

# Great Lakes Vascular Study Group

March 31, 2023

1 PM – 4 PM (ET)

UPMC Presbyterian Hospital-Heart & Vascular Institute  
Hybrid

# Meeting Attendance Credit

Before we get started...

Please sign in using your Full Name (First and Last).

In-Person Attendees – Scan the QR code shown and sign in

Remote Attendees – See below instructions (#1-#3)

1. Click “Participants” in the box at the top or bottom of your screen.
2. If your full name is not listed, hover next to your name and you’ll see “rename”.
3. Click and sign in.



Please note: If you can't sign in, please email Leka Johnson at [ljohnson@svspsso.org](mailto:ljohnson@svspsso.org) and let her know the identifier you were signed in under (ex –LM7832 or your phone number).

**\*\*SPECIAL NOTE: ALL ATTENDEES must have an ACTIVE PATHWAYS user account to get attendance credit!!!**

# Agenda-Great Lakes VSG-March 31, 2023

Time	Topic	CE Credit
1:00 pm	<p>Welcome</p> <p>Regional Data Review –Mohammad Eslami, MD, GLVSG Medical Director</p> <p>Learning Objectives:</p> <ul style="list-style-type: none"> <li>• Use the VQI regional reports to establish quality improvement goals for the vascular patients (outcomes) and for their center (process).</li> <li>• Interpret and compare each centers’ VQI results to regional and national benchmarked data.</li> <li>• Learn, through group discussion the VQI regional results to improve the quality of vascular health care by monitoring measurable performance indicators, SVS PSO evidence-based research, and outcomes.</li> <li>• Identify high performing regional vascular centers to discuss variations in care and clinical practice patterns to improve outcomes and prompt quality improvement recommendations for vascular care patients. Sharing of best practices/pathways of care.</li> </ul>	Yes
2:00 pm	<p>Regional QI Proposal –Mohammad Eslami, MD, GLVSG Medical Director</p> <p>Learning Objectives:</p> <ul style="list-style-type: none"> <li>• Use the VQI regional reports to establish quality improvement goals for the vascular patients (outcomes) and for their center (process).</li> <li>• Interpret and compare each centers’ VQI results to regional and national benchmarked data.</li> <li>• Learn, through group discussion the VQI regional results to improve the quality of vascular health care by monitoring measurable performance indicators, SVS PSO evidence-based research, and outcomes.</li> <li>• Identify high performing regional vascular centers to discuss variations in care and clinical practice patterns to improve outcomes and prompt quality improvement recommendations for vascular care patients. Sharing of best practices/pathways of care.</li> </ul>	Yes

# Agenda (cont.)

Time	Topic	CE Credit
2:50 pm	Break	No
3:00 pm	National VQI Update – Melissa Latus, BSN, RN, PSO Clinical Operations Project Manager Learning Objectives: <ul style="list-style-type: none"> <li>• Use the VQI regional reports to establish quality improvement goals for the vascular patients (outcomes) and for their center (process).</li> <li>• Identify high performing regional vascular centers to discuss variations in care and clinical practice patterns to improve outcomes and prompt quality improvement recommendations for vascular care patients. Sharing of best practices/pathways of care.</li> </ul>	Yes
3:40 pm	AQC Update –John Moawad, MD	No
3:45 pm	VQC Update –Mohammad Eslami, MD	No
3:50 pm	RAC Update –Michael Madigan, MD	No
3:55 pm	Governing Council Update –Mohammad Eslami, MD	No
4:00 pm	Open Discussion/Next Meeting/Meeting Evaluation	No

# No Disclosures

# Welcome and Introductions

## Allegheny Clinic Vascular Surgery

Aultman Hospital  
Bethesda North Hospital  
Butler Memorial Hospital  
Cleveland Clinic  
Cleveland Clinic Akron General  
Clinton Memorial Hospital  
DLP Conemaugh Memorial Medical Center, LLC  
Doctors Hospital  
Fairfield Medical Center  
Firelands Regional Medical Center  
Galion Hospital  
Genesis Hospital  
Good Samaritan Hospital  
Grady Memorial Hospital  
Grant Medical Center  
Heritage Valley Beaver  
Indiana Regional Medical Center  
Jobst Vascular Institute  
Kettering Health Dayton  
Kettering Health Hamilton

Kettering Health Main Campus  
Mansfield Hospital  
Marietta Memorial Hospital  
Marion General Hospital  
Mercy Health - Anderson Hospital  
Mercy Health - Fairfield Hospital  
Mercy Health - St. Elizabeth Youngstown Hospital  
Mercy Health - The Jewish Hospital  
Mercy Health - West Hospital  
Mercy Health St. Rita's Medical Center  
MetroHealth Medical Center  
Mount Carmel East Hospital  
Mount Carmel Grove City Hospital  
Mount Carmel St. Ann's Hospital  
Mount Nittany Medical Center  
Riverside Methodist Hospital  
St. Clair Hospital  
Steward Trumbull Memorial Hospital, Inc.  
Summa Health System  
SW General Health Center  
The Christ Hospital

UH Elyria Medical Center  
UH St. John Medical Center  
University Hospitals Ahuja Medical Center  
University Hospitals Cleveland Medical Center  
University of Cincinnati Medical Center, LLC  
UPMC Altoona  
UPMC Pinnacle Hanover  
UPMC Pinnacle Harrisburg  
UPMC Pinnacle Memorial  
UPMC Pinnacle West Shore  
UPMC Williamsport  
UPMC/Hamot Hospital  
UPP Vascular Surgery  
West Medical Center  
Westmoreland Regional Hospital  
Wexner Medical Center  
Wooster Community Hospital

## Region Volume Appendix

Spring 2023

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### About the Appendix

The Region Volume Appendix provides your region's case volumes for each report. In addition, the number of centers with cases contributing to each report is given. Note that columns referencing complete cases are appropriately left blank for non risk-adjusted reports.

# Region Volume Index

Report	Included Cases	Centers with Included Cases	Centers with at least 10 Included Cases	Complete Cases	Centers with Complete Cases	Centers with at least 10 Complete Cases
Procedure Volume	8519	52	43			
Procedure Volume, All Years	66023	61	56			
Long-Term Follow-up	7935	35	28			
Discharge Medications	7221	52	42			
Preop Smoking	5990	52	41			
Smoking Cessation	2019	27	18			
TFEM CAS ASYMP: Stroke/Death	283	28	11	267	28	11
TFEM CAS SYMP: Stroke/Death	350	23	9	330	23	9
TCAR ASYMP: Stroke/Death	327	36	9	310	35	8
TCAR SYMP: Stroke/Death	155	30	4	151	30	3
CEA ASYMP: Stroke/Death	778	27	22	749	27	21
CEA ASYMP: Postop LOS>1 Day	772	27	22	743	27	21
CEA SYMP: Stroke/Death	416	27	11	402	27	11
CEA SYMP: Postop LOS>1 Day	414	27	11	400	27	11
EVAR: Postop LOS>2 Days	482	18	15	458	18	15
EVAR: Sac Diameter Reporting	475	13	12			
EVAR: SVS AAA Diameter Guideline	439	18	13			
TEVAR: Sac Diameter Reporting	112	5	4			
OAAA: In-Hospital Mortality	649	10	7	631	10	7
OAAA: SVS Cell-Saver Guideline	672	11	7			
OAAA: SVS Iliac Inflow Guideline	742	11	7			
PVI CLAUD: ABI/Toe Pressure	782	20	17			
INFRA CLTI: Major Complications	555	16	15			
SUPRA CLTI: Major Complications	162	12	8			
LEAMP: Postop Complications	166	2	2			
HDA: Primary AVF vs. Graft	221	3	3			
HDA: Ultrasound Vein Mapping	281	3	3			
HDA: Postop Complications	281	3	3			
IVCF: Filter Retrieval Reporting	94	2	1			



The VQI Regional Quality Report is produced semiannually to provide centers and regions targeted, comparative results and benchmarks for a variety of procedures, process measures and postoperative outcomes.

