## St John WA

## Structured Administration and Supply Agreement – Metoclopamide Injection

SASA Details	
Title:	Metoclopramide Injection administration for St John WA Paramedic
Identifier:	Metoclopramide Amp 1.0

Issuing Authority	
Hospital Name:	St John WA
Address:	209 Great Eastern Highway BELMONT, 6104
Contact:	(08) 9334 1222

Authorised Persons		
Practitioners:	St John WA Critical Care Paramedics	
Location:	All pre-hospital regions of Western Australia (WA)	
Qualification:	AHPRA Registered Paramedic who has completed the required training to be credentialed by St John WA to practice in the position of Critical Care Paramedic or Critical Care Paramedic Intern (CCP)	

Authorised Medicine				
Medicine Name:	Metoclopramide	Brand:	APO	
Form:	Ampoule	Strength:	10mg/2mL	
Dose:	10mg	Quantity:	1	
Route:	IV/IO/IM		I	
Instructions:	Administer			

Approved Circumstances		
Authorised to:	Administer IV/IO/IM 10mg Metoclopramide as a single dose, repeated in 10-20 minutes if required	
Place:	WA Pre-hospital environment	
Patients:	St John WA Ambulance patients	
Medical Condition:	Nausea and vomiting associated with pain or GI disturbance	
	Prophylaxis in penetrating eye injuries	

Clinical / Other Information		
Patient Inclusion	St John WA patients	
Patient Exclusion:	Known allergy or adverse drug reaction to metoclopramide	
	Children under 16 years of age	
	Parkinsons Disease, Phaeochromocytoma, GI obstruction or perforation	
Special Instructions:		
Administration Notes:	NA	
Clinical Guidelines	See;	
	St John WA Medication Guideline: Metoclopramide	

Comments

Approval				
Date of Issue:				
Date of Expiry:				
Clinical Governance Committee				
Committee:	St John WA Medical Advisory Committee (MAC)			
Chair Name:	Dr Gayle Christie			
Date:				
Medical Director				
Name:	Dr Gayle Christie			
Date:	Signature: Jayle Chasle			
Chief Executive Officer				
Name:	Mr Kevin Brown			
Date:	25/8 (Z) Signature:			