INTERIM GUIDELINES ON THE MANAGEMENT OF HUMAN REMAINS FOR PATIENT UNDER INVESTIGATION (PUI) AND CONFIRMED CORONAVIRUS DISEASE 2019 (COVID-19) CASES

Memorandum Circular No. 2020-063

27 MAR 2020

1. Background

1.1. The World Health Organization declared on 11 March 2020 that the COVID-19 outbreak can now be described as a global pandemic;

1.2. Following this declaration, on 12 March 2020, the Office of the President announced the raising of the COVID-19 Alert System to Code Red Sublevel 2, and approved the imposition of Stringent Social Distancing Measures in the National Capital Region effective 15 March 2020, and lasting for 30 days;

1.3. On 16 March 2020, the Office of the President also released a Memorandum on the Enhanced Community Quarantine and Stringent Social Distancing measures over Luzon to address the threat of COVID-19, effective 12:00 in the morning of 17 March 2020 until 12:00 in the morning of 13 April 2020. This issuance shall impose strict home quarantine in all households; suspension of mass transportation, work and classes; regulation on the provision of food and essential health services; and the presence of uniformed personnel to enforce quarantine procedures will be heightened, especially in Metro Manila;

1.4. On 17 March 2020, 6:00 p.m., President Rodrigo R. Duterte issued Proclamation No. 929 series of 2020 placing the entire Philippines under State of Calamity for six (6) months unless earlier lifted or extended as the circumstances may warrant;

1.5. On March 18, 2020, the NDRRMC has activated its Response Cluster to include the Management of the Dead and Missing;

1.6. As of March 24, 2020, the Department of Health has recorded a total of 606 Patient Under Investigation, 462 confirmed COVID-19 cases, 6,321 Person Under Monitoring, and 35 deaths;

1.7. In view of the above, this Memorandum Circular shall provide the Interim Guidelines on the Management of Human Remains of those confirmed to have been infected with COVID-19 and those PUI who succumbed without confirmation of infection of said virus.

2. Purpose

2.1. This Circular is issued to provide a standard process on properly managing human remains of Patient Under Investigation (PUI) and confirmed COVID-19 Cases.
3. **Scope and Coverage**

3.1. All Provincial Governors, City and Municipal Mayors, DILG Regional Directors and Field Officers, BARMM Minister of Local Government, Philippine National Police, Bureau of Fire Protection, and all others concerned.

4. **General Guidelines:**

4.1. In handling the remains of confirmed COVID-19 cases and PUIs, universal, standard and transmission-based precautions and DOH-recommended guidelines and procedures must be strictly observed to avoid further spread of the disease;

4.2. The maintenance of peace and order, the protection of life, liberty, and property, and promotion of the general welfare are essential for the enjoyment by all the people of the blessings of democracy;

4.3. Every local government unit (LGU) shall exercise its powers which are essential for the promotion of the general welfare. Within their respective territorial jurisdiction, every LGU shall ensure, support and promote the health and safety of its inhabitants;

4.4. The identity and other personal details of the deceased shall be respected at all times and remain confidential, unless otherwise provided by law;

4.5. The remains of persons who died of dangerous communicable diseases are potentially infectious and standard precautions should be implemented for every case;

4.6. LGUs shall designate and commission reputable funeral parlors and crematoriums to handle the remains of confirmed COVID-19 cases and PUIs, and provide possible financial assistance to cover the logistics, fuel, salary and other expenses that will be incurred in the process which include transfer/transport of human remains;

4.7. LGUs shall monitor and penalize funeral parlors and crematoriums that refuse to provide logistics and transport of COVID-19 or PUI remains, including but not limited to, refusal to pick-up the remains subject to the policies and guidelines of the aforementioned LGUs;

4.8. The LGU may release issuances or ordinances to put a price cap or impose a price freeze on funeral services located within their jurisdiction;

4.9. Funeral services staff and personnel are granted exemptions from the imposed enhanced community quarantine. The said individuals may freely move and travel to ensure that the remains of deceased individuals will be given proper funeral services;

4.10. LGUs are enjoined to ensure funeral companies are to provide transportation and/or housing accommodations for funeral service staff;

4.11. All personnel handling the dead body/body parts are required to wear the appropriate PPEs while performing their tasks. All PPEs shall be properly disposed of, preferably burned for disposable and properly disinfected for non-disposable, after its use;

