



**COLORADO WHOLE BLOOD
COALITION**

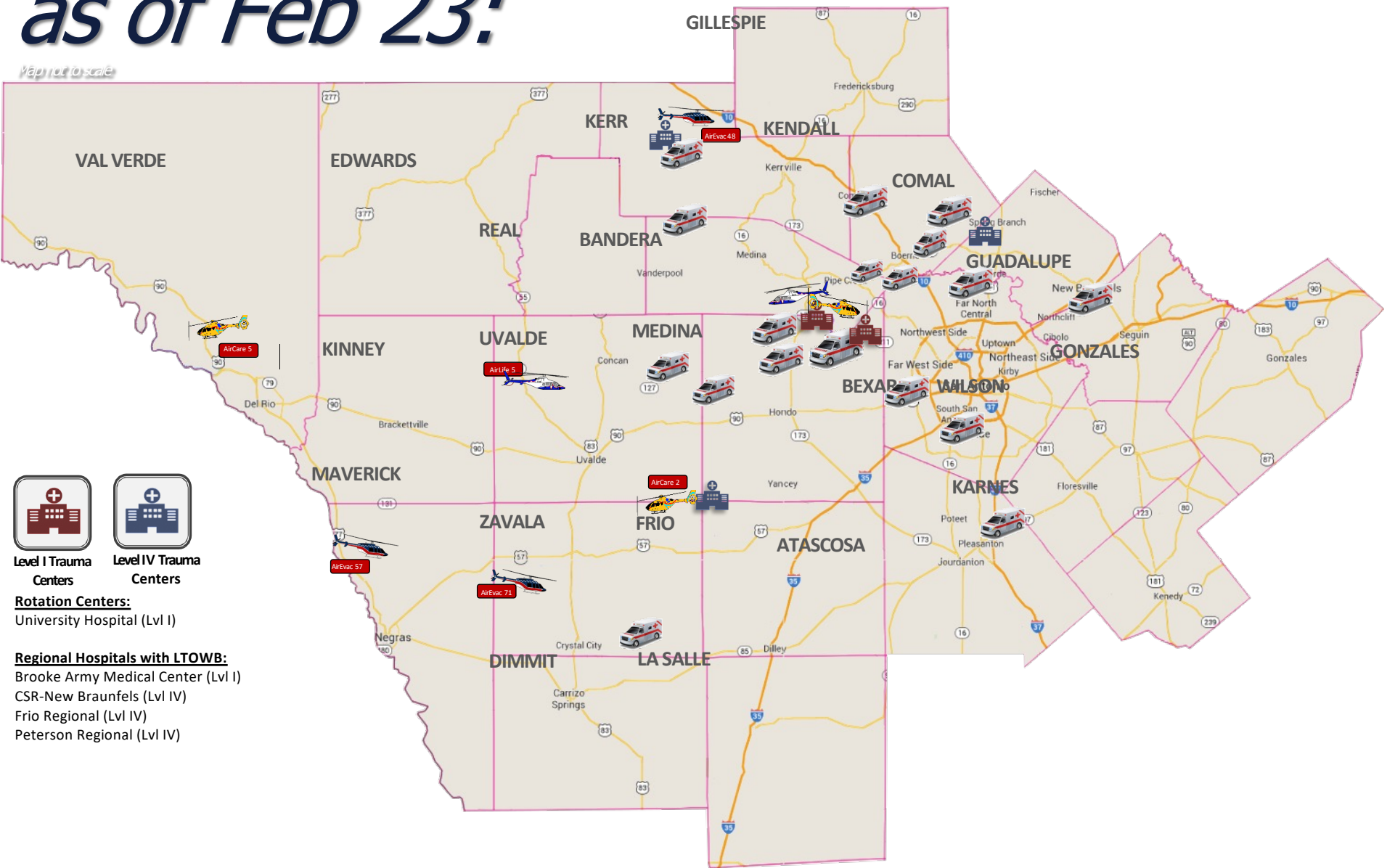
Scott Branney M.D.
St. Anthony's Hospital
Common Spirit EMS

Colorado Whole Blood Coalition

- ⊕ Inaugural meeting was April 19, 2023
- ⊕ Our goal is to build a state-wide prehospital whole blood system
- ⊕ Based on STRAC's rotation model
 - ⊕ We have 4X the square miles (100,000)
 - ⊕ A little over twice the population
 - ⊕ Oh, did I mention we have a few mountains?


