

# Rocky Mountain Vascular Quality Initiative

March 24, 2023  
11:00 AM – 3:00 PM MT  
University of Colorado  
Aurora, CO  
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@svspso.org](mailto:ljohnson@svspso.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-RMVQI-March 24, 2023

Time	Topic	CE Credit
11:00 am	Welcome	No
11:05 am	<p>Regional Data Review Scott Berman, MD, Regional Medical Leader, RMVQI 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
12:05 pm	<p>Regional QI Proposal Scott Berman, MD, Regional Medical Leader, RMVQI 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 (con't)

Time	Topic	CE Credit
1:05pm	Break-Lunch	No
1:35 pm	National VQI Update Betsy Wymer, DNP, RN, CV-BC, PSO Quality Director 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
2:35 pm	AQC Update – Benjamin Brooke, M.D.	No
	VQC Update – Bridgitte Smith, M.D.	No
	RAC Update – Benjamin Brooke, M.D.	No
	Governing Council Update – Scott Berman, M.D.	No
3:00 pm	End Meeting/Evaluation/Next Meeting Discussion	No

- Relevant to the content of this educational activity, the following individual(s) have conflict(s) with ineligible companies to disclose. The accredited provider has mitigated all relationships.

Scott Berman, MD, MHA - Regional Activity Director

Grant or Research Support: Terumo, Blue Grass Vascular, Merit Medical, Silk Road

Speaker: Gore Medical

Proctor: Silk Road Medical

# Welcome and Introductions

Abrazo Arrowhead Campus  
Arizona Endovascular Center  
Arizona Vascular Specialists, LLC  
Banner Desert Medical Center  
Banner Heart Hospital  
Banner-University Medical Center Phoenix  
Banner-University Medical Center Tucson  
Banner Del E. Web Medical Center  
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

Memorial Hospital Central  
Memorial Hospital of Laramie County d/b/a  
Cheyenne Regional Medical Center  
Ogden Regional Medical Center  
Parkview Medical Center  
Pima Vascular  
Porter Adventist Hospital  
**Portneuf Medical Center**  
Presbyterian Hospital  
Presbyterian/St. Luke's Medical Center  
Prescott - Yavapai Regional Medical Center  
St. Anthony Lakewood  
St. George Regional Hospital  
St. Joseph's Hospital and Medical Center  
St. Luke's Health System, Ltd.  
St. Mary Corwin Medical Center  
St. Mary's Hospital - AZ  
St. Vincent Healthcare  
Saint Mary's Regional Medical Center  
Saint Alphonsus Regional Medical Center  
Saint Joseph Hospital

**Southern Hills Hospital and Medical Center**  
Superior Vein Care, PLLP  
The Medical Center of Aurora  
**Three Crosses Regional Hospital**  
Tucson Medical Center  
University of Arizona 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

Megon Berman, RMVQI Regional Lead Data Manager

## Current Quality Improvement Charters

- Relationship Between Pre-operative Frailty Assessment and long-term outcomes following vascular surgery
  - University of Utah; Julie Hales
- Documentation - LOS CEA and EVAR
  - Pima Vascular; Megon Berman
- PRO & ABI
  - Pima Vascular; Megon Berman
- CAS and Plavix Resistance
  - Pima Vascular; Megon Berman



## Region Volume 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.

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	5191	45	40			
Procedure Volume, All Years	47579	52	49			
Long-Term Follow-up	5867	40	38			
Discharge Medications	4170	42	38			
Preop Smoking	3697	41	38			
Smoking Cessation	765	32	21			
TFEM CAS ASYMP: Stroke/Death	78	12	2	71	12	2
TFEM CAS SYMP: Stroke/Death	56	14	1	55	13	1
TCAR ASYMP: Stroke/Death	407	31	13	371	30	12
TCAR SYMP: Stroke/Death	222	32	9	212	32	8
CEA ASYMP: Stroke/Death	304	20	11	286	20	11
CEA ASYMP: Postop LOS>1 Day	303	20	11	285	20	11
CEA SYMP: Stroke/Death	286	18	11	278	18	11
CEA SYMP: Postop LOS>1 Day	286	18	11	278	18	11
EVAR: Postop LOS>2 Days	446	20	15	424	20	15
EVAR: Sac Diameter Reporting	442	23	20			

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
EVAR: SVS AAA Diameter Guideline	392	20	14			
TEVAR: Sac Diameter Reporting	63	7	3			
OAAA: In-Hospital Mortality	198	16	8	191	16	8
OAAA: SVS Cell-Saver Guideline	201	16	8			
OAAA: SVS Iliac Inflow Guideline	240	16	8			
PVI CLAUD: ABI/Toe Pressure	604	17	13			
INFRA CLTI: Major Complications	209	13	7			
SUPRA CLTI: Major Complications	32	8	0			
LEAMP: Postop Complications	34	2	2			
HDA: Primary AVF vs. Graft	249	6	5			
HDA: Ultrasound Vein Mapping	306	6	6			
HDA: Postop Complications	307	6	6			
IVCF: Filter Retrieval Reporting	0	0	0			

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:**

- 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.

