

Papua New Guinea

Coronavirus Disease 2019 (COVID-19) Health Situation Report #43

19 October 2020

Period of report: 12 - 18 October 2020



This Situation Report is jointly issued by PNG National Department of Health and World Health Organization once weekly. This Report is not comprehensive and covers information received as of reporting date.

Situation Summary and Highlights

- ☐ As of 18 October (12:00 pm), there have been 581 COVID-19 cases and seven COVID-19 deaths reported in Papua New Guinea. From the period of 12 to 18 October, there have been 27 new cases: 11 from Western, 11 from Eastern Highlands, 3 from the National Capital District and 2 from Enga. With Enga reporting its first two cases, the total number of provinces that have reported COVID-19 cases to date is fourteen.
- On 13 October, National Pandemic Response Controller and Police Commissioner Mr David Manning issued a direction on the condition of entry of designated charter flights into Papua New Guinea which includes the requirement of passengers to be fitted with GPS tracking ankle bracelet upon arrival for the designated quarantine period. The cost of this exercise shall be borne by the passengers/companies for the period of guarantine.
- ☐ A laboratory team from the National Control Centre (NCC) travelled to North Fly District in Western Province to visit Kiunga Hospital for the installation of additional GeneXpert instrument and to provide technical support and advice to Tabubil Hospital.
- ☐ Additional five provinces have completed the Rapid Convenience Survey (RCS) this week: Manus, Oro, East New Britain, Milne Bay and Hela. To date, there are 16 provinces that have completed the RCS on people's knowledge, perceptions and behaviours on COVID-19.
- On 14 October, the Embassy of China handed over 20 ventilators along with UNDP to NDoH.
- On 16 October, WHO with support from USAID handed over essential equipment to help set up the Maternity Isolation Ward for COVID-19 at the Obstatrics and Gyrace

Table 1. COVID-19 IN PAPUA NEW GUINEA¹ Cumulative New Cases (12-18 October 2020) Total National Capital District 337 3 11 Western 202 Eastern Highlands 11 12 7 Central 0 Morobe 0 5 West New Britain 0 0 3 East Sepik Enga 2 East New Britain 0 2 Milne Bay 0 AROB 0 1 New Ireland 0 1 Sandaun 1 0 Southern Highlands 0 581 TOTAL 27 ¹ As of 2020/10/18, 12:00 pm, PNG time Table 2. COVID-19 GLOBAL AND REGIONAL UPDATE²

2 WHO COVID-19 Dashboard as of 2020/10/17, 7:43 pm CEST

Isolation Ward for COVID-19 at the Obstetrics and Gynaecological Unit of Port Moresby General Hospital.

Upcoming Events and Priorities

- □ **Surveillance:** A risk assessment algorithm has been developed for evaluating risk of importation from other countries in preparation for the resumption of international flights with consideration of type of measure to be in place for risk level. Domestic risk assessment framework has also been developed to guide provinces in decision making around measures. Surveillance, contact tracing, RRT and sample collection SOPs have been revised and approved. Surveillance training materials are currently being updated in preparation for provincial and district training sessions. The Community Testing Strategy is also being revised. The electronic Health Declaration Form (eHDF) is currently being piloted with an increase of uptake over the last week and positive feedback during the first review. Plans for a full roll-out with possible start in December has been endorsed by the e-Health Technical Working Group.
- □ Laboratory: Visit to Goroka in Eastern Highlands is scheduled to discuss ongoing support for the COVID-19 response with PNG Institute for Medical Research and to explore opportunities for the Eastern Highlands Provincial Hospital to develop rRT-PCR testing. IATA training is planned in Kimbe (East New Britain) on 19-21 October and in Goroka (Eastern Highlands) on 26-28 October. An implementation plan for antigen RDTs is under development.

