

هيئة الصحة - أبوظبي
HEALTH AUTHORITY - ABU DHABI



Book 9: Disease Prevention

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Federal Law No. 27 of 1981 Concerning Communicable Disease Prevention

Federal Law No. (28) of 1981 Concerning the Detention and Treatment of the Mentally ill



**Federal Law No. 27 of 1981
Concerning Communicable Disease
Prevention**

Federal Law No. 27 of 1981 Concerning Communicable Disease Prevention

We, Zayed Bin Sultan Al-Nahyan, President of the United Arab Emirates,

Upon consideration of the Provisional Constitution,

And Federal Law No. 1 of 1972 concerning the Jurisdictions of Ministries and the Powers of Ministers, as amended,

And based upon the proposal of the Minister of Health, the approval of the Cabinet and the ratification of the Supreme Council of the Federation,

Have promulgated the following Law:

Chapter 1 General Provisions

Article 1

The required precautionary and health measures shall be taken in the State upon the anticipation or occurrence of any of the communicable diseases, pursuant to the provisions stated herein.

Article 2

In applying the provisions of this Law, the following words and expressions shall have the definitions set forth opposite each one, unless the context requires otherwise:

- 1- "Minister" means the Minister of Health.
- 2- "Health Department" means the central health authority at the Ministry of Health, assigned by the Minister to oversee the implementation of this Law.
- 3- "Competent Health Authority" means the local health authority in the medical zones, assigned by the Minister of Health to implement the provisions of this Law.
- 4- "Communicable Disease", "Infectious Disease" or "Contagious Disease" means any disease that can be transmitted to others through humans, animals, insects, food, places or other objects and substances that may be contaminated by the microbes or toxins of the communicable disease.
- 5- "Contamination" means the contamination of a body, an instrument or a material with the disease factors (microbes) of the communicable disease.
- 6- "Disinfection" means the elimination of disease factors by chemical or physical means or by any other means.
- 7- "Extermination" means a chemical or physical procedure used to eliminate animals and insects that transmit disease factors.
- 8- "Infected Person" means the person afflicted with one of the communicable diseases stated herein.
- 9- "Suspect" means the person whose medical history or symptoms show that his/her body might be carrying the microbes of a communicable disease.
- 10- "Permanent Contact" means every person who has been in contact with the infected person but is not a resident of the house or an employee at the place where a case of communicable disease has been detected.
- 11- "Incidental Contact" means every person who has been in contact with the infected person but is not a resident of the house or an employee at the place where a case of communicable disease has been detected.

12- "Microbe Carrier" means the person whose body is carrying the communicable disease microbe without showing any of the disease symptoms.

13- "Isolation" means the isolation of the infected person from healthy people throughout the duration of the disease, in special places and circumstances, to prevent the transmission of the infection from the infected person to other people; no one will be allowed to have contact with the patient except for the people providing him with treatment and other required services, with permission of the physician-in-charge.

14- "Quarantine" means the limitation of the residence of persons who have been exposed to the disease for a period equivalent to the longest usual period of incubation to prevent them from being in contact with other people, excluding the healthcare employees overseeing the work, provided that they fulfill the conditions preventing the spread and transmission of the disease.

The quarantine may be either complete or modified and may be in the form of surveillance over the person without restricting his/her movement.

15- "Quarantine to Residence" means:

a- Prohibiting entrance to and exit from the residence of a person afflicted with a communicable disease, following the orders of the Competent Health Authority, excluding the persons providing the patient with medical care and nursing services, provided that the precautions preventing the spread and transmission of the disease are taken.

b- Prohibiting the transportation of objects from the residence of the person with a communicable disease, whether these objects have come into contact with the patient or have been contaminated, to prevent the transmission of the disease to others, unless

otherwise instructed by the health authority.
c- Placing a quarantine sign in a visible place at the entrance of the residence, indicating the presence of a communicable disease and prohibiting entry.

16- "Communicable Disease Reporting" means reporting to the official authorities, by the persons assigned to do so other than physicians, the name, address and type of disease of the person afflicted with a communicable disease or suspected to have the disease; in turn, physicians shall report to the Competent Health Authorities using the reporting form for communicable diseases prepared by the Ministry of Health.

