

SMFR
CCTA UPDATE -
2025



0°

90°

Thank you

pLAD L1 0

578% 213/746 HU

Diameter Stenosis 14% Remodeling Index 1.1

Ref. Mean Diam. 4.4mm

Lum. Mean Diam. 3.8mm



DEMOGRAPHICS

306 Line members

95% Male

Median age 47

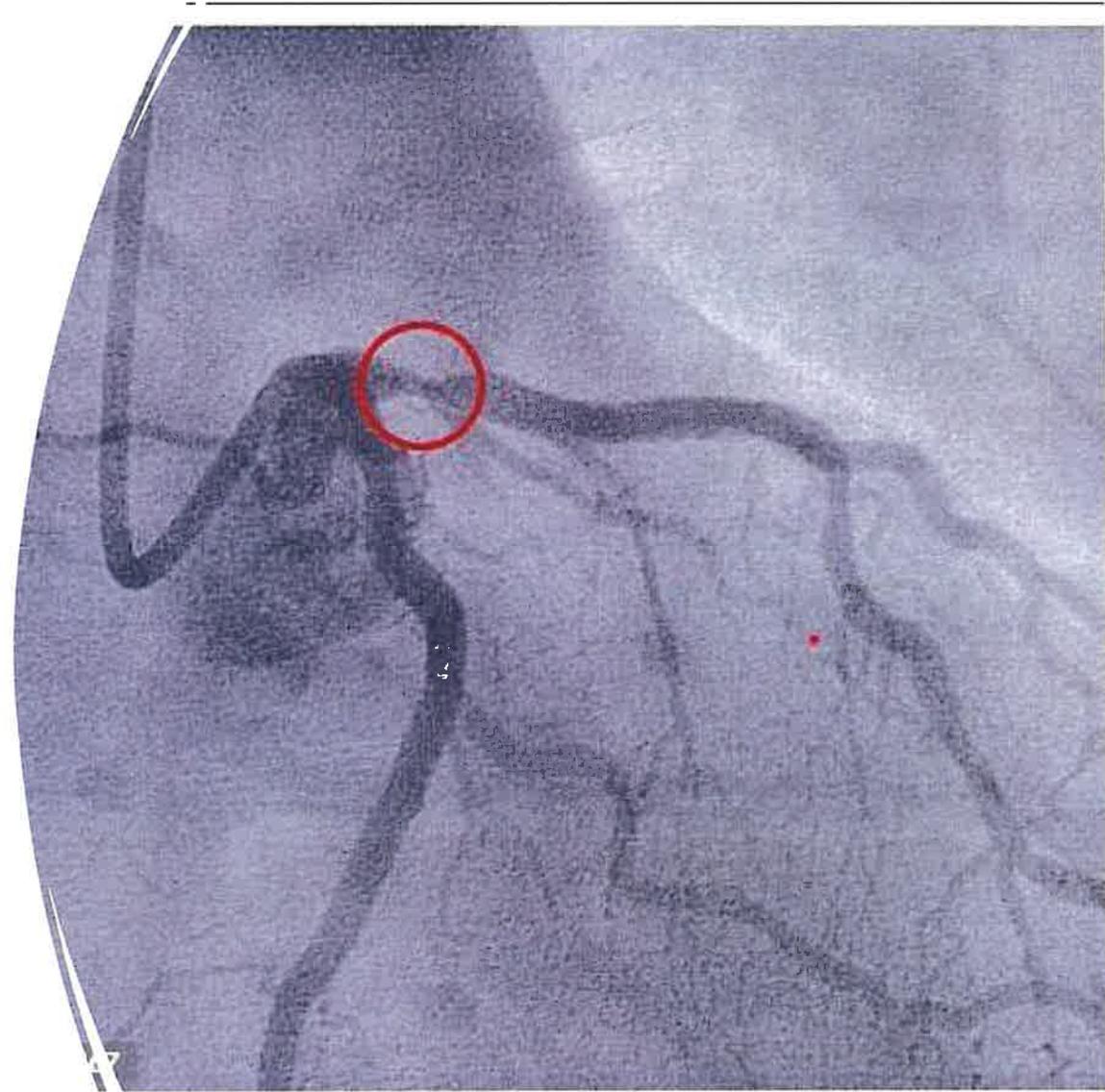
Median years of service 22

11 to Intervention

87 to Cardiology

Intervention

- 11 underwent PCI (3.6%)
- 9 stented (82%)
- Average time loss = 1 set



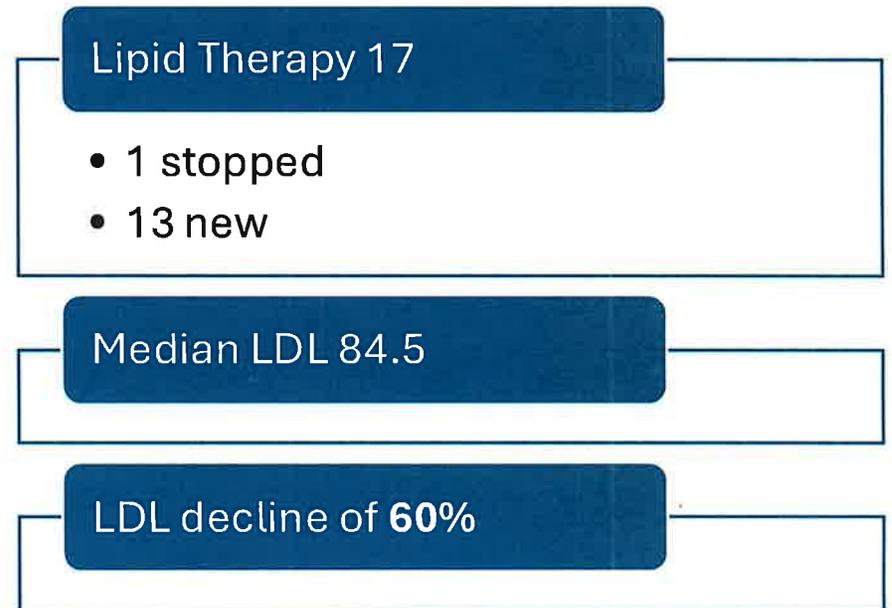
Pilot Group-23 line members

2023

- Lipid Therapy 5

- Median LDL 170

2024



Prevent Score & Calcium Score

Underestimates Risk in this population

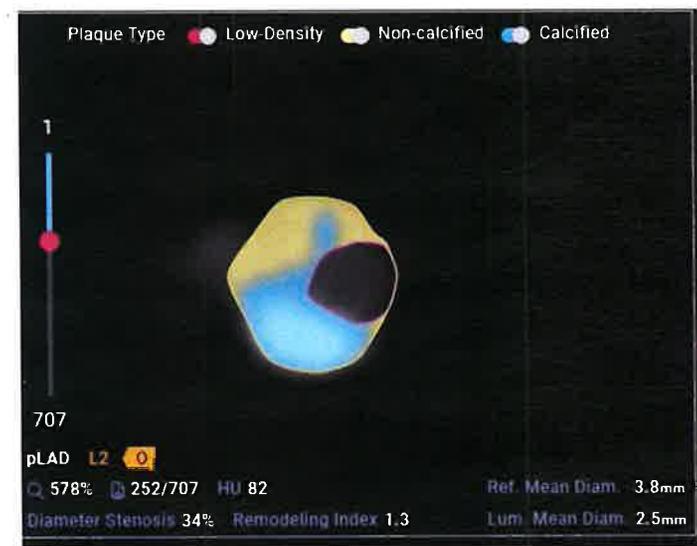
Prevent Score: often used to guide therapy

High Risk Group: 2.87% average

4 of 29 had scores at 5% or above

Calcium Score: widely use screening

Underestimates plaque presence



The Future



2025 Scans- ages 34-40



Further data collection



Oklahoma City Fire Department



Abstract Submissions: AAPA, SCCT



Presentations: Science to the Station, ASPC



New Alliance: University of Virginia, Dr. Todd Villines



Publication Submission – late 2025

FUTURE BLOOD PROGRAM



❑ Why Pre-Hospital Blood

❑ Reduce Mortality from Hemorrhagic Shock

- ❑ Uncontrolled bleeding is a leading cause of preventable death in trauma.
- ❑ Early administration of blood products helps restore perfusion and oxygen delivery, especially in patients who are hypotensive due to hemorrhage.

❑ Time-Sensitive Intervention

- ❑ The "platinum ten minutes" and "golden hour" concepts emphasize the need for rapid intervention.
- ❑ Providing blood in the field bridges the gap between injury and definitive surgical care.



FUTURE BLOOD PROGRAM



- ❑ **Why Pre-Hospital Blood(Continued)**
 - ❑ **Improved Outcomes Compared to Crystalloids**
 - ❑ Traditional fluid resuscitation with saline can dilute clotting factors and worsen coagulopathy.
 - ❑ Balanced blood component therapy (e.g., plasma, platelets, RBCs and TXA) is superior in maintaining hemodynamic stability and preventing trauma-induced coagulopathy.
 - ❑ **Alignment with Military and Civilian Best Practices**
 - ❑ Military-Proven, Civilian-Tested Follows successful military protocols and
 - ❑ Will be soon adapted SMFR EMS.
 - ❑ **Elevates EMS Capabilities Enables critical care-level intervention in the field.**



