

This Patient Group Direction (PGD) must only be used by registered healthcare professionals who have been named and authorised by their organisation to practice under it. The most recent and in date final signed version of the PGD should be used.

## **PATIENT GROUP DIRECTION (PGD)**

### **Supply of clotrimazole 1% cream for the symptomatic relief of vulvo-vaginal candidiasis in York and North Yorkshire Sexual health services including specialist clinical outreach services**

Version Number 1.0

<b>Change History</b>	
<b>Version and Date</b>	<b>Change details</b>
Version 1.0	New template

This Patient Group Direction (PGD) must only be used by registered professionals who have been named and authorised by their organisation to practise under it (See Appendix A). The most recent and in date final signed version of the PGD must be used.

#### **PGD DEVELOPMENT GROUP**

Reference Number: v1  
Valid from: March 2022  
Review date: May 2023  
Expiry date: 31<sup>st</sup> October 2023

Date PGD template comes into effect:	1 <sup>st</sup> November 2020
Review date	1 <sup>st</sup> May 2023
Expiry date:	31 <sup>st</sup> October 2023

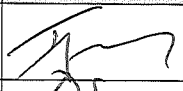


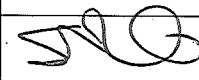

This PGD template has been peer reviewed by the Sexual Health PGDs Short Life Working Group in accordance with their Terms of Reference. It has been approved by the British Association for Sexual Health and HIV (BASHH) in October 2020.

**This section MUST REMAIN when a PGD is adopted by an organisation.**

Name	Designation
Ali Grant	Highly Specialist Clinical Pharmacist: HIV, Sexual and Reproductive Health
Alison Crompton	Community pharmacy
Amanda Cooper	Associate Director Specialist Pharmacy Service
Andrea Smith	Community pharmacy
Carmel Lloyd	Royal College of Midwives
Chetna Parmar	Pharmacist adviser, Umbrella
Clare Livingstone	Royal College of Midwives
Deborah Redknapp	English HIV and Sexual Health Commissioners Group (EHSHCG)
Dipti Patel	Local authority pharmacist
Amy Moore	Principal Pharmacist, HIV, Sexual and Reproductive Health
Dr Achyuta Nori	Consultant in Sexual Health and HIV
Dr Cindy Farmer	Chair General Training Committee Faculty of Sexual and Reproductive Healthcare (FSRH)
Dr John Saunders	Consultant in Sexual Health and HIV
Dr Kathy French	Pan London PGD working group
Dr Rita Browne	Consultant in Sexual Health and HIV
Dr Sarah Pillai	Pan London PGD working group
Emma Anderson	Centre for Pharmacy Postgraduate Education (CPPE)
Helen Donovan	Royal College of Nursing
Jo Jenkins (Working Group Co-ordinator)	Specialist Pharmacist (PGDs) Specialist Pharmacy Service
Jodie Crossman	Specialist Nurse. BASHH SHAN SIG Chair
Jodie Walker-Haywood	Specialist Nurse, BASHH Board Nurse Representative, BASHH SHAN SIG Secretary
Leanne Bobb	English HIV and Sexual Health Commissioners Group (EHSHCG)
Michelle Jenkins	Advanced Nurse Practitioner, Clinical Standards Committee Faculty of Sexual and Reproductive Healthcare (FSRH)
Portia Jackson	Pharmacist, Cambridgeshire Community Services
Sally Hogan	British Pregnancy Advisory Service (BPAS)
Sandra Wolper	Associate Director Specialist Pharmacy Service
Silvia Ceci	Chief Pharmaceutical Officer's Clinical Fellow Specialist Pharmacy Service
Tracy Rogers	Associate Director Specialist Pharmacy Service

## ORGANISATIONAL AUTHORISATIONS

Reference Number: v1  
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Name	Job title and organisation	Signature	Date
Senior doctor	Ian Fairley, Lead Consultant		16/08/22
Senior pharmacist	Paul Jackson		17/8/22
Senior representative of professional group using the PGD	Simone Layton, Advanced Nurse Specialist Ariana Chorvan		16-08-22
Person signing on behalf of authorising body	Jennie Booth, Lead Nurse Medicines Management		19-08-2022
	Stuart Parkes, Chief Pharmacist		19/08/2022

PGDs do not remove inherent professional obligations or accountability. It is the responsibility of each professional to practice only within the bounds of their own competence and in accordance with their own Code of Professional Conduct. Individual practitioners must declare that they have read and understood the Patient Group Direction and agree to supply/administer medication(s) listed only in accordance with the PGD.

