

## SANITARY AERIAL NAVIGATION

*Convention (modifying convention of April 12, 1933) opened for signature at Washington December 15, 1944, and signed for the United States January 5, 1945*<sup>1</sup>

*Senate advice and consent to ratification May 21, 1945*

*Ratified by the President of the United States May 29, 1945*

*Ratification of the United States deposited at Washington May 29, 1945*

*Entered into force January 15, 1945; for the United States May 29, 1945*

*Proclaimed by the President of the United States May 29, 1945*

*Prolonged by protocol of April 23, 1946*<sup>2</sup>

*Replaced by World Health Organization Regulations No. 2 of May 25, 1951,<sup>3</sup> as between states bound by the regulations*<sup>4</sup>

59 Stat. 991; Treaty Series 992

### INTERNATIONAL SANITARY CONVENTION FOR AERIAL NAVIGATION, 1944, MODIFYING THE INTERNATIONAL SANITARY CONVENTION FOR AERIAL NAVIGATION OF APRIL 12, 1933

The Governments signatory hereto,

Considering that the International Office of Public Health created by the Agreement signed at Rome on December 9, 1907,<sup>5</sup> is unable for the time being to carry out effectively all of the duties and functions assigned to it in the Annex to that Agreement; in the International Sanitary Convention, 1926;<sup>6</sup> in the International Sanitary Convention for Aerial-Navigation, 1933;<sup>7</sup> and in other Conventions or Agreements relating to the public health;

Having entrusted the task of solving this temporary problem by the preparation of emergency agreements and arrangements for the notification of epidemic diseases and for uniformity in quarantine regulations to the United

<sup>1</sup> For forms annexed to the convention, see 59 Stat. 1013 or p. 28 of TS 992.

<sup>2</sup> TIAS 1552, *post*, vol. 4.

<sup>3</sup> 7 UST 2255; TIAS 3625.

<sup>4</sup> The regulations entered into force for all parties to the convention except Australia, which rejected them; accordingly, the convention remained in force in relations between Australia and all parties to the convention, including the United States.

<sup>5</sup> TS 511, *ante*, vol. 1, p. 742.

<sup>6</sup> TS 762, *ante*, vol. 2, p. 545.

<sup>7</sup> TS 901, *ante*, p. 89.

Nations Relief and Rehabilitation Administration (hereinafter referred to as *UNRRA*), in accordance with Resolution No. 8 (2) adopted by the Council of UNRRA at its First Session, without prejudice however to the status of the International Office of Public Health which it is hoped will be able at the expiry of the present Convention to resume the above-mentioned duties and functions; and having received the recommendations of UNRRA in this connection;

Having agreed that, in regard to the American Republics, the Pan American Sanitary Bureau shall continue to act as the general coordinating sanitary agency, including the general collection and distribution of sanitary information to and from the said Republics, as specified in the Pan American Sanitary Code and recognized heretofore by the International Office of Public Health;

Desiring also to modify as between themselves the provisions of the International Sanitary Convention for Aerial Navigation signed at The Hague on April 12, 1933 (hereinafter referred to as *the 1933 Convention*) in the light of the present-day conditions which call for special measures to prevent the spread by air across frontiers of epidemic or other communicable diseases;

Have decided to conclude a Convention for these purposes, have agreed that, whereas the authentic text of the 1933 Convention is in the French language, the present Convention shall be in English and in French, both texts being equally authentic, and have accordingly appointed the undersigned plenipotentiaries who, having communicated their full powers, found in good and due form, have agreed that the 1933 Convention shall be amended as follows:

#### ARTICLE I

All references in the 1933 Convention to the International Office of Public Health shall be read as references to UNRRA.

#### ARTICLE II

*The second paragraph of Article 1, subparagraph VI, shall be deleted and the following substituted:*

The word *surveillance* means that persons are not isolated, that they may move about freely, but that the sanitary authorities of the place or places to which they are proceeding are notified of their coming. They may be subjected in the places of arrival to a medical examination and such inquiries as are necessary with a view to ascertaining their state of health; and, in any territory where the competent Contracting Party thinks fit, surveillance may include requirement to report on arrival and afterwards at such intervals during continuance of surveillance as may be specified, to the Health Officer of the city, town, district, or place to which they proceed.

