

Adult Primary Care (APC) 2023

Summary of changes



The following tables detail the content changes made to Adult Primary Care (APC) 2023.

New pages

Page name	Page	Details
Observation post vaccination	12	This page will assist the clinician to observe a patient after receiving a vaccination, especially COVID-19 vaccine.
Collapse following vaccination	13	This page provides guidance on how to observe for and manage problems following a vaccination.
Cholera	47	This page provides guidance on how to assess and manage the patient in a cholera outbreak area, based on the most recent NICD guidance.
Chronic pain	61	This new page provides a more holistic approach to assessing and managing chronic pain.
Skin ulcer or non-healing wound: routine care	75,76, 77	This new section provides more detailed guidance on how to identify ulcers/non-healing wounds and assess and manage them appropriately.
Prevent HIV: pre-exposure prophylaxis (PrEP)	89, 90	This new section provides guidance on how to assess the need for, advise on and administer HIV pre-exposure prophylaxis.
Assess and manage TB infection	93, 94	These new pages have been developed to reflect the new SA National Guidelines on the Treatment of Latent TB Infection, and the TB Testing and Screening guidelines, 2023. These pages help clinicians to determine when to give TB preventive treatment (TPT) and what regimen to choose. Focus is on those with significant exposures to TB (including inmates) and those at high risk of getting TB (HIV positive, HIV positive pregnant women, immunocompromised, recent TB in past 2 years, those with silicosis).
CVD risk: diagnosis if cholesterol not available	126	The page has a BMI-based chart that allows the clinician to calculate a patient's 10-year CVD-risk if no cholesterol result is available.
Pregnancy diagnosis	155	A new page has been developed to assist the clinician to diagnose or exclude pregnancy in women of child-bearing potential. This align with National Clinical contraception guideline 'pregnancy checklist' and supports the clinician to know when it is appropriate to do a pregnancy test. This page is particularly relevant for clinicians when starting patients on contraception. It supports rationale use of resources.
Prevent communicable infections in the newborn	167	This page aims to assist the clinician to assist and manage the newborn exposed to TB, hepatitis B and syphilis. This page aligns with the NDOH: Guideline for Vertical Transmission Prevention of Communicable Infections 2023 (June 2023 Draft 4) and the PHC Standard Treatment Guidelines and Essential Medicine List 2020.
Support the patient taking chronic medication	168	This page will assist the clinician to assess and support poor adherence in patients with long-term health conditions, such as HIV, TB, epilepsy, diabetes and hypertension.

New pages relating to COVID-19 clinical content

Page name	Page	Details
Screen all patients for COVID-19 and TB	8	New page adapted from the TB testing and Screening guidelines, providing an approach to actively identify cases of COVID-19 and TB.
COVID-19 diagnosis	40	New page adapted from the APC COVID-19 clinical tool. Explains how to diagnose COVID-19 and identifies patients that qualify for COVID-19 testing.

Acute COVID-19	41	New page adapted from the APC COVID-19 clinical tool. Provides guidance on how to assess, advise and treat a patient with COVID-19.
Ongoing COVID-19 symptoms	42	New page adapted from the APC COVID-19 clinical tool. Provides guidance on the management of the patient with COVID-19 whose symptoms have persisted for more than 10 days.
Long COVID: routine care	121	New page adapted from the APC COVID-19 clinical tool. Provides an approach to the patient previously diagnosed with COVID-19 whose symptoms have continued for 2 months or more.

