

# The Interagency Emergency Health Kits: Information Note

UNICEF Supply Division

December 2019

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### 1 Summary

- This information note provides an update on the Interagency Emergency Health Kit (IEHK) packed by UNICEF,<sup>1</sup> which contains medicines, medical devices, and equipment for a population of 10,000 people for a three months period.
- The World Health Organization (WHO) in collaboration with UNICEF and others, updated the current IEHK in 2017, made up of a basic module and a supplementary module containing more complex medicines and medical devices.
- Ideal for rapid deployment and prepositioning as part of emergency response preparedness, the IEHK is specifically designed to be self-sufficient to meet the priority health needs of populations affected by emergencies that have limited access to routine health care services and for use in the early phase of an emergency when it is not yet feasible to identify and quantify needs.
- The full IEHK 2017 packed by UNICEF can represent approximately 65 boxes, fitted onto four pallets, weighing 1.25 metric tons, and takes up a volume of 7.15 m<sup>3</sup>, which can make it difficult for secondary dispatch, transport, handling, and inventory management in emergency situations. In order to help facilitate kit dispatching, handling, and management efficiency for field and logistic staff, UNICEF introduced a new and innovative labelling structure, colour coding, and symbols, which is a labelling convention that may be adopted by other agencies.

### 2 Brief Background

The Interagency Emergency Health Kit is an integral part of UNICEF's supplies for immediate response to most emergencies. The first Emergency Health Kit was developed in 1990 through the collaboration of WHO, UNICEF, the United Nations Population Fund (UNFPA), the United Nations High Commissioner for Refugees (UNHCR), Médecins Sans Frontières (MSF), the International Committee of the Red Cross (ICRC), and the International Federation of Red Cross and Red Crescent Societies (IFRC).

The IEHK is principally designed to meet the priority health needs of a population affected by emergencies that have limited access to routine health care services. It contains essential medicines and medical devices (renewables and equipment) for a population of 10,000 persons for a period of three months.<sup>2</sup> However, it does not cater for all medical needs, neither is the kit and its modules intended as re-supply kits. It must be emphasized that although supplying medicines and medical devices in standard pre-packed kits is convenient early on in an emergency, the specific local needs must be assessed accordingly as soon as possible before further supplies are ordered. All efforts should be made to strengthen and develop a medical supplies and logistics management information system to enable appropriate quantification and stock management as soon as possible as the emergency situation stabilizes.

The IEHK does not cater for all medical needs. It does not fully cover the needs for immunization, nutrition, reproductive health, HIV/AIDS, tuberculosis, leprosy, major surgery, and the chronic management of non-communicable diseases and other conditions requiring continued care. These are met through other kits or order of specific products.

Basic maternal and new born health needs in emergencies are catered for in the IEHK. More specialised products are included in a separate [midwifery kit](#),<sup>3</sup> an [obstetric kit](#),<sup>4</sup> and a soon upcoming new-born kit. The United Nations Population Fund (UNFPA) packs the interagency emergency reproductive health kits.<sup>5</sup>

The IEHK is revised approximately every ten years. Interagency collaboration may undertake ad hoc revisions to align contents with changes WHO makes to its respective treatment guidelines, WHO's model list of essential medicines (EML), and WHO's model list of essential medicines for children (EMLc) to ensure contents remain consistent, relevant, and fit the changing needs and requirements of various emergency situations.

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<sup>1</sup> World Health Organization, [The Interagency Health Kit 2017](#), WHO, Geneva, 2019.

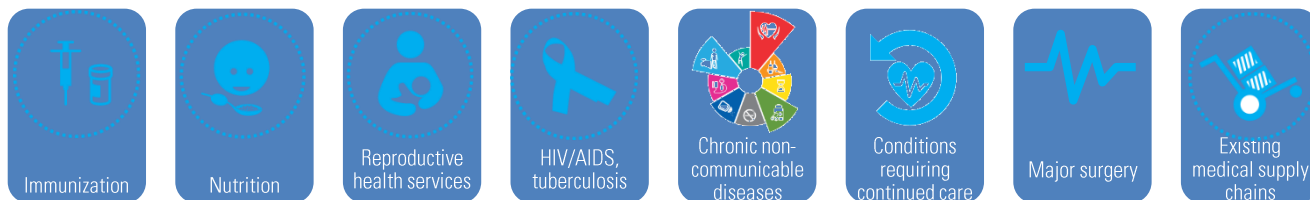
<sup>2</sup> Ibid., p. 8.

<sup>3</sup> UNICEF, [Midwifery Kit](#), UNICEF, Copenhagen, 2008.

<sup>4</sup> UNICEF, [Obstetric Surgical Kit](#), UNICEF, Copenhagen, 2008.

<sup>5</sup> United Nations Population Fund, [Emergency Reproductive Health Kits](#), UNFPA, New York, 2011.

