



health

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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

Permit Number:



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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

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
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/T 78.0-3/T80.5/ T88.6	Hydrocortisone	S4	4-6 mg/kg	Slow IV immediately	
Anaphylaxis	R57.9/T 78.0-3/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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This list is an annexure to a permit issued in terms Section 22A(15) of the Medicines and Related Substances Act 101 of 1965 to a professional nurse to acquire, possess, use and supply medicines required for the provision of Home Based Care Services (Treatment of minor ailments).

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.

Medicines may only be acquired and supplied in patient-ready packs.

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Home Based Care Services (Treatment of minor ailments)

Condition	ICD10 Code	INN	Schedule	Dosage	Route of Administration	Note
Acute pain in children and adults	R52.0, R52.9	Paracetamol	S0	10-15 mg/kg/dose 6 hourly (children), 1 g 6 hourly when required (adults)	Oral	Mild pain – non-inflammatory or post trauma
Acute pain (moderate pain or pain with inflammation) in children and adults	R52.0, R52.9	NSAIDS eg ibuprofen	S3	400 mg 8 hourly to a maximum of 2400 mg daily (adults)/ 5-10 mg/kg/dose 8 hourly (children)	Oral	Pain associated with inflammation or moderate pain that is not relieved on paracetamol alone.
Arthralgia management in children and adults	M25.50-9	Paracetamol	S0	10-15 mg/kg/dose 6 hourly (children), 1 g 6 hourly when required (adults)	Oral	Treat for maximum of 1 week (children) / 2 weeks (adults) provided no new signs develop; then refer if needed.
Arthralgia management in children and adults	M25.50-9	Methylsalicylate Ointment	Not Scheduled	Apply to affected areas	Topical	May provide some relief

Permit Number:

Home Based Care Services (Treatment of minor ailments)						
Condition	ICD10 Code	INN	Schedule	Dosage	Route of Administration	Note
Candidiasis, Oral (Thrush)	B37.0	Nystatin oral solution	S2	100 000 IU/ml, 1 ml 6 hourly for 7 days	Oral	
Candidiasis, Topical	B37.0	Nystatin oral solution	S2	100 000 IU/ml, 1 ml 6 hourly for 7 days	Topical	
Candidiasis, Vaginal	B37.0	Nystatin oral solution	S2	100 000 IU/ml, 1 ml 6 hourly for 7 days	Topical	
Chicken Pox	B01.9/B01.8	Paracetamol	S0	10-15 mg/kg/dose 6 hourly (children), 1 g 6 hourly when required (adults)	Oral	Pain and fever with distress
		Calamine lotion	Not scheduled	Applied as needed	Topical	For itch
		Chlorphenamine oral	S2	0.1 mg/kg/dose 6-8 hourly (children); 4 mg 6-8 hourly (adults)	Oral	For severe itch, not controlled on calamine application
Cholera	A00.0-1/A00.9	Oral rehydration solution (ORS)	S0	-	Oral	
		Zinc (elemental)	S0	<10mg give 10mg/day, >10mg give 20mg/day	Oral	
Constipation	K59.0	Lactulose	Not Scheduled	0.5 ml/ kg/ dose once or twice daily (children > 12 months of age), 10-20 ml once or twice daily (adults)	Oral	<u>Children >12 months of age:</u> Lactulose, oral, 0.5 mL/kg/dose once daily. If poor response, increase frequency to 12 hourly. <u>Adults and children >15 years of age</u> Lactulose 10-20 mL once or twice daily.
Constipation	K59.0	Sennosides A and B	Not Scheduled	7.5 mg, 2 -4 tablets at night	Oral	<u>Adults and children >15 years of age:</u> Sennosides A and B, oral, 7.5 mg, 2 tablets at night. In resistant cases increase to 4 tablets.

Permit Number.

Home Based Care Services (Treatment of minor ailments)						
Condition	ICD10 Code	INN	Schedule	Dosage	Route of Administration	Note
						Adults and children >15 years of age Sennosides A and B, oral, 7.5 mg, 2 tablets at night. In resistant cases increase to 4 tablets
Heartburn	R12	Aluminium Hydroxide and Magnesium Trisilicate Suspension or Tablets	S0		Oral	
Diarrhoea, Acute in Children and Adults	A09.0/A09.9	Zinc (elemental)	S0	<10kg give 10mg/day, ≥10kg give 20mg/day	Oral	
		Oral rehydration solution OR Homemade sugar and salt solution (SSS)	S0	80 mL/kg over 4 hours, e.g. 5 mL/kg every 15 minutes.	Oral	Only for cases of non-severe dehydration
Diarrhoea, Acute in Adults	A09.0/A09.9/ K52.2/K52.8/K52.9	Loperamide	S2	4mg immediately and 2mg as required after each loose stool	Oral	No more than 16mg daily in 24 hours
Influenza or Viral Rhinitis (Common Cold)	J09/J10.0-1/J10.8/J11.0-1/J11.8	Paracetamol	S0	10-15 mg/kg/dose 4-6 hourly (children), 1 g 6 hourly when required (adults)	Oral	Pain and fever with distress
		Unscheduled Cough Mixture	S0		Oral	
		Sodium chloride nasal drops or spray 0.9%	S1	Instilled into each nostril	Nasal	
Measles	B05.0-4/B05.8-9	Paracetamol	S0	10-15 mg/kg/dose 6 hourly (children), 1 g 6 hourly when required (adults)	Oral	Pain and fever with distress (Notifiable condition) Refer children under 6 months and measles with pneumonia or purulent conjunctivitis to doctor

Permit Number: _____

Home Based Care Services (Treatment of minor ailments)

