

Northern Territory of Australia

Medicines, Poisons and Therapeutic Goods Act 2012

**NT Health Primary Health Remote Services SSTPs 2026
Approval**

I, Christopher Paul Burgess, Chief Health Officer:

- (a) under section 254(1) of the Act, approve each Scheduled substance treatment protocol specified in Schedule A;
- (b) under section 254(3) of the Act, state that each Schedule substance treatment protocol specified in Schedule A remains in effect for a period of 2 years on and from the date of this instrument.

Dated 30/01/2026

EDOC2026/25312

Adj Prof Paul Burgess

Chief Health Officer

Schedule A

Title	Publication Date	Author
Central Australian Rural Practitioners Association (CARPA) Standard Treatment Manual PPHC Remote SSTP	19/12/2025	Population and Primary Healthcare, Northern Territory Government. Department of Health
Minymaku Kutju Tjukurpa Women's Business Manual PPHC Remote SSTP	19/12/2025	Population and Primary Healthcare, Northern Territory Government. Department of Health
Men's Ceremonial Business PPHC Remote NT Health SSTP	19/12/2025	Population and Primary Healthcare, Northern Territory Government. Department of Health
Mango Dermatitis PPHC Remote NT Health SSTP	19/12/2025	Population and Primary Healthcare, Northern Territory Government. Department of Health

Central Australian Rural Practitioners Association (CARPA) Standard Treatment Manual PPHC Remote SSTP

Version	Version 3		
Areas Applicable	Services delivered at or through NT Health Primary Health Care Remote clinics		
Health Professionals authorised by this SSTP	Nurses Midwives Aboriginal and Torres Strait Islander Health Practitioners		
Scheduled Substance(s)	Adrenaline (Epinephrine)	Famciclovir	Praziquantel
	Albendazole	Fluoride Varnish	Prednisolone
	Amiodarone	Hydrocortisone	Probenecid
	Amoxicillin (Amoxycillin)	Ibuprofen	Procaine Benzylpenicillin (Procaine Penicillin)
	Clavulanic Acid	Ipratropium	Prochlorperazine
	Azithromycin	Iron	Salbutamol
	Benzathine Benzylpenicillin	Ivermectin	Terbinafine
	Benzatropine	Lidocaine (Lignocaine)	Tetracaine (Amethocaine)
	Betamethasone Valerate	Metoclopramide	Triamcinolone
	Box Jellyfish Antivenom (Antisera)	Metronidazole	Neomycin
	Cefalexin (Cephalexin)	Midazolam	Nystatin
	Ceftriaxone	Morphine	Trimethoprim
	Ciprofloxacin	Naloxone	Sulfamethoxazole
	Clindamycin	Nitrofurantoin	Tuberculin PPD (Mantoux)
	Dexamethasone	Omeprazole	Valaciclovir
	Framycetin	Ondansetron	Vaccine - Hepatitis A
	Gramicidin	Oxybuprocaine	Vaccine - Hepatitis B
	Dicloxacillin	Paracetamol when in combination with Codeine	
	Doxycycline	Phenoxymethylpenicillin (Penicillin V)	
	Indication	Individual scheduled substances are to be used according to the indication for which they are being administered as outlined in the Central Australian Rural Practitioners Association (CARPA) Standard Treatment Manual, 2022; 8th edition	

