

On 31st March 2025, the details of the [contractual settlement for 2025/26 were announced](#), and this includes changes to the Pharmacy First service.

As part of these changes, NHS England has undertaken a review of the Clinical Pathways and PGDs used for the relevant part of the Pharmacy First service.

Draft documents have been published to provide advance notice of the changes to the service for pharmacy owners and their teams, and additionally to support IT system suppliers in developing the necessary changes to their systems. These can be accessed at:

- <https://www.nhsbsa.nhs.uk/pharmacy-first-june-2025>

Key points:

- All pharmacists wishing to continue delivering Pharmacy First should review the draft materials and ensure they are competent to work to the updated specification, PGDs and pathways from 1 October; some of the gateway points and the addition of eight further gateway points.
- Please remind pharmacists of the importance of accurate record-keeping, including legal documentation of any medicines supplied under PGDs or via the urgent supply route.
- IT system suppliers will update systems overnight on **30 September** so the new pathways are live from **1 October**.
- Final documents and an updated service specification will be published on the NHS England website on 1 October.

This document has been adapted with kind permission from a similar Boots resource.

It is intended as a summary of the changes to help pharmacists and business owners to focus any personal and professional development, and has been grouped by the seven conditions included in the Clinical Pathways.

It is not intended as a substitute for full understanding of the pathways or the PGDs and protocols required for safe and effective delivery of this service. Community Pharmacy Lincolnshire accepts no responsibility for errors or omissions in this document.

The order of the clinical pathways in the June 2025 draft document has been amended. However, for ease, this document reviews the pathways in the order of the original January 2024 document.

Changes to **all** clinical pathways:

The following amendments have been made to each of the seven clinical pathways:

- There is an **additional Gateway point** for patients with risk of deterioration, red flags or serious illness to allow for clinical assessment (such as calculation of NEWS2 scores ahead of signposting patient to A&E or calling 999 in a life-threatening emergency).
- A clickable box with a link to the NICE Clinical Knowledge Summary for each condition has been added at the top of the page.

Specific pathway changes, and amendments to the PGDs are included on the following pages.

Changes to PGDs

Some of the drugs authorised for supply are used across several different clinical pathways, and therefore some changes to PGDs are universal, regardless of the condition used (for example drug interactions). Where this is the case, this will be **indicated in this document by a footnote** with details on the first page on which the drug is mentioned.

Changes **specific to a particular condition or pathway PGD will be indicated by an asterisk (*)** in this document.

Pharmacy First Updated PGDs and Clinical Pathways;

What's Changed: Uncomplicated Urinary Tract Infections

Uncomplicated Urinary Tract Infections

Clinical Pathway

Minor changes to **wording of screening points** prior to main Gateway point for clarity, but no fundamental changes to content.

Minor changes to wording of key diagnostic criteria, but no changes to the pathway.

Nitrofurantoin PGD

Inclusion Criterion*

Amended to **reflect more inclusive gender language** (from “females” to “cisgender women, non-binary people assigned female at birth, transgender men (with no structural alteration to their urethra)”))

Exclusion Criterion*

Amended to **reflect more inclusive gender language** (from “males” to “cisgender men, non-binary people assigned male at birth, transgender women (including those who have had structural alteration to their urethra)”))

Follow-Up Treatment*

Minor typographical error has been corrected in the “Individual advice / follow up treatment section”; “used medication” has been corrected to “unused medication” in relation to returning unused medication to the pharmacy for disposal.

Specific information for suspected infection to be provided*

The information regarding the TARGET Treating Your Urinary Tract Infection (TYI-RTI) has been updated

Glossary*

A Glossary of terms used to explore gender and gender identity, with a link to the Stonewall List of LGBTQ+ terms.

