WELCOME

MID-ATLANTIC VASCULAR STUDY GROUP

September 28, 2023
3:00 PM – 5:30 PM ET
Remote

SVS | VQI
In collaboration with NCDR®

Remote Meeting Attendance Credit

Before we get started, please sign in.

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 look for "rename". Select & sign in.

3 Can't sign in? Email Angela Churilla at achurilla@vascularsociety.org & include identifier you were signed in under (ex – LM7832) or phone number.

*NOTE: Credit is NOT given to any attendee or speaker that does not have an ACTIVE PATHWAYS user account.

Appreciation and Thanks

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Thank you to everyone who helped make this event possible:

Dr. Faisal Aziz - Regional Medical Director
Dr. Meghan Dermody - Regional Associate Medical Director
Vanessa Cambria-Mengel - Regional Lead Data Manager
Kaity Sullivan – SVS PSO Analytics Team
Angela Churilla– SVS PSO Education & Quality Program Manager
Jennifer Correa – SVS PSO Marketing Manager
Melissa Latus - Clinical Operations Project Manager
SVS PSO Staff

Today's Agenda

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3:00 pm   Welcome   CE Credit

Regional Data Review – Dr. Faisal Aziz, MAVSG Medical Director

Learning Objectives:

- Use the VQI regional reports to establish quality improvement goals for the vascular patients (outcomes) and for their center (process).
- Interpret and compare each centers' VQI results to regional and national benchmarked data.
- 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.
- 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.

4:00 pm   Regional QI Proposal – Dr. Faisal Aziz, MAVSG Medical Director   CE Credit

Learning Objectives:

- Use the VQI regional reports to establish quality improvement goals for the vascular patients (outcomes) and for their center (process).
- Interpret and compare each centers' VQI results to regional and national benchmarked data.
- 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.
- 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.

Today's Agenda - Continued

4:30 pm   National VQI Update – Melissa Latus, RN, PSO Clinical Operations Project Manager   CE Credit
Learning Objectives:
- Use the VQI regional reports to establish quality improvement goals for the vascular patients (outcomes) and for their center (process).
- 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.

5:10 pm   Council / Committee Updates   No CE Credit

5:30 pm   Open Discussion/Next Meeting/Meeting Evaluation   No CE Credit

Disclosures

Welcome and Introductions

Abington Memorial Hospital
Adventist Healthcare Shady Grove Medical Center
Adventist Healthcare White Oak Medical Center
Artery and Vein Institute
Associates in Vascular Care
AtlantiCare Regional Medical Center
Baltimore Washington Medical Center
Bayhealth Medical Center
Bayshore Medical Center
Beebe Medical Center
Capital Health Medical Center-Hopewell
Capital Health Regional Medical Center
CentraState Medical Center
Chester County Hospital
Christiana Care
Cooper University Hospital
Deborah Heart and Lung Center
Doylestown Hospital
Einstein Medical Center Montgomery
Englewood Hospital and Medical Center
Evangelical Community Hospital
Geisinger Community Medical Center
Geisinger Medical Center
Geisinger Wyoming Valley Medical Center
Global Neuroscience Institute at Crozer
Guthrie Clinic
Hackensack University Medical Center
Heart Care Consultants, LLC
Holy Name Medical Center
Hospital of the University of Pennsylvania
Jersey Shore University Medical Center
JFK Medical Center

Johns Hopkins Bayview Medical Center
Lancaster General Hospital
Lehigh Valley Hospital
Main Line Health's subsidiary - Riddle Hospital
Main Line Health's subsidiary, Main Line Hospitals, Inc. - Bryn Mawr Hospital
Main Line Health's subsidiary, Main Line Hospitals, Inc. - Lankenau Medical Center
Main Line Health's subsidiary, Main Line Hospitals, Inc. - Paoli Hospital
Medical Faculty Associates, Inc
Medstar Cardiology Associates
Medstar Franklin Square Medical Center
Medstar Georgetown University Hospital
Medstar Good Samaritan Hospital
Medstar Harbor Hospital
Medstar Montgomery Medical Center
Medstar Southern Maryland Hospital Center
Medstar Union Memorial Hospital
Medstar Washington Hospital Center
Mercy Fitzgerald
Mercy Medical Center
Meritus Medical Center
Morristown Medical Center
Nazareth Hospital
Newark Beth Israel Medical Center
Ocean Medical Center
Overlook Hospital
Penn Medicine Princeton Health
Penn Presbyterian Medical Center
Penn State Health Holy Spirit Medical Center
Penn State Health Milton S. Hershey Medical Center

Penn State Health St. Joseph's Medical Center
Penn State Health, Lancaster
Pennsylvania Hospital
Pottstown Hospital
Riverview Medical Center
Rutgers, The State University of New Jersey for Robert Wood Johnson Medical School
Saint Barnabas Medical Center
Southern Ocean Medical Center
St. Agnes Hospital
St. Francis Hospital - Wilmington
St. Luke's Hospital - Allentown Campus
St. Luke's Hospital - Bethlehem Campus
St. Luke's Hospital - Monroe Campus
St. Luke's Hospital - Upper Buck Campus
St. Luke's Hospital - Warren Campus
St. Mary Medical Center
Suburban Hospital
The Johns Hopkins Hospital
The Reading Hospital and Medical Center
The Valley Hospital
Thomas Jefferson University Hospital
TidalHealth Guerrieri Heart and Vascular Institute
University of Maryland Medical Center
UPMC Western Maryland
Vascular Surgery Associates, LLC
Virtua Marlton Hospital
Virtua Mount Holly Hospital
Virtua Our Lady of Lourdes Hospital
WellSpan Surgery Center
WellSpan York Hospital

Fall 2023 SVS VQI Regional Report Slides

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.