- □ Case Management and Infection Prevention and Control: Field visits will be continued to encourage screening and swabbing at the clinics. Materials to be used for the district-level trainings will be finalised. Planning for the critical care and ventilator training scheduled in November continues with support from NDoH, WHO and UNICEF. The harmonised checklist for health facilities will be piloted. Clearance will be obtained for the publication of the IPC Handbook for Healthcare Workers.
- □ Risk Communication & Non-Pharmaceutical Interventions (NPIs): Six more provinces are scheduled to complete the Rapid Convenience Survey under the leadership of the Provincial Control Centres, Provincial Health Authorities and the NCC Risk Communication and Community Engagement Cluster with technical and operational support from WHO. With technical support from WHO and UNICEF, the church leaders' sensitisation workshop for the Southern region organised by the PNG Council of Churches is scheduled to take place on 21 October.
- □ **Logistics and Supplies:** Assessment tool validation and a rapid assessment of the supply chain for the National Capital District are scheduled. A presentation will be made on the logistics dashboard on 23 October. Discussions on the integration into the mSupply of the COVID-19 supplies will continue. PNG is expected to receive the following items from the Government of the United Arab Emirates: 412 500 surgical masks, 128 000 N95 masks and 9000 coveralls.

National Transmission Assessment

3 – Large-scale community transmission

Due to low testing, there have been only few reported cases in the past 7 days. Between 12 and 18 October, 27 newly confirmed cases have been reported nationally from four provinces. Fourteen out of 22 provinces have reported a case or more since March 2020, including Enga province reporting its first two cases in the past week (7.4% of total new cases). Of the new cases in the past 7 days, 11 (40.7%) have been reported from Western Province and an additional 11 cases (40.7%) were reported from Eastern Highlands. Three cases (11.1%) were reported from NCD. Increased testing in the community surrounding the mine site from where a large localised cluster of confirmed cases was reported, identified 11 new cases, but further testing is still required to determine the extent of transmission in Western Province. Majority of provinces have reported 1 to 2 sporadic cases, with cases having travel history from Port Moresby or contact with a positive case from Port Moresby which demonstrates the extent of transmission in the National Capital District. With ongoing population movement and low compliance to non-pharmaceutical interventions in NCD, increasing cases is expected. With movement to provinces, it is expected to see sporadic cases and local clusters reported by other provinces. Testing in all provinces remains critically low, therefore ongoing transmission in other parts of the country is a possibility as population mobility continues. Importation from bordering Papua Province in Indonesia and incoming travellers from other countries reporting COVID-19 cases also remains a threat. Testing needs to increase substantially to understand the extent of transmission.

Epi Update COVID-19	Tests 1152 NAT Tests past 7 days	Cases 27 New cases past 7days	Deaths 0 Deaths past 7days	ICU Admissions O ICU Admissions past 7 days
	27003 Cumulative NAT Tests	581 Cumulative Cases	7 Cumulative Deaths	8 Cumulative ICU Admissions
	Q Imported Cases in past 28 days	21 Cases in past 7 days with no link	Active Clusters in the past 7 days	Active clusters with >3 generations

1

Health
Service
Provision
COVID-19

Health care workers trained in COVID19 Case Management

Healthcare worker cases reported past week

Hospitals admitting COVID-19 patients

ICU beds for COVID-19 patients

Non-ICU Hospital beds for COVID19 patients

Epidemiology

- As of 18 October (12:00 pm), there have been 581 COVID-19 cases and seven COVID-19 deaths reported in Papua New Guinea. From the period of 12 to 18 October, there have been 27 new cases: 11 from Western, 11 from Eastern Highlands, 3 from the National Capital District and 2 from Enga. With Enga reporting its first two cases, the total number of provinces that have reported COVID-19 cases to date is fourteen. Contact tracing is ongoing for all the confirmed cases.
- There are now confirmed COVID-19 cases reported from 14 out of 22 provinces (63.6%): Autonomous Region of Bougainville (1), Central (7), Eastern Highlands (12), East New Britain (2), East Sepik (3), Enga (2), Milne Bay (2), Morobe (5), NCD (337), (3), New Ireland (1), Sandaun (1), Southern Highlands (1), West New Britain (5) and Western (202).