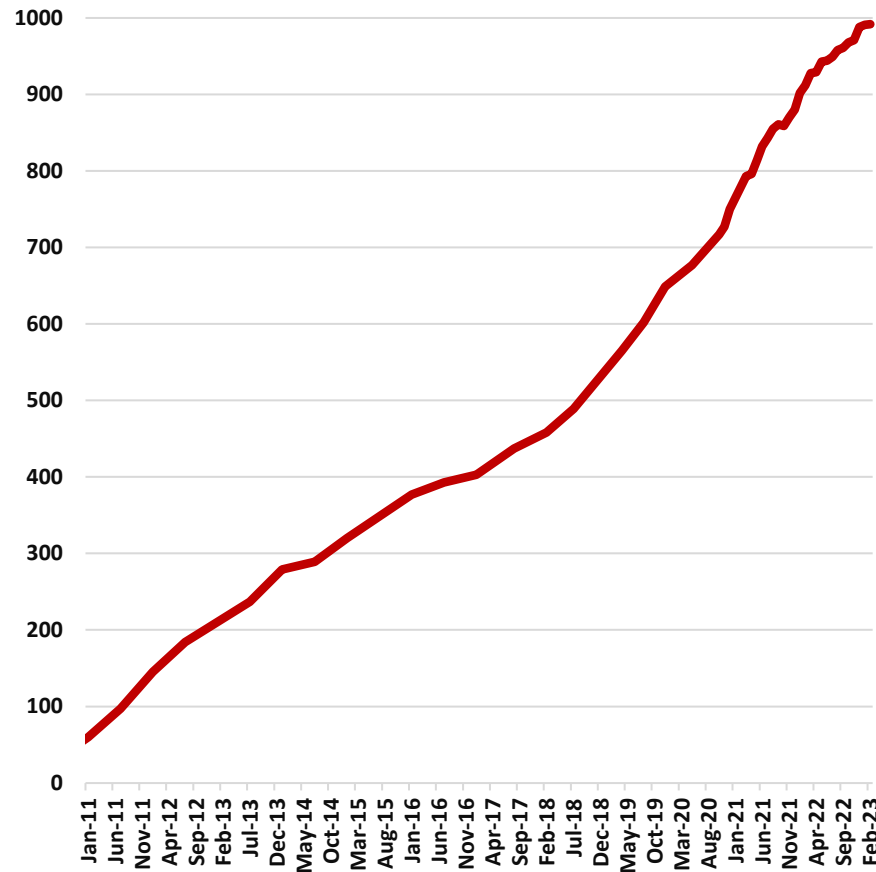
**Spring 2023 SVS VQI Regional Quality Report Slides**

