



Structured Administration and Supply Arrangement (SASA)

TITLE: **Treatment of Syphilis Infection by Midwives**

1. Authority:

Issued by the Chief Executive Officer of Health under Part 6 of the Medicines and Poisons Regulations 2016.

2. Scope:

This authorises Midwives working in a program providing antenatal healthcare to administer antibiotics, for the treatment of syphilis.

3. Criteria:

This SASA authorises the actions specified in the table below.

Practitioner:	Midwives, with general registration, who have completed approved training in accordance with Appendix 1.
Practice setting:	Programs providing antenatal healthcare, which are operated or managed by WA Health or by a health service that is a member of the Aboriginal Health Council of Western Australia. All regions of WA.
Approved activity:	Administration – single dose.
Approved medicines:	Benzathine benzylpenicillin 1.8 gram (2,400,000 units) intramuscular injection Note: 900 mg benzathine benzylpenicillin = 1,200,000 units = 1016.6 mg benzathine benzylpenicillin tetrahydrate
Medical conditions:	Adults and mature minors (14 years and older), who are being treated by the program providing antenatal healthcare, with syphilis infection that is not known to have been previously treated: <ul style="list-style-type: none">• cases confirmed by laboratory or point of care testing;• empirical treatment of symptomatic cases; and• sexual contacts of confirmed cases, only if they are also a patient of the antenatal program.¹

¹ All other asymptomatic sexual contacts of confirmed cases should be referred to a Public Health clinic or their General Practitioner.

4. Conditions:

The administration or supply of approved medicines under this SASA is subject to the conditions that:

- a. Patient selection, administration, follow-up care and notification is in accordance with the *Guidelines for managing sexually transmissible infections and blood-borne viruses* ("The Silver Book");
- b. Administration is not repeated for the same instance of the condition, without the direction of a medical practitioner, credentialed for a public health STI program by a Health Service Provider of the WA Health system, or contracted entity;
- c. The medicines are procured by an authorised person or an appropriate Medicines and Poisons Permit holder;
- d. Procurement and storage of the approved medicines is in accordance with Part 9 of the Medicines and Poisons Regulations 2016;
- e. Record keeping of administration is in accordance with Part 12 of the Medicines and Poisons Regulations 2016;
- f. Laboratory confirmed diagnosis of syphilis must be notified to the Director, Communicable Disease Control Directorate, Department of Health, by post, telephone or facsimile, preferably within 24 hours; and
- g. Notification must comply with the approved procedure for notification of communicable diseases and be in an approved format.

5. References:

- a. *Guidelines for managing sexually transmissible infections and blood-borne viruses*. Available at: <http://ww2.health.wa.gov.au/Silver-book>
- b. Communicable Disease Control Directorate. *Notification of Communicable Diseases*. Available at: <http://ww2.health.wa.gov.au/Silver-book/STI-or-HIV-notification>

6. Issued by:

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Position:	Chief Health Officer
Date:	2 September 2025

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APPENDIX 1

Approved Training

All Registered Midwives administering a medicine in accordance with this SASA must have successfully completed a course of training approved by the Chief Executive Officer of the Department of Health, or an equivalent course provided by a Registered Training Organisation or a university and must maintain their competency through updates and/or completion of training every two years.

Approved courses must require participants to demonstrate satisfactory knowledge, understanding and minimum competencies in the following areas:

- a. Sexual health history taking;
- b. Sexual health and STI clinical assessment;
- c. Pathology testing, including request and collecting samples;
- d. Contraindications and adverse effects of benzathine benzylpenicillin;
- e. STI health promotion and education;
- f. STI contact tracing;
- g. Communicable disease notification and referral; and
- h. Reporting of suspected child sexual abuse.