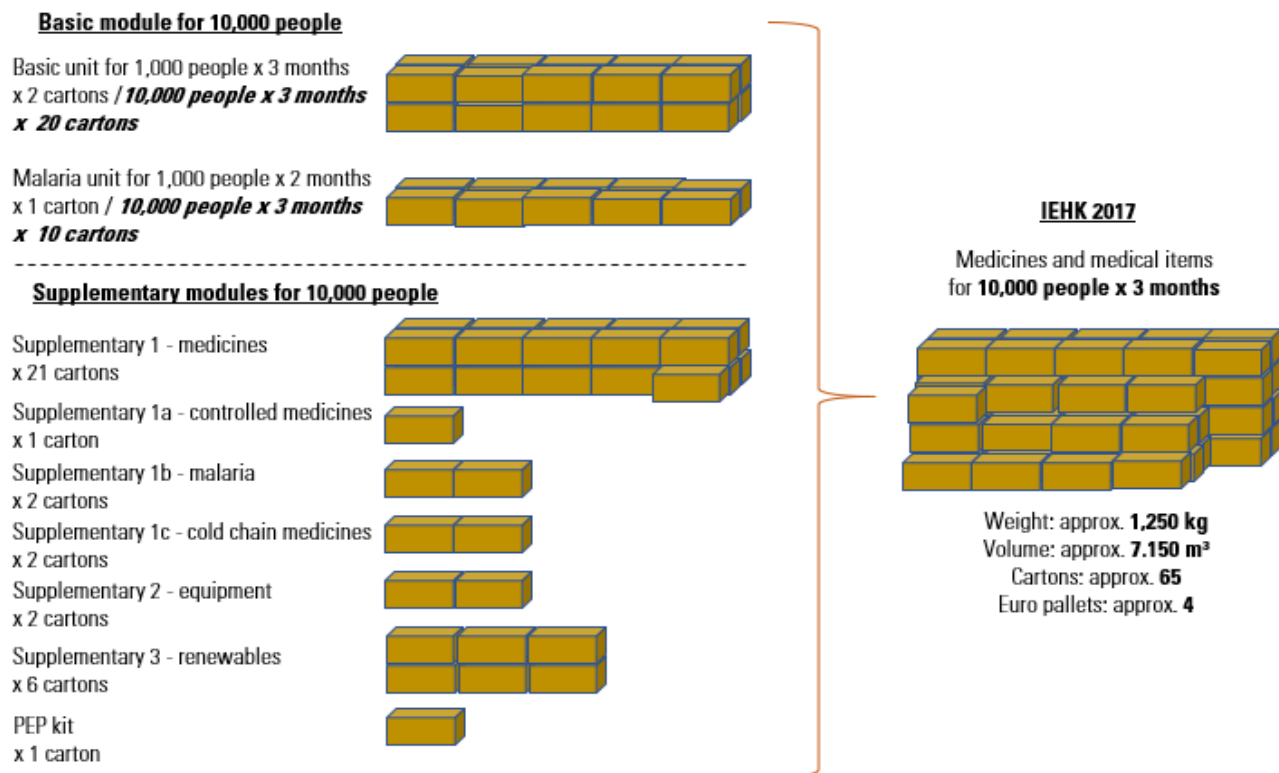
The IEHK is not designed to fully cover needs of the following:



### 3 The Interagency Emergency Health Kit 2017

In 2017, WHO, UNICEF, and partners, revised the IEHK. The current IEHK 2017 replaces the previous IEHK 2011.<sup>6</sup> The complete IEHK 2017 still contains essential medicines and medical devices (renewables and equipment) for a population of 10,000 people for a period of three months. It weighs approximately 1,250 kg, taking up approximately 7.15 m<sup>3</sup>, made up of approximately 65 cartons on approximately four Euro pallets. To accommodate handling considerations, the kit is broken down into a **basic modules** and **supplementary modules** (Figure 1).

Figure 1 UNICEF IEHK 2017 Broken Down per Its Module Components



Source: UNICEF Supply Division

**Note:** The number of cartons, shippers, weights, and volumes may differ at the time kits are packed and supplied.

<sup>6</sup> WHO, [The Interagency Health Kit 2017](#).

