I. General Discussion and Questions

a. Welcome:
Welcome to the new centers (15) with total participating sites equaling 117 centers. Dr. Young Erben, Associate Professor of Surgery at Mayo Clinic Florida, currently the Associate Regional Medical Leader role for the SEVSG, will transition to the Director role in 2023.

b. Regional Data Review (see slide deck):
Dr. Charles Ross, Regional Medical Leader in conjunction with Dr. Young Erben, Associate Regional Medical Leader presented the regional data.

LTFU: Continued underperforming the VQI. Group discussion around declining performance, widening the performance gap. VQI Overall above 70% and SEVSG now below 60%. Discussed the need for centers to know their data and to have a plan to ensure LTFU.

Polling Question 1. What are the challenges you have at your center to accomplish better long-term follow-up?

Volume

i. Physician Specialties – not just vascular surgeons who participate
ii. Discharge Medications: Consistently underperforming the VQI with the worse performance of all regions.

iii. TFEM CAS Asymptomatic & Symptomatic Stroke/death:
iv. TCAR Asymptomatic Stroke/death: Performance is similar to the VQI
v. TCAR Symptomatic Stroke/death: Outperforming the VQI

vi. CEA Asymptomatic Stroke/death: Underperforming the VQI
vii. CEA Symptomatic Stroke/death: Performance is similar to the VQI
viii. CEA Asymptomatic LOS > 1 day: 2021 underperforming the VQI
ix. Polling Question 2. What could potentially explain this spike in complications for asymptomatic CEA

x. CEA Symptomatic LOS > 1 day: Outperforming the VQI
xi. EVAR Post op LOS > 2 days: Underperforming the VQI

xii. EVAR Sac diameter reporting in LTFU: Consistently underperforming the VQI.

xiii. EVAR Sac Size Guideline: Underperforming the VQI
xiv. Polling Question 3. Why do you believe that we have low compliance with aortic sac size guidelines?

xv. TEVAR Sac Diameter Reporting: Continue to Outperform the VQI
xvi. OAAA in hospital mortality: Continue to Outperform the VQI

xvii. PVI Claudicants: ABI/Toe pressure: Worst performing region in the VQI
xviii. Polling Question 4. What is the primary barrier to pre-procedural assessment of ABI/TBI’s?
xix. **Infra CLTI**: Major Complications: Similar performance to VQI
xx. **Supra CLTI**: Major Complications: Underperforming the VQI
xxi. **LEAMP**: Postop Complications: Historically outperformed the VQI. 2021 saw a decline in performance
xxii. Polling Question 5. Why do you believe that we have a high rate of amputation complications?
xxiii. **Regional Improvement Project** Charles Ross MD – group discussion brainstorming new project ideas

II. **National VQI Update** – Betsy Wymer (see slide deck)
   a. Reviewed specifics of what it means to be a PSO, including functions, activities and center responsibilities.

III. **VQI @ VAM 2022** – shared dates of upcoming event and encourage attendance and participation

IV. **Coming Soon** - shared new and upcoming features, enhancements to modules, website, mobile App, VQI LinkedIn

V. **Paclitaxel Update**

VI. **Quality Improvement Update** Betsy Wymer – Trainee Program Update, Participation Awards, How to Begin a Charter

VII. **Councils & Committee Updates**
   a. **Arterial Quality Council** - Emily Spangler MD
   b. **Venous Quality Council** - Olamide Alabi MD
   c. **VQC RAC Committee** – Jaime Benarroch-Gampel MD
   d. **Arterial Research Advisory Council** -Susan Shafi MD
   e. **Governing Council** – Charles Ross MD & Betsy Wymer DNP, RN, RN-BC

VIII. **Spring 2022 RAC Reminders** Leila Mureebe MD
IX. **Case Presentation** – Emily Spangler MD UAB

X. **Polling Question 6** Barring Covid restrictions, will you attend an in-person meeting?

XI. **Next Meeting**: Fall 2022 meeting – Based on polling during the conference, tentatively planned for in person at Piedmont Atlanta.