

Plains to Peaks Medical Direction Committee

April 2, 2026

Summary Notes

Attendance:

VOTING		NON-VOTING	
Dr. Matt Angelidis	Yes	Carrick Patterson	Yes
Dr. Stein Bronsky	Yes	Kim Schallenberger	Yes
Dr. Tim Hurtado	Yes	Dr. Kash Kaul	Yes
Dr. Eric Wu	Yes	Cameron Halverson	Yes
Dr. David Hakkarinen	Yes	Ginger Flynn	No
Dr. Jessica Walsh	No	Kaylinn Hathaway	No
Dr. James Brown	Yes	Caleb Hadfield	Yes
Dr. Sean Keenan	Yes	Mark Warth	Yes
Dr. Jeremy DeWall	No	Jon Edon	Yes
GUESTS:			

Introduction to Cameron Halverson, the new CSFD representative to the committee.

Review and approval of Meeting Minutes

- March
 - Motion to approve Matt Angelidis/Seconded Dave Hakkarinen.

Droperidol

- Remove contraindication and add to special considerations section
 - Consider arrhythmias, such as Torsades, if patient declines.
 - High dose is >5mg
 - Stats are pretty safe. Retrospective study shows 0.0006% of patients will develop an arrhythmia.
 - If patient have decompensation with Droperidol, an EKG or a rhythm strip would be important to assess for Torsades.

Guideline updates

- Chart with STEMI/Stroke destination
 - All information is readily available in the OneDose app.
 - Remove box from Guidelines.
- Labetolol and Cardizem (beta blocker)
 - Hypertension in pregnancy

- Waiver is available for anyone who wants to apply for it. It will come into formulary when Chapter 2 closes.
- Labetolol is the best choice for pregnancy.
 - Add in drug profile the contraindication <60 for heartrate.
- Keep Cardizem for other indications outside of OB.
- Spinal Motion Restriction (soft collars vs. rigid collars)
 - EMS SPOTLIGHT education on placement. Discuss often so it is not forgotten.
 - Protect spine when clinically indicated.
 - Continued education and move to device change or removal.
 - Kash will send out some educational resources to RETAC for SMR.
- Stroke
 - Added 15 min scene time limit.
- ROSC
 - Guideline was reorganized to emphasize epi infusion and/or if needed transcutaneous pacing.
 - Replaced areas on the medical side of the guidelines that had numbers for blood pressures for medical shock and replaced with improved perfusion, return of distal pulses, and/or improved mental status.
 - Educate to what it means
- Formulary
 - Build education to the line on a case study.
 - Implementation with Q&A
 - Keep education generic so it is not CSFD or AMR specific.
 - Can be shared with the entire system for uniformity.
- Mark will send out updated guidelines and send out.

Chapter 2

- Release of Chapter 2 may be this fall.

HUCPR update

- CSFD has procured 5 EleGard's and 3 rescue pumps.
 - Working with fire administration for CSFD and AMR to move forward with the initiative.
 - Rescue pumps are not available for procurement, there are manufacturing shortages.

- Awareness training for everyone on the products and the change of CPR management will come in through Joint Training.
 - Potential go live at the end of the year.
- No information that anyone in the state is actively introducing this.
- Discussion regarding training staff has been a concern. This will change the protocol, workflow, and everything about resuscitation. If not done correctly it will not work.
 - Stein has had conversations with other agencies, namely Tulsa, who has been using this device for several years.
 - They did not have an issue with limited products and training everyone.
 - This bundle was interpreted by field that was a different level and paid attention more while trained due to it being for resuscitation purposes.
 - They did find pushback from some paramedics and EMT's that did not want to put in additional effort. It is twice as physically difficult.
- Question for the committee,
 - Is the ultimate goal to adopt agency wide? The issue is very undecided if it is an effective intervention.
 - No 100% one way or another. Original studies that came out had no definitive answer.
 - Over the last year, there has been data from agencies that show good outcomes across the board when used properly.
 - This will be put in as a pilot within our agencies and may in the future move to holistic use.

MAAM

- Mandatory call in to the Medical Directors
 - CSFD/AMR only

Region IV Prehospital Care Committee meeting (Kim)

- Thank you to the Medical Directors who were able to attend the last meeting.
- Next meeting is April 16th which will be all virtual.
 - Contact Kim over the website with any issues or topics for the April 16th meeting. Carrick will work with Kim offline.