Please note the following updates have been implemented to enhance and improve the report:

- <u>Ability to Download/Print Dashboard</u>
  The dashboard summary can now be downloaded as an Excel file or printed directly using buttons included above the dashboard table. Please note that printing allows you to save as PDF with the "Print to PDF" feature in your browser.

- <u>Interactive Plots</u>

  All graphics are now interactive.

<u>https://www.vqi.org/wp-content/uploads/FALL_2023_REGIONAL_REPORT_SLIDES_MID-ATLANTIC.html</u>

****Ctrl + Click to follow link

CE/CME Meeting Attendance Credit

7 days to submit; No email reminder

PUT your FULL NAME in Zoom for remote attendees. Record of meeting attendance is required for CME/CE credit (no exceptions will be made)

SEND an email to achurilla@vascularsociety.org with names of group members that are sharing 1 device

OFFICALLY apply for CME/CE credit by clicking the URL or QR code provided

https://dmu.co1.qualtrics.com/jfe/form/SV_0H47NaInSI

VQI National Update

Melissa Latus, RN

Clinical Operations Project Mgr, SVS PSO

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*In collaboration with NCDR®*

VQI Participation

Regional Breakdown

Canadian Vascular Quality Initiative | 7 Centers

Carolinas Vascular Quality Group | 40 Centers

Great Lakes Vascular Study Group | 63 Centers

Michigan Vascular Study Group | 37 Centers

Mid-America Vascular Study Group | 75 Centers

Mid-Atlantic Vascular Study Group | 91 Centers

MidSouth Vascular Study Group | 26 Centers

Midwest Vascular Collaborative | 51 Centers

Northern California Vascular Study Group | 27 Centers

Pacific NW Vascular Study Group | 40 Centers

Rocky Mountain Vascular Quality Initiative | 58 Centers

Southeastern Vascular Study Group | 139 Centers

Southern California VOICE | 43 Centers

Southern Vascular Outcomes Network | 114 Centers

Upper Midwest Vascular Network | 66 Centers

Vascular Study Group of Greater New York | 47 Centers

Vascular Study Group of New England | 50 Centers

Virginias Vascular Study Group | 44 Centers

Singapore | 1 Center

TOTAL CENTERS | 1,022 Centers
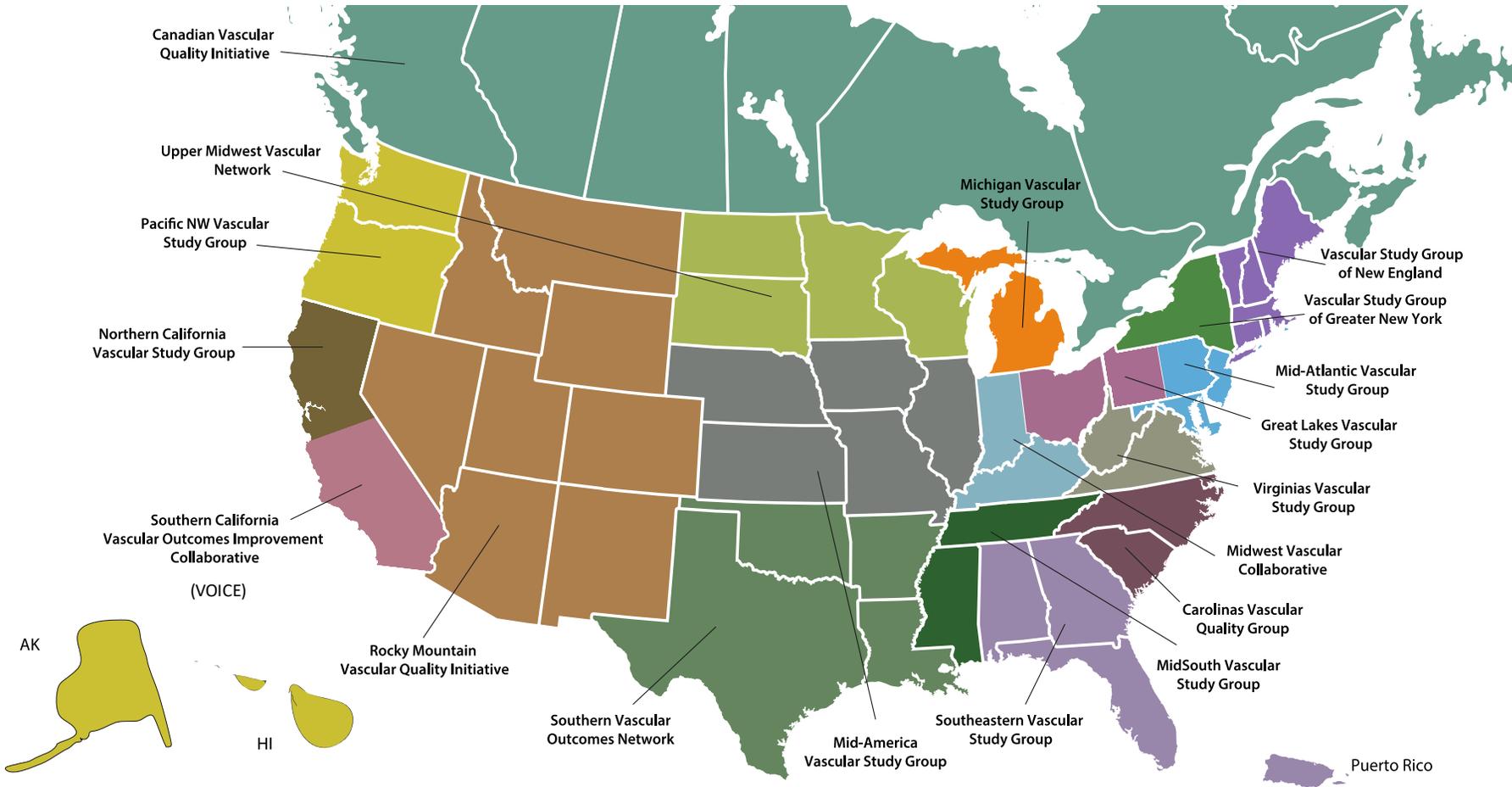
Procedures Captured