- Trust PGD policy is available via on Staff Room
- An audit must be completed at renewal- see Trust PGD Policy for audit requirements

## 1. Characteristics of staff

The practitioner should be aware of any change to the recommendations for acyclovir and current guidance from national authorities e.g. the BNF and NICE.

It is the responsibility of the individual to keep up to date with continued professional development and to work within the limitations of their individual scope of practice

<b>Qualifications and professional registration</b>	<p>Current contract of employment within a Local Authority or NHS commissioned service or an NHS Trust/organisation.</p> <p>Registered healthcare professional listed in the legislation as able to practice under Patient Group Directions.</p>
<b>Initial training</b>	<p>The registered healthcare professional authorised to operate under this PGD must have undertaken appropriate education and training and successfully completed the competencies to undertake clinical assessment of patient leading to diagnosis of the conditions listed.</p> <p>Recommended requirement for training would be successful completion of a relevant sexual health module/course accredited or endorsed by the BASHH, CPPE, RCN or a university or advised in the RCN Sexual Health Education directory.</p> <p>The healthcare professional has completed locally required training (including updates) in safeguarding children and vulnerable adults.</p>
<b>Competency assessment</b>	<ul style="list-style-type: none"> <li>• Individuals operating under this PGD must be assessed as competent (see Appendix A) or complete a self-declaration of competence for vulvo-vaginal candidiasis infection testing and/or treatment.</li> <li>• Staff operating under this PGD are encouraged to review their competency using the <a href="#">NICE Competency Framework for health professionals using patient group directions</a></li> </ul>
<b>Ongoing training and competency</b>	<ul style="list-style-type: none"> <li>• Individuals operating under this PGD are personally responsible for ensuring they remain up to date with the use of all medicines and guidance included in the PGD - if any training needs are identified these should be discussed with the senior individual responsible for authorising individuals to act under the PGD and further training provided as required.</li> <li>• <b>Completion of PGD awareness session via Trust Learning HUB</b></li> </ul>
<p>The decision to supply any medication rests with the individual registered health professional who must abide by the PGD and any associated organisational policies.</p>	