### 3.1 IEHK Labelling

UNICEF developed colour coded kit labels with symbols in collaboration with the Technical University of Denmark (DTU), to facilitate distinguishing kits and to facilitate storage, handling, and distribution logistics. In addition to the different colour for the different kits, all kit modules within a kit family are distinguished by a separate symbol, which can be used to match the different parts of the kit together. The symbols go together with the number of parts of each kit number (i.e. 1/19, 2/19...), which together with the kit name make it easier to identify, even for communities struggling with literacy. Each emergency kit family is represented by a bright colour; The IEHK colour code is green, as per the example below:

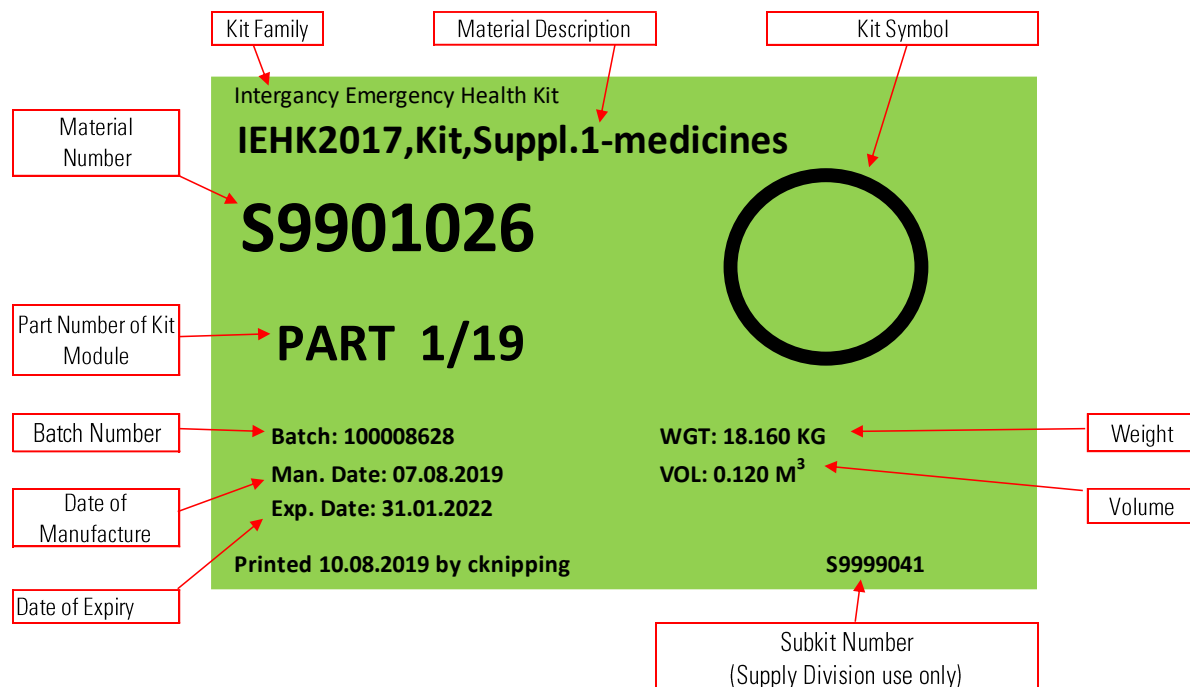
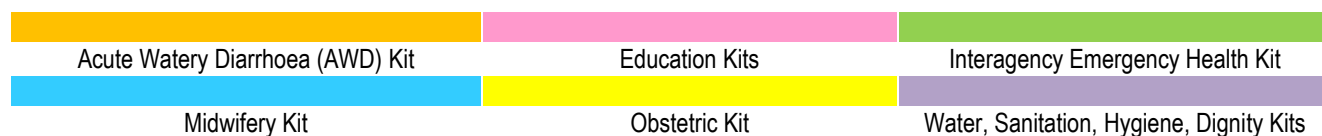


Figure 2 Other UNIEF Kit Colour Codes



### 3.2 The Basic Module

The basic module contains the essential medicines and medical devices (renewables and equipment) for a population of 10,000 persons for a period of three months for use by health workers. It is two parts, a basic unit, containing oral and topical medicines, medical devices, and a basic unit for malaria with oral antimalarial medicines and [malaria rapid diagnostic tests \(mRDTs\)](#).<sup>7</sup>

| Symbol | Material Number | Material Short Description                 | Quantity | Cartons    |
|--------|-----------------|--|----------|------------|
|        | S9901024        | IEHK 2017, kit, basic unit                 | 1        | 20 cartons |
|        | S9901025        | IEHK 2017, kit, basic unit malaria opt out | 1        | 10 cartons |

Source: UNICEF Supply Division

To facilitate distribution to smaller health facilities and clinics, the basic module is broken down into units sufficient to meet the needs of a target population of 1,000 persons for three months so that they can be dispatched down to a primary clinic.








<sup>7</sup> UNICEF, [Malaria Rapid Diagnostic Tests. \(mRDTs\)](#), UNICEF, Copenhagen, January 2016.

Each unit is carrying its own symbol as per the previous page. Whereas the basic module is supplied as a whole, countries can remove the basic malaria unit on request (as an opt out).

