Arranging Gavi-funded Yellow Fever Supply Shipments to Laboratories

25 February 2020
Following the November 2018 Board decision on “Gavi Support for Yellow Fever Diagnostic Capacity”, Gavi requested UNICEF to collaborate for procurement and distribution of Yellow Fever Diagnostics and appointed it as a procurement agency to support Gavi’s work on creation and operation of a mechanism for procurement and distribution of YF diagnostics.
List of commodities available through UNICEF for eligible countries under “Gavi Support for Yellow Fever Diagnostic Capacity” project currently includes the following:

<table>
<thead>
<tr>
<th>Reagent Bundles</th>
<th>PPE – Lab Coats</th>
<th>PPE – Disposable Gloves</th>
<th>PPE – Surgical Masks</th>
<th>PPE – Goggles</th>
<th>Elisa Washers</th>
<th>Elisa Readers</th>
<th>PCR Machines</th>
<th>Biosafety Cabinets</th>
</tr>
</thead>
</table>
Process Flow to Arrange Gavi-funded YF Supplies to Laboratories

1. Request Gavi Support
2. Communicates Programme Approval
3. Approves Funds Request
4. Requests Gavi Procurement Funds
5. Places Purchase Orders
6. Ship to Country
7. Issue Invoices
8. Process Payments to Suppliers

~ 15 DAYS
Consignee Request Form – A setup document, to be completed once

National public health yellow fever reference laboratories are the ultimate destinations for yellow fever laboratory supplies and equipment supplied by UNICEF.

National public health yellow fever reference laboratories are required to complete and return to UNICEF a Consignee Request Form, prior scheduling shipments with UNICEF.

Information provided in the Consignee Request Forms will be transferred into UNICEF’s electronic management system to automatically inform procurement and shipping documents related to a country’s Gavi-funded procurement.

UNICEF already reached out to the contact points indicated in the applications submitted by countries to Gavi with a request to complete the Consignee Request Forms.

So far only 5 out of 20 countries that were contacted reverted with completed forms. Countries are encouraged to expedite completion of the forms to prevent any delays in ordering and shipping of Gavi-funded YF diagnostics supply.

Any questions regards to completion of Consignee Request Forms should be directed to Priscilla Kiambi by email pkiambi@unicef.org.
Procurement Request Form – Needed each time when procurement requested

INSTRUCTIONS TO THE USERS:

1. Countries that are eligible for Gavi support under the Yellow Fever Diagnostics Initiative and that secured Gavi approvals are required to fill in this request form and to submit it to UNICEF Supply Division that is a Gavi-nominated procurement agent for the Yellow Fever Diagnostics Initiative.

2. Users are required to provide general information about the requesting organization as well as to confirm Gavi approval code in Section A. All fields marked in asterisk (*) are mandatory.

3. Users are required to specify their procurement requirements in Section B. The requirements must be compliant with the Gavi approval in scope and quantity.

3.1. To fill in Section B, as their first step users must choose a required commodity group from drop menus in Column C. Based on the choice, specific products recommended by UNICEF and Gavi, with material codes and units of measure, will be returned automatically in columns highlighted in blue.

3.2. Detailed technical information about the recommended products is available in UNICEF Supply Catalogue. Users may use links provided in the worksheet “Commodity List” to enter UNICEF Supply Catalogue.

3.3. Any specific requirements for the products such as, for example, special lab coasts measurements and alternative sizes (S, M, L); alternative glove sizes (S, M, L); service and maintenance contact requirements for the equipment, etc. must be indicated in respective lines in Column K.

3.4. Complete Section B by indicating approved (by Gavi) and requested quantity of each requested product, as well as preferred delivery date.

4. User are required to specify delivery instructions to UNICEF and their freight forwarders in Section C. Pop up boxes in some cells in Section C contain specific instructions that users must follow.

5. Completed request forms must be submitted to UNICEF via email provided in Section D. Should you have any difficulties or questions while filling in the template, contact UNICEF team via the same email.