TOTAL PROCEDURES CAPTURED (as of 9/1/2023)	1,143,801
Peripheral Vascular Intervention	396,286
Carotid Endarterectomy	201,578
Infra-Inguinal Bypass	84,367
Endovascular AAA Repair	83,894
Hemodialysis Access	79,165
Carotid Artery Stent	108,549
Varicose Vein	63,640
Supra-Inguinal Bypass	26,875
Thoracic and Complex EVAR	30,658
Lower Extremity Amputations	30,040
IVC Filter	18,695
Open AAA Repair	18,357
Vascular Medicine Consult	1,466
Venous Stent	231

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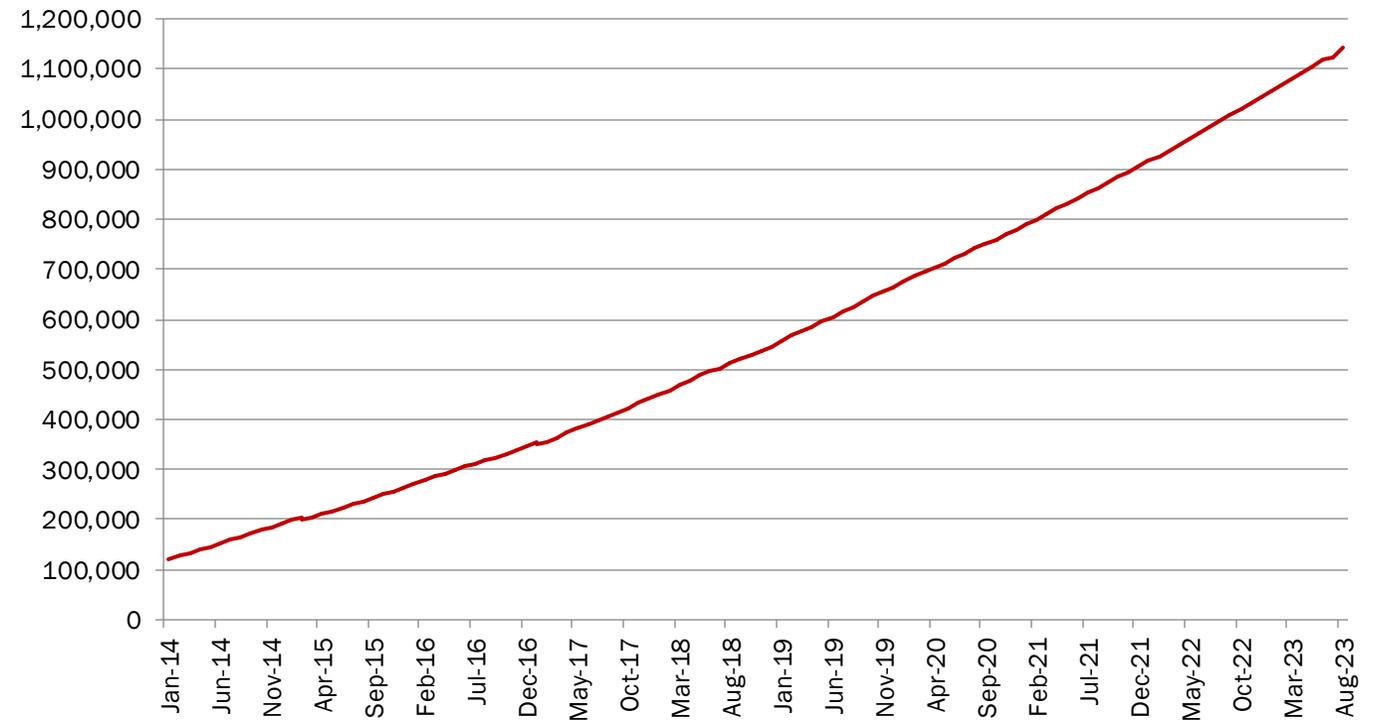
Total Procedure Volume reflects net procedures added to the registry for the month

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!