Some of the changes to the new kit from earlier versions, include a lowered strength of ibuprofen from 400mg to 200mg to facilitate flexible dosing and the needs for older children; the removal of magnesium trisilicate, and its replacement with omeprazole in line with WHO's latest model list of essential medicines (EML 2017) and WHO's model list of essential medicines for children (EMLc 2017) recommendations. The EML comprises a list of essential medicines that should be available in all functioning health systems. The latest WHO EML and EMLc version is accessible [here](#).<sup>8</sup>

### 3.3 The Supplementary Module

The supplementary module is made up of seven components, each one carrying the accompanying symbols below. They contain the medicines for non-communicable diseases and more complex products, such as injectable medicines and medical devices (renewable and equipment) that require at the minimum a physician or senior health worker. The supplementary module should be supplied with one or more basic modules.

| Symbol  | Material Number | Material Short Description                    | Quantity | Cartons               |
|---|-----------------|---|----------|-----------------------|
|    | S9901026        | IEHK 2017, kit, suppl.1-medicines             | 1        | 21 cartons / 1 pallet |
|    | S9901027        | IEHK 2017, kit, suppl.1a-medicines            | 1        | 1 carton              |
|    | S9901028        | IEHK 2017, kit, suppl.1b-malaria              | 1        | 2 cartons             |
|    | S9901022        | IEHK 2017, kit, suppl.1c-cold chain medicines | 1        | 2 cartons             |
|   | S9901029        | IEHK 2017, kit, suppl.2-equipment             | 1        | 2 cartons             |
|  | S9901030        | IEHK 2017, kit, suppl.3-renewable             | 1        | 6 cartons             |
|  | S9901023        | IEHK 2017, PEP kit                            | 1        | 1 carton              |

Source: UNICEF Supply Division

Some of the changes to the IEHK 2017 supplementary medicines module from earlier versions is that it now includes medicines for:<sup>9</sup>

- **Cardiovascular diseases**, and the treatment of acute severe hypertension; acute coronary syndrome; acute stroke; and acute heart failure (acetylsalicylic acid, amlodipine, enalapril, glyceryl trinitrate, furosemide, and heparin sodium). There has been an increase in the quantity of hydrochlorothiazide to allow for treatment of acute severe hypertension; as well as replacement of atenolol by bisoprolol in line with WHO's 2017 model EML recommendations.
- **Diabetes**, and the inclusion of human insulin (and insulin syringes) for the stabilization of acute life-threatening hyperglycaemia or diabetic ketoacidosis; and the inclusion of glucometer and urine test strips for ketones; glucose; and albumin.

<sup>8</sup> World Health Organization, [Essential Medicines and Health Products](#), WHO, Geneva, August 2019.

<sup>9</sup> WHO, [The Interagency Health Kit 2017](#).

- **Pulmonary diseases**, and the inclusion of beclomethasone; and an increase in the amount of salbutamol inhalers for treatment of acute asthma and acute chronic obstructive pulmonary disease (COPD) exacerbation; an increase in the quantity of prednisolone 5mg tablets to cover treatment of COPD and asthma; as well as the inclusion of a pulse oximeter for monitoring acute respiratory distress.
- **Other changes** include the addition of morphine tablets (immediate release) 10mg; the replacement of phenobarbital with carbamazepine 200mg scored tablet for easier access; phenobarbital remains a secondary option in case carbamazepine is not available, or if the country allows for phenobarbital importation; the revision of anti-infective medicines (replacement of cloxacillin by cefalexin to adapt to new recommendations, miconazole muco-adhesive tablets by nystatin suspension and removal of procaine benzylpenicillin, both for unavailability of quality assured products); the removal of promethazine (as no longer on WHO's EML); the replacement of amitriptyline by fluoxetine (following WHO updated EML); the increase in the amount of glucose for treatment of acute severe hypoglycaemia; and the introduction of new types of sutures to cover skin and face suturing.
- The inclusion of **guidelines** on mental health:  
[mhGAP Humanitarian Intervention Guide. Clinical Management of Mental, Neurological and Substance Use Conditions in Humanitarian Emergencies - WHO/UNHCR, 2015](#)
- and **non/communicable diseases**:  
[Package of Essential Noncommunicable \(PEN\) Disease Interventions for Primary Health Care in Low-Resource Settings. WHO, 2010](#)

### 3.3.1 Supplementary 1 – Medicines Module

Contains essential medicines, including injectables.

### 3.3.2 Supplementary 1a – Controlled Medicines Module

**Important note:** The kit for supplementary 1a – controlled medicines contain medicines that normally need export and import authorizations (narcotic/psychotropic substances). In situations of extreme urgency, UNICEF may not require import authorizations from recipient country prior to shipping this unit to dispatch IEHK kits rapidly. In such situations, UNICEF will complete the “Notation Form for Emergency Supplies of Controlled Substances” and submit it to the Danish Medicines Agency (DMA).

### 3.3.3 Supplementary 1b – Malaria Module

Contains injectable antimalarial medicines, injection devices, and container for sharps. It comes with treatment guidelines for severe malaria and poster reconstitution/administration of medicines.