- Discussion on possible QI projects

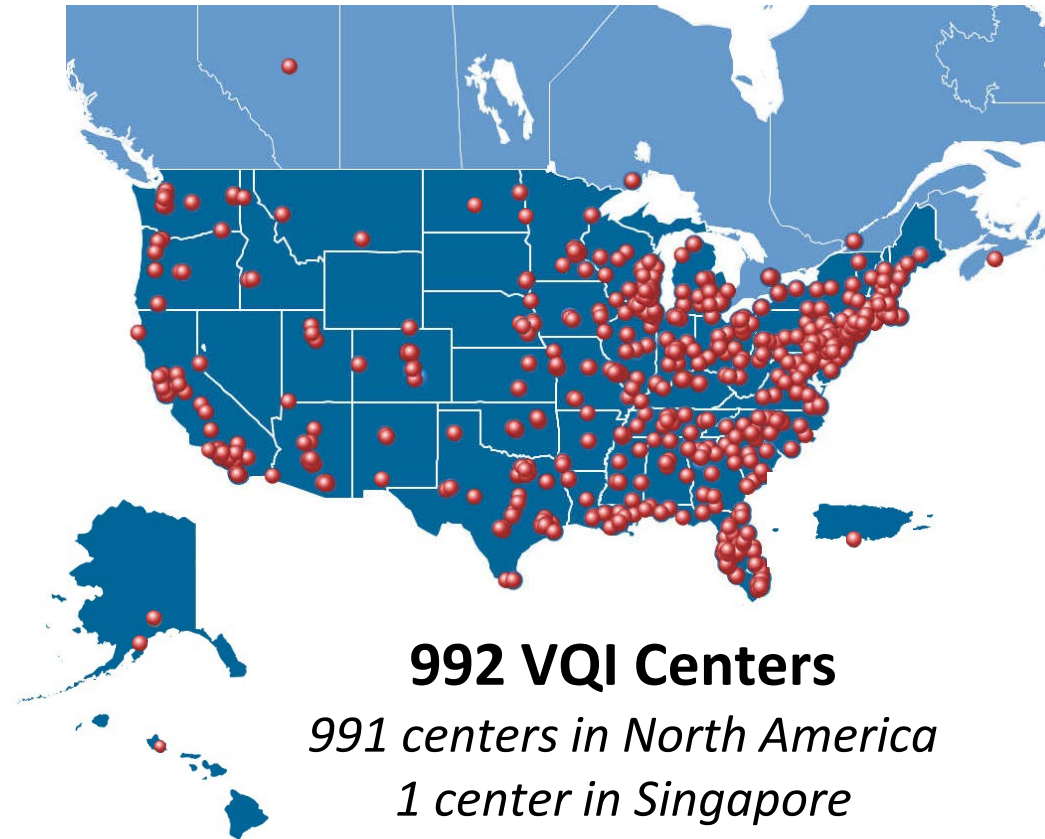
# National VQI Update

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

## Number of Participating Centers

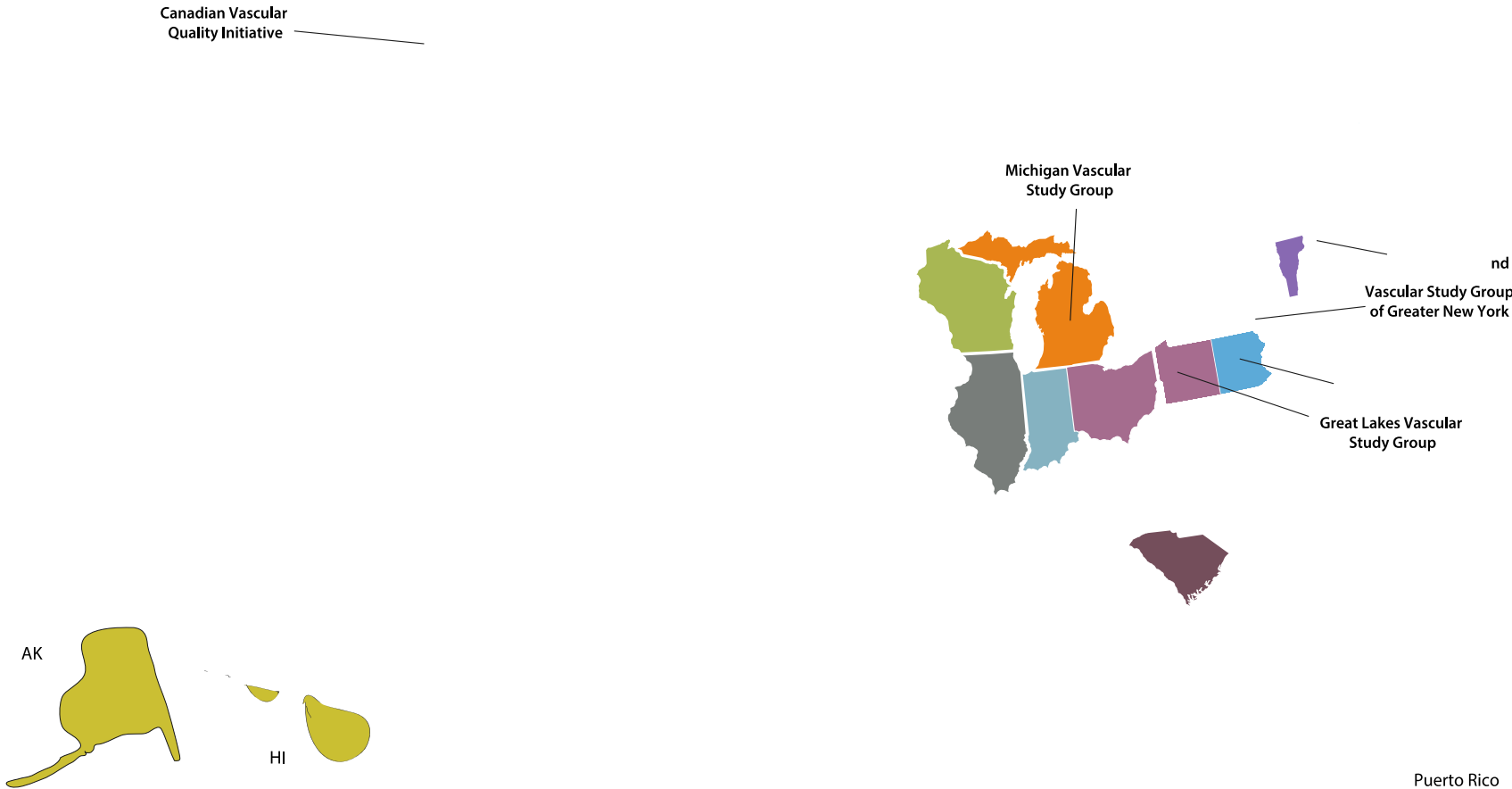


## Location of VQI Participating Centers



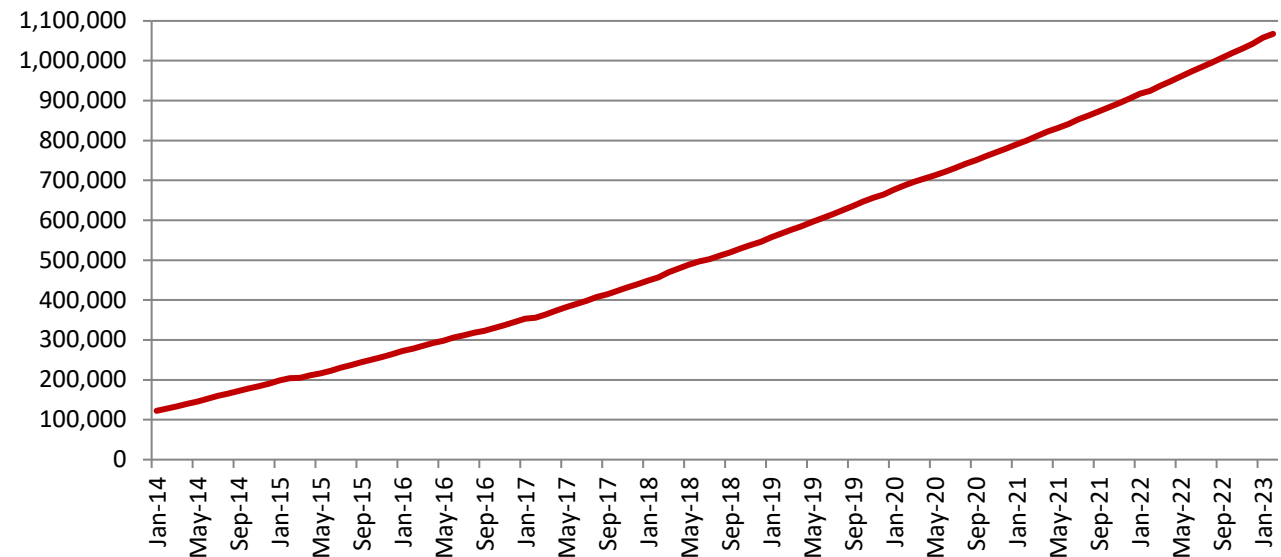
# 18 Regional Quality Groups

## 18 Regional Quality Groups



Total Procedures Captured (as of 3/1/2023)		1,066,834
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)



The registration portal features a header for the 2023 Vascular Annual Meeting in National Harbor, MD, from June 14-17, organized by SVS (Society for Vascular Surgery). Below the header are four registration options:

- SVS Society for Vascular Surgery:** Provides help for member usernames/passwords and instructions for non-members. Registration is auto-assigned based on current membership status. Lapsed dues can be paid online at [www.vascular.org](http://www.vascular.org). Button: Start New SVS Registration.
- SVN SOCIETY OF VASCULAR NURSING:** Registration is auto-assigned based on current membership status. Lapsed dues can be paid online. Please allow up to 72 hours for payment to be applied. Button: Start New SVN Registration.
- SVS | VQI In collaboration with NCDR®:** VQI Annual Meeting registration allows for admission to VQI ONLY. Button: Start New VQI Registration. (Indicated by a large red arrow).
- RPVI:** RPVI Course registration allows for admission to RPVI ONLY. Button: Start New RPVI Registration.

