

**Cabinet Resolution No.33/2016 of  
The Executive Regulations of The UAE Federal Law No. 14/2014  
on Combating Communicable Diseases**

**The Cabinet:**

- Having perused the Constitution,
- The Federal Law No.1/1972 on the scope of competencies of the ministries and the powers of the ministers as amended,
- The Federal Law No.14/2014 on combating communicable diseases,
- The Federal Law No.4/2015 on private medical facilities,
- The Cabinet Resolution No.7/2008 on the medical examination system for arrivals to the UAE for work or residence as amended,
- The Cabinet Resolution No.28/2008 on blood transfusion regulation,
- The Cabinet Resolution No.29/2010 on the HIV prevention system for society and protecting the rights of those living therewith, and
- On the basis of what has been demonstrated by the Minister of Health and Prevention and following the approval of the Cabinet,

**Has decided:**

**Article (1)**

**Definitions**

1. Applying the provisions hereof, the following terms and sentences shall have the meanings corresponding thereto; unless the context otherwise implies:

**The State:** The United Arab Emirates.

**The Ministry:** The Ministry of Health and Prevention (MOHAP).

**The Minister:** The Minister of Health and Prevention

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**The Law:** The UAE Federal Law No. 14/2014 on combating communicable diseases.

**The Medical Authority:** The Ministry of Health and Prevention (MOHAP) or any local or federal entity competent with medical affairs in the State.

**The Competent Department:** The Preventive Medicine Department of the Ministry of Health and Prevention (MOHAP) or corresponding departments of other medical authorities.

**The Border Checkpoint:** The place specified under a resolution issued by the competent authority in line with associated legislations permitting entry into the State or departure therefrom either by land, sea or air.

**The Veterinary Authority:** The Ministry of Climate Change and Environment (MOCCA) or the local authority competent with animal health in any of the Emirates of the State.

**The Deceased:** The individual, who dies as a result of suffering from a communicable disease or due to any other reason occurred while suffering from a communicable disease.

**The Reporting Form:** The document set by the competent authority in accordance with the provisions hereof.

**The Embalment:** The procedure carried out by specialists to handle a corpse in order to preserve it and to limit the decomposition thereof to transport such corpse out of the State.

2. The terms and sentences not mentioned in Article No.(1) hereof shall have the meanings they indicate in the Law; unless the context otherwise implies.

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## **Reporting Communicable Diseases**

### **Article (2)**

1. Once the categories specified in Clause No.(1) of Article No.(4) of the Law become aware of or suspect any individual's infection or death due to one of the communicable diseases listed in Section A of Schedule 1 attached to the Law, they shall report such incident immediately and within a timeframe of 24 hrs. maximum to the medical authority they fall under following their work locations; such report shall be submitted with regard to the following procedures:

A. Fulfilling all the data of the infectious, the data of the reporter as well as the medical condition in line with the reporting form; provided that such form shall include minimally all the data listed in Schedule 1 attached hereto.

B. Sending the reporting form, where all data mentioned in paragraph A of this Clause are included, to the medical authority under which the reporter falls.

2. Once the categories specified in Clause No.(2) of Article No.(4) of the Law become aware of or suspect any individual's infection or death due to one of the communicable diseases listed in Section A of Schedule 1 attached to the Law, they shall report such incident immediately to the nearest medical authority via any means of reporting either in writing, via fax or via electronic media; provided that such authority fulfills the data and information mentioned in Clause No.(1) of this Article.

3. The medical authority may add any data or information to the reporting form mentioned in Clause No.(1) of this Article.

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### **Article (3)**

In the event that medical authorities and private medical facilities discover any infection of communicable diseases as listed in Schedule 1 attached to the Law, or in case these entities become aware of such cases, they shall immediately report such to the competent medical department under which they fall. The reporting period of diseases mentioned in Section A of the Schedule shall not exceed 24 hrs. and shall not exceed (7) seven days for diseases listed in Section B of Schedule 1 mentioned in this Article. Reporting such cases shall be made via fax, electronic media, available means of writing or via phone in cases of urgency; provided that a written report shall be submitted later while the medical authority starts taking the required measures regarding the written report immediately.

