

TRANEXAMIC ACID (TXA) ADMINISTRATION**FOR USE IN ADULT PATIENTS (≥15 years old)****BLS**

Universal Protocol #601

General Trauma Protocol #660

Pulse Oximetry – O₂ administration per Airway Management Protocol #602**ALS Standing Orders**

- **Indications:**
 - Blunt or penetrating traumatic injury with SBP ≤90mmHg
 - Significant blood loss with ongoing bleeding not controlled by direct pressure, hemostatic agents, or tourniquet application
- **Tranexamic Acid (TXA) 1 gm in 100 mL IV/IO infusion over 10 minutes, no repeat**

Base Hospital Orders Only

As needed

Notes**Mixing the Concentration**

- Maintain sterile technique
- 10mg/mL concentration
 - Supplies needed: 1 gm Tranexamic Acid (TXA), 100mL of Normal Saline
- Mixing instructions:
 - 1gm of TXA into 100mL Normal Saline
- Label the bag with the drug name and final concentration
 - Example: "TXA 1gm in 100mL"

Contraindications:

- >3 hours post injury
- Isolated extremity hemorrhage when bleeding has been controlled and if there is a strong expectation of re-implantation
- Isolated spinal shock
- Isolated head injury
- Non-blood loss conditions
- Traumatic Arrest with >5 min of CPR without ROSC
- Drowning or hanging victims
- <15 years old
- Active Thromboembolic event (within 24 hrs); i.e. CVA, MI, Pulmonary Embolism, or DVT
- Hypersensitivity or anaphylactic reaction to TXA

Possible adverse effects include:

- Hypotension with rapid IV infusion
- Chest tightness, difficulty breathing
- Facial flushing, swelling in hands or feet
- Blurred vision