## ARTICLE III

To Article 1 the following definitions shall be added:

VIII. The term *typhus*, *typhus fever*, or *exanthematous typhus* shall be deemed to relate only to epidemic louse-borne typhus.

IX. An *endemic yellow fever area* is a region in which yellow fever exists in a form recognizable clinically, biologically, or pathologically.

X. A *valid anti-yellow fever inoculation certificate* is one certifying that the bearer has been inoculated against yellow fever, with a vaccine and by a method approved by UNRRA, if there have elapsed:

(1) More than 10 days and less than 4 years from the date of the inoculation.

(2) Less than 4 years from the date of a re-inoculation performed within 4 years of the previous inoculation.

(3) More than 10 days and less than 4 years from the date of re-inoculation performed after an interval of more than 4 years.

XI. The term *Stegomyia (Aedes aegypti)* shall be deemed to include *Aedes aegypti* and any potential mosquito vectors of yellow fever.

## ARTICLE IV

Article 9 shall be deleted and the following substituted:

(1) All passengers traveling by aircraft on international flight shall, on or just before arrival at the point of final disembarkation, or, if required, at any aerodrome where the journey is broken, complete a Personal Declaration of Origin and Health.<sup>8</sup>

(2) The Commander of an aircraft on international flight shall, on or just before the arrival of the aircraft at the first authorized aerodrome in the country of entry, complete an Aircraft Declaration of Health to be handed to the aerodrome authority on arrival, and may be required to produce certificates concerning sanitary measures which such Declaration states were undergone by the aircraft before departure or at stopping places in application of the 1933 Convention as hereby amended.

(3) Aircraft shall not be required to carry Bills of Health.

(4) The Contracting Parties will, so far as possible, adopt the International Forms of Aircraft Declaration of Health, Personal Declaration of Origin and Health, and Certificates of Inoculation or Vaccination against cholera, typhus, and smallpox, respectively, annexed hereto.<sup>9</sup>

## ARTICLE V

To Article 13 the following shall be added:

Further, the embarkation of persons who do not present adequate sanitary guarantees may be prohibited, until the sanitary measures—delousing, dis-

<sup>8</sup> For forms attached to convention, see 59 Stat. 1013 or p. 28 of TS 992.

<sup>9</sup> With regard to yellow fever see Article XI (6). [Footnote in original.]

infection of clothing, etc., or any other measures that are, in the opinion of the sanitary authority, necessary to prevent the carriage of the disease by aircraft, have been carried out.

#### ARTICLE VI

To *Article 16* after "sanitary measures" at the end of the first paragraph the words "including cleansing" shall be added.

#### ARTICLE VII

*Article 20* shall be deleted and the following substituted:

(1) Each Contracting Party shall immediately notify, by the most rapid means, the other Contracting Parties and UNRRA of:

(a) The first recognized case of plague, cholera, or yellow fever discovered in its territory.

(b) The first recognized case of plague, cholera, or yellow fever which occurs outside the limits of local areas already affected.

(c) The existence of an epidemic of typhus or of smallpox.

(2) Every notification prescribed above shall be accompanied, or very promptly followed, by detailed information as to:

(a) The place where the disease has appeared.

(b) The date of its appearance, its source, and its type (including reports of pathological examinations as soon as available).

(c) The number of recognized cases and the number of deaths.

(d) The extent of the local area or areas affected.

(e) In the case of plague, the existence of that disease, or of an unusual mortality, among rodents (including reports of bacteriological examinations as soon as available).

(f) In the case of cholera, the number of germ carriers when any have been discovered.

(g) In the case of yellow fever, the presence and relative prevalence (index) of *Stegomyia (Aedes aegypti)*.

(h) The measures taken.

(3) Each Contracting Party shall, in addition to the diseases specifically mentioned in Article 18 of the 1933 Convention, to wit, plague, cholera, yellow fever, typhus, and smallpox, notify outbreaks of such other communicable diseases as, in the opinion of UNRRA, constitute a menace to other countries by their spread or potential spread across frontiers and shall keep UNRRA regularly informed of the course of the disease.

(4) In addition to the formal notification required by paragraphs (1), (2), and (3) above, the Contracting Parties shall, so far as possible, send to UNRRA at regular intervals notifications of other communicable diseases notified in their countries.

