-1318. All three forms collect pertinent demographic, clinical, and epidemiologic information on travelers suspected of being infected with a communicable disease, and who may be (or may have been) contagious during travel. Quarantine Station staff collect information for follow-up and tracking (surveillance) purposes. The differences between the forms reflect the public health risks associated with specific modes of travel and the response to illness at each of the three types of ports.

Response reports require obtaining full epidemiologic information from the ill traveler. Quarantine Station staff will use the entire form to collect information and will follow up with the ill traveler. This tiered approach to data collection during illness investigations will reduce the burden on the public by collecting only information appropriate for the situation.

# 3. Methods to Maximize Response Rates and Deal with No Response

CDC requires certain signs and symptoms suggestive of communicable disease, as well as any death to be reported by pilots in command and maritime vessel operator before arriving in the United States (42 CFR 71.21). Not responding to this data collection is a violation of regulation.

Concerning these reports, a tiered approach to information collection during illness investigations will reduce the burden on the public by collecting only information appropriate for the situation.

If a traveler is known to be infected with a quarantinable communicable disease, or CDC suspects that a traveler is infected with exposed to a quarantinable communicable disease through combination of observed signs and symptoms and knowledge of other risk factors, CDC may detain the individual and require that s/he respond to the approved questions. Response reports require obtaining full epidemiologic information from the ill traveler. Quarantine Station staff will use the entire form to collect information and will follow up with the ill traveler. In cases where the condition might be an communicable illness, but is not of public health concern, e.g. a cold or seasonal flu, an individual can refuse to answer the questions and leave. However, CDC may recommend that the traveler follow up with their doctor or local public health department.

It is not always necessary to obtain complete epidemiologic information from every ill traveler. When Quarantine Station staff respond to a situation that is not of public health interest (e.g., chronic skin condition, heart attack, etc.) only general information is collected. This information includes: contact information, date, and complaint. These non-public health-interest situations are referred to as Info Only responses.

# 4. Tests of Procedures or Methods to be Undertaken

CDC currently collects traveler-related information under this previously approved information collection. The electronic systems used for this information collection are continually updated and improved for quality of data collection and ease of use for the public, industry, and CDC program administrators.

# 5. Individuals Consulted on Statistical Aspects and Individuals Collecting and/or Analyzing Data

Not Applicable