## 2. Clinical condition or situation to which this PGD applies

<b>Clinical condition or situation to which this PGD applies</b>	<ul style="list-style-type: none"> <li>• Vulvo-vaginal candidiasis</li> </ul> <p><b>NOTE:</b> The clotrimazole 1% cream is for symptomatic relief only and is not a treatment in itself. Clotrimazole 1% w/w cream should be considered in addition to either single dose oral fluconazole or a single dose clotrimazole pessary - see separate PGDs for fluconazole oral capsules or clotrimazole pessaries.</p>
<b>Criteria for inclusion</b>	<ul style="list-style-type: none"> <li>• An individual with a confirmed diagnosis of vulvo-vaginal candidiasis</li> <li>• An individual with symptoms of vulvo-vaginal candidiasis confirmed on examination, microscopy or via symptoms reported by the individual (including vulvo-vaginal itching, erythema, fissures, abnormal thick lumpy “cottage cheese” vaginal discharge)</li> </ul>
<b>Criteria for exclusion</b>	<p><b>Personal Characteristics</b></p> <ul style="list-style-type: none"> <li>• Individuals under 13 years of age</li> <li>• Individuals who are pre-pubertal</li> <li>• Individuals under 16 years of age and assessed as not competent using Fraser Guidelines</li> <li>• Individuals 16 years of age and over and assessed as not competent to consent using local safeguarding guidelines</li> </ul> <p><b>Medical history</b></p> <ul style="list-style-type: none"> <li>• Individuals with four or more treated episodes of candidiasis (2 or more confirmed by microscopy) in the preceding 12 months – refer to prescriber/specialist service</li> <li>• Individuals with genital sores/ulcers suggestive of other infections/conditions</li> <li>• Individuals with pelvic pain where pelvic inflammatory disease (PID) has not been excluded</li> <li>• Individuals with abnormal vaginal bleeding where cause has not been identified</li> <li>• Recurrent or unresolved symptoms of candidiasis within 4 weeks of being treated</li> <li>• Individuals who are immunosuppressed and may require further assessment and systemic treatment</li> <li>• Known or suspected pregnancy</li> </ul> <p><b>Medication history</b></p> <ul style="list-style-type: none"> <li>• Individual is taking interacting medicines. Check appendix 1 of current edition of British National Formulary (BNF) for full list.</li> <li>• Known allergy/hypersensitivity to clotrimazole or any other imidazole antifungal, or any constituent of the preparation</li> </ul>
<b>Cautions including any relevant action to be taken</b>	<ul style="list-style-type: none"> <li>• If the individual is less than 16 years of age an assessment based on Fraser guidelines must be made and documented.</li> <li>• If the presenting individual is under 13 years of age the healthcare professional should speak to local safeguarding lead and follow the local safeguarding policy (note under 13 years of age excluded from treatment under this PGD).</li> </ul>

	<ul style="list-style-type: none"> <li>Discuss with appropriate medical/independent non-medical prescriber any medical condition or medication of which the healthcare professional is unsure or uncertain.</li> </ul>
<b>Action to be taken if the individual is excluded or declines treatment</b>	<ul style="list-style-type: none"> <li>If declined ensure individual is aware of the need for treatment and the potential consequences of not receiving treatment.</li> <li>Record reason for decline in the consultation record.</li> <li>Explain the reasons for exclusion to the individual and document in the consultation record.</li> <li>Where required refer the individual to a suitable health service provider if appropriate and/or provide them with information about further options.</li> </ul>

### 3. Description of treatment

<b>Name, strength &amp; formulation of drug</b>	Clotrimazole 1% w/w cream
<b>Legal category</b>	P
<b>Route of administration</b>	Topical
<b>Off label use</b>	<p>Best practice advice is given by BASHH and is used as the reference guidance in this PGD and may vary from the Summary of Product Characteristics (SPC).</p> <p>This PGD may include off label use as some manufacturers' SPCs exclude the age groups detailed below. Practitioners should check details for the brand they are supplying:</p> <ul style="list-style-type: none"> <li>Individuals under 16 years of age</li> <li>Individuals age 60 years or over</li> </ul> <p>Medicines should be stored according to the conditions detailed in the storage section below. However, in the event of an inadvertent or unavoidable deviation of these conditions the local pharmacy or Medicines Management team must be consulted. Where medicines have been assessed by pharmacy/Medicines Management in accordance with national or specific product recommendations as appropriate for continued use this would constitute off-label supply under this PGD. The responsibility for the decision to release the affected drugs for use lies with pharmacy/Medicines Management.</p> <p>Where a medicine is recommended off-label consider, as part of the consent process, informing the individual/parent/carer that the drug is being offered in accordance with national guidance but that this is outside the product licence.</p>
<b>Dose, frequency and duration of administration</b>	<ul style="list-style-type: none"> <li>Apply 1% cream sparingly to vulval area only two to three times a day until 48 hours after symptoms have resolved.</li> <li>Maximum duration 14 days.</li> </ul>
<b>Quantity to be supplied</b>	One 20g tube of clotrimazole 1% cream
<b>Storage</b>	Medicines must be stored securely according to national guidelines and in accordance with the product SPC.
<b>Drug interactions</b>	All concurrent medications should be reviewed for interactions. A detailed list of all drug interactions is available in the BNF

