



## PRODUCT SPECIFICATION SHEET

F-75 Therap.milk CAN 400g/CAR-24

Material Nr.:  
S0000236

Version no: 1.2.3

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### 1. General Description

F-75 is therapeutic milk diet with added vegetable fat, carbohydrates, vitamins, and minerals, it comes as powder packed in a canister to prepare a liquid diet with an energy density of approximately 75kcal/100 ml.

### 2. Intended use

The F-75 liquid therapeutic diet is intended for the initial phase of treatment of children diagnosed with Severe Acute Malnutrition (SAM). It is intended to stabilize the child's metabolism and support rehydration.

The specified quantity of powdered therapeutic milk is mixed with the specified quantity of water boiled and cooled down to not below 70°C to obtain a defined quantity of liquid therapeutic diet with an energy density of approximately 75 kcal/100ml.

F 75 must be used under medical supervision. A cautious approach is required because of child's fragile physiological state and reduced homeostatic capacity; hence F-75 is not designed for weight gain. (WHO. Guideline: Updates on the management of severe acute malnutrition in infants and children. Geneva: *World Health Organization*, 2013:4)

### 3. Target population

Children diagnosed with SAM, in the initial or stabilisation phase of their treatment.

### 4. Technical specifications

#### 4.1 General quality

Milk based white or pale yellowish fine powder; free from impurities, coloured particles, caking or lumps.

## 4.2 Ingredients

Milk powder, refined vegetable oil, sugar, maltodextrin, milk derivate, emulsifier (lecithin) vitamin and mineral (optionally premix can be used).

## 4.3 Nutritional Composition

### Macronutrients per 100grams

Energy: 445kcal (425- 465) kcal  
Protein\*: 5 (4-7) % of total energy  
6.2 (5-8.5) g  
Lipids: 32 (25-35) % of total energy  
14.6 (12-18) g  
n-6 fatty acid: 6.5 (3 -10) % of total energy  
n-3 fatty acid: 1.5 (0.3- 2.5) % of total energy  
Carbohydrate: 64 (57-69) % of total energy  
66.6 (59.2-73.9) g  
Lactose: 7.5g max  
Ash: max 4.0%  
Moisture: max 4%  
Solubility max : 0.5ml max (ISO 8156 :2005)  
Burnt particules : 15 maximum (disc B)  
Osmolarity of prepared liquid: 240-320 mMol /L

### Macronutrients per 100ml

Energy: 75 (70-80) kcal  
Protein: 1 (0.75-1.5) g  
Lipids: 2.5 (2.0-3.0) g  
Carbohydrate: 12 (10.5-14) g

*\*All therapeutic foods approved for the initial feeding or stabilisation phase of treatment of children with severe acute malnutrition must provide at least 50% of protein in the form of dairy protein. For the purposes of conversion from unit weight to unit energy, protein and carbohydrate are assumed to contribute 4 kcal/g and lipids 9 kcal/g.*

### Minerals per 100g

Sodium: 100 mg maximum  
Potassium: 735- 940 mg  
Calcium: 300 - 600 mg  
Phosphorus\*: 300 - 600 mg  
Magnesium: 48 - 64 mg  
Iron: 0.3 mg maximum

### Minerals per 100ml

17mg maximum  
122-156mg  
50-100mg  
50-100mg  
8.5-11mg  
0.05mg maximum

Zinc: 11 - 18 mg	1.8-3.0mg
Copper: 1.4 - 1.8 mg	0.2-0.3mg
Selenium: 20 - 40 mcg	3.5-7.0mcg
Iodine: 70 - 140 mcg	12.3-24.5mcg
*(excluding phytate)	

#### Vitamins per 100g:

#### Vitamins per 100ml

Vitamin A: 0.8 - 1.7 mg	0.1-0.3mg
Vitamin D3: 15 - 30 mcg	2.5-5.0mcg
Vitamin E: 20 - 40 mg	3.3-6.5mg
Vitamin K: 15mcg minimum	2.5mcg minimum
Ascorbic acid: 50 mg minimum	10 mg minimum
Thiamine: 0.5 mg minimum	0.08mg minimum
Riboflavine: 1.6 mg minimum	0.3mg minimum
Niacin: 5 mg minimum	0.8mg minimum
Pantothenic acid: 3 mg minimum	0.5mg minimum
Vitamin B6: 0.6 mg minimum	0.1mg minimum
Folic acid: 200 mcg minimum	35 mg minimum
Vitamin B12: 1.6 mcg minimum	0.3mcg minimum
Biotin: 60 mcg minimum	10mcg minimum

