

Bicillin Shortage

For Webinar Wednesday

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LAND ACKNOWLEDGMENT

PRESENTATION OUTLINE

Current State
of Bicillin

Interim
Measures

Lentocilin S
1200

Bicillin vs.
Lentocilin

Phased in
Approach

Lessons
Learned

How to report
reactions?

How to order
Lentocilin?

How to order
ancillary
supplies?

Supporting
Documents

Questions

CURRENT STATE OF BICILLIN SHORTAGE

On Dec 2, 2025, the Drug Shortages Unit informed the province that Pfizer was reporting an actual shortage of Bicillin.

This was due to a delay in resupply and Pfizer was working to resolve the issue quickly to ensure prompt availability of supply.

The shortage has been pushed several times, and most recently into the end of May 2026.



WHAT NOW??

- As an interim measure, and in response to the Bicillin shortage, Health Canada has temporarily approved the importation of a Portuguese product, Lentocilin S 1200
- The week of March 9, 2026 – the Ministry of Health received their first shipment of Lentocilin S 1200
- They have procured 6000 doses
 - The province, in total, uses approximately 8000 doses of Bicillin per year
- The supply is anticipated to last into the summer of 2027

SIMILARITIES AND DIFFERENCES

The active ingredient in Bicillin L-A and Lentocilin S1200 is the same, making the products interchangeable.

There are differences in the formulation, dosage form, reconstitution requirements and presentation between Lentocilin S 1200 and Bicillin L-A.

BICILIN VS LENTOCILIN

Bicillin L-A

- **Active Ingredient:** Penicillin G Benzathine
- Storage: Refrigerated
- Supplied as a suspension in ready-to-use pre-filled syringes and does NOT contain lidocaine
- Strength: 1 200 000 IU / 2 mL
 - **Full dose is 4 mL in two needles**
- Administered deep IM in the dorsogluteal or ventrogluteal

Lentocilin S 1200

- **Active Ingredient:** Benzathine benzylpenicillin
- Store at ambient temperature of 8 - 25°C.
- DO NOT FREEZE
- Supplied as a powder in a vial to be reconstituted with lidocaine hydrochloride 1.5% (for a total of around 4 ml/ syringe)
- Strength: 1 200 000 IU/ 4 mL
 - **Full dose is approx. 8mL in two needles**
- Administered deep IM in the dorsogluteal or ventrogluteal

BICILLIN VS LENTOCILIN

Bicillin LA

- **Contraindications:** Allergy to Penicillin
- Aspiration and Z-track recommended

Lentocilin S 1200

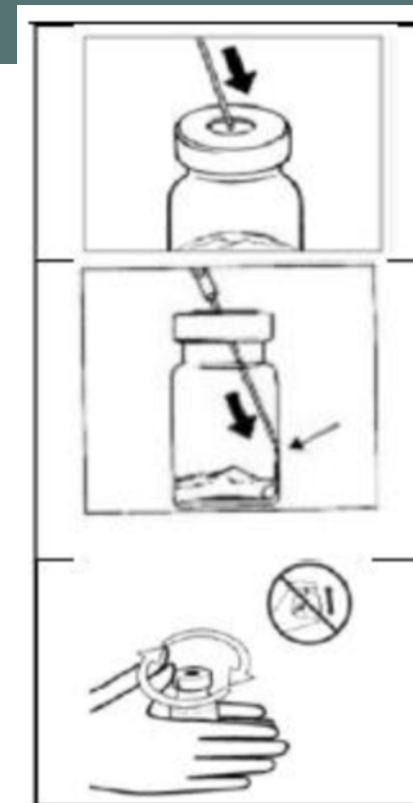
- **Contraindications:** Allergy to Penicillin, Soybeans, Lidocaine
 - Can be reconstituted with Sterile Water if allergy to Lidocaine
- Aspirate. If blood shows up in the syringe, pull back the needle, discard, re-constitute another vial and inject on another site. [Lentocilin: Package Insert / Prescribing Information](#)
- Z-tracking is recommended to prevent the medication from leaking in the subcutaneous tissue, to reduce irritation, and ensure full absorption of the medication,
- **Local Anesthetic System Toxicity (LAST):** Lidocaine maximum dose is quoted as 5mg/kg (without epinephrine). No concerns when client weighs more than 30 kg. (Dr Albie Malan, Anesthesiologist SHA; Lisa Baker, ISC BSP)
- Due to reconstitution with lidocaine, use with caution in:
 - inflammation and /or infection at the injection site;
 - sensitivity to local anesthetics of the amide type

PHASED IN APPROACH

PHASE ONE:	PHASE TWO:
<p>The Ministry of Health selected a few pilot sites to get a better understanding of the product and the administration of the same.</p> <ul style="list-style-type: none">• Regina, Saskatoon, North Battleford and Yorkton.	<p>Deploy out to the broader Public Health Delivery teams in the SHA, ISC and NITHA.</p>

