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I. Environmental sanitation measures

1. Fundamental principles

In accordance with Article 7 of Special Regulation No. 10 concerning General Services, the Japan Association for the 2005 World Exposition (hereinafter referred to as “the Organizer”) has charge of environmental sanitation control at the 2005 World Exposition site (hereinafter referred to as “the Site”) and the Organizer’s facilities, with the objective of keeping clean and comfortable the environment therein, under the Law for Maintenance of Sanitation in Buildings (the law concerning air quality, water supply and drainage, cleaning and extermination of harmful organisms, including rodents and unsanitary insects) and the Water Works Law.

Official participants (hereinafter referred to as “Participants”), as well as the Organizer, are required to be in charge of environmental sanitation control in their allocated spaces and facilities. Regarding Food sanitation in the Site, Participants should refer to “GL10-1 Food Sanitation in the EXPO 2005 AICHI, JAPAN Venue” and for Environmental sanitation in the buildings, please refer to “GL10-2 Guidelines for Environmental Sanitation Management of Buildings”.

To prevent infectious diseases and keep agreeable the environment in the aforementioned places, the Organizer will carry out large-scale activities to control harmful organisms, including rodents and unsanitary insects (once prior to the Expo period and twice during the Expo period). Participants are also required to conduct such activities at the same time as the Organizer. Schedules for large-scale harmful organism control activities will be advised separately.

2. Responsibilities relating to environmental sanitation control

	Participants’ Responsibilities	Organizer’s Responsibilities
Maintenance of sanitation in buildings	○ Pavilions* and other structures and equipment constructed by Participants	○ Facilities and structures and equipment other than those mentioned in the column at left
Locations requiring prevention and extermination of rodents and unsanitary insects	○ Allocated spaces and facilities	○ Spaces and facilities other than those mentioned in the column at left
Costs borne by:	○ Participants	○ Organizer
Rodent/unsanitary insect control activities	○ Conduct regular inspections, and if harmful organisms including rodents and unsanitary insects are detected, carry out extermination thereof. ○ Large-scale control activities	○ Regular inspections ○ Control activities in priority areas ○ Monitoring etc. ○ Large-scale control activities

*Among preventive measures against sick building syndrome, the Building Standard Law was revised by the Ministry of Land, Infrastructure and Transport; the revised law became effective July 1, 2003. Participants must take extra care in selecting interior materials for use in their Pavilions, and provide appropriate ventilation systems.

3. How to prevent and exterminate rodents and unsanitary insects

(1) Regular inspections

- 1) Participants must inspect their allocated spaces and facilities for harmful organisms, including rodents and unsanitary insects, prevent the proliferation of such organisms and exterminate them.
- 2) The Organizer will set up a permanent surveillance team to daily inspect spaces and facilities other than those mentioned in the preceding clause for harmful organisms, including rodents and unsanitary insects, prevent the proliferation of such organisms and control them.

(2) Large-scale harmful-organism control activities

- 1) Simultaneous large-scale control activities
To ensure efficient and effective control over harmful organisms, including rodents and unsanitary insects, Participants must conduct harmful organism control activities, as a rule at the same time as the Organizer. With consideration given to the environment, extermination agents will be applied within buildings, in principle.
- 2) Schedules for harmful organism control activities
Prior to the Expo period (once) : in mid-March
During the Expo period (twice): in mid-May, in mid-July

4. Delegation of harmful organism control activities

The Organizer will select and use eco-friendly chemicals in its large-scale control activities. Participants, in delegating control activities to agents, are also required to consider the environmental load of chemicals used.

[For reference]

Standard rates in delegating large-scale control activities to an agent to which the Organizer delegates its responsibilities for conducting control activities (undecided)

· Interior of exhibition pavilion, excluding drinking/eating facilities (kitchens) and restrooms

: 55 yen/m²

· Drinking/eating facilities (kitchens) and restrooms

: 80 yen/m²

II. Measures against infectious diseases

In recent years, emerging infectious diseases (including severe acute respiratory syndrome (SARS) and Ebola hemorrhagic fever), reemerging infectious diseases (including plague and tuberculosis) and animal-origin infectious diseases (including West Nile fever and highly pathogenic avian influenza) have occurred and spread around the world, and the development of international exchange has promoted and accelerated the movement of people and products. Under these circumstances, stronger measures are needed against the aforementioned infectious diseases. In consideration of this, appropriate measures should be taken to prevent infectious diseases from occurring, and to address them should they occur, at the 2005 World Exposition, Aichi, Japan, (hereinafter referred to as “the Exhibition”).