The following updates have been implemented to enhance and improve the Spring 2023 VQI Regional Quality Report:

- **Preop Smoking Report Added** - A preop smoking report is now provided. This report displays center-level, regional, and VQI overall rates of current smoking at time of procedure.
- **Smoking Cessation Report Added** - A smoking cessation report is now provided. This report displays center-level, regional, and VQI overall rates of smoking cessation at follow up.

**GLVSG Spring 2023 Regional Report**

## 2023 GLVSG Current Quality Improvement Charters

- *Documentation for Claims Audit*

Cleveland Clinic; Donna Fleming

MD Champion: Jon Quatromoni, MD

- *DC Meds - Smart phrases*

Allegheny Clinic Vascular Surgery; Ashley Moore

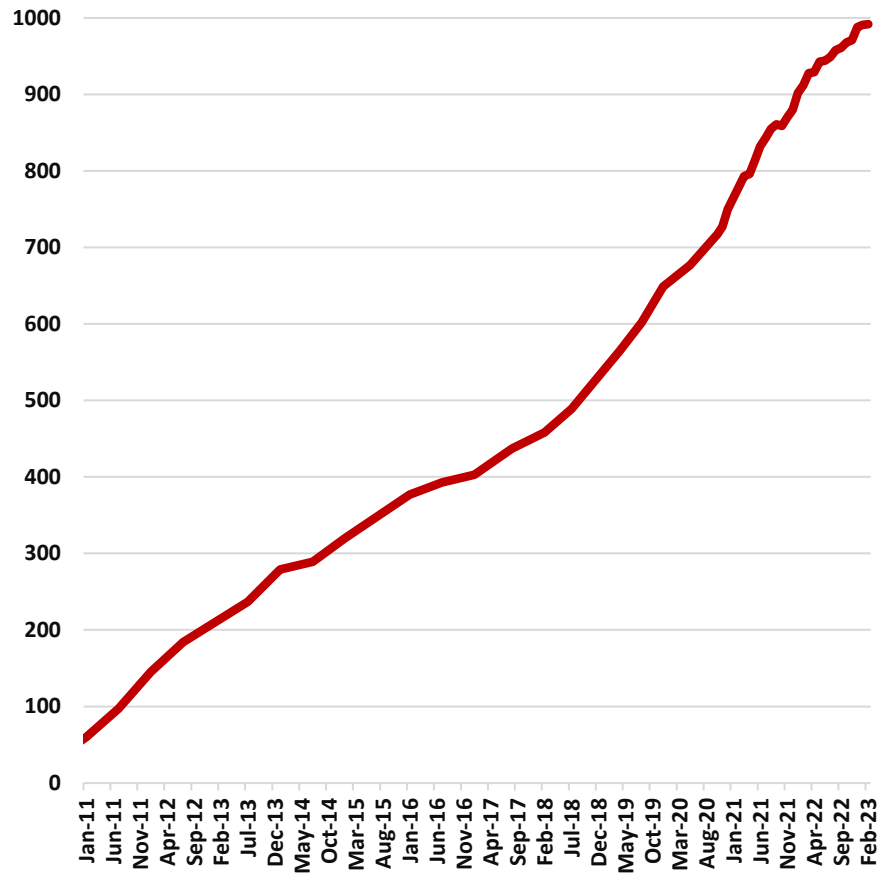
MD Champion: Dr. Thiagarajasubramanian

# National VQI Update

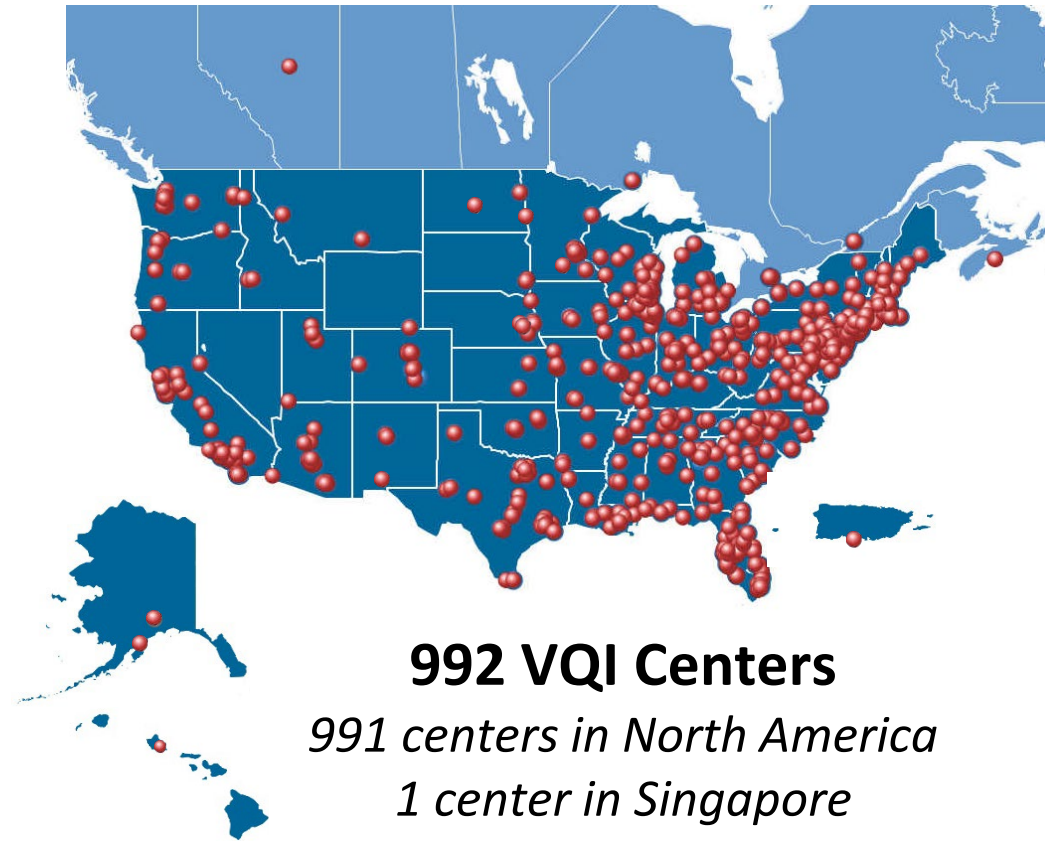
**Melissa Latus, BSN, RN**

**Clinical Operations Project Manager**

## Number of Participating Centers

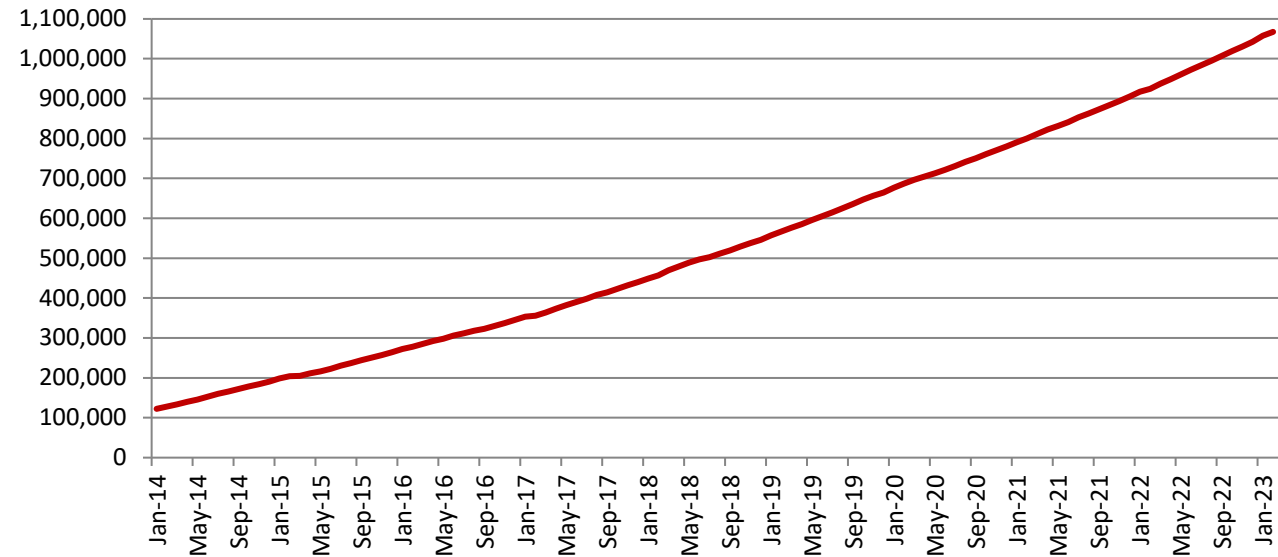


## Location of VQI Participating Centers



<b>Total Procedures Captured (as of 3/1/2023)</b>		<b>1,066,834</b>
Peripheral Vascular Intervention		367,998
Carotid Endarterectomy		190,201
Infra-Inguinal Bypass		80,201
Endovascular AAA Repair		79,316
Hemodialysis Access		75,770
Carotid Artery Stent		94,032
Varicose Vein		60,449
Supra-Inguinal Bypass		25,655
Thoracic and Complex EVAR		28,286
Lower Extremity Amputations		27,921
IVC Filter		18,184
Open AAA Repair		17,546
Vascular Medicine Consult		1,119
Venous Stent		156

### VQI Total Procedure Volume



Total Procedure Volume reflects net procedures added to the registry for the month

# Save the Date!

2023 VQI Annual Meeting  
June 13-14, 2023

Gaylord National Resort & Convention Center  
National Harbor, MD (outside **Washington, DC**)

2  
0  
2  
3

[https://www.compusystems.com/servlet/ar?evt\\_uid=805](https://www.compusystems.com/servlet/ar?evt_uid=805)