Pharmacy First Updated PGDs and Clinical Pathways;

What's Changed: Shingles

Shingles

Clinical Pathway

The main Gateway point has been **moved to an earlier stage** to allow for patients to formally enter the service when the consultation and/or any examination begins (after initial screening for potentially more serious or complicated illness requiring referral)

Aciclovir and Valaciclovir PGDs

| | |
|-----------------------|--|
| Inclusion Criteria * | Amended to remove “neck” from the “Non-truncal involvement statement. This now reads “Non-truncal involvement (e.g. shingles affecting the limbs, or perineum).” |
| | The option to switch to the valaciclovir PGD if there is an interruption with stock supply with aciclovir has been removed. |
| Exclusion Criterion * | Shingles affecting the head and neck has been added to the Criteria for exclusion |

Valaciclovir PGD only

| | |
|--|--|
| Name, strength & formulation of drug * | Valaciclovir 1g tablets have been added, allowing provision of either the 500mg or 1g tablets. |
|--|--|

Pharmacy First Updated PGDs and Clinical Pathways;

What's Changed: Shingles

Impetigo

Clinical Pathway

The main Gateway point has been **moved to an earlier stage** to allow for patients to formally enter the service when the consultation and/or any examination begins (after initial screening for potentially more serious or complicated illness requiring referral)

Hydrogen Peroxide 1% Cream Protocol

Indicate any off-label use (if relevant) *

This is a new section, and includes details of age ranges for which hydrogen peroxide 1% cream is not licensed but for which NICE guidance recommends use:

“Hydrogen peroxide 1% cream is not licensed for individuals aged 1 year or 12 – 17 years, but use in these age groups is supported by NICE guidance.”

However, we have reviewed the SPC for Crystacide cream® and this suggests **it is licensed for use in children, adults and the elderly**; other brands may not be.

The section also contains information about assessing appropriateness of using the cream if stored outside of the recommended temperatures, and the **responsibilities of the pharmacist when using medicines off-label**.

Fusidic Acid 2% Cream PGD only

No new PGD has been issued for this but it remains part of the clinical pathway (and is a prescription-only medicine). We therefore think that the current PGD will remain in place, as this is valid until 30th January 2027.

Pharmacy First Updated PGDs and Clinical Pathways;

What's Changed: Shingles

| Flucloxacillin PGD ⁱ | |
|--|---|
| Drug Interactions | Voriconazole has been added to list of contraindicated concomitant medicines |
| Clarithromycin PGD ⁱⁱ | |
| Cautions including any relevant action to be taken | Lercanidipine has been added to the subsection for calcium channel blockers, stating that lercanidipine use is contraindicated with clarithromycin. |
| Drug Interactions | <p>Several medicines have been added to this section:</p> <ul style="list-style-type: none"> • Chloroquine or hydroxychloroquine • Lomitapide • Ivabradine • Medicines where concomitant use with a strong CYP 3A4 inhibitor (i.e. clarithromycin) is contraindicated e.g. <ul style="list-style-type: none"> • Avanafil • Dronedarone • Eplerenone • Finerenone • Lercanidipine • Lurasidone • Naloxegol • Quetiapine • Any other medicine where concomitant use with clarithromycin is contraindicated |

ⁱ Changes apply to all Flucloxacillin PGDs used for the Pharmacy First service in England, unless marked by an asterisk (*)

ⁱⁱ Changes apply to all Clarithromycin PGDs used for the Pharmacy First service in England, unless marked by an asterisk (*)

Pharmacy First Updated PGDs and Clinical Pathways;

What's Changed: Shingles

| Erythromycin PGD ⁱⁱⁱ | |
|--------------------------------------|--|
| Drug Interactions | <p>Several medicines have been added to this section:</p> <ul style="list-style-type: none">• Lomitapide• Medicines where concomitant use with a moderate CYP 3A4 inhibitor (i.e. erythromycin) is contraindicated e.g.<ul style="list-style-type: none">• Lercanidipine• Ivabradine• Quetiapine• Any other medicine where concomitant use with erythromycin is contraindicated |
| Name, strength & formulation of drug | <p>Erythromycin 500mg/5mL oral suspension/solution and erythromycin 500mg/5mL sugar-free oral suspension/solution have been removed from this section, as they are no longer available.</p> |

ⁱⁱⁱ Changes apply to all Erythromycin PGDs used for the Pharmacy First service in England, unless marked by an asterisk (*)

Pharmacy First Updated PGDs and Clinical Pathways;

What's Changed: **Infected Insect Bites**

Infected Insect Bites

Clinical Pathway

An additional consideration for Lyme disease has been added, with links to images of erythema migrans.

