# WELCOME

# ROCKY MOUNTAIN VASCULAR QUALITY INITIATIVE

July 22, 2023 10:30 AM – 12:45 PM MT Park City, UT Hybrid



# In-Person Regional Registration QR Code

<u>REMOTE ATTENDEES</u> - DO NOT USE THE QR CODE







## **Remote Meeting Attendance Credit**

Before we get started, please sign in.



Click "Participants" in the box at the top or bottom of your screen.



If your full name is not listed, hover next to your name and look for "rename". Select & sign in.



Can't sign in? Email Leka Johnson at <u>ljohnson@svspso.org</u> & include identifier you were signed in under (ex –LM7832) or phone number.

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





### Thank you to everyone who helped make this event possible:

Emily Malgor, MD - Regional Medical Director Joseph Sabat, MD - Regional Associate Medical Director Kendra Smith - Regional Lead Data Manager Kaity Sullivan – SVS PSO Analytics Team Leka Johnson – SVS PSO Education & Membership Manager Caroline Morgan - SVS PSO Director of Clinical Operations SVS PSO Staff



## Thank you to:

# Scott Berman – Past RMQI Regional Lead Medical Director Megon Berman – Regional Lead Data Manager



# Welcome Dr. Joseph Sabat Associate Medical Director RMVQI PIMA Vascular, AZ



# Today's Agenda



10:30 am	<ul> <li>Welcome</li> <li>Regional Data Review - Emily Malgor, MD, (Region) Medical Director</li> <li>Learning Objectives:</li> <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>	CE Credit
11:30 am	<ul> <li>Regional QI Proposal – Emily Malgor, MD, (Region) Medical Director Learning Objectives:</li> <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>	CE Credit

# **Today's Agenda - Continued**



12:10 pm	<ul> <li>National VQI Update - Caroline Morgan, RN, PSO Clinical Operations Director Learning Objectives:</li> <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>	CE Credit
12:45pm	Council / Committee Updates	No CE Credit
12:50pm	Open Discussion/Next Meeting/Meeting Evaluation	No CE Credit

### **Disclosures**

### • None





## **Welcome and Introductions**

American Venous Forum TIVOS Osciety for Vasa **SVU** 

Abrazo Arrowhead Campus Arizona Endovascular Center Arizona Vascular Specialists, LLC Banner Del E. Web Medical Center Banner Desert Medical Center **Banner Heart Hospital Banner-University Medical Center Phoenix Banner-University Medical Center Tucson Chandler - Chandler Regional Medical Center** Flagstaff Medical Center HonorHealth Deer Valley Medical Center HonorHealth Scottsdale Osborn Medical Center HonorHealth Scottsdale Thompson Peak **Medical Center** Idaho Falls Community Hospital Intermountain Medical Center Kootenai Health Lovelace Medical Center Lutheran Medical Center Mayo Clinic Arizona McKay-Dee Hospital

Society for Vascular Surgery

Memorial Hospital Central Memorial Hospital of Laramie County d/b/a **Cheyenne Regional Medical Center Ogden Regional Medical Center** Parkview Medical Center Phoenix - St. Joseph's Hospital and Medical Center Pima Vascular Porter Adventist Hospital Portneuf Medical Center Presbyterian Hospital Presbyterian/St. Luke's Medical Center Prescott - Yavapai Regional Medical Center Saint Alphonsus Regional Medical Center Saint Joseph Hospital Saint Mary's Regional Medical Center **Shea Medical Center** Southern Hills Hospital and Medical Center St. Anthony Lakewood St. George Regional Hospital St. Luke's Boise Medical Center

St. Luke's Magic Valley Hospital St. Mary Corwin Medical Center St. Mary's Hospital St. Vincent Healthcare Superior Vein Care, PLLP Three Crosses Regional Hospital **Tucson Medical Center** University of Colorado, Denver University of Colorado, North Vascular Services University of New Mexico University of Utah Hospital and Clinics **Utah Valley Hospital** Verde Valley Medical Center VHS of Arrowhead, Inc. d/b/a Abrazo Arizona Heart Hospital VVAS - Varicose Vein and Aesthetic Solutions Yuma Regional Medical Center

Total Centers = 56 New Centers = 2



# Fall RMVQI Report Reminder



# **Reminder:**

# Fall 2023 Report Cut Date = June 1, 2023, for procedures 5/1/2022 - 4/30/2023

## Spring 2024 Report Cut Date = Feb. 1, 2024

VQI Reporting Schedule 2022 - 2023							
Report	Data Cut Date*	Anticipated Delivery Date**	Procedure Timeframe***				
VQI Regional Quality Reports							
Spring 2023	1-Feb-23	1-Mar-23	CY 2022				
Fall 2023	1-Aug-23	1-Sep-23	July 1. 2022 - June 30. 2023				
Fall 2023, RMVQI	1-Jun-23	1-Jul-23	May 1, 2022 - April 30, 2023				

## 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.

#### Interactive Plots

All graphics are now interactive.

