

WHO Emergency Humanitarian Program Situation Report

Khyber Pakhtunkhwa and FATA

Week 10

Date: March 04-10 , 2012

1. Situation around IDP hosting districts

A. "New Durrani" IDP camp, Kurram Agency

EHSAR Foundation has been selected for provision of health services in New Durrani IDP Camp. Their NOC is in process and FDMA has assured that the NOC will be finalized within few days time.

B. "Togh Sarai" IDP camp, Hangu district

IDP's camp in Togh Sarai Camp, District Hangu was visited by EHA-Team on 06/03/2012 and 08/03/2012. Currently there are total 1188 families with 7414 individuals. Among individuals 2842 are males, 2574 are females and 1998 are children. Health situation in the camp is normal.

10 out of 18 HF reported DEWS in week 10 from District Hangu. Hangu DoH has started reporting on the new DEWS format but most of the Alerts generated are False. EHA-Hangu is constantly contacting the Health Facilities staff and sensitizing them on case definitions.

Coordination meeting with EDO-health Hangu on 08/03/2012 at District Hangu. As eDEWS program implemented properly in Hangu district and in week-10. WHO DEWS report that acute respiratory infections are still the highest cause of morbidity (21% or 108 cases) of total of 526 consultations (2% increased); other acute diarrhea (10% or 55 cases); skin infection (2% or 8 cases).

C. Overview of health facility situation in Tank district

WHO-EHA, attended a meeting at the Deputy Commissioner office Tank. Various issues related to district health were discussed. A meeting was held with UNFPA and SEEDS (local NGO) officials. SEEDS are planning to take part in PHC and other WASH projects in IDP concentrated areas in the district. WHO briefed the officials about the health needs and deprived and needy areas. ICRC is planning to start services in UC Gomal. This is the bordering UC of the district and hence, IDP influx is huge in the area. In addition, UNFPA is the only partner who is serving in the area. ICRC participation would be a beneficial addition.

Surveillance and Monitoring visits were conducted at BHU Shahzamani, Ranwal, gara baloch, Dabarra, RHC Gomal and daily visits to DHQ hospital. EPI centres' was visited. EPI technicians are advised to organize proper outreach plans so as to ease the vaccination in the area where cases emerge. Coordination meetings conducted with EDO H, EPI Coordinator and PEO. In district Tank there are 33 health facilities.

D. Situation in D I Khan district

29 health facilities reported to WHO via e DEWS during Week 10, 2012. A total of 7,694 consultations were provided. ARI remained major cause of morbidity (23.76 %), diarrhea (8.33%), scabies (3.67 %) and malaria (4.03 %). A total of 07 alerts were received and responded, all suspected Measles.

WHO took part in the inauguration ceremony of SNIDs held on 10th March, 2012 at Circuit House and Deputy Speaker of National Assembly, Mr. Faisal Kareem Kundi was the Chief Guest. WHO took part in District Dengue Emergency Committee Meeting on Tuesday chaired by EDO Health & M.S. of DHQ Hospital. WHO-EHA is member of the committee. WHO & Humanitarian Affairs Officer of UNOCHA for D I Khan conducted joint field visit to three health facilities i.e. BHU Daraban Khurd, BHU Muryali and BHU Zafar Abad Colony to check the patient load of the IDPs and host population and the available resources at these health facilities. WHO advised local NGOs to prepare proposals for launching projects of

Primary Health Care and MNCH services as there is an expressed need for further coverage and expansion of health services by interested health cluster organizations.

WHO monitors the situation of the nutrition stabilization center at DHQ D I Khan. In addition, WHO plans to finalize reconstruction of 5 health facilities. WHO also monitors the construction work of Ware House which will be completed in mid of April this year by SFD.

WHO conducted assessment of civil WASH infrastructure improvement work of 5 identified health facilities in D.I Khan including Type-D Hospital Pahar Pur, CD Yarik, BHU Jandi Babar, Police Hospital, and CD Muslim Bazar.