# A Brand New VQI.org!

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

ABOUT VQI REGISTRIES QUALITY IMPROVEMENT REGIONAL GROUPS PARTNERS & COLLABORATIONS DATA ANALYSIS & RESEARCH RESOURCES CONTACT / JOIN

Q

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... Q

ABOUT THE VQI →

VQI REGISTRIES →

REGIONAL GROUPS →

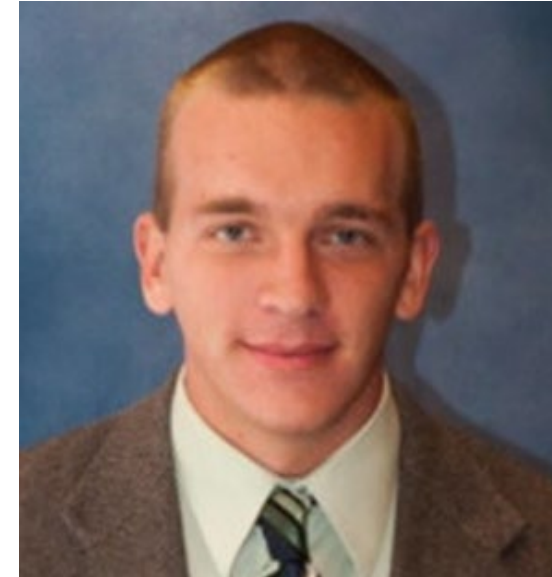
QUALITY IMPROVEMENT →

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

- 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

## 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 April 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 have begun 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 preformed 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 inquires 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 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

**SPECIAL  
OFFER**

## 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.**

# CE/CME Meeting Attendance Credit

## **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\\_6qXweMWuYpvsuAm](https://dmu.co1.qualtrics.com/jfe/form/SV_6qXweMWuYpvsuAm)



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:

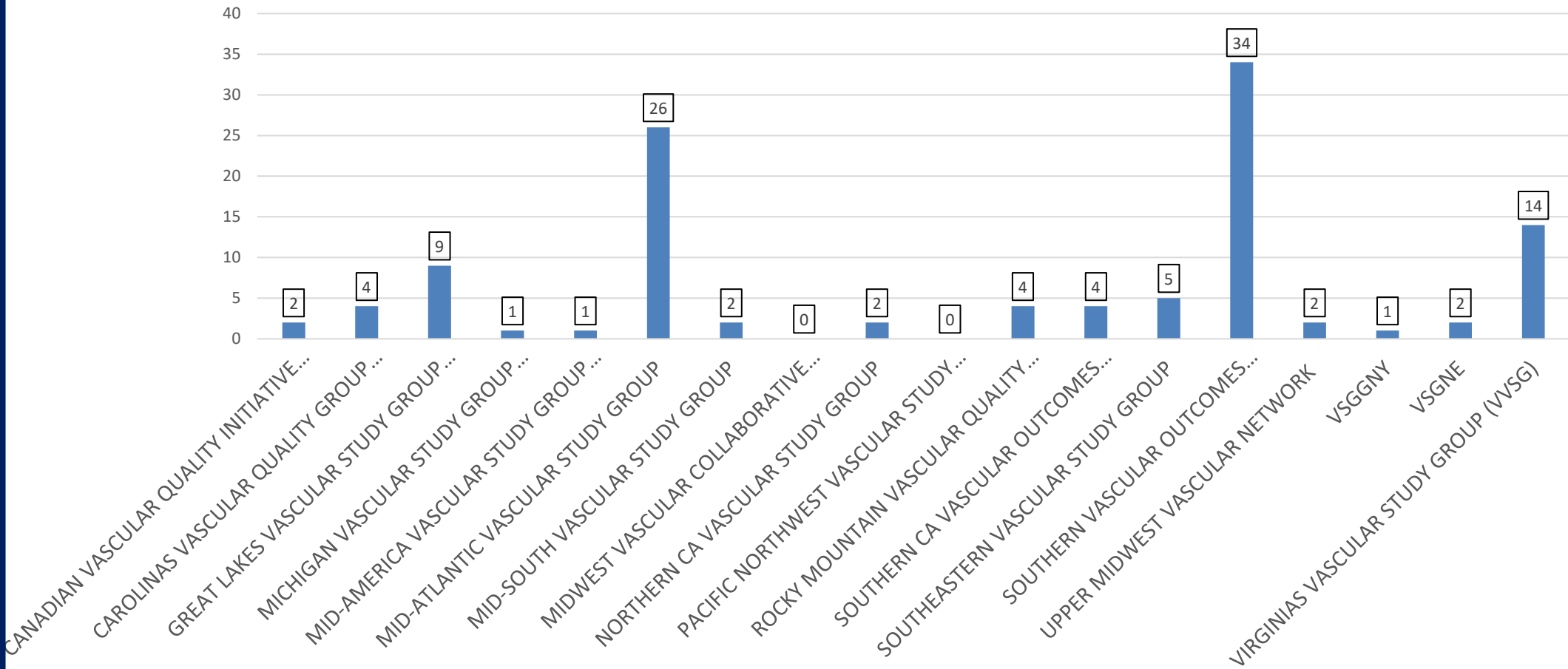
- **Domain 1 – LTFU – 40% weighted**
- **Domain 2 – Regional Meeting Attendance – 30% weighted**
- **Domain 3 – QI Project – 25% weighted** 
- **Domain 4 – Registry Subscriptions – 5% weighted** 

