RPHCM Corrections and updates to content or formatting see: https://remotephcmanuals.com.au/corrections-and-practice-alerts.html

		Manual		April 2024	
No	Protocol	and page	Content	Clarification or correction	
	Alcohol withdrawal Table 5.4 Modified Clinical Institute Withdrawal Assessment (CIWA)	STM 281	Multiple errors due to transposed formatting	Please see RPHCM website for a printout of corrected version of the table (can be cut out and glued over current table)	
	Anaemia (weak blood) in children and youth Oral iron supplementation	STM 178	Iron doses throughout protocol	Clarification: Iron doses throughout protocol are expressed as elemental iron	
	Antibiotic doses table Benzathine benzylpenicillin (Bicillin L-A)	STM 502 WBM 365	Benzathine benzylpenicillin for Chickenpox, Skin sores, Sore throat Note: Comment re paediatrician consult belongs in the RHD row	Correction: Benzathine benzylpenicillin for RHD For child less than 10kg paediatrician consult for secondary prophylaxis regimen	
	Antibiotic doses table Pyrantel dose	STM 509 WBM 372	Pyrantel dose for 10yrs or 32kg patient 320mg or 3 sq or 3½ tab – 125mg (tablet dose incorrect)	Correction: Pyrantel dose for 10yrs or 32kg patient 320mg or 3 sq or 2½ tab – 125mg	
	Assessing and reducing cardiovascular risk Table 4.5 HIGH cardiovascular risk (if one or more present)	STM 231	Chronic kidney disease with eGFR less than 45 or urine ACR more than 25 in males or more than 35 in females (decimal points missing)	Correction: Chronic kidney disease with eGFR less than 45 or urine ACR more than 2.5 in males or 3.5 in females	
	Ear and hearing problems Otoscopy examination	STM 395	Do not syringe if any pain or any holes in ear drum	Correction: Do not syringe if painful	
	Ear and hearing problems Chronic suppurative otitis media (CSOM)	STM 401	(DO) Clean until ear drum visible using tissue spears	Correction: (DO) Clean until ear drum visible using tissue spears or syringe with dilute betadine (1:20). Syringing should be done first if the pus is thick or if eardrum cannot be seen (adapted from 2020 OTITIS MEDIA guidelines for Aboriginal and Torres	
	Early recognition of sepsis Obstetric REWS Table	STM 3 WBM 15	Obstetric REWS score of 3 for RR is 9 or less	Strait Islander Children) Correction: Obstetric REWS score of 3 RR is 8 or less (Note: the versions in 'Printable resources' have been updated)	
	Early recognition of sepsis STM Flowchart 1.1 WBM Flowchart 1.2	STM 7 WBM 19	Confusing detail in flowchart under the REWS score 3 or more box	Please see RPHCM website for a printout of corrected version of the flowchart	

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No	Protocol	Manual and page	Content	Clarification or correction
	Hypertension (High BP) Table 4.17: BP result and action if not already on a BP management plan	STM 259	Table 4.17 has incorrect cross references to Tables 4.1 and 4.20	All cross references to other tables should be to: Table 4.18 Management of high BP by cardiovascular risk (located below Table 4.17)
	Pain management (acute) Pain medicines - Paracetamol	STM 327	Double dose can be given at night — then no more for next 8 hours	Instruction applies to children only and should more specifically say: A single dose of 30mg/kg may be used for nighttime dosing
	Pain management (acute) Table 7.4 Acute pain relief (Adult)	STM 331	Intramuscular (IM) morphine doses not included in table.	Morphine doses IM Under 39 years AND over 50kg 7.5–12.5mg 40–59 years — 5–10mg 60–69 years — 2.5–7.5mg 70–85 years — 2.5–5mg Over 85 years — 2–3mg Every 2 hours as needed Please see RPHCM website for a printout of the doses which can be glued under Table 7.4
	Resuscitation reference table Amiodarone	STM 36 WBM 6	Undiluted <i>After</i> 3rd shock. Slow IV push <i>THEN</i> 20mL normal saline flush.	Correction: Undiluted After 3rd shock. Slow IV push THEN 20mL flush with glucose 5%
	Worms Table 7.39 Worm treatment if positive faeces or serology test	STM 496	Threadworm or pin worm Pyrantel dose: Oral once a day for 3 days Repeat dose in 2 weeks	Pyrantel dose should be: Oral single dose Repeat dose in 2 weeks (see p509 for doses)

RPHCM Changes to practice

Changes in practice since the printing of the 2022 edition of the RPHCM

No	Protocol affected by change in practice	Manual and page	Content	Update
	STI management Gonorrhoea Geographical treatment areas for gonorrhoea have changed since publication of manuals. STM Table 6.1 WBM Tables 5.3, 5.5	STM 311 WBM 256, 265	Penicillin SENSITIVE • All of the NT outside of Darwin • The Kimberley, Goldfields, Midwest and Pilbara regions of WA Penicillin RESISTANT • Darwin • All other areas except those mentioned above	 Updated geographical areas: Penicillin SENSITIVE The Kimberley, Goldfields, Midwest and Pilbara regions of WA Penicillin RESISTANT All of the NT All other areas except those mentioned above

Please note:

- These updates address the increased cases of penicillin-resistant gonorrhoea in the NT. Please see the NT Centre for Disease Control notification for more information:
 https://health.nt.gov.au/ data/assets/pdf file/0008/1356146/health-alert-ppng-240311.pdf
- Please see RPHCM website to print out an updated 'Geographical treatment areas for gonorrhoea' table