#### 4.4 Formulation and Starting materials

F75 shall be manufactured referencing the formula described in the WHO document: Management of severe malnutrition: a manual for physicians and other senior health workers World health organization, 1999 (refer to Table 7, Table 8 and Appendix 4). [MSM Cover I \(who.int\)](https://www.who.int/publications/m/item/msm-cover-1)

The product must provide at least 50% of protein in the form of dairy protein. After reconstitution according to the manufacturer's preparation instructions, the product shall be a homogenous liquid that does not separate into oil/liquid phases or leaves a solid sediment upon standing in a refrigerator. Frothing of the therapeutic milk after preparation should be minimal to enable accurate dosage measurements of the milk to each individual recipient. The product should have a characteristic milk taste and smell. It shall be white as cream, shall not have rancid, pungent, or unpleasant taste or smell.

All ingredients, including optional ingredients, shall be clean, of good quality, safe and with minimal fibre. All ingredients and food additives shall be gluten free.

Applicable codex references for ingredients can be found in this link

#### 4.4.1 Milk

Full cream milk powder  
Skimmed milk powder and/or  
Whey powder (NB: may produce bitter taste)

#### Applicable reference

1. CXS 207-1999 Codex Standard for Milk Powders and Cream Powder
2. CXS 289-1995: Codex Standard for Whey Powders

#### 4.4.2 Carbohydrates

Carbohydrates used shall be gluten free and readily soluble in water.  
Lactose or fructose shall not be added.  
Glucose or lactose polymers are the preferred sources of carbohydrate and should be pre-gelatinized (e.g., maltodextrin).

#### Applicable reference

1. CXS 212-1999: Codex Standard for Sugars

#### 4.4.3 Oil

Edible refined vegetable oil. The manufacturer shall choose judiciously the type of oil and establish specifications for oil to ensure that the specifications in finished product are met (with particular attention to requirements for omega 3 and omega 6 fatty acids. Hydrogenated vegetable oils are not to be used.

#### Applicable reference

1. CXS 210 -1999 (updated 2019) Codex Standard for Named Vegetable Oils.
2. Code of Practice for the reduction of 3-Monochloropropane-1-2- DIOL Esters (3-MCPDEs) and Glycidyl Esters (GEs) in Refined Oils and Food Products made with refined oils.
3. Trans-fat: CXS 72-1981 Standard for Infant Formula and Formulas for Special Medical Purposes intended for Infants, rev 2007

#### 4.4.4 Vitamins and minerals

The used nutrient compounds shall comply with the criteria established in CAG/GL 10 – 1979 (Rev. 2008 last amendment 2015) Advisory lists of Nutrient Compounds for use in foods for Special Dietary uses for Infants and Young Children.

[https://www.fao.org/fao-who-codexalimentarius/sh-proxy/en/?lnk=1&url=https%253A%252F%252Fworkspace.fao.org%252Fsites%252Fcodex%252Fstandards%252FCXG%2B9-1987%252FCXG\\_009e\\_2015.pdf](https://www.fao.org/fao-who-codexalimentarius/sh-proxy/en/?lnk=1&url=https%253A%252F%252Fworkspace.fao.org%252Fsites%252Fcodex%252Fstandards%252FCXG%2B9-1987%252FCXG_009e_2015.pdf)

Another list of acceptable vitamin compounds can be found in Annex 3 of the COMMISSION DIRECTIVE 2006/141/EC of 22 December 2006 on infant formulae, follow-on formulae and amending Directive 1999/21/EC.

<http://eur-lex.europa.eu/legal-content/EN/ALL/?uri=CELEX%3A32006L0141>

If the manufacturer uses a mineral and vitamin premix (es), they must source it from a specialized premix manufacturer. Vitamins and minerals shall be in such forms that they are easily absorbed by patients with SAM who are often achlorhydric. The added minerals shall be water-soluble and shall not form insoluble components when mixed. Iron salts are not to be added.