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2023 VQI@VAM Wrap Up

- Recordings & slides available on the VQI@VAM Planner
  - Log into the Planner https://2023svsvam.eventscribe.net/
  - Select Full Schedule
  - Select your preferred day
  - Select your session

Tuesday, June 14, 2022

12:00 PM – 5:00 PM EDT   VQI Annual Meeting
Location:312

VQI Annual Meeting

PSO Reporting and Analytics: Drilling into Quarterly Dashboards

Tuesday, June 14, 2022   12:15 PM – 12:45 PM EDT

Presenter(s)

LM   **Leila Mureebe, MD**
Duke University Medical Center
Durham

🔒 Video

🔒 Slides

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Have you checked out the new VQI Website?

If not, here's just a peek at what you're missing!

1 Registry specific pages – deeper dive into each of the SVS VQI's 14 registries

2 The ability to view the VQI.org website in your preferred language! Don't see your preferred language, reach out to see about getting it added to the site

3 New webinars & presentations added regularly – either on the main events page, or in Members Only

For more information about the VQI website, contact Jen Correa, SVS PSO Marketing Manager at jcorrea@svspso.org.

"Participation in the Vascular Quality Initiative is best way to study our outcomes, and make sure provide the highest quality care possible to our pa with vascular disease."

Dr. Phillip Goodney – Dartmouth Health

IMPORTANCE OF REGIONAL GROUPS

Through regional quality group meetings, participants share and analyze collected data to initiate quality improvement projects to reduce complications, readmissions, and length of stay. Quality improvements projects can translate directly to hospital cost reduction. With continued expansion of the SVS VQI and regional quality groups, data will more rapidly accumulate and can be leveraged for benchmarking and quality improvement initiatives.

Benefits of regional quality group participation include:

- Anonymous, benchmarked reports for comparison
- Increasing power and ability to detect root causes of outcomes
- Facilitating & initiating quality improvement projects
- Access to blinded datasets for data analysis at regional and national level
- Improving long-term patient surveillance

FIND YOUR REGIONAL GROUP →
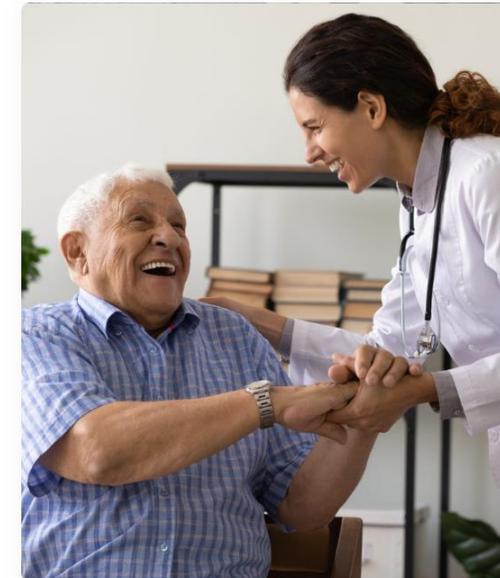
QUALITY IMPROVEMENT – MEMBERS ONLY

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VQI Members Only

Access to information exclusively available to members of the SVS VQI

- Find information that is not publicly shared on the VQI Website (ex: Quality Guide, Specific Registry Webinars, etc....)

- Find links and other information for upcoming Regional Group meetings

- Remember, access to the Members Only area of the VQI Website requires a different login than your PATHWAYS user account

- For account access email Jen Correa at: jcorrea@svspso.org to receive your username and temporary password

FDA Communications

https://www.vqi.org/resources/fda-communication/

FDA COMMUNICATIONS

NEWS/UPDATES FROM THE U.S. FOOD AND DRUG ADMINISTRATION

September 12, 2022

FDA Advisory Panel Recommendations on Lifelong Surveillance and Long-Term Postmarket Data Collection for Patients with AAA Endovascular Aortic Repair – Letter to Health Care Providers

March 9, 2022

Medtronic Recalls TurboHawk Plus Directional Atherectomy System Due to Risk of Tip Damage During Use

Readmission Study
University of Rochester

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- 30d Readmission rates
  - Review of readmission cost
  - Frequency of readmissions
  - Frequency of reoperations & cost

- Univ Rochester piloting 30D readmission project

- To join the pilot or for questions contact Stacey Esposito at:

Stacey_Esposito@URMC.Rochester.edu

Benefits determined by the study include:

- More accurate capture of complications after discharge/use of LTFU form for complications prior to 9 mos.
- Track & trend unplanned readmissions
- Identify the reason for unplanned readmissions
- Evidence based data to identify at risk patient populations
- Benchmark against Region and All VQI

SVS | Society for Vascular Surgery   American Venous Forum   fivos   Society for Vascular Medicine   VASA   SVU

VQI Updates

- Smoking Cessation launched as a new NQI June 2023 w/ variables added to all Arterial Registries – Early Q3 2023
- Help Text Enhancement Tool – May 2023
- Interactive plots for the Biannual Center and Regional Level Reports
- Retirement of most COVID Variables
- Retirement of >500 Opioid variables
- Collection of Exercise Program variables in Lower Extremity Registries

- In Development:
  - Open Aorta Registry
  - Infrainguinal/Suprainguinal Registry Follow-up reports
  - Continued efforts for harmonization across registries
  - Enhanced reporting measure for biannual reports
  - EPIC integration into VQI. *Looking for Center volunteers*

Cardiac Risk Index

https://www.vqi.org/risk-calculators/

The VQI-CRI is also available in a mobile-friendly format

Welcome to the VQI Cardiac Risk Index

Last updated: February 2023

This calculator estimates a patient's risk of in-hospital postoperative myocardial infarction for five primary vascular procedures based on the input of preoperative patient characteristics and planned procedure details.

