

Sierra – Sacramento Valley EMS Agency Treatment Protocol

Hemorrhage

T-4

Approval: Troy M. Falck, MD – Medical Director Effective: 10/01/2025

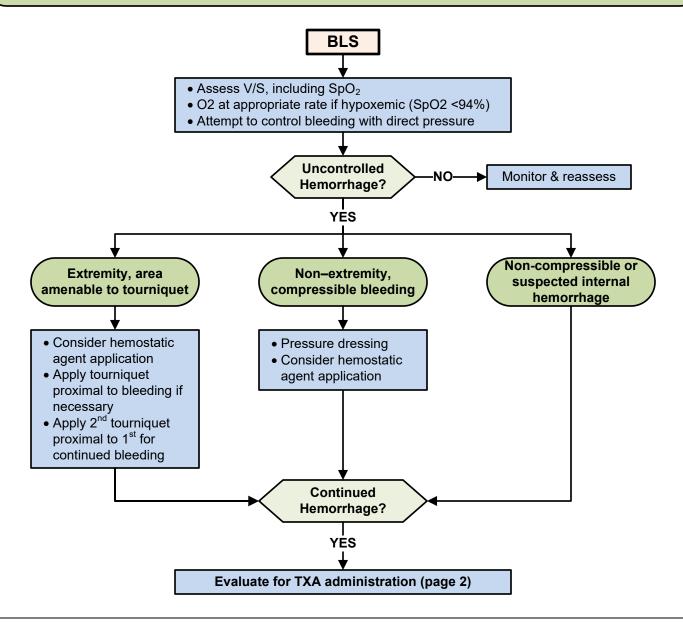
Approval: John Poland – Executive Director Next Review: 07/2028

Tourniquet Devices:

- Any windlass style device included on the current Committee on Tactical Combat Casualty Care (CoTCCC) recommended Limb Tourniquets (non-pneumatic) list may be utilized by EMS personnel.
- Tourniquets applied by lay rescuers or other responders shall be evaluated for appropriateness and may be adjusted or removed if necessary improvised tourniquets should be removed by prehospital personnel.
- If application is indicated and appropriate, a commercial tourniquet should not be loosened or removed by prehospital personnel unless time to definitive care will be greatly delayed (>2 hrs).

Hemostatic Dressings:

 Any hemostatic agent that is incorporated into gauze (no loose granules/particles) included on the current Committee on Tactical Combat Casualty Care (CoTCCC) recommended Hemostatic Dressings list may be utilized by EMS personnel.





Hemorrhage

Tranexamic Acid (TXA) Administration

TXA Administration Notes:

- Routes other than IV/IO (e.g., nebulized, topical) may be considered (with base/modified base hospital order only) for bleeding from epistaxis, lacerations, or oral trauma.
- For post-partum hemorrhage, refer to Childbirth Protocol (OB-G1).