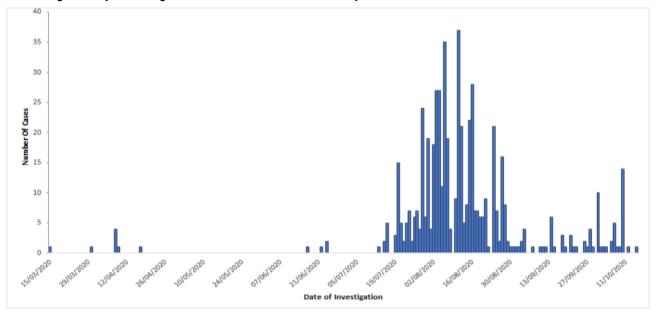


Figure 1. Epidemiological Curve of COVID-19 Cases in Papua New Guinea, 15 March to 18 October 2020

- Majority of the confirmed cases are male. Ages range from 1 to 84, with majority of cases aged between 20 and 60 years.
- Nationally, majority of all confirmed cases are male. This could be due to employment status, movement and male-dominated industries affected, health seeking behavior and access to testing.

^{*} Case investigations are ongoing

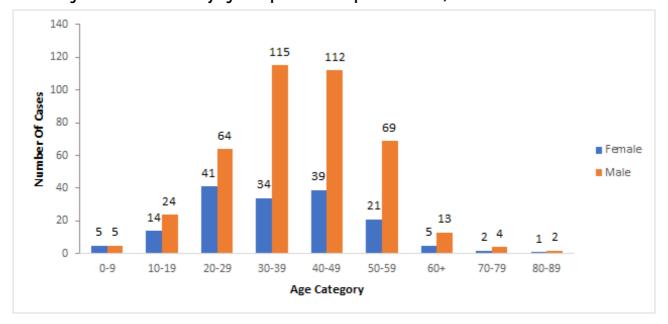
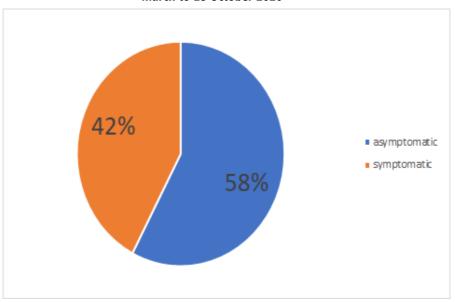


Figure 2. COVID-19 Cases by Age-Group and Sex in Papua New Guinea, 15 March to 18 October 2020

Most (58%) confirmed cases report being asymptomatic during presentation for swabbing (Figure 4). Contributing
factors to the larger percentage of asymptomatic cases could be due to resilience and health seeking behaviours in
Papua New Guinea, lack of reporting of past symptoms, lack of probing question about symptoms during swab collection,
testing early during pre-symptomatic stage and mass testing. Of the symptomatic cases, majority presented with cough
or fever (Figure 5).





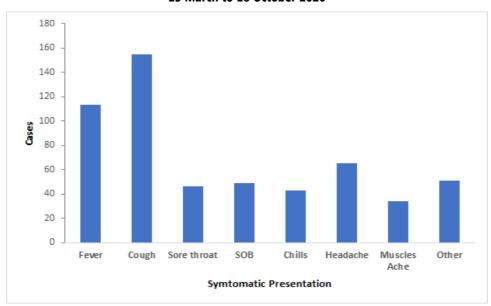


Figure 4. Symptoms on Presentation of COVID -19 Symptomatic Cases in Papua New Guinea, 15 March to 18 October 2020

- As sample collection and testing are low, there is a need to increase testing across all provinces
- For the period of 12 to 18 October, the COVID-19 National Hotline received 2758 calls. From which, 48 (1.7%) were health-related calls. Thirty-four of these were referred to Rapid Response Team/PHA. As of 18 October, the Hotline received 127 580 calls. Of these, 4478 (3.5%) were health-related calls. A total of 1376 calls were referred to Rapid Response Team/PHA.
- Papua Province in Indonesia is continuously reporting COVID-19 cases in areas that border Sandaun and Western Provinces in Papua New Guinea. While the border is officially closed, the threat of case importation from Indonesia remains high. As of 17 October, Papua Province has reported a total of 8510 confirmed cases and 136 deaths (data accessible at https://covid19.papua.go.id/).

