

Position Statement: Administration of Tranexamic Acid (TXA)

Tranexamic Acid (TXA) acts as an antifibrinolytic by inhibiting plasminogen activation and plasmin activity thus stabilizing a clot. Both Level II Trauma Centers in the NCRTAC region support the administration of TXA for injured patients meeting the following indications.

Indication requirements:

- Must appear to be 18 years of age or older
- Ongoing significant hemorrhage, or strong clinical suspicion of hemorrhage (systolic BP < 90 mmHg and/or heart rate > 110 beats/minute)

Administration:

- TXA is ideally given within the first hour of active bleeding and should not be administered more than three hours after injury
- TXA 1 gram IV/IO over 10 minutes followed by TXA 1 gram IV/IO over eight hours

Prehospital Administration:

- The benefit of prehospital administration of TXA has yet to be determined. Services choosing to administer TXA in the field should do so in coordination with their receiving trauma care facilities and follow the aforementioned guidelines.
- Administration of TXA by EMS services in Wisconsin is limited to the paramedic level.

Endorsed by:

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Approved by NCRTAC general membership December 1, 2022.