

Northern Territory of Australia

*Medicines, Poisons and Therapeutic Goods Act 2012*

**Phenylephrine, Cyclopentolate and Tropicamide Eye Drops for Pupil Dilation  
prior to eye surgery (children over 5 years old & adults) 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 18/02/2026

EDOC2026/42257

Chief Health Officer

## Schedule A

Title	Publication Date	Author
Phenylephrine, Cyclopentolate and Tropicamide Eye Drops for Pupil Dilation prior to eye surgery (children over 5 years old & adults) SSTP	11/02/2026	Ophthalmology Department, Northern Territory Government, Department of Health

# Phenylephrine, Cyclopentolate and Tropicamide Eye Drops for Pupil Dilation prior to eye surgery (children over 5 years old & adults) SSTP

<b>Areas Applicable</b>	All NT Health Services
<b>Health Professionals authorised by this SSTP</b>	Registered Nurses and Orthoptists employed by or contracted to NT Health
<b>Scheduled Substance(s)</b>	Phenylephrine 2.5% for ocular use Cyclopentolate 1% for ocular use Tropicamide 1% for ocular use
<b>Indication</b>	<p>Pupil dilation (mydriasis) prior to eye surgery by an eye health professional.</p> <p>The purpose of mydriasis is to enable the surgeon to have good access to the internal eye for safe completion of surgery and a reduction in the incidence of complications.</p> <p>Eye surgeries requiring pupil dilation covered by this SSTP are:</p> <ul style="list-style-type: none"> <li>• Cataract extraction (including those scheduled for cataract surgery with Minimally Invasive Glaucoma Surgery (MIGS) – stent placement)</li> <li>• Pan retinal photocoagulation of the retina (laser)</li> <li>• Posterior vitrectomy/vitreo-retinal surgery/retinal cryotherapy, injection or removal of silicone oil</li> <li>• Any patients where the operating surgeon has requested the pupils to be dilated.</li> </ul> <p><b>Check with operating surgeon if in any doubt.</b></p>
<b>Exclusions and/or Contraindications, (including relevant drug interactions)*</b>	<p><b>Exclusions</b></p> <ul style="list-style-type: none"> <li>• Operating surgeon has instructed not to dilate the pupils</li> <li>• Eye and eye-related surgeries that <b>do not</b> require pupil dilation: pterygium surgery; corneal procedure; stand-alone glaucoma surgery; eye lid and ocular plastic procedures including blepharoplasty, strabismus, entropion, ectropion and tarsorrhaphy surgeries; dacryocystorhinostomy; enucleation; external eye cryotherapy; excision of eye lesions; temporal artery biopsy.</li> </ul> <p><b>Contraindications – check with Operating Surgeon</b></p> <ul style="list-style-type: none"> <li>• Neonates, preterm infants and children with spastic paralysis or brain damage</li> <li>• Patient has significant head injury</li> </ul>