**SVS** | Society for Vascular Surgery

**2023** | Vascular Annual Meeting™  
National Harbor, MD • June 14-17

**SVS** | Society for Vascular Surgery

SVS Member Username/Password Help - Contact SVS Membership Department at 800-258-7188 or 312-334-2300. Non-Member and VQI Registrants are required to create an account.

Registration categories are auto assigned based on current membership status. Pay lapsed dues online at [www.vascular.org](http://www.vascular.org) to obtain member registration rates.

Start New SVS Registration

**SVN** SOCIETY OF VASCULAR NURSING  
EMPOWERING NURSES THROUGH EDUCATION & COLLABORATION

Registration categories are auto assigned based on current membership status. Pay lapsed dues online to obtain membership rates. Please allow up to 72 hours for payment to be applied.

Start New SVN Registration

**SVS** | **VQI**  
In collaboration with NCDR®

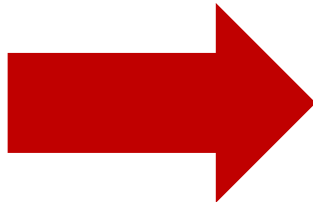
VQI Annual Meeting  
Registration allows for admission to VQI ONLY.

Start New VQI Registration

**RPVI**

RPVI Course  
Registration allows for admission to RPVI ONLY.

Start New RPVI Registration





# A Brand New VQI.org!



Improving the quality, safety, effectiveness and cost of vascular healthcare by collecting and exchanging information.

BEGIN YOUR SEARCH HERE.

Enter keyword or term to search...



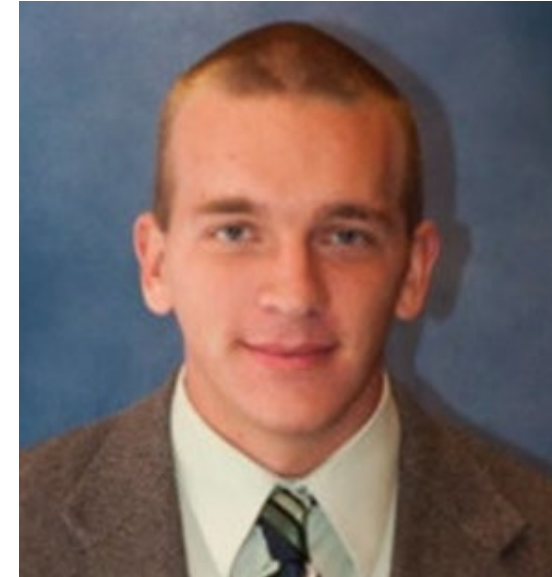
- The addition of 14 registry specific pages
- More robust search capabilities, so customers can easily get the information they need
- Clean presentation of content
- Consistent menu options for each of the 18 Regional Group Pages.
- Streamlined Members Only area

https://staging.vqi.bytesco.site/about/



## Jeff Yoder – Statistician

- Start Date December 2022
- M.S. degree in Statistical Science from Indiana University
- Teaching assistant at Indiana University.



## Top Responsibilities:

Working with the PSO Analytics team on a variety of projects and initiatives.