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



# Quality Improvement - Charters

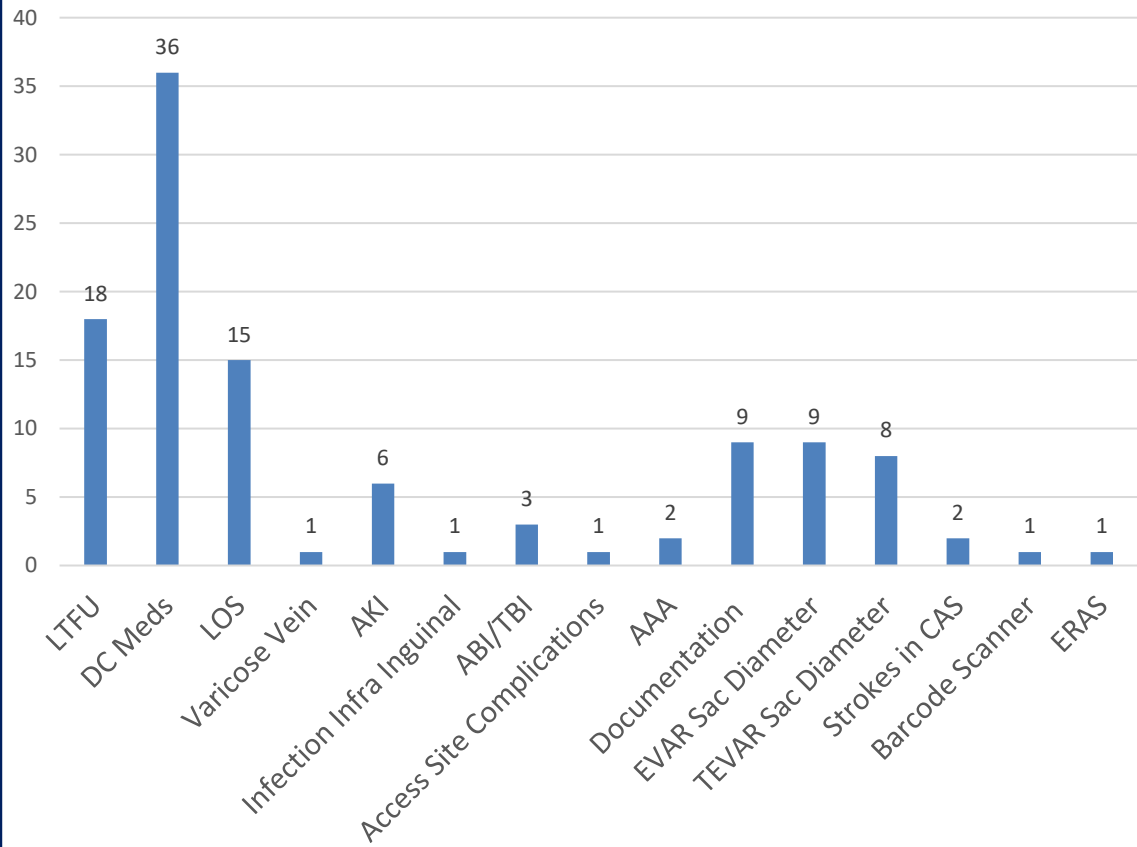
Regions with Charters n=113



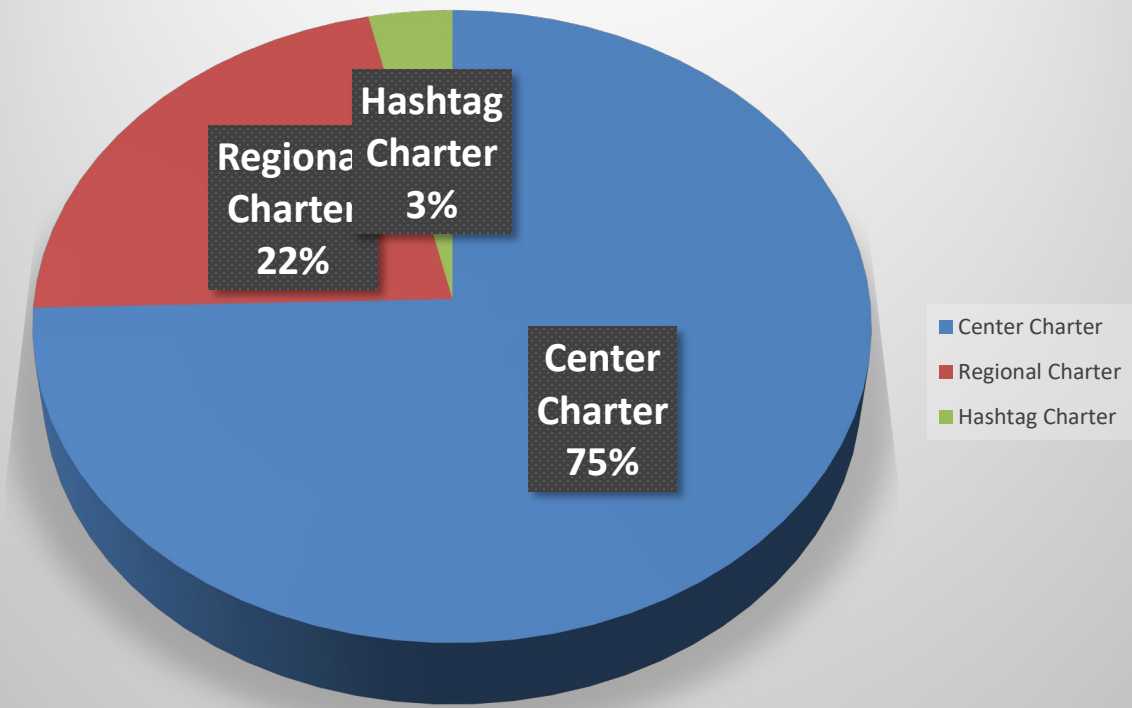


# Quality Improvement – Charter Breakdown

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



In collaboration with NCDR®

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Clinical  
Practice  
Guidelines