### https://www.vqi.org/wpcontent/uploads/FALL\_2023\_RMV\_REGIONAL\_REPORT\_SLIDES\_RockyMountain.html \*\*\*\*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 <u>ljohnson@svspso.org</u> with names of group members that are sharing 1 device



SVU

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### https://dmu.co1.qualtrics.com/jfe/form/SV\_09uyr9L163



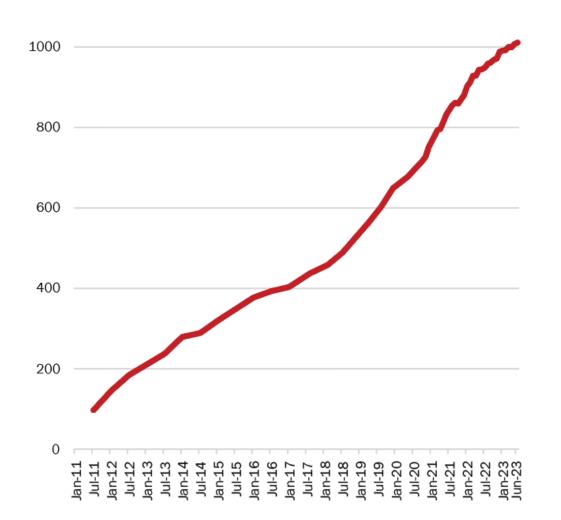
# **VQI** National Update

Caroline Morgan, RN Director Clinical Operations, SVS PSO



## **VQI** Participation – Growth & Distribution



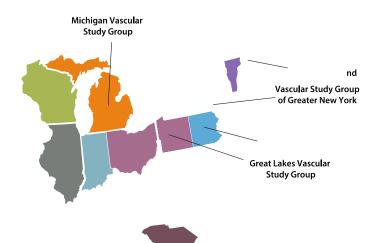




## **Regional Quality Groups**



Canadian Vascular Quality Initiative





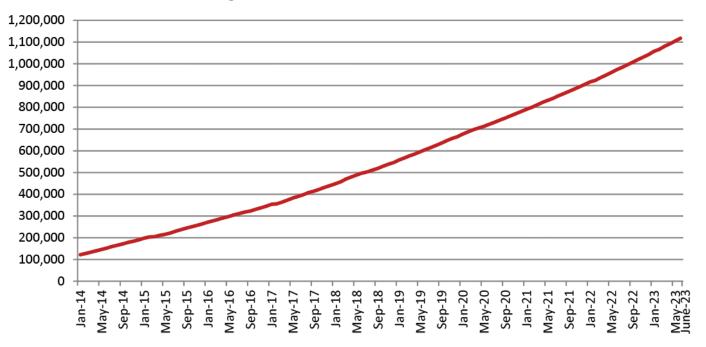
Puerto Rico

### **Procedures Captured**



	1,117,952
(as of 7/1/2023)	
Peripheral Vascular Intervention	386,738
Carotid Endarterectomy	197,553
Infra-Inguinal Bypass	83,030
Endovascular AAA Repair	82,418
Hemodialysis Access	78,136
Carotid Artery Stent	103,490
Varicose Vein	62,785
Supra-Inguinal Bypass	26,463
Thoracic and Complex EVAR	29,839
Lower Extremity Amputations	29,335
IVC Filter	18,533
Open AAA Repair	18,109
Vascular Medicine Consult	1,313
Venous Stent	210

### VQI Total Procedure Volume



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

# **Regional Meeting CME/CE Credit**



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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 <u>attendance attestation</u> and the <u>meeting evaluation</u> 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.