Disclaimer:

The VQI Cardiac Risk Index (VQI-CRI) estimates the chance of an adverse outcome based on preoperative patient and procedure information entered into the calculator. These estimates are calculated using VQI data collected from a large number of patients who had a procedure similar to the one for which the patient may be a candidate.

It is important to note that VQI-CRI risk estimates only take certain information into account. There may be other factors that are not used in the estimate which may increase or decrease the risk of an adverse outcome. Estimates obtained are not a guarantee of results. An adverse outcome may occur even if the risk is low. Similarly, an adverse outcome may not occur even if the risk is high.

The information presented by the VQI-CRI is not meant to replace the advice of a physician or healthcare provider regarding diagnosis, treatment, or potential

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Suprainguinal Bypass (SUPRA)

Applicable to any primary, non-emergent suprainguinal bypass for aneurysmal or occlusive disease for indications of claudication, rest pain, tissue loss, or acute ischemia

Age ⓘ

Under 60

Graft Origin ⓘ

Axillary

ASA Class ⓘ

1, 2, or 3

History of Coronary Artery Disease ⓘ

None

Results of Stress Test within Past 2 Years ⓘ

Not Done

None

Results of Stress Test within Past 2 Years ⓘ

Not Done

Indication for Surgery ⓘ

Claudication

Risk of In-Hospital Postoperative Myocardial Infarction:

1.1 %

Your risk value falls within the 1st quartile (0-25th percentile) of risk.

⬇ GENERATE REPORT

# Physician Snapshot Report Discussion

Introducing Physician Snapshot Reports for Carotid Treatment

- Individual Physician Reporting for individual physicians to compare key outcomes against all VQI cases

- Key features
    - Flexible access: Available on your smart phone or through Pathways reports on your desktop
    - Near real time data with nightly updates
    - CEA, TCAR and TF-CAS available on the same report
    - Flexible time interval views- default view is the last 365 days with options to adjust the date range
    - Secured- viewable only by **you** via your VQI PATHWAYS password

Compare Physician with VQI Average Annual Case Volume and Key Outcomes

CEA vs TCAR vs TF-CAS, Asymptomatic vs Symptomatic Cases, Stroke, Death, MI
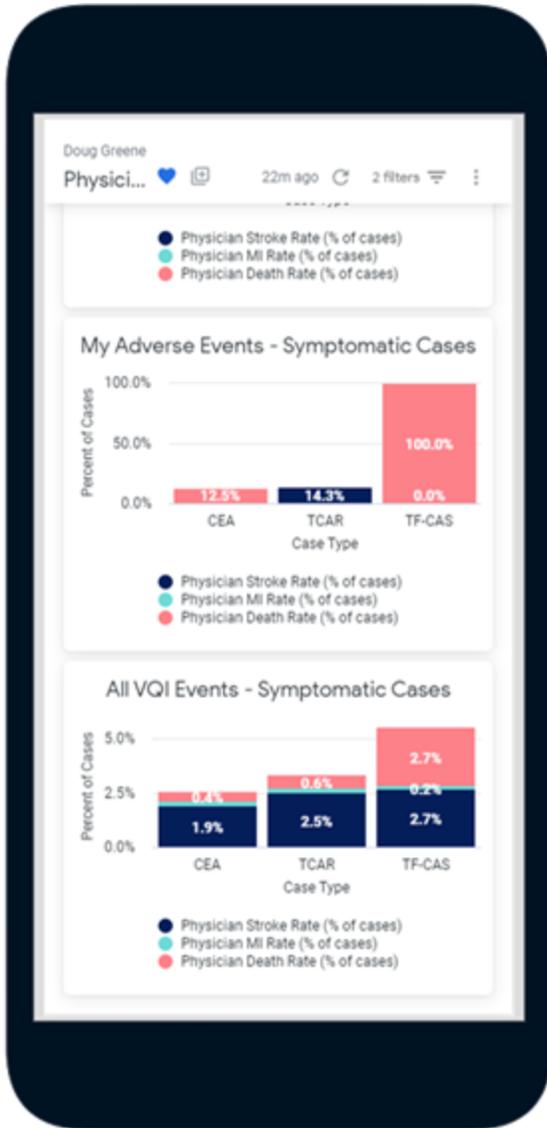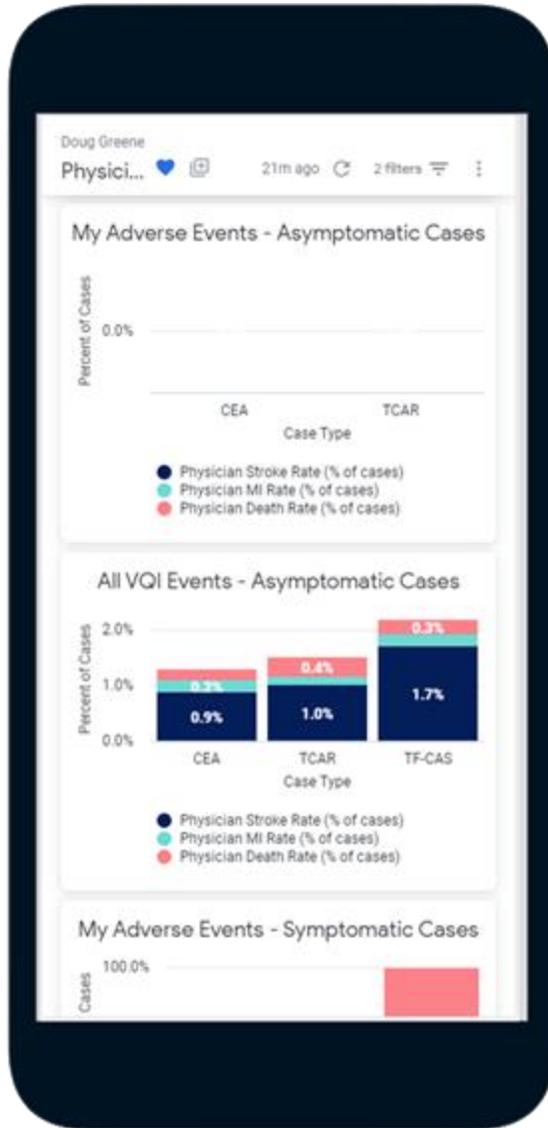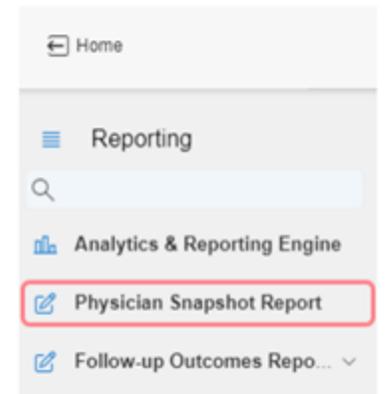
How do I access my Carotid snapshot?

