

Manual

Inter-Agency Reproductive Health Kits for Crisis Situations



5th edition
2011

Inter-Agency Reproductive Health Kits
for Use in Crisis Situations
5th edition

CONTENTS	Page
Preface	2
Acknowledgements	3
1. Introduction	4
1.1 Objectives	4
1.2 Key points	5
1.3 Obtaining the Kits	7
1.3.1 Who can order the Kits?	7
1.3.2 Contact points within UNFPA	7
1.3.3 Conditions to be fulfilled for ordering the Kits	8
1.3.4 Funding	8
1.3.5 Cost of the Kits	8
1.3.6 Delivery of the order	8
1.3.7 Placing an order	8
1.3.8 Packaging	9
1.3.9 Quality	9
1.4 Practical information	10
1.4.1 Overview of the Kits	10
1.4.2 Reference and training materials	11
1.5 Example of an order for a refugee camp of 20 000 people	12
2. Contents of the Inter-Agency Reproductive Health Kits	13
Block 1. Kits serving the needs of 10 000 people for 3 months	13
Kit 0: Administration/training supplies	14
Kit 1: Condoms	15
Kit 2: Clean delivery, individual	16
Kit 3: Post rape treatment	17
Kit 4: Oral and injectable contraception	19
Kit 5: Treatment of sexually transmitted infections	20
Block 2. Kits serving the needs of 30 000 people for 3 months	22
Kit 6: Clinical delivery assistance	23
Kit 7: Intrauterine device	26
Kit 8: Management of miscarriage and complications of abortion	27
Kit 9: Suture of tears (cervical and vaginal) and vaginal examination	29
Kit 10: Vacuum extraction delivery	30
Block 3. Kits serving the needs of 150 000 people for 3 months	31
Kit 11: Referral level kit for reproductive health	32
Kit 12: Blood transfusion	37
Annexes	38
Annex 1: Dimensions of the Reproductive Health Kits	38
Annex 2: Assumptions used in calculating supplies	40

PREFACE

The first reproductive health kits were developed by Marie Stopes International in 1992, specifically for use during the Bosnian crisis, when thousands of women were sexually abused and there was an urgent need for appropriate medical equipment. The Sexuality and Family Planning unit of WHO's Regional Office for Europe then reviewed and updated these kits for a second phase in Bosnia.

In 1997, unrest in Albania led to the collapse of the health system, and maternity hospitals urgently requested basic surgical equipment to respond to the reproductive health needs of women. A referral/surgical obstetrics kit was then designed by the Representative of the United Nations Population Fund (UNFPA) in the country, which was intended to be adapted to local situations.

A third version of the Kits was assembled by a number of agencies, including the International Federation of Red Cross and Red Crescent Societies (IFRC), UNFPA, the United Nations High Commissioner for Refugees (UNHCR), and the World Health Organization (WHO), to respond to the refugee crisis in the Great Lakes Region of Africa in 1997.

These experiences led UNFPA to produce a consolidated set of reproductive health kits for use by humanitarian agencies. These kits were intended to speed up the provision of appropriate reproductive health services in emergency and refugee situations. The first version of the current Reproductive Health Kits was discussed and agreed upon by the members of the Inter-Agency Working Group (IAWG) on Reproductive Health in June 1997, and became available from June 1998. A survey among field users was conducted by UNFPA at the end of 1999, and the survey results discussed at the fifth IAWG meeting in February 2000. In July 2000, an IAWG subgroup developed a revised version, with input from both field users and IAWG members. Further reviews in 2003, 2005 and 2010 led to modification of the contents of the Kits, based on suggestions of users and on newly identified needs. The Kits are now in their fifth version. This booklet provides information on their contents, use and ordering procedures as of January 2011.

The IAWG Reproductive Health Kits are complementary to the Interagency Emergency Health Kit, which is designed to meet the primary health care needs of displaced populations without medical facilities. For more information, see: <http://apps.who.int/medicinedocs/en/d/Js13486e/>

Users are invited to make comments on the revised version of the RH Kit. All inputs will be considered for future revisions. Comments and suggestions should be sent to: hrb@unfpa.org

ACKNOWLEDGEMENTS

Many individuals participated in the preparation and revision of the various versions of the IAWG Reproductive Health Kits. They include: Olexander Babanin, Jacqueline Bell, Jennifer Blum, Kate Burns, Pamela Delargy, Wilma Doedens, France Donnay, Dina Engell, Fidel Font, Lorelei Goodyear, Robin Gray, Myriam Henkens, Patricia Hindmarsh, Monir Islam, Ann Janssens, Thilde Knudsen, Sandra Krause, Selenge Lhakhva, Serge Malé, Matthews Mathai, Janet Meyers, Doris Mugrditchian, Thidar Myint, Jonathan Budzi Ndzi, Francis Ndowa, Henrik Nielsen, Nguyen-Tran Toan, Roselidah Ondeko, Anne Petitgirard, Susan Purdin, Ouahiba Sakani, Hakan Sandbladh, Christian Saunders, Marian Schilperoord, Michel Tailhades, Lisa Thomas, Susan Toole, Beverly Tucker, and Tomo Watanabe.

The major contributions of Annick Debruyne, Thérèse Delvaux, Daniel Pierotti, and Monique Supiot are gratefully acknowledged.

1. INTRODUCTION

1.1 OBJECTIVES

A major objective of the Programme of Action adopted at the International Conference on Population and Development, in Cairo in September 1994, was to make reproductive health care, including family planning, accessible to all by 2015. The Programme of Action drew attention to the needs of especially vulnerable populations, including displaced persons and refugees. Reproductive health had previously rarely been considered in responses to humanitarian emergencies and, with this in mind, the concept of a minimal initial service package (MISP) was developed at the Inter-Agency Symposium on Reproductive Health in Emergency Situations held in June 1995.

The aim of the MISP is to reduce mortality and morbidity associated with reproductive health issues during crisis situations, particularly among women. This is accomplished by providing priority reproductive health services from the beginning of the humanitarian response to a crisis, including when refugee camps are being established. The MISP is implemented in a coordinated manner by appropriately trained staff and encompasses a set of priority reproductive health activities, equipment and supplies, and planning activities. The availability of the following is important if the MISP is to be implemented appropriately:

- trained personnel, including a coordinator for reproductive health;
- protocols and job aids on the implementation of selected interventions;
- essential drugs, basic equipment and supplies.

The essential drugs, equipment and supplies needed to provide reproductive health care in crises have been assembled into a set of specially designed pre-packaged kits - *The Inter-Agency Reproductive Health Kits*. The objectives of the kits are in line with those laid out in the Inter-agency Field Manual on Reproductive Health in Humanitarian Settings:¹

- ▲ Reduce human immunodeficiency virus (HIV) transmission:
 - ensure safe blood transfusion practices (*Kit 12*);
 - facilitate and enforce respect for standard precautions (*integrated in all kits*);
 - make free condoms available (*Kit 1*)
- ▲ Prevent and manage the consequences of sexual violence:
 - Put in place measures to protect populations from sexual violence;
 - Make clinical care available for survivors of rape (*Kits 3 and 9*);
 - Ensure the community is aware of the available clinical services
- ▲ Prevent excess neonatal and maternal morbidity and mortality:
 - ensure availability of supplies to manage obstetric and newborn complications at health facilities (*Kits 6, 8, 9 and 10*), and at referral hospitals (*Kits 11 and 12*);
 - provide clean delivery kits to visibly pregnant women and birth attendants for use in home deliveries when access to a health facility is not possible (*Kit 2*);
 - establish a referral system to facilitate transport and communication
- ▲ Plan for the provision of comprehensive reproductive health services as soon as the situation permits (*administrative supplies to facilitate coordination and planning are included in Kit 0*)

Experience has shown that, in addition to providing the MISP, it is also important to respond to other reproductive health needs in the early phase of the humanitarian response, including:

- ▲ Ensure the availability of contraceptives to meet the demand (*Kits 4 and 7*).
- ▲ Provide syndromic treatment for patients with symptoms of sexually transmitted infections (*Kit 5*).

Reference and Training materials can be downloaded (see section 1.4.2) or sent upon request.

1 *Inter-agency Field Manual on Reproductive Health in Humanitarian Settings, 2010 Revision for Field Review*, IAWG, Geneva, 2010, http://www.iawg.net/resources/field_manual.html#download

1.2 KEY POINTS

▲ The Reproductive Health Kits are designed for use in the early phase of a crisis situation

The Inter-Agency Reproductive Health Kits have been primarily designed to facilitate the provision of priority reproductive health services to displaced populations without medical facilities, or where medical facilities are disrupted during a crisis.² They contain essential drugs, supplies and equipment to be used for a limited period of time and a specific number of people.

Some of the medicines and medical devices contained in the kits may not be appropriate for all cultures and countries. This is inevitable as these are standardized emergency kits, designed for worldwide use, prepacked and kept ready for immediate dispatch. The Kits are **not** intended as re-supply kits and, if used as such, may result in the accumulation of items and medicines which are not needed.

It must be emphasized that, although supplying medicines and medical devices in standard pre-packed kits is convenient early in an emergency, specific local needs must be assessed as soon as possible and further supplies must be ordered accordingly. Therefore, once basic reproductive health services have been established, the reproductive health coordinator should assess reproductive health needs and re-order medicines, disposables and equipment based on consumption of these items, in order to ensure that the reproductive health programme can be sustained. All efforts should be made to strengthen or develop a medical supplies logistics management information system. Re-ordering should be done through regular channels (via the national procurement system, nongovernmental organizations (NGOs), or other agencies) or through the UNFPA Procurement Services Branch (see box below).