Changes that have been integrated throughout guide

Change	Details
COVID-19 symptom integration and COVID-19 vaccination prompts	COVID-19 related symptoms and vaccination prompts have been integrated in the following relevant pages: screen all patients for COVID-19 and TB, initial assessment, address the patient's general health, fever, weakness or tiredness, headache, nose symptoms, mouth and throat symptoms, cough or difficulty breathing, TB, HIV routine care, asthma/COPD routine care, diabetes routine care, hypertension routine care, heart failure routine care, IHD routine care, stroke routine care, pregnancy routine antenatal care.
Ceftriaxone dosing	Caution added to the likely meningitis treatment ...'ceftriaxone 2g IM' – avoid injecting > 1g ceftriaxone into one injection site.
Aqueous cream and emulsifying ointment	UEA and UE added to text.
Paracetamol dosing	Further detail to paracetamol dosing has been added: previously was give paracetamol 1g 6 hourly, as needed for up to 5 days. Updated to read: give paracetamol 1g 4-6 hourly (up to 4g in 24 hours) as needed for up to 5 days. This will allow more frequent dosing during waking hours for patients with pain and aligns with the PHC STG, 2020.
Syphilis testing	Clarifies the role rapid fingerprick syphilis testing plays in syphilis management. The rapid test is the initial recommended test in the absence of which the RPR test may be conducted.
Simvastatin	<ul style="list-style-type: none"> • Dosage in drug-interaction with amlodipine adjusted. • Dosage in statin-associated myalgia adjusted. • Dosing updated to recommend giving medication at night.
Influenza vaccination	<ul style="list-style-type: none"> • Prompts integrated in chronic conditions sections.
Abbreviation for intrauterine device	<ul style="list-style-type: none"> • The abbreviation for 'Intrauterine device' has been standardised to 'IUD' to accommodate to addition of a new IUD called LNG-IUD (Levonorgestrel IUD, as known as the Mirena). • Previously only the Intrauterine contraceptive copper device (IUCD) was available.
Spelling of cephalexin and cefalexin	<ul style="list-style-type: none"> • Spelling of cephalexin has changed to align with the spelling of cefalexin in the PHC STG, 2020.
Updated terminology	<ul style="list-style-type: none"> • New additions to the glossary and relevant pages: <ul style="list-style-type: none"> - EDR.web, EGK, EX-PUP, FAC-PUP, RPCs, TIER.net, TLD, TB NAAT, VTP • Removed from glossary and relevant pages: <ul style="list-style-type: none"> - FTA, LPA, PMTCT, RF, RDT-Tp, TPAAb, TPHA, TPPA • Updated terms in glossary and relevant page: <ul style="list-style-type: none"> - TPT: TB preventive <i>therapy</i> changed to TB preventive <i>treatment</i> to align with the SA National Guidelines on the Treatment of Latent TB Infection, published in February 2023.
Update from GeneXpert MTB/RIF Ultra to TB NAAT	This has been updated throughout the guide.
Update from LPA to DST	This has been updated throughout the guide.
TB contact definition	This definition has been revised to align with the SA National Guidelines on the Treatment of Latent TB Infection, and the TB Testing and Screening guidelines, 2023.