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	<p><a href="http://www.bnf.org">www.bnf.org</a> or the product SPC, which is available from the electronic Medicines Compendium website: <a href="http://www.medicines.org.uk">www.medicines.org.uk</a></p>
<b>Identification &amp; management of adverse reactions</b>	<p>A detailed list of adverse reactions is available in the SPC, which is available from the electronic Medicines Compendium website: <a href="http://www.medicines.org.uk">www.medicines.org.uk</a> and BNF <a href="http://www.bnf.org">www.bnf.org</a></p> <p>The following side effects are reported with topical clotrimazole (but may not reflect all reported side effects):</p> <ul style="list-style-type: none"> <li>• Localised skin reactions: <ul style="list-style-type: none"> <li>○ rash</li> <li>○ redness</li> <li>○ pruritus</li> <li>○ irritation</li> <li>○ oedema</li> <li>○ mild stinging/burning</li> <li>○ blisters</li> <li>○ peeling/exfoliation</li> </ul> </li> <li>• Allergic reactions: <ul style="list-style-type: none"> <li>○ syncope</li> <li>○ hypotension</li> <li>○ dyspnoea</li> <li>○ urticaria</li> </ul> </li> </ul>
<b>Management of and reporting procedure for adverse reactions</b>	<ul style="list-style-type: none"> <li>• Healthcare professionals and patients/carers are encouraged to report suspected adverse reactions to the Medicines and Healthcare products Regulatory Agency (MHRA) using the Yellow Card reporting scheme on: <a href="http://yellowcard.mhra.gov.uk">http://yellowcard.mhra.gov.uk</a></li> <li>• Record all adverse drug reactions (ADRs) in the patient's medical record.</li> <li>• Report via organisation incident policy.</li> </ul>
<b>Written information and further advice to be given to individual</b>	<p><b>Medication:</b></p> <ul style="list-style-type: none"> <li>• Give patient information leaflet (PIL) provided with the original pack. Explain mode of action, side effects, and benefits of the medicine</li> <li>• Advise that the clotrimazole 1% cream is for symptomatic relief only and is not a treatment in itself. Consider use in conjunction with the pessary or oral fluconazole</li> <li>• If adverse reaction to treatment occurs advise individual to contact clinic for further advice</li> <li>• Advise that this product may cause damage to latex condoms; the effectiveness of such contraceptives may be reduced, it is advised to use alternative precautions during and for at least 5 days after using this product.</li> </ul> <p><b>Condition (general):</b></p> <ul style="list-style-type: none"> <li>• Individuals diagnosed with candidiasis should be offered information (verbal, written and/or digital) about their diagnosis and management</li> <li>• Provide verbal and written or online information on possible triggers for candidiasis including avoiding using local irritants such as perfumed soap and encouraging use of emollients externally.</li> <li>• Give reassurance that candidiasis is not a sexually transmitted</li> </ul>

	<p>infection</p> <ul style="list-style-type: none"> <li>• If sexual partner is symptomatic advise they should access sexual health screening</li> <li>• If after 7 days symptoms persist/worsen advise individual to contact GP</li> <li>• Offer condoms and advice on safer sex practices and offer the options for screening for sexually transmitted infections (STIs) where indicated.</li> <li>• Where treatment is not supplied via a sexual health clinic ensure the individual has contact details of local sexual health services if required.</li> </ul>
<b>Follow up treatment</b>	<ul style="list-style-type: none"> <li>• The individual should be advised to seek medical advice in the event of an adverse reaction.</li> <li>• If after 7 days symptoms persist/worsen advise individual to contact GP for further assessment</li> </ul>
<b>Records</b>	<p><b>Record:</b></p> <ul style="list-style-type: none"> <li>• The consent of the individual and <ul style="list-style-type: none"> <li>○ If individual is under 13 years of age record action taken</li> <li>○ If individual is under 16 years of age document capacity using Fraser guidelines. If not competent record action taken.</li> <li>○ If individual over 16 years of age and not competent, record action taken</li> </ul> </li> <li>• If individual not treated under PGD record action taken</li> <li>• Name of individual, address, date of birth</li> <li>• GP contact details where appropriate</li> <li>• Relevant past and present medical and sexual history, including medication history.</li> <li>• Examination or microbiology finding/s where relevant.</li> <li>• Any known allergies and nature of reaction</li> <li>• Name of registered health professional</li> <li>• Name of medication supplied</li> <li>• Date of supply</li> <li>• Dose supplied</li> <li>• Quantity supplied including batch number and expiry date in line with local procedures.</li> <li>• Advice given, including advice given if excluded or declines treatment</li> <li>• Details of any adverse drug reactions and actions taken</li> <li>• Advice given about the medication including side effects, benefits, and when and what to do if any concerns</li> <li>• Any referral arrangements made</li> <li>• Any supply outside the terms of the product marketing authorisation</li> <li>• Recorded that supplied via Patient Group Direction (PGD)</li> </ul> <p>Records should be signed and dated (or a password controlled e-records) and securely kept for a defined period in line with local policy.</p> <p>All records should be clear, legible and contemporaneous.</p>