(5) The Contracting Parties shall make the necessary arrangements with UNRRA for giving prompt information to all the governments concerned of the outbreak in any country of a disease which, in the opinion of UNRRA, constitutes a menace to other countries and of the measures which are being taken to prevent the spread of the disease across frontiers by aircraft.

(6) The notifications contemplated in paragraphs (1) and (2) of this Article are to be addressed to the diplomatic missions, or, failing them, to consular offices in the capital of the infected country and shall be held at the disposition of consular offices established in its territory.

(7) These notifications shall also be addressed to UNRRA which shall communicate them immediately to all diplomatic missions, or, failing them, to the consulates in London or Washington as well as to the principal public health authorities of the participating countries. Those prescribed under paragraphs (1) and (2) of this Article shall be transmitted by telegraph or radio.

(8) The appropriate health authority of each Contracting Party shall transmit to the sanitary and authorized aerodromes of its country or within its jurisdiction all information contained in the epidemiological notifications and communications received from UNRRA (and the regional bureaus with which it has made agreements for this purpose) in execution of the provisions of the International Sanitary Convention of June 21, 1926 which may affect the exercise of sanitary control in those aerodromes.

(9) In order to facilitate the prompt and scrupulous fulfilment of the foregoing provisions, the Contracting Parties shall ensure priority for all communications which may enable UNRRA rapidly to appraise the situation concerning the outbreak of a disease and to inform governments in order that they may take appropriate measures against the spread of the disease across their frontiers.

#### ARTICLE VIII

*The second paragraph of Article 32 shall be deleted.*

#### ARTICLE IX

*In Article 34, paragraph (b), the following shall be inserted after subparagraph (3):*

(4) The Contracting Parties shall give favorable consideration to the inoculation against typhus of all persons on board exposed to risk.

*Sub-paragraphs (4) and (5) of Article 34 shall be renumbered (5) and (6) respectively.*

#### ARTICLE X

*Article 35(b) (3) shall be deleted and the following substituted:*

(3) Other persons reasonably suspected to have been exposed to infection and who, in the opinion of the sanitary authority, are not sufficiently pro-

tected by recent vaccination, or by a previous attack of smallpox, may be subjected to vaccination or to observation or to surveillance, or to vaccination followed by observation or surveillance, the period of observation or surveillance being specified according to the circumstances, but in any event not exceeding 14 days, reckoned from the date of arrival of the aircraft.

*The final paragraph of Article 35 shall be deleted and the following substituted:*

For the purpose of this Article "recent vaccination" shall be taken as meaning evidence of successful vaccination not more than 3 years or less than 14 days previously, or evidence of an immune reaction.

#### ARTICLE XI

*Article 36 shall be deleted and the following substituted:*

The Contracting Parties agree:

(1) That persons suffering, or suspected to be suffering, from yellow fever shall not be allowed to embark on aircraft on international flight.

(2) That they will take all possible measures to establish the existence or non-existence of yellow fever within their territories. For this purpose, in territories where endemicity of yellow fever is suspected, in cases where the person dies within 10 days from the onset of any undiagnosed febrile illness, it is important that a specimen of liver tissue be taken, if necessary by viscerotome, for histopathological examination. In endemic areas a sample of blood for a yellow fever immunity test should, in addition, wherever possible, be taken from all persons suffering from an undiagnosed fever, and if the cause of the fever remains doubtful and the patient recovers, a second sample should be collected at the end of the third week from the onset of illness.

(3) For the purpose of quarantine control, UNRRA in consultation with the governments concerned and, as regards the Western Hemisphere, with the Pan American Sanitary Bureau, shall define the boundaries of endemic yellow fever areas.

(4) That they shall use their best endeavors to secure that all persons who are likely to land in an endemic yellow fever area shall be inoculated against yellow fever 10 days before arrival in the area and that, so long as such persons remain in the area, they shall be re-inoculated every 4 years.

(5)(a) That inoculation against yellow fever shall be required for all regular staff employees and crews using authorized aerodromes situated in endemic yellow fever areas.

(b) That in areas in which yellow fever does not exist, but in which there may be conditions permitting of its development, inoculation of such personnel is recommended.