Changes to individual pages

Page name	Page	Details
Preface	2,3	The preface has been split into two pages: <ul style="list-style-type: none"> The first page explains what APC is, and how to use it on the first page. The second page list the latest National clinical guidelines with which this version of APC is aligned, provides a list of the main changes to the clinical tool and indicates content that is likely to change soon.
Contents: Symptoms	4	<ul style="list-style-type: none"> Cholera and tasting difficulty added Wounds divided into acute and chronic
Content: Chronic Conditions	5	<ul style="list-style-type: none"> 'Pregnancy' replaces 'The pregnant patient' 'Chronic diseases of lifestyle' replaced by 'cardiometabolic conditions'
Glossary	6	Please see under "Updated terminology".
Prescribe rationally	7	MedSafety App QR code and ADR reporting website added. Fax numbers removed.
Initial assessment of the patient	9	<ul style="list-style-type: none"> Oxygen saturation added to criteria for prompt referral to nurse/doctor. Backache removed for the pregnant patient in the red box. To test for HIV and syphilis at every visit if pregnant.
Address the patient's general health	10,11	<ul style="list-style-type: none"> Assess the need for TB preventive treatment (TPT) has been included. Breast self-awareness section and image added to increase breast cancer awareness. COVID-19 vaccination/booster prompts added.
Observation post vaccination	12	New-page – see notes above.
Collapse following vaccination	13	New-page – see notes above.
The emergency patient	14	Treatment of bradycardia included - IV atropine added.
Decreased consciousness	16	Management of organophosphate poisoning revised to align with STG/EML PHC 2020.
Bites and stings	22	Description, likely diagnosis and treatment of papular urticaria and included.
Weight loss	23	Asking about other symptoms and medications included.
Fever	24	Threshold for testing for TB is lower and a 2-week duration of fever is no longer required to test for TB.
Weakness or tiredness	26	<ul style="list-style-type: none"> Red box symptoms expanded. Further guidance added according to whether muscle weakness is present and duration of symptoms.
Pallor and anaemia	27	Alternative weekly dosing of iron (ferrous sulphate) included for patients not tolerating iron replacement - aligns with STG/EML PHC 2020.
Headache	30	<ul style="list-style-type: none"> Design of page has been simplified. Prompt to consider COVID-19 has been added. Influenza likely diagnosis and management has been broadened to include other acute viral infection like COVID-19 with generic infection prevention measures included.
Eye/vision problems	31	<ul style="list-style-type: none"> Local anaesthetic eye drops added to management of chemical burns and foreign body in the eye. Atropine 1% eye drops, and chloramphenicol ointment management added for deep corneal/scleral injuries. Olopatidine 0.1% added for allergic conjunctivitis as per circular 2023/06/01/EDP/01 replacing sodium cromoglycate 2%.
Face symptoms	32	Management of angioedema revised to align with PHC STG/EML 2020.
Nose symptoms	34	<ul style="list-style-type: none"> Acute viral infection, incorporating COVID-19 infection has been added to this page. Upper airway cough syndrome (postnasal drip) has also been added to this page. Persistent snoring (likely obstructive sleep apnoea) has been moved to the difficulty breathing page.
Mouth/Throat symptoms	35	COVID-19 has been integrated into this page.

Page name	Page	Details
Chest pain	37	<ul style="list-style-type: none"> Criteria for giving ceftriaxone in the red box expanded to include pain on breathing deeply and coughing sputum. Lung infection removed. COVID-19 incorporated.
Cough or difficulty breathing	38	<ul style="list-style-type: none"> Acute viral infection (i.e., COVID-19 has been incorporated into this page). Exertional dyspnoea has been added as a bullet in the red box. Acute bronchitis now falls under acute viral infection likely. TB testing for all patients with current cough has been integrated. Nose symptoms as an underlying cause of chronic cough has been moved up in the algorithm. Design of page has altered to accommodate information better.
Breast symptoms	43	<ul style="list-style-type: none"> Further detail added to breast symptoms referrals in the form of sending patients to adequately equipped Regional Breast Units. Age of referral for unilateral breast lump reduced to 25 years.
Nausea/vomiting	45	<ul style="list-style-type: none"> Prompt added to red box for cholera likely.
Diarrhoea	46	<ul style="list-style-type: none"> Prompts added to red box and in algorithm for cholera likely. Cholera management removed from this page. COVID prompt added as a differential for those with fever and cough/sore throat.
Cholera	47	See under new pages.
Constipation and Anal symptoms	48	<ul style="list-style-type: none"> A bullet has been added prompting the user to ask about anal sex, screen for anal symptoms related to sexually transmitted proctitis along with its treatment.
Genital symptoms	49	<ul style="list-style-type: none"> The genital section has been updated to align with the latest NDOH STI guidelines, 2021-2025. This page now includes a prompt to consider the need for PrEP. Includes reference to anal symptoms.
Positive syphilis result	53	<ul style="list-style-type: none"> TPAb removed and replaced with 'Lab-based specific syphilis test'. Algorithm adjusted to align more closely with the NDOH: Guideline for Vertical Transmission Prevention of Communicable Infections 2023 (June 2023 Draft 4).
Cervical screening	55	<ul style="list-style-type: none"> Indications for deciding when the patient needs a cervical screen re-designed to make easier to read. Prompt to consider PrEP in HIV-negative patient added.
Abnormal vaginal bleeding	57	<ul style="list-style-type: none"> Age criteria removed as a decision node. Management for IUD and others split.
Urinary symptoms	59	<ul style="list-style-type: none"> Treatment recommendation updated to include gentamycin, fosomycin for UTIs. Prompt to change catheter if complicated UTI likely added.
Body/general pain	60	COVID-19 and other acute viral infections incorporated.
Chronic pain	61	New-page – see notes above.
Joint symptoms	61	Methyl salicylate ointment topical treatment added to uncomplicated cases.
Back pain	62	Additional advice/explanation for mechanical back pain added.
Arm or hand symptoms	64	Prompt added to refer to doctor if no better/worsens after 6 weeks for carpal tunnel syndrome instead of immediate referral.
Leg symptoms	65	<ul style="list-style-type: none"> Simvastatin dose adjustment updated. Further advise and NSAID option added to management of likely sciatic nerve irritation.
Foot symptoms	66	<ul style="list-style-type: none"> Thiamine treatment added for peripheral neuropathy secondary to alcohol. Dosing pf pyridoxine adjusted to align with STG from a daily dose to 8 hourly dosing. Ibuprofen removed as treatment option for bunion.
Skin symptoms	67	Meningococcal meningitis prophylaxis for close household contacts added.
Painful skin	68	<ul style="list-style-type: none"> New image for erysipelas added. Tramadol increase to 100mg 6 hourly added for herpes zoster.