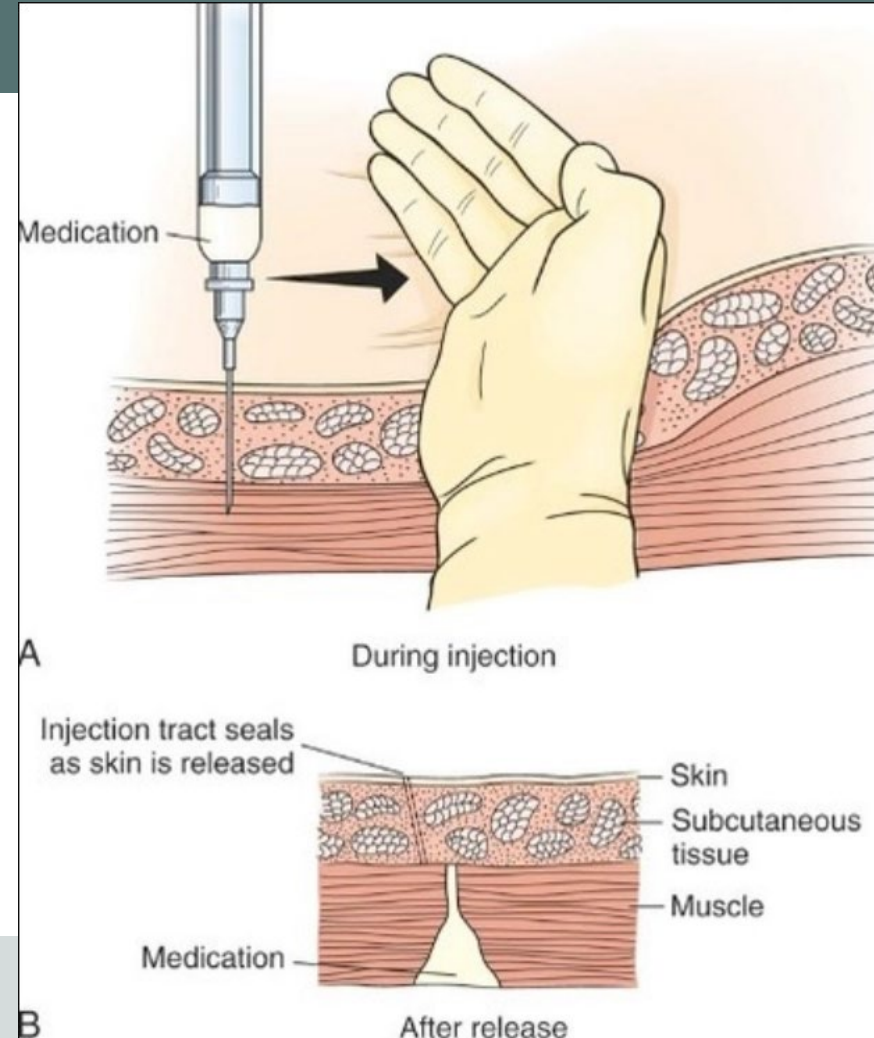
LESSONS LEARNED FROM THE PILOT SITES

- Use an 18-gauge filtered needle to draw up 4 mL of lidocaine. Change needle to 18g blunt and add lidocaine to vial wall
- Do not add lidocaine directly into the powder
- Roll in hands for a minimum of 20 sec or until fully mixed (approx. 60 sec)
- After adding 4mL lidocaine, the total volume is approx. 4.8 mL. Draw the entire contents into a 6mL syringe.
- Change to a sharp safety 18g needle for administration.



