



health

Department:
Health
REPUBLIC OF SOUTH AFRICA

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This list is an annexure to a permit issued in terms of Section 22A(15) of the Medicines and Related Substances Act 101 of 1965 to a professional nurse to acquire, possess, use and supply medicines for the provision Family Planning Services.

Certificate number:

Name:

SANC number:

This list is in accordance with the latest version of the Standard Treatment Guidelines /Essential Medicines List (STGs/EML) as approved by the National Essential Medicines List Committee.

This list is not valid without a valid Certificate Number.

NOTE: It is incumbent upon the permit holder to remain abreast of revisions and updates to of the STGs/EML Standard Treatment Guidelines and Essential Medicines List. Download the EML Clinical Guide application from your Google Play Store or iStore by searching "EML Clinical Guide" for updated guidelines.

Abbreviations:

IM = Intra Muscular

IV = Intra Venous

Family Planning Services:

Condition	ICD10 Code	INN	Schedule	Dosage	Route of Administration	Note
Contraceptive, hormonal injectable: progestin-only	Z30.0/ Z30.4	Progestin-only injectable contraceptive, e.g: Medroxyprogesterone (long-acting), IM, 150 mg, 12 weekly.	S3	150mg	IM	Consult package insert for contraindications Refer to doctor where heavy or prolonged bleeding, despite adequate treatment with combined oral contraceptives.
Contraceptive, hormonal oral: progestin-only	Z30.0/ Z30.4	Progestin only pills, e.g: Levonorgestrel, oral, 30mcg daily	S3	30mcg	Oral	Consult package insert for contraindications. Refer where abnormal uterine bleeding continues for > 3 months
Contraceptive, hormonal oral: combined (COC)	Z30.0/Z30.4	Combined progestins and estrogen pills	S3		Oral	Consult package insert for contraindications. Refer where abnormal uterine bleeding continues for > 3 months

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This list is an annexure to a permit issued in terms of Section 22A(15) of the Medicines and Related Substances Act 101 of 1965 to a professional nurse to acquire, possess, use and supply medicines for the provision of Immunisation Services.

Certificate number:

Name:

SANC number.

This list is in accordance with the latest version of the Standard Treatment Guidelines /Essential Medicines List (STGs/EML) as approved by the National Essential Medicines List Committee.
This list is not valid without a valid Certificate Number.

NOTE: It is incumbent upon the permit holder to remain abreast of revisions and updates to of the STGs/EML Standard Treatment Guidelines and Essential Medicines List. Download the EML Clinical Guide application from your Google Play Store or iStore by searching "EML Clinical Guide" for updated guidelines.

Abbreviations:

IM = Intra Muscular

IV = Intra Venous

Immunisation Services:

Note: The permit holder will be expected to provide data pertaining to EPI vaccine coverage

Condition	ICD10 Code	INN	Schedule	Dosage	Route of Administration	Note
EPI childhood immunization schedule	Z32.2	BCG (<i>Bacillus Calmette-Guérin</i>) Vaccine	S2	0.05 ml	Intradermal	At birth
EPI childhood immunization schedule	Z24.0	bOPV (Oral Polio Vaccine)	S2	2 drops	Oral	At birth and 6 weeks
EPI childhood immunization schedule	Z25.8	RV (Rotavirus Vaccine)	S2	1.5 ml	Oral	6 and 14 weeks
EPI childhood	Z27.8	Hexavalent (DTap-	S2	0.5 ml	IM	6, 10, 14 weeks and

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Immunisation Services:						
Note: The permit holder will be expected to provide data pertaining to EPI vaccine coverage						
Condition	ICD10 Code	INN	Schedule	Dosage	Route of Administration	Note
immunization schedule		IPV-HB-Hib) Vaccine - Diphtheria, tetanus, acellular pertussis, inactivated polio, hepatitis B and <i>Haemophilus influenzae</i> type b				18 months
EPI childhood immunization schedule	Z24.4	Measles vaccine	S2	0.5 ml	SC	6 and 12 months
EPI childhood immunization schedule	Z23.8	PCV (Pneumococcal conjugated vaccine)	S2	0.5 ml	IM	6, 14 weeks and 9 months
EPI childhood immunization schedule	Z27.8	Td (Tetanus and diphtheria) vaccine	S2	0.5 ml	IM	5-7 years, ≥12 years
Other Vaccines	Z23.5	TT (Tetanus Toxoid) vaccine	S2	0.5 ml	IM	Pregnant women, Neonatal and after wounds
Other Vaccines	Z24.6	Hepatitis B vaccine	S2	1 ml	IM	3 adult doses
Other Vaccines	Z27.4	Measles, Mumps, Rubella vaccine	S2	0.5ml	SC	2 doses , 1 st dose at 12 – 15 months and 2 nd dose at 4 – 6 years
Other Vaccines	Z23	HPV (Human Papillomavirus) vaccine	S2	0.5 ml	IM	2 doses 6 months apart
Other Vaccines	Z25.1	Influenza vaccine	S2	0.5 ml	IM	
Anaphylaxis	R57.9/T78.0-3/T80.5/T88.6	Hydrocortisone	S4	4-6 mg/kg	Slow IV immediately	
Anaphylaxis	R57.9/T78.0-3/T80.5/T88.6	Epinephrine (adrenaline) 1:1000	S4	0.01 ml/kg as a single dose, repeat every 5	IM	

Permit Number.

Immunisation Services:

Note: The permit holder will be expected to provide data pertaining to EPI vaccine coverage

Condition	ICD10 Code	INN	Schedule	Dosage	Route of Administration	Note
				mins as required		
Cardiopulmonary Arrest, Children	I46.9	Epinephrine (adrenaline) 1 : 1000	S4	0.01 ml/kg as a single dose, repeat every 5 mins as required	IM	
Bronchospasm and Analaphylaxis	J21.9	Epinephrine (adrenaline) 1 : 1000	S4	1 ml	Inhalation	Used with sodium chloride (doctor initiated)
Anaphylaxis	R57.9/T78.0-3/T80.5/T88.6	Promethazine	S5	0.25 mg/kg	IM/ Slow IV	Children > 2 years
Bronchospasm and Analaphylaxis	J21.9	Sodium Chloride	S3	0.5%/0.9%	Inhalation	
Anaphylaxis	R57.9/T78.0-3/T80.5/T88.6	Oxygen	S4	15 L/min	Inhalation	Sever anaphylaxis
Bronchospasm and Analaphylaxis	J21.9	Oxygen	S4	1-2L/minute	Inhalation	
Bronchospasm and Analaphylaxis	J21.9	Salbutamol	S3	0.5%	Inhalation	Used with sodium chloride
Cardiopulmonary Arrest, Children	I46.9	Dextrose	S3	10% 2-5 ml/kg (made from 50% dextrose)	IV	Hypoglycaemia in sick children, especially infants

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