



Schweizerische Eidgenossenschaft  
Confédération suisse  
Confederazione Svizzera  
Confederaziun svizra

Federal Department of Justice and Police FDJP

**State Secretariat for Migration SEM**  
Directorate for International Cooperation  
Return Division  
Americas, Europe, CIS, Far East Section

P.P. CH-3003 Berne-Wabern, SEM

**Courrier A (advanced copy by e-mail)**

Embassy of Georgia  
Consular Section  
Mrs Ketevan Esiashvili  
Counsellor/Consul  
Seftigenstrasse 7  
3007 Berne

Reference: Special charter flight organised by Switzerland on 16 June 2020

Your reference:

Our reference: Jnr

Berne-Wabern, 3 June 2020

**Special charter flight organised by Switzerland on 16 June 2020**

Dear Mrs Esiashvili

We would like to inform you that following persons will be repatriated by a special repatriation flight from Switzerland to Georgia which is scheduled for Tuesday, 16 June 20:20 (please find the flight details in the enclosure):

**N 689 133 – JANJGAVA Elene, 18.02.1990 (\*\*) and her son TSIKLARI Nikoloz, 13.10.2010 (\*)**

**N 717 384 – NEMSITSVERIDZE Gaga, 01.08.1988, his wife BURJALIANI Teona, 03.06.1990 and their children NEMSITSVERIDZE Koba, 27.02.2015 (\*), NEMSITSVERIDZE Nia, 30.01.2016 and NEMSITSVERIDZE Marta, 05.11.2019 (\*)**

**N 721 732 – BATLIDZE Khatuna, 28.09.1967 (\*)**

**N 715 667 – MTCHEDLISHVILI Giorgi, 06.05.1988 (\*\*)**

*(\*) = persons with some health problems*

*(\*\*) = we are still waiting for the medical information form which will be forwarded to you as soon as possible*

Please find copies of the travel documents enclosed as well as the medical clearances.

The medical care is guaranteed, there are no contraindications to deportation.

We would like to emphasize that concerning N 717 384 – NEMSITSVERIDZE Koba, 27.02.2015 a medical handover followed by a medical check in a pediatric clinic or direct transfer to the Jo Ann Medical Center Tbilisi is according to Swiss doctors strongly advisable.

Concerning N 689 133 TSIKLARI Nikoloz, 13.10.2010, also a medical handover is to a psychiatric specialist is strongly recommended.

The passengers will be escorted by Swiss police officers and medical personnel (physician, urgentist) as well as by a representative of the Federal Department of Justice and Police and a Swiss observer.

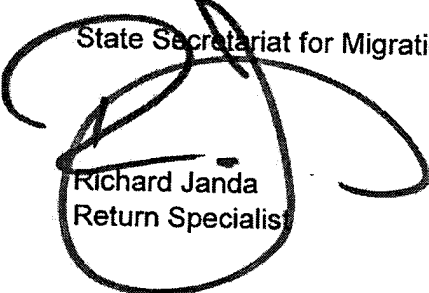
The SEM will ensure maximum security measures in the process of the organized return (e.g. gloves and medical masks, symptom checks before start – persons with symptoms of COVID-19 will not participate at this flight).

Please inform the concerned authorities in Georgia about this special flight.

We are at your disposal of any information you may require.

Thank you for your kind assistance in this matter.  
Yours sincerely

State Secretariat for Migration SEM



Richard Janda  
Return Specialist

**Copy to:**

Ministry of Internal Affairs, Migration Department (via RCMES)

## Sonderflug

Datum:

Destination/en:

Routing:

Fluggerät CHE:

Fluggesellschaft CHE:

Fluggerät FRONTEX:

Fluggesellschaft FRONTEX:

16.06.2020  
Genf-Tiflis-Genf  
GVA-TBS-GVA  
Airbus A 220-100  
Swiss

### Flugplan main Charter:

Datum	Kurs	UTC	Destination		Lokal-zeit	Flug-Std.
16.06.2020		16.06. 08:00	Genf	GVA	10:00	
16.06.2020		16.06. 12:50	Tiflis	TBS	14:50	04:50
16.06.2020		16.06. 13:35	Tiflis	TBS	15:35	
16.06.2020		16.06. 18:25	Genf	GVA	20:25	04:50



## MEDIF - MEDICAL INFORMATION FORM

<b>1. Patient (Name / First name)</b>			
NEMSITSVERIDZE Koba			
Number	Date of Birth	Gender	
717 384	27FEB15	male	
<b>2. Medical expert (First name / Name)</b>			
Serafettin Onk			
Address/E-Mail	Phone contact number (+prefix) preferably mobile phone		
oseara@hin.ch	+41 44 803 95 70		
<b>3. Diagnosis in details</b> (including date of onset of current illness, episode or accident and treatment)			
Documents submitted by SwissRepat 200519 11.23: 17 pages and 200103 11.55: 66 pages Recurrent syncope and presyncope 02/20. Right ventricular hypoplasia, probably tricuspid atresia IIb, large atrial septal defect, ventricular septal defect, transposition of the large arteries, sinus arrhythmia. Years.			
Documents requested by OSEARA / further clarifications submitted to SwissRepat done by the responsible Canton: -			
Is the illness contagious?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	
Suicidality?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	n.a. <input type="checkbox"/>
Indication of hunger strike?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	n.a. <input type="checkbox"/>
Nature and date of any recent and/or relevant surgery.			
10/2015: Glenn anastomosis			
<b>4. Current symptoms and severity</b>			
Recurrent synkopes and worsening general condition, shortness of breath, cynosis			
<b>5. Escort</b>			
a. Is the patient fit to travel unaccompanied?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
b. If no, who should escort the patient?	Doctor <input checked="" type="checkbox"/>	Nurse <input checked="" type="checkbox"/>	Other <input type="checkbox"/>
<b>6. Mobility</b>			
a. Is the patient able to walk without assistance?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
b. Wheelchair required for boarding.			



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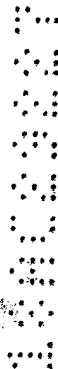
Federal Department of Justice and Police FDJP  
**State Secretariat for Migration**  
Return Division

WCHR	<input type="checkbox"/>	WCHS	<input type="checkbox"/>	WCHC	<input type="checkbox"/>	
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## MEDIF - MEDICAL INFORMATION FORM

<b>7. Medication list needed during flight</b>			
Oxygen up to 4/l per minutes is indicated.			
<b>8. Current medication</b>			
<b>9. Reserve medication</b>			
<b>10. Other medical information</b>			
If the person has a fever, cough, breathing difficulties, the person must be tested for SARS-CoV 2 48 hours before returning.			
A medical escort from home to the airport is strongly indicated.			
<b>11. Special Assistance Form SAF</b>			
A. Ambulance from airport:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		
B. Assistance required upon arrival:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		
C. Other grounds support required:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		
D. Specific needs/support/equipment (incl. own equipment) required upon arrival:			
Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>			
If yes, please give further information:			
→ Oxygen. Medical handover. Medical check in a pediatric clinic or direct transfer to the Jo Ann Medical Center Tbilisi			
Medical expert signature and stamp	ONK, MD GLN 7601007786992	Place and date	ZRH, 200522



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