<p>Contraindications , and/or Exclusions (including relevant drug interactions)*</p>	<ul style="list-style-type: none"> • Hypersensitivity or allergy to the individual drug substance or excipients of that formulation of the listed scheduled substances of this protocol • Any contraindications or exclusions as outlined in the individual scheduled substance product information • Any contraindication or exclusions as outlined in the Central Australian Rural Practitioners Association (CARPA) Standard Treatment Manual, 2022; 8th edition • Drug interactions as outlined in the individual scheduled substance product information
<p>Dose and Route*</p>	<p>As per the individual scheduled substance and indication as outlined in the Central Australian Rural Practitioners Association (CARPA) Standard Treatment Manual, 2022; 8th edition</p> <p>Medicines must not be administered by the intravenous route without the direction of a medical practitioner, except where the medical condition of the person requires the intravenous administration of the medicine without delay.</p>
<p>Dose Frequency*</p>	<p>As per the individual scheduled substance and indication as outlined in the Central Australian Rural Practitioners Association (CARPA) Standard Treatment Manual, 2022; 8th edition</p>
<p>Monitoring requirements*</p>	<p>As per the individual scheduled substance and indication as outlined in the Central Australian Rural Practitioners Association (CARPA) Standard Treatment Manual, 2022; 8th edition</p>
<p>Health Professional Accreditation Requirements</p>	<p>Nurses and Midwives</p> <ul style="list-style-type: none"> • Hold registration with the Nursing and Midwifery Board of Australia with no conditions or undertakings which may limit delivery of clinical services directly to patients • Have completed all essential training as mandated for PPHC staff – see: <ul style="list-style-type: none"> ○ Mandatory and Required Training NT Health Guideline <p>Aboriginal & Torres Strait Islander Health Practitioners (ATSIHPs) must</p> <ul style="list-style-type: none"> • Be registered with the Aboriginal and Torres Strait Islander Health Practice Board of Australia with no conditions or undertakings which may limit delivery of clinical services directly to patients • Have completed all essential training as mandated for PPHC staff – see: <ul style="list-style-type: none"> ○ Mandatory and Required Training NT Health Guideline <p>All health professionals administering vaccines from this protocol must have completed and hold a current qualification in:</p> <ul style="list-style-type: none"> • A program of study accredited by Health Education Services Australia (HESA) or; • A program of study approved by the Chief Health Officer or;

	<ul style="list-style-type: none"> Completed the assessment of an immuniser program of study that meets the curriculum content requirements of the National Immunisation Education Framework for Health Professionals <p>All health professionals following this protocol must maintain continuing professional development related to skills and competencies required for delivery of medicines.</p>		
Documentation <i>(including necessary information to the patient)</i>	Patients who receive scheduled substances in accordance with this SSTP must have this documented in the medication section of the patient's record within Primary Care Information System (PCIS)		
Related Documents	<ul style="list-style-type: none"> Central Australian Rural Practitioners Association (CARPA) Standard Treatment Manual, 2022; 8th edition Approved Scheduled Substance Treatment Protocols (SSTP) and Medicines List PHC Remote.docx Section 250 NT Medicines Poisons and Therapeutic Goods Act PPHC NT Health Guideline.docx Standard Drug List PPHC Remote NT Health Master Document.xlsx 		
Chief Health Officer	Signature	Name	Date
	EDOC2026/25311	Adj Prof Paul Burgess	30/01/2026
Period of effect	This SSTP is in force until 30/01/2028 unless revoked earlier		
<p>References:</p> <p>* The medicine information provided is to act as a guide to outline the limits of legal dealing with the named scheduled substances. Further information reference should be made to the full manufacturer's product info and other reliable sources of medicines information. If contraindications or exclusions are present, health professionals must refer the matter to an authorised prescriber for an administration order.</p>			