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



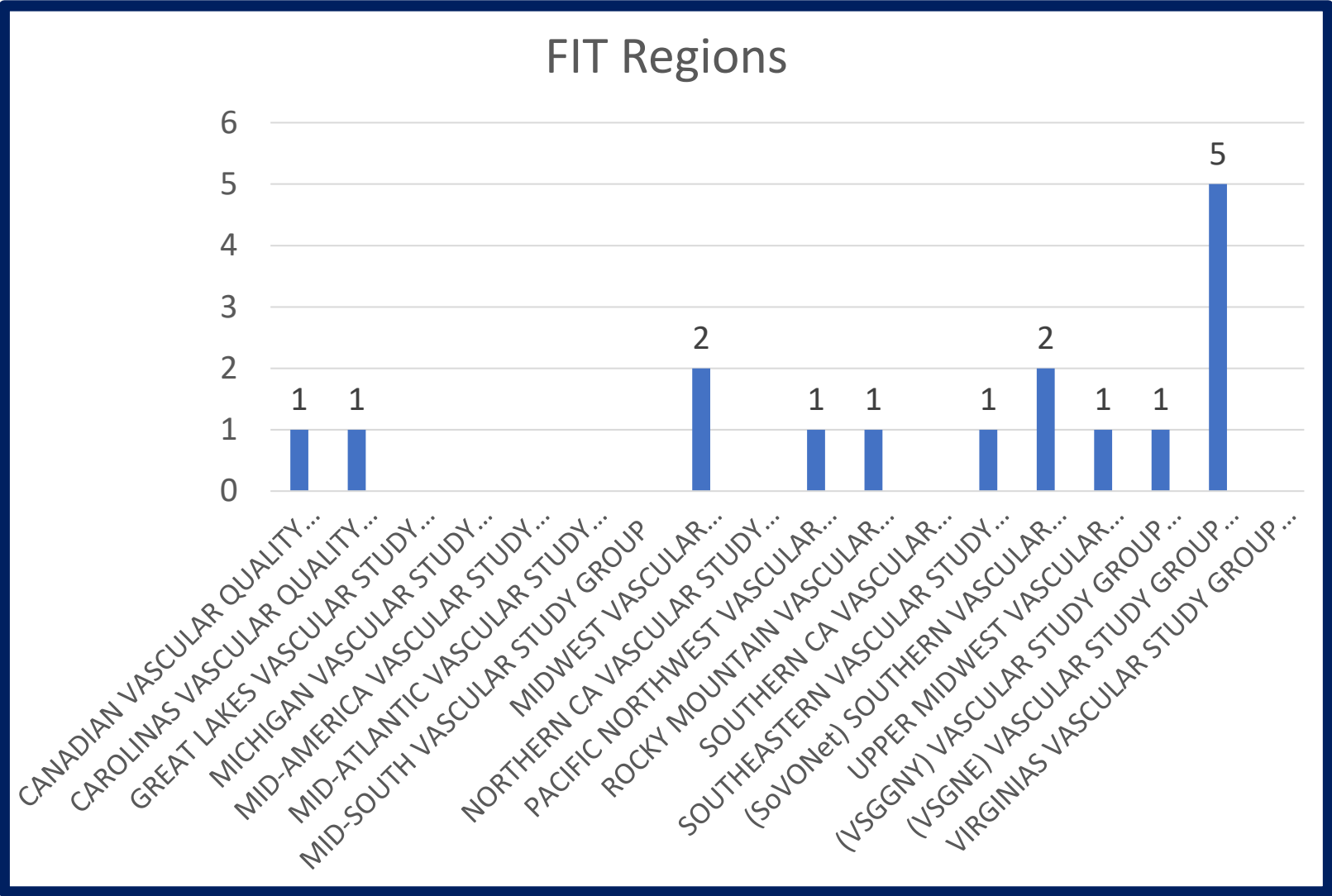
# SVS PSO Quality FIT Program

- 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



# Arterial Quality Council:

## Benjamin Brooke, MD



# Arterial Quality Council Update

- Open AAA Major Revision
  - Renamed to Open Aneurysm Registry
  - Aortic bifurcation to just below the Left Subclavian
- Registry Committee re-engagement
  - Review and creation of new reporting measures
  - Identification of an Associate Chair for each registry
- Finalization of Smoking Cessation to the arterial registries as a National Quality Initiative
- Discussion of harmonization of anesthesia variables within registries
- Introduction of the Data Integrity Audit Program
- Pilot ERAS project into the current Open AAA Registry

# Venous Quality Council:

**Brigitte K Smith, 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 is intended to be used 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 >= 3 months	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@svspso.org](mailto:mlatus@svspso.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:

## Benjamin Brooke, 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:

**Joseph Sabat, 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: 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

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

Call for Proposals: May 30, 2023

Submission Deadline: June 27, 2023

Meeting: July 10, 2023

# Governing Council:

## Scott Berman, 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 Updates
  - 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 – First workgroup met February 2023
- 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 identification of **required** fields; elimination of data variables

## For Spring 2023:

- Scott Berman, MD – term end
  - Emily Malgor, MD, University of Colorado – term start as RMVQI Medical Director
- RMVQI Associate Medical Director (AMD) nominations to open next week
  - all active VQI physicians are eligible
  - physicians can self-nominate



# Updates for Spring 2023 VQI Regional Meetings



# Technology Updates for VQI

# Released in Q3 2022



- Carotid Artery Stent (CAS) Revision

- Air Kerma field was added Air Kerma \*\*  mGy DAP \*\*  Gy.cm<sup>2</sup>

\*\* At least one of these fields must be completed for submission

- Select options for Lesion -> Stent -> Pre Dilate were updated

Pre-dilate Lesion

Select

Select

No

Yes, drug coated balloons

Yes, lithotripsy

Yes, plain balloon



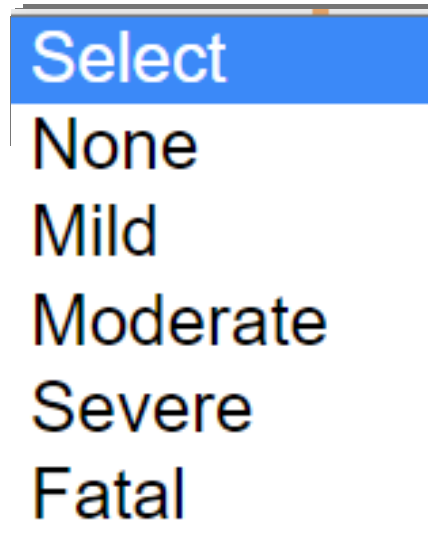
- Peripheral Vascular Intervention (PVI), Infra- and Suprainguinal Bypass, and Vascular Medicine Consult (VMC) Revision
  - Medication regions, in Demographics, Post- procedure and follow-up forms, were reordered and four new fields related to the dose of ASA and Rivaroxaban were added.