- Infra/Supra Inguinal Bypass Revisions Live late March 30, 2023
- New National Quality Initiative Smoking Cessation to be announced at VQI@VAM
- Data Integrity Audit Program
- Risk Calculator
- Follow-up reports:
  - IVC Filter and Varicose Vein
- Coming soon:
  - Harmonization of CAD variables
  - Harmonization of Anticoagulation
  - Open AAA Registry Revision



- Data Integrity Audits will begin Spring 2023.
- The Carotid Artery Stent Registry - first to go live.
- Additional registries will be added on a regular basis.
- Data results will not be punitive; will be utilized to update training and help texts.
- Audits are being performed by a third-party vendor – Telligen.
- Audited records will be blindly abstracted by Telligen; then compared to the completed case in Pathways for matches.
- More information to come soon.
- All inquiries should be sent to Melissa Latus. [mlatus@svspso.org](mailto:mlatus@svspso.org)



- In partnership with the American College of Surgeons
- Inpatient launch late March, Outpatient launch June
- Standards derived by SVS members; program is used to measure compliance w/standards
- Six National Quality Strategies to align organizational functions to drive improvement based on the aims & priorities of the Agency for Healthcare Research and Quality (AHRQ):
  - Measurement & feedback w/ required registry participation
  - Certification, accreditation, & regulation w/required facility regulation
  - Consumer incentives & benefit designs with thorough discussion of treatment options and consent
  - Health information technology, working with outside software for continuation of care
  - Innovation & diffusion with research
  - Work force development w/ the capability of resident training

- TASC/GLASS
  - Dr. Elizabeth Genovese, M.D.
- Varicose Vein
  - Dr. Jennifer Ellis, M.D.

Visit [VQI.org](https://www.vqi.org) for a full listing of all Educational video offerings

<https://www.vqi.org/registry-education-members-only/>

## REGISTRY EDUCATION WEBINARS

- [VQI Educational Session – Vascular Medicine Consult \(VMC\)](#)
- [VQI Educational Session – Infra/Supra](#)
- [VQI Educational Session – PVI](#)
- [VQI Educational Session – EVAR](#)
- [VQI Educational Session – TEVAR/COMPLEX EVAR](#)
- [VQI Educational Session – CAS and CEA](#)
- [VQI Educational Session – Open AAA](#)
- [SVS VQI Infra/Supra Registry Revisions Webinar](#)
- [SVS VQI Educational Webinar – TASC/GLASS](#)
- [SVS VQI Education Webinar – TASC/GLASS Slides](#)



## Venous Stent Registry and Vascular Medicine Consult Registry Free Trial

For a limited time, SVS VQI is offering a **complimentary one-year trial subscription** to the VSR and VMC for an easily accessible first-hand experience of its value and ROI.

<https://mailchi.mp/5119b784e8d0/no-time-like-the-present>

To learn more about the Venous Stent Registry offer click here: [Venous Stent](#)

To learn more about the Vascular Medicine Consult Registry offer click here: [Vascular Medicine](#)

Or email [vqi@fivoshealth.com](mailto:vqi@fivoshealth.com) to contact an account executive.

- **A Vascular Quality Initiative frailty assessment predicts post discharge mortality in patients undergoing arterial reconstruction** Kraiss LW, Al-Dulaimi R, Allen CM, Mell MW, Arya S, Presson AP, Brooke BS.  
<https://pubmed.ncbi.nlm.nih.gov/35709866/>
- **Ankle-brachial index use in peripheral vascular interventions for claudication** Hawkins KE, Valentine RJ, Duke JM, Wang Q, Reed AB. <https://pubmed.ncbi.nlm.nih.gov/35276260/>
- **Assessing the quality of reporting of studies using Vascular Quality Initiative (VQI) data** Mirzaie AA, Delgado AM, DuPuis DT, Olowofela B, Berceli SA, Scali ST, Huber TS, Upchurch GR Jr, Shah SK.  
<https://pubmed.ncbi.nlm.nih.gov/35760240/>
- **Incidence of Procedure-Related Complications in Patients Treated With Atherectomy in the Femoropopliteal and Tibial Vessels in the Vascular Quality Initiative** Sanon O, Carnevale M, Indes J, Gao Q, Lipsitz E, Koleilat I.  
<https://pubmed.ncbi.nlm.nih.gov/35466788/>
- **Survival, reintervention and surveillance reports: long-term, center-level evaluation and feedback of vascular interventions** Fowler XP, Gladders B, Moore K, Mao J, Sedrakyan A, Goodney P.  
<https://pubmed.ncbi.nlm.nih.gov/36248241/>



- **Perioperative outcomes of carotid endarterectomy and transfemoral and transcervical carotid artery stenting in radiation-induced carotid lesions** Batarseh P, Parides M, Carnevale M, Indes J, Lipsitz E, Koleilat I.  
<https://pubmed.ncbi.nlm.nih.gov/34560219/>
- **Long-term implications of elective evar that is non-compliant with clinical practice guideline diameter thresholds** de Guerre LEVM, Dansey KD, Patel PB, Marcaccio CL, Stone DH, Scali ST, Schermerhorn ML.  
<https://pubmed.ncbi.nlm.nih.gov/34508797/>
- **Effect of postoperative antithrombotic therapy on lower extremity outcomes after Infrapopliteal bypass for chronic limb-threatening ischemia** Marcaccio CL, Patel PB, Wang S, Rastogi V, Moreira CC, Siracuse JJ, Schermerhorn ML, Stangenberg L. <https://pubmed.ncbi.nlm.nih.gov/35074410/>
- **The association between device instructions for use adherence and outcomes after elective endovascular aortic abdominal aneurysm repair** De Guerre LEVM, O'Donnell TFX, Varkevisser RRB, Swerdlow NJ, Li C, Dansey K, van Herwaarden JA, Schermerhorn ML, Patel VI. <https://pubmed.ncbi.nlm.nih.gov/35276256/>
- **Association of preoperative vein mapping with hemodialysis access characteristics and outcomes in the Vascular Quality Initiative** Fedorova E, Zhang GQ, Shireman PK, Woo K, Hicks CW.  
<https://pubmed.ncbi.nlm.nih.gov/34718099/>



# Regional Meeting CME/CE Credit



Des Moines University is the continuing education provider for this activity.



The attendance roster will be cross-referenced with those applying for CME/CE. Sign in correctly.



Each participant **MUST COMPLETE BOTH** the attendance attestation and the meeting evaluation from the URL site – one form.



You will have 7 days from the date of the meeting to complete the forms and **SUBMIT**.



Approximately 14 days from the meeting, Des Moines University will email you instructions on how to access your certificate.



PSO leadership is providing continuing education credit to you at no charge!

