



# **Coronavirus – implications for ships and crew**

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Countries around the world are strengthening their border control measures in order to prevent the further spread of COVID-19 and port authorities continue to be in a heightened state of alert in order to identify crew members or passengers displaying symptoms compatible with the disease.

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## About the outbreak

The ongoing outbreak of coronavirus disease (COVID-19) that was first detected in Hubei Province, China in December 2019 has now spread across all continents, except Antarctica, and the number of confirmed cases continue to rise with increasing pace. The number of confirmed cases outside of China has surpassed the Chinese total and Europe is currently at the epicentre of the pandemic.

The World Health Organization (WHO) considers the risk of spread and the risk of impact of COVID-19 at a global level to be *very high*.

## General advice and sources of information

At the time of writing, the WHO continues to advise against the application of [travel or trade restrictions](#) to countries experiencing COVID-19 outbreaks. However, local restrictions on travel are in place and some of the measures implemented in order to minimise the risk of infection can have serious consequences for ships and crews, including delayed port clearance, obstruction of cargo operations, limited access to surveyors, service engineers and supplies, restrictions on shore leaves and crew changes, and, in the extreme case, imposition of quarantine or refusal of port entry.

In terms of concrete geographical advice for the maritime industry, the situation may change quickly and it can be difficult to maintain a full overview of areas affected by the outbreak as well as port and travel restrictions being enforced at any given time. The WHO is publishing [daily situation reports](#) on the evolution of the outbreak and 'affected areas' are those countries, provinces, territories or cities experiencing ongoing local transmission of COVID-19, in contrast to areas reporting only imported cases. Some organizations and companies, such as our correspondent [Gulf Agency Company Ltd.](#) and [BIMCO](#), also provide regular and useful updates on control measures implemented by countries and ports around the world.

**We further strongly recommend that ship operators and masters, well in advance of arriving at any port, seek guidance from local port authorities and ships' agents on restrictions and other preventive measures currently in effect.**

We would also like to emphasise that Gard is guided by the views and recommendations issued by the WHO, IMO and other expert agencies in respect of this outbreak. As the situation evolves, so will recommendations and measures to prevent and reduce spread of the infection and we advise Members and clients to remain vigilant.

**Our website "Covid-19 (Coronavirus)" provides links to relevant information and guidance from the WHO and other official sources of information. You will also find links to a number of guidelines and recommendations tailored for ship operators and crews on how to prepare and respond to the COVID-19 outbreak.**

Below you can find an overview of some key issues and advice that may assist ship operators, masters and crews to stay alert, strengthen self-protection and prevent the spread of COVID-19.

## What we know about COVID-19

The following information has been taken from the [WHO Q&A on COVID-19](#) as updated on 9 March 2020:

- It is a respiratory disease.
- The most common symptoms are fever, tiredness and dry cough. Some patients may have aches and pains, nasal congestion, runny nose, sore throat or diarrhoea.
- The disease appears to be mild in many cases. However, the virus has the potential to cause severe illness and death, with persons with underlying health conditions possibly at a higher risk.
- As with colds and influenza in general, transmission occurs via respiratory droplets produced when an infected person coughs or sneezes. These droplets land on objects and surfaces around the person. Other people then catch COVID-19 by touching these objects or surfaces, then touching their eyes, nose or mouth. People can also catch COVID-19 if they breathe in droplets from a person with COVID-19 who coughs out or exhales droplets. This is why it is important to stay more than 1 meter (3 feet) away from a person who is sick.
- It is still not known how long the virus survives on surfaces but preliminary information suggests the virus may persist on surfaces for a few hours up to several days, depending on the type of surface, temperature or humidity of the environment. Simple disinfectants can kill the virus making it no longer possible to infect people.
- Most estimates of the incubation period for COVID-19 range from 1 to 14 days, most commonly around five days.
- To date, there is no vaccine and no specific treatment for the disease. Infected persons should receive supportive care to help relieve symptoms.
- Since this is a virus, antibiotics should *not* be used as a means of prevention or initial treatment.