17- "Facility" means the institute, store, plant, factory, company or any such place where more than five workers and employees work.

18- "Health Institution" means the hospitals or clinics managed by the State, individuals or private or joint authorities.

Chapter 2

Communicable Diseases

a- Enumeration and Reporting of Communicable Diseases

Article 3

1- The diseases listed in sections (a), (b) and (c) of table (1) attached hereto are considered communicable diseases.

2- All Competent Health Authorities in the medical zones shall immediately notify the Health Department upon detecting any of the diseases listed in section (a) of table (1) attached hereto.

3- The Minister may, by virtue of an order published in the official gazette, add a communicable disease or delete any of the

diseases listed in section (a) of table (1) attached to hereto.

4- The Minister may, on the recommendation of the Health Department, in case of an outbreak of any of the diseases listed in sections (b) and (c) of table (1) and by virtue of an order published in the official gazette, compel the public to notify the Competent Health Authorities within the medical zone of this disease.

b- Obligations of Competent Health Authorities Upon Occurrence of a Communicable Disease or a Suspected Communicable Disease

Article 4

The Competent Health Authorities that are notified of the occurrence of a communicable disease or a suspected communicable disease as per table (1) shall immediately, either directly or through a representative, do the following:

- 1- Head immediately to the place of the reported case to perform inspection.
- 2- Examine the case to establish the occurrence of the disease and the source of the infection, and detect offenders and cases that have not been reported.
- 3- Notify the Health Department of the procedures carried out and, in case of occurrence of any of the diseases listed section (a) of table (1), take expedient and strict measures to place the patient in complete isolation and take preventive and precautionary health procedures to prevent the spread of the disease.
- 4- Collect and send samples taken from the patient for lab testing to confirm the diagnosis of the disease and the source of the infection, together with information on the symptoms of the disease and the epidemiological screening to assist with the required lab test.

5- Provide guidance to the person in charge at the place where the cases have occurred as to the relevant preventive health measures, give him/her health instructions to control the spread of the disease and train him/her to use the required medication and disinfectants and to take care of the infected person, in addition to other health measures to reduce and control the spread of the disease.

c- Mandatory Reporting

Article 5

1- Any of the persons mentioned in paragraph (2) of this article shall notify the health authority as soon as they are aware of, informed of or suspect the occurrence of a communicable disease or the death of a patient as a result of any of the communicable diseases listed in section (a) of table (1).

2- The persons who must notify are the following:

- a- The management of any health institution or the attending physician of the patient or any of his/her assistants at that institution.
- b- The adult male or female relatives of the patient, who live with the latter in the same house or who have been in contact with him throughout the duration of the disease; the order of their liability to report depends on the degree of relationship.
- c- The person living with the patient in one residence, regardless of his/her relationship to the patient.
- d- The immediate supervisor at the patient's workplace.
- e- The director of the university, institute or school, to which the patient is affiliated, or his/her representative.
- f- The captain of the ship, airplane or public vehicle, if the patient has been on board of any of them.

g- The director of the prison, hotel, camp, shelter or any other compounds.

3- If the specialists decided or if it was established through criminal investigation or any other procedure that the deceased was afflicted with a communicable disease, they must notify the nearest health authority as if the diagnosis had been carried out before the death.

d- Reporting of Communicable Diseases Transmitted from Animals to Humans and Vice Versa

Article 6

Any person, who is aware, becomes aware or suspects that an animal, which they own, or is under their supervision or within their responsibility or which belongs to other persons, has or is suspected to have any of the communicable diseases that can be transmitted to humans as set out in table (3), shall immediately notify the Competent Health Authority or the competent veterinary authority of the animal's disease. The notified authority shall investigate the case or seek the assistance of veterinary experts. If it is discovered that the animal is indeed infected or is suspected to be infected with a communicable disease that can be transmitted to humans and put their lives at risk, the competent authority shall order the extermination of the animal and take the necessary measures to prevent the spread and transmission of the disease from the animal to human beings.