4.12. Transmission of infectious diseases associated with management of dead bodies can occur and can be aggravated by non-compliance to universal, standard and transmission-based precautions, especially in healthcare settings;
4.13. Assess the risk prior to the mortuary care process, and provide adequate explanation to the family;
4.14. Manage each situation on a case-by-case basis, balancing the rights of the family with the risk of exposure to infection;
4.15. Burial, preferably cremation, shall be done within 12 hours after death. However, cremation or burial of human remains, to the most possible extent, shall be in accordance with the deceased person’s wish, decision of those who have the duty to make funeral/burial arrangements, and religious and culturally-acceptable norms of the deceased;
4.16. Deaths of foreign nationals shall be immediately reported to the DOH-Bureau of International Health Cooperation (BIHC). The BIHC shall inform the Department of Foreign Affairs (DFA), which shall thereafter notify the concerned embassy;
4.17. Information regarding crematoriums and mortuaries contracted for cremation or burial of human remains shall be kept confidential;
4.18. Shipment of human remains or cremains of foreign nationals and locals shall strictly adhere to the guidelines of the Bureau of Quarantine;
4.19. PNP Crime Laboratory and/or the National Bureau of Investigation shall provide technical assistance on the orientation of funeral workers about universal, standard and transmission-based precautions;
4.20. No LGU shall prohibit the cremation or burial of in a burial ground or memorial park located in his/her area of jurisdiction;
4.21. All healthcare facilities shall not hamper the release of the human remains of the deceased, even if it is due to non-payment of hospital bills.
4.22. Special considerations should be given in respect to various religious and cultural practices. LGUs with identified Muslim Cemetery shall not restrict a Muslim who died as a PUI or a confirmed COVID-19 case, as long as the processing and handling of the human remains be in accordance to the universal, standard and transmission-based precautions set by this Circular;
4.23. The human remains of a Muslim foreign national who died as a PUI or a confirmed COVID-19 case in the country shall be given decent burial in the nearest cemetery following the appropriate Islamic burial rites, ensuring that the processing and handling shall be in accordance to universal and standard precaution;
4.24. In the case of non-Muslim foreign nationals with death as a PUI or a confirmed COVID-19 case in the Country, the human remains shall be cremated, following the requirements of the Code of Sanitation of the Philippines, and also ensuring that the processing and handling shall be in accordance to universal and standard precaution;
4.25. Per PAHO and WHO, human remains with confirmed COVID-19 cases can be buried and cremated, the same shall apply with persons with PUIs; and
4.26. The inherent dignity of the dead shall be observed at all times.

5. Specific Provisions:

5.1. General precautionary measures for all, but not limited to health care workers, responders, retrieval teams, funeral and mortuary staff, relatives who are likely to come into contact with the PUI or confirmed COVID-19 human remains:
5.1.1. **Vaccination**

5.1.1.1. All staff, workers and responders are preferred to have Pneumococcal, Influenza, Hepatitis-B and Tetanus Toxoid or any other proper type of vaccination prior to contact;

5.1.2. **Personal Hygienic Measures and Protective Equipment**

5.1.2.1. All staff should be trained in universal, standard and transmission-based precautions. A high standard of personal hygiene should be adopted;

5.1.2.2. When handling dead bodies:

5.1.2.2.1. Avoid direct contact with blood or body fluids from the dead body;

5.1.2.2.2. Put on personal protective equipment (PPE) including double gloves, water resistant gown/plastic apron over water repellent gown, and surgical mask. Use face shield or goggles to protect eyes, as there may be splashes; shoe covers/boots;

5.1.2.3. Make sure any wounds, cuts and abrasions, are covered with waterproof bandages or dressings;

5.1.2.4. Do NOT smoke, drink or eat. Do NOT touch your face (eyes, mouth or nose);

5.1.2.5. Observe strict personal hygiene. Hand hygiene could be achieved by washing hands with liquid soap and water or proper use of alcohol-based hand rub;

5.1.2.6. Avoid injury/ies (e.g. result of using sharp equipment in a fast-paced, stressful, and potentially understaffed environment), both in the course of examination of dead body and afterwards in dealing with waste disposal and decontamination;

5.1.2.7. Observe proper removal protocols when removing personal protective equipment after the handling of the dead body. Then, wash hands with liquid soap and water immediately.