Mango Dermatitis PPHC Remote NT Health SSTP

Version	Version 2
Areas Applicable	Services delivered at or through NT Health Primary Health Care Remote clinics
Health Professionals authorised by this SSTP	Nurses Midwives Aboriginal and Torres Strait Islander Health Practitioners
Scheduled Substance(s)	<ul style="list-style-type: none"> • Mometasone furoate 0.1% ointment • Prednisolone tablets
Indication	For use during the management of clinical conditions arising from men's business as outlined in the Mango Dermatitis PPHC Remote Procedure
Contraindications, and/or Exclusions (including relevant drug interactions)*	<ul style="list-style-type: none"> • Hypersensitivity or allergy to the individual drug substance or excipients of that formulation of the listed scheduled substances of this protocol • Any contraindications or exclusions as outlined in the individual scheduled substance product information • Any contraindications or exclusions as outlined in the individual scheduled substance Mango Dermatitis PPHC Remote Procedure
Dose and Route*	<p>Mometasone furoate 0.1% ointment</p> <ul style="list-style-type: none"> • Apply liberally to affected areas morning and night for five (5) to seven (7) days <p>Prednisolone tablets</p> <ul style="list-style-type: none"> • Take 50mg daily in the morning (with food) for three (3) days
Dose Frequency*	As above
Monitoring requirements*	<p>Refer to Mango Dermatitis PPHC Remote Procedure.</p> <p>All clients requiring treatment with oral prednisolone must return for review within three (3) days.</p> <ul style="list-style-type: none"> • If showing no improvement after three (3) days, then medical consult • If reaction is improving, change treatment to topical corticosteroids (Hydrocortisone 1% cream) – apply to affected areas twice daily for 5 days • For pain management, refer to the CARPA Standard Treatment Manual, 8th edition Pain Management protocol

Health Professional Accreditation Requirements	<p>Nurses and Midwives</p> <ul style="list-style-type: none"> • Hold registration with the Nursing and Midwifery Board of Australia with no conditions or undertakings which may limit delivery of clinical services directly to patients • Have completed all essential training as mandated for PPHC staff – see: <ul style="list-style-type: none"> ○ Mandatory and Required Training NT Health Guideline <p>Aboriginal & Torres Strait Islander Health Practitioners (ATSIHPs) must</p> <ul style="list-style-type: none"> • Be registered with the Aboriginal and Torres Strait Islander Health Practice Board of Australia with no conditions or undertakings which may limit delivery of clinical services directly to patients • Have completed all essential training as mandated for PPHC staff – see: <ul style="list-style-type: none"> ○ Mandatory and Required Training NT Health Guideline <p>All health professionals following this protocol must maintain continuing professional development related to skills and competencies required for delivery of medicines.</p>		
Documentation <i>(including necessary information to the patient)</i>	Patients who receive scheduled substances in accordance with this SSTP must have this documented in the medication section of the patient's record within Primary Care Information System (PCIS)		
Related Documents	<ul style="list-style-type: none"> • Mango Dermatitis PPHC Remote NT Health Procedure • Central Australian Rural Practitioners Association (CARPA) Standard Treatment Manual, 2022; 8th edition • Approved Scheduled Substance Treatment Protocols (SSTP) and Medicines List PHC Remote.docx • Section 250 NT Medicines Poisons and Therapeutic Goods Act PPHC NT Health Guideline.docx • Standard Drug List PPHC Remote NT Health Master Document.xlsx 		
Chief Health Officer	Signature EDOC2026/25216	Name Adj Prof Paul Burgess	Date 30/01/2026
Period of effect	This SSTP is in force until 30/01/2028 unless revoked earlier		
References: * The medicine information provided is to act as a guide to outline the limits of legal dealing with the named scheduled substances. Further information reference should be made to the full manufacturer's product info and other reliable sources of medicines information. If contraindications or exclusions are present, health professionals must refer the matter to an authorised prescriber for an administration order.			