LEEGAY TO DEMONSTRATE RECONSTITUTION

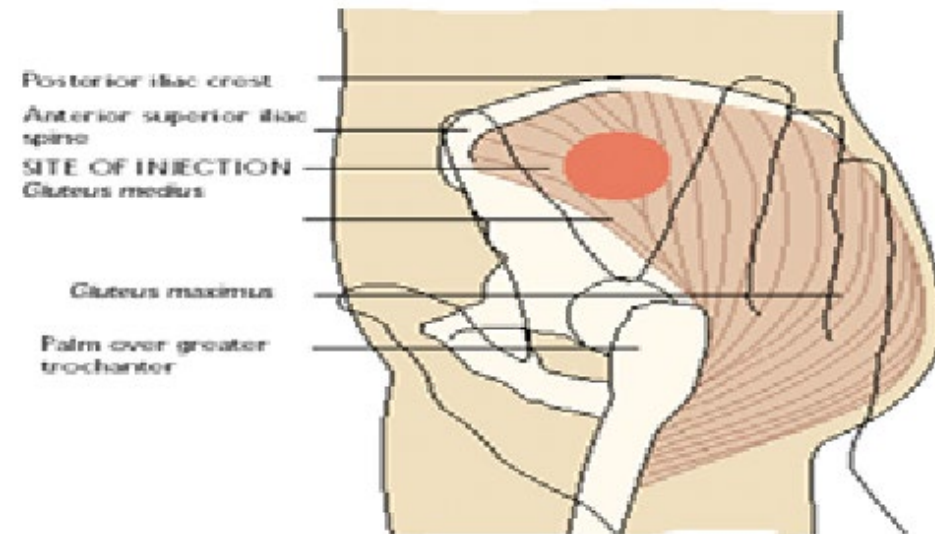
- Recommend aspirating to confirm location and Z-track to lock in medication.
- Can administer both doses simultaneously with another nurse or one injection at a time.
- Administer Lentocilin immediately after reconstitution. If left sitting out, it can congeal
- A client received a dose of Bicillin a week earlier and for the second dose, received Lentocilin – they didn't think one hurt more than the other.
- Administer Lentocilin S suspension **EXCLUSIVELY** by **DEEP INTRAMUSCULAR INJECTION** in the external upper quadrant of the buttock or in the ventrogluteal region.” https://septalife.com/wp-content/uploads/2026/02/SMPC_Septa_30012026.pdf



LANDMARKING

Ventrogluteal

- With the palm of your hand, locate the greater trochanter of the femur. Use your right hand for the left hip and your left hand for the right hip.
- Place your index finger along the anterior superior iliac spine and spread your middle finger posteriorly back as far as possible. The “V” area formed between your fingers is the correct injection site.
- Remove your fingers and insert the needle at a 90-degree angle.

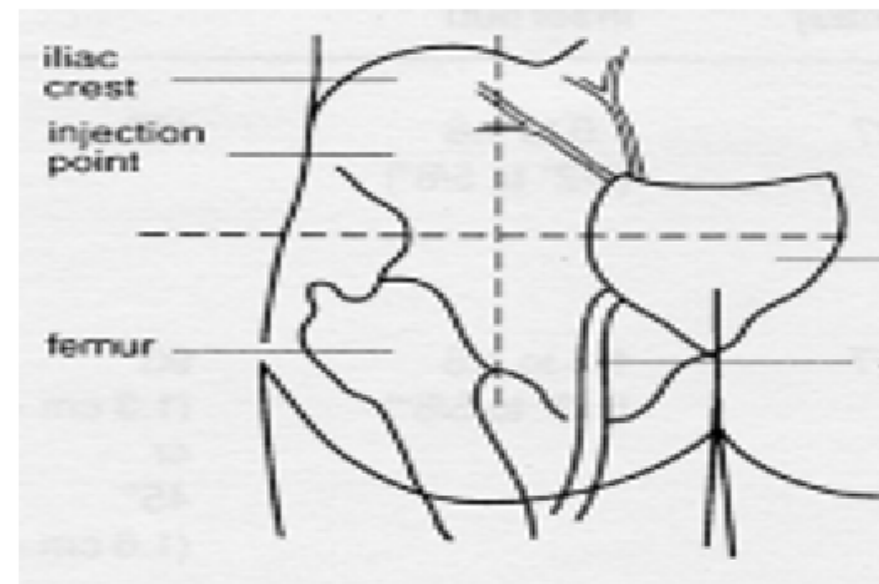


Source: http://www.bccdc.ca/resource-gallery/Documents/Guidelines%20and%20Forms/Guidelines%20and%20Manuals/Ep id/CD%20Manual/Chapter%202%20%20Imms/Appendix_B_Administration.pdf

LANDMARKING

Dorsogluteal

- Define the site by dividing the buttock into 4 quadrants.
- The injection site is the centre of the upper outer quadrant.
- Insert the needle at a 90-degree angle



ASPIRATION

IM needle aspiration is the practice of pulling back on the syringe plunger after inserting a needle into muscle to check for blood, ensuring the medication is not injected into a blood vessel.

- “Before injecting the suspension, the position of the needle should be controlled by aspiration. If blood shows up in the syringe, pull back the needle and inject on another site.

https://septalife.com/wp-content/uploads/2026/02/SMPC_Septa_30012026.pdf

WHAT IF THERE IS A REACTION?

SIDE EFFECT REPORTING FORM

Reporting suspected side effects (also known as adverse reactions) to marketed health products in Canada may contribute to the identification of previously unrecognized rare or serious side effects, which may lead to changes in the product's safety information.

Instructions on how to complete and submit this form and information about confidentiality can be found on Page 2. Complete all mandatory fields, marked by a *, and provide as much detail as possible for the remaining fields.

