

Technical Bulletin No. 11

INTERAGENCY EMERGENCY HEALTH KIT 2011

Background:

The Emergency Health Kit is an integral part of UNICEF's immediate response to most emergencies. The Interagency Emergency Health Kit 2011 (IEHK 2011) is the fourth edition of the World Health Organization (WHO) Emergency Health Kit. The first "WHO Emergency Health Kit" was launched in 1990. After revision and further harmonization, the second kit "The New Emergency Health Kit 98" was endorsed by WHO in collaboration with international and nongovernmental agencies. The third kit "The Interagency Emergency Health Kit 2006", (IEHK 2006) accommodated: emergency post-exposure prophylaxis (PEP) of Human Immunodeficiency Virus (HIV) infection and other Sexually Transmitted Infections (STIs) following sexual assault; the increasing parasite resistance to commonly available antimalarials and antibiotics; injection safety; and the field experiences of agencies that use the emergency health kit. This current kit (IEHK 2011) further improves the kit content by taking into consideration the need for mental health care in emergency settings (one anti-psychotic, one antiparkinsonism medicine (to deal with side effects from the anti-psychotic medicine), one anti-convulsant/antiepileptic, one antidepressant and one anxiolytic as oral formulations) and also the special needs of children (paediatric formulations of azithromycin, cefixime, zidovudine and lamivudine tablets).

Purpose:

Over the years, many organizations and national authorities have adopted the concept of the emergency health kit as a reliable, standardised, affordable and quickly available source of the essential medicines and medical devices needed urgently in a disaster situation.

The contents of the IEHK 2011 are based on epidemiological data, population profile, disease patterns and assumptions based on experience gained in emergency situations.

The IEHK 2011:

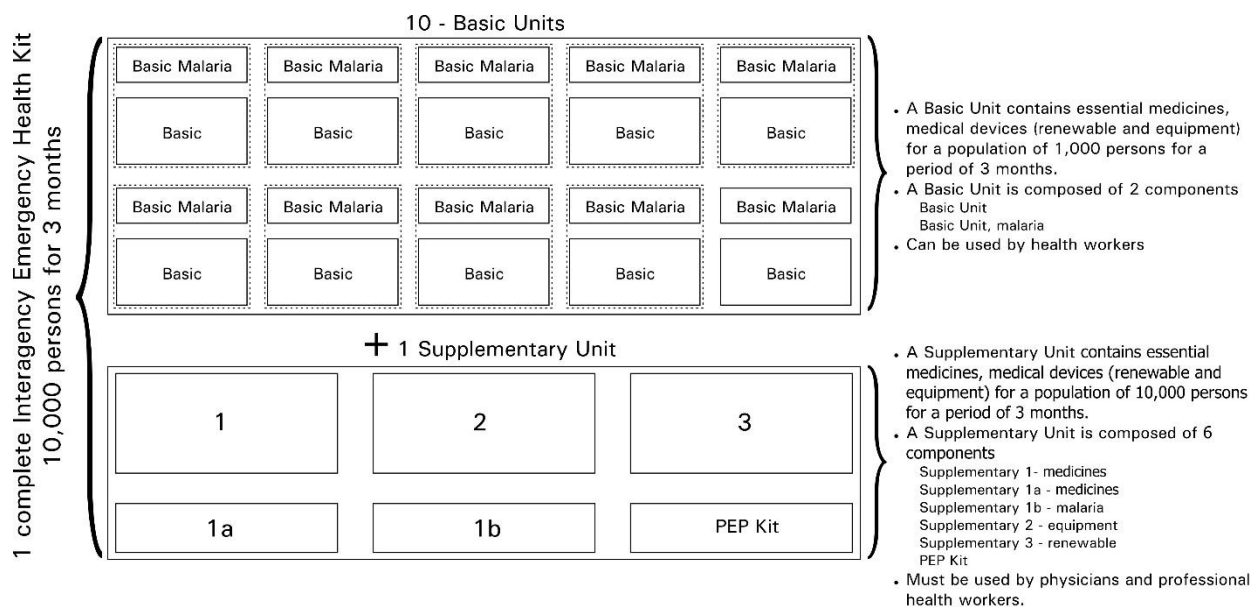
- contains essential medicines and medical devices (renewables and equipment) for a population of 10,000 persons for a period of 3 months
- consists of two different sets of medicines and medical devices, namely **the Basic Unit** and the **Supplementary Unit**. To facilitate distribution to smaller health facilities on site, the quantities of medicines and medical devices in the Basic Unit have been sub-divided into 10 identical units for 1,000 people each (see the figure on the kit concept below)
- should always be ordered to include the Basic unit – malaria S9901005, the Supplementary Unit 1b– malaria S9901008 and the Patient Post-Exposure Prophylaxis (PEP) Kit S99001003, unless there is no need for antimalarial medicines and/or post-exposure prophylaxis treatments
- is not designed for immunization, nutritional programmes, resuscitation/surgical activities and management of communicable diseases such as HIV/AIDS, tuberculosis or leprosy. Supplies related to these diseases should be identified on the basis of a needs assessment.

