**TRANEXAMIC ACID (TXA) ADMINISTRATION**

**FOR USE IN ADULT PATIENTS (≥15 years old)**

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<td>Universal Protocol #601</td>
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<td>General Trauma Protocol #660</td>
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<td>Pulse Oximetry – O₂ administration per Airway Management Protocol #602</td>
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**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 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