(6) That all persons inoculated in compliance with the provisions of paragraphs (4) and (5) of this Article shall be furnished with and carry an Inoculation Certificate signed by the officer carrying out the inoculation. This certificate shall conform to the International Form of Certificate of Inoculation against yellow fever annexed hereto.

(7) That persons in possession of a valid anti-yellow fever inoculation certificate shall not for the purpose of the control of yellow fever be subjected to quarantine restrictions.

(8) That in place of a valid anti-yellow fever inoculation certificate, a certificate that the bearer has recovered from an attack of yellow fever and that his blood contains immune bodies against yellow fever, as proved by a test carried out by an institute regularly carrying out biological tests for yellow fever and approved for this purpose by the government of the country concerned, will be accepted.

(9) That any person not in possession of a valid anti-yellow fever inoculation certificate shall be considered to have been exposed to the risk of contracting yellow fever during the period of his stay in an endemic yellow fever area.

(10) That UNRRA shall lay down standards with which yellow fever vaccine shall conform.

(11) That they will make arrangements to test at frequent intervals the activity of the yellow fever immunizing vaccine in use in order to ensure that its immunizing properties are satisfactory, and for this purpose agree that UNRRA in consultation with the governments concerned and, as regards the Western Hemisphere, with the Pan American Sanitary Bureau, shall designate from time to time institutes which are approved for the carrying out of such tests.

## ARTICLE XII

*Article 38* shall be deleted and the following substituted:

Notwithstanding Article 4 of the 1933 Convention, every aerodrome which receives aircraft to which the 1933 Convention as amended applies (Article 1, I, second paragraph) and which is situated in a region, that is to say, a part of a territory, in which yellow fever exists in a form clinically, biologically, or pathologically recognizable shall be made a sanitary aerodrome as defined in the 1933 Convention, and in addition, shall be:

- (1) situated at an adequate distance from the nearest inhabited center;<sup>10</sup>
- (2) provided with arrangements for a water supply completely protected against mosquitoes, and kept as free as possible from mosquitoes by systematic

<sup>10</sup> For the purpose of mosquito control the perimeter of the aerodrome should be defined as the line enclosing the area containing the aerodrome buildings and any land used or intended to be used for the parking of aircraft. A building-free zone of 400 meters should be maintained around the perimeter of all aerodromes on main air lines of communications within endemic yellow fever areas. [Footnote in original.]

measures for the suppression of breeding places and the destruction of the insects in all stages of development;

(3) provided with mosquito-proofed dwellings for the crews of the aircraft and for the staff of the aerodrome;

(4) provided with a mosquito-proofed dwelling in which passengers can be accommodated or hospitalized.

With a view to the elimination of insect vectors of yellow fever, the Contracting Parties will render and maintain free from such vectors (a) aerodromes and their surroundings in endemic yellow fever areas, and (b) aerodromes not situated in endemic yellow fever areas but exposed to the risk of the introduction of the disease.

As an immediate precaution against the carriage of vectors of yellow fever, disinsectization of aircraft shall be carried out at each aerodrome within an endemic yellow fever area, particularly on departure from the last aerodrome in an endemic yellow fever area.

Health authorities in any territory within an endemic yellow fever area shall be at liberty to impose such quarantine restrictions against other territories within that area as may be authorized by the 1933 Convention as hereby amended. Detention of healthy passengers and crews not carrying valid Inoculation Certificates shall not be carried out at the aerodrome of departure. They shall be permitted to depart, the necessary quarantine measures being carried out at the first aerodrome of arrival in an area at risk.

### ARTICLE XIII

*Articles 39 to 46 inclusive shall be deleted.*<sup>11</sup>

### ARTICLE XIV

*Article 47 shall be deleted, and the following substituted:*

(1) In territories in which yellow fever does not exist, but in which there may be conditions which permit of its development:

(a) authorized aerodromes shall conform to the requirements set forth in Article 38 of the 1933 Convention as hereby amended;

(b) upon arrival at the first aerodrome of call aircraft which have proceeded from endemic yellow fever areas shall be disinfected.