Total Number of Travelers Screened before SOE (until 22 March)

Total Number of Travelers Screened during SOE (23 March – 16 June)

Total Number of Travelers Screened after SOE (17 June – 17 October)

* 3 passengers and the rest are crew

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Total 7265

Table 3. Persons Screened by Point of Entry

Strategic Approach

National and Provincial Public Health Response

- The Pandemic Response Coordination Group continues to meet daily, while the Health Operations Team meets thrice weekly (M-W-F). The NCC Operational Blueprint is on its third implementation cycle which covers the period between 5 October and 15 November 2020.
- Although the WASH Cluster received only about 20% of required fund, the cluster has reached about 1.3 million people, with 87 400 people reached with risk communication and community engagement, 100 750 people benefiting from educational WASH and constructed handwashing facilities, and 78 200 people accessing safe water. Revised WASH Plan for September to December 2020 targets to improve WASH through risk communication and community engagement for 1 500 000 people, 50 health care facilities benefiting 37 500 people, 500 schools for 100 000 students and teachers and community water supply for 150 000 people.

COVID-19 Prevention and Control

- The Laboratory Team visited four laboratories: Central Public Health Laboratory (CPHL) and PNG Institute of Medical Research (PNGIMR) in Port Moresby, and Kiunga Hospital and Tabubil Hospital in Western Province. These were done to (1) discuss and strategize strengthening and developing rRT-PCR testing in CPHL; (2) discuss increasing capacity for rRT-PCR testing at PNGIMR; (3) install additional GeneXpert instrument in Kiunga Hospital; and (4) assess the rRT-PCR GeneSig procedures at and provide technical support to Tabubil Hospital. The team also met with the University of Papua New Guinea School of Medicine and Health Sciences Committee to explore options for acquiring additional laboratory space for CPHL as the limited space in the laboratory has impeded establishing rRT-PCR testing.
- Field visits were conducted at Rita Flynn Isolation Facility, 9 Mile, Gerehu, Kaugere, Badili and Lawes Road to assess screening, swabbing and IPC measures implemented at these facilities.
- Training modules of various pillars are now being updated to support the continuation of the district-level trainings under the NDOH's COVID-19 Emergency Response Project financed by the World Bank and with technical support by UNICEF and WHO.

Table 4. Number of Healthcare Workers and Programme Managers Trained under the NDOH PNG COVID-19
Emergency Response Project Financed by World Bank and with technical support by UNICEF and WHO
as of 18 October 2020

	Province	Number of Batches Completed	Number of Individuals Trained		Province	Number of Batches Completed	Number of Individuals Trained
1	Western Highland	3	72	8	Eastern Highland	1	32
2	Jiwaka	3	65	9	Southern Highland	3	43
3	Simbu	3	64	10	Gulf	1	21
4	Central	3	54	11	Milne Bay	2	38
5	Hela	1	18	12	Oro	2	44
6	Morobe	8	124	13	Western	1	44
7	Madang	2	85		<u>. </u>		•
TOTAL NUMBER OF BATCHES			33		TOTAL NUMBER OF INDIVIDUA		704

Table 5. Number* of Health Care Workers Trained by Province

	Province	Total		Province	Total
No.	MOMASE REGIO	N	No. NEW GUINEA ISLANDS		DS REGION
1	Madang	431	12	ARoB	37
2	Morobe	549	13	East New Britain	236
3	East Sepik	92	14	Manus	89
4	West Sepik	200	15	New Ireland	320
No.	HIGHLANDS REGIO	ON	16 West New Britain 328		328
5	Eastern Highlands	146	No.	SOUTHERN RE	GION
6	Enga	112	17	Central	330
7	Hela	99	18	Gulf	51
8	Jiwaka	138	19	Milne Bay	132
9	Simbu	64	20	NCD	269
10	Southern Highlands	410	21	Oro	78
11	Western Highlands	851	22	Western	118