FAX completed form to 1-866-678-6789
For more information call 1-866-234-2345

PROTECTED "B" WHEN COMPLETED

A) About the person who had the side effect				D) Suspected health product		
Reference # (if applicable)				1. Product name*	2. Strength	3. Manufacturer
1. Age*	2. Sex*	3. Height	4. Weight	4. Lot #		5. DIN #/NPN #
____ Years	<input type="checkbox"/> Male	____ cm	____ kg			
____ Months	<input type="checkbox"/> Female	____ ft ____ in	____ lbs ____ oz	6. Country of purchase		7. Where it was purchased/obtained
5. Medical history and other related information (allergies, pregnancy, smoking/alcohol use, liver disease, etc.)				<input type="checkbox"/> Canada		<input type="checkbox"/> Pharmacy
				<input checked="" type="checkbox"/> United States		<input type="checkbox"/> Grocery store
				<input type="checkbox"/> Other (specify): _____		<input type="checkbox"/> Internet
				<input type="checkbox"/> Other (specify): _____		
				8. Product start date (yyyy-mm-dd)	9. Product end date (yyyy-mm-dd)	
				At the time of the side effect, specify:		
B) Reporter information				10. Dosage* (strength and quantity)	11. Frequency (e.g. twice daily)	12. How the product was taken* (e.g. by mouth)
1. Name*	2. Telephone*	3. Province/Territory				
4. Address				5. E-mail		
6. Preferred language				7. Organization (if applicable)		
<input checked="" type="checkbox"/> English						
<input type="checkbox"/> French						
8. Select one that best describes you				13. What was the product prescribed/taken for?		
<input checked="" type="checkbox"/> Consumer or other non-health professional						
<input type="checkbox"/> Physician						
<input type="checkbox"/> Pharmacist						
<input type="checkbox"/> Other health professional (specify) _____				14. Did use of the product stop after the side effect appeared?		
9. Has this also been reported to the manufacturer?				<input type="checkbox"/> Yes		15. If the product was stopped did the side effect stop?
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				<input type="checkbox"/> No		<input type="checkbox"/> Does not apply
				<input type="checkbox"/> Does not apply		
C) Side Effect				16. Was the product restarted after the side effect stopped?		
1. Seriousness of the side effect				<input type="checkbox"/> Yes		17. If the product was restarted, did the side effect return?
<input type="checkbox"/> Death (yyyy-mm-dd) _____				<input type="checkbox"/> No		<input type="checkbox"/> Yes
<input type="checkbox"/> Life-threatening				<input type="checkbox"/> Does not apply		<input type="checkbox"/> No
<input type="checkbox"/> Admitted to hospital						<input type="checkbox"/> Does not apply
<input type="checkbox"/> Disability						
<input type="checkbox"/> Birth defect						

- CHNs are to fill out a Confidential Occurrence Report and send it to the Director of Nursing.

- Any case of serious or unexpected side effects are to be reported to Health Canada or Septa Pharmaceuticals Inc.

- Health Canada: 1-866-234-2345
- Form link: [Side Effect Reporting Form](#)

WHAT IF A CLIENT CAN NOT HAVE LENTOCILIN?



- The Ministry is holding on to approximately 150 syringes of Bicillin for any peoples with contraindications to Lentocilin
- The Ministry of Health has approved each area to hold 3 doses (6 syringes) of Bicillin to have on hand for the quick treatment for those that are unable to receive Lentocilin.


HOW TO ORDER LENTOCILIN?

- As of April 7, 2026, RRPL only has a reserve of 150 syringes of Bicillin for those with allergies to Lentocilin or Lidocaine.
- Order Lentocilin S in Panorama Inventory just like Bicillin.
- When ordering Bicillin, please contact Lorissa Jones Lorissa.Jones@health.gov.sk.ca or Lisa Haubrich lisa.haubrich@health.gov.sk.ca **before** placing the order in Panorama.



[MEMO-CSPP-Syphilis-Treatment-LentocillinS12-MoH-Mar19-2026.pdf](#)

HOW TO PROCURE ANCILLARY SUPPLIES?