- The Healthcare communications committee is included in this meeting which has shown to be successful.
- Thanks to Dr. Bronsky & Dr. Angelidis for meeting with Healthcare Communications Committee offline to discuss what is required for registration. This was a productive meeting.
 - Summary initiative moving forward will likely to request the last 4 of the SSN be included with current picture and scanned ID.
 - Registrars have been instructed to leave EMS alone and minimize registration interruption in Pulsara.
 - Organized education for registrars.
 - If end goal is direct to Cath lab we must register the patient which requires 3 independent and verifiable points of data. (name, DOB, address, SSN, etc.)
 - No repeat meeting scheduled at this time. Matt sent out an email summary of the above. Next step is to meet with AMR and CSFD educators to discuss.
 - Maureen and Rose were both in attendance at the meeting and are able to discuss with county agencies.

Whole Blood Updates (Matt)

- No specific updates.
- UCHHealth Foundation is interested in funding the expansion to the SE in the next 4 to 6 months. (Fountain & Security Fire)
 - Matt will try to get the group back together.
 - Blood bank has resources to share blood with these agencies.
 - Matt will reach out to Dr. Hakkarinen and Dr. Wu to reconvene.
- Matt is going to DC on April 23 & 24 to meet with congressional committee members and participate in an Economy of EMS of whole blood symposium to present some data. He will then meet with congress men and women to discuss incorporating a funding apparatus for EMS, how they bill and collect and what laws need to change to do this.
- CSFD has doubled blood usage this quarter compared to last quarter. Do we need to discuss with foundation regarding expecting our increase in blood usage?
 - No, Matt meets with the foundation monthly with the updates and they are aware.
- Chief Patterson had a conversation with Manitou Fire who had a discussion with UPRAD. They are looking to rendezvous program that can be formalized. CSFD has offered them the same as other agencies, if a patient is being transported into the city boundaries, call early, CSFD will evaluate the resources at that time and see if a rendezvous is

possible. Fixed locations of station 5 or station 3 for the west have been discussed as the potential rendezvous points. Will not go into Manitou or Cascade to provide blood services.

- RETAC provided funding for Melissa Anderson, Trauma Program Manager at Penrose, to go to the Whole Blood Academy. She said that the CommonSpirit is looking to become more involved here.

Whole Blood UPRAD (Sean)

- No updates from UPRAD. There have been good traumas but no blood used in the last couple of months.
- Question about Chapter 2
 - Are they still looking at plasma for EMT IV's?
 - This was in discussion for all blood products for EMT IV's. This has been tabled for further discussion.
- Whole Blood in summit county, their lieutenants, who are EMT's, are carrying blood and delivering to the scene. Every paramedic training in blood and can hang it.
- Once it comes into formula, there will be different options.
- Fountain will be controlled, carried, and maintained by the BC's or lieutenants and delivered to the paramedics.

Plains to Peak RETAC update (Kim)

- SEMTAC is next week on Wednesday & Thursday
- RETAC meeting on the 21st virtually
- NDMS exercise April 22nd
 - South Central Healthcare Coalition has built out a local exercise.
- Regional RETAC conference is April 25th and 26th.
- Hosting in coordination with the South Central Healthcare Coalition an MCI symposium at St. Francis April 30th and May 1st.
 - Eric Epley from STRAC will be there to discuss how they deploy their Pulsara for MCI.
 - William Salmeron from New Orleans who will talk about the Bourbon Street attack.
 - Friday, will be some more local speakers.
 - Save the date has gone out but hope that Victoria Slater will have the brochure out this week.

- RETAC is hosting a Critical Care symposium on May 14th at the CHES campus of Pikes Peak State College.
 - Hope to have the brochure out this week.

Pulsara Update (Kim)

- Pulsara is good until June
- No funding at the state level

225 Task Force update

- Essential service bill, making EMS an essential service, is moving forward and getting good support.
- RHTP (Rural Health Transformation Program funding of \$200 million dollars over five years.
 - This does not affect Colorado Springs but is
- Task force meets next Thursday.
 - This cycle will be all about finance.

Round Table

- Jon Edon's last meeting today. He appreciates the learning experience.
- Kash has submitted his resignation at UCHHealth and has accepted a faculty position at East Carolina University with the EM residency and EMS Fellowship.

Adjournment