How to place a *follow-up* order of RH supplies through the UNFPA Procurement Services Branch

1. Determine which medicines, disposables and medical equipment have been consumed, in which quantities.
2. Estimate needs for the next 6 months.
3. Place an order through UNFPA's Emergency Procurement Team (see section 1.3.2).

First-time customers who are ordering supplies

- UNFPA issues a pro forma invoice together with a Memorandum of Understanding (MoU)
- If both pro forma invoice and MoU are acceptable, you (the Requestor) sign the MoU and transfer the funds into the UNFPA account;
- UNFPA issues the required purchase orders and sends a copy to you as Requestor.

UNFPA Country Office

- The Emergency Procurement Team will re-direct your request to your Regional Procurement Team
- Follow the regular payment procedures.

▲ Each kit is formulated to be self-sufficient.

Each of the Reproductive Health Kits responds to a particular reproductive health need and contains supplies calculated for a specific number of people for a three-month period. Thus, the kits can be ordered separately as a 'stand-alone' response to a particular situation. One exception relates to sterilizing equipment: Kits 7, 8 and 9 do not include sterilizing equipment because they are usually used in conjunction with Kit 6 A (which contains a pressure-cooker type autoclave). Kit 11 (referral level) does not include an autoclave, because it is assumed that hospitals have a sterilization service.

² Primary health care services in emergency situations may be implemented through a standard Emergency Health Kit, containing essential drugs, supplies and equipment. This Kit was developed some 30 years ago by WHO in collaboration with UN Agencies and NGOs. The Kit was revised in 1998, in 2006 and in 2011 and is now known as the Interagency Emergency Health Kit 2011 (IEHK 2011). It includes midwifery supplies, post-rape treatment, and supplies for use in implementing standard precautions, to allow some basic components of reproductive health services to be offered. For implementation of more comprehensive reproductive health services in emergency situations, the IEHK 2011 recommends the Reproductive Health Kits.

▲ **Some kits are designed for use only by qualified and trained health personnel.**

The level of skill required for the use of each kit is detailed in this booklet. You are advised to review this information before ordering the kits.

▲ **The Reproductive Health Kits are updated on a regular basis**

The Inter-Agency Reproductive Health Kits are revised regularly, using the most up-to-date information available. Users are invited to comment on the functioning of the individual kits in the field. All inputs will be considered for future revisions.

Notes

- Kit 6 and 11: Diazepam and pentazocine are controlled substances, and require an import license from the country of destination prior to shipment. As it can take some time to obtain this license, these pharmaceutical products are not included. They should be procured locally.
- Kits 6, 8, 11B and 12: These kits contain items that must be kept cool: oxytocin and tests for blood grouping, hepatitis, and syphilis (rapid plasma reagin (RPR)). For these items the cold chain must be maintained during transportation and storage. These products are therefore packed and shipped **separately** in a cool box. Oxytocin will remain effective even if the cold chain is temporarily broken, although it may lose some of its efficacy.

Major changes since the 4th edition of the Inter-agency Reproductive Health Kits

Kit 3: Post rape treatment

Kit 3 A and 3 B have now become one Kit 3, to reflect the importance of giving all survivors a comprehensive package of post-rape care, including STI presumptive treatment, emergency contraception and PEP for HIV prevention, when appropriate

Kit 6: Clinical delivery assistance

To allow for more flexible ordering, Kit 6 was split into **Part A: Reusable equipment** and **Part B: Drugs and disposable equipment**.

Resuscitator, hand operated, infant/child, is added for newborn resuscitation

Kit 8: Management of miscarriage and complications of abortion

Misoprostol 200 µg tab, is added for management of incomplete abortion

Dilators, Denniston, polymer, replace the Hegar uterine dilators, which are no longer included.

1.3 OBTAINING THE KITS

1.3.1 Who can order the kits?

Reproductive Health Kits may be ordered by the following entities:

- UNFPA's Humanitarian Response Branch (HRB);
- UNFPA country offices;
- funding agencies, such as the European Community Humanitarian Aid Department (ECHO), the World Bank, the UK Department for International Development (DFID), the Canadian International Development Agency (CIDA), and the US Agency for International Development (USAID);
- UN system funds, programmes and agencies, such as UNHCR, WHO, United Nations Children's Fund (UNICEF), United Nations Development Programme (UNDP), the Joint United Nations Programme on HIV/AIDS (UNAIDS), the UN Department of Peacekeeping Operations (DPKO);
- international agencies, such as IFRC, the International Organization for Migration (IOM), the International Planned Parenthood Federation (IPPF), and other NGOs that have a memorandum of understanding with UNFPA;
- national authorities.

1.3.2 Contact points within UNFPA

The Kits can be ordered directly from:

UNFPA Procurement Services Branch
Emergency Procurement Team
Midtermolen 3
2100 Copenhagen
Denmark
Tel: +45 3546 7000
Fax: + 45 3546 7018
E-mail: rhkits@unfpa.org

Information on the Kits or assistance with ordering can be provided by:

UNFPA staff in field offices (in the capital city of the country);

UNHCR or other UN coordinating agency in the country;

UNFPA/HRB
605 3rd Avenue
New York, NY 10158
USA
Tel: +1 212-297-5245 / 5254

UNFPA/HRB
11-13, chemin des Anémones
1219 Chatelaine, Geneva
Switzerland
Tel: +41 22 917 83 15 / Fax: +41 22 917 80 16
Email: hrb@unfpa.org

1.3.3 Conditions to be fulfilled for ordering the kits

Before ordering the Kits:

- Undertake a rapid assessment of the local situation to confirm that reproductive health kits are needed, which types are needed (i.e. was the population using female condoms or IUDs before the crises?), and where they are needed.
- Base the quantity and type of Reproductive Health Kits requested on the size of the population to be served, the location and type of health centers and the skills of health care providers in these centers.
- Ensure that necessary funds are available (see below)

1.3.4 Funding

There are two possible sources of funding:

(a) Own resources (e.g. of government, NGO or other agency)

The order should be placed directly with UNFPA Procurement Services Branch (see 1.3.2). Funds must be received by UNFPA before the Kits can be shipped.

(b) UNFPA funds

Funds may be drawn from the regular UNFPA country programme (including umbrella projects). UNFPA country offices can apply to the Humanitarian Response Branch and Regional Offices for emergency funding.

1.3.5 Cost of the kits

- The cost of each kit changes periodically. The latest prices can be obtained from UNFPA's Procurement Services Branch or UNFPA Country Office.
- Airfreight costs: an amount equivalent to 30% of the cost of each kit should be added to cover these charges (except for the condom kit, for which shipping costs can vary between 30% and 100% of the basic cost, depending on the destination).
- Overhead costs: UNFPA charges a nominal fee of 5% to cover administrative costs.

1.3.6 Delivery of the order

- In an emergency: delivery will be 2-7 days after finalization of the budget allocation.
- In a non-crisis situation: delivery will be 10-12 weeks after finalization of the budget allocation.

1.3.7 Placing an order

When placing an order, provide the following information to the UNFPA Procurement Services Branch:

- The availability of funds and the chargeable budget code. Shipment cannot be made until funding issues are resolved.
- The name and contact details of the person responsible for ordering and coordinating the delivery of the kits.
- The name and complete contact details (address, telephone, fax, email) of the person responsible for receiving the kits in the field.

If multiple destinations in a county are involved, a detailed list is required outlining the respective destinations, types and quantities of each kit to each destination, contact persons, etc. (e.g. 4 x kit 1 and 2 x kit 6 to NGO A, address, contact person, phone number; 3 x kit 2 to health centre B, address, contact person, phone number; 2 x kit 11 to hospital C, etc.).

1.3.8 Packaging

To facilitate logistics in the country, the boxes containing the supplies:

- are marked with the weight and volume of each kit;
- are small enough to be handled by one or two people;
- are clearly marked with kit number and box numbers, description, consignee and other relevant information;
- are marked with a coloured band on all sides, with a distinct colour for each kit (see section 1.4).
- have a self-adhesive pouch attached to the outside, containing a detailed list of contents.

1.3.9 Quality

In order to improve the quality of the kits, feedback from recipients is important. We encourage comments on packaging, shipping issues, quality of products, etc. We also encourage recipients to make suggestions on how the procurement system can be improved. Please address this information to the UNFPA Procurement Services Branch (see section 1.3.2).

1.4 PRACTICAL INFORMATION

1.4.1 Overview of the Kits

The Reproductive Health Kits can be categorized in three 'blocks'. Each block targets a different health service delivery level, as follows:

Block 1

contains six kits. The items in these kits are intended for use by service providers delivering RH care at community and primary health care level. Each kit is designed to provide for the needs of 10 000 people for 3 months. The kits contain mainly medicines and disposable items. Kits 1 and 2 are divided into parts A and B, which can be ordered separately.

		Color code
Kit 0	Administration/training supplies	Orange
Kit 1	Condoms (A and B)	Red
Kit 2	Clean delivery, individual (A and B)	Dark Blue
Kit 3	Post rape treatment	Pink
Kit 4	Oral and injectable contraception	White
Kit 5	Treatment of sexually transmitted infections	Turquoise

Block 2

has five kits, containing both disposable and reusable material, for use by trained healthcare providers with additional midwifery and selected obstetric and neonatal skills at the health centre or hospital level. These kits are designed to be used for a population of 30 000 people over a 3-month period. It is possible to order these kits for a population of less than 30 000 persons; this means that the supplies will last longer. Kit 6 has two parts, A and B, which are used together but can be ordered separately.

