

US Rule Change for Carrying Dogs

Chris Shieff
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Key Points

- **New rules apply to carrying a dog into the US, effective August 1.**
- **These rules depend on where the dog has been in the past six months.**
- **If the dog has not been a high-risk country, there is only one form to fill out.**
- **If the dog has been in a high-risk country, it will only be allowed to enter if vaccinated.**
- **Dogs vaccinated outside of the US will also need a rabies test beforehand.**

How do the new rules work?

On August 1 the **rules for bringing a dog into the US** from overseas changed.

Essentially the new requirements depend on where the dog has been in the preceding six months, and whether it has been **vaccinated** against nasties like rabies.

These may now come as a surprise to some owners who have been travelling with their pets regularly.

As the **penalty** for not doing having the right paperwork is as high as \$250,000 USD and a year in prison per dog, it's important operators check everything is in place before wheels up - and not on arrival.

Introducing Peggy - OPSGROUP's unofficial mascot for this article. Peggy was recently in a major Hollywood motion picture. Here's what her owners would face if they wanted her to re-enter the country by air.



Disclaimer: in no way is Peggy (unofficially the world's ugliest dog) affiliated with OPSGROUP, although we wish she was.

Scenario #1 - Peggy has only been in a rabies-free, or low-risk country:

Check this list. If the dog hasn't been in one of these countries in the past six months, the owner only needs to fill out a CDC Dog Import Form.

This can be completed **as late as the day of travel**, but CDC recommends doing it at least a few days in advance.

Once you receive a receipt, it will be valid for **six months** and can be used as many times as you like provided that the dog hasn't been to a high-risk country since it was issued.

It's free, but one must be completed per pooch. No group concessions here! The owner must then show the receipt on paper or via their phone to US customs and air carrier.

A few other things the dog will need:

- It must be healthy on arrival.
- At least six months old (no puppies).
- **It must be microchipped.**

Scenario #2 - Peggy has been in in a high-risk country but is vaccinated:

Note that the list includes several countries from the Middle East, South America, Asia and Africa.

In addition to the Dog Import Form and microchip above, the owner will also need something called A Certification of US-issued Rabies Vaccination form. These need to be filled out by a veterinarian accredited by the US Dept. Of Agriculture and endorsed by the USDA.

If Peggy was vaccinated **outside of the US**, things start to get more complicated. In addition to the Dog Import Form, it will also need:

- A *Certification of Foreign Rabies Vaccination and Microchip*. This must be filled out by the owner's vet and endorsed by an official government veterinarian.
- A valid rabies test from a CDC-approved lab.
- A reservation for Peggy at a CDC-registered kennel for up to 28 days.

Scenario 3 - Peggy has been in a high-risk country and isn't vaccinated:

Peggy will not be allowed to enter the US! Nor will any other dog that falls under this category.

Rules for Air Operators

In addition to the above requirements, there are new procedures for air operators too.

From August 1, operators need to create something called an air waybill (AWB) for each dog they transport to the US. This is a document that accompanies goods shipped internationally by air. It is essentially a receipt of goods for the operator, and a contract of carriage between you and the dog's owner.

The good news is that you can request a waiver to this requirement by emailing cdcanimalimports@cdc.gov and asking for one.

They'll get back to you within one working day with a waiver **valid for 90 days**. You can only do this once though, and beyond that you will need a full AWB to carry the animal on future flights.

Beware the saga of Pistol and Boo

Whether it be in the US or abroad, customs officials take non-declarations of animals extremely seriously and the penalties can extend to the air operators carrying them.

While our clientele may like to take their family pet with them on business or vacation aboard private aircraft, they need to be aware of their obligations and meet them - as is often the case for pets carried between Europe and the US.

In other words, **don't be like Johnny**.

Back in 2015 a high-profile celebrity, Johnny, carried his Yorkshire terriers, Pistol and Boo, illegally into Australia on his private jet. He did so knowingly but (in his words) under the belief that his staff had completed the necessary paperwork - they hadn't.



Pistol and Boo, who became embroiled in an international controversy back in 2015 after travelling on a private jet.

He and his partner potentially faced several charges including perjury. Pistol and Boo also faced being put down. The case became went infamously public, and even involved the Australian Prime Minister before most charges were dropped.

The moral of the story is what may seem like an oversight to some, are **taken extremely** seriously by authorities – the US included. The passengers we carry may not always realize that to the extent that they perhaps should.

More Questions?

Check the new requirements on the CDC website [here](#), and if you have any really specific questions your best bet is to get in touch with the CDC directly on (800) 232-4636.

Going Viral: The non-Covid nasties to watch

out for

OPSGROUP Team
13 August, 2024



With Covid running rampant across the globe, other risky diseases have been forgotten somewhat, but there are a fair few out there which can pose a threat to crew on layovers.

So here's a quick round up on **the regions where you might need to cover up, dose up, or just be extra cautious** during your international flight operations, split into sections based on the active travel health alerts that the CDC and other health authorities have out at the moment.

