

Southeastern Vascular Study Group
Spring Meeting-Remote
April 14, 2023

- I. Meeting conducted remotely. Welcome and introductions by Dr. Betsy Wymer, SVS PSO Director of Quality Clinical Operations and Dr. Erben Young, Medical Director. Dr. Gary Lemmon SVS PSO associate is also present. There is a vacant assistant medical director position for our region.

- II. **Regional Data Review covered by Dr. Erben:** Seven new centers are joining the SEVSG to the 127 existing centers. Region volume appendix reviewed by Dr. Wymer. There is a new preop smoking report and smoking cessation report added to elective arterial registries in the Spring 2023 VQI Regional Quality Report. This will be added during VAM 2023 as a new National Quality Initiative. A hyper-link for data review in Spring reports is also new. Our region logged 13,134 procedures for 2022 to lead all regions for volume of procedures collected. The regional total so far is 84,937 out of a VQI overall of 1,025,825. Vascular surgery contributes the largest volume among physician specialties. For percentage of procedures with Long Term Follow-up, we have fallen to 64% from 67% compared to VQI overall of 75%. The rate of discharge medication (anti-platelet + statin) is close to the 87% overall with this region at 82%. Preop smoking is 27% (elective arterial still smoking within one month of procedure) while VQI overall is 30%. Smoking Cessation is measured from elective arterial procedures at long term follow-up and includes patients not smoking within one month of recorded follow-up. SE Region is 31% while overall is 26%. For TFEM CAS asymptomatic our region is to the left at 0.4% stroke or death rate, a significant drop from VQI overall at 1.8%. For TFEM CAS symptomatic the rate of stroke/death is 4% while overall is 4.4%, stable to previous years. In terms of TCAR asymptomatic stroke/death we are on par with VQI at 1.1% versus 1%. For symptomatic TCAR stroke or death we are lower at 1.6% versus overall 2.1%. CEA asymptomatic stroke or death is right on par at 0.8 % to the VQI overall. CEA symptomatic stroke or death rate is 1.6% compared to 1.8% overall. CEA asymptomatic post-op LOS >1 day we are longer at 23.7% compared to overall 21.4%. Our outcomes for CAS and CEA are very good but several centers are statistically significant having LOS >1 day. Some have 70-80% of patients staying >1 day. We should investigate reasons for this. A clarification from Kristopher (statistician) inquired by Dr. Wymer is for reporting measures, CEA with concomitant CABG are excluded, however, for data collection into the registry, CEA with concomitant CABG are included. Stroke or death for symptomatic CEA is slightly better at 1.6 % compared to overall at 1.8%. Postop LOS >1 day CEA symptomatic the average is 49% regionally compared to 42.2 % VQI overall. In

terms of EVAR postop LOS >2 days we are slightly higher but stable at 18.2 % versus VQI average at 15.3 %. EVAR sac diameter reporting we are a little better at 61.3 % than VQI at 60.5%, still not at goal, potentially another area for improvement as a group. We are not far from the SVS guidelines for EVAR AAA diameter at 74.4% with VQI overall at 75.2%, stable but an opportunity to get better. TEVAR sac diameter, ours is much better at 73.4% versus 61.9 % overall. Open AAA In-hospital mortality is also better than average at 3.5% versus 4.2%. Our OAAA SVS cell-saver guidelines is constant and slightly better at 95.7% compared to VQI average at 92.7%. OAAA SVS Iliac inflow guideline has us at 97.1 % with VQI average of 98.1% again stable. A difference was noted between our higher rate of TEVAR sac diameter reporting as opposed to EVAR lower rate of sac diameter reporting. **Polling Question:** In Fall 2022 SEVSG, the PVI Claudication ABI/Toe Pressure Assessment was at 44.1%. Now we are at 33.5 %, about 10% drop to become the lowest region in VQI. Overall rate is 69.4%. We have been steadily dropping. Poll results showed barriers thought to be: 1) data collection difficulties 50% 2) studies aren't being performed 37% 3) unsure of how to improve 13% 4) more urgent/emergent cases 0%. Is this an area for improvement with variables and hashtags? Much discussion was had about barriers as to why ABI/Toe pressure might not be included. Major complications after Infra for CLTI we are 5.6% versus 4.7% VQI average. Supra CLTI Major complications we are better than VQI, 5.7 % versus 8.2 %. Lower Extremity Amputation Postop complications we are 12.1% and VQI 11.3%. HDA primary AVF vs. graft this region is low 73.7% with VQI overall at 81.7%. HDA ultrasound vein mapping 92.5% with VQI overall at 86.7%. HDA postop complications were on par with VQI 1.1% versus 1.2%. This is up from last year but still to the left on bar chart. IVCF filter retrieval reporting in region is 21.7% versus overall 57.1%, another area for improvement.