5.1.3. **Accidental Exposure to Blood or Body Fluids**

5.1.3.1. In case of percutaneous injury or mucocutaneous exposure to blood or body fluids of the dead body, the injured or exposed areas should be washed with copious amount of clean water with soap;

5.1.3.2. All incidents of percutaneous or mucocutaneous exposure should be reported to the supervisor. The injured person should immediately seek medical advice for proper wound care and post-exposure management.

5.1.4. **Health Care Waste Management**

5.1.4.1. The definition of health care waste and its management has been set out in the DOH Health Care Waste Management Manual;

5.1.4.2. Items classified as infectious waste must be handled and disposed of properly according to the legal requirements;

5.1.5. **Environmental Control**

5.1.5.1. Standard decontamination solution for infectious diseases:

5.1.5.1.1. Hypochlorite solution 5000 ppm or 2 in 18 diluted household bleach (mixing 2 part bleach with 18 parts water);
5.1.5.2. All surfaces which may be contaminated should be decontaminated with the standard decontamination solution, leave it for 15-30 minutes, and then rinse with water. Metal surfaces could be wiped with 70% ethyl alcohol.

5.1.5.3. Surfaces visibly contaminated with blood and body fluids should be decontaminated with the standard decontamination solution, leave it for 10 minutes, and then rinse with water.

5.1.5.4. Bleach solution should be freshly diluted.

5.2. Packaging, Removal and Transportation of Human Remains (PUIs and/or COVID-19 Positive)

5.2.1. From Referral Facility/Hospital for COVID-19 Positive

5.2.1.1. The hospital health workers shall process the human remains and provide appropriate post-mortem care;

5.2.1.2. Referral Facility/Hospital may use their standard management of dead bodies however, the following must be observed:

5.2.1.2.1. Ensure that mortuary staff apply universal precautions at all times (i.e., perform hand hygiene, environmental cleaning) including appropriate use of PPE; long sleeved gown, gloves and facial protection, if there is a risk of splashes from the patient's body fluids or secretions onto the body or face of the staff member;

5.2.1.2.2. All attached apparatuses such as tubes, drains, catheters on the human remains should be removed with EXTREME CAUTION and disposed of safely;

5.2.1.2.3. Oral, nasal and rectal orifices of the human remains have to be plugged to prevent leakage of body fluids;

5.2.1.2.4. Wrap the body with cloth or robust and leak-proof transparent plastic bag, and place in the airtight cadaver bag that is leak-proof and shall be zipped or closed tightly with tapes and bandage strips with proper labelling/tagging;

5.2.1.2.5. The outside or surface of the cadaver bag should be decontaminated with hypochlorite solution the standard decontamination solution or any hospital approved disinfectant and allowed to air dry before handover;

5.2.1.2.6. Ensure that the human remains is fully sealed in an impermeable cadaver bag before being removed from the isolation room or area, and before transfer to the pathology department or the mortuary, to avoid leakage of body fluids;

5.2.1.2.7. Attach the biohazard tag (SUSPECTED or POSITIVE COVID-19-HANDLE WITH CARE) to the cadaver bag before transporting the human remains to the pathology department or the mortuary;

5.2.1.2.8. When properly packed, the body can be safely removed from storage in the mortuary;

5.2.1.2.9. At NO INSTANCE shall unzipping the cadaver bag of the body and removal of the body be permitted;
5.2.1.3. Keep both handling and movement of the body at minimum to reduce risk of expulsion of airborne pathogen;

5.2.1.4. The concerned city/municipal LGU shall provide proper transport. Otherwise, the LGU or the next of kin can secure the services of a funeral establishment which will transport the human remains to the burial site/crematorium. The Provincial LGU shall also provide assistance to its component city/municipality, as needed. The vehicle shall be disinfected immediately after the human remains have been removed.

