

Upper Midwest Vascular Network Fall 2022 Minutes

Director: Dr. Neel Mansukhani

Lead Data Managers: Jennifer Farrell and Ashley Verhyen

Date: Friday, October 14, 2022

Time: 1:00 pm to 4:00pm

Location: Remote

Attendance:

Abby Rothstein	Jenna Vis	Mark Keldahl
Amanda Hasburgh	Jennifer Kohl-Fichtner	Mark Mewissen
Amy Reed	Jenny Farrell	Mary Wanzek
Ashley Verhyen	Jill Falkosky	Melissa Latus
Barb Chacko	Joan Reis	Neel Mansukhani
Barbara Weiler	Jon Matsumura	Nichole Janssen
Breanna Diedrich	Joseph Hart	Nicole Conway
Caroline Morgan	Julie Stolle	Nicole Baecker
Christopher Bunch	Karen Bunge	Nychole Greder
Danielle Martin	Kathleen Carril	Rachael Barby
Eugene Tarbunou	Kelly Magee	Randy DeMartino
Amy Horsted	Kyla Bennett	Rhonda Iverson
Indrani Sen	Leka Johnson	Sharon Nehring
Jaafer Golzar	Lisa Derengowski	Thomas Carmody
Jamie Johnson	Lisa Schultz	Todd Peebles
Janet Abell	Margaret Heath	Toni Crow

Intro

- No disclosure
- Welcome Yauhen Tarbunou- Associate Medical Director, Fairview Health
- Dr. Mansukhani will be leaving the region
 - UMVN Medical Director nominations soon
 - Reach out to either Medical Director if interested
- 69 total centers in our region
 - New centers- Bismark- CHI St. Alexis Health, Mayo Clinic Health System-Mankato
- Reached 1 million cases on 9/14/22

Regional Data Review

- Two new HDA reports U/S vein mapping and postop complications
- CEA Report- inclusion/exclusion criteria updated for return to OR [unrelated is excluded]
- Balanced and multidisciplinary approach in this region

Metric	Region	VQI	Discussion
LTFU	88.2%	69.4%	-Above average compared with VQI -Leader in the country
Discharge Medications	88%	86.6%	-Better than VQI -Only a couple percentage points below top performing center -Please reach out if your center has low performance in this area and would like assistance

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TFEM CAS Asympt Stroke/Death	0.8%	1.9%	-Struggled with this in the past, now improving -Continue to monitor
TFEM CAS Sympt Stroke/Death	4.5%	3.9%	-Greater than VQI -Need to continue to monitor -We are lower performing region in this category
TCAR Asympt Stroke/Death	0.7%	1.2%	-Slightly below average -Struggled with this in the past
TCAR Sympt Stroke/Death	2.2%	2.4%	-Just under VQI average and at expected level
CEA Asympt Stroke/Death	0.5%	0.8%	-Improved from last year -Well below expected outcomes -Discussion of validity of stroke CEA % -Possible reason for improvement in %: more options for invasive treatment instead of CEA making patient selection for CEA more favorable, capturing in peri-op instead of 30 day period, lack of independent assessment for stroke, not all aysmp patients are included per definition of data point -Possible fixes: include data managers in M&M meetings, external audit program coming soon -Comparison: CREST asymp CEA stroke rate was 1.4%
CEA Asympt Postop LOS >1 Day	20.4%	20.7%	-About what is to be expected
CEA Sympt Stroke/Death	2.7%	2%	-Higher than VQI -Continue to monitor -Area for potential study as a region
CEA Sympt Postop LOS >1 Day	37.4%	39.6%	-Improving in last couple years
EVAR Postop LOS >2 Days	19%	16%	-Region has struggled with this data point -Possible reasons: attention to comorbidities in hospital stay based on wait due to COVID for treatment -Possible Fixes: utilizing standard discharge order set, APP utilized for tracking this data point and reporting, ensure medical health optimized before elective procedure, request for VQI to exclude cases that are not solely EVAR
EVAR Sac Diameter Reporting	74%	55.5%	-Region continues to do well in this category -previously unblinded this category -Top performer in the country
EVAR AAA Diameter Guideline	82.6%	76%	-Well above average in this category -VQI will soon include selection option for rapidly expanding aneurysm [AAA guidelines]
TEVAR Sac Diameter Reporting	86.2%	58.4%	-Top performer in the country
Open AAA In Hospital Mortality	2.9%	4.2%	-Starting to approach the average, but still below VQI
Open AAA Cell-Saver Guideline	96.7%	92.5%	-Above VQI -2 nd best region in country
Open AAA Iliac Inflow Guideline	98.9%	97.9%	-Just above VQI average
PVI Claud ABI/Toe Pressure	70.9%	73.1%	-Slightly below VQI average -Area that we are worsening in -Discussed at the last meeting -Polling question- What is your last reported data % for ABI completion: 5 regions above and 4 below

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			-Polling Question- What is the reason ABI not reported- 69% not done, 23% done but not interpretable, 8% done but missing information -Level I evidence for using ABI -Inquiry if “not measurable” could be added as selection in VQI, right now would need to use check box “not done”
Infra Bypass Major Complications	4.2%	4.9%	-Below VQI average
Supra Bypass Major Complications	6.6%	7.2%	-Below VQI average
LE Amputations Complications	10.6%	11.7%	-Below VQI average
HDA: Primary AVF vs Graft	82.9%	82.1%	-Only 3 centers participating
IVC filter retrieval	NA	51.8%	-Only 1 center participating