**If you do not complete and submit the online forms within 7 days, continuing education credit cannot be awarded.**

## **REMEMBER TO PSO:**

- **P**UT your FULL NAME in Zoom for remote attendees. Record of meeting attendance is required for CME/CE credit (no exceptions will be made)
- **S**END an email to [ljohnson@svspso.org](mailto:ljohnson@svspso.org) with names of group members that are sharing 1 device
- **O**FFICIALLY apply for CME/CE credit by clicking the URL or QR code provided here:  
[https://dmu.co1.qualtrics.com/jfe/form/SV\\_3ggzKCmZ3LAIUya](https://dmu.co1.qualtrics.com/jfe/form/SV_3ggzKCmZ3LAIUya)




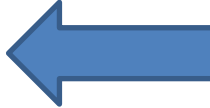
You only have **7 days** to complete forms for CME/CE Credit.  
**NO EMAIL WILL BE SENT AS A REMINDER OR WITH THE CME/CE LINK**

# Quality Improvement Update Spring 2023



# Quality Improvement – Participation Awards

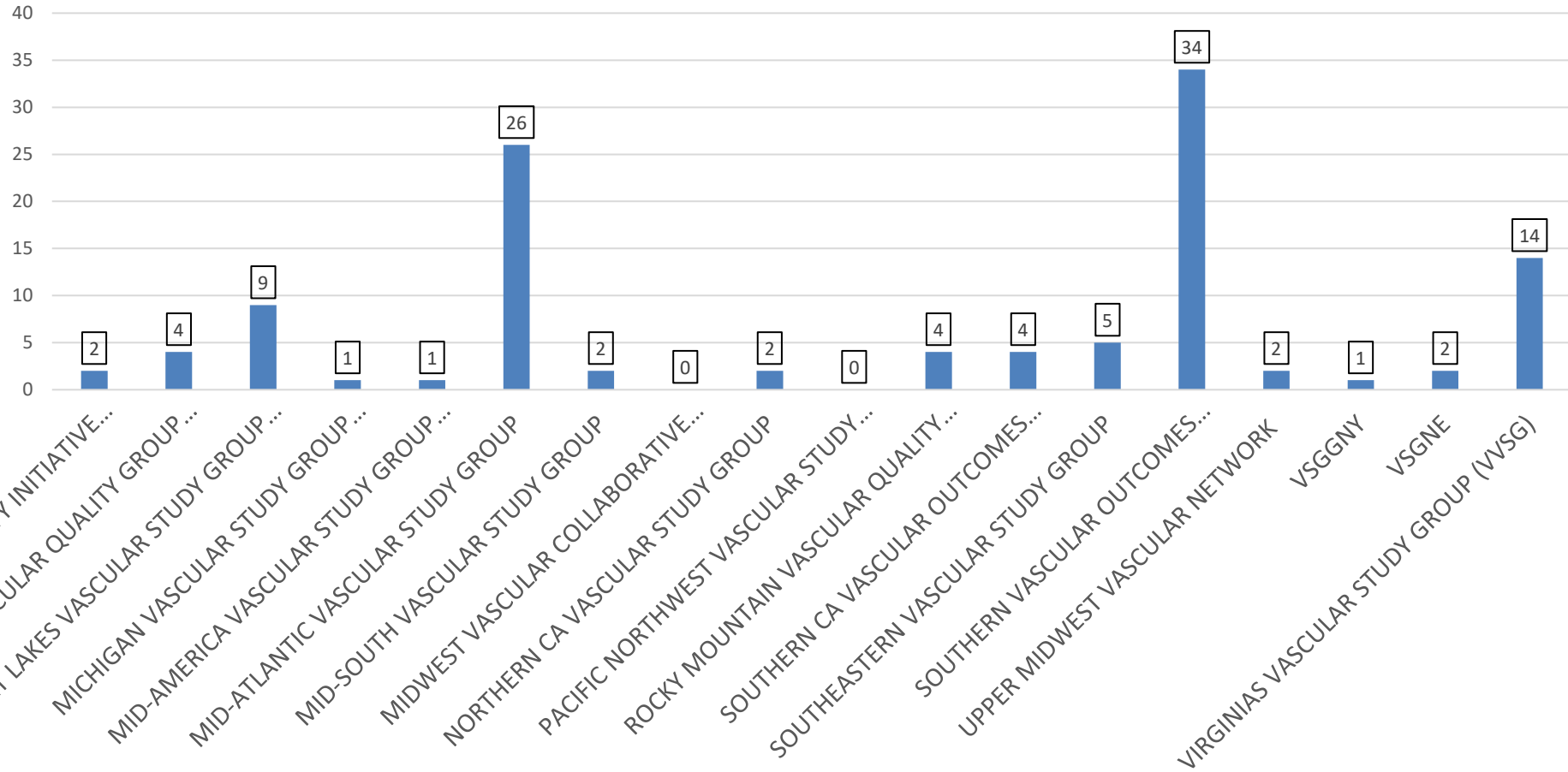
The following is a list of the four domains for the 2023 Participation Awards criteria:

- **Domain 1 – LTFU – 40% weighted**
- **Domain 2 – Regional Meeting Attendance – 30% weighted**
- **Domain 3 – QI Project – 25% weighted** 
- **Domain 4 – Registry Subscriptions – 5% weighted** 