5.2.2. From Home Quarantine for PUIs or symptomatic person who died similar with COVID-19

5.2.2.1. The Management of the Dead and Missing Person (MDM) Team, composed of but not limited to City/Municipal Local Government Operations Officer (C/MLGOO), Local Civil Registrar (LCR), Local Health Officer (LHO), Local Social Welfare and Development Officer (LSWDO), General Services Officer (GSO), Local PNP, Local BFP, Local Engineering Officer (LEO), Local Disaster Risk Reduction and Management Officer (LDRRMO), and Punong Barangays, of the city/municipal LGU, together with the reputable funeral parlor, shall manage the proper disposition of the human remains and management of the bereaved family;

5.2.2.2. The Local Chief Executive may add additional members as deemed necessary;

5.2.2.3. The Local PNP shall provide perimeter security;

5.2.2.4. All must wear PPEs before handling the human remains;

5.2.2.5. Prior to handling, disinfect the body by misting with the standard decontamination solution or any disinfectant spray;

5.2.2.6. Wrap the body with cloth or robust and leak-proof transparent plastic bag, and place in the cadaver bag that is leak-proof and shall be zipped or closed tightly with tapes and bandage strips with proper labelling. Attached a biohazard tag (SUSPECTED or POSITIVE COVID-19-HANDLE WITH CARE) in the cadaver bag;

5.2.2.7. The outside or surface of the cadaver bag should be decontaminated by misting with the standard decontamination solution and allow to air dry;

5.2.2.8. Ensure that the human remains is fully sealed in an impermeable cadaver bag before being removed from the isolation room or area, and before transfer to the mortuary, to avoid leakage of body fluids;

5.2.2.9. When properly packed, the body can be safely transported to the funeral establishment or crematorium;

5.2.2.10. At NO INSTANCE shall unzipping the cadaver bag of the body and removal of the body be permitted;

5.2.2.11. The concerned city/municipal LGU shall provide proper transport. Otherwise, the LGU or the next of kin can secure the services of a funeral establishment which will transport the human remains to the burial site/crematorium. The Provincial LGU shall also provide assistance to its component city/municipality, as needed. The vehicle shall be disinfected immediately after the human remains have been removed.
5.2.2.12. The household shall be advised to clean and disinfect the room occupied by the deceased immediately after the body was removed;

5.2.2.13. All soiled linens and fabrics by the deceased shall be properly disposed;

5.3. **Precaution for All Human Remains retrieved**

5.3.1. **Care for Human Remains and Environmental Controls in MORTUARY:**

5.3.1.1. All dead bodies must be identified, documented and correctly labeled with identity labels biohazard tag *(SUSPECTED or POSITIVE COVID-19- HANDLE WITH CARE)* in the cadaver bag;

5.3.1.2. Dead body which is found soiled with blood or body fluids should be placed in a disposable plastic bag instead of linen;

5.3.1.3. Preferably, dead bodies should be stored in cold chambers maintained at approximately 4°C;

5.3.1.4. The mortuary must be kept clean and properly ventilated at all times. Lighting must be adequate. Surfaces and instruments should be made of materials which could be easily disinfected and maintained;

5.3.1.5. Storage compartments for dead bodies should be easily accessible for both regular cleaning and maintenance;

5.3.1.6. All used linen should be disposed of;

5.3.1.7. Items classified as clinical waste must be handled and disposed of properly according to the legal requirements;

5.3.1.8. Environmental surfaces, instruments and transport trolleys should be properly decontaminated;

5.3.1.9. All bodies shall be brought to the preferred mortuary, funeral establishment or crematorium of those who have the duty to make the funeral and burial arrangement of the deceased.

5.3.2. **Care for Human Remains and Environmental Controls in MORTUARY and FUNERAL WORKERS:**

5.3.2.1. When handling dead bodies:

5.3.2.1.1. Avoid direct contact with blood or body fluids from the dead body;

5.3.2.1.2. Observe strict personal hygiene and put on appropriate personal protective equipment (PPE) including gloves, water repellent gown and surgical masks. Use goggles or face shield to protect eyes, if there may be splashes;

5.3.2.1.3. Make sure any wounds are covered with waterproof bandages or dressings;

5.3.2.1.4. Do NOT smoke, drink or eat. Do NOT touch your face (eyes, mouth or nose);

5.3.2.1.5. Observe proper removal protocols when removing personal protective equipment after handling the dead body. Then, wash hands with liquid soap and water immediately;

5.3.2.1.6. Make sure that supply of disposable gloves, protective equipment, alcohol-based hand rub and disinfectant such as household bleach is readily available;
5.3.2.1.7. After use, the disposable items such as gloves and protective clothing should be disposed of in a plastic bag and preferably burned for disposable and properly disinfected for non-disposable, after its use;

5.3.2.1.8. Linen contaminated with blood or body fluids should be disposed of properly;

5.3.2.1.9. All surfaces which may be contaminated should be wiped with the standard decontamination solution, leave it for 15-30 minutes, and then rinse with water. Metal surfaces could be wiped with 70% alcohol;

5.3.2.1.10. Surfaces visibly contaminated with blood and body fluids should be mist with the standard decontamination solution, leave it for 10 minutes, and then rinse with water.

