The 1\textsuperscript{st} RAMT of CAPSCA was held at the ICAO Regional Office, Bangkok, Thailand from the 10\textsuperscript{th} to 11\textsuperscript{th} Oct. 2007. There were 24 participants from 8 States/Administrations, 4 International Organizations and 3 Airlines. The participants represented Philippines, Malaysia, Thailand, Singapore, Bhutan, China, Macao (China), Indonesia, Thai Airways International Public Company Ltd., Bangkok Airways, Cathay Pacific Airways Ltd, WHO, IOM, IATA and ICAO.

Presentations were made by WHO, ICAO and IATA covering the IHR (2005), WHO Interim Protocol (Rapid Operations to Contain the Initial Emergence of Pandemic Influenza), the formation of CAPSCA and its accomplishments as well as the establishment of the RAMT, development of the ICAO State guidelines and the IATA airline specific guidance material.

The Terms of Reference of the RAMT were discussed and finalised. These are as stated below. The RAMT considered how best to get representation to the RAMT from all appropriate agencies dealing with communicable disease. It was recommended that for future meetings, invitations should be routed through WHO (for reaching out to public health representatives), ACI (for the airports), IATA (for airlines) and ICAO (for the Civil Aviation Authorities).

The ICAO State guidelines, airline specific and airport specific guidelines were reviewed and discussed. Changes were made to the guidelines in line with inputs from WHO, IATA and the participants. The recommended draft amendments are appended to this report. These will be presented to the Coordinating Working Group and the 2\textsuperscript{nd} SCM of CAPSCA as well as to ACI and IATA.

\textbf{Introduction to RAMT}

The Asia-Pacific Regional Aviation Medicine Team (RAMT) was established during the first Steering Committee Meeting (SCM) of CAPSCA, Hong Kong, 30-31 August 2007. The SCM determined
that a RAMT was needed to provide ongoing technical advice to the international Coordinating Working Group (CWG) to be used in the development of the ICAO State, airport and airline Guidelines and to provide advice concerning preparedness planning to stakeholders in the Asia Pacific Region. Participants would represent a variety of national and international organizations, reflecting the broad spectrum of stakeholders that are involved in pandemic preparedness planning in the region. International organizations such as ICAO, WHO, IATA, ACI, would normally provide a representative from their respective regional office. Other representatives would include officers from: port health; public health; regulatory authorities; airport operators; airline operators, etc.

The RAMT would utilise any relevant sources of information for developing recommendations e.g. from WHO, ICAO, IATA and ACI etc. The Asia-Pacific RAMT will be one of a number of RAMTs that will comprise a global network of such groups that will be developed over time. The RAMT will meet as necessary, but at least once a year, and most of its work can be undertaken using electronic communication. The coordinator of the RAMT will normally be an ICAO regional representative, and he/she will represent the region on the international CWG. The RAMT will report to the SCM, although for technical matters it will coordinate directly with the CWG.

**Terms of Reference of the RAMT**

1. Review and periodically recommend updates to the guidelines, to the CWG, through the SCM of CAPSCA. (The guidelines would include the ICAO State guidelines and those for airports and airlines).

2. Review and periodically recommend updates to the airport evaluation checklist to the CWG, through the SCM of CAPSCA.
3. When the CAPSCA website is established, the RAMT will discuss relevant issues using this mode of communication

Conclusions of the RAMT:

1. The organization, representation and reporting structure of the RAMT have been rationalised

2. The Terms of Reference of the RAMT have been finalised

3. Draft proposed changes to all the guidelines (pandemic preparedness for the aviation sector) will be made to the CWG through the SCM of CAPSCA