ASA	<div>Yes</div>	ASA Daily Dose	<div>Select</div>	mg		
Chronic Anticoagulant	<div>Rivaroxaban</div>	Rivaroxaban Dose	<div>10</div>	mg	Rivaroxaban Dose Frequency	
					<div>Other</div>	Please Specify
P2Y12 Antagonist	<div>Select</div>					
Statin	<div>Select</div>					
Beta Blocker	<div>Select</div>					
ACE-Inhibitor/ARB	<div>Select</div>					



- PVI, INFRA, SUPRA, VMC Revision
  - Any Bleeding Complication field was added to the follow-up forms.

Any Bleeding Complication



A dropdown menu with a blue header labeled "Select". The menu is open, showing five options: "None", "Mild", "Moderate", "Severe", and "Fatal".

Select
None
Mild
Moderate
Severe
Fatal

## Device Assistant Enhancements

- Moved full or partial matched Catalog Numbers to appear at the top of the device results list
- Added ability to search for Catalog Number, Primary DI or Alternate Catalog Number with or without dashes
- Added the columns 'Description' and 'Alternate Catalog Number' to the device table

Released in Q3 2022



## TEVAR Follow-up Outcomes Report

- A new 'Follow-up Outcomes Report' for the Thoracic and Complex EVAR registry, developed by the SVS PSO, is now available in the PATHWAYS Reporting tab. The report will provide key follow up metrics for VQI sites with center data as well as regional and all VQI benchmarking and includes drill down capabilities to better understand center data at the procedure level.

### TEVAR Follow-up Outcomes Report

Procedure Date	Presentation	Pathology	Dissection Indication	Zone of Treatment (Proximal/Distal)
2018/01/01 – 2021/12/31	is any value	is any value	is any value	<div><div>3 4</div><div></div></div>

Released in Q3 2022



## IVC Filter Follow-up Outcomes Report

- A new 'Follow-up Outcomes Report' for the IVC Filter registry, developed by the SVS PSO, is now available in the PATHWAYS Reporting tab. The report will provide key follow up metrics for VQI sites with center data as well as regional and all VQI benchmarking and includes drill down capabilities to better understand center data at the procedure level.

### IVC Follow-up Outcomes Report

Procedure Date

2020/01/01 – 2022/12/31

Planned Filter Duration

is any value

Released in Q3 2022



## HDA Follow-up Outcomes Report

- A new 'Follow-up Outcomes Report' for the Hemodialysis Access registry, developed by the SVS PSO, is now available in the PATHWAYS Reporting tab. The report will provide key follow up metrics for VQI sites with center data as well as regional and all VQI benchmarking and includes drill down capabilities to better understand center data at the procedure level.

### HDA Follow-up Outcomes Report

Procedure Date

2020/01/01 – 2022/12/31

Procedure Type

is any value

Performance Site

is any value

AV Graft Conduit

is any value

Inflow Artery

is any value

## VVR Follow-up Outcomes Report

- A new 'Follow-up Outcomes Report' for the Varicose Vein registry, developed by the SVS PSO, is now available in the PATHWAYS Reporting tab. The report will provide key follow up metrics for VQI sites with center data as well as regional and all VQI benchmarking and includes drill down capabilities to better understand center data at the procedure level.

### Varicose Vein Follow-Up Outcomes Report

Procedure Date

2017/01/01 – 2022/12/31

Leg Treated

is any value

Treatment Type

is any value

Vein Type

is any value

Treatment Region

any value ▼



# PATHWAYS Support

# PATHWAYS Support

## Need help?

Check out the PATHWAYS Support tab.

