

# Information Sheet For COVID-19 RDT Antigen Test



## Make sure your details are correct

Welcome to Jackson's International Airport.

Prior to progressing to the check in and boarding process, you will be required to undertake a nasopharyngeal swab and a COVID-19 Rapid Diagnostic Test (RDT) for the detection of antigens.

While you wait for your swab, there are some things you can do now to get ready.

Please complete all the required documentation while waiting to be called up for your nasopharyngeal swab.

Please ensure all your details are correct on the forms provided to you.

You should **not** be presenting for check in if you:

-  Are unwell with fever, cough, runny nose or other symptoms that could be from COVID-19
-  Have tested positive with COVID-19 and you are in isolation
-  Are in quarantine
-  Are close contacts of someone with COVID-19.

If you fall into any of the above categories, check with your healthcare provider. You may need to reschedule your itinerary.

After the swab, please return to the waiting area until your results are available.

If you are symptomatic on arrival, you will not be permitted to proceed to the waiting area. Please contact your healthcare provider for assistance.

Please provide the results of your PCR test conducted within 72 hours of travel.

## Interpretation of RDT Results

### Negative:

If your RDT returns a negative result, you will be issued a travel certificate, and be authorised to proceed to the check in counter.

Please ensure that you follow all the COVID safe rules while passing through the check in counter, security screening, immigration and waiting area prior to boarding the plane:

1. Wear the appropriate face mask
2. Maintain social distancing
3. Regular hand washing or sanitising

### **Positive (Non-negative):**

If your RDT returns a positive result, you will not be authorised to proceed to check in.

You are advised to:

1. Contact a provider to conduct a PCR test
2. Contact your healthcare provider if you require assistance
3. Remain in isolation for the period stipulated by your healthcare provider
4. Contact Air Niugini to reschedule your itinerary at the end of your isolation period

## **What to expect at check in**

You should bring the required documentation for check in:

- 📄 Your passport
- 📄 Your ticket and itinerary
- 📄 Any other required travel documents
- 📄 A travel certificate will be provided after a negative result on the RDT Antigen test.
- 📄 A face mask

Please ensure that you follow all the COVID safe rules while passing through the check in counter, security screening, immigration and waiting area prior to boarding the plane:

1. Wear the appropriate face mask
2. Maintain social distancing
3. Regular hand washing or sanitising

It is advised that you carry your personal hand sanitizer with you for regular use.

# SCREENING QUESTIONNAIRE COVID-19

An outbreak of COVID-19 requires early and effective detection of suspected cases to limit the risk of exposure to others. We are kindly requesting you complete the following questions and to have your temperature checked by us.

<b>Patients name (please print):</b>
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**Do you currently have any of the following symptoms? Tick all that apply:**

Fever/Chills		Cough	
Shortness of Breath		Diarrhea	
Flu-like symptoms such as coughing, sore throat and fatigue		Do you suffer from loss of smell or loss of taste?	

**Are you taking any medication to treat/suppress any of the above symptoms? (YES/NO) Do you have any existing condition which weakens your immune system? (YES/NO)**

1. During the last 14 days have you been in residence or travelled from any High Risk country or area (Outbreak or Local Transmission).	YES NO
2. Did you have close contact (shared living quarters, or provided care) OR 3. Spent time within speaking distance with a person who does have, or is under investigation for COVID-19?	YES NO
4. Have you received a COVID 19 Vaccination?	YES NO
5. If YES to 4: Name of Vaccine:  Date of Vaccination:	

List all countries and locations where you have resided or travelled from in the last 14 days (even if not affected by COVID-19)

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**Temperature (°C):**

<b>Nurse name (please print)</b>	
<b>Nurse Signature:</b>	<b>Date:</b>

# Consent Form for COVID-19 RDT Antigen Test



People who are travelling to Australia are required to undergo a nasopharyngeal swab and a Rapid Diagnostic Test (RDT) for COVID-19 antigens prior to proceeding with the boarding process at Jackson's International Airport, Port Moresby, Papua New Guinea.

## About COVID-19 RDT Antigen Test

The COVID-19 RDT antigen test is free. You can choose whether to have the RDT antigen test or not. If you refuse the RDT antigen test, you may not be allowed to board your flight.

To get the RDT antigen test, you will be required to undergo a nasopharyngeal swab. This is a common procedure, with minimal side effects.