Two Options:

1. An email with your URL entitled **View my Carotid Snapshot** was sent to the email on file for you in PATHWAYS- simply click the link and enter your PATHWAYS password

2. From a desktop computer- URL Access: https://pathways.m2s.com
    -From the reporting menu in the top right, click the option for the Physician Snapshot Report

Note: You will need your VQI PATHWAYS password to the view the report
- If you do not know your VQI PATHWAYS password, please see your VQI hospital manager
- You may also email PATHWAYS support for assistance at PATHWAYSsupport@fivoshealth.com
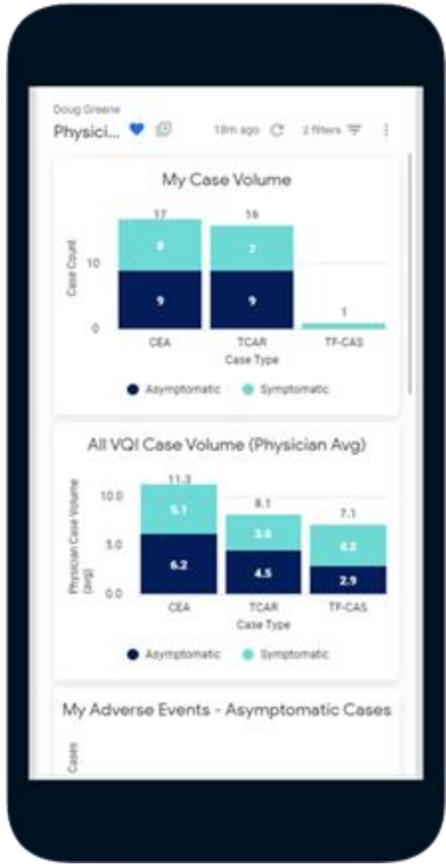
Physician Snapshot Report Feedback

Polling Questions:

- How many of you have viewed your report?

- If you have not viewed the report, why?

- Can you share your initial reaction or feedback if you have used it?

Note: In order to obtain future feedback, we may send a very brief email survey.
Your participation is greatly appreciated!

General RAC Submission Guidelines

- Active Pathways Account w/ 'Share a File' privileges

- Center Registry Subscription

- Regional RAC approval <u>required</u> for all regional proposals

General RAC Submission Guidelines Cont.

- Check email for approval status from Melissa Latus
  mlatus@svspso.org

- Check email notification from FIVOS health that data set is available in 'Share A File'

- Data in 'Share A File' will expire after 30 days of receipt

2022 RMVQI Participation Award Winners

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⭐⭐⭐

University of Pennsylvania
St. Luke's Hospital - Bethlehem Campus
University of Maryland Medical Center
Guthrie Clinic
St. Luke's Hospital - Allentown Campus
Penn Presbyterian Medical Center
Lancaster General Hospital
St. Luke's Hospital - Upper Buck Campus
St. Luke's Hospital - Warren Campus
St. Luke's Hospital - Monroe Campus

⭐⭐

Penn State Health Milton S. Hershey Medical Center
Geisinger Medical Center
Geisinger Wyoming Valley Medical Center
Geisinger Community Medical Center
Lehigh Valley Hospital
Pennsylvania Hospital
Chester County Hospital
Capital Health Medical Center-Hopewell
Bayhealth Medical Center
Main Line Health's subsidiary, Main Line Hospitals, Inc. - Lankenau Medical Center
Main Line Health's subsidiary, Main Line Hospitals, Inc. - Bryn Mawr Hospital
Main Line Health's subsidiary, Main Line Hospitals, Inc. - Paoli Hospital
Main Line Health's subsidiary - Riddle Hospital