^{*}Trained under WHO trainings and NDOH PNG COVID-19 Emergency Response Project

Table 6. Number of Facilities and Beds for COVID-19 as of 18 October 2020

Health Facilities	Number of Provinces	Number of Facilities OR Beds	Provinces that Reported
Pre-triage facilities	20	>120	ARoB, Central, EH, ENB, ES, Enga, Gulf, Hela, Jiwaka, Madang, Morobe, MB, NCD, NI, Oro, SH, Simbu, WS, Western, WH, WNB
Quarantine facilities	13	223	ARoB, EH, ENB, Enga, Hela, Jiwaka, Madang, Manus, Morobe, NCD, SH, Simbu, WH
Isolation facilities	17	339	ARoB, EH, ENB, Enga, Hela, Jiwaka, Madang, Manus, Morobe, MB, NCD, SH, Simbu, WS, Western, WH, WNB
Intensive Care Unit	16	93	AROB, EH, ENB, Enga, Gulf, Hela, Madang, Manus, Morobe, MB, NCD, SH, Simbu, WS, Western, WNB

Autonomous Region of Bougainville (ARoB), East Sepik (ES), East New Britain (ENB), Eastern Highlands (EH), Milne Bay (MB), National Capital District (NCD), New Ireland (NI), Southern Highlands (SH), West New Britain (WNB), Western Highlands (WH), West Sepik (WS)

Communication, Community Engagement and Non-Pharmaceutical Interventions (Social Measures) — NIUPELA PASIN

- The Rapid Convenience Survey has now been completed in sixteen provinces: Central, East Sepik, West Sepik, Madang, Gulf, Southern Highlands, Jiwaka, Autonomous Region of Bougainville, NCD, Morobe, Eastern Highlands, Manus, Oro, East New Britain, Milne Bay and Hela. The survey is spearheaded by the NCC Risk Communication and Community Engagement Cluster with technical and operational support from WHO.
- Support was provided to Eastern Highlands Province for IEC materials and key messages on testing.
- The following activities are conducted under the NDOH's COVID-19 Emergency Response Project financed by World Bank and with technical support from UNICEF: (1) multi-media campaign is ongoing related to adherence to quarantine, prevention measures, basic hygiene practices, mask wearing, testing, stigma and community unity; (2) mass media, with a volume of 800 insertions is run through TVWAN, NBC TV, NBC National Radio, EMTV, Radio Light, FM100, Hot97 FM, YUMI FM, Nou FM, Legend FM, the National, Post Courier and Wantok Niuspepa; and, (3) NCD PHA Community Outreach and COVID-19 awareness booths and handwashing facilities continue to operate at Boroko and Gordons marketplaces, Waterfront and Vision City malls, and Jacksons International Airport.

Table 7. Monitoring of NPIs Implemented in Papua New Guinea

		Monitoring Status						
			Impleme	ntation	Partial lift	Lifted		
Social Measures	Date first implemented	Date last modified	Geographical (national or sub-national)	Recommended or Required	Lifted for some area	Lifted for all areas		
Hand Hygiene and Respiratory Etiquette	16 January*	3 October	National	Required				
Wearing Face Masks	29 July	3 October	Sub-national**	Required				
School Closure	23 March	17 August	Sub-national	Required		√		
Workplace Closure	23 March	3 October	National***	Required				
Mass Gatherings	23 March	3 October	National	Required				
Stay at Home	23 March	3 October	Sub-national****	Required		√		
Restrictions on Internal Movement (within country)	23 March	3 October	National	Required		√		
Restrictions on International Travel	14 February	3 October	National	Required	√			

^{*} First social media post done; ** In National Capital District; in public transportation (including Central Province) and aircraft;

^{***}Only selected type of establishments; **** Curfew in NCD between 12 to 5 am