(2) All persons traveling by air from an endemic yellow fever area to one in which yellow fever does not exist but in which there may be conditions

<sup>11</sup> In view of the deletion of Article 40, compliance with the requirements of Article 38 as amended shall no longer cause aerodromes situated in an endemic yellow fever area to be regarded as "antiamaril aerodromes" and separate local areas. Passengers landing at such aerodromes shall submit to the measures laid down in Article 38 as required. [Footnote in original.]

which permit of its development, shall be dealt with in the following manner, at the first stopping place in the latter area :

(a) if they are in possession of a valid anti-yellow fever inoculation certificate they shall be allowed to proceed without any quarantine restrictions with respect to yellow fever;

(b) if they are not in possession of a valid anti-yellow fever inoculation certificate, they may be isolated in properly screened quarters until the certificate becomes valid or until 6 days have elapsed, whichever is the lesser.

(3) Notwithstanding the preceding provisions of this Article, the Contracting Parties may (but only in the most exceptional cases) issue Certificates of Urgency to non-inoculated persons whose unobstructed passage is absolutely and immediately essential on grounds of high policy, certifying that a passage without hindrance to the bearer of the Certificate is urgently necessary.

The precise form and method of issue of the Certificate and the nature of the certifying authority shall be a matter for arrangement and communication between governments concerned.

The Contracting Parties undertake to grant unimpeded passage to bearers of such Certificates but the movements of such Certificate holders will, whenever possible, be restricted during stops on air routes to adequately screened quarters which will not be left except to re-enter the aircraft.

#### ARTICLE XV

*The first line of Article 51* shall be altered to read "The following measures may be taken on arrival:".

#### ARTICLE XVI

*Article 53* shall be deleted, and the following substituted:

Persons who, on their arrival at an aerodrome, are considered, under the terms of Part III of the 1933 Convention as hereby amended, liable to surveillance<sup>12</sup> up to the expiration of the period of incubation of the disease, may nevertheless continue the voyage on condition that the fact is notified to the authorities of subsequent landing places and of the place of arrival by some method sufficient to secure that they can be subjected to medical inspection in any subsequent aerodromes on the route.

<sup>12</sup> In all cases where this Convention provides for surveillance, surveillance may not be replaced by observation except

(a) in circumstances in which it would not be practicable to carry out surveillance with sufficient thoroughness; or

(b) if the risk of the introduction of infection into the country is considered to be exceptionally serious; or

(c) if the person who would be subject to surveillance cannot furnish adequate sanitary guarantees.

Persons under observation or surveillance shall submit themselves to any examination which the competent sanitary authority may consider necessary. [Footnote in original.]

Persons who are liable to observation <sup>12</sup> under the terms of Article 26 of the 1933 Convention shall not be authorized, until the expiration of the period of incubation, to continue their voyage except, in the case of diseases other than yellow fever, with the approval of the sanitary authorities of the next stopping place.

#### ARTICLE XVII

*The first paragraph of Article 54* shall be deleted and the following substituted:

In applying sanitary measures to an aircraft coming from an infected local area, the sanitary authority of each aerodrome shall, to the greatest possible extent, take into account all measures which have already been applied to the aircraft, in another sanitary aerodrome abroad or in the same country, and which are duly noted in the Aircraft Declaration of Health referred to in Article IV of the present Convention.

*To Article 54* the following paragraph shall be added:

In view of the special risk of conveying insect vectors of malaria and other diseases by aircraft on international flight, all such aircraft leaving affected areas will be disinfected. Notwithstanding the terms of Article 54 of the 1933 Convention as hereby amended, further disinsectization of the aircraft on or before arrival may be required if there is reason to suspect the importation of insect vectors.

And the Contracting Parties have further agreed as follows:

#### ARTICLE XVIII

The present Convention shall come into force as soon as it has been signed or acceded to on behalf of ten or more governments.

#### ARTICLE XIX

The present Convention shall supplement and be read as one with the 1933 Convention, which as hereby amended remains in full force between the Contracting Parties, and whenever any provision of the 1933 Convention contains a reference to another provision, the reference shall be deemed to be a reference to that provision as modified by any amendments effected thereto by the present Convention.

#### ARTICLE XX

After January 15, 1945 the present Convention shall be open to accession by any government not a signatory. Accessions shall be notified in writing to the Government of the United States of America.

Accessions notified after the entry into force of the present Convention shall become effective with respect to each government upon the notification of its accession.

