



Emergency Medical Services District

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Fred Claridge, EMS Director
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May 14, 2015

Sean Trask
EMS Personnel Division
Emergency Medical Services Authority
10901 Gold Center Dr. Suite 400
Rancho Cordova, CA 95670

Dear Mr. Trask,

The Emergency Medical Services Medical Directors Association, Scope of Practice Committee recommended that we incorporate the updated inclusion criteria similar to the Inland Counties EMS Agency Tranexamic Acid (TXA) proposal. We have had discussions with ICEMA and Riverside EMSA and have all agreed to use the same following language in our Tranexamic Acid Protocols.

The prehospital use of TXA should be considered for all trauma patients that meet any of the following criteria:

- Blunt or penetrating trauma with signs and symptoms of hemorrhagic shock.
- Systolic blood pressure of less than 90 mmHg at scene of injury, during ground medical transport, or on arrival to designated trauma centers.
- Any sustained blunt or penetrating injury within three (3) hours.
- Patients who are considered to be high risk for significant hemorrhage:
- Estimated blood loss (EBL) of 500 milliliters in the field accompanied with heart rate (HR) greater than 120.
- Bleeding not controlled by direct pressure or tourniquet.
- Major amputation of any extremity above the wrists and above the ankles.

III. CONTRAINDICATIONS

- Any patient under 18 years of age.
- Any patient with an active thromboembolic event (within the last 24 hours), i.e., active stroke, myocardial infarction or pulmonary embolism.
- Any patient with a hypersensitivity or anaphylactic reaction to TXA.
- Any patient more than three (3) hours post injury.
- Traumatic arrest with greater than five (5) minutes of CPR without return of vital signs.
- Penetrating cranial injury.
- Traumatic brain injury with brain matter exposed.
- Isolated drowning or hanging victims.
- Documented cervical cord injury with motor deficit.

I would be happy to answer any questions that you or Dr. Backer might have about this application.

Sincerely yours,

A handwritten signature in black ink, appearing to be 'K. Sporer', written in a cursive style.

Karl Sporer

cc: Fred Claridge, EMDAC Scope of Practice Committee, Reza Vaezazizi, Daved Van Stralen