Terminology

In this context, a “kit” refers to the complete kit (10 Basic Units plus one full Supplementary Unit) as explained in the figure on the kit concept below. The component elements are referred to as “Units”.

Kit concept: Interagency Emergency Health Kit 2011 – Complete

The first order for the IEHK 2011 shall include 10 Basic Units (each made of two components - the Basic and the Basic Malaria) and one full Supplementary Unit (made of six components).



Content of a kit:

A complete IEHK 2011 consists of 10 Basic Units to be used by health workers and 1 full Supplementary Unit to be used by physicians and other professional health workers.

To review the specific contents of IEHK 2011 Units, please search the UNICEF Supply Catalogue:

<https://supply.unicef.org>

Tool bar: Kits > Medical kits

Basic Unit for Health Workers

Each Basic Unit can be used by healthcare workers with limited training. A Basic Unit contains essential medicines, medical devices (renewable and equipment) and stationery for a population of 1,000 persons for a period of 3 months.

Below are the components of the Basic Unit with their respective UNICEF catalogue numbers.

S9901004 - IEHK2011 kit, Basic Unit

S9901005 - IEHK2011 kit, Basic Unit, malaria

Supplementary Unit for Physicians and Professional Health Workers

The Supplementary Unit must be used only by physicians and other professional health workers. A Supplementary Unit contains essential medicines (some of which are injectable), medical devices (renewable and equipment) for a population of 10,000 persons for a period of 3 months. It does not contain any medicines and medical devices (renewables and equipment) from the Basic Unit. The Supplementary Unit can only be used with one or more Basic Units.

Below are the components of the Supplementary Unit with their respective UNICEF catalogue numbers.

S9901006 - IEHK2011 kit, Supplementary 1- medicines

S9901007 - IEHK2011 kit, Supplementary 1a - medicines

S9901008 - IEHK2011 kit, Supplementary 1b - malaria

S9901009 - IEHK2011 kit, Supplementary 2 - equipment

S9901010 - IEHK2011 kit, Supplementary 3 - renewable

S9901003 - IEHK2011, PEP kit

Notes:

Basic Unit

The Basic Unit contains essential medicines, none of which can be injected. The medical devices (renewables and equipment) contained in the Basic Unit are essentially for dressing purposes.

IEHK 2011 Users guidelines, in English, French and Spanish, are included in each Basic Unit.

Please refer to the interagency document published by WHO:

Title: "The Interagency Emergency Health Kit 2011"

<http://www.who.int/medicines/publications/emergencyhealthkit2011/en/>

Basic Unit, malaria:

The Basic Unit, malaria contains antimalarial medicines (none of which can be injected) for the treatment of uncomplicated malaria, and a rapid diagnostic test kit.

Supplementary 1 – medicines:

The Supplementary 1 - medicines contains essential medicines. The selection and quantification of the medicines included are based on recommendations for standard treatments.