### 3.3.4 The Supplementary 1c – Cold Chain Medicines Module

Contains medicines that must be transported and stored at 2 to 8°C (35°F to 46°F) in a cold chain and to be transported by airfreight.

### 3.3.5 Supplementary 2 – Equipment Module

Contains essential medical equipment such as basic diagnostic and sterilization equipment, medical utensils, minor surgical instruments sets, and items to allow for the provision of safe clean water.

### 3.3.6 Supplementary 3 – Renewable Module

Contains essential medical devices and consumables. Most are sterile and for single use. This module is packed separate from the equipment module to give users the necessary flexibility to replenish medical devices and consumables without re-ordering the whole kit of supplementary equipment.

### 3.3.7 PEP Kit

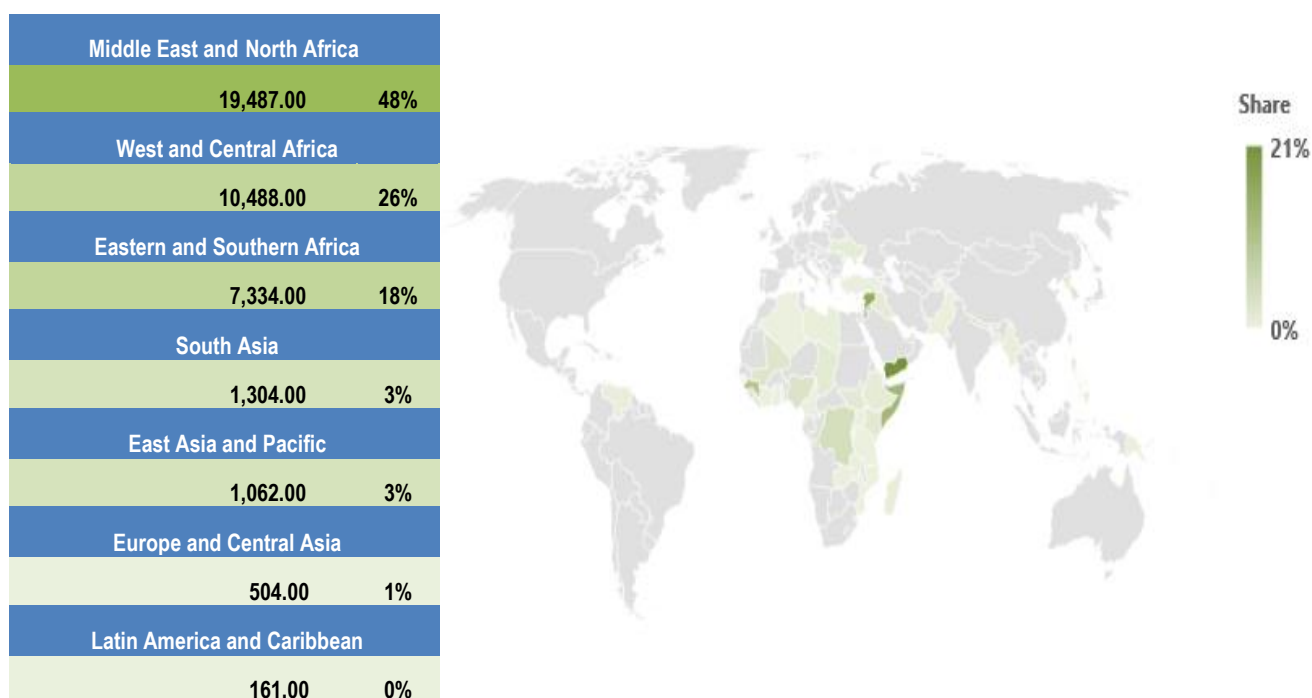
Contains medicines for emergency post-exposure prophylaxis of HIV infection and other sexually transmitted infections (STIs). It also contains emergency contraceptives and pregnancy tests.

## 4 Current Market Situation

### 4.1 Historical Demand

The IEHK is an emergency item, for which by its nature is always a challenge to forecast the needs accurately. Since 2014, UNICEF has shipped IEHKs to 51 countries across all UNICEF's regions (Figure 2). Nearly half the kits procured through UNICEF (48 per cent) were sent to countries in the Middle-East, notably in response to the impact of the conflicts in Syria and Yemen and to neighbouring countries for prepositioning and to assist refugees hosted by these countries. Just under thirty per cent (26 per cent) has been in response to crises in West and Central Africa, notably on behalf of Guinea in response to the Ebola disease outbreak, and conflicts and disease outbreaks in Central African Republic, DR Congo, and Nigeria. The humanitarian emergency responses to Somalia and the crisis in Myanmar with refugee movements into Bangladesh also account for notable volumes.