The main Gateway point has been **moved to an earlier stage** to allow for patients to formally enter the service when an infected insect bite appears more likely and further assessment is required

Flucloxacillin **and** Clarithromycin PGDs

Clinical condition or situation to which this PGD applies *

The definition of 'insect' has been broadened in line with NICE guidance and now includes arthropods with eight legs, such as spiders, ticks and mites.

Exclusion criteria *

The criteria for "Bite or sting occurred while travelling outside the UK" has been amended to make this less restrictive. It now reads "Bite or sting occurred while travelling outside the UK with concern of insect borne disease e.g. malaria, tick borne encephalitis"

Flucloxacillin PGD ⁱ

Drug Interactions

Voriconazole has been added to list of contraindicated concomitant medicines

Pharmacy First Updated PGDs and Clinical Pathways;

What's Changed: **Infected Insect Bites**

Clarithromycin PGD ⁱⁱ

Cautions including any relevant action to be taken

Lercanidipine has been added to the subsection for calcium channel blockers, stating that lercanidipine use is contraindicated with clarithromycin.

Drug Interactions

Several medicines have been added to this section:

- Chloroquine or hydroxychloroquine
- Lomitapide
- Ivabradine
- Medicines where concomitant use with a **strong** CYP 3A4 inhibitor (i.e. clarithromycin) is contraindicated e.g.
 - Avanafil
 - Dronedarone
 - Eplerenone
 - Finerenone
 - Lercanidipine
 - Lurasidone
 - Naloxegol
 - Quetiapine
- Any other medicine where concomitant use with clarithromycin is contraindicated

Pharmacy First Updated PGDs and Clinical Pathways;

What's Changed: **Infected Insect Bites**

Erythromycin PGD ⁱⁱⁱ

| | |
|---|--|
| Drug Interactions | <p>Several medicines have been added to this section:</p> <ul style="list-style-type: none"> • Lomitapide • Medicines where concomitant use with a moderate CYP 3A4 inhibitor (i.e. clarithromycin) is contraindicated e.g. <ul style="list-style-type: none"> • Lercanidipine • Ivabradine • Quetiapine • Any other medicine where concomitant use with erythromycin is contraindicated |
| Name, strength & formulation of drug | Erythromycin 500mg/5mL oral suspension/solution and erythromycin 500mg/5mL sugar-free oral suspension/solution have been removed from this section, as they are no longer available. |
| Individual Advice/Follow-up Treatment | Minor typographical error corrected: 12 hourly intervals corrected to “regular intervals” * |
| | Ibuprofen removed from this section ⁱⁱⁱ |

Pharmacy First Updated PGDs and Clinical Pathways;

What's Changed: Sore Throat

Sore Throat

Clinical Pathway

An **additional Gateway point** has been added to allow for patients to formally enter the service when they have a FeverPAIN score of 2 or 3.

Clarity regarding **returning patients** with a FeverPAIN score of 2 or 3, and a clear Gateway point for reassessment has been provided.

Phenoxymethylpenicillin, Clarithromycin **and** Erythromycin PGDs

Various sections

The information regarding the TARGET Treating Your Infection Respiratory Tract Infection (TYI-RTI) has been updated.

Phenoxymethylpenicillin PGD

Indicate any off-label use (if relevant)^{iv}

Additional information regarding off-label use of oral solution/suspension has been added; this now includes reference to taking 2 hours after food being off-label but supported by national guidance

^{iv} Changes apply to all Phenoxymethylpenicillin PGDs used for the Pharmacy First service in England, unless marked by an asterisk (*)

Pharmacy First Updated PGDs and Clinical Pathways;

What's Changed: Sore Throat

Clarithromycin PGD ⁱⁱ

Cautions including any relevant action to be taken

Lercanidipine has been added to the subsection for calcium channel blockers, stating that lercanidipine use is contraindicated with clarithromycin.