E. Situation in “Jalozai” IDP camp, Nowshera district

About 16,000 families of some more tribes are expected to arrive in Jalozai Camp in the coming days (*Source: UNOCHA). 6791 new IDP families including 28394 individuals have been registered in the Jalozai IDP camp Nowshera. WASH services to the new influx are provided by HRDS and SSD (UNICEF IPs). DoH has started vaccination in newly established Akakhel Registration Point. Merlin is supporting the DoH team through Health Promotion activities at the same registration point. WHO team paid a monitoring visit to Merlin J1, J2, J3, CAMP Health Post and CERD MCH.

Assessment of Jalozai IDP’s Camp health facilities conducted by WHO team to assess the health delivery system in the camp, find out the gaps and suggests recommendations. (Report shared).

E-DEWS Training for the medical staff of Merlin and CAMP Organization is planned on 12th March 2012 at 01:30 PM in CAMP Organization Health Post.

F. Situation in Kohat district

35 out of 43 Health Facilities reported DEWs. EHA-Team, District kohat participated in Polio inauguration ceremony held at conference hall of LMH Hospital on 10th March, 2012. Assistant Coordination officer (ACO), District Kohat inaugurated the NID Campaign. The issues discussed were the dissolution of CSP’s (forum wanted WHO to reintroduce CSP seats), 12-18 hours power shortages in some areas (problem in cold chain maintenance), lack of EPI technicians in some areas (13 more EPI technicians needed) and accessibility issues to few areas in the district.

Coordination meeting held with EDO-H regarding planning of Public Awareness Campaign on water borne diseases for the upcoming summer season. EHA-team, District Kohat is planning to organize awareness campaign for religious leaders (Mullah’s) of the district. EHA-team, District Kohat tried contacting Contractors responsible for civil work under SFD and ECHO fund but so far the work is stopped at their end. EHA-Team, District Kohat had previously sensitized few private practitioners regarding Measles cases reporting (as major bulk of community depends on out of pocket spending for Health Care), this week team was successful in getting Line-list of Suspected Measles cases from different areas in the district.

WHO-EHA, Kohat provided some IMCI training material to MDM-F working in District Kohat & Hangu. EHA-Team District Kohat has demanded for 170 Pallets for WHO-Warehouse in the District. Team wants to know the status of forwarded request. And the earliest possible delivery date of requested item.

eDEWS:

KPK DEWS:

341 reports were received reporting 89,593 patient consultations in 15 districts of Khyber Pakhtunkhwa Province. Acute respiratory infections are the highest cause of morbidity (28% or 25,383 cases) showing 1% decrease; acute diarrhoea (6% or 5,111 cases); skin infection (3% or 2,488 cases); suspected malaria (2% or

1,368 cases).

FATA DEWS:

43 reports were received reporting 8,177 patient consultations in 3 agencies of FATA. Acute respiratory infections are the highest cause of morbidity (31% or 2,516 cases) showing 1% increase; acute diarrhoea (6% or 526 cases); skin infection (3.4% or 282 cases); suspected malaria (2.4% or 205 cases).

Alerts:

A total of 69 alerts and 1 outbreak were received. Out of 69 alerts 50 were suspected measles, 2- NNT, 11 - leishmaniasis, 2 AWD, 2 Diphtheria and 1 each of Pertussis and Scabies.

District Wise Break Up: 1(Bajaur Agency FATA Agency), 2 (Bunir), 7 (DI Khan), 6 (Haripur), 2 (Hangu), 1 (Kohat), 5 (Lower Dir), 3 (Malakand), 2 (Swabi), 6 (Swat), 2 (Tank), 3 (Nowshera), 1 (Chakwal Punjab), 1 (FATA Waziristan), 4 (Peshawar), 2 (Charsadda), 1 (Khyber FATA Agency).

ARI Centers:

A total of 2,486 ARI consultations were reported from in week 10. 6 ARI Centers got extension for duration of one month. These centers are (1 in Lower Dir, 2 in Shangla, 2 in Kohistan and 1 in Abbottabad).