Men's Ceremonial Business PPHC Remote NT Health SSTP

Version	Version 2
Areas Applicable	Services delivered at or through NT Health Primary Health Care Remote clinics
Health Professionals authorised by this SSTP	Nurses Midwives Aboriginal and Torres Strait Islander Health Practitioners
Scheduled Substance(s)	<ul style="list-style-type: none"> • Clindamycin 150mg capsules • Trimethoprim 160mg /Sulfamethoxazole 800mg combination tablets • Amoxicillin 875mg /Clavulanic acid 125mg combination tablets • Ceftriaxone 1g injection • Paracetamol 500mg /Codeine phosphate 30mg combination tablets
Indication	For use during the management of clinical conditions arising from men's business as outlined in the Men's Ceremonial Business PPHC Remote Procedure
Contraindications, and/or Exclusions (including relevant drug interactions)*	<ul style="list-style-type: none"> • Hypersensitivity or allergy to the individual drug substance or excipients of that formulation of the listed scheduled substances of this protocol • Any contraindications or exclusions as outlined in the individual scheduled substance product information • Any contraindications or exclusions as outlined in the individual scheduled substance Men's Ceremonial Business PPHC Remote Procedure • Drug interactions as outlined in the individual scheduled substance product information
Dose and Route*	<ul style="list-style-type: none"> • Paracetamol 500mg/Codeine phosphate 30mg, 2 tablets oral once only <p>During Ceremony:</p> <ul style="list-style-type: none"> • Oral Clindamycin 450mg BD 2 doses; OR • Oral Trimethoprim/Sulfamethoxazole 160+800mg BD 2 dose; OR • Amoxicillin/Clavulanic acid 875+125mg BD 2 doses; <p>After Ceremony (Presentation to health centre):</p> <ul style="list-style-type: none"> • IV/IM Ceftriaxone 1g STAT; AND • Oral Trimethoprim/Sulfamethoxazole 160+800mg BD 5 days; OR • Oral Clindamycin 450mg TDS for 5 days

	Medicines must not be administered by the intravenous route without the direction of a medical practitioner, except where the medical condition of the person requires the intravenous administration of the medicine without delay.		
Dose Frequency*	As above.		
Monitoring requirements*	As per the Men's Ceremonial Business PPHC Remote Procedure		
Health Professional Accreditation Requirements	<p>Nurses and Midwives</p> <ul style="list-style-type: none"> • Hold registration with the Nursing and Midwifery Board of Australia with no conditions or undertakings which may limit delivery of clinical services directly to patients • Have completed all essential training as mandated for PPHC staff – see: <ul style="list-style-type: none"> ○ Mandatory and Required Training NT Health Guideline <p>Aboriginal & Torres Strait Islander Health Practitioners (ATSIHPs) must</p> <ul style="list-style-type: none"> • Be registered with the Aboriginal and Torres Strait Islander Health Practice Board of Australia with no conditions or undertakings which may limit delivery of clinical services directly to patients • Have completed all essential training as mandated for PPHC staff – see: <ul style="list-style-type: none"> ○ Mandatory and Required Training NT Health Guideline <p>All health professionals following this protocol must maintain continuing professional development related to skills and competencies required for delivery of medicines.</p>		
Documentation <i>(including necessary information to the patient)</i>	Patients who receive scheduled substances in accordance with this SSTP must have this documented in the medication section of the patient's record within Primary Care Information System (PCIS)		
Related Documents	<ul style="list-style-type: none"> • Men's Ceremonial Business PPHC Remote Procedure • CARPA Standard Treatment Manual RPHCM (remotephcmmanuals.com.au) • Approved Scheduled Substance Treatment Protocols (SSTP) and Medicines List PHC Remote.docx • Section 250 NT Medicines Poisons and Therapeutic Goods Act PPHC NT Health Guideline.docx • Standard Drug List PPHC Remote NT Health Master Document.xlsx 		
Chief Health Officer	Signature	Name	Date
	EDOC2026/25217	Adj Prof Paul Burgess	30/01/2026
Period of effect	This SSTP is in force until 30/01/2028 unless revoked earlier		

References:

* The medicine information provided is to act as a guide to outline the limits of legal dealing with the named scheduled substances. Further information reference should be made to the full manufacturer's product info and other reliable sources of medicines information. If contraindications or exclusions are present, health professionals must refer the matter to an authorised prescriber for an administration order.