	<ul style="list-style-type: none"> <li>• Patients referred to eye clinic for neurological review</li> <li>• Recent or new Relative Afferent Pupillary Defect (RAPD)</li> <li>• Patient has had, or is, referred for Selective Laser Trabeculoplasty or Laser Iridotomy</li> <li>• Patient is referred for Trabeculectomy surgery</li> <li>• Patient is referred for Gonioscopy</li> <li>• Patient has acute angle-closure glaucoma or, is referred for narrow angles, or at risk for angle-closure glaucoma</li> <li>• Lenticular subluxation</li> <li>• Known allergy to Phenylephrine, Tropicamide, Cyclopentolate or any of the excipient ingredients in the eye drops</li> <li>• Patient is pregnant</li> <li>• Patient has diagnosed or suspected bronchial asthma</li> <li>• Intraocular Pressure (IOP) greater than 23mmHg</li> <li>• Patient has chronic cardiovascular disease and/or high blood pressure</li> <li>• Topical phenylephrine can cause blood pressure elevation. Use Phenylephrine 2.5% for all patients requiring pupil dilation for eye surgery. <b>DO NOT</b> use Phenylephrine 10%.</li> </ul> <p><b>Drug Interactions</b></p> <p>Tropicamide may interact with:</p> <ul style="list-style-type: none"> <li>• The antihypertensive action of carbachol</li> <li>• Pilocarpine or ophthalmic cholinesterase inhibitors</li> <li>• The gastromotility action of cisapride</li> </ul> <p>Phenylephrine may interact with:</p> <ul style="list-style-type: none"> <li>• Monoamine oxidase inhibitors (MAOI): There is an increased risk of adrenergic reactions when used simultaneously and within 3 weeks of stopping a MAOI</li> <li>• Tricyclic anti-depressants (TCA): The pressor response to adrenergic agents and the risk of cardiac arrhythmia may be potentiated in patients taking tricyclic anti-depressants and for a few days after stopping a TCA</li> <li>• Halothane &amp; other anaesthetic agents: Due to the increased risk of ventricular fibrillation, phenylephrine should be used with caution during general anaesthesia with anaesthetic agents which sensitise the myocardium to sympathomimetics</li> <li>• Cardiac glycosides or quinidine: There is an increased risk of arrhythmias if phenylephrine is used in patients taking cardiac glycosides or quinidine.</li> </ul> <p>Cyclopentolate may interact with:</p> <ul style="list-style-type: none"> <li>• Anticholinergics e.g. antihistamines, phenothiazines, tetracyclic/ TCAs, amantadine, quinidine, disopyramide, metoclopramide; carbachol; pilocarpine; ophthalmic anticholinesterases. The anticholinergic effects of other pharmaceuticals could be increased. Cyclopentolate may interfere with the anti-glaucoma effect of pilocarpine and carbachol</li> <li>• Parasympathomimetics e.g. physostigmine. The mydriatic effect of cyclopentolate is ended by using parasympathetic medications.</li> </ul>
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<p><b>Dose and Route*</b></p>	<p>Three doses of each prescribed eye drop administered over 30-60 minutes to achieve the therapeutic effect of appropriate dilation of pupils for eye surgery</p> <p><b>Wherever possible, start eye drop regime at least 45 minutes prior to surgery.</b></p> <p><b>Patients aged over 5 years and above:</b></p> <ul style="list-style-type: none"> <li>• <b>Step 1:</b> Administer into each eye(s) to be operated upon 1 drop of Phenylephrine 2.5% Wait 2 to 5 minutes</li> <li>• <b>Step 2:</b> Administer into each eye(s) to be operated upon 1 drop of Cyclopentolate 1.0% Wait 2 to 5 minutes</li> <li>• <b>Step 3:</b> Administer into each eye(s) to be operated upon 1 drop of Tropicamide 1%</li> <li>• <b>Step 4:</b> Wait 10 - 15 minutes, then repeat Step 1-3</li> <li>• <b>Step 5:</b> Wait 10 - 15 minutes, then repeat Step 1-3</li> </ul> <p>To reduce systemic absorption, compress the lacrimal sac at the medial canthus for a minute during and following the administration of each eye drop</p>
<p><b>Dose Frequency*</b></p>	<p>Three doses only of each eye drop to be given as per instructions in <i>Dose and Route</i> section above.</p> <p><b>IMPORTANT:</b> After 3 x doses and/or just before patient leaves Holding Bay for the Operating Theatre, check pupils - if inadequate pupil dilation, refer to the operating surgeon for further management and medication order.</p> <p><b>Check with operating surgeon if in any doubt.</b></p>
<p><b>Monitoring requirements*</b></p>	<p><b>Post-eye drop administration</b></p> <p>Check each patient for any clinical changes immediately, and then every 10 minutes for 50 minutes after initial eye drop administration, observing for any clinical deterioration and respond accordingly as per NT Health policy.</p> <p>Clinicians should be guided by normal observations of the pupil size ensuring they are adequately dilated and not constricting with light (use a pen torch to check).</p> <p>Eye drops are to be administered and recorded as per the relevant medication management document suite for the clinical area.</p>