Logistics and Supplies

- WHO encourages partners to utilize the COVID-19 Supply Portal accessible at https://covid-19-response.org/. The Portal is a purpose-built tool to facilitate requests for critical supplies by national authorities and partners. The requests are assigned to purchasing agencies that can execute the order and process it, utilizing existing ordering systems.
- Updating is ongoing for COVID-19 supply data to support procurement planning and distribution. Discussions were held with each pillar for forecasting the needs for health operations in COVID-19 response.
- The Embassy of China handed over 20 ventilators to NDoH. These are part of the 30 ventilators procured through the joint efforts of UNDP, UNOPS and UNICEF.
- WHO with support from USAID handed over essential equipment to help set up the Maternity Isolation Ward for COVID-19 at the Obstetrics and Gynaecological Unit of Port Moresby General Hospital. In the week of 5 October, the country also received 18 540 GeneXpert cartridges, 668 248 surgical masks, and 43 392 N95 masks from WHO.
- In accordance with Circular 38/2020, the suppliers are required to adhere to quality requirements for medical products for COVID-19 response (see Annex B).

Funding and Expenditure

Below is a summary of COVID-19 funding and expenditure by fund source as of 16 October. The table below pertains
only to funds that were held and transacted through the NDOH Health Services Improvement Program (HSIP) Trust
Account, thus not comprehensive to cover all COVID-19 support made available to the country and provinces through
other modalities (e.g. funding through UN Agencies, etc.). Under the HSIP Trust Account, the total available funds from
all sources is PGK 43 019 093.

Table 8. COVID-19 Funding and Expenditure Summary by Fund Source as of 16 October 2020

No.	Funding Source	Initial	YTD	0/\$	Balance
	,	Amount	Expend	Commitments	Available
1	GoPNG NDoH 2019 HIV/AIDS Reprogrammed Funds	3 299 651	3 168 723	130 928	-
2	GoPNG COVID-19 Funds 2020 from Treasury 2020	43 300 000	36 615 307	6 684 693	-
3	GoPNG COVID-19 Funds 2020 from Treasury (NOC)	2 000 000	1 999 793	-	207
4	GoPNG New COVID-19 Funds 2020 for PHAs	37 000 000	2 000 000	22 300 000	12 700 000
5	GoPNG New COVID-19 Funds for NDOH Clusters	28 000 000	2 515 177	-	25 484 823
6	GoPNG COVID-19 Funds 2020 from Treasury (NCC)	2 000 000	155 289		1 844 711
7	DFAT Emergency COVID-19 Funding	24 800 967	19 250 000	3 348 122	2 202 845
8	UNICEF Contribution to COVID-19	368 480	367 971	-	509
9	WHO COVID-19 Surveillance Funds (for 22 Provinces)	634 240	634 240	-	-
10	Private Sponsors	1 181 001	1 108 500	-	72 501
11	New Zealand Government	6 298 800	5 990 000	-	308 800
12	UNFPA Support to COVID-19 Emergency Response	549 580	144 883	-	404 697
13	Incentive Funds for Risk Communication Support in WNB	156 171	156 171	-	-
	Total Funds in HSIP	149 588 889	74 106 053	32 463 743	43 019 093

Table 9. COVID-19 Government and Development Partners Funding and Expenditure Summary as of 16 October 2020

	1-9				
No	. Funding Source	Amount	Total	Committed	Funds
		Received	Expenditure	Funds	Available
1	Government of Papua New Guinea	115 599 651	46 454 288	29 115 621	40 029 742
2	Development Partners	33 989 238	27 651 765	3 348 122	3 146 833
	TOTAL	149 432 719	73 756 680	32 463 743	43 019 093

ANNEX A – Provincial Travel Requirements (updated on 14 October 2020)

(Source: DMT Secretariat)