## Port restrictions

Port authorities world-wide are now in a heightened state of alert in order to prevent the further spread of COVID-19. Port authorities will commonly require all ships to proactively report any suspect or actual illness cases to local health authorities after arrival, e.g. by completing and delivering the Maritime Declaration of Health in accordance with Annex 8 of the [International Health Regulations](#) (IHR). In some countries, ships' masters may also be required to complete a special questionnaire tailored to the COVID-19 outbreak, typically with questions concerning crews' and passengers' recent travel itineraries and contacts. Some are also requiring ship masters to carry out daily health checks of their crews, including temperature-taking and checking for respiratory symptoms.

While the details of and deadlines for undertaking pre arrival reporting of human

health onboard, as well as the definition of ‘affected areas’, will differ from one port to another, most ports and coastal states require a declaration on any of the following:

- Declaration on health.
- Temperature measurements.
- Information on sick or deceased crew or passengers.
- Information on previous port calls.
- Information on crew or passengers’ travel history, i.e. if they have been in an affected area within the previous 14 days as a minimum.

The consequences depend very much on the port state and ranges from quarantine of individual crew members or passengers to quarantine of the ship until the expected incubation period of 14 days has passed. In the [United States](#) (US) for example, non-passenger ships that have been to an affected area within the last 14 days, with no sick crewmembers, will be permitted to enter and conduct normal operations, provided that crewmembers remain aboard the vessel except to conduct specific activities directly related to vessel cargo. Similar requirements apply to ships berthing in [Australia](#), and crews are also required to wear medical masks while performing essential ship functions ashore.

While there is no common definition of how to calculate the 14-day quarantine period, the period will typically commence at pilot away time in the affected area which will be the last time the crew of a ship will have interacted with a person from that area.

We do emphasise that the above are only examples of port control measures currently being enforced. Some countries may have established designated quarantine anchorages exclusively for ships arriving from affected areas or via intermediate ports, others may also impose restrictions on landing of garbage if a ship has visited affected areas or has reported an ill person onboard. This is why it is so important to stay in close contact with local port authorities and ships’ agents to obtain the most up to date and reliable information about the type of quarantine measures in force in a given port.

It is also worth noting that illness of a person onboard a ship that may adversely affect the safety of a ship or port facility could be considered a ‘reportable hazardous condition’ and ships that do not accurately report the health condition of crew members may therefore be penalised.

### **Onboard preventive measures**

It is very important to raise the awareness amongst crew members so that they are aware of the risks, how the virus can be spread, and precautions to be taken. The [IMO](#) has provided some advice for seafarers and shipping, so have flag states world-wide. In summary, ships’ crews are recommended to:



- Cooperate fully with the port health authorities and make an honest disclosure of the crew health onboard.

- Practice good hygiene. Some of the

[good practices](#)

mentioned by the WHO are:

Wash hands frequently and avoid touching eyes, nose and mouth.

Practice respiratory hygiene (cover coughs and sneezes with flexed elbow or tissue, discard tissue immediately into a closed bin and wash hands).

Maintain social distancing. Keep at least 1 meter (3 feet) distance between yourself and other people, particularly those who are coughing, sneezing and have a fever.

If you have a cough and fever, use a surgical mask, avoid close contact with others and seek medical help early.

Practise food safety, such as by cooking the food items thoroughly.

- When calling ports in affected areas:

Reduce ship-shore activities by reducing ship-shore exchanges, boarding inspections, internal audits, external audits, maintenance and other activities.

Unnecessary boarding visits should be prohibited.

Strengthen gangway or ladder control by implementing stricter ISPS procedures. It would include enhancing the stairway control, checking the credentials of all personnel boarding the ship, and checking their temperatures and logging it. If any shore personnel are suspected to have flu like symptoms access should be denied.

Restrict entry of agents, tally, foremen, suppliers and other foreign personnel into the crew living area to reduce contact between ship and shore personnel.

Strengthen self-prevention, e.g. by wearing surgical masks, and not interacting with others onboard or ashore if there are flu like symptoms.

Maintain good hygiene in accommodation areas, e.g. by frequently cleaning desks, door handles, switches, telephones, etc.

Restrict shore leaves in ports.

There may be port specific requirements which ships may have to comply with before receiving pilots, agents etc. for which, Masters must contact the local agent well in advance and seek the information.