⭐

Christiana Care
Beebe Medical Center
Cooper University Hospital
Hackensack University Medical Center
Medstar Union Memorial Hospital
UPMC Western Maryland
Medstar Harbor Hospital
Medstar Montgomery Medical Center
Medstar Southern Maryland Hospital Center

Quality Improvement Updates

Betsy Wymer, DNP, RN, CV-BC
Director of Quality, SVS PSO

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Quality Improvement:
National Quality Initiative - Smoking Cessation

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- **Introduced at VQI@VAM 2023**
- **CAN-DO Program**
  - <u>C</u>hoosing <u>A</u>gainst combustible <u>N</u>icotine <u>D</u>espite <u>O</u>bstacles
- Arterial registries only
- Reporting measures added Spring 2023
  - Preop Smoking – Elective procedures
  - Smoking Cessation – Elective, Urgent, Emergent procedures
- Currently have smoking variables
  - Minimal addition of variables
  - Go LIVE August 2023
- Webinars
  - July and August (register at www.vqi.org)
- Education https://www.vqi.org/quality-improvement/national-qi-initiatives/
  - Physician and Patient
  - Toolkits
  - Billable codes and sample dictation
  - Resources
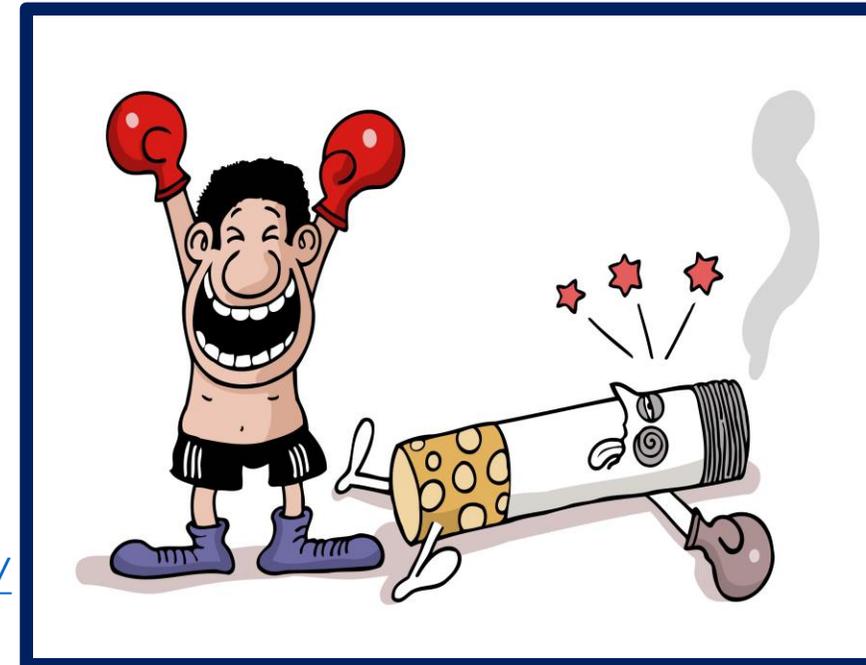
Active Regional Charters

Quality Improvement – Participation Points

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**

Quality Improvement – Participation Points
QI Project Domain

Domain – Quality Improvement Project – 25% weighted

Scoring on 0 – 6-point scale to keep consistent with other measures. This gives centers options for getting **6 maximum QI points**.

– Initiation of a QI Project, evidenced by submitting a Project Charter to <u>QI@SVSPSO.ORG</u> or <u>bwymer@svspso.org</u> (2 points). **One charter per year.**

– Presenting a QI Project (presentation or poster) at a Regional VQI, *Regional Society Meeting, or ***Hospital Board and/or C Suite** meeting (2 points) *When presenting at succinct regional meetings, project slides must reflect a change or update in status.*

– Presenting a QI Project (presentation or poster) at the National VQI or *Vascular Annual Meeting (2 points)

– *Publish a **VQI quality improvement** article in a Peer Reviewed Journal (2 points)

– Centers with significant improvement or excellent performance rates on National QI Initiatives will receive one additional point (per initiative), for a maximum of 6 QI points

* Please send attestation (proof) to <u>bwymer@svspso.org</u> on or before December 31, 2023.

Quality Improvement –
QI Project Domain Requirements

- Present VQI data to C-Suite (leadership, CNO, COO, Chief Vascular Surgeon, etc.)
- Contact Betsy at bwymer@svspso.org
- Provide the following
  - Agenda/Meeting Minutes (date, your name and presentation, attendees)
  - Copy of presentation (feel free to cover center data)
  - Maximum of 2 presentations per year – slides must present a change or an update in status
- You will receive an email confirmation from Betsy which verifies participation points

Fellows in Training (FIT) Program 2022-2023
Jack Cronenwett Scholarship Winners

Quality

Dr. Christine Kariya

    FIT Mentor Dr. Danny Bertges

    University of Vermont Medical Center

Dr. Hanna Dakour Aridi

    FIT Mentor Dr. Michael Murphy

    Indiana University Health – Methodist

Research

Dr. Ben Li

    FIT Mentor Dr. Graham Roche-Nagle

    Toronto General Hospital

Dr. Brianna Krafcik

    FIT Mentor Dr. Phil Goodney

    Dartmouth Hitchcock Medical Center

Dr. Caronae Howell

    FIT Mentor Dr. Benjamin Brooks

    University of Utah Hospital and Clinics/The University of Arizona

Quality – Fellows in Training (FIT) Program
2023-2024 FIT Mentor, FIT Fellow, and Center

