



Supplementary information: Treatment of syphilis by registered nurses, midwives and Aboriginal health practitioners

The Structured Administration and Supply Arrangements (SASAs) enable registered nurses, midwives and Aboriginal health practitioners to administer treatment for syphilis infection in confirmed and/or symptomatic cases and sexual contacts of confirmed cases.

Treatment conditions

For practitioners treating patients for syphilis under the SASA, the following treatment conditions must be noted and observed:

- a. Evidence that the current syphilis infection has not been previously treated is obtained by patient-history taking and/or referring to the patient's previous syphilis tests and/or seeking information from the local Public Health Unit or Communicable Disease Control Directorate, WA Department of Health.
- b. Venous blood **must** be taken for syphilis serology testing in a laboratory on the same day as the treatment is administered.
- c. Advice and approval from a medical practitioner is obtained prior to administering treatment to patients who are pregnant or co-infected with human immunodeficiency virus (HIV).
- d. Cases suspected as being late latent or tertiary syphilis are referred to a medical practitioner for on-going, individual management after the first dose of benzathine benzylpenicillin has been administered.

Treatment notes

- Patients with a known allergy to penicillin must not be treated under this SASA. Patients with a known allergy to penicillin should be referred to a medical practitioner for treatment and management.
- Jarisch-Herxheimer reaction is a common reaction to treatment in patients with primary and secondary syphilis. Patients should be alerted to the possibility of this reaction and reassured accordingly.
- For management of any reported adverse events - seek further advice from a medical practitioner.

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