

AMT Medicinal Cannabis Content Request Instructions

Purpose

Use this fact sheet to submit a complete and correct medicinal cannabis request for inclusion in the Australian Medicines Terminology (AMT).

Before you start

Ensure your product is eligible for inclusion in the AMT:

- If any active ingredients are displayed with an inequality and are above Therapeutic Goods (Standard for Medicinal Cannabis) (TGO 93) Order 2017, subsection 10(1) thresholds, the product cannot be modelled in the AMT and therefore will not be added into the terminology.
- The Therapeutic Goods (Standard for Medicinal Cannabis) Order 2017 (TGO 93), subsection 10(1) definition of an active cannabinoid is as follows:
 - Any tetrahydrocannabinol (THC), including corresponding acids, $\geq 1.0\%$ w/w or w/v of the product.
 - Any other cannabinoids, including corresponding acids, $\geq 2.0\%$ w/w or w/v of the product.

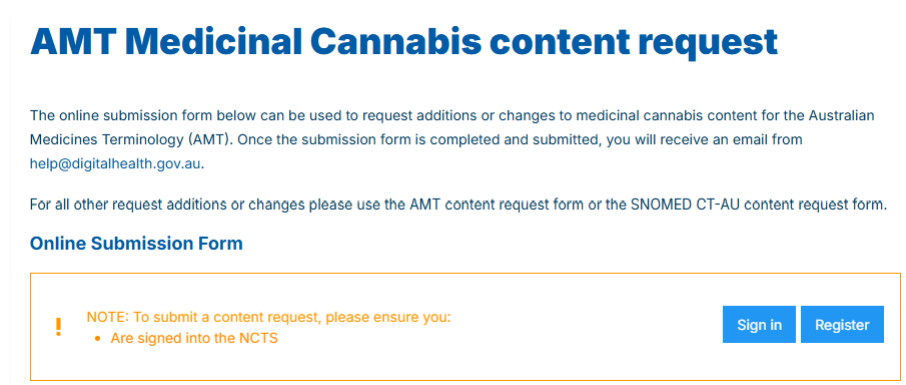
Have the following ready:

- Sponsor email address
- Full ingredient list and strengths
- Supporting documents (Product Information (PI) / Consumer Medicines Information (CMI), Certificate of Analysis (CoA), product label)

Step-by-Step Checklist

1 Access the Form

- Go to: [AMT Medicinal Cannabis content request - National Clinical Terminology Service](#)
If you don't have an existing NCTS account go to step 2A. If you do have an existing account, please proceed to step 2B.



AMT Medicinal Cannabis content request

The online submission form below can be used to request additions or changes to medicinal cannabis content for the Australian Medicines Terminology (AMT). Once the submission form is completed and submitted, you will receive an email from help@digitalhealth.gov.au.

For all other request additions or changes please use the AMT content request form or the SNOMED CT-AU content request form.

Online Submission Form

NOTE: To submit a content request, please ensure you:

- Are signed into the NCTS

[Sign in](#) [Register](#)

2 A) Create a new account

- Check the blue **Register** button
- Complete the registration form with your details
- You will receive a confirmation email once your account has been activated
- After activation, return to the [AMT Medicinal Cannabis content request - National Clinical Terminology Service](#) page.

Or

2 B) Log into an existing account

- Click Sign In.
 - Log in using your NCTS user credentials.
- Once signed in, proceed to step 3 to submit the AMT Medical Cannabis content request form.

3 Confirm Your Details

- Your details are **pre-filled**
- Review and continue
- No changes are needed unless incorrect

4 Enter Product Details

(All fields marked * are mandatory)

Change requested by

- Your name **or** company name (e.g. ABC Health)

Reason

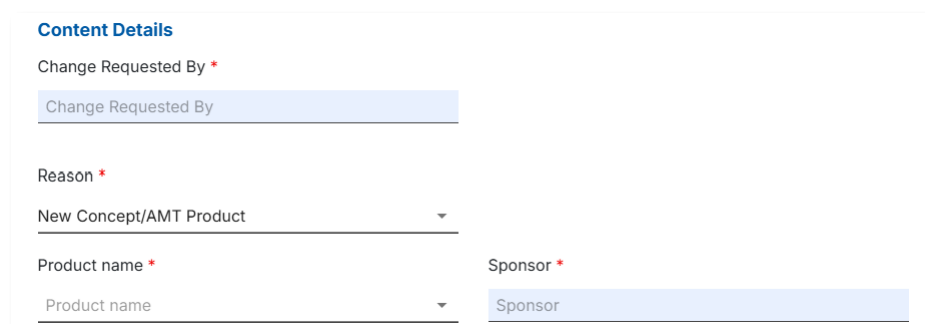
- Select '**New product**' or '**Concept modification**'

Product name

- Type the product name
- 👉 Click '**New**' after typing in the name if the product name does not exist in the database

Sponsor

- Sponsor **email address**



The screenshot shows a form titled 'Content Details'. It contains the following fields:

- Change Requested By ***: A text input field with the placeholder 'Change Requested By'.
- Reason ***: A dropdown menu with the selected option 'New Concept/AMT Product'.
- Product name ***: A dropdown menu with the placeholder 'Product name'.
- Sponsor ***: A text input field with the placeholder 'Sponsor'.