	A record of all individuals receiving treatment under this PGD should also be kept for audit purposes in accordance with local policy.
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**4. Key references**

<p><b>Key references (accessed April 2020)</b></p>	<ul style="list-style-type: none"> <li>• Electronic Medicines Compendium <a href="http://www.medicines.org.uk/">http://www.medicines.org.uk/</a></li> <li>• Electronic BNF <a href="https://bnf.nice.org.uk/">https://bnf.nice.org.uk/</a></li> <li>• NICE Medicines practice guideline “Patient Group Directions” <a href="https://www.nice.org.uk/guidance/mpg2">https://www.nice.org.uk/guidance/mpg2</a></li> <li>• NICE Clinical Knowledge Summaries - <a href="https://cks.nice.org.uk">https://cks.nice.org.uk</a></li> <li>• Royal Pharmaceutical Society Safe and Secure Handling of Medicines December 2018 <a href="https://www.rpharms.com/recognition/setting-professional-standards/safe-and-secure-handling-of-medicines">https://www.rpharms.com/recognition/setting-professional-standards/safe-and-secure-handling-of-medicines</a></li> <li>• British Association for Sexual Health and HIV national guideline for the management of vulvovaginal candidiasis (2019) <a href="https://www.bashhguidelines.org/current-guidelines/vaginal-discharge/vulvovaginal-candidiasis-2019/">https://www.bashhguidelines.org/current-guidelines/vaginal-discharge/vulvovaginal-candidiasis-2019/</a></li> </ul>
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## Appendix A - Registered health professional authorisation sheet

PGD – Supply of topical clotrimazole cream for the symptomatic relief of vulvo-vaginal candidiasis      Valid from: March 2022      Expiry: October 2023

Before signing this PGD, check that the document has had the necessary authorisations. Without these, this PGD is not lawfully valid.

### Registered health professional

By signing this PGD you are indicating that you agree to its contents and that you will work within it.

PGDs do not remove inherent professional obligations or accountability.

It is the responsibility of each professional to practise only within the bounds of their own competence and professional code of conduct.

<b>I confirm that I have read and understood the content of this Patient Group Direction and that I am willing and competent to work to it within my professional code of conduct.</b>			
<b>Name</b>	<b>Designation</b>	<b>Signature</b>	<b>Date</b>

### Authorising manager

<b>I confirm that the registered health professionals named above have declared themselves suitably trained and competent to work under this PGD. I give authorisation on behalf of York &amp; Scarborough Teaching Hospitals NHS Foundation Trust for the above named health care professionals who have signed the PGD to work under it.</b>			
<b>Name</b>	<b>Designation</b>	<b>Signature</b>	<b>Date</b>

### Note to authorising manager

Score through unused rows in the list of registered health professionals to prevent additions post managerial authorisation.

**This authorisation sheet should be retained to serve as a record of those registered health professionals authorised to work under this PGD.**

**When the expiry date is exceeded, this PGD ceases to be a legal document. Staff authorisation records must be maintained for 8 years if the PGD relates to adults only, 10 years for implants and 25 years after the expiry date if the PGD relates to children**