The Minister may add to or delete any of the diseases in table (3) by virtue of an order published in the official gazette.

e- Reporting of Cases of Food Poisoning, Severe Diarrheas or Unknown Fevers

Article 7

If several cases of unusual diarrhea or poisoning occur in any town or village or at any other location, as a result of consuming food or beverage suspected to be poisonous or spoiled or for any unknown reason, or if undiagnosed fevers are detected, the Competent Health Authority shall head to the place of occurrences and take necessary measures to prevent the spread of the disease and provide the patients with medical treatment.

f- Quarantine of Patient or Contacts

Article 8

1- The patients afflicted with any of the contagious diseases listed in section (a) of table (1) or suspected of having any of these diseases as well as any of the persons coming into contact with them are prohibited from travelling or moving to any place outside the hospital or health institution except with the approval of the Competent Health Authorities.

2- No traveler afflicted with or suspected of having any of the communicable diseases may disembark at their destination except after notifying the Competent Health Authority and obtaining its approval to disembark at such destination.

g- Isolation and Transfer of Infected or Suspected Persons

Article 9

The Competent Health Authority may take the measures that are necessary for the isolation or treatment of an infected person or any person suspected of having any of the reportable diseases.

It may also transfer the patient to any hospital or location for treatment.

Article 10

1- The school principal or institute director shall prohibit a student from attending courses at the school or institute, as the case may be, and the director of the establishment shall isolate a worker or and employee from the establishment, if any of such student or worker has been afflicted with any of the communicable diseases listed in sections (b) and (c) of table (1), for the period prescribed in table (2) attached hereto, or for the period specified by the Competent Health Authority. The school principal and the school health authorities shall quarantine or isolate the students that have come into contact with the person infected with a communicable disease, either by prohibiting them from attending classes or by any other way that prevents them from coming into contact with others throughout the period of quarantine or isolation as specified for every disease, or throughout the period determined by the Competent Health Authority.

2- If the school principal or institute director suspects that any of the students, or if the director of the establishment suspects that any of the workers or employees is afflicted with a communicable disease, he/she shall refer such person suspected of having the disease to the competent physician to examine him and provide a report on his medical condition. If it is found that he has indeed been afflicted with a communicable disease, the Competent

Health Authority shall be informed immediately.

3- The school principal or institute director or the director of the establishment may not receive the infected person isolated by virtue of paragraph (1) of this article except after he submits a medical report issued or approved by the Competent Health Authority, stating the fulfillment of all the conditions specified for authorizing the return of the student to school and the worker or employee to the establishment.

h- Inspection

Article 11

The inspectors of the Competent Health Authority may access any building, place, vehicle, ship or airplane if they believe or suspect that a person afflicted with a contagious disease is hiding or has been hidden in that place.

i- Quarantine and Disinfection

Article 12

1- The Competent Health Authorities, in consultation with the Minister or his designee, may place any means of transportation, by land or sea, in quarantine until they are disinfected according to the international health rules.

2- The Competent Health Authorities may take necessary measures to disinfect the houses and real estate or movable properties for the purpose of preventing the spread of the disease.

j- Suspension from Work

Article 13

The Competent Health Authorities may order the suspension of any person from carrying out any profession for the period that they deem necessary if they establish that this person is afflicted or suspected of being afflicted with a communicable disease or carrying the microbe, if continuing to carry out this profession will lead to harming the health of other workers.

k- Closure of Educational Institutions and Establishments

Article 14

1- In case of the likelihood of an outbreak of any of the communicable diseases, the Minister may, in consultation with the competent minister, order the closure of any educational institution or extend its closure period as deemed necessary.

2- The Minister may, in consultation with the Minister of Interior, order the closure of movie theaters, gyms, night clubs and other establishments for the period that he deems adequate to prevent the spread of any communicable disease.

l- Disposal of Contaminated Temporary Buildings and Movables

Article 15

1- The Competent Health Authorities may, upon obtaining a court order, dispose of or order the disposal of any temporary buildings, properties, clothes or other objects if it is confirmed that they have been or may be contaminated with any disease factor without the possibility of being disinfected by any of the adopted methods.

2- The competent court may order to properly compensate the aggrieved person if it is satisfied that they have not, whether

intentionally or by neglect, contaminated their properties.

m- Disposal of Food Contaminated with the Disease Factor Of Some Communicable Diseases and Prohibition of Sale of Food without Sterilization

Article 16

1- The Competent Health Authority may dispose of or demand the disposal of any food or beverage that it believes is contaminated with a communicable disease listed in paragraph (2) of this article, such by the method that it deems proper.