		Color code
Kit 6	Clinical delivery assistance (A and B)	Brown
Kit 7	Intrauterine devices (IUDs)	Black
Kit 8	Management of miscarriage and complications of abortion	Yellow
Kit 9	Suture of tears (cervical and vaginal) and vaginal examination	Purple
Kit 10	Vacuum extraction delivery	Grey

Block 3

In humanitarian settings, patients from the affected population are referred to the nearest hospital, which may require support in terms of equipment and supplies to be able to provide the necessary services for this additional case load. Block 3 includes two kits containing disposable and reusable supplies to provide comprehensive emergency obstetric and newborn care at the referral (surgical obstetrics) level. It is estimated that a hospital at this level covers a population of approximately 150 000 persons. The supplies provided in these kits would serve this population for 3 months. Kit 11 has two parts, A and B, which are usually used together but which can be ordered separately.

		Color code
Kit 11	Referral level kit for reproductive health (A and B)	Fluorescent green
Kit 12	Blood transfusion kit	Dark green

1.4.2 Reference and training materials

References and training materials on reproductive health can be downloaded from www.rhrc.org or <http://www.who.int/reproductive-health/publications>. The following documents are recommended:

- *Inter-agency Field Manual on Reproductive Health in Humanitarian Settings: 2010 Revision for Field-testing*, Inter-agency Working Group on Reproductive Health in Crises (IAWG), 2010. http://www.iawg.net/resources/field_manual.html#download.
- *Minimum initial services package (MISP) for reproductive health in crisis situations. A distance learning module*. New York, Women's Commission, 2007. <http://misp.rhrc.org/>
- *Monitoring and evaluation tool kit*, Reproductive Health Response in Conflict (RHRC) Consortium, 2004
- *Guidelines for Addressing HIV in Humanitarian Settings*. Geneva, Inter-Agency Standing Committee (IASC), December 2010
- *Guidelines for Gender-based Violence Interventions in Humanitarian Settings*. Geneva, Inter-Agency Standing Committee (IASC), 2005
- *Clinical Management of Rape Survivors. Developing protocols for use with refugees and internally displaced persons*. Geneva, WHO/UNHCR/UNFPA, Revised edition 2005
- *Integrated Management of Pregnancy and Childbirth. Pregnancy, childbirth, postpartum and newborn care. A guide for essential practice*. Geneva, WHO, 2006.
- *Field-friendly guide to integrate emergency obstetric care in humanitarian programs*. Women's Refugee Commission, on behalf of the Reproductive Health Response in Conflict Consortium (RHRC), 2005.
- *Guidelines for the management of sexually transmitted infections*. Geneva, WHO, 2003.

Pharmacy management

- *UNHCR Drug Management Manual 2006. Policies, Guidelines, UNHCR List of Essential Drugs*. UNHCR, Geneva, 2006. <http://www.unhcr.org/43cf66132.html>.
- *Guidelines for the Storage of Essential Medicines and Other Health Commodities*. John Snow, Inc/DELIVER in collaboration with WHO, Arlington, VA, 2003. http://deliver.jsi.com/dlvr_content/resources/allpubs/guidelines/GuidStorEsse_Pock.pdf.
- *Procurement Capacity Toolkit, Tools and Resources for Procurement of Reproductive Health Supplies*, PATH, Seattle, 2009. <http://www.path.org/projects/procurement-toolkit.php>
- *Logistics handbook: a practical guide for supply chain managers in family planning and health programs*. John Snow, Inc. / DELIVER. Arlington, VA, 2009. http://deliver.jsi.com/dlvr_content/resources/allpubs/guidelines/LogiHand.pdf

Medicines

- *The interagency list of essential medicines for reproductive health*, WHO, 2006. http://www.who.int/reproductivehealth/publications/general/RHR_2006_1/en/

1.5 EXAMPLE OF AN ORDER FOR A REFUGEE CAMP OF 20 000 PEOPLE

Assessment

1. Number of refugees: 20 000
2. Special observations: Administrative supplies are available in the capital; female condoms are known and used; IUDs were not part of the contraceptive method mix prior to the crisis
3. Personnel: 1 health center with 1 medical doctor, 2 trained nurses, 1 trained midwife; birth attendants and health care workers in the community
4. Referral level: local hospital 10 km away, poorly equipped but with trained staff able to perform emergency obstetric procedures

Order

Item	Quantity
Administration/training supplies (kit 0)	0
Condoms (kit 1) (A + B)	2
Clean delivery, individual (kit 2) (A + B)	2
Post rape treatment (kit 3)	2
Oral and injectable contraception (kit 4)	2
Treatment of sexually transmitted infections (kit 5)	2
Clinical delivery assistance (kit 6) (A + B) (for health facility)	1
Intrauterine devices (kit 7)	0
Management of miscarriage and complications of abortion (kit 8)	1
Suture of cervical and vaginal tears (kit 9)	1
Vacuum extraction delivery (kit 10)	1
<i>To support the referral hospital</i>	
Referral level kit for reproductive health (kit 11) (A + B)	1
Blood transfusion (kit 12)	1

Reminder

Kits 0–5 are sufficient for the estimated needs of 10 000 people for 3 months.

Kits 6–10 are sufficient for the estimated needs of 30 000 people for 3 months.

Kits 11 and 12 are sufficient for the estimated needs of 150 000 people for 3 months.

(For more information see **Annex 2: Assumptions used in calculating supplies**).

2. CONTENTS OF THE REPRODUCTIVE HEALTH KITS

BLOCK 1 KITS SERVING THE NEEDS OF 10 000 PEOPLE FOR 3 MONTHS

Kit 0	Administration/training supplies
Kit 1	Condoms: Part A (male condoms) and Part B (female condoms)
Kit 2	Clean delivery, individual: Part A (for mother) and Part B (for attendants)
Kit 3	Post rape treatment
Kit 4	Oral and injectable contraception
Kit 5	Treatment of sexually transmitted infections

KIT 0
ADMINISTRATION/TRAINING SUPPLIES

Use: To facilitate administration and training activities.

Instructions: None.

Target population: Community health workers and health personnel.

Contents:

Calculator, solar-powered	1
Board, white, adhesive, washable, roll, 67 x 100 cm	2
Binder with lever, 31 x 29 cm, various colours	5
Book, exercise, 17 x 22 cm, 5mm-squared, 100 pages	20
Book, exercise, 21 x 29.7 cm, 5mm-squared, 100 pages	3
Paper, A4, 21 x 29.7 cm, 80 g, white	1000
Glue, stick, large	3
Sticker, UNFPA, 6 x 12 cm	20
Sticker, UNFPA, 11 x 22 cm	20
Pen, ballpoint, black	20
Pen, ballpoint, red	20
Marker, erasable, black	12
Marker, erasable, red	12
Marker, erasable, blue	12
Marker, flipchart, red, tip 4.5 mm	12
Marker, flipchart, black, tip 4.5 mm	12
Pencil, HB	20
Pencil sharpener, tapered	2
Scissors, blended, 17 cm	1
Tape, adhesive, 19 mm x 33 m, clear, roll	4

KIT 1 CONDOMS

Use: To provide male and female condoms at community and at all health service delivery levels.

Instructions: Health and community workers should be able to explain correct condom use.

Target population: *Male condoms:* Kit contents are based on the assumptions that 20% of the population in a camp are adult males (20% of 10 000 = 2000), that 20% of this group will use condoms (i.e. 400 users), and that each user will need 12 condoms each month for the three months (number of condoms = $400 \times 12 \times 3 = 14\ 400$).

Female condoms: Kit contents are based on the assumptions that around 25% of the affected population are potentially sexually active women (25% of 10 000 = 2500), that 1% of this group will use female condoms (i.e. 25 users), and that each user will need 6 condoms each month for the three months (number of condoms = $25 \times 6 \times 3 = 450$).

Contents:

Part A: Male condoms

Male condoms	14 400
20% extra (to allow for wastage)	2880
Total	17 280 (120 gross)
Stationery	
Leaflets about use of male condoms, English and French	400

Part B: Female condoms

Female condoms	450
20% extra (to allow for wastage)	90
Total	540 (3.8 gross)
Stationery	
Leaflets about use of female condoms, multilingual	25

Remarks

Parts A and B can be ordered separately in different quantities.

Depending on the culture of the country where this kit will be used, the pictures in the leaflets may have to be adapted.

For orders of smaller size male condoms, contact the UNFPA Procurement Services Branch.

KIT 2
CLEAN DELIVERY, INDIVIDUAL

Use: Individual, clean deliveries, at home or in an under-equipped maternity unit, without skilled birth attendants.

Part A: individual delivery. Packages to be distributed to every woman who is more than 6 months pregnant.

Part B: equipment for birth attendants. Depending on the situation and local practices, five birth attendants may be given a shoulder bag containing clean delivery kits (as in Part A) and other items.

Instructions: Birth attendants should be instructed on the contents and use of the kit.

Target population: Kit contents are based on the assumptions that, in a population of 10 000 people with a crude birth rate (CBR) of 4%, there will be 100 deliveries in 3 months. 100 kits will be used for the women delivering during the first 3 months, while another 100 kits will be distributed to women who are 6-9 months pregnant.