Red Warning Level 3: Avoid all non-essential travel

Guinea - Ebola

They had a serious outbreak earlier in 2021. Actually, cases have reduced significantly and the US has just removed their travel restriction which required travelers coming from Guinea to enter the US via 6 main airports only. Caution is still very much advised though if traveling in the country.

Venezuela - Infrastructure

Not a specific disease caution here, just a warning that their healthcare infrastructure is breaking down and if you are taken ill here you may not be able to access treatment. One to think about if you ever have crew on a layover here.

Amber Warning Level 2: Extra caution

Fiji - Leptospirosis

This is really prevalent in Fiji at the moment, particularly rural areas. It is caused by a bacteria spread around by animal pee, and can get into water and soil and live there for months. The main guidance is to avoid swimming or wading in water that could have had infected animals in it. Wear protective clothing and footwear and cover any cuts and scratches with waterproof bandages.

Haiti - Rabies

Haiti currently has a big problem with rabid dogs. The bigger issue is that there is an extremely limited supply of treatment drugs in Haiti, so the recommendation is to get vaccinated before you head there.

Avoid dogs, and cats for that matter – even the cute baby ones. You can catch it if you are bitten, scratched or even licked, and treatment is only effective if administered early. Once symptoms present themselves it is often fatal. Plus, getting bitten by anything is never pleasant.

Polio - Africa and Asia

Everyone should be vaccinated against this. If you are not, get vaccinated (or don't travel) because this is continues to be very prevalent in African countries and there is always a risk.

Nigeria - Yellow Fever

Consider getting vaccinated if you head here regularly, and try to prevent mosquito bites (also, because they carry loads of horrid stuff).

International flight crew generally are required to have had Yellow Fever Vaccinations – if you have not then take care because some countries will not allow crew (anyone) to enter who does not have a vaccination booklet if they have traveled to a Yellow Fever region recently.

What else to watch out for

Malaria

Malaria is a parasite carried around by mosquitos. There are actually four types of it, and it is in a lot of places!

The big risk here is it can take a while for symptoms to show. They reckon you're most likely to have **symptoms between 10 days and 4 weeks** from being infected, but it could take as long as a year. The little beasties also like to loiter around in your liver, popping out at random times when you're run down, and so can cause recurring illness for as long as 4 years after infection.

Where?

According to the CDC it is **found in warmer regions**, which doesn't narrow it down an awful lot – basically anywhere hot and humid where there are places for mosquitoes to breed and grow. Just after rainy season is likely to be the worst, and rural areas will be more risky.

We have borrowed the CDC map because it is easier than trying to list everywhere to watch out.

How to prevent it

If you are going to a Malaria riddled area then you can take preventative medicine, but watch out! Not many are approved for operating pilots because they can have some nasty side effects. Malarone is the most commonly approved (and generally has the least side effects) but **we ain't no doctor so check with an AME** from your licensing state before taking.

The other option is to slather yourself in deet and wear long clothing to prevent the little nippers from getting at you in the first place.

The Symptoms

- Fever, sweats ad chills
- Muscle ache
- Nausea and sickness

So, basically generic symptoms of about a thousand other possible diseases.

If you have been to a malaria area and are thinking "**I got chills, they're multiplying**", don't write them off as a random cold - tell a doctor so you can get tested because it can get very serious!

Dengue Fever

Another one to blame on the pesky mosquito, Dengue is **common in over 100 countries**, and over 400 million people catch it every year, 100 million getting sick and 22,000 dying. Dengue Fever is **Malaria's bigger, badder brother**, and there is no specific treatment.

Like Malaria, there are also different strains of the virus meaning you can get different sorts, multiply times.

Where?

Outbreaks are coming across the Americas (including North America, although the mosquitoes aren't there, people just head in already infected), Africa, the Middle East and Asia, and the Pacific Islands. It is most prevalent in **tropical and sub-tropical areas**.

There is currently a growing outbreak in Reunion.

Brazil has the highest rate of Dengue fever in the world.

How to prevent it

Best plan, don't get bitten. Insect repellent is smelly, sticky stuff but it works. Here's what the CDC recommends:

- DEET
- Picaridin (known as KBR 3023 and icaridin outside the US)
- IR3535
- Oil of lemon eucalyptus (OLE)
- Para-menthane-diol (PMD)
- 2-undecanone

There is a vaccine but it is only given to people who have been infected before and have a risk of getting severe Dengue, and for kids between 9-16 who live in a Dengue area.

The Symptoms

The early, mild ones tend to get confused with other diseases so again, if you've been somewhere with Dengue, don't assume it is something else. **Go get tested**.

Initial symptoms usually appear within 4 to 10 days:

- Nausea and sickness
- Rash
- Aches and pains, especially behind the eyes and in bone joints and muscles

These last around a week, unless you develop serious Dengue fever, which 1 in 20 do:

- Belly pain
- Vomiting (a lot)
- Bleeding from nose and gums
- Lethargy

Zika

This one made the news a few years ago as it can cause serious birth defects. The symptoms for most tend to be fairly mild though.

It is also transmitted by our old friend the mosquito and there is no particular treatment so your preventative tricks are the best – don't get bitten!

Chikengunya

Transmitted by mosquitoes, this has very similar symptoms to Dengue Fever and Malaria, and is found in all the same spots.

