



## EMS System for Metropolitan Oklahoma City and Tulsa 2025 Medical Control Board Treatment Protocols

Draft for Review & Approval 1/08/25, Effective 3/01/25, 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)  
2 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)