Air and Ground Regional Distribution as of Feb 23:

Map not to scale





Level I Trauma Centers

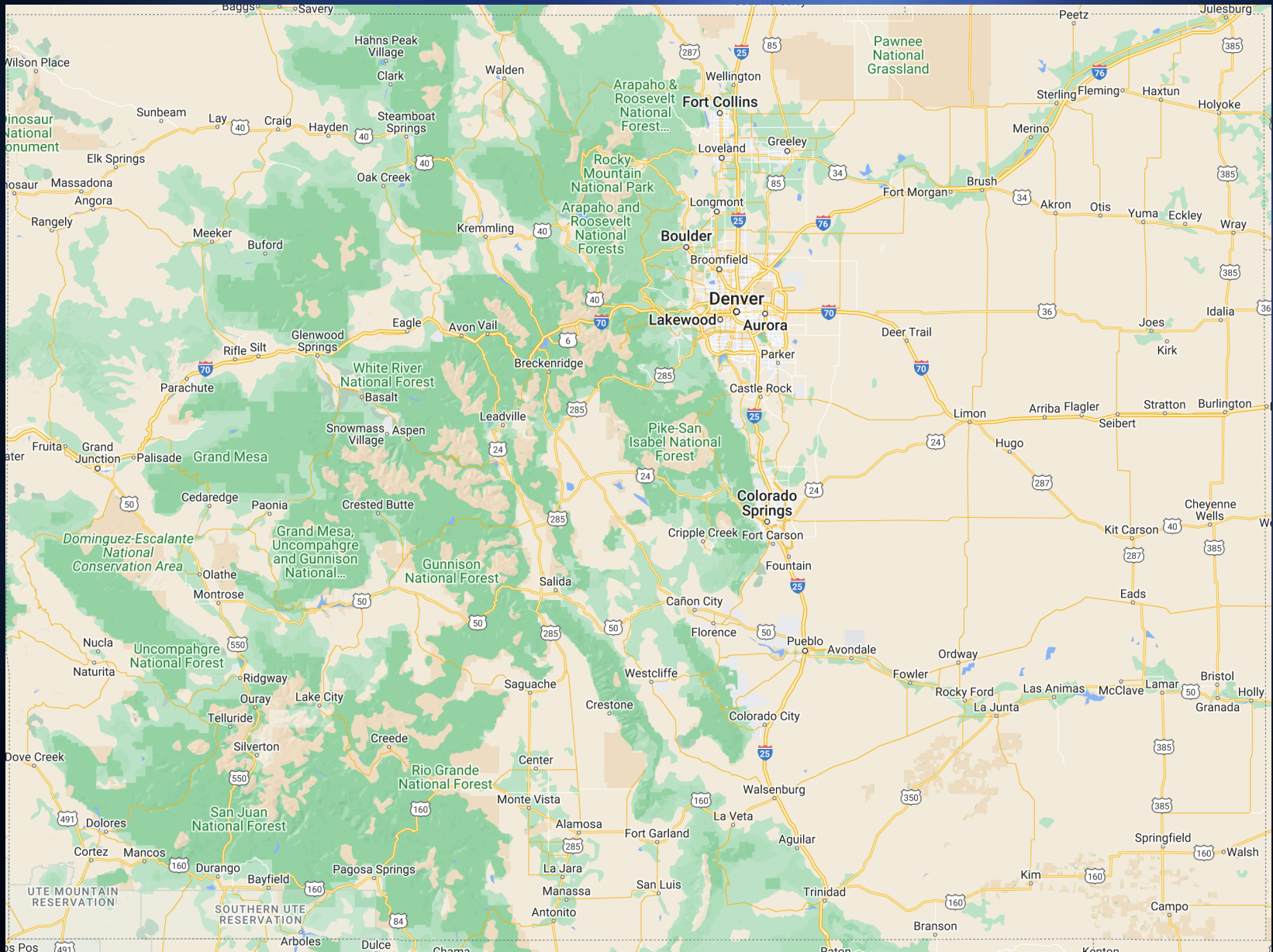