The Organizer will take a comprehensive package of preventive measures against infectious diseases, including food and environmental sanitation control measures. In the event of infection occurrence, the Organizer will ask Participants’ cooperation in taking prompt and accurate action to prevent the spread of infection(s), from the viewpoint of crisis management.

1. Categorization of infectious diseases

Under the Law concerning the Prevention of Infectious Diseases and Medical Care for Patients of Infectious Diseases (hereinafter referred to as “the Infectious Diseases Control Law”) (Law No. 114, October 2, 1998), from a comprehensive perspective based on infectious capacity and gravity in case of infection, infectious diseases are categorized into seven types (Types I, II, III, IV and V, Designated and New Infectious Diseases). Measures to be taken are specified depending on type of disease.

List of Diseases as Prescribed in the Infectious Diseases Control Law (Appendix 1)

Major Countermeasures Depending on Infection Type, under the Infectious Diseases Control Law (Appendix 2)

2. Preventive measures against infections at the Site

(1) Food sanitation management

To prevent infectious diseases caused by eating and drinking, actions listed below must be taken without fail. As part of food sanitation control measures, Participants dealing with food at the Exposition must be sure to take these actions.

- 1) Hygienic management of raw and processed materials
- 2) Adequate application of heat to food (application of heat for over one minute until temperature at center of food reaches 75°C or higher)
- 3) Prevention of secondary pollution
- 4) Temperature control of food
- 5) Supervision over worker hygiene
- 6) Hygienic management of facilities

(2) Environmental sanitation management

To prevent infectious diseases caused by drinking water and other environmental facilities, actions listed below must be taken. As part of building environment sanitation control measures, Participants are required to take these actions in their facilities without fail.

- 1) Hygienic management of drinking water
- 2) Management of water for miscellaneous use
- 3) Management of air-conditioning equipment
- 4) Cleaning, management of waste disposal
- 5) Restroom management

Restrooms must be thoroughly cleaned and periodically disinfected to prevent secondary pollution through fecal matter.

(3) Harmful organisms, including rodents and unsanitary insects

In spaces and facilities under their control, Participants must prevent and exterminate harmful organisms acting as intermediate hosts, including rodents and unsanitary insects (by conducting regular inspections and large-scale control activities). For details, see “I. Environmental sanitation measures.”

(4) Health care

Participants must pay sufficient attention to the health care of those engaged in activities relating to Participants’ exhibition and commercial business, under Articles 10 and 11 of Special Regulation No. 10 concerning General Services, and give notice to the Organizer promptly if they come to know of the occurrence of Types I, II, III, IV and V infectious diseases, as prescribed under the Infectious Diseases Control Law, or suspected cases of such diseases.

(5) Regulations with regard to bringing animals into the Site

With the objective of preventing infections of animal origin, Participants must give advance notice to the Organizer if they wish to bring animal(s) into the Site. From the perspective of protection against infections, the Organizer will consult with a related organization (“Food and Environment Monitoring Center,” which will be set up at the Site by the Aichi Prefectural government) regarding individual cases. Participants must follow the instructions issued following such consultation.

Note that the Infectious Diseases Control Law bans imports of the following animals (designated animals).

monkey, prairie dog, ferret badger, bat, raccoon dog, masked palm civet and mastomys

3. Measures to be taken in the event of infection occurrence

The Infectious Diseases Control Law prescribes measures to be taken in the event of infection occurrence, depending on the type of infection. A related organization (“Food and Environment Monitoring Center,” which will be set up at the Site by the Aichi Prefectural government) will give orders and instructions with the aim of preventing the spread of infection. After consultation with the related organization, the Organizer will decide on necessary measures to respond to the infections that have occurred. When necessary, Participants must take action in their allocated spaces and facilities, under the instructions given.