Contents:

Part A: Individual delivery: 200 of the following items, packed as separate packages

Bag, plastic, approximately 18 x 28 cm, snap-lock fastening, for disposal of placenta, containing the following items:	1
Toilet soap, bar, approximately 110 g, wrapped	1
Drawsheet, plastic, approximately 100 x 100 cm	1
Razor blade, single-edged, disposable	1
Tape, umbilical, 3 mm x 15 cm	3
Cotton cloth/towel, 'tetra', approx. 90 g/m ² , approx. 100 x 100 cm	2
Gloves, examination, medium, single use	2
Stationery	1
Pictorial instruction sheet	1

Part B: For use by birth attendants

Bag, shoulder, UNFPA logo, vinyl, approx 360 x 230 x 610 mm	5
Gloves, examination, medium, single use, box of 100	5
Flashlight, LED, re-chargeable	5
Apron, protective, plastic, reusable	5
Poncho, wet-weather	5

Remarks

Parts A and B can be ordered separately in different quantities.

Clothes or blankets to protect the baby and culturally appropriate sanitary products should be procured locally wherever possible. Local products are often less expensive and familiar to mothers.

KIT 3 POST RAPE TREATMENT

Use: Management of the immediate consequences of sexual violence.

Instructions: Health personnel should have been trained to:

- conduct pregnancy tests;
- prescribe emergency contraception, if the client chooses to have this;
- prescribe presumptive treatment for STIs and post-exposure prophylaxis (PEP) to prevent HIV infection;
- counsel clients and refer clients to psychosocial and protection services.

Target population: Kit contents are based on the assumptions that around 25% of the population are sexually active women (25% of 10 000 = 2500); 2% of these will be raped (50 women); in addition 10 children will be raped (5 weighing less than 30 kg and 5 weighing 30 kg or more); 50% of clients will need a pregnancy test. PEP must be given within 72 hours of the assault. It is assumed that 30 adults and 8 children (4 weighing 10-19 kg and 4 weighing 20-39 kg) present within that time limit.

Contents:

Medicines	
Levonorgestrel, tablet, 1.5 mg, (treatment: single dose)	55 packs
* Azithromycin, capsule, 250 mg	220
* Azithromycin, oral suspension, 200 mg per 5 ml, bottle 15 ml	5
** Cefixime, tablet, 200 mg	110
** Cefixime (as trihydrate), dry syrup for oral suspension, 100 mg/5 ml, bottle 30 ml	10
Zidovudine, 300 mg, plus lamivudine, 150 mg, combined tab (adults: 2 tabs/day for 28 days)	1800
Zidovudine, capsule, 100 mg (see treatment protocol for children)	840
Lamivudine, tablet, 150 mg (see treatment protocol for children)	360
Medical devices: Renewable	
Pregnancy test, temperature stable	25
Bag (envelope), plastic, for drugs, approximately 10 x 15 cm, pack of 100	1
Treatment guidelines	
<i>Post-Rape Care Checklist for Women & Men, and Children</i> , PATH, 2010	1 English 1 French
<i>Clinical Management of Survivors of Rape: a guide to the development of protocols for use in refugee and internally displaced situations</i> , Revised edition, WHO/UNHCR, 2004	1 English 1 French
Emergency contraception patient information leaflet, to be adapted locally	2 English 2 French
Post-exposure prophylaxis treatment protocol and patient information leaflet to be adapted locally	1 English 1 French

* *Azithromycin: for patients 45 kg or over, treatment is a single dose of 1 g (4 x 250 mg capsules). For patients less than 45 kg, treatment is 20 mg/kg.*

** *Cefixime: for patients of 45 kg or over, treatment is a single dose of 400 mg. For patients less than 45 kg, treatment is 8 mg/kg.*

Remarks

Men may also present after rape and should receive appropriate treatment and referral.

For tetanus and hepatitis vaccines, refer to the nearest operational health centre.

KIT 4
ORAL AND INJECTABLE CONTRACEPTION

Use: To respond to women's needs for hormonal contraception.

Instructions: Health personnel should have been trained to:

- explain the advantages and disadvantages of oral and injectable contraceptives;
- explain how emergency contraception is used;
- identify contraindications to hormonal contraception;
- give injections.

Target population: The contents of the kit are based on the assumptions that 25% of the camp population are women aged 15–49 years (25% of 10 000 = 2500), and that 15% of these women use contraception (i.e. 375 women). Of these:

- 30% use combined oral contraceptives (113 women);
- 55% use injectable contraceptives (210 women);
- 5% use progestin-only pills (POP) (20 women);
- each month, 5% may request emergency contraception (20 women);
- 5% use an intrauterine device (IUD) - see Kit 7.

Contents:

Medicines	
Ethinylestradiol 0.03 mg, plus levonorgestrel, 0.15 mg, combined tablet, 1 strip for 1 cycle (113 women x 3 cycles + 10% wastage)	375
Levonorgestrel, tablet, 1.5 mg, (emergency contraception)	60
Levonorgestrel, tablet, 0.03 mg, 1 strip for 1 cycle (20 women x 3 cycles)	60
Medroxyprogesterone acetate, depot injection, 150 mg/ml, 1-ml vial	300
Chlorhexidine gluconate, concentrated solution, 5%, bottle, 1000 ml	3
Medical devices, renewable	
Syringe, luer, 2 ml, sterile, single use	300
Needle, luer, 21G (0.8 x 40 mm), sterile, single use	600
Cotton wool, 500-g roll, non-sterile	4
Safety box, for used syringes and needles, capacity 5 litres	3
Treatment guidelines	
<i>Family planning, A global handbook for providers</i> , Chapters 1 to 4	1 English 1 French

Remarks

Contraceptives should be reordered after a reproductive health needs assessment. Bulk ordering is preferable, as it is less costly, and should be done through usual channels or UNFPA's Procurement Services Branch.

KIT 5
TREATMENT OF SEXUALLY TRANSMITTED INFECTIONS

Use: To treat STIs in people presenting with symptoms.

Instructions: Health personnel should have been trained to:

- diagnose and treat STIs according to the syndromic approach;
- explain the importance of treating the sexual partner;
- promote and explain the use of condoms.

Target population: The kit contents are based on the assumptions that 50% of the affected population are adults (50% of 10 000 = 5000), and that 5% of these (250 people) have an STI. Of these:

- 20% have genital ulcer syndrome (50 people);
- 50% have urethral discharge syndrome (125 people);
- 30% have vaginal discharge syndrome (75 people).

For each syndrome, it is assumed that there are an additional 25 patients who are children (10 under 30 kg and 15 of 30–45 kg).

Contents:

Medicines	
Genital ulcer syndrome	
Benzathine benzylpenicillin, powder for solution for injection, vial (equivalent to 2.4 million units of benzylpenicillin)	65
Benzathine benzylpenicillin, powder for solution for injection, vial (equivalent to 1.2 million units of benzylpenicillin)	10
Water for injection, 10-ml ampoules	75
* Azithromycin, capsule, 250 mg	240
* Azithromycin, suspension, 200 mg/5 ml, bottle 15 ml	10
Chlorhexidine gluconate, concentrated solution, 5%, bottle, 1000 ml	3
Urethral discharge syndrome	
** Cefixime, tablet, 200 mg	270
** Cefixime (as trihydrate), dry syrup for oral suspension, 100 mg/5 ml, bottle 30 ml	20
* Azithromycin, capsule, 250 mg	540
* Azithromycin, suspension, 200 mg/5 ml, bottle 15 ml	10
Vaginal discharge syndrome (treat for vaginitis and cervicitis)	
Metronidazole, tablet, 250 mg (single dose of 8 tablets, <i>or</i> 2 tablets twice a day for 7 days)	2000
Clotrimazole, vaginal tablet, 500 mg (single dose)	100
** Cefixime, tablet, 200 mg	200
** Cefixime (as trihydrate), dry syrup for oral suspension, 100 mg/5 ml, bottle 30 ml	10
* Azithromycin, capsule, 250 mg	340
* Azithromycin, suspension, 200 mg/5 ml, bottle 15 ml	10
Condoms	
Male condoms (20 gross)	2880
Female condoms (3 per woman)	90

Medical devices, renewable	
Syringe, luer, 5 ml, sterile, single use	75
Needle, luer, 21G (0.8 x 40 mm), sterile, single use	150
Cotton wool, 500-g roll, non-sterile	3
Safety box, for used syringes and needles, capacity 5 litres	4
Bag (envelope), plastic, for drugs, approximately 10 x 15 cm, pack of 100	10
Stationery	
Leaflet on use of male condoms	100 English 100 French
Leaflet on use of female condoms, multilingual	60
Treatment guidelines	
<i>Sexually transmitted and other reproductive tract infections. A guide to essential practice.</i> Geneva, WHO, 2005.	1 English 1 French
Wallchart on the syndromic treatment of STIs	1 English/ French

* *Azithromycin: for patients 45 kg or over, treatment is a single dose of 1 g (4 x 250 mg capsules). For patients less than 45 kg, treatment is 20 mg/kg.*

** *Cefixime: for patients of 45 kg or over, treatment is a single dose of 400 mg. For patients less than 45 kg, treatment is 8 mg/kg.*

Remarks

Drugs should be reordered after a reproductive health needs assessment. The antibiotics ordered should be based on the national STI treatment protocol. The antibiotics in the national protocol may be different from those in this kit.