Drug Interactions

Several medicines have been added to this section:

- Chloroquine or hydroxychloroquine
- Lomitapide
- Ivabradine
- Medicines where concomitant use with a **strong** CYP 3A4 inhibitor (i.e. clarithromycin) is contraindicated e.g.
 - Avanafil
 - Lercanidipine
 - Dronedarone
 - Lurasidone
 - Eplerenone
 - Naloxegol
 - Finerenone
 - Quetiapine
- Any other medicine where concomitant use with clarithromycin is contraindicated

Pharmacy First Updated PGDs and Clinical Pathways;

What's Changed: Sore Throat

| Erythromycin PGD ⁱⁱⁱ | |
|---|---|
| Clinical condition or situation to which this PGD applies * | Minor typographical error corrected: “dected” corrected to “suspected” |
| Drug Interactions | <p>Several medicines have been added to this section:</p> <ul style="list-style-type: none"> • Lomitapide • Medicines where concomitant use with a moderate CYP 3A4 inhibitor (i.e. erythromycin) is contraindicated e.g. <ul style="list-style-type: none"> • Lercanidipine • Ivabradine • Quetiapine • Any other medicine where concomitant use with erythromycin is contraindicated |
| Name, strength & formulation of drug | Erythromycin 500mg/5mL oral suspension/solution and erythromycin 500mg/5mL sugar-free oral suspension/solution have been removed from this section, as they are no longer available. |
| Individual Advice/Follow-up Treatment | Ibuprofen removed from this section |

Pharmacy First Updated PGDs and Clinical Pathways;

What's Changed: **Acute Sinusitis**

Acute Sinusitis

Clinical Pathway

The **main Gateway point has been moved earlier in the pathway**, to allow patients to formally enter the service when acute sinusitis appears to be a likely differential diagnosis, prior to more detailed clinical history taking or examination.

Fluticasone and Mometasone PGDs

Various sections *

The information regarding the TARGET Treating Your Infection Respiratory Tract Infection (TYI-RTI) has been updated.

Inclusion Criteria *

The requirement for the presence of **TWO or more of the following signs/symptoms** (which suggests acute bacterial sinusitis is more likely) **has been removed**, to align to the clinical pathway:

- Marked deterioration after an initial milder phase
- Fever (>38°C)
- Unremitting purulent nasal discharge
- Severe localised unilateral pain, particularly pain over the teeth (toothache) and jaw

Reference to symptom duration has been amended to “Symptom duration of more than 10 days with no improvement” (this previously stated “little improvement”)

Exclusion Criteria *

“to reduce the risk of adrenal insufficiency” has been added to the exclusion criterion “Individuals currently taking oral, inhaled, topical or parenteral corticosteroids for any indication” subsection.

Pharmacy First Updated PGDs and Clinical Pathways;

What's Changed: **Acute Sinusitis**

Phenoxymethylpenicillin, Clarithromycin, Doxycycline **and** Erythromycin PGDs

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|--|---|
| Various sections * | The information regarding the TARGET Treating Your Infection Respiratory Tract Infection (TYI-RTI) has been updated. |
| Inclusion Criteria * | "10 days or more" has been amended to "more than 10 days" |
| Phenoxymethylpenicillin PGD | |
| Exclusion Criteria * | "Individuals currently taking/receiving the following medicines known to cause agranulocytosis (e.g. methotrexate, sulfasalazine, carbimazole, propylthiouracil, cotrimoxazole, valganciclovir, clozapine, carbamazepine, all chemotherapy)" has been removed from this section , meaning supplies may be considered for patients in this group. |
| Indicate any off-label use (if relevant) * | Additional information regarding off-label use of oral solution/suspension has been added; this now includes reference to taking 2 hours after food being off-label but supported by national guidance. |

Pharmacy First Updated PGDs and Clinical Pathways;