The liquid therapeutic diet prepared from the product according to the manufacturer's instruction for use shall have a mineral composition that will not alter the acid-base metabolism of patients with SAM. In particular, it shall have a moderate positive non-metabolisable base sufficient to eliminate the risk of metabolic acidosis. The non-metabolisable base can be estimated using the formula:

Estimated absorbed millimoles (sodium+potassium+calcium+magnesium) minus (phosphates + chlorides) See:

[http://www.who.int/maternal\\_child\\_adolescent/documents/a91065/en/](http://www.who.int/maternal_child_adolescent/documents/a91065/en/)

Added minerals shall be in the form of water-soluble salts. Minerals used shall be in forms that are known to be bioavailable, nitrite and nitrate salts shall not be used. Recommended forms of minerals can be found in Appendix 4, Management of Severe Malnutrition a manual for senior health workers. [MSM Cover I \(who.int\)](#)

#### 4.4.5 Flavouring

The use of artificial flavourings is not permitted, only natural flavourings may be used. Natural flavourings are defined in CAC/GL 29-1987 General Requirements for Natural Flavourings and in Regulation of the European parliament and of the Council (EC) N° 1334/2008. [https://www.fsai.ie/uploadedFiles/Reg%201334\\_2008.pdf](https://www.fsai.ie/uploadedFiles/Reg%201334_2008.pdf)

#### 4.4.6 Antioxidants

The use of artificial antioxidants is not permitted, only natural antioxidants such as ascorbyl palmitate or mixed tocopherols may be used.

#### 4.4.7 Other additives

Essential L-amino acids, choline, taurine, carnitine, inositol, carotene and other semi-essential or biologically valuable nutrients may be added to meet the specification at levels considered to be safe for children with severe malnutrition.

### 5. Shelf-life

The product shall retain the above-mentioned specifications for minimum 24-36 months from date of manufacture when stored in dry conditions at a temperature of 30°C, supported by real time shelf-life data. Shelf-life studies shall be conducted in accordance with the UNICEF/MSF *Requirements for stability study for Therapeutic Food*.

### 6. Packaging

#### 6.1 Primary packaging (canister)

All packaging material being in contact with food or intended to come in contact with food, including inks and glue shall be of food-contact grade. Product shall be packed in airtight canisters. Packaging under inert gas (nitrogen or carbon dioxide) prolongs products shelf-life and is recommended.

Packaging must be free of damage such as, but not limited to: tears, cuts, holes, and abrasions through one or more layers, leakage of any seal. The closure seal must be free of wrinkles and occluded maters.

#### 6.2 Canister

Canisters should be hermetically sealed and resistant to humid and hot climates. Seal and canister integrity shall be adequate to withstand pressure changes associated with international distribution channels such as air transport. The canister shall be capped with a reusable lid to adequately close the canister and protect its content form external contamination and humidity during storage. The period when opened canister can be used shall be minimum 4 weeks.

##### 6.2.1 Primary label (Canister)

Labels must have adequate information to permit identification, safe transport, storage and use of the product throughout its shelf life. The canister label is to be white with black printing. Labels must be self-adhesive and made from paper, e.g., pharmaceutical defiberised paper (80gsm), that is film or UV coated for protection against humidity and firmly affixed to be tamper proof and to prevent detachment in tropical climates. Type preferably by lithography directly on container/packaging. Ink/colour: The writing on primary and secondary packs must be in indelible ink, in black on white. The labelling shall be in English, Arabic and French, one of these languages may be replaced by a local language as requested by UNICEF.

The label shall contain the following information

- Generic name: F-75 Therapeutic Milk
- Clear statement: For the initial phase (or stabilisation phase) of treatment of children with Severe Acute Malnutrition, not suitable for long-term feeding of well-nourished children. Use under medical supervision.
- Applicable warnings (such as handling product leftovers, how long reconstituted diet can be kept at room temperature and in the refrigerator, use by date after opening, scoop hygiene. etc.)
- Breastfeeding logo and a message: *Breastfeeding is recommended for at least the first 24 months and exclusively until 6 months*
- List of ingredients (starting materials used) in descending order quantity
- Nutritional composition per 100 g of powder and 100 ml of reconstituted diet.
- Name and address of the manufacturer and packer, or distributor, or importer, or exporter, or vendor and country of origin
- Net weight
- Batch number clearly identified and visible
- Date of manufacture
- Best before date clearly identified and visible
- Storage conditions

Additionally, to this information, the canister label shall also contain:

Instructions for preparation of reconstituted diet, e. g.

