Northern Territory of Australia

Medicines, Poisons and Therapeutic Goods Act 2012

NT Health Renal Services SSTP
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 16 November 2026

09-D26-137876

Chief Health Officer

Schedule A

Title	Publication Date	Author
Lidocaine (Lignocaine) 1% Injection for Local Anaesthesia Prior to Cannulation in Haemodialysis Scheduled Substance Treatment Protocol (SSTP)	16 November 2026	Regional Health Services, Northern Territory Government, Department of Health

Lidocaine (Lignocaine) 1% Injection for Local Anaesthesia Prior to Cannulation in Haemodialysis Scheduled Substance Treatment Protocol (SSTP)

Areas Applicable	NT Health Renal Haemodialysis Units
Health Professionals authorised by this SSTP	Nurses
Scheduled Substance(s)	Lidocaine (lignocaine) 1% Injection
Indication	Local anaesthesia of the skin prior to cannulation for haemodialysis
Contraindications and/or Exclusions*	Known hypersensitivity to local anaesthetics of the amide type. Inflammation or infection at the proposed site of injection and in the presence of septicaemia. Patients with myasthenia gravis, severe shock or impaired cardiac conduction.
Dose and Route*	0.1-0.2mL intradermal or subcutaneous prior to cannulation
Administration	Intradermal or subcutaneous injection. **NOT** for IV administration. Injection should be made slowly with frequent aspirations to avoid inadvertent intravascular injection. Do not inject if 'flashback' of blood is seen, choose an alternate site.
Dose Frequency*	Single dose to each access site
Drug Interactions*	Potentiation of cardiac effects in patients receiving antiarrhythmic drugs. Amiodarone has been reported to reduce the clearance of lidocaine in two case reports, leading to seizures, severe sinus bradycardia and a long sinoatrial arrest. Patients receiving the combination should be monitored carefully. Strong CYP3A4 inducers, such as carbamazepine, phenytoin, primidone, rifampicin, phenobarbital, may increase the metabolism of lidocaine.

NORTHERN TERRITORY GOVERNMENT

Monitoring requirements*	Monitor for adverse events including: allergic reactions, nausea, cardiac arrhythmia, visual and neurological disturbances and notify medical officer if evident. Adverse effects are rare with low dose intradermal and subcutaneous lidocaine injection.		
Health Professional Accreditation Requirements	Nurses working through NT Health Renal Haemodialysis Units that are approved by the Clinical Nurse Educator and have completed the Renal Haemodialysis Orientation, Haemodialysis training, and local area education and assessment. Must be registered with the Nursing and Midwifery Board of Australia with no conditions, undertakings or notations which may limit delivery of clinical services directly to patients.		
Documentation *(including necessary information to the patient)*	Patients who receive lidocaine 1% must have this documented in the medication section of the haemodialysis treatment chart or appropriate medication chart. Record on the medication administration record specific dose and route of administration (i.e. intradermal or subcutaneous) and indicate it has been administered as per Lidocaine local anaesthesia of the skin prior to cannulation for haemodialysis SSTP.		
Related Documents	Renal Haemodialysis Orientation, Haemodialysis training, and local area education and assessment.		
Chief Health Officer	**Signature**	**Name**	**Date**
	09-D26-137867	Adj Prof Paul Burgess	16/11/2026
Period of effect	This SSTP is in effect until 16/11/2028 unless revoked earlier		

References:

- Metro North Hospital and Health Service. QLD. March 2023. Lidocaine (Lignocaine) Hydrochloride for the purpose of Peripheral Intravenous Catheter Insertion
- Dalvandi A, Ranjbar H, Hatamizadeh M, Rahgoi A, Bernstein C. Comparing the effectiveness of vapocoolant spray and lidocaine/procaine cream in reducing pain of intravenous cannulation: A randomized clinical trial. Am J Emerg Med. 2017 Aug;35(8):1064-1068. doi: 10.1016/j.ajem.2017.02.039. Epub 2017 Feb 27. PMID: 28285862.

* The drug 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 interactions are present refer to medical officer before administration