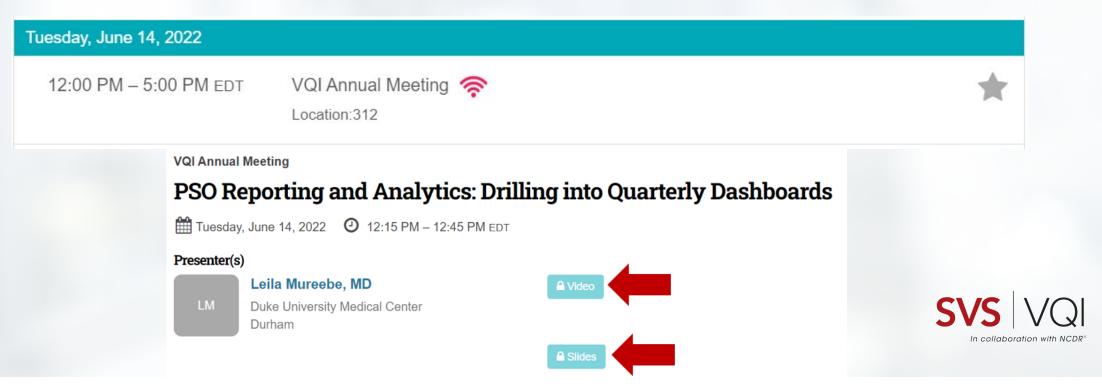
PSO leadership is providing continuing education credit to you at no charge!



## 2023 VQI@VAM Wrap Up

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



# Have you checked out the new VQI Website?

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



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



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



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 ightarrow





### QUALITY IMPROVEMENT – MEMBERS ONLY



### Access to information exclusively available to members of the SVS VQI

# **VQI Members Only**

- 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

<u>Medtronic Recalls TurboHawk Plus Directional Atherectomy System Due to Risk of Tip</u> <u>Damage During Use</u>

# **Readmission Study University of Rochester**

- 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

# 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
  - $\circ~$  Enhanced reporting measure for biannual reports
  - EPIC integration into VQI. Looking for Center volunteers



# Cardiac Risk Index

SVS VQI Ho	me Calculators •	About	FAQ
Suprainguinal Bypass (SI Applicable to any primary, non-emergent occlusive disease for indications of claudic ischemia	suprainguinal bypass for aneury cation, rest pain, tissue loss, or a	ysmal or acute	Risk of In-Hospital Postoperative Myocardial Infarction: 1.1 % yerage Risk yerage Risk yerage Risk yerage Risk yerage Risk yerage Risk yerage Risk the falls within the 1st quartile (0-25th percentile) of risk. How to interpret figure: Black bar represents your risk verage Risk yerage Risk
Not Done		•	First Quartile (0 - 25 <sup>th</sup> percentile)       Maximum possible risk         Second Quartile (25 <sup>th</sup> - 50 <sup>th</sup> percentile)       based on highest risk         Third Quartile (50 <sup>th</sup> - 75 <sup>th</sup> percentile)       category of all input         Fourth Quartile (75 <sup>th</sup> - 100 <sup>th</sup> percentile)       variables
Claudication		•	

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



### **₽**

# **Physician Snapshot Reports**

- Reports for individual physicians focused on key outcomes
- Push reports via email to physicians
  - Link to report directly from the email
  - Use same password as Pathways system
- First report for carotid treatment now available
  - Can also access via Pathways Reporting Tab
  - Can set time interval for reporting (defaults to last year)
  - Updated each day

For more information email pathwayssupport@fivoshealth.com

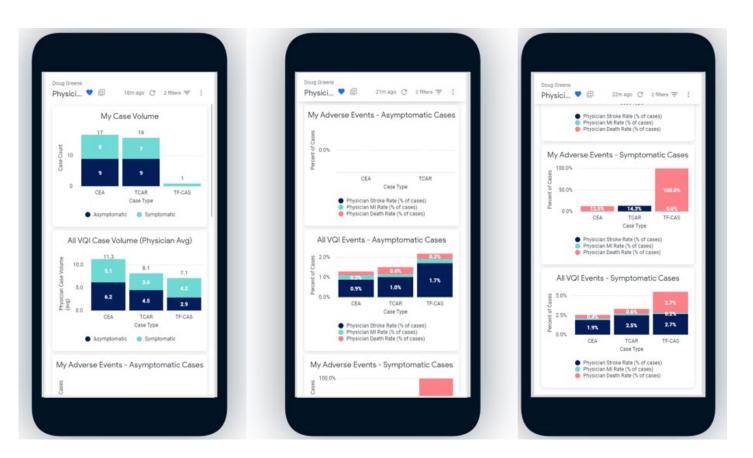




Compare Physician with VQI Average Annual Case Volume and Key Outcomes

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CEA vs TCAR vs TF-CAS, Asymptomatic vs Symptomatic Cases, Stroke, Death, MI