Please note: In the IEHK 2011 Users guideline, Misoprostol 200 micrograms, 60 tablets is listed. **In the UNICEF IEHK 2011 this item is not included. Misoprostol 200 microgram 60 tablets can however be ordered separately on a direct shipment basis through UNICEF Supply Division.**

Two manuals developed by Médecins sans Frontières (MSF), in English, French and Spanish languages, to describe standard treatments for target diseases are included in the Supplementary 1 - medicines.

Please refer to Médecins sans Frontières (MSF) documents:

Title: "Essential drugs: Practical guidelines"

Title: "Clinical guidelines: - Diagnostic and treatment manual"

http://www.refbooks.msf.org/msf_docs/en/MSFdocMenu_en.htm

Supplementary 1a – medicines:

Important: The Supplementary 1a - medicines contains medicines that normally need import authorisations (narcotic/psychotropic substances). Since this kit is usually urgently required and needs to be shipped within 24 hours, it does not allow time to apply for import and export authorisations.

Until further notice, UNICEF Supply Division will not require import authorisations for this kit. However, Country Offices ordering or receiving this kit are advised to investigate if their national authorities require an import authorisation.

For these shipments, UNICEF Supply Division will complete the “Notation Form for Emergency Supplies of Controlled Substances” and forward it to the Danish Medicines Agency (DMA).

Please refer to [Supply Directive: CF/SD/2008-002 Rev 01 - Ordering of narcotic and/or psychotropic pharmaceutical products](#). (UNICEF Staff only)

The Supplementary 1a - medicines also contains medicines that need to be stored at controlled temperatures (**cold chain**). **The Supplementary 1a - medicines is therefore only supplied by air.**

Supplementary 1b – malaria:

The Supplementary 1b - malaria contains injectable antimalarial medicines.

Supplementary 2 – equipment:

The Supplementary 2 - equipment contains essential medical equipment (e.g. basic diagnostic and sterilisation equipment, medical utensils, minor surgical instruments sets). It also includes items to allow for the provision of clean water.

Supplementary 3 – renewable:

The Supplementary 3 - renewable contains essential medical devices, consumable. Most of the items are sterile and for single use.

PEP kit:

The PEP kit contains medicines for emergency post-exposure prophylaxis of HIV infection and other Sexually Transmitted Infections (STIs) following sexual assault. It also contains emergency contraceptives and pregnancy tests.

Ordering an Interagency Emergency Health Kit 2011 Complete:

To fulfil the objectives outlined above, a complete Interagency Emergency Health Kit 2011 (see below) should be ordered against the following item numbers according to the quantities indicated:

Complete Interagency Emergency Health Kit 2011

Item number	Description	Quantities
S9901004	IEHK2011,kit,basic unit	10
S9901005	IEHK2011,kit,basic unit, malaria	10
S9901006	IEHK2011,kit,suppl.1-medicines	1
S9901007	IEHK2011,kit,suppl.1a- medicines	1
S9901008	IEHK2011,kit,suppl.1b-malaria	1
S9901009	IEHK2011,kit,suppl.2-equipment	1
S9901010	IEHK2011,kit,suppl.3-renewable	1
S9901003	IEHK2011,PEP kit	1

Guidance on how to order the IEHK 2011 can be found on the following links:

UNICEF staff only: "[How to order- Emergency Orders and Emergency Supply Procurement](#)"

If you are not a UNICEF staff member you can find information related to purchasing supplies and/or services here: http://www.unicef.org/supply/index_purchasing.html

Important

Requisitioners are recommended to order the Complete Interagency Emergency Health Kit 2011. However, where there is no need for antimalarial medicines and/or post-exposure prophylaxis treatments, customers should order all the other units except for:

S9901005 IEHK2011,kit,basic unit,malaria

S9901008 IEHK2011,kit,suppl.1b-malaria

S9901003 IEHK2011,PEP kit

Note: As a general rule, the Complete Interagency Emergency Health Kit 2011 should be ordered in line with programmatic requirements. The ability to re-order pre-packed kits separately gives the necessary flexibility to adapt supplies to needs, limits the risk of overstocking equipment and running short of consumables, and allows for fast replenishment in the early phase of an emergency. After the acute phase of an emergency is over and basic health

needs have been covered by the basic and supplementary units, specific needs for further supplies should be assessed as soon as possible.

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