


**TRANEXAMIC ACID
2024**

[PARAMEDIC]

ACTIONS	<ol style="list-style-type: none"> 1. Tranexamic Acid is a fibrinolytic inhibitor, preventing the breakdown of blood clots. 2. Function: To help stabilize clot formation and decrease bleeding associated with traumatic hemorrhagic shock. 3. The earlier TXA is given after injury the more effective it will be.
INDICATIONS	<ol style="list-style-type: none"> 1. Isolated Traumatic Brain Injury with GCS \leq 12 OR 2. Suspected hemorrhagic shock in a trauma patient with mechanism AND systolic BP < 90 3. Post-partum hemorrhage <p>IN ALL CASES ADMINISTRATION SHOULD NOT OCCUR MORE THAN 3 HOURS AFTER INJURY.</p>
CONTRAINDICATIONS	<ol style="list-style-type: none"> 1. Pediatric patients less than 12 years old. 2. Time since injury exceeds 3 hours. 3. Patients with known, active intravascular clotting (DVT or PE). 4. Hypotension and/or shock due to non-hemorrhagic, nontraumatic causes
PRECAUTIONS	<p>TXA administration is time-sensitive, and therefore should be given within the first hour of injury, when possible, for the most benefit. Administration past three hours can have negative effects, and be potentially harmful.</p>
SIDE EFFECTS	<ol style="list-style-type: none"> 1. Serious Reaction: Vision change, thromboembolism, ureteral obstruction, seizure, hypotension, hypersensitivity reaction. 2. Common Reaction: nausea, vomiting, diarrhea, giddiness, dizziness.
ADULT 	<p>TXA Bolus (IV/IO): Mix 2 grams in 100ml of NS and infuse over 10 minutes before other IV fluids if possible. (The previous protocol called for 1 gram).</p>
PEDATRIC	<p>This medication is not indicated for pediatric use without consulting on-line medical control.</p>
KEY POINT	<p>Document the following:</p> <ol style="list-style-type: none"> 1. Any noted side effects; 2. Dose, amount of medication, route of administration

	and indication for use; 3. Any change in patient physical assessment, clinical presentation and vital signs..
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