2- The communicable diseases intended in paragraph (1) of this article are as follows:

Diphtheria, Staphylococcal Pharyngitis, Scarlet Fever, Bacillary Dysentery, Amoebic Dysentery, Typhoid Fever, Salmonella Infection and other food poisoning bacteria.

3- The Competent Health Authority may, upon the occurrence of any of the diseases mentioned in the previous paragraph at a plant, farm or place for the preparation of dairy and dairy products, prevent the selling or delivery of these products to the consumers before sterilization and pasteurization, if possible, and then packaging in sterilized and sealed containers showing the date of packaging after being sealed with the seal of the establishment manufacturing the products. The persons responsible for managing the establishments shall refrain from selling, distributing or dispensing the said products to the consumers before the aforementioned procedures are taken.

n- Special Measures Taken for Certain Communicable Diseases

Article 17

The Minister may, upon the occurrence of cholera, smallpox, plague, typhoid, intermittent fever, typhus, cerebrospinal meningitis or any of the hazardous diseases as determined by a Cabinet decision, take respective measures and order that the following measures be taken, in addition to the measures provided in this Law:

- 1- Declare any place or area as infected and organize entry to and exit from the area.
- 2- Prevent or restrict gatherings or private and public celebrations.
- 3- Restrict the number of passengers in public vehicles and other transportation means.
- 4- Take appropriate health measures related to organizing markets, roads and other public places.
- 5- Take necessary measures with regard to patients or any of the suspected persons or contacts for the purpose of limiting the spread of the disease.
- 6- Take proper health measures to purify the water and prevent the contamination of its sources with the microbe of the disease.
- 7- Take any other measures that he deems necessary to limit and eliminate the disease.

o- Conditions of Transportation or Burial of the Body of a Person who has died of a Communicable Disease

Article 18

1- The body of a person who has died of a communicable disease listed in section (a) of table (1) may not be transported, or authorized for transportation by public transportation means, whether by land, air or sea, unless the body is preserved and disinfected by injecting the arteries and abdomen with a

disinfectant approved by the Competent Health Authority. Upon transporting the body within these conditions, the health authority shall provide the family of the deceased with a certificate in this respect for onward submission to the relevant health authorities at the destination location or country.

2- No box containing the body of a person who has died abroad of any of the communicable diseases listed in section (a) of table (1) may be opened.

3- The Competent Health Authority may bury the person who has died of any of the communicable diseases listed in section (a) of table (1) in a burial place designated for this purpose. It may also prevent the transportation of the deceased to be buried in any other place.

p- Penalties

Article 19

1- A confinement sentence for a period of not more than one month, and a fine of not more than two thousand Dirhams, or either of these penalties, shall be imposed on any person who violates any of the provisions of Article 5 hereof.

2- With exception to the penalties provided for in the previous paragraph, a confinement sentence for a period of not more than six months, and a fine of not more than five thousand Dirhams, or either of these penalties, shall be imposed on any person who violates any of the provisions of this chapter.

Chapter 3 Vaccination

Article 20

- 1- Newborns shall be vaccinated and immunized during their first year after birth, against the following diseases: (Tuberculosis – poliomyelitis – diphtheria – tetanus – pertussis – measles).
- 2- The Health Department shall issue the regulations, bylaws and schedules regulating immunization and vaccination against the diseases mentioned in the previous paragraph.
- 3- The Health Department shall issue the regulations and bylaws concerning the vaccination of children at different age phases.
- 4- The Health Department may add a disease or delete any of the diseases listed in Paragraph (1) of this article.

Article 21

- 1- Either parent of the child or the child's guardian or custodian shall be responsible for bringing the child to the immunization and vaccination centres.
- 2- The school health physicians and the school principals shall bring in the children under their supervision to be vaccinated and revaccinated pursuant to the provisions of Paragraphs (2) and (3) of Article 20.

Article 22

- 1- In areas of occurrence or possible occurrence of smallpox, cholera, diphtheria, poliomyelitis, measles, tuberculosis, typhoid or any other epidemic disease that can be prevented by vaccination or immunization, the Minister may issue an announcement to be published in the official gazette and other media, specifying the infected area and compelling any person in the area to receive mandatory vaccination and immunization for the prevention of the disease.