Hospital Coordinator Activities:

An approval has been obtained from DG Health on distribution of medicines kits (from SFD) with its proposed. Approval obtained from DG Health on three days Logistic Support System (LSS) training in Peshawar. Distribution plan has been finalized of equipments remaining from earlier distribution plan and obtained formal approval from DG Health. Prepared NTAs for training of master trainer from education department on prevention of dengue. WHO Participated in Integrating IMNCI in Pre-Service Trainings held in Khyber Teaching Hospital on 8th March. Finalized installation Matrix of equipments distributed to various hospital of KPK. Streamline extension of 6 ARI Centers (1 in Lower Dir, 2 in Shangla, 2 in Kohistan and 1 in Abbottabad) for duration of one month.

Essential Medicines:

- In week 10 total of 8 coordination meetings held with different stake holders including DGHS, DMS, EDOHs, Pharmacist, District secretary PRCS and store Incharge DHQH at Swabi, Mardan, Peshawar, D.I. Khan, Swat and Kohat in which availability of EM, Venue of LSS training and implementation of LSS were discussed respectively.
- Total 4 Monitoring and 2 follow up visits were performed this week including Swabi, Mardan, D.I. Khan and Hangu. Gaps regarding irrational use, storage of essential medicines, inventory control, record keeping and stock outs identified generally. Required Essential medicines provided as per need at visited health facilities. HeRAM assessments performed in various health facilities of swat, Jalozai IDP's Camp and satellite hospital Pabbi, Nowshera.
- Total 6 training sessions were conducted in district Swabi, Mardan, D.I. Khan, Hangu, Nowshera and Jalozai Camp in which total of 10 participants trained on rational use of medicines, Good pharmaceutical storage practices, Good Dispensing practices, record keeping and LSS.
- To overcome the gaps of deficient essential medicines at Togh Sarai Camp Hangu WHO provided the essential medicines such as Metronidazole 400mg tab=800, Doxycycline tab=600, Salbutamol 4mg tab=80, Atenolol 50mg tab=400, Cloxacillin 250mg tab=800, clotrimazole 500mg tab=40, promethazine 250mg tab=400, folic acid 5mg tab=400, ceftriaxone 1gm injection=50, Tramadol Inj. 100mg=15, drug bags=1000 and Health Cards=500.
- **IDPs camp Jalozai:** One day Training on Rational use of medicines held this week at Jalozai Camp in which 8 doctors and 2 dispensers of Merlin trained. Due to military operation in Khyber Agency, population of IDPs has doubled in Jalozai camp, therefore, all health facilities at Jalozai Camp assessed

this week. Gaps regarding inventory Management and Good Pharmaceutical storage identified. It was concluded after assessment that the recent supply of Essential medicines is insufficient for the recent population of IDP and the gaps shall be filled in coordination with working partners.

- **FATA:** Coordination meeting held with DEWS focal person DHS FATA in regards to high number of Leishmaniasis cases being reported from BHU Torkham which need to be addressed at Directorate level to mobilize the resources for the prevention and control. Participation in e-DEWS training held CH Jamrud Khyber agency in which participants were briefed on rational use of medicines and treatment of Leishmaniasis. 400 Meglumine antimoniate injections provided to PPHI in response to Leishmaniasis outbreak at BHU Torkham Khyber agency.

WASH:

