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 McGinigle
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