### **Article (4)**

#### **Procedures applied in case an animal is infected with a communicable disease**

In the event that a veterinarian authority discovers that an animal is infected with a communicable disease that can be transmitted to humans, the following procedures shall be applied:

1. Immediately, provide the competent department with the information regarding the disease that infected the animal as well as the available information of the contacts thereof, the geographical setting in which the infection appeared and all the information that can assist the competent authority to take the measures required.
2. Coordinate with the competent medical authorities and other competent authorities to decide whether any procedures shall be applied to regulate the

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entry and departure of people into and out of the location where the infection appeared.

3. Limit the chances of humans' contact with the infected animal as per the nature of the disease and the methods of transmission thereof.
4. Determine the preventive measures required to be applied such as hand washing, use of personal protective equipment (PPE), pest control and other procedures as per the nature of the disease and the methods of transmission thereof.
5. Apply the procedures required to restrict or prevent the import of the infected animal species or allowing such in accordance with the regulations applied in such respect in the associated legislations.

### **Article (5)**

#### **Procedures applied to combat communicable diseases**

Upon establishing medical units in the border checkpoints falling under the geographical scope thereof, the medical authority shall be subject to the following regulations:

1. Regarding the border checkpoint:
  - A. It shall be one of the border checkpoints that receive a large number of travelers and where a hefty amount of commercial activities are exchanged.
  - B. The health hazards in the selected checkpoint shall be real; whether such hazards are confirmed or potential.
  - C. Capabilities and trained staff required for inspection and carrying out procedures in that border checkpoint shall be provided
  - D. Coordination with competent authorities shall be made for regulations and conditions to be set to guarantee the provision of a safe and a healthy environment free of sources of pollution and infection in all facilities utilized

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by travelers in such border checkpoint; such as fresh water supplies, restaurants, canteens, public restrooms and proper food disposal services.

E. A program shall be developed for combating communicable diseases transmitters that may transmit the infection factor, which is deemed a hazard for public health and raises universal concerns.

F. The border checkpoint shall apply the international recommended practices and procedures to exterminate insects and vermin, to dispose of luggage, cargoes, means of transportation for humans and goods or parcels or to remove pollution or to dispose of such when necessary in the event of responding to the incidence that form a public health emergency, which provoke a universal concern.

2. Regarding the medical units established in the border checkpoints:

A. Select a location to build the medical units, where the assessment of travelers and patients' health conditions to be carried out and the required care can be provided promptly.

B. Develop proper means to provide suitable health care services via the assistance of qualified personnel, proper medical equipment and diagnostic facilities.

C. Provide proper-trained staff and equipment to transport patients to suitable health facilities when necessary.

D. Such medical units shall be equipped and qualified to handle emergencies through assessing the infected traveler's medical condition, providing health care services thereto and taking required preventive measures.

E. Such medical units shall contain proper capabilities to evaluate the suspected traveler's medical condition and admit it into quarantine, when necessary, in locations isolated from the border checkpoint.

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F. Develop a mechanism in cooperation with the competent veterinarian authority to handle infected or suspected animals; especially when it comes to the diseases listed in Schedule 3 attached to the Law.

### **Article (6)**

All local and federal authorities functioning in the State shall empower the medical authority to obtain the information required thereby in order to monitor communicable diseases. The procedures of such process of monitoring diseases shall be carried out in line with the following:

1. Receiving reports and monitoring information and news revolving around communicable diseases spread or infections.
2. Organizing activities or visits and field surveys or any other monitoring methods that deem proper.
3. Analyzing and interpreting the data available in terms of place and time of the communicable disease appearance to determine if such disease can be transmitted individually or epidemically as well as to set the required measures of prevention and combating therfor.
4. Reporting the monitoring results to the concerned authorities and individuals.
5. Reporting the communicable diseases to the Ministry on order to fulfill the procedures of international and regional monitoring.

### **Article (7)**

#### **Rights and obligations of individuals infected with communicable diseases**

1. An infectious of the communicable diseases listed in Section A of Schedule 1 attached to the Law is entitled to receive health care services as well as

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treatment and medications in governmental health facilities in line with procedures specified in this Article.

2. The procedures specified in this Article shall be applied to any infectious of any of the communicable diseases listed in Section A of Schedule 1 attached to the Law; taking into account that health care services and medications shall be provided free of charge to those not enrolled in health insurance system.

3. The health care services and the medications mentioned in this Article shall be provided to the infectious as well as to their contacts. Such shall also be provided to any of the abovementioned communicable disease suspected infectious.