- WHO Team District Nowshera conducted reassessment of the Health facilities in view of the fresh IDPs influx in the camp and changing situation. 6791 new IDP families including 28394 individuals have been registered in the Jalozai IDP camp Nowshera. WASH services to the new influx are provided by HRDS and SSD (UNICEF IPs).
- EH Engineer WHO Nowshera held meeting with WASH partners in Jalozai Camp. Due to current influx of new IDPs in the camp the burden for WASH services has increased. To accommodate new IDPs influx Levelling work has been started to establish phase 7 along with the provision of WASH services by the WASH partners. WHO team visited all the Health facilities in the Jalozai IDP camp including J1, J2, J3 of Merlin and CAMP organization. Detail assessments of the Health facilities done.
- Due to the current Leishmaniasis outbreaks in different areas of District Nowshera WHO is supporting RBM Program EDOH Nowshera with the provision of 500 bed nets. EDOH focal person also requested support to improve the existing vector control activities including fogging and fumigation.
- EDO-H, District Kohat requested for in time Vector Control activities in the District. EHA-Team is in close coordination with Malaria control person of the district and will soon identify the high risk areas of the district and request HUB for permission of possible actions.
- In Togh sarai IDPs camp cleaning of water storage tanks on recommendation of WHO EHE for water quality improvement are in progress, sectors A, B, C & I were completed while H, G, F, E & D are remaining.
- Coordination meeting held with EDO-H regarding planning of Public Awareness Campaign on water borne diseases for the upcoming summer season. EHA-team, District Kohat is planning to organize awareness campaign for religious leaders (Mullah's) of the district.
- Coordination meeting conducted with EDO-health Hangu on 08/03/2012 at District Hangu. The team shared alerts sheet with EDO-health Hangu and prompt response provided by WHO Team.
- Coordination meeting with the contractor working under ECHO fund in DHQ and LMH hospital in District Kohat, EHA-Team directed the contractor to functionalize the newly dug bore-well in LMH Hospital. But there is still delay in operations from their side.
- Coordination meeting held with EDO-H, District Kohat regarding the inauguration of newly constructed warehouse by WHO in LMH hospital, District Kohat. EDO-H was informed regarding the arrangements for the ceremony. There are some items still waited to set the date for the ceremony.
- Coordination meeting held with the Chief officer TMA Lower regarding water testing lab supplies in lower Dir.
- Coordination meeting with water quality officer and hygiene staff of CERD on 07/03/2012 at EDO-H office District Kohat. CERD organization is WASH IP working in host communities of District Hangu. CERD water quality officer requested for training on "water quality monitoring and treatment" and "water born diseases".
- Coordination meeting conducted with CERD, PDMA camp manager and RID staff working in Togh Sarai IDPs camp on 08/03/2012. EHA team Shared current and coming summer problem to partners for timely mitigations and measures. 80 % of camp parada wall is damaged and PDMA (UNHCR camp IP) has taken the responsibility of parada wall. Cleaning of water storage tanks are in progress.
- EH Engineer WHO visited Lady reading Hospital meeting was held with the Director causality regarding the progress work. Paint work and electrification work is in progress.65% of the work is

completed in Causality LRH.

- Construction of Warehouse at DHQ hospital Timargara is still pending and MS of DHQ Timargara Repeatedly ask updates.
- Monitoring Visit was made to Saidu Group of teaching Hospital in order to supervise the WASH work under Saudi Fund by Perfect Builder and the same situation was observed as in week 9, work is incomplete and no one available on site to complete the work.
- Visited MM Teaching Hospital D.I Khan for final inspection of WASH improvement works by Mehmand Construction Limited.
- Monitoring and work check visits paid to civil work sites in District Kohat but work is still pending inspite of the continuous reminder to the contractor.
- WHO Team visited DHQ Timargara, THQ Samarbagh, BHU Asegai, CD rabat, RHC Asbhanr, BHU Damtal, BHU Drangal, RHC Munda, BHU Makhai for routine monitoring and Alerts Response.
- In Week 10 total 12 cases of scabies were reported from BHU Muhammad Khawaja village Togh sarai District Hangu, so these were investigated, health and hygiene session were conducted in the community and the community elders were educated about the water born diseases. The reporting BHU was visited and anti-scabies were found out of stock so WHO provided 500 permethrin 5 % lotions bottles.
- EHE Kohat along with EHA team responded to AWD alerts in Barh Nusrat Khel. 03 samples collected from H/pump and water storage cooler were found unfit due to high turbidity level (>5 NTU).1000 aqua tabs and 2000 Pure Sachets were provided to BHU Barh. Health and hygiene session were conducted for the affected community
- WHO team responded 5 Measles Alerts received from village Kaer Dara Bibiore, Village Tangaray mousa battagram Tehsil Warria Dir Upper, village Bariria Tehsil Smarbagh, vilage Jagal UC Lajbook, and Village Gujrano Cham kandarona UC Asbhanr Dir lower
- As 3 cases of Leishmaniasis were reported from the village Doaba BHU Darsamand District Hangu, So WHO-EHA team Kohat visited the village from where these cases were reported. Health and Hygiene sessions were taken with the effected families
- All the mentioned alerts/outbreaks were jointly responded by DoH & WHO EHA Team along EPI Vaccinators. Outreach Immunization activities were conducted in each affected areas with all available antigens. Health & Hygiene sessions conducted, Camp In charge and concerned Surveillance Officer Bajour Agency was also informed for active surveillance and request the RBM for residual spray before the favourable season for vector breeding and transmission in the area.
- WHO EH unit KPK/FATA collected 20 water samples from different areas in District Kohat and Haripur .21% of the samples were found faecally contaminated. In response WHO in collaboration with District TMAs and PHED initiated remedial measure by providing aqua tabs, hygiene kits and disinfection of the main community water storage tanks.
- Pre-positioning of contingency stock was made in flood and conflict affected district of KPK/FATA for control and prevention of communicable disease. In epidemiological week 10 WHO distributed 72 hands washing soaps, 1000 aqua tabs, 2000 pur Sachets, 400 sets of IEC material and 500 ITNs in response to Alerts reported and responded in Kohat, Lower Dir and Nowshera.
- Gloves 500 unit, Methanol 2.5 litres, Silver nitrate 3unit, vaccine carrier 3 unit, wag tech 1 unit, APC UPS 1 unit, aqua tabs 600 Unit, book on emergency 20 Unit, HP 18.5 monitor, HP compact computer 1 unit, kerosene stove 1 unit, lauryl sulphate 1unit, wagh pack 1unit, antiseptic hand rub 10 unit, p, dishes plastic 30 units Delivered to TMA for water testing lab F.
- Cholera new Bed 2 unit, Gas cylinder 3 unit, Gloria spray 1 unit, IEC material 500 poster, cholera new beds 3 unit, eye wear 200 unit, mask 500 unit, needle cutter 2 unit, painted bed 5 unit, mortiene one pack (8 coil) and wag tech one unit received by WHO District team from Peshawar ware house.
- Planning to Conduct one day training on “water quality monitoring and treatment” and “waterborne diseases” on 14/03/2012 for CERD staff at CERD office District Hangu.