<https://www.vqi.org/quality-improvement/participation-awards/>

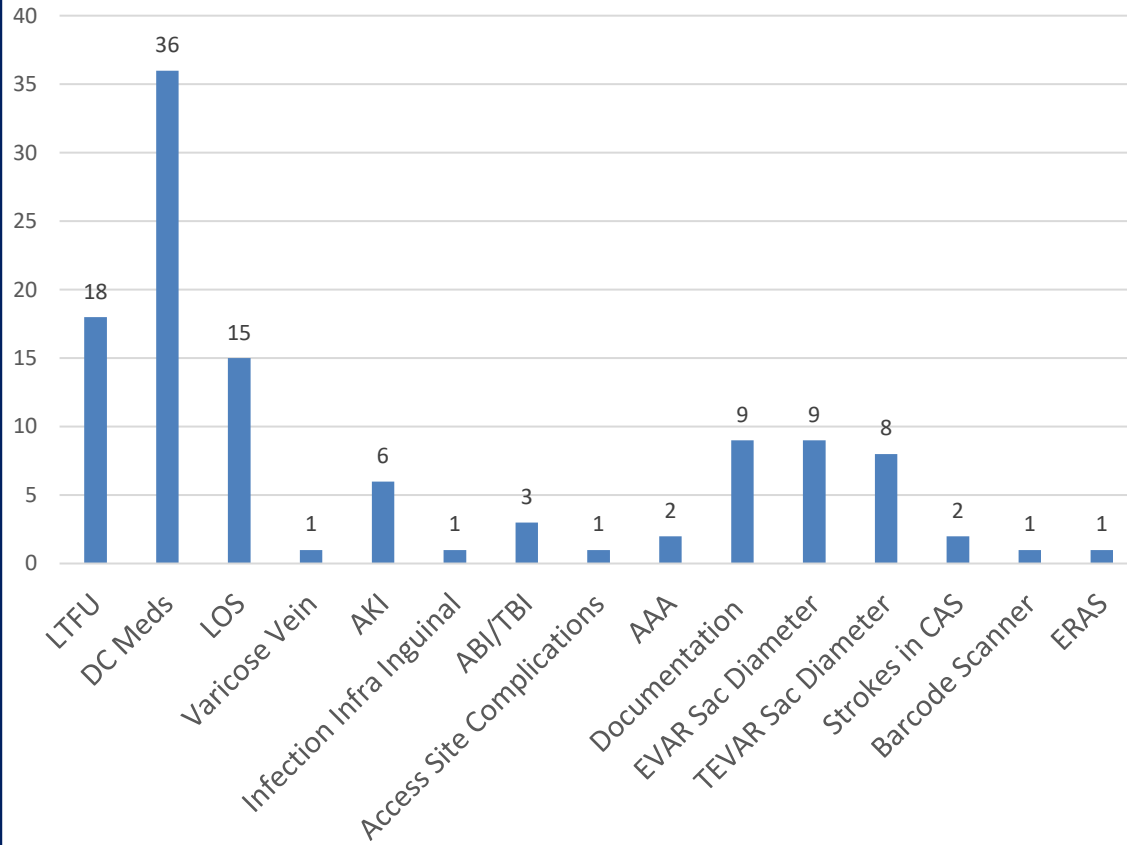
# Quality Improvement - Charters

### Regions with Charters n=113

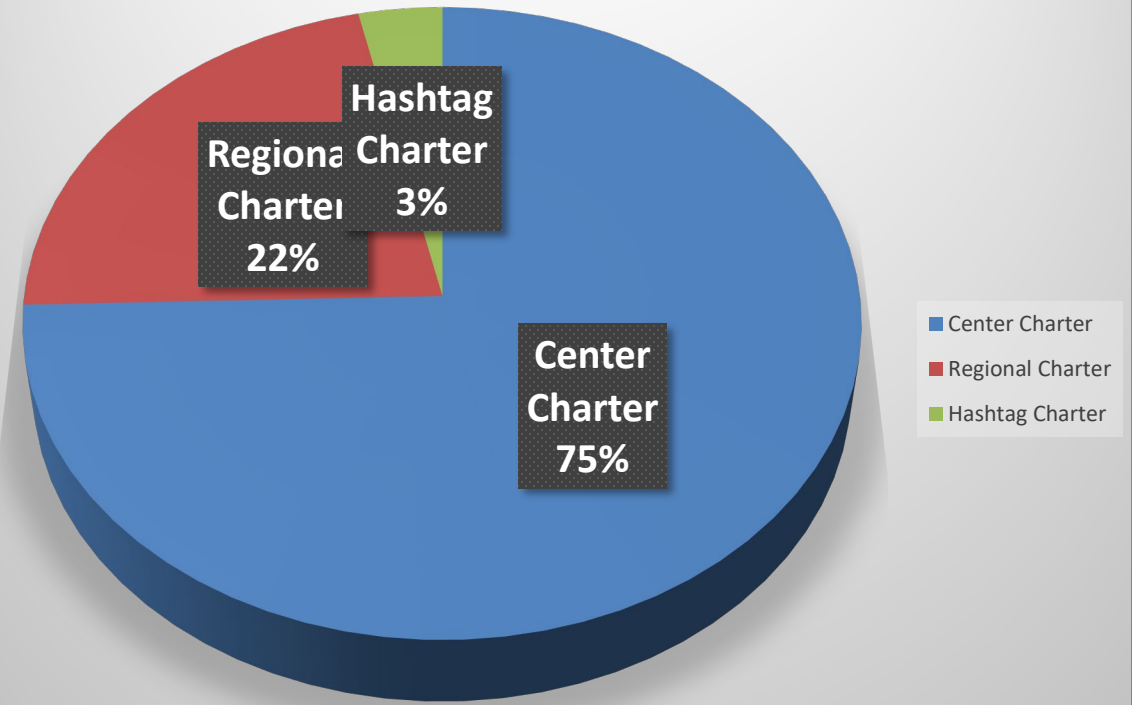


# Quality Improvement – Charter Breakdown

### Charter Topics



### Charter Types



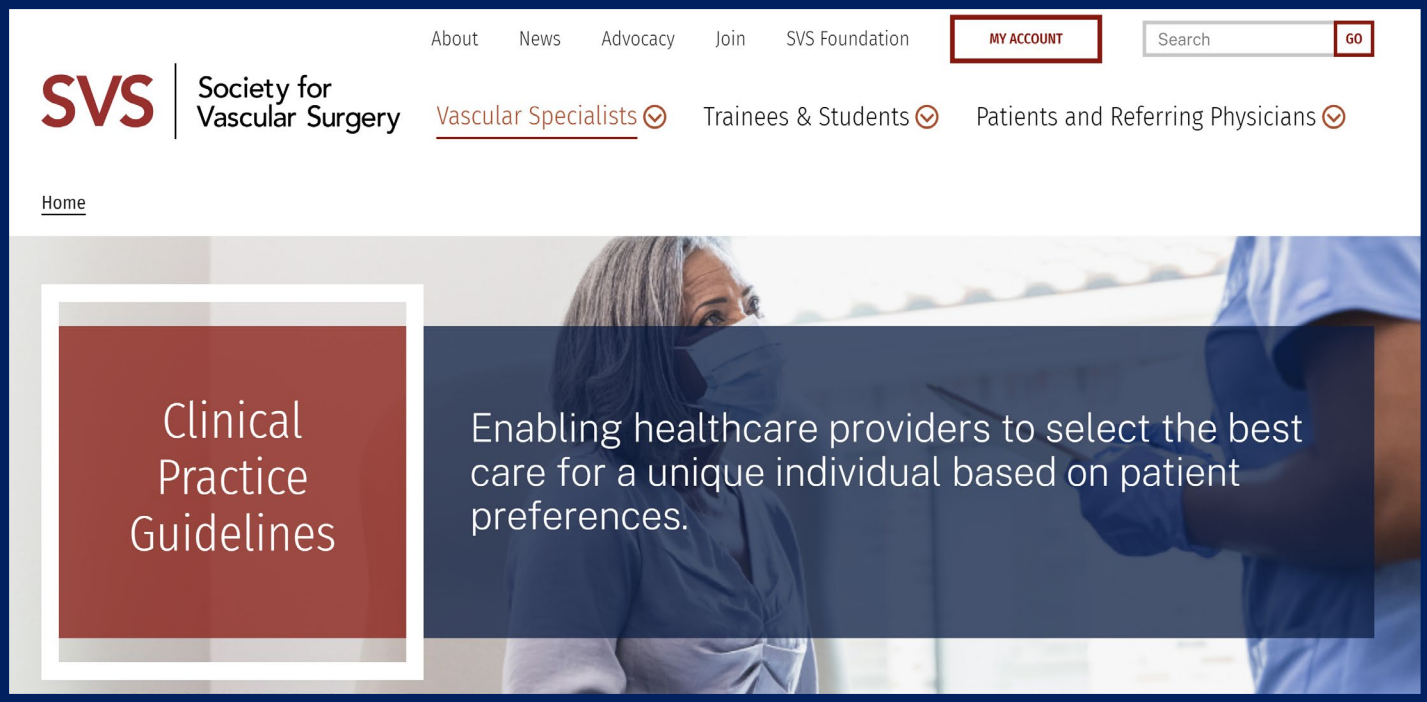
- Quarterly Webinars (Charter and QI)
  - [www.vqi.org/quality-improvement-members-only/#upcoming-events](http://www.vqi.org/quality-improvement-members-only/#upcoming-events)
- Sample Charters
  - [www.vqi.org/quality-improvement/quality-improvement-tools/#qi-charters](http://www.vqi.org/quality-improvement/quality-improvement-tools/#qi-charters)
- Toolkits (VQI@VAM, Data Manager, LTFU)
  - [www.vqi.org/quality-improvement/quality-improvement-tools/#qi-toolkits](http://www.vqi.org/quality-improvement/quality-improvement-tools/#qi-toolkits)
- New improved VQI website
  - [www.vqi.org](http://www.vqi.org)
- 1:1 Calls
  - [bwymmer@svspso.org](mailto:bwymmer@svspso.org)



## SVS Clinical Practice Guidelines



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Clinical Practice Guidelines

Enabling healthcare providers to select the best care for a unique individual based on patient preferences.