- **Documents**

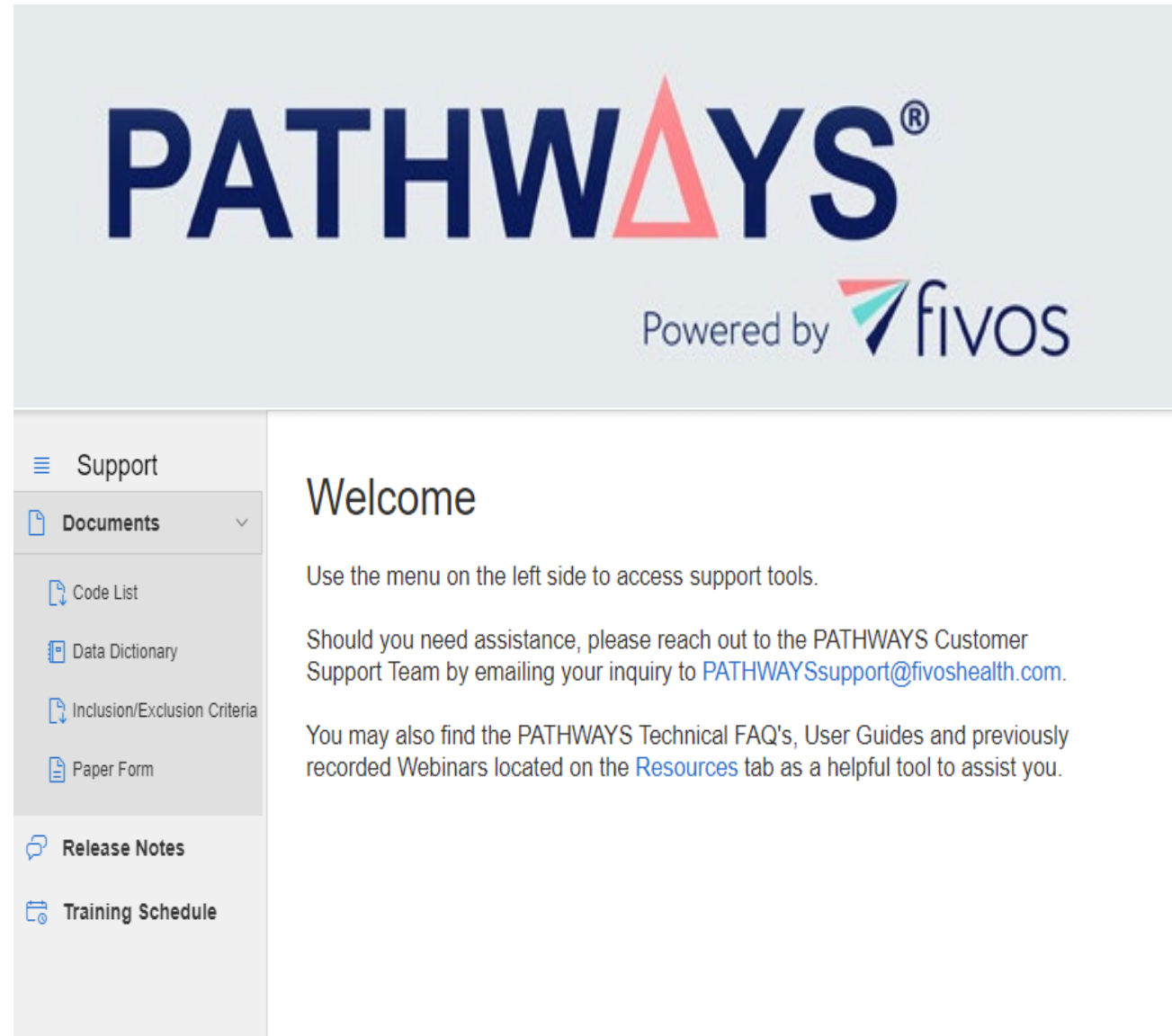
List of essential documents necessary for new staff and experienced abstractors to assist with data abstraction.

- **Release Notes**

Listing of release announcements highlighting changes & improvements to the registries.

- **Training Schedule**

List of upcoming training opportunities with registration links for new staff and experienced abstractors.





# PATHWAYS Support



**Help us help you.**

[PATHWAYSsupport@fivoshealth.com](mailto:PATHWAYSsupport@fivoshealth.com)

When sending an email inquiry to the PATHWAYS Support team...

- Please include:
  - Detailed information regarding your question including the name of the procedure registry and field(s) in question
  - Primprocid's to identify specific records
  - Your center name and contact information including a phone number in case we need to contact you
- Please **exclude**:
  - PHI from any email or attachments you upload
    - i.e., Patient name & DOB

This will help avoid confusion as we research your questions to ensure an accurate and timely response!

# PATHWAYS Support

Are you new to the role of Hospital Manager at your center?

The **PATHWAYS Hospital Manager Guide**, located on the Resources tab, might help you better understand the responsibilities of your role in the VQI.



## PATHWAYS® Hospital Manager Guide

We are excited to welcome you as a new Hospital Manager to PATHWAYS!

Your center has shown a commitment to quality improvement. The PATHWAYS platform provides a complete solution for collecting and managing registry data. Built-in reporting tools allow you to manage your registry data and compare your outcomes with other centers.

As a new Hospital Manager (HM) for your center, we would encourage you to reach out to existing staff to discuss your center's unique workflows and experience, and to gather information about the status of your registry data abstraction.

### Responsibilities/Expectations of HM Role:

- Primary contact for the Registry at your center
- Receive & distribute communications regarding reports, meetings, announcements, etc.
- Understand the participation requirements of the registry & ensure adherence to these requirements (such as annual claims validation, registry inclusion criteria, and follow-up expectations)
- Create and manage user accounts and privileges
- PATHWAYS Super User
- Designate a secondary "Hospital Manager" at your site for cross coverage
- Maintenance of Center Characteristics
- Respond to data audits & other registry related inquiries

This HM checklist outlines steps to guide you to become familiar with PATHWAYS.

### Getting Started:

- Login to PATHWAYS to get started!

## Claims Validation

*The annual claims validation process is intended to ensure that all eligible cases have been captured in the registry and is a requirement of participation in the VQI. This process is a key component of VQI's efforts to make certain registry data reflects real-world evidence.*

The **2022** Claims Validation process will be launched in **April 2023**

- Centers will be notified via email with a request to provide the contact information for the individual responsible for completing the audit.
- Participating centers will be invited to a webinar providing an overview of the steps required for successful completion.

**PATHWAYS Support is here to help you!**

Please reach out if your center is selected to participate and you need assistance.



## Coming Soon...

The **Support** Team is currently developing brief training videos to assist with specific functionality and tasks. By sharing some pointers with you, we hope to save you time and highlight PATHWAYS functionality and tools that you may not be familiar with.

The **Technology** Team has several features in progress to enhance PATHWAYS functionality including:

- Infra & Supra Follow-up Outcomes reports.
- Expanding data integration capabilities with Cedaron to include more VQI registries.
- Visualization of recently updated help text on the online/electronic form.
- Enhancing the Support tab to accommodate links to external resources.



# THANK YOU

The Fivos team appreciates your support and looks forward to your continued feedback about the PATHWAYS platform and support services.

Please send your suggestions to  
[PATHWAYSsupport@fivoshealth.com](mailto:PATHWAYSsupport@fivoshealth.com)

- Date – 3<sup>rd</sup> week in July (exact date TBD)
- Location –in conjunction with Rocky Mountain Vascular in Deer Valley

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

*Thank  
you*



# CE/CME Meeting Attendance Credit

## **REMEMBER TO PSO:**

- **P**UT your FULL NAME in Zoom for remote attendees; scan the attendance QR code for in person attendance. 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\\_6qXweMWuYpvsuAm](https://dmu.co1.qualtrics.com/jfe/form/SV_6qXweMWuYpvsuAm)



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**