Nutrition:

- Coordination meeting held with Deputy Chief HSRU regarding the inaugural meeting of Provincial

Thematic Working Group of Nutrition. Health secretary agrees on the issue. Most probably date will be announced in this week.

- Monitoring and evaluation visit conducted to district Swabi. Nutrition Surveillance system in the sentinel site of Kunda and Yar Hussain monitored.
- Monitoring visit held to Nutrition Stabilization Center Swabi. Operational issues regarding the NSC discussed with MS and Paediatrician. Certain gaps identified. Will be resolved by this week.
- Coordination meeting held with Dr. Iqbal regarding the updating of Support materials for the Facility based management of SAM. He will submit the book by this week.
- Meeting conducted with APC National Program for Family Planning & PHC regarding distribution of equipments to district Shangla. Decision will be taken in this week.
- Coordination meeting held with Deputy Director Nutrition regarding inclusion of Kohistan into the LoA. NFR has been issued regarding its inclusion.
- Another coordination meeting held with Deputy Director Nutrition regarding nominations for ToT regarding Facility based management of SAM. Nominations requested for the ToT and meeting planned in this week where operational issues regarding the ToT will be discussed. Agreement on nominations achieved and nominations will be notified as the dates will be final.
- WHO Nutrition officer Participated in the interviews of candidates for Provincial Nutrition Coordinator through Joint AusAid proposal in DoH.
- Orientation session was given to the newly appointed district Nutrition Coordinators for the districts of Lower Dir, Upper Dir and Kohistan. Another joint meeting of the coordinators planned in this week.
- Total of 20 patients were admitted in 5 Nutrition Stabilization Center with 16 discharged after curing.

District level coordination & monitoring:

Shangla: Visit was conducted to BHU Kuzkana, BHU Chicloo, BHU Martung, BHU Kabalgram, BHU Damorai and BHU Olander and 2 CD's (CD Kotkay and CD Shang) and one THQ THQ Besham for eDEWS and CRP registers along with OPD registers counter checking. EPI reforms meeting held on 6th March 2012. EPI survey will be started on 13th March and final listing will be provided on 1st April 2012 for further consideration. Meeting held with TMA on (8/03/2012) in district Shangla for names and location of Water supply schemes under consideration for repair and rebuilding to avoid massive AWD outbreaks in the upcoming summer. Visit was conducted to Damorai(09/03/2012) for monitoring of winter packages by CUP it included Soaps being Donated by WHO. Meeting with ACO (10/03/2012) for the final date decision of ERWG. The date was decided and it will be 20th March 2012.