4. The free-of-charge health care services and medications mentioned in this Article shall include all tests and examinations required to diagnose and treat a communicable disease in addition to the medications and vaccines required for the treatment of the disease or the prevention thereof or from the complications thereof.

5. For providing the free-of-charge health care services mentioned in this Article, required documents shall be submitted including for example the infectious' ID card or the medical insurance card thereof in addition to any other documents specified by the medical authority in line with the applicable regulations.

6. As an exception to Clause No.(5) of this Article, the medical authority may allow the provision of the free-of-charge health care services to the communicable disease infectious or the suspected one without the need to provide the abovementioned documents till proper measures are taken therefor, in case it is proved that such action prevents the spread of such disease within the State.

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### **Article (8)**

1. Health centres and institutions, for which a resolution is issued by the medical authority in accordance with Article No.(30) of the Law, shall voluntarily make non-nominated/random tests in order to reveal infections of Human Immunodeficiency Virus HIV/AIDS or any other communicable disease for which a resolution is issued by the Minister to be determined.
2. The health facility shall make the non-nominated/random test mentioned in Clause No.(1) of this Article in accordance with the following guidelines:
  - A. The test shall be made whether the applicant is a resident or an arrival to the UAE for a visit or for residence.
  - B. The test shall be made free-of-charge for individuals mentioned in Clause No.(1) of this Article.
  - C. The test shall be made as per the written application submitted by the one desiring to have it done therefor or as per the verbal approval thereof.
  - D. The test shall be made in line with procedures guaranteeing the confidentiality of the applicant's identity and the data thereof. Therefore, codes, numbers or any other methods shall be adopted to protect the applicant's personal information privacy.
  - E. None of the applicant's data shall be circulated during the tests. Such procedure covers primary phase of collecting samples and testing them as well as the final findings thereof.
  - F. The final findings of the tests shall be reported only to the applicant in person. None of the applicant's data or any information associated thereto shall be reported to third parties prior the applicant's written consent thereof.
  - G. The required consultancy shall be provided to the applicant prior to the test and thereafter. Such consultancy shall include raising the applicant's

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awareness of the nature of the disease, the methods of the transmission thereof and the means to prevent others from being infected.

H. If the applicant proves to be infected with any of the communicable diseases in early stages, the applicant's contacts- as much as possible- shall be tested; provided that such tests shall be made without disclosing the identity of the infectious or the contacts thereof.

I. The medical authority shall be provided with all associated information and surveys taking into account the rules of confidentiality mentioned in this Article; especially the names of the applicants or any other information that may expose their identities.

### **Article (9)**

#### **Requirements of isolation and quarantine**

Health facilities shall set up isolation rooms according to the numbers specified by the competent medical authority and in proportion to the absorptive capacity of the health facility and the speciality thereof. Besides, the following standards, measures and quarantine regulations shall be applied:

1. Imposing a quarantine inside hospitals, the following shall be taken into consideration:

A. Isolation rooms shall be in proportion to the nature of the communicable disease and the methods of spread thereof in accordance with Schedule 1 attached hereto.

B. Provision of the minimum level of the technical specifications in accordance with Schedule B attached hereto.

2. Imposing a quarantine inside clinics, health centres and emergency rooms, the following shall be taken into consideration:

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A. Immediate separation of suspected infectious of communicable disease from other patients in spaces set for such purpose.

B. Checking the suspected infectious inside examination rooms once they arrive in there while taking the measures required to decrease the periods they spend in shared waiting spaces.

### **Article (10)**

1. A quarantine can be carried out inside or outside health facilities with due regard to compliance with the following requirements:

A. A quarantine inside health facilities shall be carried out in rooms fulfilling standard conditions and specifications of isolation rooms as mentioned in Article No.(9) hereof.

B. A quarantine outside health facilities shall be carried out as per necessity in temporary areas specified by the medical authority. Such areas may include buildings or residential locations; provided that such shall be supervised by the medical authorities.

C. Home quarantine shall be carried out by separating the infectious or the contact in a well-ventilated room with an inner toilet or a specific one shall be set therefor.

2. Medical authorities shall issue the resolutions and set the conditions they consider proper for the implementation of the provisions of this Article in proportion to Schedule 2 attached to the Law.