Item Description	Qty: For one Syphilis treatment Dose (2 syringes)	Photo
SYRINGE 6ML LUER LOCK TIP STERILE LATEX FREE DISPOSABLE	Two	
NEEDLE-BLUNT FILL FILTER 18G X 1 1/2	Two	
NEEDLE BLUNT FILL 18G X 1 1/2"	Two	
NEEDLE HYPODERMIC L1.5 IN OD18 GA 1 HANDED DESIGN SAFETY ROBUST SHIELD LATEX FREE	Two	



SUPPORTING DOCUMENTS

BICILLIN SHORTAGE

ISC MHO Memo

MEMO

Indigenous Services Canada Services aux Autochtones Canada

TO: Nurse Managers (NMs) and Community Health Nurses (CHNs) of First Nations Communities in South Central Saskatchewan

FROM: Dr. Ibrahim Khan, Medical Health Officer
Indigenous Services Canada, Saskatchewan Region

DATE ISSUED: April 2, 2026 (under letter release)

RE: Bicillin L-A Shortage – Use of Lentocillin S 1200 for Syphilis Treatment

FILE: Section 5, behind FNHB tab, Saskatchewan CDC Manual

Background

- On December 15, 2025 Public Health Agency of Canada (PHAC) reported a long-acting penicillin G (Bicillin L-A) shortage that was expected to last a few weeks. This shortage has now been extended into May of 2026. The shortage is due to a disruption in the manufacturing of the drug.

Purpose

- On February 18, 2026, to mitigate the shortage, Health Canada approved the temporary use of a **Particulate product, Lentocillin S 1200**, for the treatment of Syphilis.

Temporary Treatment for Syphilis

Brand Name	Medication	Route	Strength	Syphilis Dose	Form	Diluent
Lentocillin S 1200	Benzathine benzoylpenicillin tetrahydrate	Deep IM	1 200 000 IU / 4 mL (per vial)	2 400 000 IU / 8 mL (Use 2 vials)	White Powder	1.5% Lidocaine hydrochloride

- Directions**
- Lentocillin S 1200 can be stored at ambient temperature - between 0°C and 25°C
 - Lentocillin S 1200 comes in a powder form that needs to be reconstituted with the supplied 1.5% lidocaine hydrochloride
 - When reconstituting, inject the lidocaine diluent onto the side of the glass vial – NOT directly into the powder
 - Gently rotate vial between hands for a minimum of 20 seconds, until all powder is dissolved and a viscous suspension remains. Do not shake.
 - Once reconstituted, the suspension should be administered immediately.
 - Draw up entire contents of each vial into separate syringes. NOTE: This may mean the total volume per syringe is greater than 4mL.
 - Lentocillin is administered via deep Intermuscular (IM) injection using an 18g needle
 - Administer **deep IM injection** into the **deltoid** or ventrogluteal sites for adolescents and adults. **AVOID the deltoid** as it is not considered a deep IM site and the maximum volume is only 2mL.
 - Avoid intravenous, intraarterial, subcutaneous route, into/near peripheral nerve or blood vessels. Therefore, **aspirate** before injecting the suspension and observe for blood

Notification Form

Syphilis – Notification Form

Case Name: _____ Page ____ of ____

E) DISEASE EVENT HISTORY

Site / Staging

Infectious (specify) Early latent Non-infectious (specify) Tertiary other than neurosyphilis

Primary Early neurosyphilis Late latent Late neurosyphilis

Secondary Early neurosyphilis Late neurosyphilis

Latent syphilis of Unknown Duration

F) TREATMENT (refer to [SIA Maternal Clinical Protocols](#) and [Clinical Resources](#))

Medical Order provided by: _____ Treated By: _____

Bicillin (2.4 million units once) Date treated: YYY / MM / DD

Bicillin (2.4 million units IM weekly x 2 weeks) Date treated: YYY / MM / DD Date treated: YYY / MM / DD

Bicillin (2.4 million units IM weekly x 3 weeks) Date treated: YYY / MM / DD Date treated: YYY / MM / DD Date treated: YYY / MM / DD

Doxycycline 100mg bid x 14 days Date treatment started: YYY / MM / DD

Doxycycline 100mg bid x 28 days Date treatment started: YYY / MM / DD Date treated: YYY / MM / DD

Other

G) RISK FACTORS

DESCRIPTION	Yes	No	Unknown	Not asked
Immunocompromised - HIV+	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medical History	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Previous STI (if yes, specify which infection and when)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sexual Behaviour	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E-partnering; internet or apps (Add'l info) <small>include the names of the website or apps</small>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Men who have sex with Men (MSM)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Events with multiple sexual partners (party and play)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
More than 2 sexual partners in past 3 months	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No condom use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Goods provided (food, shelter, money or drugs) in exchange for sex	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Goods received (food, shelter, money or drugs) in exchange for sex	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sex with a known case (Add'l info) <small>include the name of the case</small>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Victim of sexual assault (as the source of infection)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Saskatchewan Health Authority Question and Answer

Syphilis Treatment Guidelines

Lentocillin S 1200: Question and Answer Sheet (Q&A)

QR CODE FOR THIS DOCUMENT HERE

- Why is Saskatchewan using Lentocillin S 1200?**
 - Health Canada has authorized the use of Lentocillin S 1200 as a temporary substitute for Bicillin L-A in response to the national shortage of Bicillin L-A.
- Is this a permanent change for Saskatchewan using Lentocillin S 1200?**
 - This is a temporary substitution to address the shortage of Bicillin L-A in Canada.
 - It is unknown how long the shortage will last.
- What is the vial selection for 2.4 million I.U. dose for treatment of Syphilis?**
 - Lentocillin S powder comes in a clear glass vial and is co-packaged with 1.5% lidocaine hydrochloride diluent in an amber glass ampule.