Swabi: Visit was held along with EHA Nutrition officer to therapeutic Feeding center and meeting was held with all the Human Resource in the center, they requested WHO Nutrition wing to provide the MUAC Tape, Height measuring Scale, Growth Charts, Registers, Notes Boards, Bed sheets, Multivitamins' and Incentives. Visited conducted to Medical ward of Bacha khan Medical Complex District Swabi and shared the current line list of patients facilitated with WHO provided insulin. Indoor Pharmacy was also inspected & gaps regarding poor storage condition, non availability of bin cards & stock register were observed. Limited shelf life Infusion Ciprofloxacin (Jun 2012) & in Ceftriaxone (March 2012) were observed in shelves. Informed In charge Medical ward for in time use of medicines & on job training was conducted on GSP in which 3 participants (2 nurses & 1 dispenser) were trained. 15 Health facilities were visited in district Swabi to check alerts and on job orientation session were held with health facilities staff.

Lower Dir: Coordination meeting held with EDOH , EPI coordinator, National program , MS Smarbagh, MS DHQ, staff of the BHU Asegai, CD rabat, RHC Asbhanr, BHU Damtal, BHU Drangal, RHC Munda, BHU Makhai and TMA Chief officer for TMA lab equipments supply, Leishmaniasis, measles Alerts response, and monitoring visits. WHO Team visited DHQ Timargara, THQ Samarbagh, BHU Asegai, CD rabat, RHC Asbhanr, BHU Damtal, BHU Drangal, RHC Munda, BHU Makhai for routine monitoring and Alerts Response.

Kohistan: WHO SO conducted orientation session of all (20) LHWs of District Kohistan on DEWS Meeting was held with EDO-H Kohistan. EDO-H gave briefing about the World Bank project. WB is going to take health departments of six districts of KP including Kohistan, and further give it to the IPs. The Batagram model will be followed. Visit was conducted to RHC Pattan, RHC Dassu, BHU Jijal and RHC Ranolia. WHO attended the District polio control room meeting chaired by DCO Kohistan.

Nowshera: The First Referral Health Facility of Jalozai IDP's Camp (Pabbi Satellite Hospital) was assessed by WHO team comprising of PHO, EHE & Pharmacist. Monthly Review Meeting of PPHI, Nowshera attended by WHO Public Health Officer. The M.O/Incharges of Health facilities were thanked for timely reporting of alerts to WHO. They were requested to share the E-DEWS Data on Weekly basis every Saturday till 02:30 PM. Coordination meeting held with Monitoring and Evaluation Officer, PPHI Nowshera. He was requested to provide the E-DEWS data in time to WHO. It was decided to train the FMT's of PPHI and remaining Focal Persons of the HF of district on 14th March 2012 at 10 Am in PPHI Office. Looking at the number of leishmaniasis cases getting reported in the district, PPHI was requested to purchase medicines for leishmaniasis from their funds as WHO is left with meager doses of Leishmaniasis injections.

Monitoring Visits conducted to RHC Dak Ismail Khel, Pabbi Satellite Hospital, BHU Rashakai and RHC Khweshgi. On job capacity building done. Malaria Control Program of Nowshera has carried out Vector Control activities in Dak Ismail Khel, Kahi and Salah Khana as a response to Leishmaniasis cases in these areas. WHO provided 500 Bed nets to MCP, Nowshera for the leishmaniasis cases response. WHO provided leishmaniasis medicines to all cases reported from Health Facilities in Kahi, Dak Ismail Khel and Saleh Khana.

Haripur: Coordination meeting conducted with EDO Health Haipur, EPI coordinator and Health manager of Save the children to discuss the possible plan of action for measles campaign in Afghan Refugee camp in response to measles outbreak. coordination meeting held in WHO Islamabad on overview of eDEWS in pilot districts and way forward for eDEWS program in KPK. 4 Health facilities BHU STC- 4, DHQ Haripur, CMH Abbottabad and BHU Bandi Sher Khan were visited.