List of Diseases as Prescribed in the Infectious Diseases Control Law

Appendix 1

Type I Infectious Diseases	(1) Ebola hemorrhagic fever (2) Crimean-Congo hemorrhagic fever (3) Severe acute respiratory syndrome (SARS) (coronavirus-caused SARS only)	(4) Smallpox (5) Plague (6) Marburg disease (7) Lassa fever
Type II Infectious Diseases	(1) Acute poliomyelitis (2) Cholera (3) Shigellosis	(4) Diphtheria (5) Typhoid fever (6) Paratyphoid fever
Type III Infectious Diseases	(1) Enterohemorrhagic Escherichia coli infection	
Type IV Infectious Diseases	(1) Hepatitis E (2) West Nile fever (3) Hepatitis A (4) Echinococcosis (5) Yellow fever (6) Psittacosis (7) Relapsing fever (8) Q fever (9) Rabies (10) Highly pathogenic avian influenza (11) Coccidioidomycosis (12) Monkeypox (13) Hemorrhagic fever with renal syndrome (14) Anthrax (15) Scrub typhus (Tsutsugamushi disease) (16) Dengue fever (17) Nypah virus infection (18) Japanese spotted fever (19) Japanese encephalitis (20) Hantavirus pulmonary syndrome (21) Herpes B virus infection (22) Brucellosis (23) Epidemic typhus (24) Botulism (25) Malaria (26) Tularemia (27) Lyme disease (28) Lyssavirus infection (29) Legionellosis (30) Leptospirosis	

Type V Infectious Diseases (required notifying all the cases)	<ul style="list-style-type: none"> <u>(1) Amebiasis</u> <u>(2) Viral hepatitis (excluding hepatitis A and E)</u> <u>(3) Acute encephalitis (excluding Japanese encephalitis and West Nile encephalitis)</u> <u>(4) Cryptosporidiosis</u> <u>(5) Creutzfeldt-Jakob disease</u> <u>(6) Severe invasive streptococcal infections</u> <u>(7) Acquired immunodeficiency syndrome</u> <u>(8) Giardiasis</u> <u>(9) Meningococcal meningitis</u> <u>(10) Congenital rubella syndrome</u> <u>(11) Syphilis</u> <u>(12) Tetanus</u> <u>(13) Vancomycin-resistant Enterococcus infection</u> <u>(14) Vancomycin-resistant Staphylococcus aureus infection</u> <u>(15) Respiratory syncytial virus infection</u> <u>(16) Pharyngoconjunctival fever</u> <u>(17) Group A streptococcal pharyngitis</u> <u>(18) Infectious gastroenteritis</u> <u>(19) Chickenpox</u> <u>(20) Hand, foot and mouth disease</u> <u>(21) Erythema infectiosum</u> <u>(22) Exanthema subitum</u> <u>(23) Pertussis</u> <u>(24) Rubella</u> <u>(25) Herpangina</u> <u>(26) Measles (excluding adult)</u> <u>(27) Mumps</u> <u>(28) Influenza (excluding highly pathogenic avian influenza)</u> <u>(29) Acute hemorrhagic conjunctivitis</u> <u>(30) Epidemic keratoconjunctivitis</u> <u>(31) Genital chlamydial infection</u> <u>(32) Genital herpes virus infection</u> <u>(33) Condyloma acuminatum</u> <u>(34) Gonococcal infection</u> <u>(35) Chlamydial pneumonia (excluding psittacosis)</u> <u>(36) Bacterial meningitis</u> <u>(37) Penicillin-resistant Streptococcus pneumoniae infection</u> <u>(38) Mycoplasmal pneumonia</u> <u>(39) Measls in adults</u> <u>(40) Aseptic meningitis</u> <u>(41) Methicillin-resistant Staphylococcus aureus infection</u> <u>(42) Drug-resistant Pseudomonas aeruginosa infection</u>
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	Type I Infectious Diseases	Type II Infectious Diseases	Type III Infectious Diseases	Type IV Infectious Diseases	Type V Infectious Diseases
Diseases to be included in each type are prescribed by:	Law	Law	Law	Government ordinance	Ministerial ordinance
Application to suspected cases			×	×	×
Application to pathogen-infected and asymptomatic cases		×	×	×	×
Active implementation of epidemiological surveys					
Notification by doctors	(Promptly after diagnosis)	(Promptly after diagnosis)	(Promptly after diagnosis)	(Promptly after diagnosis)	(Within 7 days after diagnosis)
Notification by veterinarians					×
Recommendation for checkups, implementation of checkups				×	×
Restriction on working				×	×
Recommendation for hospitalization; hospitalization, transfer			×	×	×
Disinfection of contaminated sites					×
Extermination of rodents, insects etc.					×
Disposal of contaminated articles					×
Restriction on transfer of dead bodies				×	×
Restriction on use of domestic water				×	×
Restriction/ban on access to buildings		×	×	×	×
Travel restriction		×	×	×	×
Import embargo on/import inspection of animals					×

III. Emergency medical facilities

1. Introduction

In this section “Emergency medical facilities,” the Organizer gives information Participants need in advance regarding medical services provided to general visitors.