Vial	Diluent Volume for Reconstitution	Dose volume for a 2 400 000 I.U. dose
Use 2 vials	4 mL diluent into each vial	Draw up entire volume from each vial.

- How do we order Lentocillin S 1200?**
 - Order Lentocillin S 1200 from your local public health office, the same way you would Bicillin L-A.
 - Lentocillin S 1200 will be substituted when Bicillin is not available.
- How do we reconstitute Lentocillin S 1200?**
 - Draw up lidocaine with an 18-gauge filtered needle in a syringe. Dispose of the 18-gauge filter needle tip.
 - Attach an 18-gauge blunt needle tip to the syringe.
 - Reconstitute by injecting lidocaine onto the side of the vial. Do not inject directly into the powder.
 - Remove needle and syringe from vial and rotate the vial tightly between the hands for 60 seconds.
 - Withdraw all contents using same 18-gauge blunt needle and syringe.
 - Dispose of the 18-gauge blunt needle tip.
 - Attach an 18-gauge safety needle for administration.
 - A wider-bore needle allows consistent flow of the thick solution, reducing force required to inject.
 - Once medication is reconstituted and drawn up, administer entire contents immediately.
- How do we administer?**
 - Lentocillin S 1200 will have a vial for a total dose of 2 400 000 I.U.
 - Administer as deep intramuscular (IM) injections to either dorogluteal or ventrogluteal sites.
 - Rotate sites, if necessary if two or three weekly injections are required.
 - Avoid the deltoid. The deltoid is not considered a deep IM site and maximum volume is only 2mL.
 - Aspirate before injecting the suspension to avoid intravenous, intraarterial or blood vessels. Observe for blood entering the syringe.
 - Consider using the Z-track technique to prevent needle blockage.
 - Use a slow constant flow rate to prevent needle blockage.
 - Each injection can be given simultaneously by 2 providers or by 2 injections by same provider.



saskhealthauthority.ca
CS-XXXX Posting Date (month day, year)
Page 1 of 3

APRIL 2026

SUPPORTING DOCUMENTS



Indigenous Services Canada / Services aux Autochtones Canada

PROTÉGÉ A / PROTECTED A

MEMO

TO: Nurse Managers (NMs) and Community Health Nurses (CHNs) of First Nations Communities in South Central Saskatchewan
FROM: Dr. Ibrahim Khan, Medical Health Officer, Indigenous Services Canada, Saskatchewan
DATE ISSUED: April 1, 2026 until further notice
RE: Bicillin L-A Shortage – Use of Lentocilin
FILE: Section 5, behind FNIHB tab, Saskatchewan

Background

- On December 15, 2025 the Public Health Agency (Bicillin® L-A) shortage that was expected to last into May of 2026. The shortage is due to a disruption in the supply of the active ingredient.
- The Ministry of Health expects to reach and hold 7, 2026. Once the Bicillin reserve is met, Lentocilin replacement treatment.

Purpose

- On February 18, 2026, to mitigate the shortage, Portuguese product, Lentocilin S 1200, for the treatment of syphilis.

Temporary Treatment of Syphilis

Brand Name	Medication	Route	Strength
Lentocilin S 1200	Benzathine benzylpenicillin tetrahydrate	Deep IM	1 200 000 mL (per vial)

Directions

- Lentocilin S 1200 should be stored at ambient temperature.
- Lentocilin S 1200 comes in a powder form that needs to be reconstituted with lidocaine hydrochloride;
 - When reconstituting, draw up 4 mL of the lidocaine diluent into the side of the glass vial.
 - Gently rotate vial between hands for 20-30 seconds until a viscous suspension remains. Do not shake.
 - Once reconstituted, the suspension should be used immediately.
 - Draw up entire contents of each vial into a syringe. The total volume per syringe is 18 mL.
 - [Bicillin-L-A Shortage - How to Reconstitute](#)



Indigenous Services Canada / Services aux Autochtones Canada

PROTÉGÉ A / PROTECTED A

MEMO

TO: Nurse Managers (NMs) and Community Health Nurses (CHNs) of First Nations Communities in South Central Saskatchewan
FROM: Dr. Ibrahim Khan, Medical Health Officer, Indigenous Services Canada, Saskatchewan Region
DATE ISSUED: April 2026 until further notice
RE: Bicillin L-A Shortage - Implementation Plan
FILE: Section 5, behind FNIHB tab, Saskatchewan CDC Manual