5.4. **Requirements for Burial/Cremation**

5.4.1. The attending physician, Local Health Officer, or Medico-Legal Officer shall:

5.4.1.1. Issue death certificate and state the cause of death of the deceased;

5.4.1.1.1. For death in referral/health facility, the attending physician shall issue the death certificate;

5.4.1.1.2. For death while on Community/Home Quarantine, the Local Health Officer shall issue the death certificate;

5.4.1.2. Report death to the City/Municipal Health Officer within twelve (12) hours after death; and

5.4.1.3. Forward to the concerned Local Civil Registrar within 30 days after death for registration;

5.4.2. **NO BURIAL/CREMATION** shall take place without a validly issued death certificate;

5.5. **Procedure for Burial and Cremation**

5.5.1. Ensure minimal handling of the body:

5.5.1.1. If the person died outside of a health facility, universal, standard and transmission-based precautions shall be applied by the mortuary or funeral establishment;

5.5.1.2. If the person died inside a health facility, tagging shall be done by the local health officer or attending physician and universal, standard and transmission-based precautions shall be applied;

5.5.2. Hygienic preparation, such as cleaning of the body, tidying of hair, trimming of nails, shaving, and embalming of the remains SHALL NOT BE ALLOWED;

5.5.3. Only the adult members of the family of the deceased and other persons whose attendance is absolutely necessary may be permitted to attend the funeral and burial of the human remains;

5.5.4. For those that will be buried:

5.5.4.1. Remains shall be placed in a sealed casket;

5.5.4.2. Remains shall not be taken to any place of public assembly. Viewing of the deceased shall not be permitted;

5.5.4.3. Burial permit from the city/municipality where the deceased will be buried shall be secured by the next of kin;
5.5.4.4. No remains shall be buried within the twenty-five (25) meter radius of any residential area;
5.5.4.5. The grave shall be at least one and one half (1.5) meters deep and filled well and firmly;
5.5.4.6. No remains shall be buried in a grave where water table is less than two (2) meter deep from the natural ground surface;
5.5.4.7. No human remains shall be exhumed within five (5) years from the cadaver’s burial unless otherwise provided by (designated representative of DOH) when in his opinion the exhumation of the remains will not endanger the lives of the people;
5.5.4.8. In every exhumation, the human remains must be done in the presence of the LHO, disinfected and placed in a suitable and hermetically sealed container.

5.5.5. For those that will be cremated:
5.5.5.1. A written consent shall be obtained from those who are authorized to arrange the funeral or burial rite of the deceased, which allows the conduct of this procedure;
5.5.5.2. The staff of the funeral establishment or crematorium shall ensure the identity of the cadaver to be cremated. Also, they shall exercise due diligence to ensure that this procedure shall not be abused by those persons who committed a crime against the person of the deceased and aims to conceal it;
5.5.5.3. Cremains shall be reduced to the size of fine sand or ashes and packed in a cremains container before they are turned over to the relatives of the deceased;
5.5.5.4. Cremains shall be placed in an appropriate container;

5.5.6. Public and private cemeteries or private burial grounds shall be designated for the disposal of human remains/cremains. Where relatives of the deceased so wish, cremains shall be allowed to be brought home only in the prescribed container;

5.6. **Shipment of Human Remains/Cremains outside area of jurisdiction**
3.5.3 The DFA and BIHC shall jointly obtain the Transfer Permit, to be issued by the Bureau of Quarantine (BOQ);
3.5.4 Shipment of cremains abroad shall be governed by existing regulations of the BOQ. Transport to foreign ports shall require a Quarantine Permit from the BOQ before shipment;

5.7. **Recommended precaution for relatives when handling human remains**
5.7.1. All are advised of the following measures for your health protection:
5.7.1.1. Viewing in funeral parlors and hygienic preparations are not allowed.
5.7.1.2. Embalming is NOT ALLOWED.;
5.7.1.3. Direct contact with the human remains is NOT ALLOWED.
5.8. **For Non-COVID-19 related deaths (excluding PUIs)**

5.8.1. All non-COVID-19 related deaths shall be attended to, applying the usual processes of the concerned Local Government Unit.

