



EMS System for Metropolitan Oklahoma City and Tulsa 2017 Medical Control Board Treatment Protocols

Approved 11/9/16; Effective 2/1/17: replaces all prior versions

17K – TRANEXAMIC ACID (TXA, CYCLOKAPRON)

PARAMEDIC

Class: Anti-Fibrinolytic

Actions/Pharmacodynamics: Promotes clot formation in the setting of massive hemorrhage.

Indications: Hemostatic Agents (10I)

Traumatic hemorrhagic shock less than 3 hours from injury with suspected need for massive blood transfusion (clinical evidence of marked blood loss – internal or external, sustained tachycardia and hypotension, see Protocol 10I for exact VS parameters by age group)

Contraindications: Non-hemorrhagic shock
Non-traumatic hemorrhagic shock
Hemorrhagic shock stabilized with other hemostatic agents/measures

Pharmacokinetics: Onset of action within 4 hours after IV administration, exact time of onset unclear and variable. Delayed effects up to 48 hours consistent with anti-inflammatory actions.

Side Effects: While a theoretical concern, TXA has not been shown to cause significant increase in deep venous thrombosis, pulmonary embolism, myocardial infarction, or stroke in published trials to date.

Dosage: **Hemostatic Agents – Adult (10I)**
(Hemorrhagic shock as described above)
1 gram IVPB over 10 minutes.
Administer in 100 mL or 250 mL NS.

Hemostatic Agents – Pediatric Ages 10 and Above (10I)
(Hemorrhagic shock as described above)
15 mg/kg up to 1 gram IVPB over 10 minutes.
Administer in 100 mL or 250 mL NS.

How Supplied: 1 gram/10 mL vial or ampule (100 mg/mL)
(Always check concentration and dose per container at time of patient medication administration)