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**Procedures applied to handle deaths resulting from communicable diseases**

**Article (11)**

The procedures stated in this Article shall be applied in the event of a death of an infectious because of an unknown communicable disease or a suspected death thereof. For such purposes, the medical facility shall:

- A. Take all measures required to protect those handling the corpse against communicable diseases.
- B. Take samples from the deceased promptly and deliver such to the competent laboratory.
- C. Preserve the samples. The laboratory may not dispose of the remaining samples wholly or partially after investigation unless the final diagnosis is made in line with approved practices.
- D. Report to the medical authority and provide it with data associated to death.
- E. Report the communicable disease infection or the suspected infection of the deceased- as the case may be- to the morgue to which the corpse shall be transported prior thereto.

2. For the deceased corpse to be transported, the following procedures shall be applied:

- A. All the procedures mentioned in Clause No.(1) of this Article shall be completed.
- B. All those handling the corpse shall be notified that the deceased is infectious or suspected to be infectious of a communicable disease.
- C. Those handling the corpse shall be trained and qualified to deal with such cases while taking all the required preventive measures.

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D. Tools and medical equipment used to handle the corpse such as gloves, medical facemasks and others shall be disposed of as hazardous medical wastes.

E. All vehicles and tools used to transport the corpse and all areas where such corpse has been handled shall be disinfected.

3. The conditions set by the medical authority regarding the washing of a communicable disease infectious deceased shall be followed taking into account that:

A. The corpse shall not be washed; it shall only be sand-washed/dry-purified (Tayammum shall be performed) and enshrouded least the communicable disease spreads in case of washing it.

B. The coffin/box coming from abroad containing the corpse of a communicable disease infectious deceased shall not be opened prior to the written consent of the medical authority according to the nature of the disease.

4. The medical authority may issue the resolutions it considers proper regarding the funeral prayer of a communicable disease infectious deceased including the following:

A. Determine certain communicable diseases that a deceased therefrom may receive a funeral prayer only outdoors.

B. Decide to perform the funeral prayer in the ambulance in line with the legitimate constraints thereof.

5. For the corpse of a communicable disease infectious to be transported in accordance with the provisions of this Article, the competent medical authority shall take all the measures required to transport the corpse taking into account the regulations stated for in Articles (12,14,14,15) hereof.

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### **Article (12)**

The communicable diseases listed in Schedule C attached hereto are widespread and easily transmitted to the contacts thereof; therefore, a corpse of a communicable disease deceased or a carrier thereof shall be handled as follows:

1. The corpse shall be placed in an anti-leaking and sealed body bag.
2. The corpse shall not be washed.
3. No one is allowed to be in contact with the corpse except for the medical cadres and the team of specialists.
4. The corpse shall be transported to the graveyard in the company of the medical authority officials, who shall be present at all times till the burial procedures are completed. The corpse shall be transported with the help of the medical authority vehicles set therefor.
5. The corpse shall not be transported to a house, a house of worship or a closed area for rituals to be performed.
6. The corpse shall not be embalmed.
7. The corpse shall not be transported abroad.
8. The corpse shall be buried in accordance with the conditions stated for in Article No.(13) hereof.

### **Article (13)**

For the purposes of burying the corpse of a deceased of any of the communicable diseases mentioned in Schedule C attached hereto, the following procedures and conditions shall be followed:

1. The competent medical authorities shall set and prepare specific graves in a certain part of the graveyard to bury the abovementioned corpses; provided that such authorities apply the following procedures:

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- A. The graves shall be at least 500 m away from residential buildings.
  - B. The graves location shall be at least 500 m away from locations of groundwater wells.
  - C. The depth of groundwater in the area set for such graves shall not be less than 200 m.
2. Burial of such corpses shall be carried out as soon as possible, urgently, in areas set therefor and in accordance with the conditions of this Article.
3. In the event the conditions stated in Clause No.(2) of this Article are absent, the following procedures shall be applied:
- A. The abovementioned graveyard area shall be isolated from the streams of valleys. It shall be protected from erosions resulting from floods or any other potential causes.
  - B. A below-surface isolation of the graves shall be made using anti-leaking and non-biodegradable materials in order to prevent any leakage of any liquids or substances to the groundwater systems.
4. The grave mentioned above in this Article shall be arranged as follows:
- A. A hole of a width of 1.70 m, a length of 2.5 m and a depth of 2.00 m at least shall be dug.
  - B. The grave floor shall be covered with a cement layer of a thickness of 10 cm at least.
  - C. The walls of the grave shall be of a width of 75 cm, a length of 2.10 cm and a height of 85 cm at least.
  - D. Cement and cement bricks shall be used to build the grave walls.
5. Each corpse shall be buried separately following all procedures required in order to identify each corpse in cases of mass deaths.
6. The corpse shall be covered with a layer of soil of one meter at least.
7. Mass or random burial or cremation shall not be permitted.

