

Structured Administration and Supply Agreement

SASA Details			
Title:	Administration of Intramuscular Benzathine Benzylpenicillin G (BPG) for the Rheumatic Heart Disease (RHD) Program		
Identifying Number:	2023/ ED-CO-23-209770 2021/ED-CO-21-165659		

Issuing Authority		
Hospital Name:	WACHS CEO under section 6 Medicine and Poisons Regulations 2016	
Address:	189 Wellington Street, PERTH 6000	
Contact:	9223 8525	

Authorised Persons				
Practitioners:	Registered Nurses			
Location:	When employed by, or contracted to provide services to WACHS			
Qualification:	 Registered with AHPRA Successfully completed Rheumatic Heart Disease – Introduction (RHDI EL2) Declaration Package on WACHS MyLearning Management System Hold a current CPR certificate 			

	Authoris	sed Medicine	
Medicine Name:	Benzathine Benzylpenicillin G	Brand:	BICILLIN® L-A
Form:	Injection	Strength:	450 mg/ 600, 000 units 900 mg/ 1,200,000 units
Dose:	1,200,000 units (≥20 kg) 600,000 units (<20 kg)	Quantity:	1 vial
Route:	Intramuscular injection		
Instructions:	Administer 1 vial every 21-28 days as per patient record in RHD Register		
	Approved	Circumstances	
Authorised to:	Administer by IM injection		
Place:	All Public Health Units, child health clinics, nursing posts, community health clinics, remote area clinics and school nurses within WACHS		
Patients:	Current patients identified on the RHD Register currently prescribed secondary prophylaxis		
Medical Condition:	Acute Rheumatic Fever (ARF) and Rheumatic Heart Disease (RHD)		

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	Clinical / Other Information		
Patient Inclusion	Current patients identified on the RHD Register currently prescribed secondaryprophylaxis		
Patient Exclusion:	Patients not on prophylaxis.Previous hypersensitivity/reaction to any penicillin		
Special Instructions:	 Minimum interval of 21 days since last dose. If unable to confirm date of last dose, phone WA RHD Register and Control Program on 1300 622 745 for advice Confirm the requirement for intramuscular benzathine benzylpenicillin G by contacting the patient's usualprimary health care provider and/or checking the RHD Register (Phone: 1300 622 745) prior to administration. Benzathine benzylpenicillin G (Bicillin L-A®) is different from benzylpenicillin (BenPen®) and procaine penicillin (Cilicaine®). Please ensure correct medication is given. 		
Administration Notes:	 Refer to Appendix 1 of this SASA Check benzathine benzylpenicillin G batch number and expiry date Review NPS Full Consumer Information for the full list of potential adverse events relating to benzathine benzylpenicillin G www.nps.org.au Standardised procedures must be followed and documented. This includes informing the patient, parent or guardian to return to their usual primary health care provider for future care as described in the national RHD guidelines. Inform the usual primary care provider of the dose of benzathine benzylpenicillin G administered by emailwithin twenty-four hours of administration to avoid medication errors. Administration of benzathine benzylpenicillin G is documented and submitted to WA RHD Program Email: RHD.Register@health.wa.gov.au to meet statutory requirements for dataquality, accuracy and timeliness. Any adverse event must be notified to the patient's regular primary health care provider and the RHD Register; by email within twenty-four hours of administration Record keeping is in accordance with Part 12 of the Medicines and Poisons Regulations 2016 and to meet statutory requirements for data quality, accuracy and timeliness 		
Clinical Guidelines	 Complete the Rheumatic Heart Disease- Introduction Declaration Package (RHDI EL2) on WACHS MyLearning Refer to current edition of Australian Guideline for prevention, diagnosis and management of Acute Rheumatic Fever and Rheumatic Heart Disease (https://www.rhdaustralia.org.au/arf-rhd-guideline) Sites where administration of intramuscular benzathine benzylpenicillin G is given must be appropriatelyequipped to treat patients in the event of an anaphylactic reaction. Procurement, storage and administration is in accordance with Part 9 of the Medicines and Poisons Regulations 2016. Written or documented verbal consent as per Appendix 1 		

Approval				
Date of Issue:	26/05/2023			
Date of Expiry:	25/05/2025			
Clinical Governance Committee				
Committee:	WACHS Medicines and Therapeutics Executive Sub-Committee			
Pharmacist	Adam Hort (Chief Pharmacist)			
Date:	17/05/2023	Signature:	Adam Hort	
Nurse	Cheryl Liddiard, CNS Rheumatic Heart Disease Control Program			

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Date	24/02/2023	Signature:	Cheryl Liddiard		
Senior Medical Practitioner					
Name:	Dr Samir Heble				
Date:	26/05/2023	Signature:	Samir Heble		
Chief Executive					
Name:	Rob Pulsford A/CE				
Date:	26/05/2023	Signature:	Rob Pulsford		

- References:

RHDAustralia (ARF/RHD writing group), National Heart Foundation of Australia and Cardiac Society of Australia and New Zealand. Australian guideline for prevention, diagnosis and management of acute rheumatic fever and rheumatic heart disease (3rd edition). 2020. Available from <u>www.rhdaustralia.org.au</u>

APPENDIX 1

Informed consent for administration of Benzathine benzylpenicillin G (Bicillin L-A®)

Persons authorised under this SASA must document the below information in the patient's notes: **Pre-administration:**

- Informed consent must be given, either verbally or written
- Provide verbal and/or written information about common adverse events
- Full name of patient, including alias
- Date of Birth
- UMRN if known
- Usual residential address
- Name and address of usual primary care provider
- Known allergies
- Date secondary prophylaxis commenced as per RHD Register (if known)
- Date secondary prophylaxis due to cease as per RHD Register (if known)
- Date of last dose of secondary prophylaxis (must be confirmed before administration)

Post administration:

- Notify RHD Register via e-mail RHD.Register@health.wa.gov.au of date benzathine benzylpenicillin G given to
 patient
- Notify patient's usual primary care provider within twenty-four hours of administration of benzathine benzylpenicillin G
- All adverse events must be notified to the patient's regular primary health care provider and the RHD Register; by email RHD.Register@health.wa.gov.au within twenty four hours of occurrence
- Inform patient of when next injection is due and ensure recall in place.