Page name	Page	Details
Localised itchy rash	70	Clotrimazole treatment duration for tinea pedis: continue for at least 4 weeks added.
Itch with no rash	71	The term ichthyosis was added to xeroderma as another term for dry skin.
Drug rash	73	Description, likely diagnosis and treatment of Fixed Drug Reaction included to align with the PHC STG/EML, 2020.
Skin lump/s	74	Petroleum jelly added: to apply to surrounding skin when using salicylic acid.
Skin ulcer/s	75,76, 77	This page is now called "Skin ulcer or non-healing wound: diagnosis" and articulates with 2 new pages outlining the routine care of skin ulcers and non-healing wounds.
Crusts or flaky skin	78	Eczema management taken off this page (to manage on page 69).
Hair loss	81	No improvement of generalised hair loss expanded to 12 months after cause treated/resolved.
Self-harm or suicide	82	<ul style="list-style-type: none"> • Dosing and indications of activated charcoal updated. • Treatment for paracetamol overdose in event of delayed referral (N-acetylcysteine) added.
Aggressive/disruptive patient	84	Haloperidol changed from 2 to 2.5mg IM if > 65 years.
Low mood, stress or anxiety	86	Tautologous screen for PTSD removed.
Difficulty sleeping	87	Obstructive sleep apnoea included in screening question.
Traumatised/abused patient	88	<ul style="list-style-type: none"> • Further referral criteria added to the red box. • Further Emergency contraception information added to the red box. • Tetanus toxoid added to the red box.
Assess and manage TB infection	89, 90	New page - see note above.
How to collect a good TB sputum specimen for TB testing	91	<ul style="list-style-type: none"> • Additional guidance has been added regarding inducing sputum in adult. • Additional guidance provided for instances when the sputum specimen provided is inadequate.
TB diagnosis	92, 93,	<ul style="list-style-type: none"> • The name used for TB tests has been changed from 'Xpert Ultra' to 'TB NAAT' (NAAT = nucleic acid amplification test and includes Xpert as well as newer TB tests). • TB diagnosis pages have been re-worked to better reflect guidance and algorithm in the TB testing and screening guidelines (2022) – using the latest sensitive diagnostic tests for TB (TB NAAT), it is important to base interpretation of positive results on factors like previous TB history, clinical picture and chest x-ray findings. • Indications for TB testing have broadened significantly and are now listed at the top of the page. • Prompt added to try inducing sputum if patient is unable to produce sputum. • CD4 count threshold for LAM updated: old recommendation was CD4 < 100; new recommendation is CD4 < 200 or WHO clinical stage 3 or 4 • The clinical and radiological approach to TB diagnosis has been reworked extensively and the chest x-ray images have been removed.

