

Tuolumne County Emergency Medical Services Agency
EMS System Policies and Procedures

Policy: ADMINISTRATION OF TRANEXAMIC ACID (TXA)

#552.90

Medical Director: 
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EMS Coordinator: 
Clarence Teem, M.S., EMT-P

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I. AUTHORITY

Division 2.5, California Health and Safety Code, Section 1797.220, California Code of Regulations, Title 22, Division 9, Section 100144, 100145, 100146 and 100063.

II. PURPOSE

To authorize EMT-Ps to administer TXA to trauma patients meeting inclusion criteria approve by the EMS Medical Director.

III. POLICY

- A. This procedure shall only be performed EMT-Ps with training in the uses, indications, contraindications, dosage, and untoward effects of TXA.
- B. TXA will be administered to hemorrhaging patients who meet the following criteria:
 - 1. Blunt or penetrating trauma to the torso or postpartum after delivery of the placenta with signs and symptoms of hemorrhagic shock including, but not limited to, a systolic blood pressure of less than 90 mmHg.
 - 2. Extremity injury when bleeding cannot be controlled by direct pressure and tourniquet.
- C. TXA shall not be administered to:
 - 1. Any patient with an active thromboembolic event (within the last 24 hours) - i.e. active stroke, myocardial infarction or pulmonary embolism.
 - 2. Any patient with a hypersensitivity anaphylactic reaction to TXA
 - 3. Any patient more than three hours post injury

IV. PROCEDURE

- A. Administer 1 gram of TXA in 100ml of 0.9% Normal Saline for adult patients. Administer 15 mg/kg, to a maximum of 1 gram, of TXA in 100ml of 0.9% Normal Saline for pediatric patients. This is to be given over 10 minutes via intravenous or intraosseous lines. Ideally this is given within the first hour following the injury, but shall not be given after three hours following the injury.
- B. Pre and post TXA administration vital signs shall be obtained and documented.
- C. The following data points shall be collected and documented on the patient care record:
 - 1. Time of Injury
 - 2. Time of first dose of TXA
 - 3. Demographics: age, gender, race

4. Glasgow Coma Scale (GCS)
5. Vital signs: prior to and after first dose, including heart rate, respiratory rate, body temperature, blood pressure, capillary refill and skin signs.
6. Mechanism of injury
7. Body area injured
8. Estimated blood loss

V. QUALITY ASSURANCE PROCEDURE

- A. 100% of patients who receive TXA will be reviewed by the QA/QI Committee for compliance with this policy and treatment guidelines

VI. TRAINING

- A. Prior to administering TXA EMT-Ps must complete a TXA administration class and pass a written exam approved by the EMS Medical Director.