## TRANEXAMIC ACID

<table>
<thead>
<tr>
<th>CLASSIFICATION</th>
<th>antifibrinolytic agent, antihemophilic agent, hemostatic agent, lysine analog</th>
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</thead>
<tbody>
<tr>
<td>TRADE NAME(S)</td>
<td>TXA</td>
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<tr>
<td>DESIRED EFFECTS</td>
<td>Reduce the blood loss in trauma patients with severe hemorrhage</td>
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<td>MECHANISM OF ACTION</td>
<td>Tranexamic acid is a synthetic derivative of the amino acid lysine that inhibits fibrinolysis by blocking the lysine binding sites on plasminogen.</td>
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### INDICATIONS
- Adult patient => 16 years old
- Evidence of marked blood loss
- Persistent HR > 110 bpm despite 500 mL NS IVFs, OR…
- Persistent BPsys < 90 mmHg despite 500 mL NS IVFs
- Major trauma with clear abdominal/pelvic injury
- Arterial bleeding you cannot stop with direct pressure or a tourniquet

### CONTRAINDICATIONS
- Pediatric patient < 16 years old. No TXA in kids.
- Non-hemorrhagic shock
- Non-traumatic shock (i.e. neurogenic or septic shock)
- Isolated head injury
- Allergy

### ADVERSE REACTIONS
TXA has not been shown to cause significant increase in deep venous thrombosis (DVT), pulmonary embolus (PE), myocardial infarction (MI), or stroke in published trials to date.

### DRUG INTERACTIONS
Avoid concurrent use of TXA with coagulation factors.

### PRECAUTIONS
Administration of the medication can be completed in the emergency department.

### DOSING REGIMEN
- Adult - 1 gram / 100 ml IV piggyback. Run over 10 minutes. Note 250 ml NS bag can be used if 100 ml not available.

### PROTOCOL LOCATION
- Trauma Emergencies