2. Medical facilities prepared by the Organizer

Within the Nagakute area of the Exposition (hereinafter referred to as “the Nagakute area”), two clinics and four first-aid stations will be set up; within the Seto area of the Exposition (hereinafter referred to as “the Seto area”), one clinic and one first-aid station will be set up. Locations of these medical facilities are shown in Attachment 1.

Clinics provide mainly emergency treatment; first-aid stations provide first-aid treatment or temporary alleviation of symptoms for only minor illness/injury. Both also offer a place to rest for a while.

Note that these facilities are intended for general visitors, not for Participants or their staff members.

However, in case of emergency, this principle will not apply.

Individual Participants are required to keep first-aid kits for their own staff. Those who have chronic illness requiring use of special drugs must keep such drugs for themselves.

3. Size of medical staff, office hours

- (1) The medical staff in the Site will comprise 59 persons: 5 doctors and 12 nurses, stationed at 3 clinics, 20 nurses stationed at 5 first-aid stations and 22 other medical staff members.
- (2) North Gate Clinic, the main clinic at the Site, and all five first-aid stations are scheduled to be open during the exhibition hours of individual sites every day; West Gate Clinic and Seto Area Clinic are scheduled to close at 6:00 p.m.

4. Transfer of patients

Since all medical facilities at the Site are intended mainly for first-aid treatment, serious cases will be transferred to designated emergency hospitals by high-standard emergency vehicle under the control of fire departments at the Site, accompanied by emergency medical technicians. However, cases will not be transferred to medical facilities outside the Site when doctors/emergency crews determine that there is no need to do so.

Fees will be charged for treatment given at medical facilities outside the Site.

5. Medical facilities near the Site

The list of medical facilities located near the Site/Participants' and their staff members' lodgings, and that offer medical services in foreign languages, will be prepared in cooperation with related organizations, and provided to Participants.

6. Expenses for medical care

General visitors will not be charged for medical services they receive at medical facilities within the Site; however, in the event of transfer to medical institutions etc. outside the Site, the full expenses incurred will be borne by patients (part of such expenses can be covered by health insurance, if applicable). As a rule, Participants/their staff members are expected to receive medical treatment outside the Site; the full expenses for medical care will be borne by themselves (part of such expenses can be covered by health insurance, if applicable).

7. Medical institutions in Japan

- Those receiving treatment at medical institutions in Japan must pay the full expenses for the treatment in cash in situ, if they do not have any of various types of Japanese health insurance (hereinafter referred to as "Insurance"). (Even if treated under Insurance, 30% of the expenses will be borne by patients.)
- For instance, when receiving outpatient treatment for a cold, generally the expense will be about 10,000 yen, though this varies depending on the type of treatment received and drugs administered. When hospitalization is needed, considerable expense is required.
It is recommended that individuals take out overseas travel life insurance etc. that can reimburse them for expenses for medical treatment received, before entering Japan.

IV. Setup of smoking areas

1. Introduction

Japan has various laws and regulations on smoking, which must be obeyed at the Site as well.

Participants hoping to prepare smoking areas within their pavilions must thoroughly distinguish between smoking and non-smoking areas, to ensure that odor and smoke from tobacco do not waft to or cause harm to nonsmokers and persons underage.

It is recommended that Participants planning to set up smoking areas within their pavilions ask the Organizer's advice in advance.

2. Rules about smoking for visitors

(1) Basic principle

Smoking will be banned at the Site, except for smoking areas designated by the Organizer.

(2) Indoor smoking areas

To prevent passive smoking, indoor smoking areas must be completely separated from other areas and have adequate smoke collection and ventilation systems.

(3) Outdoor smoking areas

Smoking will be banned everywhere at the Site, except for designated smoking areas, in consideration of visitor health and safety.

- * Smoking while walking will be banned.

- * Smoking will be totally banned on the Global Loop, from the viewpoint of disaster prevention.

Smoking area locations are shown in Attachment 2.

3. Rules on smoking for staff members

(1) Staff members clad in uniform will not be allowed to smoke at smoking areas for visitors.

(2) Staff members will not be allowed to smoke anywhere other than designated Staff member smoking areas.

(3) Smoking areas for Staff members must be out of visitors' sight.