Regional QI Discussion

LTFU concern [33% of respondents to polling question]

- Previously effect of pandemic
- Backed up clinic due to lack of block time in OR
- Fix: try to manage patients locally

Decreased ability to schedule patients in the OR

- Can't get operative care due to divert of OR patients
- Staffing shortages= empty beds= less cases
- Same day discharge for carotids due to low bed availability
- Nursing homes full, so hard to discharge
- Turning down transfers has increased
- Concern for using automated color system for transfers without calling accepting physicians

Other concerns

- Increased supply costs=some hospitals losing money

Topics for the next meeting

- Answer from polling question
 - Carotid-33%
 - Aorta- 13%
 - Peripheral Vascular Care- 47%
 - Dialysis Access- 7%
 - Venous/ IVC- 0%
- Incorporate topics from AHA meeting
 - [AHA Meeting 2022 | 05-07 Nov 2022 | Chicago, USA \(aha-meeting.org\)](https://aha-meeting.org)
 - Possible changes to approaching the disease process

National VQI Update- Caroline Morgan

- 958 VQI centers, 957 in North America, 1 in Singapore
- VAM is June 13 & 14 2023 in National Harbor, MA
<https://vesurgery.org/meetings/spring/>
- Quality abstracts and rapid fire abstracts portal is open
 - will close January 16th 2023
- VAM recordings available if you were registered

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<https://www.eventscribe.net/2022/SVS-VAM/agenda.asp?BCFO=M&pfp=VQI&fa=&fb=&fc=&fd=&all=1&mode=>

- Melissa Latus- new Clinical Operations Program Manager
 - Auditing pilot- would use a 3rd party auditor, data managers would get a notice of percentage of correctness, will start with one registry only, report as aggregate not center level
- Infra/Supra revisions
 - Enhancing help text
 - Planned vs unplanned identification
 - Harmonization of variables across like registries
 - Adding wifi variables [grading of wounds, infection]
 - Expand claudication variables [mild, mod, sev]
 - request to send out what alignment is supposed to be for claudication variables
 - VQI will be putting in new AUC definitions
 - Return to OR help text
 - Cloning between Infra/Supra/PVI
- VQI corner at VAM
 - Increased webinars for registry releases/revisions
 - Addition of data managers to registry committees
 - Regional lead DM is resource for updates and questions
 - [The Vascular Quality Initiative - VQI Reporting Updates](#)
- Webinar schedule: <https://www.vqi.org/resources/webinars-events/>
- Pathways webinars: support tab -> training schedule ->click register
- New VQI website: modern, improved navigation, go-live in November
- Hashtag projects: for ideas not collected within registry
 - Example: Plavix resistance
 - Hashtag has to be entered into comment box of cases in this format #[Tag:value]
 - Reach out to Betsy Wymer to get started bwymmer@svspsso.org
- Link for CME credits: https://dmu.co1.qualtrics.com/jfe/form/SV_b7yznnRI26FPkeWn
 - You have 7 days to complete form and submit
 - Submit both attendance and meeting eval to get CME
 - Will take 14 days to get certificate
 - Questions about CME: ljohnson@svspsso.org

Quality Improvement

- Trainee Program- Fit Roadmap
 - <https://www.vqi.org/quality-fellowship-in-training-fit-program/>
 - Dr. Leah Gober and Dr. Bennett representing our region
 - Next class accepting applications in January 2023
 - Hoping to have Dr. Gober present on her project for the next meeting
- Participation awards program

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The four domains for the 2022 Participation Awards criteria:

- Domain 1 – LTFU – 40% weighted
- Domain 2 – Regional Meeting Attendance – 30% weighted
- Domain 3 – QI Project – 20% weighted
- Domain 4 – Registry Subscriptions – 10% weighted

The final score is calculated as follows:

Total points = 4 x LTFU score + 3 x Attendance score + 2 x QI score + 1 x registry score

- Must have active pathways account to get attendance score for regional meetings
- QI toolkits to be developed for LTFU and Data Managers
- Charter updates: 70% center, 28% regional, 2% hashtag
 - Our region has one charter by Jenny Farrell

Arterial Quality Council Update

- Meetings every other month- Next meeting 11/7/22
- Approved harmonization of chronic anticoagulation across all the registries
- Review of infra/supra major revisions
- Risk calculator update and integration
- Adding new national quality initiatives i.e. smoking cessation

Venous Quality Council Update

- Meetings Quarterly- Next meeting 11/17/22
- Focus on long and short terms goals of each venous registry
- AVF meeting: Feb 23-26, 2023

Arterial Research Advisory Council

- 4 submission cycles per year- June, August, October, December
 - 30 abstracts in June, 28 in August
- Meets to review and decide on all abstracts

[The Vascular Quality Initiative - National Arterial RAC Schedule \(vqi.org\)](https://vqi.org)

Venous Research Advisory Council

- TBD

[The Vascular Quality Initiative - National Venous RAC Schedule \(vqi.org\)](https://vqi.org)

Governing Council

- Possibly publicizing registry participation- decision not to disclose
- Update on expansion of TCAR
- Update on addition of Cedaron- some automated abstraction, customized reporting
- PSO risk calculator discussion- where on website, possible app

Spring 2023 Regional Meeting

- April 28th 2023 from 1-4 PM
- Location: TBD

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Fall 2023 Regional Meeting

- Will hold in conjunction with [Annual Meeting - Midwestern Vascular Surgical Society \(MVSS\)](#) (midwestvascular.org)
- Date: Sept 8 or 9, 2023
- In person and hybrid

Meeting Closure