2 levelled scoops added to 50 ml water = XX ml milk

4 levelled scoops added to 100 ml water = XX ml milk

-The entire content of the packaging e.g., 400 g (estimate); added to 2200 ml water = XX ml milk

-Instruction for hygienic use of the scoop.

Instruction to 'Discard any feed that has not been consumed within two hours.

### 6.3 Model instruction for preparation

A pictogram schema for preparation instructions shall be included on the canister label OR as a package leaflet. The preparation instructions shall be based on the World Health Organization 2007. How to Prepare Powdered Infant Formula in Care Settings. [Safe preparation, storage and handling of powdered infant formula: guidelines \(who.int\)](#)

### 6.4 Scoop (canister)

A scoop must be included in each F-75 canister. Scoops should be made of a food contact material and a design that is easily kept clean, white in colour and marked with the product name "F-75" in addition to the manufacturer's name. Size of a scoop must allow the reconstitution at the following proportion: 2 levelled scoops: 50 ml water to produce approximately 37.5-40 kcal/50ml. (The exact powder weight per scoop should be specified by the supplier in the tender offer.)

### 6.5 Secondary packaging

Canisters shall be placed in strong, export carton boxes. Carton boxes shall be shock and puncture resistant. Cartons shall be of a sturdy quality and provide protection of the goods for carriage by air, sea and/or road to final destination worldwide, including remote locations under adverse climatic and storage conditions, and high humidity - for example an ECT (Edge Crush test\*) > 11kN/m with minimum 60% remaining with 90% humidity at the highest recommended storage temperature.

### Applicable reference

1. Recommended guideline for food hygiene in rooms where the Therapeutic Milk is prepared and stored
2. ISO/TS 22002-1:2013 – Prerequisite programs for food safety. Part 3. – Catering
3. World Health Organization 2007 Safe preparation, storage, and handling of powdered infant formula: guidelines. "World Health Organization in collaboration with Food and Agriculture Organization of the United Nations."

### 6.6 Secondary packaging Label

Carton label shall contain this information:

- Generic name: F-75 Therapeutic Milk (or Therapeutic formula F-75)

- A clear statement: For initial phase (or Phase 1) of treatment of Children with Severe Acute Malnutrition
- Any applicable warnings
- Name and address of the manufacturer and packer, or distributor, or importer, or exporter, or vendor and country of origin
- Gross weight
- Number of canisters per carton
- Batch number clearly identified and printed
- Date of manufacture
- Use by date clearly identified and printed
- Storage conditions and maximum stacking height (e.g., 2 meters maximum)
- An image indicating that boxes should not be stood on



## 6.7 Palletisation

Cartons shall be securely closed, stacked (cross stacked, if possible, to maximize stacking strength) on one-way pallets and wrapped with stretch/shrink. Please see UNICEF supply division Packing Specifications (non-CPH destinations)

<https://www.unicef.org/supply/documents/packing-packaging-and-labelling-specifications-non-copenhagen-destinations>

## 7. Processing requirements

### General

All processing and drying shall be carried out in a manner that minimizes loss of nutritive value, particularly protein quality and vitamin content.

Products must be manufactured in accordance with the CAC/RCP 66 – 2008: Code of Hygienic Practice for Powdered Formulae for Infants and Young Children. [untitled \(fao.org\)](#), and CAC/RCP 1-1969, Rev. 4-2003: Recommended International Code of Practice. General Principles of Food Hygiene. (latest update) [https://www.fao.org/fao-](https://www.fao.org/fao-who-codexalimentarius/sh-proxy/en/?lnk=1&url=https%253A%252F%252Fworkspace.fao.org%252Fsites%252Fcodex%252Fstandards%252FCXC%2B1-1969%252FCXC_001e.pdf)

[who-codexalimentarius/sh-proxy/en/?lnk=1&url=https%253A%252F%252Fworkspace.fao.org%252Fsites%252Fcodex%252Fstandards%252FCXC%2B1-1969%252FCXC\\_001e.pdf](https://www.fao.org/fao-who-codexalimentarius/sh-proxy/en/?lnk=1&url=https%253A%252F%252Fworkspace.fao.org%252Fsites%252Fcodex%252Fstandards%252FCXC%2B1-1969%252FCXC_001e.pdf) and other applicable codex references and GMPs (Good manufacturing practices). The producer must have

a food safety policy in place and an effective food safety management system based on a Hazard Analysis and Critical Control Points (HACCP) approach. Prerequisite programs including environmental monitoring programs must be implemented.