There are different brands of RDT antigen tests. The one used at this site is the Abbott Panbio RDT Antigen test, as approved by the PNG Controller. Results will be available 15 to 20 minutes after the nasopharyngeal swab.

You can tell your healthcare provider if you have any concerns, like chronic epistaxis (blood nose).

Even with a negative RDT antigen test result, you must still follow public health precautions to stop the spread of COVID-19 including:

- Keep your distance – stay at least 1.5 metres away from other people
- Wash your hands often with soap and water, or use hand sanitiser
- Wear a mask, if you have been advised that you should
- Stay home if you are unwell with cold or flu-like symptoms and arrange to get a PCR COVID-19 test.

ISOS, who will be providing the testing, records all results on this form, and will complete the details of your RDT antigen test when you receive it.

You will receive information about which process to follow when your result is negative or positive.

# Privacy and Consent Conditions

1. As part of the RDT Antigen test, ISOS need to collect personal information and sensitive information about you.  
**Personal information:** means information about you that can be used to identify you (such as your name). It includes **sensitive information**, such as information about your health and your test results.
2. This information may be collected by talking to you or from other information you give through your dealings with ISOS. ISOS may provide personal and sensitive information they collect to relevant parties.
3. Your personal information is collected for the purpose of giving you a COVID-19 RDT Antigen test, and related purposes (the “**Purpose**”), including:
  - (a) Administration, like keeping records of the RDT Antigen test and reporting;
  - (b) Contacting you about your RDT Antigen test and any services that may be offered to you after you get the test;
  - (c) The Australian Government’s relations with other countries, and enabling the Australian Government to assist Australian citizens in other countries.
4. You do not have to give us your personal information. But if you do not, you may not be able to get an RDT test at this time.
5. ISOS may also provide your personal information to others as required to fulfil the **Purpose** above, including to:
  - (a) the Government of Papua New Guinea;
  - (b) other agencies of the Australian Government;
  - (c) ISOS’s other contractors and affiliates; and
6. Normally, under Australian privacy law, when personal information is likely to be provided to someone who is not in Australia or an external Territory of Australia (**overseas recipient**), reasonable steps are required to make sure the overseas recipient does not breach Australian Privacy Principles. By signing below, you agree that ISOS will not be required to take these steps. This means that if the overseas recipient handles your personal information in a way that breaches the Australian Privacy Principles, ISOS will not be responsible for that breach under Australian privacy law.
7. ISOS’s Privacy Policy has more information about how it handles personal and sensitive information: <https://www.internationalsos.com/privacy>. This policy also has information on how you can contact ISOS about your personal information held by ISOS or make a complaint, and how such a complaint will be handled by ISOS.

# Patient information

<b>Name:</b>	
<b>Date of birth:</b>	
<b>Address:</b>	
<b>PNG National ID Number (if applicable):</b>	
<b>Passport Number:</b>	
<b>Phone contact number:</b>	
<b>e-mail:</b>	
<b>Sex:</b>	

<b>Next of kin (in case of emergency):</b>	
<b>Name:</b>	
<b>Phone contact number:</b>	

# Consent to conduct RDT Antigen Test

By signing this form, I understand and agree that:

1. I have read and fully understood the above terms and conditions
2. ISOS may collect, process, use, disclose (make known) and store my personal information (including sensitive information about my health and whether I have had a previous COVID-19 test, RDT or PCR) for the purposes of providing a COVID-19 RDT Antigen test. I further agree to hold harmless ISOS and their related companies and affiliates from any liability arising or in connection with the Purpose.
3. ISOS can disclose my personal and sensitive information to overseas recipients.
4. ISOS will rely upon the accuracy and completeness of all statements made by me relating to my medical and personal data.
5. I confirm I have received and understood information provided to me on COVID-19 RDT Antigen test.
6. I agree to receive a nasopharyngeal swab and a COVID-19 RDT Antigen test

Name: .....

Signature: .....

Date: .....

**OR**

- I am the patient's guardian or substitute decision-maker, and agree to the Consent for the Patient named above

<b>Guardian/substitute decision-maker's name:</b>	
<b>Guardian/substitute decision maker's signature:</b>	
<b>Date:</b>	

<b>Date</b>	
<b>RDT Antigen Result (Circle result)</b>	<b>Positive</b> <b>Negative</b>
<b>Lab Technician Name and Signature</b>	