Level IV Trauma Centers

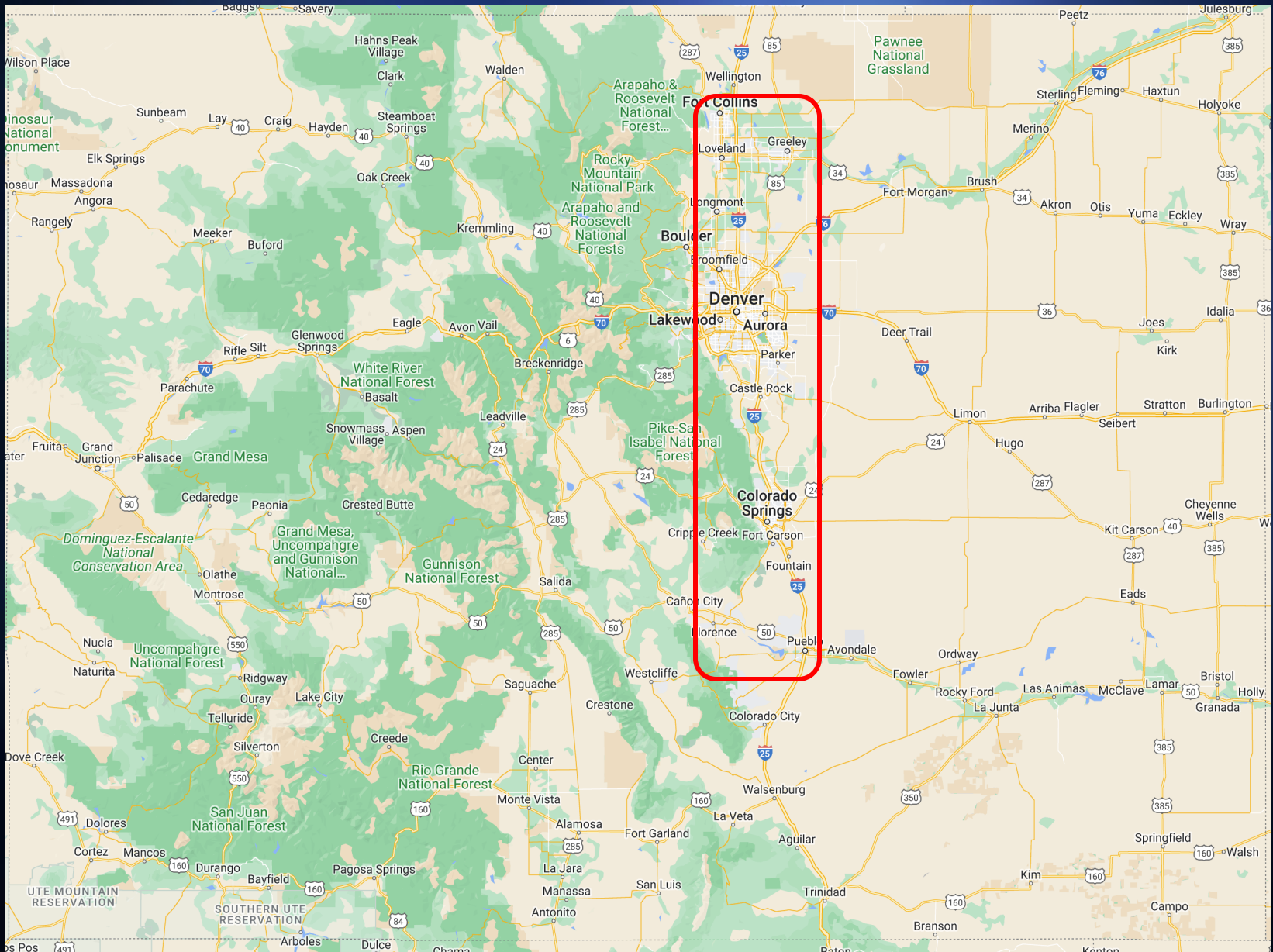
Rotation Centers:
University Hospital (Lvl I)