### Applicable reference

1. FAO/WHO Expert Meeting on Enterobacter sakazakii and Other Microorganisms in Powdered Infant Formula. Enterobacter sakazakii and other microorganisms in powdered infant formula: meeting report <http://www.fao.org/3/a-y5502e.pdf>
2. ICMSF (International Commission on Microbiological Specifications for Foods). 1986. Microorganisms in foods 2. Sampling for microbiological analysis: Principles and specific applications. 2nd ed. Toronto: University of Toronto Press. ICMSF: <https://www.icmsf.org/publications/software-downloads/>
3. ISO 22000:2005 - Food Safety Management Systems – Requirements for any Organization in the Food Chain.
4. ISO/TS 22002-1:2009 – Prerequisite Programs for Food Safety. Part 1. – Food Manufacture.

The manufacturer must elaborate and implement an analytical plan of the finished product, starting materials and the processing environment. All analytical test procedures must be described in sufficient details, e.g., the sampling plan, acceptance/release criteria, analytical methods. ISO 17025 certified laboratories shall preferably be used. Refer to section 9 for the minimum analyses to be performed for each batch.

### 7.1 Process validation

The coefficient of variation shall be as low as possible, and always <5%. For calculator refer to WFP method:

<http://foodqualityandsafety.wfp.org/coefficient-of-variation-calculator>

### 7.2 Traceability

A complete traceability system must be in place. For every batch number, the manufacturer must be able to identify full history of the finished products (composition, sources and batches of starting materials used, processing parameters, analytical results, quantity produced and dispatched, customers and sites where delivered).

### 7.3 Batch Size

The batch size shall be defined as one bulk mix.

## 8. Product Safety

Therapeutic milk shall be free from objectionable matter. It shall not contain any toxic substances originating from microorganisms or any other poisonous or deleterious substances, including anti-nutritional factors, heavy metals or pesticide residues in amounts that may represent a hazard to health. It shall not contain detectable levels of residues of antibiotics or other veterinary drugs used in animal husbandry.

### 8.1 Microbiological criteria

Manufacturers are responsible for ensuring the compliance of finished products with the microbiological criteria as specified. In regard to limitations of the end-product testing the compliance shall be ensured through the design of an appropriate food safety control system and verification of the effectiveness of the applied control measures through appropriate auditing methods, including review of monitoring records, deviations and assuring that critical control points (CCPs) are kept under control and good hygienic practices (GHPs) are adhered to. These activities can be supplemented, as necessary, by appropriately documented microbiological sampling and analysis plans. The microbiological testing shall include, as appropriate, analysis of samples taken from starting materials, environment, production line and finished product. Environmental samples shall be taken from both: the points considered as most likely to cause product contamination and being most contaminated.

Where results of monitoring the control measures and surveillance or verification indicate that the product batch, lot or consignment, or its part is unsafe (not in compliance with the set microbiological criteria), it shall be presumed that all the food in that batch, lot or consignment is also unsafe, unless following a detailed assessment there is no evidence that the rest of the batch, lot or consignment is unsafe.

#### 8.1.1 Food Safety Criteria

The criteria set out in Annex 1 *Code of Hygienic Practice for powdered formulae for Infants and Young Children CAC/RCP 66-2008*<sup>3</sup> using ISO 6579 and ISO 22964 or other validated methods applied to the finished product (powder form) after primary packing completed or anytime thereafter up to the point when the primary packaging is opened. The batch shall not be released if there is a failure to meet these criteria.