- III. **Research Presentations:** Dr. Adam Banks - University of Alabama at Birmingham gave a presentation on Readmissions Following Endovascular Thoracoabdominal Aortic Repairs in the Vascular Implant Surveillance and International Outcomes Network (VISION). Dr. Brian Gilmore - University of Florida, Gainesville gave a presentation on Contemporary Implications of the Temporal Trends in AAA Care in the United States. Dr. Michael Fassler-University of Florida College of Medicine presented Frequency of Inappropriate Endovenous Ablation Therapy with the VQI Varicose Vein Registry. Sara Lee, MD candidate 2024, Mayo Clinic Alix School of Medicine, Florida Campus presented State of Gender- Based Microaggressions Among Surgeons and Development of Simulation Workshops for addressing Microaggressions for Surgical Trainees and Students.
- IV. **National VQI Updates were covered by Dr. Betsy Wymer.** Nominations are out for new Associate Medical Director. Quality Improvement Charters-2022 there are six Charters in our region. None yet for 2023. VQI has reached the 1,000 center mark and over one million procedures. Register now for VQI @ VAM 2023

National Harbor, MD outside of Washington, DC. June 13-14, 2023. A new VQI website has been streamlined and improved. A new statistician, Jeff Yoder joined PSO analytics team. Infra and Supra Registry revisions went live, late March 2023. A new national quality initiative smoking cessation will be explained at VQI @ VAM. A new data integrity audit program will start in with Carotid Artery Stent Registry this spring. Telligen, a third-party vendor to blindly abstract records and compare to Pathways. This is led by Melissa Latus mlatus@svspsso.org The risk calculator is being updated. New follow-up reports in IVC Filter and Varicose Vein. Coming soon, harmonization of CAD variables and anti-coagulation, and an Open AAA revision. The need to reduce variables is recognized to decrease data entry burden. SVS verification program launched March 2023. New educational videos on TASC/GLASS and Varicose Vein available on Member's Only area. For sign in access email Jennifer: jcorrea@svspsso.org A one-year complimentary trial subscription offered to VSR and VMC is available. Inquire at vqi@fivoshealth.com Top 10 VQI Publications in 2023 were listed.

- V. **Quality Improvement:** Participation Awards have four domains, changes this year are the QI Project has increased to 25% weighted and the Registry subscription decreased to 5%. Full details available on vqi.org under Quality/Participation-awards. The year 2022 ended with 113 charters over all regions. Many resources are available. SVS PSO Quality FIT Program in 2022 had 16 participants. Scholarships and new trainees to be announced at VQI @ VAM 2023.
- VI. **Arterial Quality Council covered** by Dr. Emily Spangler. Open AAA is having a major revision. Already addressed are topics of Smoking cessation and data integrity audits.
- VII. **Venous Quality Council** covered by Dr. Betsy Wymer for Dr. Olamide Alabi. They have been focusing on re-engagement of the venous registry committees and working on follow-up reports for Varicose Vein and IVC Filter.
- VIII. **Arterial and Venous RAC** Melissa Latus is your PSO primary point of contact. An active Pathways account and privileges to "share a file" is required to receive blinded data set, include your RAC proposal number in communication. Proposal submission dates are on the VQI website.
- IX. **Arterial Research Advisory Council** Dr. Susan Shafii not present today. There were 194 Publications in 2022.
- X. **Venous Research Advisory Council** also Dr. Susan Shafii. There have been 3 proposals over each of past 3 years.
- XI. **Governing Council** Dr. Erben- most updates already covered. Five proposals per cycle per institution. Discussing frailty variable development, outpatient-based lab registry refinement, and easing data variable burden.
- XII. **Fall Meeting SEVSG** To be held Friday, October 27, 2023, in Jacksonville, FL at Mayo Clinic from 11:30 am to 2:00 pm. Lunch included. Meeting will be Hybrid.
- XIII. **Thank you**, industry supporters Cook Medical and W.L. Gore, CME/CE through Des Moines University

XIV. **Conclusion Dr. Erben:** A successful meeting with highlights of engaging Residents and Trainees. Looking forward to Fall when we follow-up to discussions we had today.