In response to the national shortage of Bicillin L-A for the treatment of syphilis, the Saskatchewan Ministry of Health has approved the temporary use of Lentocilin S 1200. See Memo: [Lentocilin Bulletin March 19 2026](#)

* As with Bicillin L-A, one dose of Lentocilin S 1200 equals 2 syringes of 1.2 million IU for a total of 2.4 million IU. *

Product and Packaging

- Unlike Bicillin L-A, Lentocilin S 1200 does not include ancillary supplies.
- Each Lentocilin S 1200 package contains:
 - One vial of powdered medication
 - One ampule of lidocaine (diluent)
 - Note: Two packages are required to provide 1 full dose

Ordering and Distribution

There is no change to the process, with the following updates:

- Public Health teams may now order Lentocilin S 1200 through Panorama (Inventory Module) per syringe.
- The existing provider order form can continue to be used, substituting Lentocilin S 1200 for Bicillin L-A.
- Public Health teams may reserve up to 6 syringes (3 doses) of Bicillin L-A for patients with Lentocilin ingredient allergies.
- Lentocilin S 1200 must be stored at ambient temperature (8–25°C).
 - Public Health teams that ship or deliver the medication are asked to place a sticker on the outer package stating: "DO NOT FREEZE."

Reconstitution and Administration

- Lentocilin S 1200 must be reconstituted and administered immediately after preparation.
- Lentocilin is a thick solution and requires wider-bore needles to allow appropriate flow during deep intramuscular (IM) injection.

Due this being an interim measure, the Syphilis RNCP has not been updated, at this point

Dr. Khan has shared two memos supporting the use of Lentocilin.

SUPPORTING DOCUMENTS

BICILLIN SHORTAGE

Confidential Notification Form

- No changes will be made to the Notification Form
- If Lentocilin S 1200 was administered, select “other” and write Lentocilin 2.4 million units.



Syphilis – Notification Form

Case Name: _____
Page ____ of ____

E) DISEASE EVENT HISTORY

Site / Staging	
<input type="checkbox"/> Infectious (specify)	<input type="checkbox"/> Non-infectious (specify)
<input type="checkbox"/> Primary	<input type="checkbox"/> Early latent
<input type="checkbox"/> Secondary	<input type="checkbox"/> Early neurosyphilis
	<input type="checkbox"/> Late latent
	<input type="checkbox"/> Tertiary other than neurosyphilis
	<input type="checkbox"/> Late neurosyphilis
<input type="checkbox"/> Latent syphilis of Unknown Duration	

F) TREATMENT (refer to [SHA Maternal Clinical Protocols](#) and [Clinical Resources](#))

Medical Order provided by: _____ Treated By: _____

<input type="checkbox"/> Bicillin (2.4 million units once)	Date treated: YYYY / MM / DD		
<input type="checkbox"/> Bicillin (2.4 million units IM weekly x 2 weeks)	Date treated: YYYY / MM / DD	Date treated: YYYY / MM / DD	
<input type="checkbox"/> Bicillin (2.4 million units IM weekly x 3 weeks)	Date treated: YYYY / MM / DD	Date treated: YYYY / MM / DD	Date treated: YYYY / MM / DD
<input type="checkbox"/> Doxycycline 100mg bid x 14 days	Date treatment started: YYYY / MM / DD		
<input type="checkbox"/> Doxycycline 100mg bid x 28 days	Date treatment started: YYYY / MM / DD		
<input type="checkbox"/> Other: _____			Date treated: YYYY / MM / DD

G) RISK FACTORS

DESCRIPTION	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Unknown	<input type="checkbox"/> Not asked
Immunocompromised - HIV+	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medical History	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Previous STI (if yes, specify which infection and when)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sexual Behaviour	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E-partnering: internet or apps: (Add'l Info) Include the names of the website or apps	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Men who have sex with Men (MSM)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Events with multiple sexual partners (party and play)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
More than 2 sexual partners in past 3 months	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No condom use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Goods provided (food, shelter, money or drugs) in exchange for sex	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Goods received (food, shelter, money or drugs) in exchange for sex	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sex with a known case (Add'l Info.) Include the name of the case	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Victim of sexual assault (as the source of infection)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

APRIL 2026

SUPPORTING DOCUMENTS

BICILLIN SHORTAGE

APRIL 2026

Syphilis Treatment Guidelines

Lentocilin S 1200

- Health Canada has authorized the use of Lentocilin S 1200 in response to the national shortage of Bicillin L-A
- Lentocilin S 1200 provides the same medication

Substitute Treatment for Syphilis

Brand Name	Medication
Lentocilin S 1200	Benzathine benzylpenicillin tetrahydrate

Vial Selection

- Lentocilin S powder comes in a clear glass vial

Vial	Diluent Volume for Reconstitution	Dose volume for a 2 400 000 I.U. dose
Use 2 vials	4 mL diluent into each vial	Draw up entire volume from each vial.