2- There shall be excluded from the provision of paragraph (1) of this article or any order issued by virtue thereof, any person whose health condition does not permit them to receive vaccination.

Article 23

A confinement sentence for a period of not more than three months, and a fine of not more than three thousand Dirhams, or either of these penalties, shall be imposed on any person who violates any of the provisions of this chapter.

Chapter 4 Endemic Diseases

Article 24

- 1- For the purposes of this Law, the diseases listed in paragraph (2) of this article shall be considered as endemic diseases, and the Ministry shall develop the necessary plans to combat them.
- 2- The endemic diseases are: malaria, trachoma, tuberculosis, venereal diseases, intestinal parasites.
- 3- The Health Department may add any other diseases that field studies prove them to be endemic.

Competent Departments for Endemic Diseases

Article 25

- 1- The Minister may establish divisions affiliated to the Ministry, where each division shall be concerned with one or more of the diseases listed in paragraph (2) of article (24). He may determine

the location of the headquarters of each division, appoint a head and a number of employees qualified in various medical professions and provide all the necessary equipment and devices.

2- The Minister may seek the assistance of qualified experts from foreign organizations to work at any of the divisions stated in paragraph (1) of this article subject to other laws regulating the hiring of employees.

Obligations of Divisions of Endemic Diseases

Article 26

1- Each division of endemic diseases shall:

- a- Carry out a complete survey at the level of the State to determine the places where the specific disease is present as well as its outbreak level, establish objectives and specify the means to control the disease.
- b- Establish secondary and administrative technical units to implement preventive and therapeutic plans in the medical zones.
- c- Train the technical and administrative units to implement preventive and therapeutic plans.
- d- Seek the assistance of official bodies and international organizations to conduct researches and establish a work plan to eliminate the disease.
- e- Seek the allocation of funds needed to eliminate or control endemic diseases. These matters shall be carried out upon the approval of the Minister.

Chapter 5

Health Control of Exotic Diseases

Article 27

1- For the purposes of this Law, the diseases stated in paragraph (2) of this article shall be considered as a threat to public health and should be controlled.

2- The diseases referred to in the previous paragraph are the following: malaria, bilharzia, leprosy, tuberculosis, venereal diseases, eye diseases, intestinal and urine parasites.

3- The Minister may add a disease or delete any of the diseases stated in the previous paragraph by virtue of a decision published in the official gazette.

Article 28

1- There shall be formed specialized medical committees to conduct medical examinations on expatriates to ensure that they are free of all or some of the diseases stated in paragraph (2) of the previous article. The responsibilities of these committees shall be developed in agreement with the other concerned ministries.

2- The Minister may issue regulatory bylaws to restrict the diseases that constitute a threat to public health as stated in paragraph (2) of the previous article or prevent their entry, in consultation with the Minister of Labor and Social Affairs and the Minister of Interior.

Chapter 6

General Provisions

Article 29

The Minister of Health shall, in agreement with the Minister of Justice, determine the positions whose incumbents shall be designated as judicial officers to implement the provisions of this Law and its implementing regulations and decisions.

Article 30

The Minister of Health shall issue the decisions required for the implementation of this Law, and the ministers, each within his scope of competence, the municipalities and the health authorities in the member emirates of the federation shall implement its provisions.

Article 31

This Law shall be published in the official gazette and shall come into force one month after the date of publication.

Zayed Bin Sultan Al-Nahian
President of the United Arab Emirates

Issued by us at the Presidential Palace in Abu Dhabi
On: 10 Muharram 1402 H.
Corresponding to: 7/11/1981

Table (1) Communicable Diseases

Section (a):

- 1- Plague
- 2- Smallpox
- 3- Cholera
- 4- Typhus
- 5- Intermittent fever
- 6- Yellow fever

Section (b):

- 1- Measles
- 2- Diphtheria
- 3- Chicken pox
- 4- Typhoid fever
- 5- Paratyphoid fever
- 6- Poliomyelitis
- 7- Scarlet fever
- 8- Epidemic Hepatitis
- 9- Hepatitis
- 10- Pertussis
- 11- Epidemic Parotitis
- 12- Tetanus
- 13- Rabies
- 14- Influenza
- 15- Acute Encephalitis
- 16- Cerebrospinal meningitis
- 17- Eye diseases in newborns
- 18- Puerperal fever
- 19- Food poisoning