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8. Except for Clauses (4,5,7) of this Article, an organized mass burial may occur in the event of mass deaths resulting from a communicable disease epidemic, where burying corpses separately shall not be accessible. Such can be permitted; provided that the conditions specified by the medical authority are fulfilled.

9. An area of 1500 m shall be available for each 10000 corpses.

10. In the event coffins or shrouds were not accessible, corpse shall be wrapped in plastic covers to keep it separate from the soil. Chlorine solution or other medical antiseptics may be used instead of lime.

11. When a death is diagnosed as a result of a fatal communicable disease or as a suspect thereof, it shall be confirmed that the corpse coming from abroad is contained in an equipped coffin set for the deaths mentioned in this Article. The coffin shall be anti-leaking to prevent the leakage of any corpse liquids. The corpse shall be buried in a grave set therefor and the coffin shall not be opened.

#### **Article (14)**

The communicable diseases listed in Schedule D attached hereto are hazardous and can be transmitted by direct contact with the deceased liquids and blood. Therefore, the corpse of the deceased shall be handled as follows:

1. The corpse shall be placed in an anti-leaking and sealed body bag.
2. The corpse may be embalmed to be transported abroad; provided that such is carried out after fulfilling the requirements specified in Clause No.(5) of this Article.
3. The corpse may be washed; provided that all preventive measures specified by the medical authority are taken.

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4. The family of the deceased may be allowed to attend the preparation process of the corpse. They may touch the corpse of the deceased in accordance with the preventive measures specified by the medical authority.
5. The corpse shall not be transported abroad unless the following requirements are fulfilled:
  - A. An application shall be submitted by the family of the deceased to the medical authority.
  - B. The corpse shall be embalmed in one of the centers mentioned in Article No.(16) hereof.
  - C. The approval of the medical authority shall be obtained.
  - D. The approval of the country where the deceased is to be buried and the approval of the transit country- if necessary- shall be obtained.
  - E. The approval of the operator of the means of transportation used to transport the corpse shall be obtained.

#### **Article (15)**

The corpse of those, who die as a result of suffering an average severity communicable disease mentioned in Schedule E attached hereto or for being carriers thereof shall be handled in accordance with the following procedures:

1. The corpse may be washed; provided that all preventive measures specified by the medical authority are taken.
2. The family of the deceased may be allowed to attend the preparation process of the corpse. They may touch the corpse of the deceased in accordance with the preventive measures specified by the medical authority.
3. The corpse shall not be transported abroad unless the requirements specified in Clause No.(5) of Article (14) hereof are fulfilled.

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## **Article (16)**

### **Requirements of Embalmmment Centers**

The medical authorities shall allocate a center/centers for the embalmmment of the corpse of the deceased due to one of the communicable diseases listed in Schedules D and E attached hereto in accordance with the following requirements:

1. The site shall be separate from the remaining buildings, where medical services are provided.
2. The site shall have a separate ventilation system.
3. The site shall be operated by a low pressure system.
4. The site shall have a separate sewerage.
5. The site shall be fully equipped with all tools and materials required for embalmmment, disinfection and transportation.
6. The site shall contain a separate mortuary with a capacity of 30 corpses.
7. The site shall be directly supervised by a specialist in forensics with an experience of not less than three years working for one of the embalmmment centers.
8. The site shall be operated by qualified technicians with proper public health credentials; preferably in the field of embalmmment, and an experience of not less than five years in such respect.

## **Article (17)**

### **Procedures to be applied to communicable diseases infectious or suspected arrivals to the State**

Any person, of those not allowed- as per Article No.(31) of the Law- to enter the State prior to notifying the Ministry of Health and Prevention or the medical authority and prior to obtaining the approval thereof, arriving to the

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State while knowing that they are infectious or suspected of being infected with any of the communicable diseases specified by the competent authorities and listed in Schedule 1 attached to the Law, shall notify the Ministry or the medical authority upon arrival to the State according to the following procedures:

1. Report their medical condition to the staff of the means of transportation used.
2. Visit the nearest border medical control center or the medical unit based in the border checkpoint through which they intend to enter into the State.
3. Submit all the documents clarifying their medical condition enabling the border medical control center or the medical unit based in concerned the border checkpoint to review and keep a copy thereof.