Ingredients

For **each active ingredient** (e.g. THC, CBD):

- Enter ingredient name
- Enter strength value
- Choose the appropriate units (mg/mg, mg/mL or mg)

Strength rules

- For mass fractions or percentage strengths expressed as mg/mg, the value must always be < 1 (i.e. entered as a decimal, not a percentage).
- Example: 30% THC dried flower = **0.3 mg/mg**

👉 Click **'Add ingredient'** after **EVERY** ingredient

👉 **Do not forget to click it after the final ingredient**

👉 If you need to **edit** an ingredient, click on the bin icon and add the ingredient again

Ingredient	Strength	Unit	Actions
! Empty. Please use the "Add Ingredient" controls below.			
Ingredient	Strength Value	Unit	ADD INGREDIENT

Other product details

- Use the drop-down menus to enter further details about the product
- Choose the appropriate unit of use for the product:
 - 'mg' for solid dosage forms
 - 'mL' for liquid dosage forms
 - 'each' for discrete dosage forms such as tablets
- You may add multiple pack sizes, if appropriate
 - 👉 Click **'Add'** after **EVERY** pack size
- NB: Cultivar is optional

Dose Form * Dose Form	Pack sizes * ! No pack sizes added yet.
Container type * Container type	Size Each X ADD
Cultivar Cultivar	
Medicinal Cannabis Category * Medicinal Cannabis Category	
Poison Schedule * Poison Schedule	

5 Add Additional Information

Detailed description

Include any relevant information, such as:

- Previous product names
- Future release / not yet on market
- Intended use
- Target patients (e.g. elderly, specific conditions)
- Clinical or formulation details

Business reason

Explain **why AMT inclusion is needed** such as:

- Who prescribes it (clinic or provider)
 - Approximate prescriptions per month
 - Impact of missing AMT content on clinical use
- ✗ 'Not currently in the AMT' alone is **not sufficient**



The screenshot shows a web form with two main sections. The first section is titled 'Detailed Description *' and contains a large text input area with the placeholder text 'Detailed Description'. The second section is titled 'Business Reason for Request *' and contains a large text input area with the placeholder text 'Business Reason for Request'. Both sections have a small icon in the bottom right corner of the input area.

6 Upload Required Documents

Upload **all** the following:

- Current **PI and/or CMI**
- Current **Certificate of Analysis (CoA)**
- **Product label**
- Document linking CoA product codes to product names, if required
- Statement of product schedule, if it is not mentioned in any of the above

Then:

- Tick '**I'm not a robot**'
- Click '**Submit**'

- If the **'Submit'** button is greyed out, check the form carefully to ensure all mandatory fields are filled out

Required Document Uploads

Please upload Product Label and Certificate of Analysis (CoA), plus either Product Information (PI) or Consumer Medicine Information (CMI).

Product Information (PI)

Upload Product Information PDF

Consumer Medicine Information (CMI)

Upload Consumer Medicine Information PDF

Certificate of Analysis (CoA) *

Upload Certificate of Analysis PDF

Product Label *

Upload Product Label (PDF, JPG, JPEG, PNG)

☐ I'm not a robot
reCAPTCHA is changing its terms of service. [Take action.](#)

 reCAPTCHA
[Privacy](#) - [Terms](#)

SUBMIT

7 Submission Confirmation

- A confirmation pop-up appears
- Your request has been **successfully submitted** ✓

Certificate of Analysis (CoA) *

✓ Uploaded Flawless Victory 25_ THC 25_ dried herb for vaporisation, 10 g, tin.pdf.pdf (2804.3 KB) - 

Product Label *

✓ 

Additional

Upload any additional documents or links:

- scheduling or clinical trial documents
- documents link
- additional product information
- other supporting documents

Upload  Up to 3 files. 3 remaining.

☐ I'm not a robot
reCAPTCHA is changing its terms of service. [Take action.](#)

 reCAPTCHA
[Privacy](#) - [Terms](#)

Submission Complete

Your request has been submitted. Keep the ticket reference(s) below for future enquiries.

TO_DO: AMT-106471

CLOSE

- You will receive an email confirmation that your request has been **successfully submitted**

Common Mistakes to Avoid

- Forgetting to click '**New**' after adding the product name
- Forgetting to click '**Add ingredient**' after the last ingredient
- Entering strength values greater than 1 for mg/mg (mass fractions) — values for mg/mg must always be less than 1
- Uploading incomplete or outdated documents
- Providing an insufficient business reason

FAQ

What do I do if I made a mistake with my submission?

- You will receive a confirmation email after you have successfully submitted your request. You may reply to this email with additional information, however, if the required changes to your original submission are too complex, you may be asked to submit a new request.

How do I reset the form?

- Click on the refresh button of your browser.

Who do I contact for additional help?

- Email help@digitalhealth.gov.au with your query