- 20- Syphilis
- 21- Amoebic dysentery
- 22- Bacillary dysentery
- 23- Other venereal diseases

Section (c):

- 1- Tuberculosis
- 2- Malaria
- 3- Leprosy
- 4- Anthrax
- 5- Trachoma
- 6- Scabies
- 7- Intestinal and urine parasites

Table (2)
Period of Isolation of Infected Persons
Period of Quarantine or Isolation of Contact
Persons

Disease	Period of Isolation of Infected Persons	Period of Quarantine or Isolation of Contact Persons
1- Plague	Six days after all symptoms disappear and after verifying that the patient's mattress, body and clothes are free of insects.	<p>a- In the case of pneumonic plague, six days and verifying that the mattress, body and clothes are free of insect vectors.</p> <p>b- In the case of bubonic plague, six days and verifying that the mattress, body and clothes are free of insect vectors.</p>
2 - Cholera	Five days after the symptoms disappear and the stool and urine culture tests, conducted three times consecutively with at least 24 hours in between for bacteria identification, prove to be negative.	Five days from the last exposure to the disease and after the lab test conducted to identify bacteria in the stool prove to be negative. As for those who work in houses and stores where cases of the

Disease	Period of Isolation of Infected Persons	Period of Quarantine or Isolation of Contact Persons
		disease have occurred, they must be isolated throughout the period of their stay in the houses or the stores until the disease has ceased to exist based on clinical and lab tests
3 - Yellow fever	The first six days of the fever after placing the patient in a room with screen nets on the doors and windows.	Six days from the last exposure to the disease unless the person has been vaccinated recently.
4 - Small-pox	Forty days from the occurrence of the disease and after verifying that the scabs and contractions have disappeared, the mucous membranes are safe and the patient has bathed.	Fourteen days from the last exposure to the disease unless the person has already had the smallpox, has been recently and successfully vaccinated for the smallpox or has undergone a new immunity reaction.
5 - Typhus	Three days after the symptoms disappear and after verifying that the patient's mattress, body and clothes are free of insect vectors.	Fourteen days from the date of eliminating the insects from the mattress, body and clothes.

Disease	Period of Isolation of Infected Persons	Period of Quarantine or Isolation of Contact Persons
6 - Intermittent fevers	Until the symptoms disappear and after verifying that the patient's mattress, body and clothes are free of insect vectors.	Eight days from the date of eliminating the insects from the mattress, body and clothes.
7- Scarlet fever	Forty days from the occurrence of the disease and after verifying that the scabs and contractions have disappeared, the mucous membranes of the nose and throat are safe and the patient has bathed.	Eighteen days from the last exposure to the disease.
8- Diphtheria	Two weeks after healing; the period shall be reduced if the lab tests on the throat and nose secretion cultures, conducted twice with one week interval, prove to be negative.	Until the lab tests on the throat and nose secretion cultures, conducted twice with 24 hours interval, prove to be negative, especially in the case of those who work in food service and who are in very close contact with the infected person, in order to verify that they are not carrying the microbe.

Disease	Period of Isolation of Infected Persons	Period of Quarantine or Isolation of Contact Persons
		<p>As for those who are under eighteen years of age, if they are immunized and their lab tests of the nose and throat secretions, conducted twice with 24 hours interval, prove to be negative, they shall not be quarantined or isolated from school. On the other hand, if they are not immunized, they shall be quarantined or isolated for one week from the last exposure to the disease, provided the nose and throat secretion tests, conducted twice with at least 24 hours interval, prove to be negative.</p>
9- Mumps	Seven days after the swelling of the parotid gland and the salivary gland disappears or twenty-one days from the occurrence of the disease.	