Figure 2 Number of IEHK and Modules UNICEF Delivered per Region 2014-2019 (May)



Source: UNICEF Supply Division

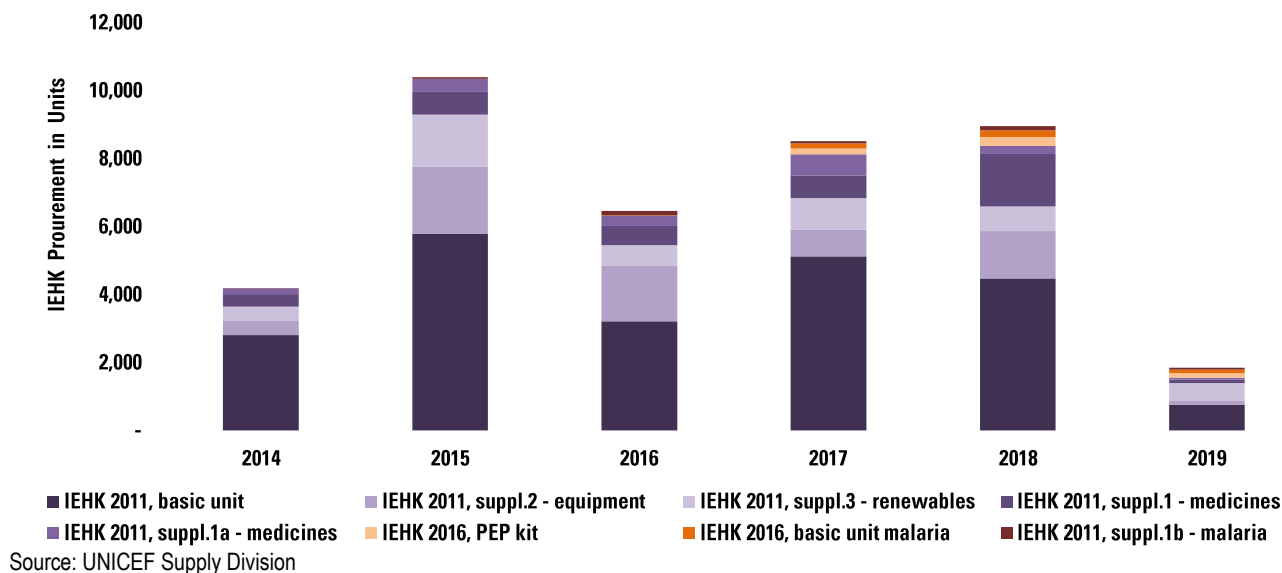
### 4.2 Supply

| Kit Module                      | Total         | %   |
|---------------------------------|---------------|-----|
| IEHK 2011, basic unit           | <b>22,154</b> | 55% |
| IEHK 2011, suppl.2 - equipment  | <b>6,302</b>  | 16% |
| IEHK 2011, suppl.3 - renewables | <b>4,733</b>  | 12% |
| IEHK 2011, suppl.1 - medicines  | <b>3,920</b>  | 10% |
| IEHK 2011, suppl.1a - medicines | <b>1,783</b>  | 4%  |
| IEHK 2016, PEP kit              | <b>576</b>    | 1%  |
| IEHK 2016, basic unit malaria   | <b>447</b>    | 1%  |
| IEHK 2011, suppl.1b - malaria   | <b>422</b>    | 1%  |

From 2014-2019, UNICEF primarily supplied basic units, which accounted for approximately 55 per cent of the kits supplied over the period (Figure 3), followed by the supplementary 2 - equipment kits representing 16 per cent. The PEP kits, the basic malaria units, and malaria supplementary kits were the least procured through UNICEF representing 1 per cent each respectively.

Source: UNICEF Supply Division

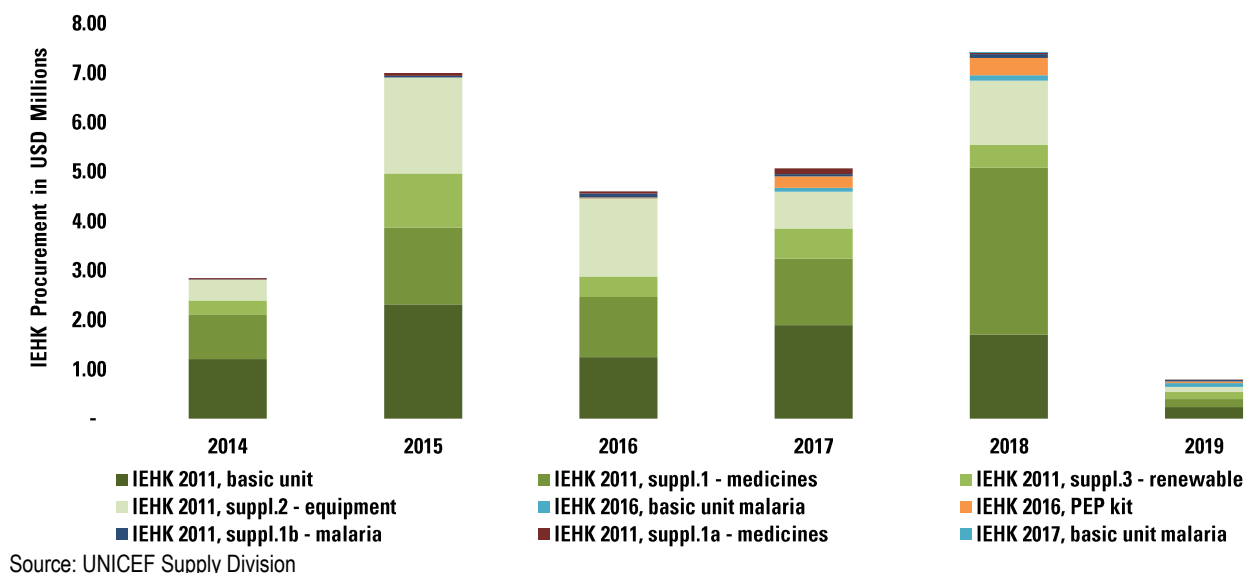
Figure 3 Number of Different Modules of IEHK Supplied by UNICEF 2014-2019 (May)



