Patient Safety in Rhinoplasty

TXA ADMINISTRATION

Oral TXA
- 650 mg tablets
- 2 tablets (300 mg) po tid 5 days before injection and/or procedure

Intravenous TXA
- 1 gram IV before incision
- Repeat 1 gram IV four hours after initial dose
- Always place 1 gram in 250 mL saline and give slowly over 10–30 minutes to avoid hypotension

Infiltration TXA—3 examples
- 10 ml total
  - 1% solution
  - 1 mL of TXA mixed with 9 mL of local anesthetic
  - 10 mL total
- 20 ml total
  - 1% solution
  - 2 mL of TXA mixed with 18 mL of local anesthetic
  - 20 mL total
- 100 ml total
  - 1% solution
  - 10 mL of TXA mixed with 90 mL of local anesthetic
  - 100 mL total

Tumescent TXA for body liposuction
- 0.1% solution
- 10 mL of TXA mixed with 990 mL of tumescent solution (purist)
- 10 mL of TXA mixed with 1000 mL of tumescent solution (practical)
- Do not exceed a maximum of 60 mL of TXA
- In other words, do not exceed 6000 mL (or 6 liters) of tumescent solution
- Mass spectrometry levels normal at 3 and 6 hours in 2 random patients

Tumescent TXA for facelift/necklift
- 0.1% solution
- 5 mL of TXA mixed with 495 mL of tumescent solution (purist)
- 5 mL of TXA mixed with 500 mL of tumescent solution (practical)

Topical and Irrigation TXA
- 3% solution
- 30 mL of TXA mixed with 70 mL of saline (purist)
- 30 mL of TXA mixed with 100 mL of saline (practical)
- 5 minutes of contact for optimal hemostasis
- Use bulb suction and/or laparotomy sponges for larger cases
- Use neurosurgical pledgets for rhinoplasty
- Use sterile 4 x 4’s before, during and after needle placement during neuromodulator and/or filler use

TXA PROTOCOLS

Rhinoplasty
- 1 gram given intravenously before incision
  - Only need to use DDAVP if bleeding is not completely controlled
  - Use 1% solution for infiltration into the subcutaneous nasal tissue, septum and turbinates
  - Use 3% topical solution on neurosurgical pledgets

Facelift, Necklift and Neck Liposuction
- 1 gram given intravenously before incision
  - slow IV push in 250 mL of saline
  - 0.1% tumescent solution
  - 150-250 mL per side
  - May require 400 mL in some neck liposuction cases
  - Use 1% solution for infiltration into the facelift incisions
  - 3% topical solution
  - 1 lap sponge per side
  - ~20 minutes

Browlift and other head and neck cosmetic surgery
- 1 gram given intravenously before incision
- Does not require tumescent solution
- Use 1% solution for infiltration into appropriate incisions
- 3% topical solution
- Bulb irrigation or sponge application

Breast Augmentation, Mastopexy, Breast Reduction and Body Implant surgery
- 1 gram given intravenously before incision
- 1% solution infiltrated
- 50-70 mL per side
- 3% topical lap sponges in breast and body surgical pocket

Liposuction
- No intravenous TXA required!
- 0.1% infiltration solution
- 10 mL of TXA mixed with 1000 mL of saline and/or lactated ringers

Liquid Facelift
- 1% solution of local and TXA
- Use 1 mL syringes for accuracy
- Inject 0.1 mL at supraperiosteal position on desired area of fill; only use 0.1 mL per area to avoid distortion
- 3% topical solution on sterile 4 x 4’s before and after needle stick (prevents punctate bruising)

*Disclaimer: the preceding methods and products are not required. They are recommendations from The Aesthetic Society Patient Safety Committee as of December 2020 and do not establish a standard of care. You may download this document and any updates at surgery.org/ScissorsWinter2021 to tailor to your specific practice. ©2021 The Aesthetic Society. All rights reserved.