Vascular Study Group of Greater New York (VSGGNY)

June 15, 2022

5:00 pm – 7:30 pm (ET)

VSGGNY Spring 2022 Regional Meeting Attendance:

Andrey Churkin
Angela Kokkosis
Betsy Wymer
Caroline Morgan
Christina Johnson
Claire Motyl
Dan Robens
Elizabeth Deda
Glenn Jacobowitz
Hui Qing Sandy Su
Jacqueline Myrie-Weir
Jeff Lord
Jeffrey Indes
Jennifer Correa
Jennifer Ellis
Jennifer Kelly
Justin Hamilton
Kathleen Fedele
Kristen Probeck
Laura Love
Leila Mureebe
Leka Johnson
Linda Heinz
Lucyna Price
Matthew Cambria
Michael Stoner
Nhan Nguyen Tran
Omar Dawkins
Peter Connolly
Rajeev Dayal
Roger Walcott
Sora Park
Stacy Esposito
Susan Nappo

PSO Representative Attending Meeting:
Welcome new centers:
East Tremont Vascular Health Care, PLLC
Our Lady of Lourdes Memorial

Regional Data Review
Jeffrey Indes, MD, Regional Medical Leader, VSGGNY

Learning Objectives:
• Use the VQI regional reports to establish quality improvement goals for the vascular patients (outcomes) and for their center (process).
• Interpret and compare each centers’ VQI results to regional and national benchmarked data.
• 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.
• 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.

National VQI Update
Betsy Wymer, DNP, RN, RN-BC, Quality Director, PSO

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• 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.

Venous Quality Council:
Glenn Jacobowitz, MD

Spring 2022 VQC Update
General Discussion and Questions:

What do you think increased in the VSGGNY Regional CEA Stroke/Death ASYMP patient population?

Why do you think we had an increase in the VSGGNY Regional CEA LOS ASYMP/SYMP LOS > 1 day?

Why do you think we had an increase in the VSGGNY Regional EVAR LOS > 2 days?

Why do you think we had an increase in the VSGGNY Regional in hospital death rates after OAAA?

What is the primary barrier to pre-procedural assessment of ABI/Toe Pressure?

Action Items (including QI projects):

- **CEA Stroke/Death ASYMP**
  - Center Care Process
  - Medication Management
  - Various Parameters: Patients’ comorbidities, anatomy, number of TCAR done in the region. Temporal relationships with outcomes before and after TCAR. type of anesthesia and neuro monitoring etc...
- **CEA Stroke/Death SYMP**
  - Center D/C Planning
  - Various Parameters: Patients’ comorbidities, anatomy, number of TCAR done in the region. Temporal relationships with outcomes before and after TCAR. type of anesthesia and neuro monitoring etc...
- **EVAR LOS**
  - Where were patients discharged
  - Comorbidities
  - BP control post op, are patients taking BP meds day of surgery?
- **TEVAR Sac Diameter**
  - Likely abstractor difficulty in locating this data is there a way to mitigate this?
- **OAAA v SVS Guidelines**
  - Center volume (Dr. Mureebe to provide guidance)
  - Suggest to ask Dr. Mureebe to present Fall 2022
  - Are we doing more open complex cases? Are we seeing this trend in lower volume centers? These have been looked at and published but not from an outcomes first region specific platform. again, a great paper
- **ABI/Toe Pressures**
  - Data Abstraction
  - Look at SVS guidelines and consider/ask ourselves if this is a specialty driven decrease

**Next Meeting:** Fall 2022 Hybrid in Conjunction with VEITH Nov 15-19