Regional Hospitals with LTOWB:
Brooke Army Medical Center (Lvl I)
CSR-New Braunfels (Lvl IV)
Frio Regional (Lvl IV)
Peterson Regional (Lvl IV)

Colorado



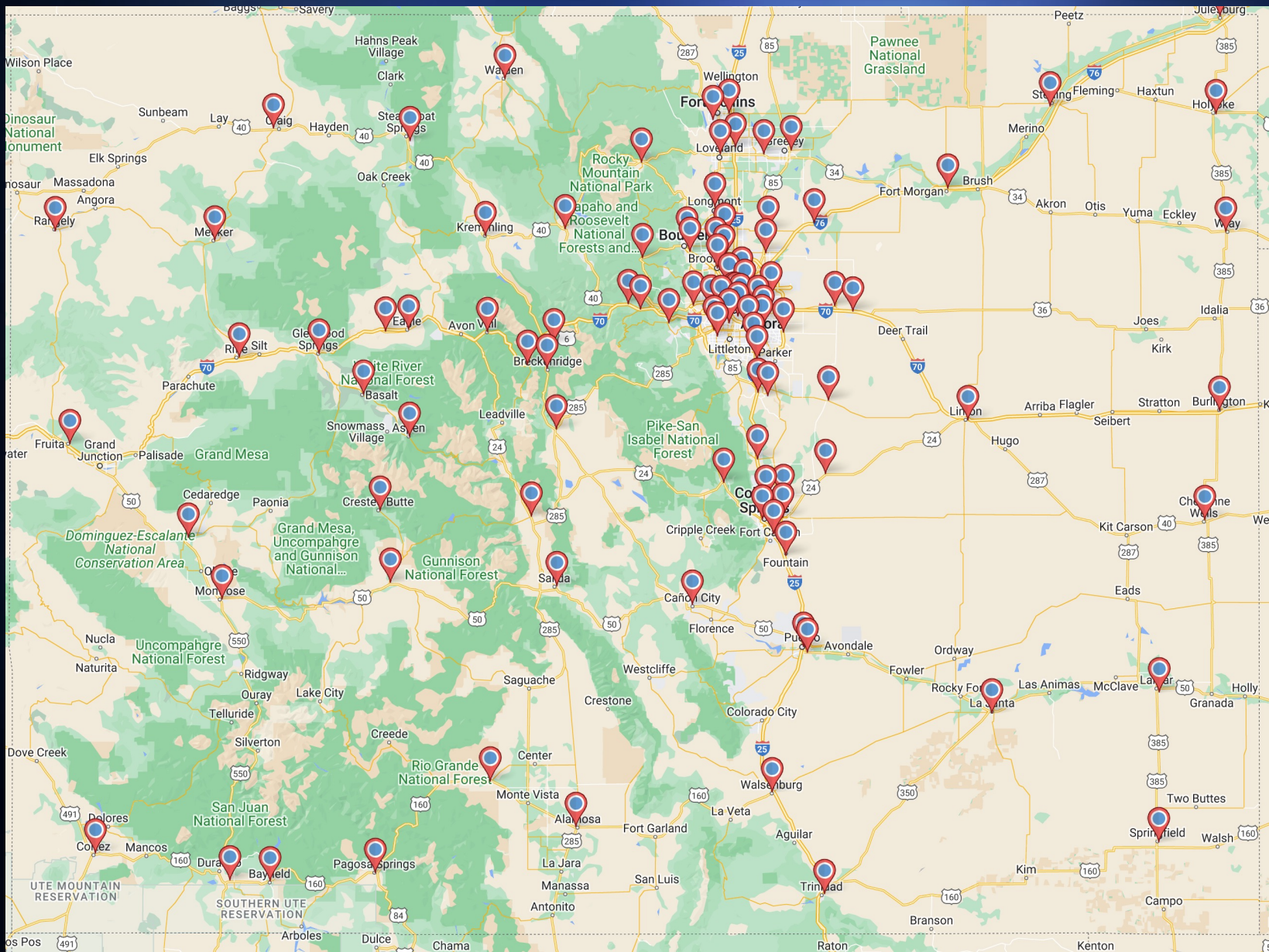
Colorado



Blood delivery is Based on 5 Tiers

- ⊕ Tier 1A: rotor wing delivered cold whole blood
- ⊕ Tier 1B: Ground delivered cold whole blood
- ⊕ Tier 2: Blood picked up from a hospital by EMS and delivered to the scene
- ⊕ Tier 3: blood donated at the scene by pre-screened volunteers
 - ⊕ Vampire Protocols

