

# Carolinas Vascular Quality Regional Group

## Spring 2022 Meeting

5/6/2022 900am-1200pm

### Virtual

Remote attendance: (download from ring central)

PSO Representative Attending Meeting: Betsy Wymer

#### I. Presentations:

Presenter: VQI Regional Quality Report  
Katharine McGinigle, MD

Presenter: Enhanced Recovery After Surgery (ERAS) in Vascular Care  
Emily Spangler, MD

#### II. General Discussion and Questions

- a. LTFU rate has improved compared to the Fall 2021 report and better than the national rate
- b. Discharge medication remains above national rate
- c. TFEM CAS volume has dropped for both symptomatic and asymptomatic, we are doing a good job with it. TCAR volume is increasing and we are doing a really good job with TCAR. However, our symptomatic TCAR stroke/death rate is slightly higher than the national rate and higher than expected.
- d. We continue to do excellent job with asymptomatic CEA, stroke/death rate asymptomatic was 0.2% compared to national rate of 1%. Same is true for symptomatic CEA, 1.5% stroke/death rate compared to 2.2% national rate
- e. CEA LOS has been good and is in line with national rate
- f. EVAR LOS has been focused on nationally
- g. EVAR sac diameter reporting everyone struggles with this, we are seeing the patients just not doing a good job of recording the diameter so the data can be abstracted. Better than national rate, still only 65%
- h. EVAR SVS AAA diameter guideline could be improved, we are better than the national rate. Saccular aneurysms will be addressed in upcoming registry update
- i. TEVAR sac size diameter reporting remains a challenge
- j. Observed in hospital mortality for elective oAAA repair for our region in 8.2% compared to 4.2% nationally, and is true for our observed to expected mortality

as well. Dr. Long is taking a deeper dive into the data, and there will be more to come on this topic.

- k. Everyone is doing a good job using cell saver in oAAA which is in the national guidelines, also doing well with following SVS inflow guidelines
- l. PVI Claudication 88% of patients are having preop ABIs/Toe pressure which has improved over the last 4 years
- m. Major complications after Infra for CLTI is 4.5% and pretty consistent with that compared to national rate of 4.9%.
- n. Supra CLTI not as amazing- our rate is 11.6% compared to national rate of 8.2%, our rate has increased over the last 2 years
- o. LEAMP post op complications 9.7% slightly better than national rate 11.7%, only 4 centers participate in this module
- p. HDA primary AVF vs graft 76% of patients in our region are getting primary AVF compared to 82% nationally
- q. IVCF not as good documenting care of these patients 123 filters placed and 78 patients (63%) did not have any follow up records compared to the 1166 placed nationally with 206 patients without follow up records (18%), only 3 centers participating in this module

### III. AQC-

- a. DC medication measure due to be placed in maintenance mode due to high compliance
- b. EVAR sac diameter needs continued efforts to improve compliance
- c. National LTFU survey was created and you can see the results on [www.vqi.org](http://www.vqi.org)
- d. Will have a sneak peek for VQI risk calculator at the VQI at VAM meeting
- e. Harmonization of urgency variables as much as possible across like registries

### VQC-

- a. New venous RAC created
- b. 3 proposals submitted
- c. AVF meeting held 2/23/22 – 2/26/22
- d. Requesting ideas for venous registry specific metrics, such as anticoagulation after venous stent, C2 disease for varicose veins, IVC temporary filter retrieval

### RAC-

- a. Always available to help with abstract creation or to discuss ideas
- b. If you have data from a previous RAC submission, please make sure you have an updated RAC submission if you want to use the data differently than the previous request
- c. Please ensure your RAC submission is complete
- d. Your center must participate in the registry related to the research proposal

Governing Council

- a. Update on the VQI Fellows in Training program- excited that any resident or fellow can find a mentor whether at their facility or elsewhere, develop a question/QI project and get help with the project. Helps with building credibility of our program and develops relationships
- b. Input was given on the PSO software development
- c. Update on discussion with FDA on type 3 endoleaks
- d. PSO's strategy around the development and maintenance of risk calculators for our patients

IV. Key Note Address

Enhanced Recovery after Surgery (ERAS) in Vascular Care - Dr. Emily Spangler

V. Breakout Sessions

Dr. Chandler Long

Dr. Katharine McGinagle

Dr. Liz Genovese

Dr. Leila Mureebe

VI. National VQI Update

See slide deck

VII. Next Meeting:

**Friday November 4, 2022**

This will be a \_\_\_\_\_ meeting

Time TBA