Disease	Period of Isolation of Infected Persons	Period of Quarantine or Isolation of Contact Persons
10- Measles	Eighteen days from the occurrence of the disease and the outburst of the rash.	If the disease is widely spread among the groups, the quarantine shall not be applicable, however the student exposed to the disease must be isolated from his school for eighteen days since the last exposure.
11- Pertussis	Thirty days from the occurrence of the whooping cough.	If the person is immunized, he shall not be quarantined nor isolated from his school. As for those who are not immunized, they shall be isolated for ten days from school and other group environments since their last exposure to the disease.
12- Chicken pox	Sixteen days from the occurrence of the disease.	
13- Dysentery	Seven days after the clinical symptoms disappear or after the results of the patient's stool culture tests, conducted three times	The persons working in food service shall be barred from work throughout the period of contact with the infected person until the

Disease	Period of Isolation of Infected Persons	Period of Quarantine or Isolation of Contact Persons
	with at least 24 hours interval, prove to be negative.	contact person's stool test, conducted three times with at least 24 hours interval, prove to be negative.
14- Poliomyelitis	Thirty days from the occurrence of the disease or until the severe symptoms disappear.	Twenty-one days from the last exposure to the disease unless the person has been vaccinated.
15- Cerebral fever	Until clinical healing and verifying that the results of the lab tests on the nose and throat secretions, conducted two times with 24 hours interval, prove to be negative.	
16- Typhoid	At least one week after the clinical symptoms disappear, provided that the patient is placed under observation until the lab tests on the stool and urine cultures, conducted three times with 24 hours interval, prove to be negative.	The persons working in food service shall be barred from work throughout the period of contact with the infected person until the lab tests on the contact person's stool and urine cultures, conducted three times with at least 24 hours interval, prove to be negative.

Disease	Period of Isolation of Infected Persons	Period of Quarantine or Isolation of Contact Persons
17- Amebic dysentery	The persons working in food service shall be barred from work until they recover completely and the lab tests on their stool cultures, conducted three times with at least 3 days interval, prove to be negative.	As stated on the side.
18- Malta fever	Until the patient recovers completely and the symptoms disappear.	
19- Encephalitis	Until the patient recovers completely and the symptoms disappear.	
20- Glan- ders	Until the patient recovers completely and the symptoms disappear.	
21- Tra- choma	Until the severe fit is over.	
22- Scabies 23- Favus 24- Tinea	Until complete recovery.	
25- Tuber- culosis of all types	Every person with an open injury shall be isolated in a sanitarium or hospital until the infection disappears.	The persons working in food service and the patient shall be placed under observation and shall undergo clinical and X-ray tests until

Disease	Period of Isolation of Infected Persons	Period of Quarantine or Isolation of Contact Persons
		they are free of the disease.
26- Influenza	Until complete recovery.	
27- Leprosy	The person whose disease is contagious shall be isolated until the infection disappears.	
28- Rabies	During the treatment.	
29- Conjunctivitis	Until complete recovery.	
30- Other contagious diseases not stated	As determined by the Competent Health Authority.	As determined by the Competent Health Authority.
31- Syphilis, gonorrhea and other venereal diseases	No restriction shall be imposed if the patient is undergoing continuous medical treatment. If the patients' work requires them to come into contact with others (ie. barbers, housemaids, nannies, nurses...), they shall be barred from work until they recover completely and the infection disappears.	

Table (3) Diseases Transmitted from Animals to Humans

The diseases are the following:

- 1- Anthrax
- 2- Malta fever
- 3- Glanders
- 4- Tetanus
- 5- Hemorrhagic jaundice
- 6- Rabies
- 7- Psittacosis
- 8- Bovine tuberculosis
- 9- Rat bite fever

and other communicable disease that are transmitted from animals to humans and that are announced by a decision of the Minister upon their occurrence.

**Federal Law No. (28) of 1981
Concerning the Detention and
Treatment of the Mentally ill**

Federal Law No. (28) of 1981 Concerning the Detention and Treatment of the Mentally ill

We, Zayed Bin Sultan Al-Nahyan, President of the State of the United Arab Emirates,

Upon consideration of the Provisional Constitution,

And Federal Law No. (1) of 1972 , concerning the Jurisdictions of Ministries and the Powers of Ministers, as amended,

And Cabinet Decision No.(3) of 1973, concerning the Ministry of Health Regulation, as amended,

And based upon the proposal of the Minister of Health, the approval of the Cabinet and the Federal National Council, and the ratification of the Supreme Council of the Federation,

Have Promulgated the following Law:

Article 1

In applying the provisions of this Law, the following words and expressions shall have the definitions set forth opposite each one:

- 1- "Psychosis" means a medical condition that causes mental disturbance and makes the psychotic person lose contact with reality. It includes mental disorder, mental deficiency and psychotic personality disorder.
- 2- "Age of Majority" means that a person has attained the age of 18 years.
- 3- "Authority" means the departments of the judiciary, the public

prosecution or the police, as the case may be.