There is no treatment for it and no vaccine to prevent it, so preventing bites is really important.

There are currently serious outbreaks in Brazil, and in Asia (Vietnam, Philippines)

Ebola

This is a nasty one, often deadly, and **causes lasting damage**. They don't really know where it comes from but it possibly started with monkeys and apes and was passed onto us human folk.

It is spread through direct contact with all the gory stuff that comes out of sick people.

Where?

Guinea had a major outbreak in 2021, but cases have fallen again. The US previously restricted travelers from here, and from the DRC, only allowing entry through 6 specific airports.

In 2020, the DRC (formerly Zaire) had a major outbreak.

It is most common in African countries, particularly the central African countries, and along the north west coast.

How to prevent it

It is spread through bodily fluids so avoiding contact with these is important. You also should avoid contact with animals that live in Ebola regions. Bats, primates, forest antelope all carry stains of the virus. **So don't eat them.**

There is a vaccine but it is only used in areas where an outbreak is occurring. There is medicine for treating it, and the do help survival rates. You also need medication to support blood pressure, to manage the fever etc, so this really is a serious disease which you do not want to catch

The symptoms

These can appear between **2 and 21 days of infection, usually around the 8 day mark**. The main symptoms are:

- Fever
- Severe aches and pains
- Sore throat
- Loss of appetite
- Gastrointestinal symptoms
- Unexplained hemorrhaging, bleeding and bruising

Yellow Fever

This is **pretty rare nowadays**, but still on to watch out for across Africa and South America. It gets its name from the fact it generally causes jaundice.

Insect repellent works well. It is transmitted by the mosquito (again)

There is also a vaccine. It has been used for 80 years and it pretty well tested, safe and effective, with 1 dose providing life long protection. In fact, many countries require travelers to have had the vaccine if they are entering from a country (or have visited one) where there are high incidences of Yellow Fever.

Meningitis

This is serious – it makes your brain and spinal cord membranes swell up which sounds horrid and painful. It can be **bacterial, viral, parasitic, fungal, amebic**... so there are a bunch of different sorts all with varying degrees of nastiness.

Good news though, there is treatment for most, and vaccines. You have likely had some already, it is another one that flight crew are often vaccinated for because this can be caught from all over the place. Bacterial in particular can be in food.

General travel recommendations

The CDC has good guidance for flight crew which you can read [here](#).

Many international airlines require their crew to have the following vaccinations, and they are often recommended in general for any traveller:

Cholera – Africa, Asia, Central America and the Caribbean

Diphtheria – Africa, south Asia, former Soviet Union. This protects you against Diphtheria, polio and tetanus

Hepatitis A – Africa, Asia, Middle East, Central and South America. This is common in places with poor sanitation and hygiene and can be picked up a lot of ways.

Hepatitis B – Africa, Asia, Middle East, Central and South America. This is spread by bodily contact generally.

Japanese Encephalitis – Common in rural areas of Asia with a tropical climate, after the rain season. It is also found in western Pacific island and near Pakistan, China and Australia. Actually, it is rarely found in Japan because they did a mass immunization program years ago. There is a tick borne version too. Also with a vaccine available.

Typhoid – the Indian sub continent, south and south east Asia, South and Central America, Middle East

US no longer limiting international arrivals to 15 airports

David Mumford

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From September 14, the US **is no longer limiting international arrivals from higher risk countries to specific airports**. Under previous rules, any passenger from China, Iran, the Schengen area of Europe, the UK, Ireland and Brazil had to enter the United States through one of **fifteen centralised airports** capable of providing enhanced health screening. **This is no longer be the case.**

The previous system was deemed ineffective because so many people who transmit the disease don't show symptoms. A new approach is being launched, which authorities say will better mitigate the risk of Coronavirus by focusing more on the individual passenger. **Here's how it will work:**

- Pre-departure, in-flight and post-arrival health education for passengers.
- Robust illness response at airports.
- Voluntary collection of contact information from passengers using electronic means as proposed by some airlines to avoid long lines, crowding and delays associated with manual

data collection.

- Potential testing to reduce the risk of travel-related transmission of the virus that causes COVID-19 and movement of the virus from one location to another.
- Country-specific risk assessments to assist passengers in making informed decisions about travel-related risk.
- Enhancing training and education of partners in the transportation sector and at U.S. ports of entry to ensure recognition of illness and immediate notification to CDC.
- Post-arrival passenger recommendations for self-monitoring and precautions to protect others, with enhanced precautions, including staying home to the extent possible for 14 days for people arriving from high-risk destinations.

You can read the announcement by the Centers for Disease Control and Prevention [here](#), and confirmation from US CBP [here](#).

Although the 15-airports rule has gone away, all other US rules on inbound travel remain in place. The main one is this – **with specific exemptions, foreign nationals are not allowed to enter the US if they have been in any of the following countries within the past 14 days: the European Schengen area, the UK and Ireland, mainland China, Iran, and Brazil.** The ‘specific exemptions’ part basically means this: US residents and family members, and flight crew traveling to the United States on C, D or C1/D visas. For more details, check the US Government webpage [here](#).