Page name	Page	Details
DS and INH mono-resistant TB: routine care	94, 95, 96, 97, 98	<ul style="list-style-type: none"> • The Assess rows have been organised to reflect actions for diagnosis, at every visit etc. • Palliative care considerations were updated. • 24 week culture and DST assessment added. • HIV test updated from 6 to 3 months since last test. • For INH mono-resistant TB treatment: medications and dosing has been clarified and dose of pyridoxine increased from 25mg daily to 50mg daily (as per RR-TB clinical guidelines). • DS-TB doses lower limit weight updated from 30 to 25kg. • COVID-19 vaccination prompt added. • Information on RPCs added. • If already on TB treatment and starting/restarting ART added. • Smear positive at week 11 guidance adjusted. • Drug-resistant TB unit changed to drug-resistant TB initiation facility. • Interrupted TB treatment ≥ 2 months: treatment default changed to loss to follow up
RR-TB routine care	99, 100, 101, 102, 103, 104, 105	<ul style="list-style-type: none"> • Stamp added with following prompt: "If pretomanid available, consult the updated 'Clinical Management of RR-TB, September 2023' guideline to start patient on new short 6-mth BPaLL (or BPaL if pre-XDR) regimen. • Guidance on treatment of ECG abnormalities expanded. • Dose of levothyroxine has been aligned to STG/EML: starting dose has been increased from 50mcg to 100mcg. • Magnesium treatment level changed from 0.7 to 0.6. • Treat the patient with RR-TB and HIV has been expanded. • How to start/adjust RR-TB treatment has been revised, including terminology: shorter, basic longer and individualised longer regimens. • Decide on treatment outcome added. • Look for and manage RR-TB side-effects expanded to include low mood and anxiety.
Prevent HIV: pre-exposure prophylaxis (PrEP)	106, 107	<ul style="list-style-type: none"> • New pages added to the HIV section – see notes above.
Exposed to infectious fluid: post-exposure prophylaxis (PEP)	108, 109	<ul style="list-style-type: none"> • PEP moved to the HIV section. • First choice of PEP updated to TLD. • Hepatitis C antibody not only in occupational exposure, but from all sources if possible. • If source HBsAg negative, exposed patient with HBsAb titre < 10 to receive hepatitis vaccine series. • Recommendations to confirm with HIV ELISA removed to align with new 2023 National HIV Testing Services Policy, April 2023. (PrEP and PEP Directorate) • 2 week follow up of creatinine for those TDF removed in to align with 2023 ART guideline. (PrEP and PEP Directorate) • 6-week follow up changed to 4-week follow up in effort to transition those at risk to PrEP sooner (PrEP and PEP Directorate)
HIV: diagnosis	110	<ul style="list-style-type: none"> • Algorithm updated to align with new 2023 National HIV Testing Services Policy, April 2023. • If consent granted added. • Window period, PrEP prompt and male circumcision added to high risk HIV negative patient category.

