

## Tranexamic Acid (TXA) Protocol

### PARAMEDIC ONLY

**Tranexamic Acid (TXA)** is a synthetic amino acid (lysine) that blocks plasminogen from being converted to the enzyme plasmin. Plasmin works to break down already-formed blood clots in the human body by attacking and breaking down fibrin destroying clots in a process known as fibrinolysis. TXA is now being used to treat severely injured trauma patients who have or are at risk for severe hemorrhage.

**Indications:** Any trauma patient  $\geq 14$  years of age, at high risk for ongoing internal hemorrhage and meeting one or more of the following criteria:

- Systolic BP  $< 90$ mmHg
- Patients  $\geq 65$  years of age with systolic BP  $< 110$ mmHg.
- Tachycardia  $> 120$  beats per minute with signs of hypo-perfusion (confusion, altered mental status, cool extremities, etc.)

#### Contraindications:

- Injuries  $> 3$  hours old.
- Evidence of Disseminated Intravascular Coagulation (DIC)
- Patients  $< 14$  years of age.
- Hypersensitivity to the drug.

1. **How Supplied:** 10mL vial containing 1000mg
2. **Preparation:** Mix 2000mg (2G) of TXA in 250 mL of 0.9% Normal Saline.
3. **Administration:** Infuse over 10 minutes
  - 10 gtts/mL tubing at a drip rate of 4 gtts/second.
  - Infusion pump (if available) at 1500mL/hr.
4. Notify receiving hospital of TXA administration.
5. Clearly document mechanism of injury, time injury/incident occurred, indications for use and time TXA was administered.