After departure from port, report any occurring symptoms immediately to the person in charge of medical care onboard.

## **Onboard mitigating measures**

In the event of a suspected diagnosis of COVID-19 onboard a ship, seek immediate expert medical opinion. The master should report the event as soon as possible to the next port of call, to allow the competent authority at the port to arrange, depending on the situation, medical evacuation or special arrangements for disembarkation and hospitalization of the patient and laboratory diagnosis.

While more detailed advice is provided in our publication “ [Managing COVID-19 cases onboard](#) ”, here is a summary of measures that should be considered implemented as soon as a crew member or passenger shows symptoms compatible with the disease:

- Keep the patient’s cabin doors closed, if not placed in a medical isolation room on board.

- To contain respiratory secretions, a surgical mask should be provided to the patient and worn as much as possible.
- Provide information about the risk of disease transmission to persons who will take care of the patient or enter the isolation area and limit the number of such persons.
- Maintain a log listing everybody who enter the cabin.
- Anyone who enters the cabin to provide care to the person in isolation or to clean the cabin must wear appropriate personal protection equipment (PPE). A surgical mask is particularly important, as is the use of disposable gloves.
- Gloves, masks and other waste generated during health care of the patient should be placed in a waste bin with lid in the patient's room before disposal as 'infection waste'.
- Limit the movement and transport of the patient from the cabin for essential purposes only. If transport is necessary, the patient should wear a surgical mask and any surfaces touched by the patient should be cleaned and disinfected.
- Start case investigation immediately. Wear appropriate PPE when interviewing the patient and keep a distance of at least 1 meter.
- Identify the patient's close contacts and ask them to do passive self-monitoring of any symptoms.

All measures implemented onboard should be recorded on the Ship Sanitation Control Certificate (IHR Annex 3). Ship operators in the process of establishing onboard procedures for taking care of a suspected diagnosis of COVID-19 onboard may also want to consult [WHO's guidance on home care for patients with suspected novel coronavirus infection](#) for more detailed advice. In order to better understand how to detect, prevent, respond to and control the new coronavirus, we also recommend enrolling in WHO's [open online training courses](#) on COVID-19.

### **Compliance with statutory and class requirements**

Ships may face challenges in meeting applicable statutory requirements under various international conventions, such as inability to renew ships' or crews' formal certificates; unable to obtain dry docking services; and unable to timely repatriate seafarers. To contain the spread of the virus, classification societies are also limiting their activities at the moment and may not be able to respond to survey requests. Many flag states have already clarified that extensions will be granted in certain cases, however, in all such cases, ship operators are advised to approach the flag state and/or classification society of the ship.

As many countries and ports are now imposing prohibitions on shore leave and crew changes, ship operators and masters may find themselves in a situation where new operational conditions force them to reassess the ship's minimum safe manning, extend individual seafarers' contracts and temporarily set aside provisions relating to hours of work and rest. Some flag states, such as [Norway](#) and the [UK](#) , have

clarified their position on how to handle the current extraordinary manning situation caused by the COVID-19 outbreak. However, we would like to emphasise that all decisions affecting ships' safe manning documents and crews' working hours must be based on a thorough risk assessment of the current situation and the ship's changed operational conditions and taken in agreement with the flag state in question. We also recommend such risk assessments are carried out in consultation with the ships' crews to determine that any extensions on working time is such that the individual seafarer will not be subject to unfortunate physical or mental burdens.

We advise all Members and clients to pay special attention to and follow national and international travel advice when planning crew changes as countries may change their entry restrictions on short notice. [IATA's dedicated webpage](#) provides useful information, so does BIMCO's website "[Coronavirus \(COVID-19\) - crew challenges](#)". Prior to doing a crew change, it is also advisable to check the travel history of the on-signer.

### **Charterparty issues**

For advice related to charterparty issues, please refer to our Insight "[COVID-19 - the effect of this public health emergency on charterparty terms](#)" of 13 February 2020. In addition, we strongly recommend that you obtain expert maritime legal advice on how COVID-19 affects your rights and obligations whether under a charterparty or otherwise at law

*We are grateful to Gulf Agency Company Ltd. and BIMCO for providing regular updates on implementation measures taken by port states and port authorities around the world.*