Thank you!
We are looking forward to our collaboration to improve availability of quality-assured, effective and efficient diagnostics for yellow fever.

INSTRUCTIONS | YF Dx CO Request | Commodity List

SECTION A: REQUESTOR INFORMATION

Country
Organization:
Contact Name:
Contact Title:
Address:
Email:
Gain Approval Code:
Preferred Budget, USD:

SECTION B: LIST OF REQUIREMENTS

Item No. | Commodity Group | UNICEF Material Number | Item Description | Specific Product Requirements, if any | Unit of Measure | Approved Quantity | Requested Quantity | Preferred Delivery Date
--- | --- | --- | --- | --- | --- | --- | --- | ---
1 | 1 | TBC | TBC | TBC | 1 | 1 | 1 | 1
2 | 2 | TBC | TBC | TBC | 1 | 1 | 1 | 1
3 | 3 | TBC | TBC | TBC | 1 | 1 | 1 | 1
4 | 4 | TBC | TBC | TBC | 1 | 1 | 1 | 1
5 | 5 | TBC | TBC | TBC | 1 | 1 | 1 | 1
6 | 6 | TBC | TBC | TBC | 1 | 1 | 1 | 1
7 | 7 | TBC | TBC | TBC | 1 | 1 | 1 | 1
8 | 8 | TBC | TBC | TBC | 1 | 1 | 1 | 1
9 | 9 | TBC | TBC | TBC | 1 | 1 | 1 | 1
10 | 10 | TBC | TBC | TBC | 1 | 1 | 1 | 1
11 | 11 | TBC | TBC | TBC | 1 | 1 | 1 | 1
12 | 12 | TBC | TBC | TBC | 1 | 1 | 1 | 1
13 | 13 | TBC | TBC | TBC | 1 | 1 | 1 | 1

SECTION D: LIST OF REQUIREMENTS

Commodity Group | UNICEF Material Number | UNICEF Short Description | UoM
--- | --- | --- | ---
agent bundles | 50001133 | Clinical Laboratory Bundle for YF Dx/ AOH tests | 400 test
PF - Lab Coats | 50001262 | Coat lab work, lab size | 1 each
PF - Disposable Gloves | 50001261 | Gloves w/o powder, m, dist, size:200 | box of 200
PF - Surgical Masks | 50001194 | Mask, surgical, level 3, 18cm, dist, size:100 | box of 100
PF - Goggles | 50001185 | Goggles, protective | 1 each
PF - Mask Washer | 50001113 | USA, washer, Equipment | 1 each
PF - Reader | 50001112 | E/DA, reader, B channel | 1 each
CR Machine | 50001159 | PCR Machine | 1 each
Quality Control | 50001130 | Biosafety cabinets, class ii stand alone | 1 each
### Gavi Yellow Fever Diagnostics Project - Request Form

#### SECTION A: REQUESTOR INFORMATION

Fields marked * in Section A are mandatory

- **Country**: 
- **Organization**: 
- **Contact Name**: 
- **Contact Title**: 
- **Address**: 
- **Telephone**: 
- **Fax**: 
- **Email**: 
- **Date**: 
- **Gavi Approval Code**: 
- **Allocated Budget, US$**: 

#### SECTION B: LIST OF REQUIREMENTS

- Please provide an approval code here
Procurement Request Form – Needed **each time** when procurement requested