Reconstitution of Lentocilin S 1200

- Draw up lidocaine with an 18-gauge filter needle tip
- Attach an 18-gauge **blunt** needle tip to the syringe
- Inject lidocaine onto the side of the vial
- Remove needle and syringe from vial
- Withdraw all contents** using same 18-gauge blunt needle tip
- Attach an 18-gauge **safety** needle tip
 - A wider-bore needle allows consistent flow of the thick solution, reducing force required to inject.
- Once medication is reconstituted

Intramuscular Administration

- Lentocilin S 1200 will have 2 vials for a total dose of 2 400 000 I.U.
- Administer as **deep intramuscular (IM)** injections to either dorsogluteal or ventrogluteal sites. Rotate sites, if necessary if two or three weekly injections are required.
- Avoid** the deltoid. The deltoid is **not** considered a deep IM site and maximum volume is only 2mL.
- Aspirate** before injecting the suspension to avoid intravenous, intraarterial or blood vessels. Observe for blood entering the syringe.
- Use a **slow constant flow rate** to prevent needle blockage.
- Each injection can be given simultaneously by 2 providers or by 2 injections by same provider.

Stability, Storage and Rep

- Store and transport at a controlled temperature
- Protect from light and moisture
- Report any case of serious adverse reaction

Allergy Alerts

- Lentocilin contains penicillin
- Lentocilin contains benzathine
- Diluent contains lidocaine

Syphilis Treatment Guidelines

Lentocilin S 1200: Question and Answer Sheet (Q&A)

QR CODE FOR THIS DOCUMENT [HERE](#)

- 1. Why is Saskatchewan using Lentocilin S 1200?**
 - Health Canada has authorized the use of Lentocilin S 1200 as a temporary substitute for Bicillin L-A in response to the national shortage of Bicillin L-A.
- 2. Is this a permanent change for Saskatchewan using Lentocilin S 1200?**
 - This is a temporary substitution to address the shortage of Bicillin L-A in Canada.
 - It is unknown how long the shortage will last.
- 3. What is the vial selection for 2.4 million I.U. dose for treatment of Syphilis?**
 - Lentocilin S powder comes in a clear glass vial and is co-packaged with 1.5% lidocaine hydrochloride diluent in an amber glass ampule.
- 4. How do we order Lentocilin S 1200?**
 - Order Lentocilin S 1200 from your local public health office, the same way you would Bicillin L-A.
 - Lentocilin S 1200 will be substituted when Bicillin is not available.
- 5. How do we reconstitute Lentocilin S 1200?**
 - Draw up lidocaine with an 18-gauge **filtered** needle in a syringe. Dispose of the 18-gauge filter needle tip.
 - Attach an 18-gauge **blunt** needle tip to the syringe.
 - Reconstitute by injecting lidocaine onto the side of the vial. Do not inject directly into the powder.
 - Remove needle and syringe from vial and rotate the vial tightly between the hands for 60 seconds.
 - Withdraw all contents using same 18-gauge blunt needle and syringe.
 - Dispose of the 18-gauge blunt needle and syringe.
 - A wider-bore needle allows consistent flow of the thick solution, reducing force required to inject.
 - Once medication is reconstituted and drawn up, administer entire contents immediately.
- 6. How do we administer?**
 - Lentocilin S 1200 will have 2 vials for a total dose of 2 400 000 I.U.
 - Administer as **deep intramuscular (IM)** injections to either dorsogluteal or ventrogluteal sites. Rotate sites, if necessary if two or three weekly injections are required.
 - Avoid** the deltoid. The deltoid is **not** considered a deep IM site and maximum volume is only 2mL.
 - Aspirate** before injecting the suspension to avoid intravenous, intraarterial or blood vessels. Observe for blood entering the syringe.
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Saskatchewan Health Authority

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The SHA collaborated with ISC, NITHA and other partners and the pilot sites, creating a Question-and-Answer document as well as the Syphilis Treatment Guidelines

Both are useful tools that can be shared with the CHNs in community

[Syphilis - Public Health | SaskHealthAuthority](https://www.saskhealthauthority.ca/intranet/health-provider-resources/clinical-resources/z-list-clinical-resources/public-health/syphilis-public-health)
<https://www.saskhealthauthority.ca/intranet/health-provider-resources/clinical-resources/z-list-clinical-resources/public-health/syphilis-public-health>



QUESTIONS

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APRIL 2026

THANK
YOU

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