FIT Mentor	FIT Fellow	Center
Michael Costanza	Deena Chihade	University Hospital
Samantha Minc	Paul Rothenberg	WVU
Nikolaos Zacharias	Mitri Khoury	Massachusetts General Hospital
Nikolaos Zacharias	Tiffany Bellomo	Massachusetts General Hospital
Arash Bornack	Christopher Chow	University of Miami
Michael Madigan/Mohammed Eslami	Mikayla Lowenkamp	UPMC
Thomas Brothers	Saranya Sundaram	Medical University in South Carolina
Benjamin Jacobs/Sal Scali	Michael Fassler	University of Florida
Adam Beck	Amanda Filiberto	University of Alabama Birmingham
Brian DeRubertis	Nakia Sarad	Weill Cornell Medical Center
Dan Newton	Syeda Ayesha Farooq	Virginia Commonwealth University

Vascular–VP **Vascular Verification Program**
American College of Surgeons

Improve Your Quality of Care in Vascular Surgery and Interventional Care

Introducing a new quality program developed by the **American College of Surgeons** and the **Society for Vascular Surgery:** a standards-based framework designed to meet the unique needs of vascular programs

facs.org/vascular

Email **vascular@facs.org** for information

Committee Updates

AQC Update

Grace Wang, MD

- Committee meets every other month
  - Jan, March, May………

- Re-engagement of registry committees
  - New reporting measures for ea. registry
  - Review of variables for possible retirement
  - One committee each Mtg. will give progress update

- Review & discussion of proposed registry revisions
  - LE/VMC SET variables to align w/guidelines
  - Pilot ERAS Variables
  - Initial discussion of required vs non-required procedure variables

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VQC Update

Tanya Flohr, MD

- Committee meets bi-annually

- Re-engagement of registry committees
  - New reporting measures for each registry
  - Review of variables for possible retirement
  - Each committee will give updates during the VQC meetings

- Active review of Venous Stent to decrease registry burden

- Discussion on how to increase venous registry presence w/in the venous community

- Next Meeting VEITH (hybrid)
  - November 12-17, 2023

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Arterial RAC Update

Caitlin Hicks, MD

- The proposal review committee meets quarterly
- Comprises of all RAC chairs nationally and some other members
- Reviews about 20-30 abstracts each cycle
- The process is fair and open with the aim of approving most proposals
- The committee advises investigators on how to improve the proposals

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Arterial RAC

- When requesting a Data Set, the investigator must have an ACTIVE PATHWAYS account.

- Once approved, the Data Set will be transferred through the "SHARE a FILE" function in PATHWAYS.

- The Data Set will be available through "Share a File" for 30 days

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Arterial RAC

- Components of a VQI proposal.

- For more information:

  - Podcast: Requesting Data presented by Dr. Leila Mureebe, MD
    https://drive.google.com/file/d/1tBsYrzh0Pu-0z5gu_eHhMmrVvyEtk5i2/view

- Abstract
- Research question/Hypothesis
- Background/significance
- Approach
- Analytic plan
- Mock Tables
- Potential problems/solutions
- IRB approval/exemptions.

RAC Data Use Agreement

The Data Use Agreement needs to be signed by the Attending Physician when submitting in Abstract 123

https://abstracts123.com/svs1/

RAC Proposal Process

1. Review list of projects:

https://www.vqi.org/data-analysis/rac-approved-project-search/

2. Submit proposal online:

http://abstracts123.com/svs1/meetinglogin

3. Deadlines for submissions:

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

- Your Regional RAC chair is available to help answer questions or help with proposal writing

Venous RAC Update

- The July Venous RAC had 4 venous proposals submitted

- Podcast: Requesting Data presented by Dr. Leila Mureebe, MD. Follow link below
  - https://drive.google.com/file/d/1tBsYrzh0Pu-Oz5gu_eHhMmrVvyEtk5i2/view

- The current venous registries with blinded data sets
  - Varicose Vein
  - IVC Filter

- Types of information available:
  - Demographics
  - Comorbidities
  - Operative characteristics
  - Post-operative characteristics
  - Follow-up

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Governing Council Update

Faisal Aziz, MD

- Meets twice a year

- Last meeting: June 16, 2023

- Committee designation:
  - Each region represented by the Regional Lead Medical Directors

- Adam Beck – newly appointed GC Chair; Grace Wang – newly appointed Vice Chair

- All Regional RAC requests must have regional RAC approval; committee highly recommends that the Regional RAC also approve national requests

- Next meeting VEITH; November 2023

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Spring 2024 Regional Meeting

- Spring 2024?

Fall Report Reminder

Reminder:

Spring 2024 Report Cut Date = February 1, 2024, for procedures CY 2023

CE/CME Meeting Attendance Credit

7 days to submit; No email reminder

- **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 Angela Churilla achurilla@vascularsociety.org with names of group members that are sharing 1 device

- **O**FFICALLY apply for CME/CE credit by clicking the URL or QR code provided

https://dmu.co1.qualtrics.com/jfe/form/SV_0H47NaInS

- Thank you to our members for your continued participation and support of VQI

- Thank you to COOK and GORE for your contributions and making these meetings possible

- Thank you to Des Moines University for providing CE/CME credit for today's meeting

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Thank You