What's Changed: **Acute Sinusitis**

| Clarithromycin PGD ⁱⁱ | |
|--|---|
| Cautions including any relevant action to be taken | Lercanidipine has been added to the subsection for calcium channel blockers: Calcium channel blockers, stating that lercanidipine use is contraindicated with clarithromycin. |
| Drug Interactions | <p>Several medicines have been added to this section:</p> <ul style="list-style-type: none"> • Chloroquine or hydroxychloroquine • Lomitapide • Ivabradine • Medicines where concomitant use with a strong CYP 3A4 inhibitor (i.e. clarithromycin) is contraindicated e.g. <ul style="list-style-type: none"> • Avanafil • Dronedarone • Eplerenone • Finerenone • Lercanidipine • Lurasidone • Naloxegol • Quetiapine • Any other medicine where concomitant use with clarithromycin is contraindicated |
| Doxycycline PGD | |
| Exclusion Criteria * | "Known or suspected liver disease" has been added as an exclusion criterion |
| Cautions including any relevant action to be taken section * | Typographical error corrected; "Flucloxacillin" corrected to "doxycycline" |

Pharmacy First Updated PGDs and Clinical Pathways;

What's Changed: **Acute Sinusitis**

| Erythromycin PGD ⁱⁱⁱ | |
|---------------------------------------|---|
| Drug Interactions | <p>Several medicines have been added to this section:</p> <ul style="list-style-type: none">• Lomitapide• Medicines where concomitant use with a moderate CYP 3A4 inhibitor (i.e. erythromycin) is contraindicated e.g.<ul style="list-style-type: none">• Lercanidipine• Ivabradine• Quetiapine• Any other medicine where concomitant use with erythromycin is contraindicated |
| Name, strength & formulation of drug | Erythromycin 500mg/5mL oral suspension/solution and erythromycin 500mg/5mL sugar-free oral suspension/solution have been removed from this section, as they are no longer available. |
| Individual Advice/Follow-up Treatment | Ibuprofen removed from this section |

Pharmacy First Updated PGDs and Clinical Pathways;

What's Changed: Acute Otitis Media

Acute Otitis Media

There are no specific changes to the pathway for this condition, other than those for all pathways (see page 1 of this document). There are also no changes specific to the Amoxicillin PGD for this condition.

Phenazone Lidocaine Ear Drops, Amoxicillin, Clarithromycin and Erythromycin PGDs

| | |
|--|---|
| Various sections * | The information regarding the TARGET Treating Your Infection Respiratory Tract Infection (TYI-RTI) has been updated. |
| Clarithromycin PGD ⁱⁱ | |
| Cautions including any relevant action to be taken | Lercanidipine has been added to the subsection for calcium channel blockers: Calcium channel blockers, stating that lercanidipine use is contraindicated with clarithromycin. |
| Drug Interactions | <p>Several medicines have been added to this section:</p> <ul style="list-style-type: none"> • Chloroquine or hydroxychloroquine • Lomitapide • Ivabradine • Medicines where concomitant use with a strong CYP 3A4 inhibitor (i.e. clarithromycin) is contraindicated e.g. <ul style="list-style-type: none"> • Avanafil • Dronedarone • Eplerenone • Finerenone • Lercanidipine • Lurasidone • Naloxegol • Quetiapine • Any other medicine where concomitant use with clarithromycin is contraindicated |

Pharmacy First Updated PGDs and Clinical Pathways;

What's Changed: **Acute Otitis Media**

| Erythromycin PGD ⁱⁱⁱ | |
|---------------------------------------|--|
| Drug Interactions | <p>Several medicines have been added to this section:</p> <ul style="list-style-type: none"> • Chloroquine or hydroxychloroquine • Lomitapide • Ivabradine • Medicines where concomitant use with a moderate CYP 3A4 inhibitor (i.e. erythromycin) is contraindicated e.g. <ul style="list-style-type: none"> • Lercanidipine • Ivabradine • Quetiapine • Any other medicine where concomitant use with erythromycin is contraindicated |
| Name, strength & formulation of drug | Erythromycin 500mg/5mL oral suspension/solution and erythromycin 500mg/5mL sugar-free oral suspension/solution have been removed from this section, as they are no longer available. |
| Individual Advice/Follow-up Treatment | Ibuprofen removed from this section |