Swat: Polio monitoring visits conducted to 12 places. Coordination meeting held with EDO Health regarding issues pointed out during Polio Monitoring visits.

Upper Dir: A Coordination meeting conducted with EDO-H and DSM PPHI regarding HeRAMS activity in Dir Upper. Inauguration ceremony of POLIO SNIDs held at Jirga Hall, DCO office Dir Upper was attended by DCO Dir upper, EDO-H, DSM PPHI, NPO POLIO and EHA team. EDO-H has nominated eDEWS focal persons for 6 RHCs. Monthly coordination meeting with National coordinator for LHWs Supervisor LHWs and 6 LHS held at EDO-H office regarding Measles surveillance and reporting of missed children for Measles vaccination in catchment areas. 2 alerts of Measles were reported from DHQ Hospital Dir upper. WHO conducted monitoring visits of SHC Darora and RHC Wari for eDEWS reports. MIHO has started EPI activities and provided 14 EPI Technicians to EDO- H Dir Upper.

Logistic:

The following Supplies were supplied from WHO KP warehouse to:

- **DHQ Alpura Shangla:** 1Gloria Spray Pump, 1 Hand washing sink steel, 4 gas cylinder, 1400 Face Mask, 11000 Gloves,20 Clean Delivery kit,4 Dustbins,1823 IEC Material,30 Mortein Mat, 60 Peace Baby Diper large size,200 Eye ware,2 Hth 450g Bottels,12 Spirit 1 litre bottles,1Pressure Sprayer 5 liter,5 brooms,5 Dry Mob, 5 Wash Cleaners,10 Wash Cleaners,10 Waste Bags,32000 Aqua Tabs 67 Mg, 25 Safety Boxes 5 liter capacity, 10 Aprons,20 Syringe cutter,5 mob bucket yellow,5 Wipers,1 DEWS So kit.
- **EDOH Bunir:** 100 meglumine 5ml inj.
- **EDOH Nowshera:** 330 Gentamicin 80mg Inj,294 Fexefendine Tab, 800 Zinic Sulphate 20 mg Tab,125 IV cannula 22 G,100 IV cannula 25G,600 Tongue Depressor,260 Betamethasone5 g,4500 Folic Acid 400g,140 I V Sets,400Masks,4200 Bendroflumethiazide205mg,200 Tixylix syrup,2016 Itraconazole

100 mg,40 chlorpheniramine Maleate syrup,10000 Paracetamol 500 mg,140 Co-trimoxazole Suspen 50ml,280 Paracetamol syrup 60ml,160 Ringer Lactate 1000ml,40 Ringer Lactate 500ml, 160 Dextrose 5 % 500ml,120 Dextrose 10 % 1000ml,20 Normal Saline,80 Dextrose 500 ml,144 Aluminium Hydr.+ magnesium hydr,250 Metrodidazole Infusion,74800 Metronidazole 400 Mg tabs,