<table>
<thead>
<tr>
<th>Item N.</th>
<th>Commodity Group</th>
<th>UNICEF Material Number</th>
<th>Item Description</th>
<th>Specific Product Requirements, if any</th>
<th>Unit of Measure</th>
<th>Approved Quantity</th>
<th>Required Quantity</th>
<th>Preferred Delivery Date</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>Reagent bundles</td>
<td>TB</td>
<td>TBC</td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>2</td>
<td>PPE - Lab Coats</td>
<td>TB</td>
<td>TBC</td>
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<td></td>
<td></td>
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<tr>
<td>3</td>
<td>PPE - Uniscable Glove</td>
<td>TB</td>
<td>TBC</td>
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<tr>
<td>4</td>
<td>PPE - Surgical Masks</td>
<td>TB</td>
<td>TBC</td>
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<td>5</td>
<td>PPE - Goggles</td>
<td>TB</td>
<td>TBC</td>
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<td>6</td>
<td>Elisa Washer</td>
<td>TB</td>
<td>TBC</td>
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<td>Elisa Barrier</td>
<td>TB</td>
<td>TBC</td>
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<td>8</td>
<td>ELK wash</td>
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<td>ELK barrier</td>
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<td>ELK wash</td>
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<td>11</td>
<td>ELK barrier</td>
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<td>ELK wash</td>
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</tr>
<tr>
<td>15</td>
<td>ELK barrier</td>
<td>TB</td>
<td>TBC</td>
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<td></td>
</tr>
</tbody>
</table>
### Procurement Request Form

- **Needed each time when procurement requested**

#### Commodity Group | UNICEF material number | UNICEF Short Description | UoM
--- | --- | --- | ---
Reagent bundles | 50001733 | Clinical Laboratory Bundle for YF Dx/400 tests | 400 test
PE - Lab Coats | 50001561 | Coat, lab, waterproof | 1 each
PE - Disposable Gloves | 50001236 | Gloves, w/o powder, nitr, M, disp.box/200 | box of 200
PE - Surgical Masks | 50001388 | | |
PE - Goggles | 50001356 | Gloves, protective | 1 each
tisa washer | 50001313 | ELSA, washer, 8 channel | 1 each
tisa reader | 50001312 | ELSA, reader, 8 channel | 1 each
PCR Machine | TBC | PCR Machine | 1 each

**Commodity List**

<table>
<thead>
<tr>
<th>Instructions</th>
<th>YF Dx CO Request</th>
<th>Commodity List</th>
</tr>
</thead>
</table>

**Supply Catalogue**

- **No Generic Photo Available**

- **Product Attributes**
  - **General Description**
    - Gloves are powder free, 400, box/200
  - **Product Description**
    - Gloves to reduce contamination in a work area.
  - **Instructions for use**
    - Use in a wide range of laboratory environments.
  - **Packaging and Labelling**
    - Primary packaging: Glove, loose, size: L, disp. box/200
  - **Related Products**
    - No related products found

- **Indicative Price**: 7.72 USD

[supply.unicef.org/s0001602.html](http://supply.unicef.org/s0001602.html)
### SECTOR C - DELIVERY INSTRUCTIONS

**Special Markings:**
- Mode of Shipment: [Insert]
- Equipment, if any: [Insert]

**Shipping Considerations:**
- Special considerations for shipment that are specific to the country, if any: [Insert]
- Special instructions for delivery to specific locations: [Insert]

**Special Instructions:**
- Instructions specific to the delivery process: [Insert]
- Instructions specific to the customs clearance process: [Insert]

**Contact Information:**
- Contact Name: [Insert]
- Contact Email: [Insert]
- Contact Phone: [Insert]

**Additional Information:**
- Any other comments or special requirements: [Insert]

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Please indicate here any country-specific restrictions/consignments that may affect the shipment, such as a freight forwarder, i.e. rainy season, elections, special holidays, etc.
**SECTION D: SUBMITTING YOUR REQUEST**

| TO: | gavi_yfidx@unicef.org  
| UNICEF Supply Division  
| Oceanvej 10-12  
| DK-2150 Nordhavn  
| Denmark  
| Tel: +45 335500  
| Fax: +45 335500 |

By submission of this request form we confirm the information provided is accurate and complete. We understand that UNICEF cannot be held responsible if incorrect information was provided. Any changes to the consignee information will be communicated to UNICEF immediately.

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**Completed request forms must be submitted to UNICEF via email**

**gavi_yfidx@unicef.org**

Should you have any difficulties or questions while filling in the template, contact UNICEF team via the same email.
Thank You