



Policy code	DTP_CLO_0924	
Date	September, 2024	
Purpose	To ensure a consistent procedural approach to clopidogrel administration.	
Scope	Applies to Queensland Ambulance Service (QAS) clinical staff.	
Health care setting	Pre-hospital assessment and treatment.	
Population	Applies to all ages unless stated otherwise.	
Source of funding	Internal – 100%	
Author	Clinical Quality & Patient Safety Unit, QAS	
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Drug class[1]

Antiplatelet

Pharmacology

Clopidogrel is a specific and potent platelet aggregation inhibitor. It selectively inhibits the binding of adenosine diphosphate (ADP) to its platelet receptor, thereby inhibiting platelet aggregation.^[1,2]

Metabolism

Hepatic metabolism with near equal amounts excreted in urine and faeces.^[1]

Indications [1-3

- For patients with STEMI (as defined by the relevant QAS CPP); AND
 - who have been accepted for pPCI (as an adjunct medication to aspirin and heparin) and the receiving interventional cardiologist is requesting clopidogrel administration; OR
 - who have **received tenecteplase** (and have been administered aspirin and enoxaparin)

Contraindications (--3

- Allergy AND/OR Adverse Drug Reaction
- Patients aged less than 18 years
- Modified Rankin Scale equal to or greater than 4
- History of terminal illness, or under the care of a palliative care service
- Symptoms suggestive of an acute aortic dissection
- Prior intracranial haemorrhage
- Active bleeding (excluding menstruation)

Precautions

Severe renal impairment

Side effects 1

• Haemorrhage

Presentation

• Tablet (pink), 75 mg clopidogrel

Onset (PO)	Duration (PO)	Half-life
≈ 30 min (within 5 hours of a 300 mg loading dose 80% of platelet activity will be inhibited)	7–10 days (antiplatelet)	8 hours

Schedule

• S4 (Restricted drugs).

Routes of administration

Per oral (PO)



Special notes

 Ambulance officers must only administer medications for the listed indications and dosing range. Any consideration for treatment outside the listed scope of practice requires mandatory approval via the QAS Clinical Consultation and Advice Line.

Adult dosages[1-3]

Patients with STEMI (as defined by the relevant QAS CPP) who have been accepted for pPCI (as an adjunct medication to aspirin and heparin) AND the receiving interventional cardiologist is requesting clopidogrel administration



PO

≥ 18 years – **600 mg** Swallowed with a small quantity of water.

Patients with STEMI (as defined by the relevant QAS CPP) who have received tenecteplase (and have been administered aspirin and enoxaparin)



PO

≥ 18 years – **300 mg** Swallowed with a small quantity of water.

Paediatric dosages

Clopidogrel to paediatric patients.