4. Relevant laws and regulations

(1) Health Promotion Law (extract)

- * Measures against passive smoking

- * Reports from the Investigative Commission on Establishment of Evaluation Criteria for Effect of Separation of Smoking Areas

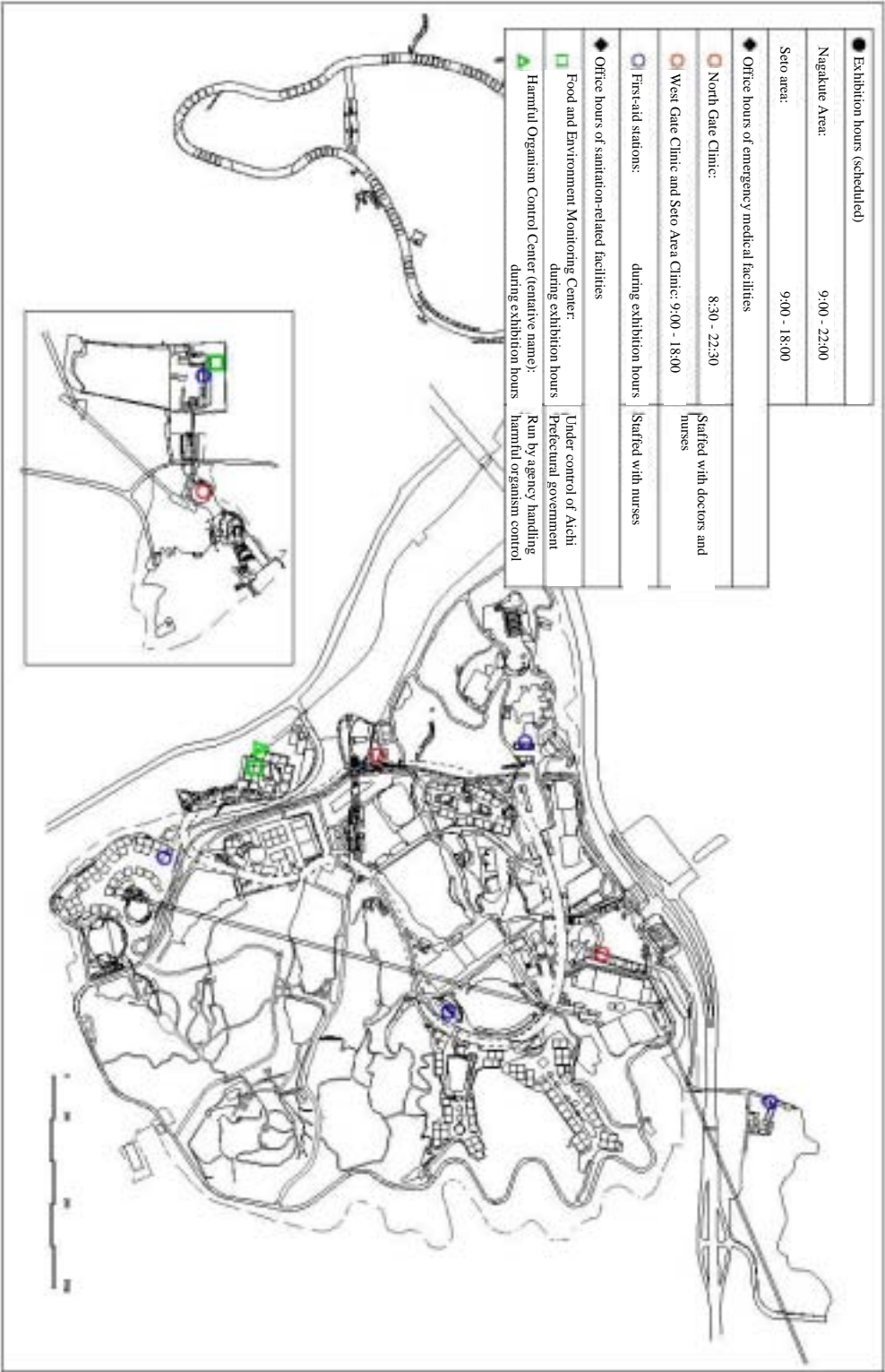
- * Establishment of new guidelines for smoking in workplace

(2) Approval Guidelines for Removal of Ban on Use of Open Flame and Other Prohibited Acts (extract)

- * Documents abovementioned are available from the Organizer.

Attachment 1

Map of Planned Medical/Sanitation-related Facilities



Attachment 2