### pathwayssupport@fivoshealth.com





## **General RAC Submission Guidelines**





Center Registry Subscription



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

SVS Society for Vascular Surgery



# General RAC Submission Guidelines Cont.



Check email for approval status from Melissa Latus <u>mlatus@svspso.org</u>



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**





University of Utah Hospital and Clinics Pima Vascular St. Luke's Boise Medical Center



Mayo Clinic Arizona Banner Desert Medical Center Banner Heart Hospital Utah Valley Hospital McKay-Dee Hospital Intermountain Medical Center St. George Regional Hospital Flagstaff Medical Center



Banner-University Medical Center
Tucson
University of Colorado, Denver
Tucson Medical Center
University of Colorado, North Vascular
Services
Kootenai Health
Verde Valley Medical Center
Banner Del E. Web Medical Center



## Quality Improvement Updates



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

Introduced at VQI@VAM 2023

- CAN-DO Program
  - <u>Choosing Against combustible Nicotine Despite Obstacles</u>
- 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 <u>www.vqi.org</u>)
- Education <u>https://www.vqi.org/quality-improvement/national-qi-initiatives/</u>
  - Physician and Patient
  - Toolkits
  - Billable codes and sample dictation
  - Resources











## RMVQI

# Claudicants and Lower Extremity Interventions PIMA Vascular Megon Berman; Scott Berman, MD – Surgeon Champion

### **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

# SVS VQI

#### 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 <u>bwymer@svspso.org</u>
- 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	
Mohammed Eslami	Mikayla Lowenkamp	UPMC	
Thomas Brothers	Saranya Sundaram	Medical University in South Carolina	
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	

# **Committee Updates**



### AQC Update

# Open Position Nominations Pending

- 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 nonrequired procedure variables



### VQC Update

Open Position Nominations Pending

- Committee meets quarterly
- 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



## **Arterial RAC Update**

Benjamin Brooke, MD

- 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.

Enter New / Find Existing Patients	Tools	Resources	<u>Share a File</u>	Analytics & Reporting Engine
File Sharing > Share a File				

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



# **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-Oz5gu\_eHhMmrVvyEtk5i2/view

### Abstract

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



# **RAC Data Use Agreement**



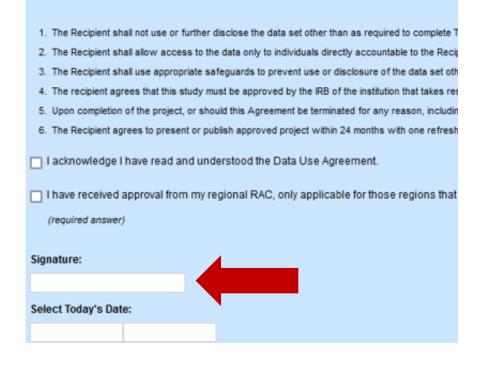
# The Data Use Agreement needs to be signed by the <u>Principal</u> <u>Investigator</u> when submitting in Abstract 123

https://abstracts123.com/svs1/

#### Data Use Agreement

#### Data Use Agreement

Below are the terms of the Data Use Agreement for the Society for Vascular acknowledging the terms below.



## Venous RAC Update

### Joseph Sabat, MD

- The July Venous RAC had 4 venous proposals submitted
- Podcast: Requesting Data presented by Dr. Leila Mureebe, MD. Follow link below
  - <u>https://drive.google.com/file/d/1tBsYrzh0Pu-0z5gu\_eHhMmrVvyEtk5i2/view</u>
- 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



# Governing Council Update

## Emily Malgor, 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



### RMVQI Spring 2024 Regional Meeting

- Spring 2021 Remote only
- Fall 2021 Steamboat Springs, CO
  - In conjunction with Rocky Mt Vascular Meeting
- Spring 2022 In-person only Pima Vascular, AZ
- Fall 2022 Santa Fe, MX
  - In conjunction with Rocky Mt Vascular Meeting
- Spring 2023 Univ of Colorado, Aura
- Fall 2023 Park City , UT
  - In conjunction with Rocky Mt Vascular Meeting
- Spring 2024??????



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SVU

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#### https://dmu.co1.qualtrics.com/jfe/form/SV\_09uyr9L163





 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



# Thank You

