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Dear Emergency Medicine Provider –

This letter is to help you address any on-line medical control requests/questions that you may receive from providers re: mixing **Tranexamic acid** [TXA] in a solution other than 0.9% NaCl (normal saline; NS) as there is a national shortage of fluid in this volume.

TXA can be mixed in NS, Lactated Ringers (LR) or 5% dextrose (D5W). In order to ensure that the full dose of TXA is administered, the 250 mL-volume bag of diluent is recommended. D5W comes in that volume, LR does not (smallest volume is 500 mL).

Providers may question administering D5W in the trauma patient. We, as the Medical Direction and Practices Board, feel that it is safer to administer the TXA in a 250 mL volume to ensure that the entire medication dose is delivered than to risk administering the medication in a larger volume of another fluid (i.e. LR) and not having all of the medication delivered.

Paramedics are instructed to administer TXA as follows:

**Tranexamic acid** (TXA) 1000mg inj, #1 vial (+ additional 250ml NS or D5W for administration)

- One time dose only for pre-hospital setting
- Mix and run this infusion over at least 10 minutes

The other medications that are affected by the NS 250 mL shortage are NOREPinephrine, EPINEPHrine, and amiodarone. All of these medications can be mixed in D5W as well. Hospitals have been instructed to stock EMS services with D5W 250 mL bags if the NS 250 mL bags are not available. We will keep you updated as we continue to monitor the medication and IV fluid shortages.

Thank you,

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 Medical Director, Maine EMS

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