Tranexamic Acid (TXA) (Optional)

Protocols:
1. Shock

Indications (TRAUMATIC CAUSE ONLY):
1. Evidence of marked blood loss
2. Sustained tachycardia (>110/Min, despite a 500 ml bolus of IVFs)
3. Initial systolic BP < 90
4. Sustained hypotension (<100 systolic, despite a 500 ml bolus of IVFs)
5. Major trauma with suspicion for pelvic and/or abdominal injury
6. Major arterial bleeding not controlled with tourniquet

Contraindications:
1. Hemorrhagic shock from a non-traumatic cause (massive Gastrointestinal or Gynecological bleeding)

Dosing:
1. Adults
   a. 1 g of TXA mixed in 100 ml of normal saline
   b. Administered over 10 minutes
2. Pediatrics (only appropriate inside a formal research study)
   a. 15 mg/kg TXA
   b. Administered over 10 minutes

Precautions:
1. Must be administered within 3 hours of injury
2. Do not delay transport for administration of TXA
3. TXA delivered in the field is a loading dose
   a. It is not effective if a second dose is not given at the appropriate time in the hospital
   b. It is very important that the administering provider make note of the time that the loading dose is given

**Not in Medication Box**