4- "Patient's Next of Kin" means first degree relatives and their close relatives, and in their absence, the chief of the tribe or his designate or the police.

5- "Specialist Physician" means a physician who is specialized in neurological and psychological illnesses and practices his specialization at a government department or licensed institution.

6- "Department of Neurology and Psychiatry" means the department that is specialized in treating cases of psychosis, whether it be part of a public government hospital or an independent department.

7- "Department's Council" means the medical body consisting of the Head of the Department of Neurology and Psychiatry and at least two specialist physicians from the Department. Specialists may be provided from elsewhere if the required number is not available within the Department.

Article 2

Admission of a psychotic patient shall be either voluntary or by forced detention at the Department of Neurology and Psychiatry in accordance with the following articles.

Article 3

Admission of a psychotic patient to the Department of Neurology and Psychiatry shall be considered voluntary and of his own free will if the patient has attained the Age of Majority and is fit to express his will. If the patient has not attained the Age of Majority, voluntary admission shall take place upon request of the parent or guardian.

Article 4

Forced detention at the Department of Neurology and Psychiatry shall take place when a patient has suspected psychosis and there is fear that he might commit a breach of security or public order, or that his behavior might endanger his own safety or the safety of others. Detention in this case would be by order of the Authority. A patient's Next of Kin may request the Authority to take necessary measures for detention.

Article 5

In the event of forced detention, the Department's Council shall decide, within the 48 hours following the patient's detention, whether the patient's condition requires detention. Period of detention will not exceed one week from the date of detention. If, following the aforementioned period, the Council decides that the patient's condition does not warrant discharge from the Department, it may extend the period of detention to a maximum of one month every time.

The Authority shall be notified of every extension, and the Patient's Next of Kin or the party requesting detention may object to extension. The Department's Council shall then issue its decision regarding the objection within 72 hours from the date of receipt of objection, and its decision shall be final.

Article 6

The Head of the Department of Neurology and Psychiatry shall notify the competent Authority, as the case may be, of the patient's forced detention within 48 hours following the date of detention so that necessary measures for safeguarding the patient's monies may be taken.

Article 7

If the party requesting detention of the psychotic patient is a court of law and it requests that he be released or made to appear before it to stand trial or deliver testimony, the Department's Council shall, within a maximum period of ten days from the date of receiving the request, decide whether it is possible to entertain such request. In the event of rejection, the Council shall justify its decision.

Article 8

If the detention period expires and is not renewed, the patient may request to stay at the Department, in which case admission would be regarded as a voluntary admission.

Article 9

If the Department's Council deems that the condition of the patient in forced detention permits him to spend a probation period outside the Department, he may leave the Department for such period, after obtaining an undertaking from his Next of Kin to safeguard, monitor and protect him from harm or from causing harm to himself or to others.

Article 10

If the patient in forced detention is absent from the Department without permission and the Council deems that there is no 1 reason to prevent him from spending a probation period, he shall be treated as if he has obtained prior permission, and the Authority shall be notified accordingly. In this case, the Patient's Next of Kin will undertake to safeguard, monitor and protect him from harm or from causing harm to himself or to others.

Article 11

The Council will review the patient's case after his probation period outside the Department and will make its decision based on the patient's behavior during the probation period.

Article 12

If, in some cases, special guard services are required, the Department may seek the assistance of the police.

Article 13

Without prejudice to the application of any severer punishment under any other law, any violation of the provisions of this Law or its implementing decisions is punishable by a fine of not less than two hundred Dirhams and not more than five thousand Dirhams.

Article 14

The implementing decisions of this Law shall be issued by a decision of the Minister of Health in collaboration with the Minister of Justice, Islamic Affairs and Endowments.

Article 15

This Law shall be published in the official gazette and shall come into effect on the date that it is published.

Zayed Bin Sultan Al-Nahyan President of the United Arab Emirates

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