## ARTICLE XXI

Any Contracting Party may on signature or accession declare that the present Convention does not apply to all or any of its colonies, overseas territories, territories under its protection, suzerainty, or authority, or territories in respect of which it exercises a mandate. The present Convention may at any time thereafter be applied to any such territory by notification in writing to the Government of the United States of America, and the Convention shall apply to the territory concerned from the date of the receipt of the notification by the Government of the United States of America.

## ARTICLE XXII

The Government of the United States of America shall give notice in writing to governments parties to the 1933 Convention and to governments parties to the present Convention, of all signatures and accessions to the present Convention and of all notifications regarding the territories to which the present Convention is to be applied.

## ARTICLE XXIII

The present Convention shall remain in force as to each Contracting Party until either

(1) such Party shall become bound by a further Convention amending or superseding the 1933 Convention, or

(2) the expiration of eighteen months from the date on which the present Convention enters into force,

whichever shall be the earlier.

## ARTICLE XXIV

The original of the present Convention shall be deposited in the archives of the Government of the United States of America and shall be opened for signature at Washington on December 15, 1944, where it shall remain open for signature until January 15, 1945. Certified copies hereof shall be furnished by the Government of the United States of America to each of the governments on behalf of which this Convention is signed or acceded to and to each of the governments parties to the 1933 Convention.

IN WITNESS WHEREOF, the undersigned plenipotentiaries, having deposited their full powers, found to be in due and proper form, sign the present Convention in the English and French languages, both texts being equally authentic, on behalf of their respective governments, on the dates appearing opposite their signatures.

- For the French Republic:  
 ANDRÉ MAYER *January 5, 1945*
- For Poland:  
 JAN CIECHANOWSKI *January 5, 1945*
- For the United Kingdom of Great Britain and Northern Ireland:  
 At the time of signing the present Convention I declare that my signature does not cover any of the territories referred to in Article Twenty-One of the International Sanitary Convention for Aerial Navigation, 1944.<sup>13</sup>  
 HALIFAX *January 5, 1945*
- For the United States of America:  
 Subject to ratification.  
 E. R. STETTINIUS, Jr. *January 5, 1945*
- For China:  
 J. HENG LIU *January 11, 1945*
- For the Union of South Africa:  
 S. F. N. GIE *January 13, 1945*
- For Egypt:  
 With the following reservations:  
 1. That this signature does not affect in any way the relations of the Egyptian Government with the International Office of Public Health, Paris, or its obligations toward the Regional Office at Alexandria;  
 2. That this convention is subject to ratification by the Egyptian Parliament.  
 M. HASSAN *January 15, 1945*
- For Canada:  
 Subject to ratification.  
 L. B. PEARSON *January 15, 1945*
- For Cuba:  
 This convention, subject to approval by the Senate of the Republic, will be ratified by the Executive [translation].  
 G.M.O. BELT *January 15, 1945*
- For the Dominican Republic:  
 With the reservation that the Dominican Republic will not be able to ratify this convention without adhering, at the same time, to the Paris and Hague Conventions, and that by virtue of Constitutional principles of the Republic, these processes shall be subject to the prior approval of the National Congress [translation].  
 EMILIO G. GODOY *January 15, 1945*
- For Bolivia:  
 Subject to ratification [translation].  
 V. ANDRADE *January 15, 1945*
- For Nicaragua:  
 GUILLERMO SEVILLA SACASA *January 15, 1945*
- For Peru:  
 With the following reservations:  
 1. That this Convention is signed *ad referendum*;  
 2. That if the execution of the said Convention would not conform with the regulations contained in the Pan American Sanitary Code of Havana, Perú will give preference to the latter.  
 P. G. BELTRÁN *January 15, 1945*

<sup>13</sup> The convention was subsequently made applicable to British territories, dependencies, and protectorates, as specified in notifications given by the British Government.

For Luxembourg:	
HUGUES LE GALLAIS	<i>January 15, 1945</i>
For Ecuador:	
S. E. DURAN BALLEN	<i>January 15, 1945</i>
For Greece:	
C. P. DIAMANTOPOULOS	<i>January 15, 1945</i>
For Honduras:	
JULIÁN R CÁCERES	<i>January 15, 1945</i>
For Haiti:	
J. THÉBAUD	<i>January 15, 1945</i>

[For forms annexed to the convention, see 59 Stat. 1013 or p. 28 of TS 992.]