- **PPHI Charsadda:** 330 Gentamicin 80 Mg inj,294 Fexefendine Tab, 800 Zinic Sulphate 20mg Tab, 125 IV Cannula 22 G,100 IV Cannula 25G,600 Tongue Depressor, 260 Betamethasone 5 gram,4500 Folic Acid 400mg Tab,140 IV sets,400 Masks,4200 Bendroflumenthiazide2.5 mg tab,200 Tixylix Syrup,2016 itraconazole 100mg, 40 chlorpheniramine Maleate syrup,10000 paracetamol 500 mg tab,140 Co-trimoxazole suspen 50ml, 280 Paracetamol syrup 60 ml, 680 Ringer Lactate 1000ml,40 Ringer Lactate 500ml, 160 Dextrose 5 % 500ml,120 Dextrose 10 % 1000ml,20 Normal Saline,80 Dextrose 500 ml, 144 Aluminium Hydr.+Magnesium Hydo,250 Metronidazole infusion.70000 Metronidzole 400mg tab.
- **DHQ Charsada:** 330 Gentamicin 80mg Inj,294 Fexefendine Tab,800 Zinic Sulphate 20 mg Tab,125 IV cannula 22 G,100 IV cannula 25G,600 Tongue Depressor,260 Betamethasone5 g,4500 Folic Acid 400g,140 I V Sets,400Masks,4200 Bendroflumethiazide205mg,200 Tixylix syrup,2016 Itraconazole 100 mg,40 chlorpheniramine Maleate syrup,10000 Paracetamol 500 mg,140 Co-trimoxazole Suspen 50ml,280 Paracetamol syrup 60ml,680 Ringer Lactate 1000 ml,40 Ringer Lactate 500ml, 160 Dextrose 5 % 500ml,120 Dextrose 10 % 1000ml,20 Normal Saline,80 Dextrose 500 ml,144 Aluminium Hydr.+ magnesium hydr,250 Metrodidazole Infusion,74800 Metronidazole 400 Mg tabs,
- **EDO Charsada:** 330 Gentamicin 80mg Inj,294 Fexefendine Tab,800 Zinic Sulphate 20 mg Tab,125 IV cannula 22 G,100 IV cannula 25G,600 Tongue Depressor,260 Betamethasone5 g,4500 Folic Acid 400g,140 I V Sets,400Masks,4200 Bendroflumethiazide205mg,200 Tixylix syrup,2016 Itraconazole 100 mg,40 chlorpheniramine Maleate syrup,10000 Paracetamol 500 mg,140 Co-trimoxazole Suspen 50ml,280 Paracetamol syrup 60ml,680 Ringer Lactate 1000 ml,40 Ringer Lactate 500ml, 160 Dextrose 5 % 500ml,120 Dextrose 10 % 1000ml,20 Normal Saline,80 Dextrose 500 ml,1100 Aluminium Hydr.+ magnesium hydr,300 Metrodidazole Infusion,71900 Metronidazole 400 Mg tabs.
- **Peshawar Medical Collage:**1 Pressure Sprayer 5 litter,3 safety Boxes 5 liter capacity,2 water sampling bottles, 1 ph Meter,1 turbidity Meter,50 Face Masks,150 Aqua Tabs,3Alcohol Wipes,1HTH 450g bottles,150 Aqua Tabs,,72 Dettol Bath Soaps,1Weekly chart, 1 Case definitions,10 Dengue Book lets,1 Potatest Kit,1Auto clave,100 Gloves. (For Exhibition Display).
- **MS Bacha Khan Medical Complex Swabi:** Two Adult Weighting Scale With measuring Rod,3528 Dettol Bath Soap 100 gm, 1 Emergency trolley with emergency kit + oxy cylinder, one haematology analyzers with starter pack of reagent, One Mini laptops with battery, Two Resuscitation Board, one Neonatal Resuscitation + Oxygen Cylinder, One X-ray Film Processor, one DEWS so kit.
- **DHQ Chitral:** 600 IEC Materials Posters,2 Adult weighting scale measuring Rod,10000 Aqua Tabs67mg, 1008 Dettol Bath Soap 100gm, 1 Lead protective screen,1Refrigerated Ultracentrifuge Machine,100 Hand sanitizer Gel-100 ml.
- **MS DHQ Lower Dir:** 1 Emergency Trolley with Emergency kit + oxy cylinder, 1 Resuscitatio/crash trolley, 56 OPD Register, 1DEW SO kit. One water testing Lab kit,one Wagtech Kit, Hp 18.5 Wide screen LCD Monitor, UPS smart 1500 KVA, Hp Compaq desktop computer Dx 7500 Mt. 5 Cholera Beds,3 Gas cylinders,1 Gloria Spray Pump, 500 IEC material, 200 Eyewear,500 Face Mask,2 Needle cutter,2 Folding Cholera beds,8 Mortein Mat,1 wagtech kit,
- **WHO Islamabad office:** 150 Books for water treatment in emergency (English), 150 Books for water treatment in emergency.
- **EDOH Mardan:** Meglumine Inj 5ml, 5 Cholera Beds,1 Gloria spray Pump, 300 IEC Material, 8 Mortein Mat,2 Cholera Folding Beds, 1 Wagtech Kit, 2 Needle cutter, 2 Revolving Stool, 200 Eyewear.