Potential Ground Sites for LTOWB



Colorado Blood Suppliers

A map of Colorado showing major cities and highways. A light blue callout box is positioned over the Denver area, containing the text 'Garth Englund Blood Center'. The map shows major cities like Denver, Boulder, Colorado Springs, and Pueblo, along with various national forests and conservation areas.

Garth Englund
Blood Center

NERETAC:
Garth Englund
Denver Health
The Red Cross
The rest of the
state:
Vitalant

Key Issues To Solve For a Successful Program

- ⊕ Right Donors
- ⊕ Right Product
- ⊕ Right Rotation
- ⊕ Right Rotation Center
- ⊕ Right Reimbursement / Funding

The Right Donors

- ⊕ Identification, recruitment, and retention of LTOWB donors
 - ⊕ Recognition
 - ⊕ They are partners in the outcome
 - ⊕ Leverages the relationships that are present in EMS
- ⊕ Requires data from your blood supplier

The Right Product

⊕ 21-day Leukoreduced blood

⊕ It's "safest", it protects the patient from:

⊕ Febrile non-hemolytic transfusion reactions

⊕ Alloimmunization

⊕ CMV transmission

⊕ 35-day Non-leukoreduced product

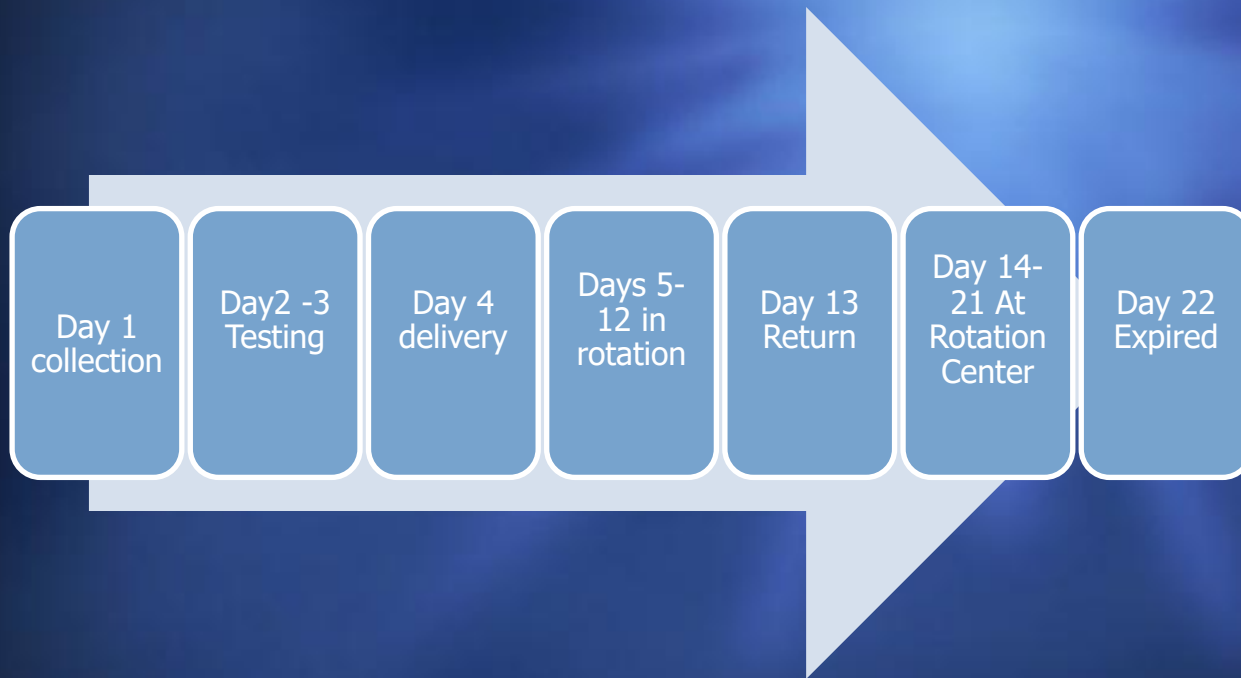
⊕ Is a compromise product

⊕ Permits the rotation to twice as many prehospital sites

⊕ (or cutting your costs in half)