Region	Province	Travel Requirement		
	NCD	Only APTF (Domestic Travel)		
	Central	No special clearance. Only APTF when travelling to Port Moresby.		
	Gulf	No requirements. Only APTF for travelers by Tropic Air.		
SOUTHERN	Milne Bay	No requirements apart from APTF. Masks are required in public places.		
REGION	Western	No requirements apart from APTF when travelling to Daru.		
	Kiunga	No requirements.		
	Tabubil	For people travelling to Tabubil (Mine site), the requirements are listed under OK Tedi's Revised COVID-19 Measures and General Information document.		
	Oro	No requirements apart from APTF.		
	Morobe	Apart from APTF, standard IPC is applicable when travelers arrive in the province and all must adhere to safety measures (use of hand sanitizers, social distancing and elbow cough).		
MOMASE	Madang	No requirements apart from APTF. All travelers will be monitored closely during their stay in the province		
REGION	East Sepik	No requirements apart from APTF. Temperature checks are conducted at airport		
	West Sepik	For travelers by air, APTF is required. Travelers will be closely monitored during their stay in the province. Due to shortage of surveillance manpower, they have scaled down on airport screening and testing. Officers are now stationed at respective clinics for triage and sampling.		
	Enga	No requirements apart from APTF		
	Western Highlands	No requirements apart from APTF for general travelers. If the purpose for travel is t visit PHA/hospitals, travelers must provide negative PCR test at least 3 days prior to travelers.		
HIGHLANDS	Eastern Highlands	No requirements apart from APTF for general travelers. If the purpose of the travel is to visit PHA, the surveillance focal point, Dr. Appo, will have to be contacted (+675 73575296) for further advise. Once cleared, travelers can visit the PHA's.		
REGION	Southern Highlands	Flights going through Mt. Hagen, WHP. No travel requirements at the moment.		
	Simbu	No requirements apart from APTF. People travelling in must adhere to safety measures.		
	Jiwaka	No travel requirements		
	Hela	No travel requirements		
	West New Britain	Upon arrival at Hoskins airport, all travelers must be swabbed or have their samples taken for COVID-19 check.		
NEW GUINEA	East New Britain	No requirements apart from APTF. Ideally, they would prefer medical clearance as well, but they cannot police that at the moment.		
ISLANDS REGION	AROB	Approval letter from the Controller in AROB and a medical clearance letter from Dr. Damien Hasola in Port Moresby		
	Manus	No requirement for travelers. Swabbing done at airport for travelers who are symptomatic		
	New Ireland	Only APTF required.		

ANNEX B – Quality Requirements for COVID-19 Medical Products

(Source: NDOH Circular No. 38/2020 Attachment)

Quality Requirements for COVID 19 Medical Products

Registered pharmaceutical importers, wholesalers and exporters are required to submit the following quality documentation in advance of importation. These technical documents must be current and in coloured copies of the original documents. The technical documents also be must be stamped and signed appropriately and must be legible and written in English.

Medicines:

- 1. Letter of authorisation from the manufacturer in the country of origin where the product will be sourced.
- 2. Certificate of Good Manufacturing Practice of the manufacturer.
- 3. Certificate of Pharmaceutical Product or evidence of registration by the mutual drug regulatory authority from the country of origin.
- 4. Certificate of Analysis of the Batch of the Product to be imported
- 5. Specimens of Product Labels or a clear coloured photograph of the Product to be imported.
- 6. The total quantity of the Product to be imported.

Medical Devices:

- 1. Letter of authorisation from the manufacturer of the medical device in the country of origin.
- 2. Quality Management System Certification: ISO: 13485: 2016 from the manufacturer of the Medical Device in the country of origin and Product Schedule.
- 3. Specimens of Product Labels or Product Brochure/Catalogue including Medical Device Specifications.
- 4. The total quantity of the medical device to be imported.

ANNEX C – Photos











Photos 1-5. Handover of 20 ventilators to Papua New Guinea from the Government of China through UNDP.





Photos 6-7. Regular Health Operations Meetings held on Mondays, Wednesdays and Fridays.







Photos 8-10. WHO with support from USAID handed over essential equipment to help set up the Maternity Isolation Ward for COVID-19 at the Obstetrics and Gynaecological Unit of Port Moresby General Hospital.

ANNEX D – Risk Communication Materials



For more information about this Situation Report, contact:

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