

Carolinas Vascular Quality Regional Group

Fall 2023 Meeting

10/20/23 900am – 1200pm

Remote via Zoom

Meeting Highlights/Action Items

(See regional slide deck for detailed data)

Remote attendance: (download from ring central)

PSO Representative Attending Meeting: Melissa Latus

I. Presentations:

Title of Presentation: VQI Regional Quality Report

Presenter: Thomas Brothers, MD

II. General Discussion and Questions

- a. LTFU rate continues to be slightly better than VQI overall rate currently at 76%.
- b. Discharge medication is at 90%. Our region remains above the VQI overall rate which is fantastic and each year we get better.
- c. Preop smoking, for elective cases only, more of our patient's smoke compared to the VQI overall number.
- d. Smoking cessation (data taken from follow up visits) is 34% which is slightly higher than VQI overall number.
- e. TFEM asymptomatic CAS stroke and death rate was 0% (137 cases) compared to 1.3% expected rate. The VQI overall rate was 1.6%.
- f. TFEM symptomatic CAS stroke and death rate higher than expected and higher than VQI overall (174 cases).
- g. TCAR asymptomatic volume is increasing. Our region's stroke and death rate is in line with the VQI overall rate.
- h. TCAR symptomatic stroke and death rate was higher than expected but in line with the VQI overall rate.
- i. CEA asymptomatic really good at <1% stroke or death rate and the same as VQI overall rate. Very similar rate as asymptomatic TCAR rate.
- j. Observed CEA symptomatic stroke and death rate is higher than expected and higher than VQI overall number. Our region's rate has steadily increased since June 2021. Maybe something we can focus on at the next meeting.

- k. Observed CEA symptomatic LOS >1 day is higher than expected rate and in line with the VQI overall rate.
- l. EVAR LOS has been focused on nationally. Our observed rate is lower than expected and lower than VQI overall rate. There is a lot of variation in our region.
- m. EVAR sac diameter is at 74% and significantly higher than VQI overall rate. Our region has continued to improve since June 2019 and is currently the best of all VQI regions! Wake Med is at 100%, that center uses Epic templates that requires the documentation of sac size. If not included, the data manager reminds the physician to report the sac size. Alamance has reporting templates as well.
- n. 82% adherence to EVAR SVS AAA diameter guidelines, compared to 75% compared to VQI overall. Dr. Mureebe to check on status of EVAR module revisions and the variables that go into EVAR repair regardless of aneurysm size.
- o. TEVAR sac size diameter reporting remains a challenge for all. Our region continues to improve.
- p. Observed in hospital mortality for elective oAAA repair for our region is 5.5% compared to 3.7% VQI overall. Our region's expected mortality is 3.5% and continues to be higher.
- q. 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 too.
- r. We are stellar at taking care of PVI Claudication patients. ABI/toe pressure for our region is 85% compared to VQI overall at 67%.
- s. Major complications after Infra for CLTI is about 6% which is a little bit higher than VQI overall.
- t. Supra CLTI complications are 6.4% compared to VQI overall at 7.3%. Consistently improving since June 2021.
- u. We are lowest in VQI for LEAMP post op complications. We are continuing to improve; our regional rate is 8.5% and the VQI overall is 11.8%.

III. National VQI Update –

See slide deck

IV. Quality Improvement Update

See slide deck

V. AQC-

See slide deck

VQC-

See slide deck

RAC-

See slide deck

Governing Council

See slide deck

VI. Next Meeting:

May 3, 2024, time, place and format TBD

General discussion:

Throughout the data review portion of the meeting, the issue of unblinding center data was brought up for further discussion. Here are the measures that can be unblinded.

Procedure Volume

Procedure Volume, All Years

Physician Specialties

Long-Term Follow-up

Discharge Medications

Preop Smoking

Smoking Cessation

CEA ASYMP: Postop LOS>1 Day

CEA SYMP: Postop LOS>1 Day

EVAR: Postop LOS>2 Days

EVAR: Sac Diameter Reporting

EVAR: SVS AAA Diameter Guideline

TEVAR: Sac Diameter Reporting

OAAA: SVS Cell-Saver Guideline

OAAA: SVS Iliac Inflow Guideline

PVI CLAUD: ABI/Toe Pressure

The group was polled on the type of meeting format preferred as well as the the reasons for attending meetings remotely instead of in person. There were 21 responses. Of those responding, 7 believe in-person is the best for networking, however, 12 people stated that remote is preferred primarily due to travel restrictions/budget constraints. 4 people replied that travel burdens (planning conflicts & travel difficulties) are a concern.