#### Applicable reference

1. FAO/WHO Expert Meeting on Enterobacter sakazakii and Other Microorganisms in Powdered Infant Formula. Enterobacter sakazakii and other microorganisms in powdered infant formula: meeting report <http://www.fao.org/3/a-y5502e.pdf>
2. ICMSF (International Commission on Microbiological Specifications for Foods). 1986. Microorganisms in foods 2. Sampling for microbiological analysis: Principles and specific applications. 2nd ed. Toronto: University of Toronto Press. ICMSF: <https://www.icmsf.org/publications/software-downloads/>

- 1) NOTE: No composite sample. Maximum pooling authorized is 4 pooled samples of 375g (25g from 15 units), only if the laboratory method has been validated and accredited for that method.
- 2) NOTE: No composite sample. One pooled sample of 300g (10g from 30 units) authorized, only if the laboratory method has been validated and accredited for that method.

### 8.1.2 Food hygiene criteria

The safe production of these products is dependent on maintaining a high level of hygiene control. The criteria for process hygiene as set out in *Code of Hygienic Practice for powdered formulae for Infants and Young Children CAC/RCP 66-2008<sup>8</sup>* are intended to be used by the manufacturer as a means of ongoing assessment of its hygiene programs. As such these tests are not intended to be used for assessing the safety of a specific batch of product, but instead are intended to be used for verification of the hygiene programs.

- 1) NOTE: No composite sample. No pooled samples.
- 2) NOTE: For ISO 21528-1: One pooled sample of 300g (10g from 30 units) authorized, only if the laboratory method has been validated and accredited. In case of positive result, another test using the ISO 21528-2 is mandatory (no composite sample, no pooled samples authorized for ISO 21528-2).

## 9. Chemical and other Safety

### 9.1 Contaminants

Nitrates < 200mg NO<sub>3</sub>/kg

Nitrites < 2mg NO<sub>2</sub>/kg

Aluminium < 1.0mg/kg

Melamine < 1mg/kg

## Mycotoxins (as per Codex standard when applicable for the starting materials used)

Ochratoxin A <0.5ppb  
Aflatoxin B1 <0.1ppb  
Aflatoxin M1 <0.025ppb  
Palutin <10ppb  
Deoxynivalenol <200ppb  
Zearalenone <20ppb  
Fumonisin <200ppb

### Applicable reference

1. CAC/RCP 49-2001 Code of Practice for Source Directed Measures to Reduce Contamination of Food with Chemicals.
2. CXS 228-2001: General Methods of Analysis for Contaminants.
3. CXS 193-1995: Codex General Standard for Contaminants and Toxins in Food.

### 9.1.1 Pesticides

In general, pesticide levels must be below 10 ppb. Verifying pesticide levels are below accepted limits is the responsibility of the manufacturer.

Carbamates <10 ppb  
Organochlorines <10 ppb  
Organophosphates <10 ppb  
Pyrethroids <10 ppb

The maximum residue levels of specific pesticides or their metabolites in therapeutic milk powder set in below shall not be exceeded:

Substance and Maximum residue level (mg/kg)  
Cadusafos: 0.006  
Demeton-S-methyl/demeton-S-methyl sulfone/  
oxydemeton-methyl (individually or combined, expressed as demeton-S-methyl)  
0.006  
Ethoprophos 0.008  
Fipronil (sum of fipronil and fipronil-desifinyl, expressed as finpronil) 0.004  
Propineb/propylenethiourea (sum of propined and propylenethiourea) 0.006

The following pesticides shall not be used in the agricultural production intended for the production of therapeutic formulae:

Disulfoton (sum of disulfoton, disulfoton sulfoxide and disulfoton sulfone, expressed as disulfoton)

Fensulfotion (sum of fensulfotion, its oxygen analogue and their sulfone, expressed as fensulfotion)

Fentin, expressed as triphenyltin cation

Haloxfop (sum of haloxfop, its salts and esters including conjugates, expressed as haloxfop)

Hexachlorobenzene

Nitrofen

Ometholate

Terbufos (sum of terbufos, its sulfoxide and sulfone, expressed as terbufos)

Aldrin and dieldrin, expressed as dieldrin, Endrin

### Applicable reference

1. CXS 229-1993, REV.1-2003: Analysis of Pesticide Residues: Recommended Methods

#### 9.1.2 Heavy metals\*

Verifying that heavy metal levels are below accepted limits is the responsibility of the manufacturer. Examples of heavy metals that must be controlled include, but are not limited to:

Arsenic <0.092mg/kg

Cadmium <0.043mg/kg

Lead <0.2mg/kg

Mercury<0.037mg/kg

Tin <105mg/kg

*\*Based on 5 kg child with SAM and PTWI, CXS 193- 1995 General Standard for Contaminants and Toxins in Food and feed.*

#### 9.1.3 Hydrocarbons

Benzo[a]pyrene <1ppb

#### 9.1.4 Radioactivity

Radioactive contamination can occur when using milk powder derived from cows that have eaten contaminated feed. This risk is managed by using certified radioactivity free milk products. The nuclear radiation level shall meet the values valid in the area of consumption. If limits are not defined, the value must not exceed 370Bq/kg (Cs 134 & Cs136).