| Kit Module                      | Total                | %    |
|---------------------------------|----------------------|------|
| IEHK 2011, basic unit           | <b>8,587,410.91</b>  | 31%  |
| IEHK 2011, suppl.1 - medicines  | <b>8,555,226.68</b>  | 31%  |
| IEHK 2011, suppl.3 - renewable  | <b>6,084,153.84</b>  | 22%  |
| IEHK 2011, suppl.2 - equipment  | <b>3,032,083.06</b>  | 11%  |
| IEHK 2016, basic unit malaria   | <b>628,691.01</b>    | 2%   |
| IEHK 2016, PEP kit              | <b>284,325.19</b>    | 1%   |
| IEHK 2011, suppl.1b - malaria   | <b>274,979.79</b>    | 1%   |
| IEHK 2011, suppl.1a - medicines | <b>267,640.51</b>    | 1%   |
| IEHK 2017, basic unit malaria   | <b>2,446.21</b>      | 0%   |
| <b>Total</b>                    | <b>27,716,957.20</b> | 100% |

In terms of value in USD, the IEHKs procured through UNICEF have reached to date approximately USD 28 million, averaging approximately between USD 3 and 7.5 million a year, depending on the emergency requirements. The highest value of UNICEF's supply of IEHKs has been for basic units and supplementary 1 - medicine kits, reaching approximately USD 17 million (8.6 million each), representing 62 per cent of the total procurement value over this period (31 per cent each). The malaria kits and PEP kits combined reached 3 per cent (Figure 4).

Figure 4 USD Value of Different Modules of IEHK Supplied by UNICEF 2014-2019 (May)














### 4.3 Pricing and UNICEF Supply Catalogue

UNICEF publishes and maintains an updated catalogue containing specifications and indicative prices for over 2,000 products. The prices listed in the catalogue are indicative only, and actual prices may vary depending on the product, the time of procurement, and individual suppliers. For more details in IEHK, see [UNICEF Supply Catalogue](#). Enter a search for “IEHK 2017” or the respective material number for each kit module (see under 3.2 The Basic Module, or 3.3 The Supplementary Module).

The full IEHK 2017 can cost up to USD 9,240.00 (Table 1), representing a cost of USD 0.31 per person per month (Ex works and excludes landed costs), based on a population of 10,000 for three months. The IEHK basic module, which combines the basic unit and basic malaria unit, can cost up to USD 1,400.00 representing a cost of USD 0.05 per person per month, and only USD 0.02 per person per month if the basic unit malaria is not ordered (opt out), making the IEHK good value for money,<sup>10</sup> provided that it is used appropriately, efficiently, and effectively by qualified medical personnel.

Table 1 UNICEF Indicative Pricing for IEHK Modules Subject to Change

| Symbol  | Module             | Price*       | Symbol  | Module                  | Price*       | Symbol  | Module       | Price*       |
|---|--------------------|--------------|---|-------------------------|--------------|---|--------------|--------------|
|  | basic unit†        | USD 382.67   |  | 1a controlled medicines | USD 132.40   |  | 2 equipment  | USD 920.75   |
|  | basic unit malaria | USD 1,024.19 |  | 1b malaria              | USD 1,157.27 |  | 3 renewables | USD 903.22   |
|  | 1 medicines        | USD 2,960.00 |  | 1c cold chain medicines | USD 433.93   |  | PEP kit      | USD 1,323.87 |

Source: UNICEF Supply Division

**Note** \*: Indicative price subject to change, please the latest information as per UNICEF’s Supply Catalogue.

**Note** †: Orders cannot be placed for individual units sufficient to treat 1,000 persons for three months. The basic unit is for all 10,000 persons for three months.