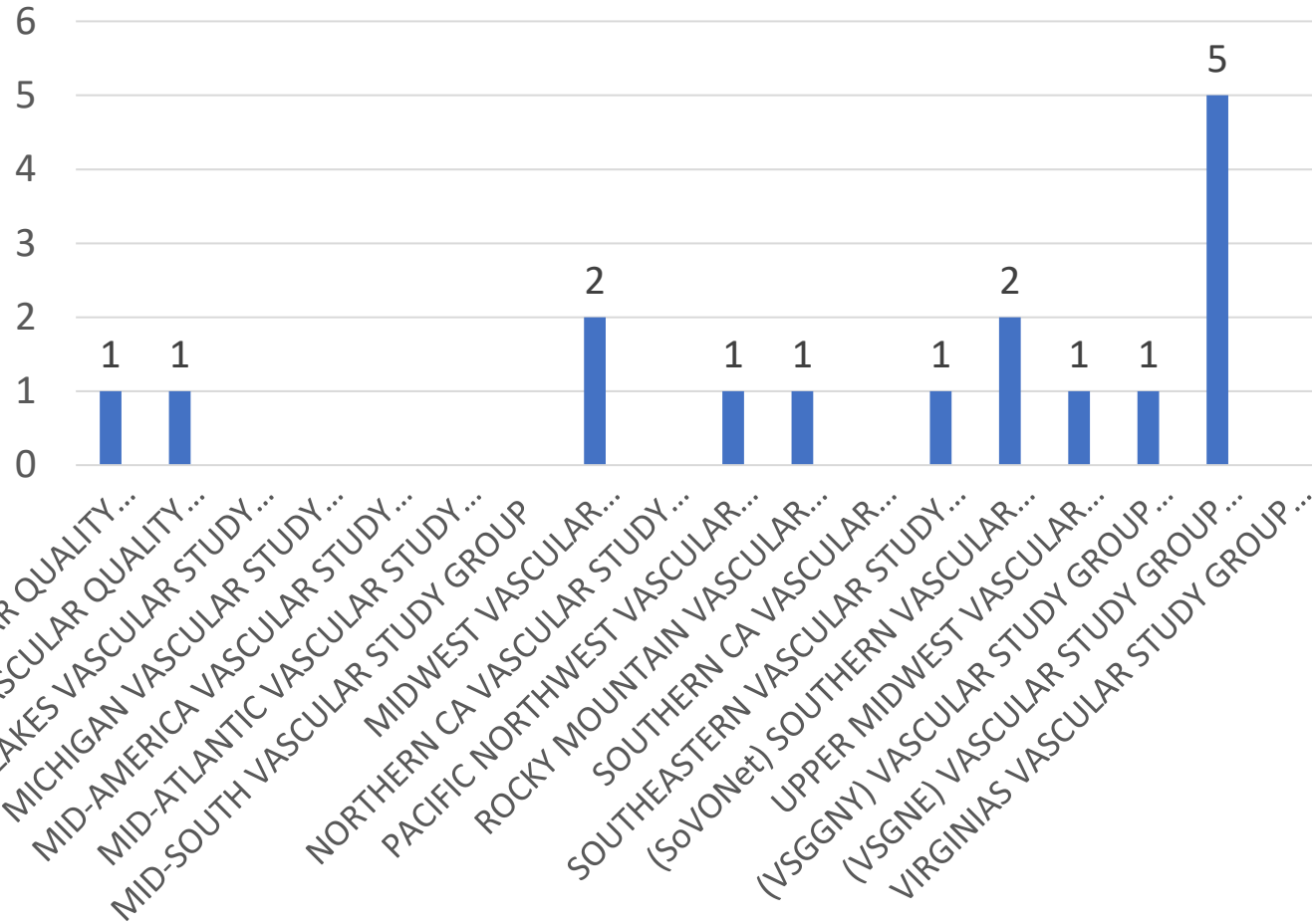
# SVS PSO Quality FIT Program

- Existing FIT Trainees Jack Cronenwett Scholarship Application
  - Applications accepted January 9 – February 28
  - FIT Committee Review March – April
  - Scholarship winners announced at VQI@VAM 2023
- FIT Trainee 2023 Applications
  - Applications accepted January 9 - February 28
  - FIT Committee Review April – May
  - FIT Trainees with FIT Mentors announced at VQI@VAM 2023
- FIT Mentors
  - Accepted at any time
  - Contact [bwymmer@svspso.org](mailto:bwymmer@svspso.org)
- [www.vqi.org/quality-improvement/quality-fellowship-in-training-fit-program/](http://www.vqi.org/quality-improvement/quality-fellowship-in-training-fit-program/)



# SVS PSO Quality FIT Program

FIT Regions



# Arterial Quality Council:



# Arterial Quality Council Update

- Open AAA Major Revision
  - Will be renamed to accurately capture intent of the registry
  - Iliac to Left Subclavian
- Registry Committee updates
- Review Smoking Cessation and inclusion of vaping variables.  
Grp decided not at this time
- Introduction of the Data Integrity Program

# Venous Quality Council:

**Mohammad Eslami, MD**



# Venous Quality Council Update

- Last Meeting February 22, 2023
- Re-engagement of the venous registry committees
  - Focus on new center recruitment
  - Review of current reporting
  - Brainstorming & discussion for addition of new reporting measures for bi-annual reports, Quarterly Dashboards and follow-up reports

# IVC Filter Follow Up Report

## IVC Follow-up Outcomes Report

1m ago   

Procedure Date

Planned Filter Duration

2019/01/01 – 2021/12/31

is any value

2019/01/01 – 2021/12/31 

Temporary

Permanent

### Prepared for Demo Medical Center on 02/01/2023

This report is a patient safety work product generated within the SVS PSO, LLC, and is considered privileged and confidential

### Follow-Up Rate

	My Center	My Region	All VQI
Cases with any follow-up	83.3% (5/6)	NA (<3 centers)	NA (<3 centers)
Cases with follow-up >= 9 & <= 21 ...	50% (2/4)	NA (<3 centers)	NA (<3 centers)
Cases with follow-up >= 9 & <= 21 ...	50% (2/4)	NA (<3 centers)	NA (<3 centers)

**Fictitious Data**

# Varicose Vein Follow-up Report

## Varicose Vein Follow-Up Outcomes Report

22m ago   

Procedure Date

2020/01/01 – 2022/12/31

2020/01/01 – 2022/12/31 

Leg Treated

is any value

- Right only
- Left only
- Bilateral

Treatment Type

is any value

- Thermal\_RF
- Thermal\_Laser
- Mechanochemical
- Chemical
- Embolic adhesive
- High ligation and stripping
- Stripping
- Stab phlebectomy
- Trivex phlebectomy
- Open ligation
- Endoscopic ligation

Vein Type

is any value

- Truncal
- Perforator
- Cluster

Treatment Region

any value 

- Thigh
- Calf/Ankle
- Both

This report is a patient safety work product. It was created within the SVS PSO, LLC, and is considered privileged and confidential.