5.9. **Cost of burial or cremation**

5.9.1. The cost of burial or cremation of a dead person shall be borne by the nearest kin. If the kin is not financially capable of defraying the expenses or if the deceased had no kin, the cost shall be borne by the city or municipal government.

5.10. **Prohibitions**

5.10.1. It shall be unlawful for any person (whether natural or juridical entity) to disclose the personal identity of the deceased who died due to COVID-19 and/or its complications to the general public.

5.10.1.1. However, disclosure of the personal information of the deceased shall be allowed in the following cases:

5.10.1.1.1. A written consent was secured from the deceased while he/she was still alive or from a preferred legitimate and rightful claimant;

5.10.1.1.2. For purposes of conducting the contact tracing; or

5.10.1.1.3. If due to political and/or social status of the deceased, there is a need to disclose his name and health status to the public.

5.10.2. It shall be unlawful for any person to take, capture, upload, or share a photo or video of the last image of the human remains who died due to COVID-19 and/or its complications in any media or social media platform.

5.10.3. It shall be unlawful for any person who shall say or commit an act which aims to blacken or defame the image of those who died due to COVID-19 and/or its complications.

5.10.4. No remains, whether claimed or unclaimed, shall be permitted to be used for scientific or medical purposes and/or medical studies.

5.10.5. No health care facilities and its personnel/s shall withhold the release and burial of the remains of those who died of COVID-19 and its certificate of death.

5.11. **In case of a mass casualty incident, the cadavers that cannot be attended to immediately by the undertaker or any staff of the mortuary, shall be stored in a refrigerated facility within the pathology department or the mortuary.**

6. **DILG Regional Directors and BARMM Minister of Local Government** are hereby directed to cause the immediate and wide-spread dissemination of this Memorandum Circular within their respective jurisdiction.
7. References

7.1. Article 2, Section 5 of the 1987 Philippine Constitution;
7.2. Section 16 of Republic Act Number 7160 or The Local Government Code of 1991;
7.3. Republic Act Number 386 or An Act to Ordain and Institute the Civil Code of the Philippines;
7.4. Republic Act Number 10173 or the Data Privacy Act of 2012;
7.5. Republic Action Number 9439 or An Act Prohibiting the Detention of Patients in Hospitals and Medical Clinics on Grounds of Nonpayment of Hospital Bills or Medical Expenses;
7.6. Republic Act Number 7581 or The Price Act;
7.7. Chapter XXI of Presidential Decree No. 856 or The Code on Sanitation of the Philippines, 1976) and its Implementing Rules and Regulations;
7.8. Act Number 2711 or the Administrative Code of 1917;
7.9. NDRRMC Memorandum Circular No. 19 s. 2016 or the Rules and Regulations Governing the Implementation of the Management of the Dead and Missing Persons;
7.10. DOH Department Memorandum No. 2020-0067 dated February 3, 2020 or the Guidelines on the Disposal and Shipment of the Remains of Confirmed Cases on 2019 Novel Coronavirus Acute Respiratory Disease (2019-nCoV ARD);
7.11. DOH AO No. 2010-0033 or the Revised Implementing Rules and Regulations of PD 856 on the Code of Sanitation of the Philippines Chapter XXI “Disposal of Dead Persons”;
7.12. DOH Health Care Waste Management Manual;
7.13. Pan American Health Organization and World Health Organization Interim Recommendations as of March 18, 2020 on Dead Body Management in the Context of the Novel Coronavirus;
7.14. DA-DTI-DOH Joint Memorandum Circular No. 2020-01 or the Price Freeze Under a State of Calamity throughout the Philippines due to Coronavirus Disease 2019 (COVID-19); and
7.15. Inter-Agency Task Force for the Management of Emerging Infectious Disease Resolution No. 15 s. 2020 dated March 24, 2020.

8. Effectivity

This Memorandum Circular shall take effect immediately.

9. Approving Authority

[Signature]

EDUARDO M. AÑO
Secretary