Page name	Page	Details
HIV routine care section	111, 112, 113, 114, 115, 116, 117, 118, 119	<ul style="list-style-type: none"> • HIV diagnosis page includes a prompt to consider PrEP. • This section was updated to align with the: <ul style="list-style-type: none"> - 2023 ART Clinical Guidelines for the Management of HIV in Adults, Pregnancy and breastfeeding, Adolescents, Children, Infants and Neonates. - 2022 STG, HIV Chapter 11 STG/EML update. • The main changes include: <ul style="list-style-type: none"> - Emphasis on transitioning all patients on ART (1st and 2nd line) to TLD, including women of childbearing age and those pregnant and breastfeeding. - The emphasis of viral load monitoring is more on identifying and addressing adherence issues, rather than needing a suppressed viral load to switch ART. - The number of clinic visits have been reduced and repeat prescription collection strategies have been integrated to make it easier and quicker for ART patients to get their medicines. - The blood monitoring schedule has been adjusted to check VL at 3 months, then 10 months if the results at the 4-month visit are good, as the patient will receive a 6-month prescription. Yearly VL is still done. Routine ALT monitoring on TB treatment no longer recommended unless symptoms develop. - New TB screening and testing and treatment of latent TB infection (TB preventive treatment) recommendations have been integrated into this section (like testing for TB at HIV diagnosis, yearly with viral load and if symptoms). - ART medication interactions have been expanded.
Hepatitis B	120	<p>This page has been updated to align with the 2019 NDOH Viral Hepatitis guidelines:</p> <ul style="list-style-type: none"> • Includes testing pregnant women at booking visit. • Expanded criteria for hepatitis B vaccine eligibility. • Prompt to discuss management of the HIV negative, hepatitis B positive mother with a specialist.
Asthma routine care	123, 124, 125	<ul style="list-style-type: none"> • Prompt for COVID-19 vaccination added. • Choice of inhaled corticosteroids updated to align with STG, 2020 – beclomethasone replaces budesonide inhalers.
COPD: routine care	126	<ul style="list-style-type: none"> • Prompt for COVID-19 vaccination added. • Prompt for when to consider home oxygen therapy added.
CVD risk: diagnosis	127, 128	As the web-based CVD risk calculator that used BMI instead of cholesterol is no longer available, a new APC page has been included with a BMI-based chart to calculate CVD-risk if no cholesterol result is available.
CVD risk: routine care	129	Prompt to reduce simvastatin dose if on amlodipine updated from 20mg to 10mg and to reduce to 10mg if muscle cramps.
Diabetes: routine care	130, 131	<ul style="list-style-type: none"> • Recommendations for patients with renal impairment updated: <ul style="list-style-type: none"> - eGFR 3-6 monthly added if eGFR < 60 - Metformin dosing adjusted if eGFR 30-45 • Dose of glimepiride aligned to STG, 2020. Weekly increase interval updated. • Prompt to give basal insulin at bedtime before 22h00 added. • Further guidance on monitoring glucose at home has been provided.
Hypertension: diagnosis	132	<ul style="list-style-type: none"> • Further detail added to the top box on how to correctly take BP readings. • Referral thresholds for BP with symptoms requiring referral adjusted to $\geq 180/110$. • Further detail provided to define hypertensive emergency (BP $\geq 180/130$). • Clarifications added around only SBP or DBP falling into different criteria/categories. • Mild, moderate and severe hypertension categories added.