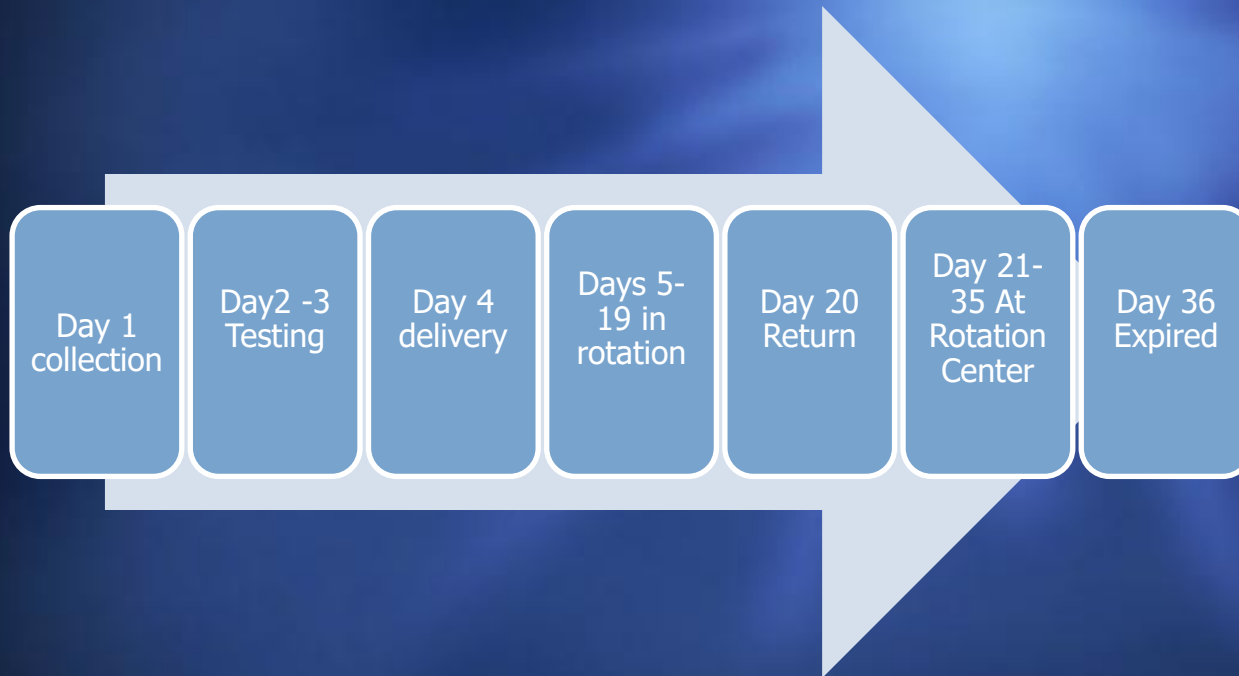
⊕ Both products reduce mortality by 50%

The Right Rotation System: 21-Day Product



- ⊕ You will have 6-7 days to use it upon return to the rotation center
 - ⊕ Conversion to red cells takes time (days?)

The Right Rotation System: 35-Day Product



⊕ You will have 13-14 days to use it upon return to the rotation center

The Right Rotation Center

- ⊕ Level I: primary rotation centers
- ⊕ Level II-III: represents a broad range of blood utilization
- ⊕ Level IV/Critical Access:
 - ⊕ Many are the only source of ALS care
 - ⊕ Rotate blood to and from these facilities as if they were a prehospital site

The Right Reimbursement/Funding

⊕ Reimbursement

- ⊕ National Initiatives
- ⊕ UCHealth pilot program

⊕ Funding

- ⊕ Federal funds
- ⊕ Philanthropic donations
- ⊕ Hospital foundations



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Thank You!

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Coloradowholeblood.org