## 5 Order Considerations

Before ordering the IEHK 2017, please note:

- Any rapid response to an acute public health emergency requires an initial risk assessment to ensure defensible decision-making, including the implementation of appropriate control measures. A systematic approach to a public health risk assessment can provide the basis to prioritise actions to alleviate the consequences on affected populations.
- A rapid assessment of the situation would establish what specific IEHK needs would be optimal for a first response phase and to determine what type of health kit modules and units would be best suited for the needs, and where they are needed.
- IEHK can also be stockpiled as part of preparedness or pre-positioning and would require an appropriate medical supplies and logistics management information system to enable appropriate stock management (expiry date tracking of contents).
- The number and types of IEHK kits needed for the size of affected population can be determined by using the [Logistics and Supply Emergency Calculator](#) (for UNICEF staff only).
- Ensure adequate funds for shipping, customs clearance, safe storage, and distribution.

Generally, UNICEF recommends countries to order a complete IEHK. However, where items such as the IEHK 2017 basic unit malaria; supplementary 1b-malaria; and the PEP kit are not needed, these kits can be excluded as an opt out: as highlighted lines in **green** (Table 2, next page).

### 5.1 Important Actions

Any waivers, exemptions, and permits should be arranged well in advance of ordering the kits. These may include:

<sup>10</sup> **Note**: Ex works (EXW) is an international trade term that describes when a seller makes a product available at a designated location, and the buyer of the product covers the transport costs.

- **Registration:** UNICEF recommends obtaining a blanket import waiver for all emergency kits as there may be multiple suppliers for the same product component, and it is not feasible to pre-determine such specificity.
- **Intellectual property/patents, if applicable:** This may apply to some of the antiretroviral (ARV) medicines contained in the PEP module. In such cases, the country should consider use of Trade-Related Aspects of Intellectual Property Rights (TRIPS) agreement flexibilities such as “for government use” clause, citing ARV medicines in the kit as emergency supplies.<sup>11</sup> This should be done in advance of ordering the kits to enable importation. See patent status at: <http://www.medspal.org/>

It may be necessary to organize a country-based forum to review the contents of this information note so as to plan to update any relevant country documents. This may include Country Emergency Supply Lists and guidance to health care providers on use of the NEW IEHK 2017 kit.

Table 2 IEHK 2017 Module and Optional Components

| Material Number | Material Short Description                    | Quantity | Cartons |
|-----------------|---|----------|---------|
| S9901024        | IEHK 2017, kit, basic unit                    | 1        | 20      |
| S9901025        | IEHK 2017, kit, basic unit malaria – opt out  | 1        | 12      |
| S9901026        | IEHK 2017, kit, suppl.1-medicines             | 1        | 21      |
| S9901027        | IEHK 2017, kit, suppl.1a-controlled medicines | 1        | 1       |
| S9901028        | IEHK 2017, kit, suppl.1b-malaria – opt out    | 1        | 2       |
| S9901022        | IEHK 2017, kit, suppl.1c-cold chain medicines | 1        | 2       |
| S9901029        | IEHK 2017, kit, suppl.2-equipment             | 1        | 2       |
| S9901030        | IEHK 2017, kit, suppl.3-renewable             | 1        | 6       |
| S9901023        | IEHK 2017, PEP kit – opt out                  | 1        | 1       |

Source: UNICEF Supply Division

## 5.2 Orders from UNICEF Country Offices

UNICEF country offices can identify emergency supplies, in the UNICEF’s intranet [Emergency Supply List \(ESL\)](#) or contact UNICEF Supply Division’s Emergency Coordinator (email: [danemergency@unicef.org](mailto:danemergency@unicef.org)). An emergency Sales Order should be raised through UNICEF’s Internal Virtual Integrated System of Information (VISION). For more details, please refer to:

- [How to order - Emergency Orders and Emergency Supply Procurement Procedure](#)
- [Chapter 10 of UNICEF’s Supply Manual](#)

## 5.3 Orders from Government, External Partners, and Other UN Agencies

Partners (Governments, NGOs, other UN agencies) can access emergency supplies through UNICEF Procurement Services (PS). Send email to [psid@unicef.org](mailto:psid@unicef.org). This mechanism may be more suited for the procurement of supplies for emergency preparedness rather than for emergency response given the required process. UNICEF encourages partners considering IEHK procurement options to consult UNICEF country offices prior ordering. For more information, please see: “How to use UNICEF Procurement Services”:

[http://www.unicef.org/supply/index\\_purchasing.html](http://www.unicef.org/supply/index_purchasing.html)  
[http://www.unicef.org/supply/index\\_procurement\\_services.html](http://www.unicef.org/supply/index_procurement_services.html)

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Other UNICEF information notes can be found at: [http://www.unicef.org/supply/index\\_54214.html](http://www.unicef.org/supply/index_54214.html)

<sup>11</sup> World Trade Organization, [Intellectual Property: Protection and Enforcement](#), WTO, Geneva, 2019.