#### **Article (18)**

The medical authority shall apply the following medical procedures to those arriving to the State from any of the countries infested with any of the communicable diseases specified by the Ministry or the medical authority and listed in Schedule 1 attached to the Law:

1. Take the public health measures and any other health measures recommended by the World Health Organisation (WHO) in such respect.
2. Take the required medical and preventive measures if necessary after notifying the arrival with any danger associated therewith in order to obtain the arrival's explicit approval or the approval of the guardian thereof. Such measures shall be taken with as less inconvenience as possible guaranteeing public health protection in accordance with the guidelines of health and safety approved internationally and nationally. The absence of medical contradictions shall be obligatory for such measures to be taken.

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3. Pay due respect to all travelers subject to such measures taking into account human rights, gender as well as social, cultural, ethnic and religious considerations.
4. Provide or set the required arrangements to supply sufficient quantities of food and water as well as providing proper accommodation settings while protecting luggage and other belongings. Provide proper medical treatments, necessary methods of contact in a language understood by the traveler if possible. Provide the quarantined travelers, the isolated ones or the travelers subject to medical investigations or to any other procedures with all the help possible in a manner fulfilling the purposes of public health sector.
5. Ask the traveler to release sufficient information regarding his destination to enable rapid contact therewith.
6. Ask the traveler to disclose information regarding his trip route to make sure if he had been into any infested region or if he had any other potential contact with the sources of infection or pollution before entering the State. The traveler's health documents shall be revised if necessary.
7. Medical examinations shall be implemented; provided that such examination shall include any invasive procedures while taking into account that such shall be implemented with as less inconvenience as possible in a manner fulfilling the purposes of public health sector.
8. Vaccines and other proper preventive measures shall be provided based on the nature of the disease. The traveler receiving vaccines or any other preventive measures shall be granted a certificate of his medical condition. Such certificate shall be signed by the medical official in charge and shall be sealed by the stamp of the medical center in accordance with the form attached to the International Certificate of Vaccination or Prophylaxis.

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9. Any other applicable medical measures that can prevent or combat a communicable disease including isolation, quarantine or placing the traveler under the observation of the medical authorities shall be taken.

#### **Article (19)**

The Ministry of Health and Prevention shall declare the infested countries via a statement issued thereby for such purpose in accordance with the statements issued by the World Health Organisation (WHO) as per international health regulations; provided that all medical authorities shall be notified of such statement immediately.

#### **Final provisions**

##### **Article (20)**

The Minister of Health and Prevention may amend any of the schedules attached hereto whenever needed following coordination with the medical authorities; provided that such resolution of amendments shall be published in the official gazette.

##### **Article (21)**

The Minister of Health and Prevention shall issue the resolutions required to execute the provisions hereof.

##### **Article (22)**

Any provision contradictory hereto or inconsistent herewith is deemed annulled.

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**Article (23)**

This resolution shall be published in the official gazette and shall come into force following six months of the publication date thereof.

***Muhammad Bin Rashed Al Maktoum***

***Prime Minister***

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### The reporting form of a communicable disease

<b>First: Date of Patient</b>		
<b>Reporting Date</b>	:	
<b>Medical Card No.</b>	:	
<b>ID/Passport/UN</b>	:	
<b>Full Name</b>	:	
<b>Date of Birth</b>	:	
<b>Age</b>	:	
<b>Sex</b>	:	
<b>Nationality</b>	:	
<b>Address (Emirate, City, District, Street ,House, Apt.)</b>	:	
<b>Workplace Phone No.</b>	:	
<b>Mobile Phone No.</b>	:	
<b>Profession</b>	:	
<b>Place of Work/Study</b>	:	
<b>Workplace/Educational Institution Phone No.</b>	:	
<b>Name of Grantor</b>	:	
<b>Mobile Phone of Grantor (if any)</b>	:	
<b>Second: Medical Condition</b>		
<b>Date of Disease Appearance</b>	:	
<b>Diagnosis (Primary/Confirmed)</b>	:	
<b>Laboratory Testing (Taken/ Not Taken Yet)</b>	:	
<b>Third: Data of Reporter</b>		
<b>Name</b>	:	
<b>Profession</b>	:	
<b>Phone No. For Contact</b>	:	

