COVID-19 Guidance for Crews

NOTE
This paper is an update to, and supersedes 20SAB04, of the same name.

At all times, crews should follow the advice of their health authorities, operators, or the health authorities of the destination country. The following is general advice about COVID-19 as understood at the date of publication.

The risk of transmission of COVID-19 in the flight deck is very low, provided appropriate hygienic and precautionary measures are taken. Even though vaccinated people may get infected and spread SARS-Cov-2 virus, infectivity among vaccinated people is considerably lower compared to non-vaccinated. Vaccination protects efficiently from severe COVID-19 disease.

The biggest workplace risk for pilots is fellow pilots. It is of utmost importance that pilots not go to work if they have any symptoms of COVID-19 or have had a close contact with a person suspected of having or testing positive for COVID-19.

Transmission in the aircraft is likely due to direct contact via droplets or aerosols or, in rare cases, via surfaces, thus the importance of mask wearing. The SARS-Cov-2 virus can survive on surfaces from a few hours to a few days, but the viral dose from surfaces generally does not reach the threshold for infection. Frequent hand washing, and disinfection is still recommended.

Recirculated air is not considered a significant source of infection, as it passes through HEPA filters, which are used, for example, in operating theatres. The SARS-Cov-2 virus is approximately 0.125 μm in diameter which is within the particle-size range that HEPA filters capture with a high level of efficiency.¹

CREWS SHOULD CONSIDER THE FOLLOWING RECOMMENDATIONS

**Before the flight**
- Covid-19 vaccination is strongly recommended.
- Crew planning should consider using crews as teams. This would restrict potential infection to the team members only.
- Operators should consider the balance of the effects of quarantine and the effects of extended duties, within the FTL or FRMS, when deciding to operate a turnaround or layover.
- Crews and other personnel with any symptoms of flu should not be working.
- If a pilot has had a close contact with a confirmed or suspected COVID-19 case, they should stay at home and should not work.
- Procedures should be put in place to minimize crew exposure to ground personnel.
- Crews should make use of separate crew channels in the airport, where they are available, to minimize interaction with the public.
- All personnel should follow proper hygiene practices before entering the cockpit, including the use of face masks.
- During turn-around when pilots are in contact with ground personnel, a mask should always be worn.

**During the flight**
- Disinfect all surfaces with appropriate disinfectant wipes before starting your flight preparations.
- Disinfect hands often, and always before eating anything.
- Avoid touching your face – eyes, nose, mouth.
- If routine use of OXY mask is required (such as for operations above a given Flight Level), disinfect the OXY mask before and after use.
- A face mask may be used during the flight as long as the operator has performed a proper risk assessment and recommends or allows the use of masks and crews feel that it does not interfere with safe performance of duties. However, crews should have an option not to wear a facemask during the flight due to flight safety issues.
- There should be a dedicated cabin crew member who attends the flight crew as this reduces number of contacts.
- In flights with in-flight rest, each pilot should have personal bedding.

**At layovers**
- Follow the regulations and recommendations of the local authority.
- If required by the local authority or your operator, remain in your room except to seek medical attention, or for essential activities including exercise, while respecting physical distancing requirements.
• If you are vaccinated and the prevalence of COVID-19 is low, you may not need to follow room or hotel lockdown. If the local authority and operator do not require lockdown, hygienic measures (social distancing, hand hygiene, face masks) are strongly recommended.
• Take your vaccination certificate or certificate of COVID-19 infection with you.
• Avoid contact with the public.
• Maintain physical distancing measures with crewmembers.
• Do not use the common facilities of the accommodation unless physical distancing measures are in place.
• Consider dining in-room, get take-out, or dine in a restaurant preferably within the accommodation facility, maintaining physical distancing.
• Wash your hands with soap and water for at least 20 seconds or use hand sanitizer often, and always after entering the hotel room or before eating.
• Use a face mask when leaving the hotel room.
• Monitor signs and symptoms. If you are sick, seek medical advice before operating or travelling in any capacity.

It is the responsibility of the operator to provide appropriate disinfectant wipes that are suitable for the aircraft environment. The wipes must be effective against SARS-Cov-2 and be approved for aviation use. Disinfection of aircraft surfaces with self-provided products performed by the crew members may lead to chemical reactions which can have negative (corrosive) effects on the aircraft.

The need to self-isolate after flights must be decided by your responsible authority. If a flight has no layover, it is not expected that there would be a need to self-isolate. For flights with a layover, the decision will depend on the vaccination status, destination, risk of infection, and any exposure risks at the destination. Vaccinated crews who secure private transportation, stay at the hotel, eat via room service, and maintain the social distance of 2 meters can keep the risk of infection low.