HIV tests are not included in this kit. HIV testing should be provided as part of a programme of voluntary counseling and testing, and not in isolation.

BLOCK 2
KITS SERVING THE NEEDS OF 30 000 PEOPLE FOR 3 MONTHS

Kit 6	Clinical delivery assistance (A and B)
Kit 7	Intrauterine devices
Kit 8	Management of miscarriage and complications of abortion
Kit 9	Suture of tears (cervical and vaginal) and vaginal examination
Kit 10	Vacuum extraction delivery

KIT 6
CLINICAL DELIVERY ASSISTANCE
PART A: REUSABLE EQUIPMENT

This kit is for use in health facilities, together with Kit 6 Part B.

- Use:**
- to perform normal deliveries;
 - to suture episiotomies and perineal tears under local anaesthesia;
 - to stabilize patients with obstetric complications (e.g. eclampsia or haemorrhage) before referring to higher level care.

Instructions: For use by trained personnel: midwives, nurses with midwifery skills and doctors.

Contents:

Medical devices, equipment	
Sphygmomanometer, adult, aneroid	1
Stethoscope, binaural, complete	1
Stethoscope, fetal, monaural	2
Basin, kidney, stainless steel, approx. 825 ml	2
Thermometer, clinical, digital, 32-43 °C	4
Brush, hand, scrubbing, plastic	2
Tourniquet, rubber, approx. 75 cm	2
Resuscitator, hand-operated, infant, child, set	1
Tray, instruments, stainless steel, approx. 225 x 125 x 50 mm, with cover	1
Delivery set (UNICEF 2007 ref: 9910003)	2 sets
Scissors, Mayo, 140 mm, curved, b/b (for cutting cord)	2
Scissors, gynaecological, 200 mm, curved, b/b (for episiotomy)	2
Forceps, artery, Kocher, 140 mm, straight	4
Suture set (based on UNICEF suture set, 2007 ref: 9910004)	2 sets
Scissors, Deaver, 140 mm, curved, s/b	2
Needle holder, Mayo-Hegar, 180 mm, straight	2
Forceps, tissue, standard, 145 mm, straight	2
Forceps, artery, Kocher, 140 mm, straight	2
Sterilization kit (UNICEF 2007 ref: 9908200)	1 kit
Stove, kerosene, single burner, pressure	1
Sterilizer, steam, approx. 39 litres, w/access	1
Timer, 60 minutes	1
Drum, sterilizing, approx. 165 mm diameter	2
Drum, sterilizing, approx. 260 mm diameter	2
Drum, sterilizing, approx. 290 mm diameter	2
Forceps, artery, Kocher, 140 mm, straight	1
Lighting	
Flashlight, frontal, LED, battery-operated	1
Kerosene storm-lamp + extra socks	1

KIT 6
CLINICAL DELIVERY ASSISTANCE
PART B: DRUGS AND DISPOSABLE EQUIPMENT

This kit is for use in health facilities, together with Kit 6 Part A.

Use:

- to perform normal deliveries;
- to suture episiotomies and perineal tears under local anesthesia;
- to stabilize patients with obstetric complications (e.g. eclampsia or haemorrhage) before referring to higher level care.

Instructions: For use by trained personnel: midwives, nurses with midwifery skills and medical doctors.

Target population: The kit contents are based on the assumptions that the affected population has a crude birth rate of 4%, and 300 deliveries will occur in 3 months (4% of 30 000 = 1200 deliveries per year / 4 months = 300 deliveries). If 15% of these are in the health facility, supplies will be needed for 45 deliveries. The estimated number of pregnant women in the population at any time would be 300 in the first trimester of pregnancy, 300 in the second trimester and 300 in the last trimester.

Contents:

Medicines	
Amoxicillin, tablet, 250 mg	5000
Metronidazole, tablet, 250 mg	2100
Ferrous sulfate + folic acid, tablet, 200 mg + 0.4 mg, box of 1000	5
Tetracycline hydrochloride, eye ointment, 1%, tube 5 g	6
Lidocaine hydrochloride, solution for injection, 10 mg/ml (1%), 20-ml ampoule	20
* Oxytocin, injection, 10 IU/ml, 1-ml ampoule	50
Sodium chloride, solution for infusion, 0.9% (isotonic), 1-litre bottle + infusion-giving set, sterile, single use	15
Glucose, solution for infusion, 5% (iso-osmotic), 1-litre bottle + infusion-giving set, sterile, single use	20
Dextran 70, solution for injection, 6%, 500-ml bottle + infusion-giving set, sterile, single use	20
Magnesium sulfate, solution for injection, 500 mg/ml, 10-ml ampoule	10
Calcium gluconate (monohydrate), solution for injection, 100 mg/ml, 10-ml ampoule	5
Water for injection, 10-ml ampoule	20
Chlorhexidine gluconate, concentrated solution, 5%, bottle, 1000 ml	12
Medical devices, renewable	
Clamp, umbilical, cord, sterile, single use	100
Cannula, intravenous, short, 20G, sterile, single use	25
Syringe, luer, 10 ml, sterile, single use	50
Syringe, luer, 2 ml, sterile, single use	100
Needle, luer, 21G (0.8 x 40 mm), sterile, single use	200
** Syringe, feeding, catheter tip, 50/60 ml, sterile, single use	10
Gloves, surgical, size 8, sterile, single use, pair	30
Gloves, surgical, size 7, sterile, single use, pair	30

Gloves, gynaecological, medium, sterile, single use, pair	5
Gloves, examination, medium, single use, box of 100	3
Suture, synthetic, absorbable, DEC3(2/0), needle 3/8 30 mm, round, sterile, single use, box of 12	3
Extractor, mucus, 20 ml, sterile, single use	50
Tube, suction, CH10, 50 cm long, conical tip, sterile, single use	10
Tube, suction, CH14, 50 cm long, conical tip, sterile, single use	10
Catheter, urethral, CH12, sterile, single use	20
Compress, gauze, 10 x 10 cm, sterile, single use, pack of 5	50
Cotton wool, 500-g roll, non-sterile	3
Tape, adhesive, zinc oxide, 2.5 cm x 5m	5
Toilet soap, bar, approx. 110 g, wrapped	30
Safety box, for used syringes and needles, capacity 5 litres	6
Glasses, safety, regular size, disposable	2
Bag (envelope), plastic, for drugs, approx. 10 x 15 cm, pack of 100	10
Apron, protection, plastic, reusable	2
Drawsheet, plastic, approx. 90 x 180 cm	2
Urinary protein test strips, box of 50	3
Indicator, TST (Time, Steam, Temperature) control spot	300
Battery, dry cell, alkaline, AAA, 1.5V, for frontal flashlight	10
Stationery	
Exercise book, A4, ruled, 100 pages	2
Pen, ballpoint, blue	10
Bag, multipurpose, vinyl, approx. 360 x 230 x 610 mm	1
Treatment guidelines	
<i>Infection prevention. A reference booklet for health care providers.</i> EngenderHealth, 2001.	1 English 1 French
<i>Guidelines for management of women with pre-eclampsia and eclampsia.</i> Geneva, WHO, 2006.	1 English 1 French
<i>Instrument Sterilization Process.</i> Wall chart, adapted from EngenderHealth, PATH 2010	1 English 1 French

* *Oxytocin must be kept cool during transport and storage. It is therefore packed and sent separately.*

** *The sterile syringe 50/60 ml catheter tip can be used for manual pharyngeal or tracheal aspiration/suction.*

Remarks

Kit 6 A and B can be ordered separately in different quantities.

Partographs can be obtained by making copies of the model in the *Inter-agency Field Manual on Reproductive Health in Humanitarian Settings*, 2010 Revision for Field Review, page 143.

Diazepam is not included in this kit because of import licensing requirements. This drug should be purchased locally (10 vials for injection, 5 mg/ml, 2 ml).

Clothes or blankets to protect the baby and culturally appropriate sanitary products should be procured locally wherever possible. Local products are often less expensive and familiar to mothers.

KIT 7
INTRAUTERINE DEVICE

- Use:**
- to insert an intrauterine device (IUD) as a contraceptive method;
 - to remove an IUD;
 - to provide preventive antibiotic treatment.

Instructions: For use by trained health personnel.

Target population: The kit contents are based on the assumptions that 25% of the population are women aged 15-49 years (25% of 30 000 = 7500), that 15% of these women are using contraception (1125 women), and that, of these, 5% will choose an IUD (60 women).

Contents:

Medicines	
Intrauterine device (IUD), Cu-T 380 A	90
Doxycycline (hydrochloride), tablet, 100 mg	200
Chlorhexidine gluconate, concentrated solution, 5%, bottle, 1000 ml	3
Medical devices, renewable	
Bag (envelope), plastic, for drugs, approx. 10 x 15 cm, pack of 100	1
Gloves, surgical, size 8, sterile, single use, pair	50
Gloves, surgical, size 7, sterile, single use, pair	50
Compress, gauze, 10 x 10 cm, sterile, single use, pack of 5	200
Medical devices, equipment	
Set for insertion and removal of IUD	
Speculum, vaginal, Graves, 95 x 35 mm	2
Speculum, vaginal, Graves, 115 x 35 mm	1
Forceps, dressing, Cheron, 250 mm	1
Forceps, artery, Pean/Roch, 220 mm, straight	2
Sound, uterine, Martin, 320 mm	3
Forceps, uterine, Duplay, 280 mm, curved	1
Scissors, gynaecological, 200 mm, curved, b/b	1
Bowl, stainless steel, approx. 180 ml	1
Basin, kidney, stainless steel, approx. 825 ml	2
Tray, instruments, stainless steel, appr. 320 x 200 x 80 mm, with cover	1

Remark

This kit does not include sterilizing equipment. It is usually ordered in conjunction with Kit 6 A (Clinical Delivery Assistance), which includes a steam sterilizer. If Kit 7 is ordered without Kit 6, sterilizing equipment should be procured separately.

