PATIENT GROUP DIRECTION (PGD) FOR

Tranexamic Acid 500mg in 5ml injection (100mg/ml)  POM

to Adults and children over 12

YOU MUST BE AUTHORISED BY NAME, UNDER THE CURRENT VERSION OF THIS PGD BEFORE YOU ATTEMPT TO WORK ACCORDING TO IT

Clinical Condition

Indication
- Patients with TIME CRITICAL injury where significant internal/external haemorrhage is suspected
- Injured patients fulfilling local step 1 or step 2 Trauma triage protocol.

Inclusion criteria
- Adults and children over 12
- The patients triggers the Major Trauma decision tree

Exclusion criteria
- Children under the age of 12
- Isolated head injury
- Critical interventions required (if critical interventions leave insufficient time for TXA administration)
- Bleeding stopped

Management of excluded patients
- For patients under the age of 12 who fulfil all the other inclusion criteria, contact the Medical Incident Commander on call via the EOC for authorisation. Document in notes.

Cautions/Need for further advice/Action to be taken
- Contact the YAS MIC on call

Action if patient declines
- Document in patient’s notes/record

Drug Details

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Expiry date: June 2016
PGD Reference number:

Version 1.0
## PATIENT GROUP DIRECTION (PGD) FOR

**Tranexamic Acid 500mg in 5ml injection (100mg/1ml)**

*POM*

**to Adults and children over 12**

<table>
<thead>
<tr>
<th>Name, form and strength of medicine</th>
<th>Tranexamic Acid 500mg Injection (100mg/1ml)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Legal status</td>
<td>Prescription only medicine (POM)</td>
</tr>
<tr>
<td>Route/Method</td>
<td>Slow Intravenous Injection (IV)</td>
</tr>
<tr>
<td></td>
<td>Intraosseous (IO) – Bolus injection</td>
</tr>
<tr>
<td>Dosage</td>
<td>1gm (2 vials)</td>
</tr>
<tr>
<td>Frequency of dose</td>
<td>Single dose only</td>
</tr>
<tr>
<td>Duration of treatment</td>
<td>Single dose only</td>
</tr>
<tr>
<td>Maximum or minimum treatment period</td>
<td>Single dose over at least 10 minutes</td>
</tr>
<tr>
<td>Quantity to supply</td>
<td>N/A</td>
</tr>
</tbody>
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Common side effects

- Convulsions
- Dizziness
- Hypotension
- Arterial or venous thrombosis

Any suspected adverse drug reaction, whether to a drug supplied or administered to the patient by the practitioner or to a drug already taken by the patient, must be reported to a doctor immediately or as appropriate.

Suspected adverse reactions to any therapeutic agent should be reported to the Medicines and Healthcare products Regulatory Agency (MHRA) via the Yellow Card Scheme.

The public can report adverse effects directly to the MHRA via the Yellow Card Scheme and should be encouraged to do so.

Yellow cards can be obtained from pharmacies, GP surgeries, via Freephone 0808 100 3352 or online at www.yellowcard.gov.uk

Records

The following must all be recorded in the patients records.

- Signature and printed name of the health professional providing treatment
- Patient name, address, date of birth
- Details of the medicine provided including route
- Date and time the medicine is supplied or administered
- Patient consent or refusal
- Patient inclusion or exclusion from the PGD
- Information given to the patient
- State any other agreed records to be kept for audit

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Special Considerations/Additional information

- Tranexamic acid can be mixed with 100ml 5% dextrose and given over 10 minutes when giving IV

Advice to Patients

- Any development of side effects seek medical opinion
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### Staff Characteristics

#### Qualifications
- Registered Paramedic/Nurse with emergency care practitioner qualification

#### Additional requirements
- Ensure mandatory training is up to date
- The appropriately registered health professional will ensure that he/she has relevant training and is competent in all aspects of care
- He/she will have due regard for their Code of conduct/ethics, scope of professional practice and standards for administration.

#### Continued training requirements
- Maintenance of own level of updating with evidence of continued professional development
- Attend regular training updates

### Referral Arrangements and Audit Trail

#### Referral arrangements

#### Audit trail

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References

- Summary product characteristics, Electronic medicines compendium
- British National Formulary latest edition (BNF.org)

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Authorisation

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<tr>
<th>PGD Development Group</th>
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<tbody>
<tr>
<td>Lead Doctor</td>
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<tr>
<td>Name:</td>
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<tr>
<td>Position:</td>
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<tr>
<td>Signature:</td>
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<tr>
<td>Date:</td>
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<tr>
<td>Chief Executive</td>
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<td>Name:</td>
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<tr>
<td>Lead Pharmacist</td>
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<td>Name:</td>
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<td>Position:</td>
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<td>Date:</td>
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<tr>
<td>Medical Director</td>
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<td>Name:</td>
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This patient group direction must be agreed to and signed by all health care professionals involved in its use. The NHS Trust should hold the original signed copy. The PGD must be easily accessible in the clinical setting

* Lead Doctor accepts responsibility for ensuring that the professional using this PGD has the requisite competencies and training.

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Patient Group Direction Peer Reviewed by

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Individual Authorisation

PGDs do not remove inherent professional obligations or accountability.

It is the responsibility of each professional to practise only within the bounds of their own competence and in accordance with their own Code of Professional Conduct.

Professionals CANNOT delegate tasks under this PGD to anyone else.

If this is an updated or replacement PGD, please ensure that all previous versions are withdrawn from use with immediate effect and that the current version is used.

Each professional should be provided with an individual copy of the clinical content of the PGD and a photocopy of this page showing their authorisation should be forwarded to their line manager to be kept in their personal file.

I have read and understood the Patient Group Direction and agree to supply/administer this medicine only in accordance with this PGD.

<table>
<thead>
<tr>
<th>Name of Professional</th>
<th>Signature</th>
<th>Date</th>
<th>Name of authorising manager</th>
<th>Date</th>
<th>Signature</th>
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