Minymaku Kutju Tjukurpa Women's Business Manual PPHC Remote SSTP

Version	Version 2		
Areas Applicable	Services delivered at or through NT Health Primary Health Care Remote clinics		
Health Professionals authorised by this SSTP	Nurses Midwives Aboriginal and Torres Strait Islander Health Practitioners		
Scheduled Substance(s)	Amoxicillin	Ceftriaxone	Oxytocin
	Azithromycin	Doxycycline	Paracetamol when in combination with Codeine
	Benzathine Benzylpenicillin	Metronidazole	Phenoxymethylpenicillin (Penicillin V)
	Cefalexin	Nitrofurantoin	Probenecid
Indication	Individual scheduled substances are to be used according to the indication for which they are being administered as outlined in the Minymaku Kutju Tjukurpa Women's Business Manual, 7th Edition, 2022		
Contraindications, and/or Exclusions (including relevant drug interactions)*	<ul style="list-style-type: none"> Hypersensitivity or allergy to the individual drug substance or excipients of that formulation of the listed scheduled substances of this protocol Any contraindications or exclusions as outlined in the individual scheduled substance product information Any contraindication or exclusions as outlined in the Minymaku Kutju Tjukurpa Women's Business Manual, 7th Edition, 2022 Any drug interaction as outlined in the individual scheduled substance product information. 		
Dose and Route*	As per the individual scheduled substance and indication as outlined in the Minymaku Kutju Tjukurpa Women's Business Manual, 7th Edition, 2022		
Dose Frequency*	As per the individual scheduled substance and indication as outlined in the Minymaku Kutju Tjukurpa Women's Business Manual, 7th Edition, 2022		
Monitoring requirements*	As per the individual scheduled substance and indication as outlined in the Minymaku Kutju Tjukurpa Women's Business Manual, 7th Edition, 2022		
Health Professional Accreditation Requirements	Nurses and Midwives <ul style="list-style-type: none"> Hold registration with the Nursing and Midwifery Board of Australia with no conditions or undertakings which may limit delivery of clinical services directly to patients 		

	<ul style="list-style-type: none"> • Have completed all essential training as mandated for PPHC staff – see: <ul style="list-style-type: none"> ○ Mandatory and Required Training NT Health Guideline <p>Aboriginal & Torres Strait Islander Health Practitioners (ATSIHPs) must</p> <ul style="list-style-type: none"> • Be registered with the Aboriginal and Torres Strait Islander Health Practice Board of Australia with no conditions or undertakings which may limit delivery of clinical services directly to patients • Have completed all essential training as mandated for PPHC staff – see: <ul style="list-style-type: none"> ○ Mandatory and Required Training NT Health Guideline <p>All health professionals following this protocol must maintain continuing professional development related to skills and competencies required for delivery of medicines.</p>		
<p>Documentation <i>(including necessary information to the patient)</i></p>	<p>Patients who receive scheduled substances in accordance with this SSTP must have this documented in the medication section of the patient's record within Primary Care Information System (PCIS)</p>		
<p>Related Documents</p>	<ul style="list-style-type: none"> • Minymaku Kutju Tjukurpa Women's Business Manual, 7th Edition, 2022 • Approved Scheduled Substance Treatment Protocols (SSTP) and Medicines List PHC Remote.docx • Section 250 NT Medicines Poisons and Therapeutic Goods Act PPHC NT Health Guideline.docx • Standard Drug List PPHC Remote NT Health Master Document.xlsx 		
<p>Chief Health Officer</p>	<p>Signature</p>	<p>Name</p>	<p>Date</p>
	<p>EDOC2026/25310</p>	<p>Adj Prof Paul Burgess</p>	<p>30/01/2026</p>
<p>Period of effect</p>	<p>This SSTP is in force until 30/01/2028 unless revoked earlier</p>		
<p>References:</p> <p>* The medicine information provided is to act as a guide to outline the limits of legal dealing with the named scheduled substances. Further information reference should be made to the full manufacturer's product info and other reliable sources of medicines information. If contraindications or exclusions are present, health professionals must refer the matter to an authorised prescriber for an administration order.</p>			