### Follow-Up Rate

	My Center	My Region	All VQI
Cases with early follow-up 0-3 months	33.33% (2/6)	NA	NA (<3 centers)
Cases with late follow-up >3 months	33.33% (2/6)	NA	NA (<3 centers)
Venous ulcers patients with late follow-up >= ...	0.00% (0/6)	NA	NA (<3 centers)

**Fictitious Data**



- Melissa Latus is your PSO primary point of contact on the status or refresh request. [mlatus@svspsso.org](mailto:mlatus@svspsso.org)
- An **ACTIVE** pathways account & privileges to '*Share a File*' is required in order to receive your requested Blinded Data Set (BDS)
- Always included your RAC proposal number in any communications please.

# Arterial Research Advisory Council:

## Michael Madigan, MD



# Arterial RAC Schedule

<https://www.vqi.org/svs-vqi-national-arterial-rac-schedule/>

- PSO Arterial RAC - April 2023 Proposal Submission
- Call for Proposals: February 28, 2023
- Submission Deadline: March 28, 2023
- Meeting: April 10, 2023
- 
- PSO Arterial RAC - June 2023 Proposal Submission
- Call for Proposals: May 2, 2023
- Submission Deadline: May 30, 2023
- Meeting: June 12, 2023
- 
- PSO Arterial RAC – August 2023 Proposal Submission
- Call for Proposals: July 4 ,2023
- Submission Deadline: August 1, 2023
- Meeting: August 14, 2023

## 194 Publications in 2022

- **Data Security:** All investigators/team members are responsible for security of datasets, which are only to be used for the project for which they were approved.
- **Dataset Access:** Investigators have free access to the datasets to which their center has subscribed, providing that their center has at least 50% Long Term Follow-Up for the registry data being requested. Please confirm that your center subscribes to the dataset(s) you wish to analyze before submitting your proposal.
- **Comparison of Specialties:** The SVS VQI is a multi-specialty registry, therefore the SVS PSO Executive Committee does not allow comparisons between specialties in submission topics.

# Venous Research Advisory Council:

**Mohammad Eslami, MD**

# Venous RAC Update:

Created a separate Venous RAC in July 2020

[The Vascular Quality Initiative - National Venous RAC Schedule \(vqi.org\)](https://vqi.org)

2020: 3 proposals

- The impact of vein size on closure rate in treatment of the saphenous vein for venous insufficiency: **Jaime Benarroch-Gampel, MD**
- Comparison of complication rates of IVC filters based on anticoagulant and indication: **Emily Spangler, MD**
- Effect of Access Site Choice on Angulation of IVC filter and Impact on retrieval rates: **Khalil Qato, MD**

2021: 3 proposals

- Incidence of venous thromboembolic events (VTE) after endovenous ablation in patients with venous stasis ulcers (C6 disease): **Jaime Benarroch-Gampel, MD**
- Impact of Treatment Length and Treatment Region on Clinical Outcomes after Varicose Vein Procedures: **Halbert Bai, MD**
- Safety and efficacy of Endovenous ablation in patients with a history of DVT: **Mikel Sadek, MD**

2022: 3 Proposals

- Impact of IAC Vein Treatment Center Accreditation on practice habits, utilization index, and patient outcomes: ProMedica Toledo Hospital
- Patient, Provider, and Geographical Factors Influencing Appropriate Use of Endovenous Ablation Therapy
- Outcomes following endovenous ablation therapy for obese patients with CEAP C2 and C3 venous disease

## National Venous RAC Schedule

Submissions are made separately to the National Arterial RAC and the National Venous RAC – see the schedule below and the link to Abstracts123: <http://abstracts123.com/svs1/>

(If you do not have a login for Abstracts123, you can create one through the same link)

### Bi-Monthly Schedule for National Venous RAC Proposal Submissions

#### May 2023

Call for Proposals: March 28, 2023

Submission Deadline: April 25, 2023

Meeting: May 8, 2023

#### July 2023

Call for Proposals: May 30, 2023

Submission Deadline: June 27, 2023

Meeting: July 10, 2023

<https://www.vqi.org/national-venous-rac-schedule/>

# Governing Council:

## Mohammad Eslami, MD



## Meeting November 18, 2022

- Quality Improvement Update
  - Smoking Cessation as a National Quality Initiative
  - 2022 ended with a record # of charters 113
- RAC Submission
  - 5 proposals per cycle from each institution
  - Once a center reaches 15 Arterial RAC proposals, faculty member will be expected to serve on RAC as an at large member
- Frailty variable development
- OBL Registry Refinement; enhanced value, reporting/reimbursement, ease data burden
- Discussion - Data burden within registry
  - Committee member engagement/expectations
  - Each Committee will have an associate chair
  - Enhance reporting measures
  - Review current variables; consider required fields; elimination of data variables

## For Spring 2023:

- GLVSG Associate Medical Director (AMD) and Venous RAC nominations.
  - Result to be announced soon
  - all active VQI physicians are eligible
  - physicians can self-nominate

# GLVSG 2023 Fall Regional Meeting

- Date
- Location

# Thank You!!

- Industry Supporters
  - Cook Medical
  - W.L. Gore
- CME/CE Accrediting Entity – Des Moines University
- Regional Membership Team

*Thank  
you*



## REMEMBER TO PSO:

- **P**UT your FULL NAME in Zoom for remote attendees. Record of meeting attendance is required for CME/CE credit (no exceptions will be made)
- **S**END an email to [ljohnson@svspsso.org](mailto:ljohnson@svspsso.org) with names of group members that are sharing 1 device
- **O**FFICIALLY apply for CME/CE credit by clicking the URL or QR code provided here:  
[https://dmu.co1.qualtrics.com/jfe/form/SV\\_3ggzKCmZ3LAIUya](https://dmu.co1.qualtrics.com/jfe/form/SV_3ggzKCmZ3LAIUya)



You only have **7 days** to complete forms for CME/CE Credit.  
**NO EMAIL WILL BE SENT AS A REMINDER OR WITH THE CME/CE LINK**