Condition	ICD10 Code	INN	Schedule	Dosage	Route of Administration	Note
		Vitamin A (retinol), oral, as a single dose.	S2	Infants 6–11 months: 100 000 u Children 12 months–5 years: 200 000 u	Oral	All children < 5 years of age with measles should be given an extra dose of vitamin A unless the last dose was received within a month. In children < 5 years of age, give the 1st dose immediately. If the child is sent home, the caregiver should be given a 2nd dose to take home, which should be given the following day.
Osteoarthritis (Osteoarthritis)	M13.00-19/M16.0-9/M17.0-9/M18.0-9/M19.00-09/M19.80-99	Paracetamol	S0	1g 6 hourly when required	Oral	
		NSAIDS eg Ibuprofen	S2	400mg 8 hourly with a meal, as needed for 7 days.	Oral	<u>If no response to paracetamol and inflammation is present</u>
		Proton Pump Inhibitor e.g.: Lansoprazole	S2	30mg daily for 7 days	Oral	Only in high-risk patients: > 65 years of age; history of peptic ulcer disease; or on concomitant warfarin, aspirin or corticosteroids – concomitant PPI added for 7 days
		Methylsalicylate Ointment	Not Scheduled	Apply to affected areas	Topical	May provide some relief
Moderate Acute Malnutrition (MAM)	E44	Mebendazole	S2	100mg in children <2 years, 500mg in children (≥2 to 5 years)	Oral	Refer complicated cases to the doctor
		Vitamin A	S2	100000 to 200000IU	Oral	
		Multivitamin or Vitamin BCo	Not scheduled		Oral	
Vitamin A Deficiencies (Prophylaxis)	E50.0-9	Vitamin A	S2	100000 to 200000IU	Oral	Prophylaxis only, all cases with clinical signs need to be referred to the doctor.

Permit Number.

Home Based Care Services (Treatment of minor ailments)						
Condition	ICD10 Code	INN	Schedule	Dosage	Route of Administration	Note
Deworming		Mebendazole Tablets or Syrup	S2	100mg in children under 2 years 500mg (≥2 to 5 years)	Oral	
Body Lice	B85.1	Benzyl Benzoate Lotion 25% Permethrin 5% lotion	Not Scheduled	Apply over the whole body	Topical	Adults and adolescent children
Pubic Lice	B85.3	Benzyl Benzoate Lotion 25%	Not Scheduled	Apply over the whole body/ affected area(s)	Topical	Adults and adolescent children All children should be referred to doctor
Scabies	B86	Benzyl Benzoate Lotion 25%	Not Scheduled	Apply over the whole body	Topical	Adults and children > 6 years
Pediculosis of the eyelashes or eyebrows	B85.3	Yellow Petroleum Jelly	Not Scheduled	Apply to the eyelid margins	Topical	Adults and adolescent children
Itching (Pruritus)	L29.9	Calamine Lotion	Not Scheduled	Apply when needed	Topical	
		Emollient eg Emulsifying ointment (UE)	Not Scheduled		Topical	For pruritis associated with dry skin
		Chlorphenamine tablets/ syrup	S2	0.1 mg/ kg/ dose 6-8 hourly (children), 4 mg 6-8 hourly (adults)	Oral	Severe pruritis: short-term use
Itching (Pruritus) – severe	L29.9	Cetirizine	S2	5 mg once daily (children), 10 mg once daily (children > 6 years and adults)	Oral	Severe pruritis: For long-term use e.g. chronic pruritis
Urticaria	L50.0-6/L50.8-9	Calamine Lotion	Not Scheduled	Apply on the skin	Topical	
		Chlorphenamine tablets/ syrup	S2	0.1 mg/ kg/ dose 6-8 hourly (children), 4 mg 6-8 hourly (adults)	Oral	No response within 24 hours – refer.
Insect Stings and Spider Bites	T63.2,3,4 + External Code (V, W, X,Y)	Calamine Lotion	Not Scheduled	Apply when needed	Topical	
		Mepyramine cream	S2	Apply 6-8 hourly	Topical	
		Paracetamol	S0	10-15 mg/kg/dose 6 hourly (children), 1 g 6 hourly when required (adults)	Oral	Pain

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Condition	ICD10 Code	INN	Schedule	Dosage	Route of Administration	Note
		Chlorphenamine tablets/ syrup	S2	0.1 mg/ kg/ dose 6-8 hourly (children), 4 mg 6-8 hourly (adults)	Oral	
Burns	T30.0-3/T31.0-9 + (Y34.98)	Povidone iodine	S0	5% (cream) daily	Topical	For infected burns Clean the burn wound gently with sodium chloride 0.9% or clean water
Chronic Lower Leg Ulcers	L97	Povidone iodine	S0	5%	Topical	
Cracked nipples during breastfeeding	O92.1	Zinc and castor oil cream	S0	Apply between feeds	Topical	
Nappy Rash	L22	Zinc and castor oil cream	S0	Apply after every nappy change	Topical	
Nappy Rash	L22	Imidazole, e.g.: Clotrimazole or Nystacid Ointment	S2	Clotrimazole 2% cream or Nystacid ointment applied beneath zinc and castor oil ointment after each nappy change until symptoms are resolved.	Topical	If rash involves the flexures, suspect candida
Pressure sores	L89.9	Zinc and castor oil ointment	S0		Topical	
Skin antiseptics and Disinfectants	-	Water for injection	S1	-	Topical	To sterilise clean wounds
		Gentian Violet Solution	Not scheduled		Topical	For treatment of mild fungal skin infections & may be used for minor cuts and scrapes to prevent infection
		Povidone Ointment, 10%	S0		Topical	
Wound Cleaning	-	Chlorhexidine solution	S0	0.05%	Topical	Antiseptic and disinfectants to clean dirty wounds
		Sodium Chloride 0.9%	S0			

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