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**Schedule (A)**

<b>Isolation Room Level</b>	<b>Standard</b>	<b>Negative Pressure</b>	<b>Positive Pressure</b>
<b>Ventilations</b>	No differential in air pressure between the room and its surrounding area	Air pressure in the room is less than its surrounding area	Air pressure in the room is more than its surrounding area
<b>Preventions as per methods of spread</b>	Transmission via direct contact and droplets	Transmission via air	To prevent infection transmission from outside the room to the inside
<b>Examples</b>	-Antibiotic-resistant microbes such as VRE -Viral hemorrhagic fever -Intestinal catarrh -Hepatitis (A) -Meningitis -Influenza (A) H1N1	-Measles -Waterpox -Pulmonary tuberculosis - Middle East respiratory syndrome-related coronavirus	Protecting patients with weakened immunity from hospital infection

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**Schedule (B)**

<b>Technical Specifications</b>	<b>Standard</b>	<b>Negative Pressure</b>	<b>Positive Pressure</b>
<b>Non hand operated hand basin in room and anteroom</b>	Yes	Yes	Yes
<b>In-suite bathroom (shower, toilet and hand washbasin)</b>	Yes	Yes	Yes
<b>Pan sanitizer (near room)</b>	Optional	Optional	Optional
<b>Door on room with door closer</b>		Yes	
<b>Anteroom</b>		Yes	
<b>Sealed room, door grille for controlled air flow</b>		Yes	Yes
<b>12 ACHR or 145 liters per patient</b>		Yes	Yes

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<b>100% outside air ventilation</b>		Yes	
<b>Local differential pressure monitoring</b>		Yes	Yes
<b>Independent air supply</b>		Yes	
<b>HEPA filters on air supply</b>			Yes
<b>Low level exhaust 150 mm above level</b>		Yes	
<b>Independent exhaust discharging vertically at 10m/s</b>		Yes	

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**Schedule (C)****High Severity Communicable Diseases**

<b>No.</b>	<b>Infectious Diseases</b>
<b>1.</b>	Lassa Fever
<b>2.</b>	Plague
<b>3.</b>	Rabies
<b>4.</b>	Viral Hemorrhagic Fever
<b>5.</b>	Yellow Fever
<b>6.</b>	Anthrax
<b>7.</b>	Small Box
<b>8.</b>	Creutzfeldt-Jacob Disease
<b>9.</b>	Typhus

**Schedule (D)****Severe Communicable Diseases**

<b>No.</b>	<b>Infectious Diseases</b>
<b>1.</b>	Hepatitis B
<b>2.</b>	Hepatitis C
<b>3.</b>	HIV
<b>4.</b>	AIDS
<b>5.</b>	SARI

\*In case of any misinterpretation, the Arabic version of this legislation prevails.

**Schedule (E)****Average Severity Communicable Diseases**

<b>No.</b>	<b>Infectious Diseases</b>
<b>1.</b>	Acute Poliomyelitis
<b>2.</b>	Avian Influenza
<b>3.</b>	Cholera
<b>4.</b>	Diphtheria
<b>5.</b>	Dysentery (Amoebic or Bacillary)
<b>6.</b>	Food borne illnesses
<b>7.</b>	Hepatitis (A) and (E)
<b>8.</b>	Leptospirosis (Weil's)
<b>9.</b>	Malaria
<b>10.</b>	Meningococcal Disease
<b>11.</b>	Paratyphoid disease
<b>12.</b>	Relapsing disease
<b>13.</b>	Scarlet Fever
<b>14.</b>	Tuberculosis
<b>15.</b>	Typhoid disease
<b>16.</b>	Acute encephalitis
<b>17.</b>	Leprosy
<b>18.</b>	Measles
<b>19.</b>	Meningitis (Non Meningococcal)
<b>20.</b>	Mumps
<b>21.</b>	Ophthalmic Neonatorum
<b>22.</b>	Rubella

\*In case of any misinterpretation, the Arabic version of this legislation prevails.

<b>23.</b>	Tetanus
<b>24.</b>	Whooping cough
<b>25.</b>	Streptococcal invasive Disease

\*In case of any misinterpretation, the Arabic version of this legislation prevails.