<p><b>Health Professional Accreditation Requirements</b></p>	<p>Health professionals using this guideline must meet the requirements outlined by the NT Chief Health Officer:</p> <p><b>Orthoptists:</b></p> <ul style="list-style-type: none"> <li>• Be registered with the Australian Orthoptic Board with no conditions or undertakings which may limit delivery of clinical services directly to patients</li> <li>• Maintain continuing professional development related to skills and competencies including prescribed workplace competencies required for the delivery of medicines.</li> </ul> <p><b>Registered Nurses:</b></p> <ul style="list-style-type: none"> <li>• 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</li> <li>• Maintain continuing professional development related to skills and competencies required for the delivery of medicines.</li> <li>• Nurses adhering to this protocol must hold a Graduate Certificate in Ophthalmic Nursing or have completed an Eye Drop Instillation Competency as prescribed by the workplace and/or Ophthalmic Nurse Consultant or Educator.</li> </ul> <p><b>All health professionals following this protocol must:</b></p> <ul style="list-style-type: none"> <li>• Hold a current Basic Life Support Certificate or Provide First Aid Certificate and provide documentary evidence of the qualifications when required.</li> </ul>
<p><b>Documentation</b> <i>(including necessary information to the patient)</i></p>	<p>Patients who receive Phenylephrine, Cyclopentolate and Tropicamide eye drops must have this documented in their patient health record.</p> <p>The health professional administering the dilating eye drops must:</p> <ul style="list-style-type: none"> <li>• Complete all clinical documentation requirements as outlined by the Health Service</li> <li>• Document specific medication administered and strength and indicate they have been administered as per SSTP Eye Drops for Eye Dilation prior to eye surgery</li> <li>• Counsel the patient or carer:             <ul style="list-style-type: none"> <li>○ that the effect of dilating eye drops may last for several hours</li> <li>○ that enlarged pupils cause blurred vision and sensitivity to bright light; wearing dark glasses may help. Ability to judge distance may also be impaired. Do not drive or operate machinery while vision is impaired</li> <li>○ to seek medical attention if the eye becomes painful or red, or if vision deteriorates.</li> </ul> </li> </ul>

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<p><b>Related Documents</b></p>	<p>Current version of the electronic Australian Medicines Handbook July 2025 sections:</p> <ul style="list-style-type: none"> <li>• Tropicamide</li> <li>• Phenylephrine (eye)</li> <li>• Cyclopentolate</li> </ul> <p>Hand Hygiene NT Health Guideline:  <a href="http://internal.health.nt.gov.au/pgc/dm/Documents/CSI/CEPS/Infection%20Control/Hand%20Hygiene%20NT%20Health%20Guideline.DOCX">http://internal.health.nt.gov.au/pgc/dm/Documents/CSI/CEPS/Infection%20Control/Hand%20Hygiene%20NT%20Health%20Guideline.DOCX</a>. Review date 20 October 2025</p> <p>MIMS Medicines Information Full product information Minims Phenylephrine Hydrochloride Eye Drops. Review date 01 March 2021</p> <p>MIMS Medicines Information Full Product Information Minims Cyclopentolate Eye Drops. Review date 28 April 2021</p> <p>MIMS Medicines Information Full product information Minims Tropicamide Eye Drops. Review date 1 July 2020</p> <p>Medication Management Central Australia and Barkly Region. Review date 23 June 2025 <a href="http://internal.health.nt.gov.au/pgc/dm/Documents/CAHS/Alice Springs Hospital/Pharmacy/Medication Management CA and Barkly Region Procedure.DOCX">http://internal.health.nt.gov.au/pgc/dm/Documents/CAHS/Alice Springs Hospital/Pharmacy/Medication Management CA and Barkly Region Procedure.DOCX</a></p> <p>Physiological Deterioration Patient Recognition and Management NT Health Policy. Review date 26/06/2028  <a href="http://internal.health.nt.gov.au/pgc/dm/Documents/CHO/Physiological Deterioration Patient Recognition and Management NT Health Policy.docx">http://internal.health.nt.gov.au/pgc/dm/Documents/CHO/Physiological Deterioration Patient Recognition and Management NT Health Policy.docx</a></p> <p>Local Eye Induction Training package</p>		
<p><b>Chief Health Officer</b></p>	<p><b>Name</b></p>	<p><b>Title</b></p>	<p><b>Date</b></p>
	<p>Paul Burgess</p>	<p>Chief Health Officer</p>	<p>18/02/2026</p>
	<p><b>Signature EDOC2026/42261</b></p>		
<p><b>Period of effect</b></p>	<p>This SSTP remains in force until 18/02/2028 unless revoked earlier</p>		
<p><b>References:</b></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>			