KIT 8
MANAGEMENT OF MISCARRIAGE AND COMPLICATIONS OF ABORTION

Use: To treat the complications arising from miscarriage (spontaneous abortion) and from unsafe induced abortion, including sepsis, incomplete evacuation and bleeding.

Instructions: Equipment should be used only by health personnel who have been trained to manage miscarriages and the complications of abortion, including performing uterine evacuation.

Target population: The contents of this Kit are based on the assumption that an additional 20% of pregnant women may have a miscarriage (spontaneous abortion) or suffer complications of unsafe abortion (20% of 300 = 60).

Contents:

Medicines	
Doxycycline hydrochloride, tablet, 100 mg	1000
Metronidazole, tablet, 250 mg	2000
* Misoprostol, tablet, 0.2 mg (200 mcg)	180
** Sodium dichloroisocyanurate tablets, containing 1.67g NaDCC, box of 200	2
Ibuprofen, tablets, 400 mg, 2 tablets per woman (1 prior to discharge, 1 to take home)	120
*** Oxytocin, injection, 10 IU/ml, 1-ml ampoule	100
Lidocaine hydrochloride, injection, 10 mg/ml (1%), 20-ml ampoule	50
Atropine sulfate, solution for injection, 1 mg/ml, 1-ml ampoule	30
Water for injection, 10-ml ampoule	10
Chlorhexidine gluconate, detergent solution, 4% (Hibiscrub), bottle, 500 ml	3
Chlorhexidine gluconate, concentrated solution, 5%, bottle, 1000 ml	10
Medical devices, renewable	
Gloves, surgical, size 8, sterile, single use, pair	50
Gloves, surgical, size 7, sterile, single use, pair	50
Gloves, examination, medium, single use, box of 100	1
Syringe, luer, 10 ml, sterile, single use	100
Syringe, luer, 2 ml, sterile, single use	200
Needle, luer, 21G (0.8 x 40 mm), sterile, single use	300
Compress, gauze, 10 x 10 cm, sterile, single use, pack of 5	240
Bag (envelope), plastic, for drugs, approx. 10 x 15 cm, pack of 100	1
Safety box, for used syringes and needles, capacity 5 litres	3
Stationery	
Leaflet for women: <i>Post-procedure information. How to take care of yourself.</i>	60 English 60 French
Treatment guidelines	
<i>Gynecological aspiration system, for uterine aspiration/uterine evacuation in obstetrics and gynecology patients.</i> Chapel Hill, NC, IPAS, multilingual	1

<i>Performing uterine evacuation with the Ipas MVA Plus® Aspirator and Ipas EasyGrip® cannulae: instructional booklet.</i> Chapel Hill, NC, IPAS, 2008	1 English 1 French
Manual vacuum aspiration. Extract from: <i>Managing complications in pregnancy and childbirth.</i> Geneva, WHO, 2000	1 English 1 French
<i>Misoprostol for treatment for incomplete abortion and miscarriage.</i> Instructions for use. Gynuity Health Projects, 2008	1 English 1 French
Medical devices, equipment	
Manual Vacuum Aspiration (MVA) Set (adapted from IPAS set 2 x IA18)	
MVA plus with 2cc silicone	4
Accessory kit for MVA Plus, including (1) O-ring, (1) collarstop, (1) cap, (1) 2cc silicone	2
2cc silicone packaged in bags of 10	6
Cannula, Easygrip, 6 mm, integrated base	8
Cannula, Easygrip, 7 mm, integrated base	8
Cannula, Easygrip, 8 mm, integrated base	8
Cannula, Easygrip, 9 mm, integrated base	4
Cannula, Easygrip, 10 mm, integrated base	4
Cannula, Easygrip, 12 mm, integrated base	4
Dilators, Denniston, polymer, set of 5	4
Dilatation & Curettage Set (adapted from UNICEF ref: 9910002)	
Basket, sterilizing, approx. 120 x 250 x 60 mm	1
Forceps, dressing, Cheron, 250 mm	1
Forceps, uterine, Museux, 240 mm, curved	1
Retractor, vaginal, Doyen, 45 x 85 mm	1
Retractor, vaginal, Auvard, 38 x 80 mm	1
Scoop, uterine, Simon, 6 mm, sharp	1
Curette, uterine, Sims, 7 mm, sharp	1
Curette, uterine, Sims, 8 mm, blunt	1
Curette, uterine, Sims, 9 mm, sharp	1
Curette, uterine, Sims, 12 mm, sharp	1
Sound, uterine, Martin, 320 mm	1
Speculum, vaginal, Graves, 95 x 35 mm	1
Bowl, stainless steel, 180 ml	1

* *Misoprostol: for incomplete abortion treatment is a single dose of 600 mcg orally, OR a single dose of 400 mcg sublingually*

** *NaDCC: each effervescent tablet releases 1g of available chlorine when dissolved in water.*

*** *Oxytocin must be kept cool during transport and storage. It is therefore packed and sent separately.*

Remarks

Encourage (manual) vacuum aspiration rather than sharp curettage.

This kit does not include sterilizing equipment. It is usually ordered in conjunction with Kit 6 A (Clinical Delivery Assistance), which includes a steam sterilizer. If Kit 8 is ordered without Kit 6A, sterilizing equipment should be procured separately.

KIT 9
SUTURE OF TEARS (CERVICAL AND VAGINAL)
AND VAGINAL EXAMINATION

- Use:**
- To suture cervical and high vaginal tears.
 - To examine women who have been sexually assaulted.

Instructions: This kit should be used by trained health personnel: doctors, midwives, or nurses with midwifery skills.

Target population: The contents of the kit are based on the assumption that 15% of women who give birth will need suturing (15% of 300 = 45 women over 3 months).

Contents:

Medicines	
Chlorhexidine gluconate, concentrated solution, 5%, bottle, 1000 ml	4
Polyvidone iodine, solution for cutaneous use, 10%, 500-ml bottle	2
Vaginal lubricant jelly/exploration gel, approx. 100 g	1
Medical devices, renewable	
Suture, synthetic, absorbable, DEC4(1), needle, 3/8, 36 mm, triangular, sterile, single use, box of 12	6
Suture, synthetic, absorbable, DEC3(2/0), needle, ½, 30 mm, round, sterile, single use, box of 12	5
Suture, synthetic, absorbable, DEC3(2/0), needle, 3/8, 50 mm, round, sterile, single use, box of 12	6
Compress, gauze, 10 x 10 cm, sterile, single use, pack of 5	80
Gloves, surgical, size 8, sterile, single use, pair	40
Gloves, surgical, size 7, sterile, single use, pair	40
Gloves, examination, medium, single use, box of 100	2
Medical devices, equipment	
Set surgical instruments, examination/suturing, vaginal/cervical (UNICEF ref: 9910006)	
Scissors, Mayo, 170 mm, curved, b/b	1
Needle holder, Mayo-Hegar, 180 mm, straight	1
Retractor, vaginal, Doyen, 45 x 85 mm	2
Speculum, vaginal, Graves, 75 x 20 mm	1
Speculum, vaginal, Graves, 95 x 35 mm	1
Speculum, vaginal, Graves, 115 x 35 mm	1
Forceps, dressing, Cheron, 250 mm	2
Tray, instruments, stainless steel, approx. 320 x 200 x 80 mm, with cover	1

Remarks

In cases of sexual assault, use this kit in combination with kit 3 (Post Rape Treatment), if emergency contraception, post-exposure prophylaxis, or antibiotic treatment are indicated.

This kit does not include sterilizing equipment. It is usually ordered in conjunction with Kit 6 A (Clinical Delivery Assistance), which includes a steam sterilizer. If Kit 9 is ordered without Kit 6A, sterilizing equipment should be procured separately.

KIT 10
VACUUM EXTRACTION DELIVERY

- Use:** To perform manual vacuum extraction.
- Instructions:** This kit should be used only by skilled health personnel who have been trained to perform assisted delivery with vacuum extraction.
- Target population:** Deliveries that require vacuum extraction assistance.
- Contents:**

Medical devices, equipment	
Vacuum extractor (UNICEF 2007 ref: 0791500)	
Vacuum extractor, Bird, manual, complete set	1
Treatment guidelines	
<i>Procedure for Use of Vacuum Extractor in Assisted Vaginal Delivery</i> ; Wall chart, adapted from WHO, PATH, 2010	1

BLOCK 3
KITS TO BE USED AT THE REFERRAL/SURGICAL OBSTETRIC LEVEL SERVING THE
NEEDS OF 150 000 PEOPLE FOR 3 MONTHS

Kit 11	Referral level kit for reproductive health (A and B)
Kit 12	Blood transfusion kit

KIT 11
REFERRAL LEVEL KIT FOR REPRODUCTIVE HEALTH
PART A: REUSABLE EQUIPMENT

This kit is for use together with Kit 11 Part B.

