

Assessment of Procedures for Arriving Passengers with Fever or Respiratory Tract Symptoms at International Airports

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Abstract

Since the outbreak of SARS in March 2003, an infrared body temperature monitor was placed at international airports to screen all arriving passengers for fever. According to the ill passenger's symptoms, travel history, and contact history, blood samples and anal swabs would be collected for laboratory tests. If these samples could not be collected, the ill passenger would be referred to a healthcare facility for examinations. In 2005, the government required all ill passengers arriving from countries with human cases of avian influenza to be examined at a healthcare facility. Referring ill passengers to healthcare facilities caused 2 to 3 hours of delay, resulting in complaints from affected individuals. Therefore, the government implemented a "Trial of Procedures for Ill Persons Arriving at International Airports".

The results of the trial showed that >98.9% of the contact information from ill individuals were valid, and 90.5% of the subjects were reviewed at a healthcare

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facility. Only one subject was later reported as a confirmed case of dengue fever. The positive predictive value of the trial was 0.2%, which is lower than the 1.2% from international airports' dengue fever screening program during the same period. This study showed that arriving passengers gave valid contact information and visited physicians. During times with no immediate threat of global communicable disease epidemics, adaptation of this program by all international sea ports and airports in Taiwan should be considered.

Key words: quarantine, infectious disease, international seaport, airport