



HEADQUARTERS  
UNITED STATES FORCES, JAPAN  
APO AREA PACIFIC 96328-5068

FEB 26 2020

MEMORANDUM FOR COMMANDER, MARFORJ  
COMMANDER, U.S. SEVENTH FLEET  
COMMANDER, FIFTH AIR FORCE  
COMMANDER, USARJ  
COMMANDER, CNFJ  
DIRECTOR, DSRJ  
COMMANDER, USCG FEA  
SUPERINTENDENT, DoDEA PACIFIC EAST  
COMMANDERS AND DIRECTORS, DOD ENTITIES IN JAPAN  
ALL SOFA STATUS PERSONNEL IN JAPAN

FROM: COMUSFJ

SUBJECT: Force Public Health Order

1. Reference: COMUSFJ Japan Force Public Health Order, dated 4 Feb 20. This order supersedes the referenced order.
2. The coronavirus disease 2019 (COVID-19 outbreak first detected in Wuhan, China, in December has continued to spread throughout China and the world. The U.S. Center for Disease Control and Prevention (CDC) assesses that the SARS-CoV-2 virus is thought to spread mainly from person-to-person. Transmission is assessed to occur between people who are in close contact with one another (within about 6 feet) or via respiratory droplets produced when an infected person coughs or sneezes which droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs. The CDC assesses, as of 23 Feb 20, that it might be possible that a person can get COVID-19 by touching a surface or object that has the virus on it and then touching their own mouth, nose, or possibly their eyes. This is a rapidly evolving outbreak, with the World Health Organization declaring 2019-nCoV a public health emergency of international concern on 30 Jan 20. On 31 Jan 20, the Secretary of the U.S. Department of Health and Human Services (HHS) declared a public health emergency for the United States. According to the CDC, "The potential public health threat posed by COVID-19 is high, both globally and to the United States."
3. As the U.S. Armed Forces in Japan, we inherently work in close quarters, and our personnel are the primary resource for performance of our treaty obligations. Focused on minimizing risk to mission and risk to force health and in fulfillment of my responsibilities as the commander who has TACON for force health protection, I direct the following measures. **Violations by military personnel are subject to punishment under Article 92, UCMJ as violations of a lawful general order.** Failures to comply with this order by U.S. civilian employees may result in disciplinary administrative action and/or a determination that the employee has failed to adjust to the overseas environment. Violations by dependents may result in administrative sanctions, up to and including loss of command sponsorship and an early return of dependents:

a. All units will move to Health Protection Condition Bravo (HPCON B) (heightened exposure risk). Units are required to report through Service channels to the USFJ JOC when HPCON B has been attained. All units are required to take the following actions under HPCON B:

(1) Consider limiting or canceling meetings, training events, formations, large social gatherings, etc.

(2) Continue to monitor conditions in areas near U.S. bases and stations. This may require coordination with local health officials.

(3) Coordinate with USFJ to establish area restrictions and limitations on travel due to health concerns.

(4) Monitor Class VIII required to support medical care and quarantine.

(5) Place bulk order for masks, gloves, eye protection, alcohol, hand gel, sanitation wipes for area decontamination, bleach, towels, etc.

(6) Request support from DHA/Services for additional medical personnel within the medical facility, especially nursing staff and critical care support as required.

(7) Plan for establishment of non-medical patient isolation and care facilities.

(8) Encourage strict hygiene measures, including handwashing, wiping down common surface areas each shift, no handshaking, etc.

(9) Consider implementing screening at installation points of entry (i.e., installation gates, ports, PAX terminals, etc.) as applicable.

b. If you have active duty personnel, members of the civilian component, or dependents on temporary duty (TDY) or leave in the People's Republic of China (PRC), ensure they return as soon as possible, as is required by Commander, U.S. Indo-Pacific Command. Commands shall screen the TDY or leave status of all personnel to ensure awareness of those who may be/have been in the PRC. All contractor personnel on TDY or leave in the PRC should comply with directions from civil authorities, including, but not limited to, the Department of State. Similarly, all personnel shall limit travel to the Republic of Korea to mission-essential travel only. Leave and leisure travel to the Republic of Korea are prohibited.

c. Any active duty personnel (which term includes any reservist currently serving with the U.S. Armed Forces and members of the National Guard), members of the civilian component, and Master Labor Contract, Mariners Contract, and Indirect Hire Agreement employees (hereinafter "JN employees") (collectively, "relevant personnel"):

(1) who has been in the PRC, including the mainland, Hong Kong, and Macau, (including in transit through an air or sea port) (collectively "relevant locations");

(2) who has been in close physical contact for an extended period of time with someone who has returned from a relevant location;