- Use:**
- to perform caesarean sections and other obstetric surgical interventions.
 - to resuscitate mothers and babies.
 - to provide intravenous treatment (e.g. for puerperal sepsis or eclampsia).

Instructions: This kit should be used only by medical staff skilled in providing comprehensive emergency obstetric care, including performing obstetric surgery.

Contents:

Medical devices, equipment	
Box, abdominal, 58 instruments (MSF 2010 ref: KSURBABD58S)	
Basket, instruments, for sterilization, wired, 400 x 200 x 90 mm	1
Clamp, towel, Backhaus, 120 mm	4
Forceps, artery, Bengolea, 200 mm, curved, serrated	4
Forceps, artery, Crafoord (Coller), 240 mm, curved	2
Forceps, artery, Kelly, 140 mm, curved	10
Forceps, artery, Halsted-Mosquito, 125 mm, curved	6
Forceps, artery, Kocher, 140 mm, 1 x 2 teeth, curved	2
Forceps, artery, Kocher, 140 mm, 1 x 2 teeth, straight	2
Forceps, artery, Mixter, 140 mm, very delicate	1
Forceps, artery, Mixter, 230 mm, delicate	1
Forceps, dressing, standard, 145 mm, straight	1
Forceps, dressing, standard, 250 mm, straight	1
Forceps, intestinal, clamp, Doyen, 230 mm, curved	1
Forceps, intestinal, clamp, Doyen, 230 mm, straight	1
Forceps, peritoneal, Faure, 210 mm, slightly curved	2
Forceps, tissue, Duval, 230 mm	2
Forceps, tissue, standard, 145 mm, straight	1
Forceps, tissue, standard, 250 mm, straight	1
Bowl, stainless steel, 500 ml	1
Needle holder, Baby-Crile-Wood, 150 mm, delicate	1
Needle holder, Mayo-Hegar, 180 mm, straight	1
Retractor, abdominal, Gosset, 2 blades, 58 mm depth + centr. bl. 57 mm x 60 mm	1
Retractor, Farabeuf, double-ended, 150 mm, pair	1
Scalpel handle, No. 4, standard	1
Scalpel handle, No. 4, long	1

Scissors, Metzemaum/ Nelson, 180 mm, curved, b/b	1
Scissors, Metzemaum/Nelson, 230 mm, curved, b/b	1
Scissors, Mayo, 170 mm, curved	1
Scissors, Mayo, 230 mm, curved	1
Spatula, Ribbon retractor, malleable, 27 mm x 250 mm	2
Tube, suction, Yankauer, 280 mm	1
Embryotomy set (UNICEF ref: 9910007)	
Cranioclast, Braun, 420 mm	1
Perforator, Smellie, 250 mm	1
Scissors, gynaecological, 200 mm, curved, b/b	1
Hook, decapitation, Braun, 310 mm	1
Disinfecting equipment	
Bowl, stainless steel, approx. 180 ml	1
Forceps, dressing, Cheron, 250 mm	1
Basic resuscitation kit (UNICEF ref: 9908400)	
Pump, suction, foot-operated	1
Resuscitator, hand-operated, infant/child, set	1
Resuscitator, hand-operated, adult, set	1

Remarks

This kit does not include sterilizing equipment. If an autoclave is not available in the hospital, arrange to order one through usual procurement channels or through UNFPA's Procurement Services Branch.

KIT 11
REFERRAL LEVEL KIT FOR REPRODUCTIVE HEALTH
PART B: DRUGS AND DISPOSABLE EQUIPMENT

This kit is for use together with Kit 11 Part A.

Use:

- to perform caesarean sections and other obstetric surgical interventions
- to resuscitate mothers and babies
- to provide intravenous treatment (e.g. for puerperal sepsis or eclampsia)

Instructions: This kit should be used only by medical staff skilled in providing comprehensive emergency obstetric care, including performing obstetric surgery.

Target population: In a population of 150 000 with a CBR of 4%, there will be 6000 deliveries in 12 months, or 1500 deliveries in 3 months. It is assumed that approximately 5% of these will require caesarean section (5% of 1500 = 75). Approximately 30 additional women will need other emergency care.

Contents

Medicines	
Metronidazole, tablet, 250 mg	1000
Amoxicillin, tablet, 500 mg	2000
Paracetamol, tablet, 500 mg	2000
Quinine (as sulfate or bisulfate), tablet, 300 mg	1000
Doxycycline (as hydrochloride), tablet, 100 mg	1400
Tetracycline hydrochloride, eye ointment, 1%	30
Ampicillin (as sodium salt), powder for solution for injection, 1-g vial	400
Gentamicin (as sulfate), solution for injection, 40 mg/ml, 2-ml vial	1050
Water for injection, 10-ml ampoule	500
Metronidazole, for intravenous infusion, 5 mg/ml, 100-ml bag	200
Ergometrine maleate, injection, 0.2 mg/ml, 1-ml ampoule	200
* Oxytocin, injection, 10 IU/ml, 1-ml ampoule	200
Calcium gluconate (monohydrate), injection, 100 mg/ml, 10-ml ampoule	30
Magnesium sulfate, injection, 500 mg/ml in 10-ml ampoule	100
Hydralazine hydrochloride, powder for injection, 20 mg in ampoule	60
Quinine dihydrochloride, solution for dilution for infusion, 300 mg/ml, 2-ml ampoule	200
Lidocaine hydrochloride, injection, 1%, 20-ml ampoule	120
Lidocaine hydrochloride injection, 2%, 20-ml ampoule	100
Lidocaine hydrochloride, solution for injection, 50 mg/ml (5%), 2-ml ampoule	100
Ketamine (as hydrochloride), injection (solution for injection), 50 mg/ml, 10-ml vial	50
Sodium chloride, solution for infusion, 0.9% (isotonic), 1-litre bottle + infusion-giving set, sterile, single use)	300

Glucose, solution for infusion, 5% (iso-osmotic), 1-litre bottle + infusion-giving set, sterile, single use	300
Dextran 70, solution for injection, 6%, 500-ml bottle + infusion-giving set, sterile, single use	100
** Sodium dichloroisocyanurate tablets, containing 1.67 g of NaDCC, 2 x box of 200	400
Chlorhexidine solution, bottle, 500 ml	100
Chlorhexidine gluconate, concentrate for solution, 5%, bottle, 1000 ml	30
Medical devices, renewable	
Tube, suction, CH10, length 50 cm, conical tip, sterile, single use	60
Tube, suction, CH14, length 50 cm, conical tip, sterile, single use	60
Cannula, intravenous, short, 20G, sterile, single use	500
Cannula, intravenous, short, 18G, sterile, single use	100
Clamp, umbilical, cord, sterile, single use	200
Syringe, luer, 1 ml, sterile, single use	400
Syringe, luer, 2 ml, sterile, single use	1400
Syringe, luer 5 ml, sterile, single use	500
Syringe, luer, 10 ml, sterile, single use	600
Needle, luer, 21G (0.8 x 40 mm), sterile, single use	3000
Needle, luer, 23G (0.6 x 25 mm), sterile, single use	100
Brush, hand, scrubbing, plastic	10
Gloves, surgical, size 8, sterile, single use, pair	400
Gloves, surgical, size 7, sterile, single use, pair	400
Gloves, gynaecological, medium, sterile, single use, pair	10
Gloves, examination, medium, single use, box of 100	5
Suture, synthetic, absorbable, DEC4(1), needle, 3/8, 36 mm, triangular, single use, box of 12	24
Suture, synthetic, absorbable, DEC3(2/0), needle, ½, 30 mm, round, sterile, single use, box of 12	24
Suture, synthetic, non-absorbable, DEC3(2/0), needle, 3/8, 30 mm, triangular, sterile, single use, box of 12	12
Catheter, Foley, CH14, sterile, single use	150
Bag, urine, collecting, 2000 ml	150
Drape, surgical, woven, 100 cm x 150 cm	6
Needle, spinal, 22G (0.7 x 90 mm), sterile, single use	120
Compress, gauze, 10 x 10 cm, sterile, single use, pack of 5	200
Tape, adhesive, zinc oxide, 2,5 cm x 5 m	50
Tape, adhesive, zinc oxide, perforated, 10 cm x 5 m	5
Scalpel blade, no. 22, sterile, single use.	100
Safety box, for used syringes and needles, 5 litres	25

Bag (envelope), plastic, for drugs, approx. 10 x 15 cm, pack of 100	10
Glasses, safety, regular size	2
Pregnancy test, temperature-stable	20
Treatment guidelines	
<i>Managing complications in pregnancy and childbirth. A guide for midwives and doctors.</i> Geneva, WHO, UNFPA, UNICEF, WB, 2003	1 English 1 French

* *Oxytocin must be kept cool during transport and storage. It is therefore packed and sent separately.*

** *NaDCC: each effervescent tablet releases 1g of available chlorine when dissolved in water.*

Remarks

Injectable diazepam and injectable pentazocine are not included because of import/export licensing requirements. The drugs should be purchased locally (diazepam, 2 ml, 5 mg/ml (50 ampoules); pentazocine 30 mg/ml, 1 ml (6 ampoules).

Culturally appropriate sanitary products should be procured locally wherever possible.

KIT 12
BLOOD TRANSFUSION

Use: To perform safe blood transfusions after testing for HIV, syphilis, hepatitis B and C.

Instructions: This kit should be used only by a trained laboratory technician with access to basic laboratory facilities.

Target population: People requiring blood transfusions.