The product and its components shall not be treated by ionizing radiation.

#### 9.1.5 GMO (Genetically Modified Organisms)

UNICEF requires the information regarding the presence/absence of GMO to be declared.

#### 9.1.6 Other contaminants

The product shall meet the codex CXS 72 – 1981 requirements for other contaminants (residues of hormones, antibiotics, and pharmacologically active substances.)

### 10. Minimum requirement for release of F 75 Powder

Certificate of Analysis (CoA) is required for every batch supplied against UNICEF Supply Division Purchase Orders. It shall be forwarded prior to its shipment. The manufacturer is expected to perform the necessary finish product analysis in order to prove that the batch complies with the specification. In case vitamin and mineral premix is used it may be adequate to test for tracers as indicated above. In case single addition of vitamins and minerals are used, then individual analysis of each component is expected.

A Certificate of Analysis must be provided for each batch.

The principal tests listed below must be performed in order to check if the quality of F-75 meets above requirements. Additional analyses shall be defined in case of further quality assessment.

List of the minimum tests results for Certificate of Analysis and reference data are listed below:

Microbiological food safety criteria set in 7.1.2 and food hygiene criteria set in 7.1.3.

Nutrient values per 100g

Energy: 425-465kcal

Protein: 4.0-7.0% total energy

Lipids: 25-35% total energy

Lactose: 6-7.5g  
Ash: 4.0g max  
Moisture 4% max  
Vitamin C >50mg minimum  
Vitamin A 0.8-1.7 mg RE  
Potassium 735-940mg  
Sodium <100mg maximum  
Iron <0.3mg

Actual value of the powder's bulk density in ml/100g  
Burnt particles: 15mg maximum (disc B minimum)  
Solubility index: 0.5 ml maximum (ISO 8156:2005)  
Osmolarity (of prepared liquid): 240-320 mOsmol/L

The manufacturer shall conduct at least one complete finished product analysis annually in order to verify that the finished product is manufactured according to this specification.

#### Items to be supplied with

Supplier shall provide one white scoop inside each canister  
Supplier should indicate items required, but not supplied: thermometer, measuring jug, feeding cup, feeding spoon in their leaflet or label

#### Shelf life

Unopened canisters should have a minimum of 24-36 months shelf life from the date of manufacture.

Supplier should indicate shelf life of opened canister e.g., Use within 4 weeks after opening, keep in original container, do not store above 30°C; protect from direct sunlight, protect from moisture.

Supplier should indicate instruction for use for reconstituted milk: Use within 2hrs if at room temperature or 24 hours if stored in the refrigerator.

#### Storage and Transport Information

Supplier must indicate storage and transport temperature conditions. Do not store above 30 °C is preferred.

Supplier shall provide Weight of carton, around: 13.7-14kg/ carton

Supplier shall provide gross volume of carton, around: 0.03476 m<sup>3</sup> / carton

Supplier must include other important instructions e.g., Protect from direct sunlight

Material safety data sheet information (MSDS): N/A

Packaging and labeling: preparation instructions included on the label or in a leaflet

### Applicable Resources

1. Contaminants Reference Table
2. Stability study template for Nutritional Products
3. Interagency Requirements for stability study
4. Interagency Specialised Food Manufacturer Quality Questionnaire
5. Interagency Specialised food Product Questionnaire
6. Technical Requirements for Specialized Nutrition Food Products

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### FOR MORE INFORMATION

CPHHQ-SD- Nutrition Supplies | [sd.nutritionssupplies@unicef.org](mailto:sd.nutritionssupplies@unicef.org)

[Technical resources for nutrition products](#) | [UNICEF Supply Division](#)