

Northern Territory of Australia

Medicines, Poisons and Therapeutic Goods Act 2012

**Intravenous Hydrocortisone for Management of Hypersensitivity Reactions
Scheduled Substance Treatment Protocol (SSTP)
Revocation and Approval**

I, Christine Maree Connors, 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 8 October 2024

Chief Health Officer

Schedule A

Title	Publication Date	Author
Intravenous Hydrocortisone for Management of Hypersensitivity Reactions Scheduled Substance Treatment Protocol (SSTP)	02/10/2024	Medicines Management Team, Northern Territory Government, Department of Health

Intravenous Hydrocortisone for Management of Hypersensitivity Reactions Scheduled Substance Treatment Protocol (SSTP)

Areas Applicable	Adult patients at Alan Walker Cancer Care Centre (Darwin), Katherine Medical Day Stay Unit (KDH) and Alice Springs Hospital (ASH) Day Infusions Unit
Health Professionals authorised by this SSTP	Chemotherapy accredited Registered Nurses administering antineoplastic medications working at; Alan Walker Cancer Care Centre, KDH Medical Day Stay Unit and ASH Day Stay Unit
Scheduled Substance(s)	Hydrocortisone 100mg Injection
Indication	Management of suspected hypersensitivity reactions in patients receiving chemotherapy at the Alan Walker Cancer Care Centre, KDH Medical Day Stay Unit or the ASH Day Stay Unit according to the Management of Suspected Hypersensitivity Reactions Flowchart
Contraindications and/or Exclusions*	Systemic fungal infections; known hypersensitivity to components Co-administration of live or live attenuated vaccines Not for use in patients treated on inpatient wards
Dose and Route*	100mg as Intravenous injection
Administration	Inject over 30 seconds
Dose Frequency*	Single dose
Drug Interactions*	Oral contraceptives may increase plasma levels of hydrocortisone Drugs that induce hepatic enzymes such as phenobarbitone, phenytoin and rifampicin may increase the clearance of corticosteroids Drugs such as ketoconazole may decrease clearance of corticosteroids Corticosteroids may increase the clearance of chronic high dose aspirin
Monitoring requirements*	Vital signs every 15 minutes until return to baseline

Intravenous Hydrocortisone for Management of Hypersensitivity Reactions Scheduled Substance
Treatment Protocol (SSTP)

Health Professional Accreditation Requirements	Chemotherapy accredited Registered Nurse working at Alan Walker Cancer Care Centre, KDH Medical Day Stay Unit or ASH Day Infusions Unit 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 <i>(including necessary information to the patient)</i>	Patients who receive hydrocortisone per the SSTP must have this documented on a national inpatient medication chart (NIMC) and a 'reaction' QCL generated in Mosaiq. This must also be documented in their progress notes on Mosaiq/ACACIA and in RISKMAN, detailing the type of reaction and symptoms.		
Related Documents	Management of Suspected Hypersensitivity (infusion) Reactions to Antineoplastic Medicines NT Health Guideline		
Chief Health Officer	Signature	Name	Date
	EDOC2024/283147	Adj Prof Christine Connors	08/10/2024
Period of effect	This SSTP is in effect until 08/10/2026 unless revoked earlier		
References: * 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			