Contents: (Adapted from Médecins Sans Frontières)

Blood-group test, anti-A, 10 ml, fl. dropper *	1
Blood-group test, anti-A + B, 10 ml, fl. dropper *	1
Blood-group test, anti-B, 10 ml, fl. dropper *	1
Rhesus test, anti-D, 10 ml, dropper *	1
HIV test 1 + 2 rapid, 100 tests, kit	1
Hepatitis B surface antigen (HBsAg) rapid test, 100 tests	1
Hepatitis C virus (HCV) rapid test, 100 tests *	1
Rapid plasma regain (RPR) test (for syphilis), 100 tests *	1
Photometer, HemoCue Hb 301	1
Capillary tubes for Hb 301	200
Cuff for pression, for bag 500/1000 ml	1
Battery, dry cell, AA, alkaline, 1.5 V, for Photometer	8
Blood bag + CPD (citrate-phosphate-dextrose), 250 ml	50
Blood-giving set	100
Gloves, examination, medium, single use, box of 100	5

* *These items need to be kept cool during transport and storage, and are therefore packed and sent separately.*

DIMENSIONS OF THE REPRODUCTIVE HEALTH KITS

Kit	Dimensions and weight
Kit 0 Administration/training supplies	1 box, 60 x 40 x 28 cm (0.067 m ³); 16.5 kg
Kit 1A Male Condoms	4 boxes, each 51 x 45 x 32 cm (0.073 m ³); 15.5 kg Total: 0.29 m ³ ; 62 kg
Kit 1B Female Condoms	1 box: 58 x 38 x 30 cm (0.066 m ³); 7 kg
Kit 2A Clean delivery, individual	4 boxes, each 52 x 44 x 34.5 cm (0.079 m ³); 24 kg Total: 0.316 m ³ ; 92.0 kg
Kit 2B Clean delivery, birth attendant	1 box, 41.5 x 26.5 x 35 cm (0.038 m ³); 10.25 kg
Kit 3 Rape Treatment	1 box, 43 x 32 x 17 cm (0.023 m ³); 7 kg
Kit 4 Oral and injectable contraception	1 box, 60 x 40 x 36 cm (0.086 m ³); 15 kg
Kit 5 Treatment of sexually transmitted infections (STI)	1 box, 60 x 50 x 50 (0.15 m ³); 35 kg
Kit 6A Clinical Delivery Assistance Reusable equipment	2 boxes, 1 box, 60 x 50 x 50 (0.150 m ³); 21 kg 1 box, 60 x 40 x 36 (0.086 m ³); 10 kg Total: 0.236 m ³ ; 31 kg
Kit 6B Clinical Delivery Assistance Drugs and disposable equipment	5 boxes, 1 box, 60 x 40 x 36 cm (0.086 m ³); 28.5 kg 1 box, 60 x 40 x 36 cm (0.086 m ³); 27.5 kg 1 box, 60 x 40 x 28 cm (0.067 m ³); 21 kg 1 box, 60 x 40 x 36 cm (0.086 m ³); 24 kg (Total for 4 boxes: 0.325 m ³ , 101 kg) Plus: <i>Keep cool</i> , 1 box, 16 x 9 x 7 cm (0.01 m ³), 0.5 kg Total: 0.335 m ³ ; 101.5 kg
Kit 7 Intra uterine device (IUD)	1 box, 60 x 40 x 36 cm (0.086 m ³); 14 kg
Kit 8 Management of miscarriage and complications of abortion	2 boxes, 1 box, 60 x 50 x 50 cm (0.150 m ³); 36 kg Plus: <i>Keep cool</i> , 1 box, 40 x 30 x 20 cm (0.024 m ³); 2 kg Total: 0.174 m ³ ; 38 kg
Kit 9 Suture of tears (vaginal and cervical) vaginal examination	1 box, 60 x 40 x 28 cm (0.067 m ³); 15 kg
Kit 10 Vacuum extraction delivery	1 box, 43 x 33 x 21 cm (0.030 m ³); 3 kg

Kit	Dimensions and weight
Kit 11A Referral level Reusable Equipment	1 box, 60 x 40 x 36 cm (0.086 m ³); 20 kg
Kit 11B Referral level Drugs and disposable equipment	35 boxes, Box 1, 60 x 40 x 36 cm (0.086 m ³); 26 kg Box 2, 60 x 40 x 36 cm (0.086 m ³); 22 kg Box 3, 60 x 40 x 50 cm (0.120 m ³); 23 kg Box 4, 60 x 40 x 36 cm (0.086 m ³); 22 kg Box 5, 60 x 40 x 36 cm (0.086 m ³); 20 kg Box 6, 60 x 40 x 36 cm (0.086 m ³); 23 kg Box 7, 60 x 40 x 36 cm (0.086 m ³); 23 kg Box 8, 60 x 40 x 50 cm (0.120 m ³); 30 kg Box 9, 60 x 40 x 50 cm (0.120 m ³); 30 kg Box 10, 60 x 40 x 36 cm (0.086 m ³); 27 kg Box 11, 60 x 40 x 36 cm (0.086 m ³); 27 kg Box 12, 60 x 40 x 36 cm (0.086 m ³); 27kg Box 13, 60 x 40 x 36 cm (0.086 m ³); 27 kg Box 14, 60 x 40 x 36 cm (0.086 m ³); 32 kg Box 15, 60 x 40 x 36 cm (0.086 m ³); 36 kg Box 16, 60 x 40 x 36 cm (0.086 m ³); 36 kg Box 17, 60 x 40 x 36 cm (0.086 m ³); 36 kg Box 18, 60 x 40 x 36 cm (0.086 m ³); 36 kg Box 19, 60 x 40 x 36 cm (0.086 m ³); 36 kg Box 20, 60 x 40 x 36 cm (0.086 m ³); 36 kg Box 21, 60 x 40 x 36 cm (0.086 m ³); 36 kg Box 22, 60 x 40 x 36 cm (0.086 m ³); 36 kg Box 23, 60 x 40 x 36 cm (0.086 m ³); 36 kg Box 24, 60 x 40 x 36 cm (0.086 m ³); 36 kg Box 25, 60 x 40 x 36 cm (0.086 m ³); 36 kg Box 26, 60 x 40 x 36 cm (0.086 m ³); 36 kg Box 27, 60 x 40 x 36 cm (0.086 m ³); 36 kg Box 28, 60 x 40 x 36 cm (0.086 m ³); 36 kg Box 29, 60 x 40 x 36 cm (0.086 m ³); 36 kg Box 30, 60 x 40 x 36 cm (0.086 m ³); 36 kg Box 31, 60 x 40 x 36 cm (0.086 m ³); 36 kg Box 32, 60 x 40 x 36 cm (0.086 m ³); 36 kg Box 33, 60 x 40 x 50 cm (0.120 m ³); 36 kg Box 34, 60 x 40 x 50 cm (0.120 m ³); 36 kg (Total for 34 boxes: 3.094 m ³ ; 1079 kg) Plus: <i>Keep cool</i> , box 35, 40 x 30 x 30 cm (0.036 m ³); 4 kg Total: 3.130 m ³ ; 1083 kg
Kit 12 Blood transfusion	2 boxes: 1 box, 60 x 40 x 50 cm (0.120 m ³); 15 kg Plus: <i>Keep cool</i> , 1 box, 40 x 30 x 30 (0.036 m ³); 3 kg Total: 0.156 m ³ ; 18 kg

ASSUMPTIONS USED IN CALCULATING SUPPLIES

The contents of the Reproductive Health Kits are based on assumptions derived from epidemiological data, population profiles, disease patterns and experience gained from using the kit in emergency situations. The assumptions are listed below. All kits are calculated to meet specific reproductive health needs of the population for three months.

Population data assumptions	Number in target population		
	Kits 1-5 (10 000 people)	Kits 6-10 (30 000 people)	Kits 11 & 12 (150 000 people)
• 20% are adult males	2000		
• 25% are women aged 15-49 years	2500		
• Crude birth rate is 4%.			
• No. of deliveries in 12 months	400	1200	6000
• No. of deliveries in 3 months	100	300	1500
• No. of pregnant women	300	900	
• 2% of women aged 15-49 years experience sexual violence	50		
• 15% of women aged 15-49 years use contraception, of which:	375		
- 40% use oral contraceptives	150		
- 55% use injectable contraceptives	210		
- 5% use an IUD	20	60	
• 20% of pregnancies end in miscarriage or unsafe abortion		60	
• 15% of women who deliver have vaginal tears		45	
• 5% of births require caesarean section			75

Reproductive Health Kits for Crisis Situations

The following members of the Inter-Agency Working Group on Reproductive Health in Crisis Situations have been involved in the production of these Kits:

- CARE International
- Family Health International (FHI)
- International Federation of Red Cross and Red Crescent Societies (IFRC)
- International Rescue Committee (IRC)
- International Planned Parenthood Federation (IPPF)
- Marie Stopes International (MSI)
- Médecins sans Frontières Belgium (MSF)
- United Nations Children’s Fund (UNICEF)
- United Nations High Commissioner for Refugees (UNHCR)
- United Nations Population Fund (UNFPA)
- World Health Organization (WHO)
- Women’s Refugee Commission (WRC)



UNITED NATIONS POPULATION FUND
HUMANITARIAN RESPONSE BRANCH

605 Third Avenue

New York, N.Y. 10158, U.S.A.

E-mail: hrb@unfpa.org, Web: www.unfpa.org