Page name	Page	Details
Hypertension: routine care	133, 134	<ul style="list-style-type: none"> Family planning heading changed to Pregnancy Dosing times for enalapril, amlodipine and simvastatin updated to be given at night in line with STG, 2020. Mild, moderate and severe hypertension categories added. Target BP threshold simplified to one target for all ages. COVID-19 vaccination prompt added.
Heart failure: routine care	135	COVID-19 vaccination prompt added.
Stroke: routine care	136	COVID-19 and influenza vaccination prompts added.
Ischaemic heart disease (IHD): initial assessment	137	Prescriber level for medications changed and medications rearranged.
Ischaemic heart disease (IHD): routine care	138	<ul style="list-style-type: none"> COVID-19 and influenza vaccination prompts added. Maximum dosages of isosorbide dinitrate sublingual and Isosorbide mononitrate adjusted to align with the STG/EML PHC 2020.
Peripheral vascular disease (PVD)	139	Depression screen added to the assess table.
Depression: routine care	144	Drug colours of anti-depressants have changed from blue (Doctor-prescribed) to purple (doctor-initiated – nurse prescribed within his/her scope of practice). Note that as per STG - all registered medical practitioners, professional nurses, psychologists, occupational therapists (OTs) and social workers whose training includes mental health are designated Mental Health Care Practitioners.
Schizophrenia	146	<ul style="list-style-type: none"> Maintenance doses of Flupenthixol decanoate and Zucloperthixol decanoate updated to align with STG. Starting dose of haloperidol for patients > 65 years updated.
Epilepsy	149, 150	<ul style="list-style-type: none"> Further emphasis placed on the risks of valproate in young women. APC advises that women of child-bearing age are counselled on the risk of birth abnormalities if on sodium valproate and advised to switch anticonvulsants or take reliable contraception and sign acknowledgement of risk yearly. Starting doses of lamotrigine updated to align with STG. Starting doses of lamotrigine when switching off sodium valproate have been included.
Chronic arthritis	151	Distinction between osteoarthritis and inflammatory arthritis made clearer.
Gout	152	Starting dose for allopurinol updated to 50mg if ≥ 65 years.
Fibromyalgia: routine care	153	<ul style="list-style-type: none"> Prompt to further assess chronic pain added to the assess table. Paracetamol added as a treatment option. Amitriptyline prescriber colour changed from blue to purple.
Contraception	154, 155, 156	<ul style="list-style-type: none"> The contraception pages have been re-designed to provide clinicians with a more practical approach to helping their patients choose the best method of contraception for them - further information provided on when to use what, what to avoid, postpartum contraception, management of side effects. New intra-uterine device option available and added: Levonorgestrel Intra-Uterine Device (LNG-IUD). Works for up to 5 years and has added benefit of reduces menstrual cramping and bleeding. 8 weekly Norethisterone enanthate (NET-EN) IM 200mg injectable method is no longer available. Anti-nausea medication added to red box to give as needed with emergency contraception. Prompt to consider the need for PrEP if available added.
Pregnancy	157	<ul style="list-style-type: none"> New-page – see notes above. New pregnancy diagnosis developed and added to align with National Clinical contraception guideline ‘pregnancy checklist’. Prompt to switch from ACE-inhibitor to methyldopa added if known hypertension.

Page name	Page	Details
Routine antenatal care	159, 160, 161, 162, 163	<ul style="list-style-type: none"> • These pages replace 'The pregnant patient' pages for better flow between the booking/first antenatal visit and subsequent visits. • Clearer guidance relating to the abdominal assessment added the assess column. • Dual syphilis/HIV test prompt added with updated frequency of testing. • Hepatitis B screen added to assess column. • EGK note added for VL monitoring. • Prompt to consider for PrEP added.
Routine postnatal care	164, 165	<ul style="list-style-type: none"> • Dual syphilis/HIV test prompt added. • Prompt to consider for PrEP added. • Calcium dosing clarified. • Tdap option added as alternative for Tetanus toxoid as change to EPI schedule expected.
Manage the pregnant/breastfeeding patient with an unsuppressed viral load (VL ≥ 50)	166	Updated to Align with the NDOH: Guideline for Vertical Transmission Prevention of Communicable Infections 2023 (June 2023 Draft 4).
Prevent communicable infections in the newborn	167	Please see under 'New pages'
Prevent vertical transmission of HIV	168	The name of this page was changed from 'Prevent mother-to-child transmission (PMTCT) of HIV and hepatitis' to 'Prevent vertical transmission of HIV'.
Menopause	169	If still menstruating guidance updated.
Routine palliative care and address the dying patient's needs	170	<ul style="list-style-type: none"> • Prompt to further assess chronic pain on chronic pain page added. This informs pain management in palliative care section. • Pain differentiated into non-cancer and cancer pain – starting steps for medication and referral criteria differ between these. • Edits to the pain medication table to lay out information more clearly.
Support the patient taking chronic medication	173	New page – see notes above.
Protect yourself from occupational infection	174	<ul style="list-style-type: none"> • Prompt for screening and testing for TB in healthcare workers, according to their facility policy, has been added. • Prompts for influenza and COVID-19 added. • TB suspect changed to patient with possible TB. • Prompts expanded to be on high alert for infections if patient has respiratory or gastrointestinal symptoms.
Protect yourself from occupational stress	175	Images added.