- (3) who has been in close physical contact with someone identified as having COVID-19; or,
- (4) who has been diagnosed with COVID-19

shall remain separated from their unit and military facilities (other than their authorized residence or military medical treatment facility (MTF)) for a period of up to 14 days in isolation/quarantine. The 14 days will be computed starting from the day of departure from a relevant location or from the last date during which one has been in close physical contact with someone listed in paragraph 3.c.(2), (3), or (4), whichever is later in time. Persons diagnosed with COVID-19 will not return to their unit until cleared by military medical personnel or by cognizant medical experts (such as Japanese medical specialists) for relevant personnel not serviced by military medical services. Violations by military personnel are subject to punishment under Article 92, UCMJ as a violation of a lawful general order. Dependents meeting these criteria are to similarly remain in isolation/quarantine until cleared by medical authorities.

d. Any relevant personnel in isolation/quarantine shall be authorized to telework, if possible. If unable to be authorized to telework, said relevant personnel shall be placed on administrative leave for a period to encompass up to 14 days of isolation/quarantine, starting from the date established in 3.c. This requirement to allow civilians to telework or be placed on administrative leave includes Master Labor Contract, Mariners Contract, and Indirect Hire Agreement employees.

e. Contractor personnel meeting the criteria in 3.c. shall consult with their Contractor employer for return to work instructions. The appropriate Contracting Office shall notify Contractor employers that access to U.S. military installations will not be allowed for health and safety reasons to anyone meeting the 3.c. criteria, for a 14 day period, as calculated in 3.c. Contractors will notify their Contracting Officer or Contracting Officer Representative as soon as the Contractor ascertains they have someone meeting the 3.c. criteria, including the name and when the period of isolation/quarantine is expected to be ended.

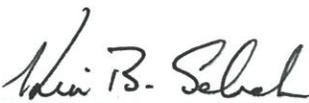
4. Relevant personnel and dependents who meet the 3.c criteria shall avoid public areas, gyms, and close physical contact with others (other than those in their residence) during the 14-day isolation/quarantine period. **Violations by military personnel are subject to punishment under Article 92, UCMJ, as a violation of a lawful general order.**

5. Relevant personnel will inform appropriate medical authorities and will be assessed within the first 24 hours of arrival from a relevant location or ascertainment of fulfilling a 3.c. criterion, and daily thereafter, for the development of symptoms of concern (fever, sore throat, cough, difficulty breathing, nausea, and diarrhea). The assessment will be performed via telephone or in person by a cognizant medical representative identified for this purpose on each U.S. SOFA facility. Non-SOFA status Contractor personnel shall follow the guidance issued by Japanese civil authorities.

6. If any symptoms of concern develop, affected personnel will immediately notify their unit and cognizant medical department representative. As per the CDC travel health alert notice card, affected personnel will call ahead before going to a medical treatment facility, informing the medical treatment facility of the symptoms and recent travel to the relevant location. A plain surgical mask should be donned as soon as possible.

7. Relevant personnel may return to their parent unit upon successful completion of the 14- day observation period after final clearance from medical.

8. Contractor personnel who do not develop any symptoms of concern in the 14-day period established in 3.c. should coordinate with their Contractor employer for return to work site instructions and comply with further guidance from Japanese civil authorities.
9. All units are directed to ensure relevant personnel and dependents report meeting any of the 3.b. criteria starting from 1 Feb 20. Unit reporting will occur through medical channels to the USFJ Surgeon, [indopacom.yokota.usfj.mbx.j4-sg@mail.mil](mailto:indopacom.yokota.usfj.mbx.j4-sg@mail.mil), to include negative reports. The report will include status, i.e., military, GS/NAF, SOFA status contractor, other contractor, dependent; unit name; dates of travel, dates of close personal contact, or date of diagnosis; expected date of release from isolation/quarantine, relevant location visited (if applicable), home living details (nature of housing, e.g., ship, barracks, apartment/tower, off base, and number of other people in home), whether symptomatic, asymptomatic, or diagnosed with COVID-19. Reports will be submitted every Tuesday and Friday, NLT 1200I.
10. Public Affairs Guidance from USFJ PAO will be provided via separate correspondence. Public Affairs POC is Lt Col Robert Firman, [robert.a.firman.mil@mail.mil](mailto:robert.a.firman.mil@mail.mil), 225-3656. Medical POC is Col Iris Reedom, [iris.a.reedom.mil@mail.mil](mailto:iris.a.reedom.mil@mail.mil), 225-2474. Legal POC is Mr. Dale Sonnenberg, [dale.l.sonnenberg.civ@mail.mil](mailto:dale.l.sonnenberg.civ@mail.mil), 225-7717.
11. This order is effective 1800I, 26 Feb 20, and will remain in effect until rescinded.

  
KEVIN B. SCHNEIDER  
Lieutenant General, USAF  
Commander

cc:  
Commander, U.S. Indo-Pacific Command  
Commanding General, U.S. Army Pacific  
Commander, U.S. Pacific Fleet  
Commander, U.S. Pacific Air Forces  
Commander, U.S. Marine Corps Forces, Pacific.  
Commander, U.S. Forces, Korea  
Director of Student Excellence, DoDEA Pacific Region  
USFJ/J01/J02/J4/J06/J07/J021