DEPLOYMENT



❑ MED 1 and MED 2

❑ Two units of Packed Red Blood cell (PRBC)

- ❑ Carried via cooler and available for critical calls
- ❑ Will be rotated with the blood bank on 14-day rotation to eliminate waste
- ❑ Cost recovery via authorized CMS billing

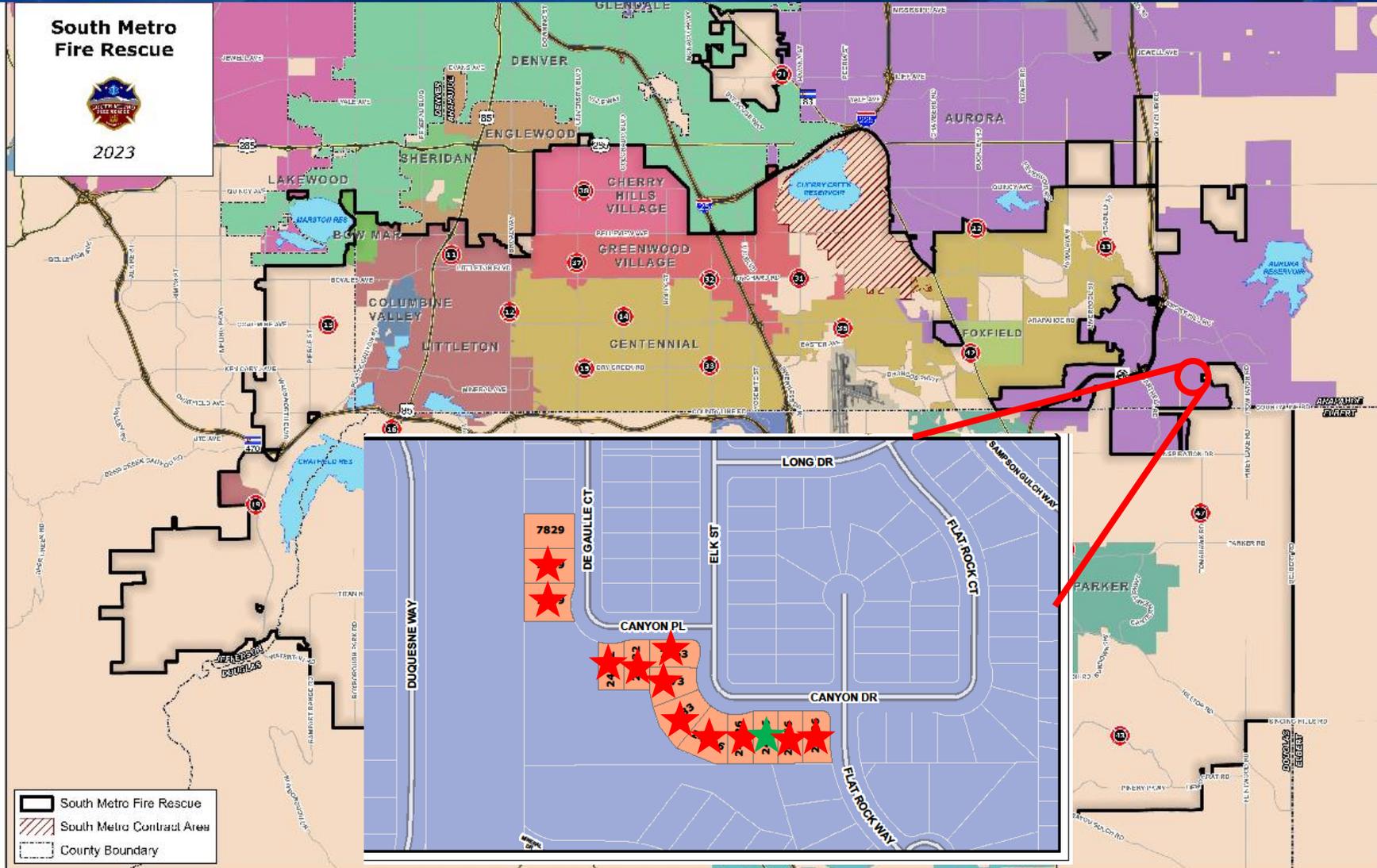


SMFR Property Exclusion Syvokon Property 24346 E Canyon Dr, Aurora



April 7, 2025
Public Hearing

Location



Criteria

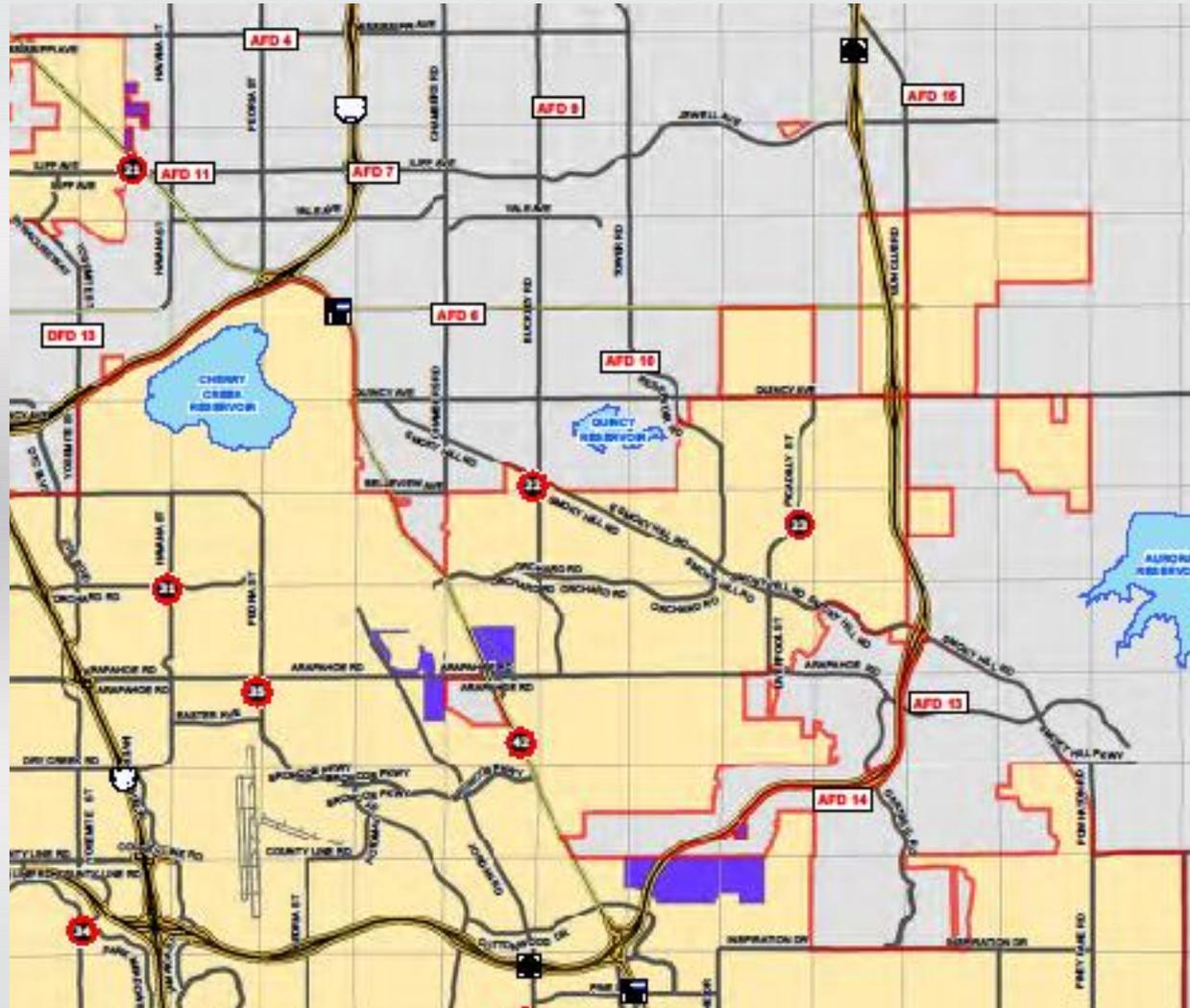
Best interest of property, district, county

- Still able to provide economical and sufficient service to all properties within the District's boundaries.
- No effect on employment and other economic conditions in the District and surrounding area.
- The additional cost to be levied on other property within the District if exclusion is granted will be negligible.
- There is economically feasible alternative & similar service available from another special district in the area of the Property.



Criteria

Dual
Jurisdiction?



Process

- Aurora notification
 - 2016: “single-plan” exclusions
 - 2018-2020: 13 missing lots
- Property notification
 - Letter #1: September 24, 2020
 - Letter #2: November 2, 2020
 - HOA notification: February 3, 2021
 - Home visit: February 24, 2021
 - Letter #3: November 17, 2021
 - Letter #4: November 2, 2022
 - Letter #5: November 6, 2023
 - Letter #6: December 12, 2024
- Petitions received
 - 12 of 13
- Public input
 - Notice of public hearing: February 20, 2025
 - No written objection prior to public hearing
 - Public hearing: April 7, 2025
- District court
- Assessor
- Deadline:
 - May 1, 2025
 - Taxes discontinued in 2026



Questions?

