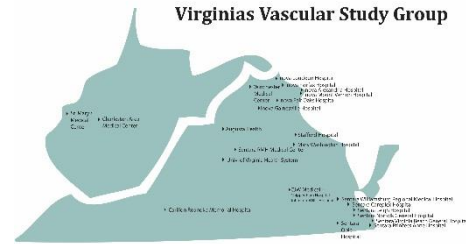


Vascular Quality Initiative®



Virginia's Vascular Study Group

Sunday 23 October 2016

10AM – 12:00PM

Greenbrier Resort



Vascular Quality Initiative®

AGENDA

- 10 AM Welcome and Introductions Dr. Robinson, VVSG Medical Director
- 10:10 AM National VQI Update Nadine Caputo, SVS PSO
- 10:25 AM Regional Reports Dr. Robinson, VVSG Medical Director
- 11:00 AM Research Advisory Council Dr. Albeir Mousa, VVSG RAC
- 11:10 AM Regional Concerns & Issues VVSG discussion, lead by Dr. Robinson

Vascular Quality Initiative®

VVSG Member Institutions

University of Virginia Health System

Charleston Area Medical Center

Inova

- Alexandria Hospital
- Fair Oaks Hospital
- Fairfax Hospital
- Gainesville Vein/Vascular
- Loudoun Hospital
- Mount Vernon Hospital

Sentara Health

- Careplex Hospital
- Leigh Hospital
- Norfolk General Hospital
- NoVA Medical
- Obici Hospital

- Princess Anne Hospital
- RMH Medical Center
- VA Beach General Hospital
- Williamsburg Regional Medical
- Winchester Medical Center
- Augusta Health
- Camden Clark Medical Center
- Carilion Roanoke Medical Center
- Chippenham Hospital
- Johnston-Willis Hospital
- Lynchburg General Hospital
- Mary Washington Hospital
- St. Mary's Medical Center (WV)
- VCU Health System Authority
- West Virginia University Hospital

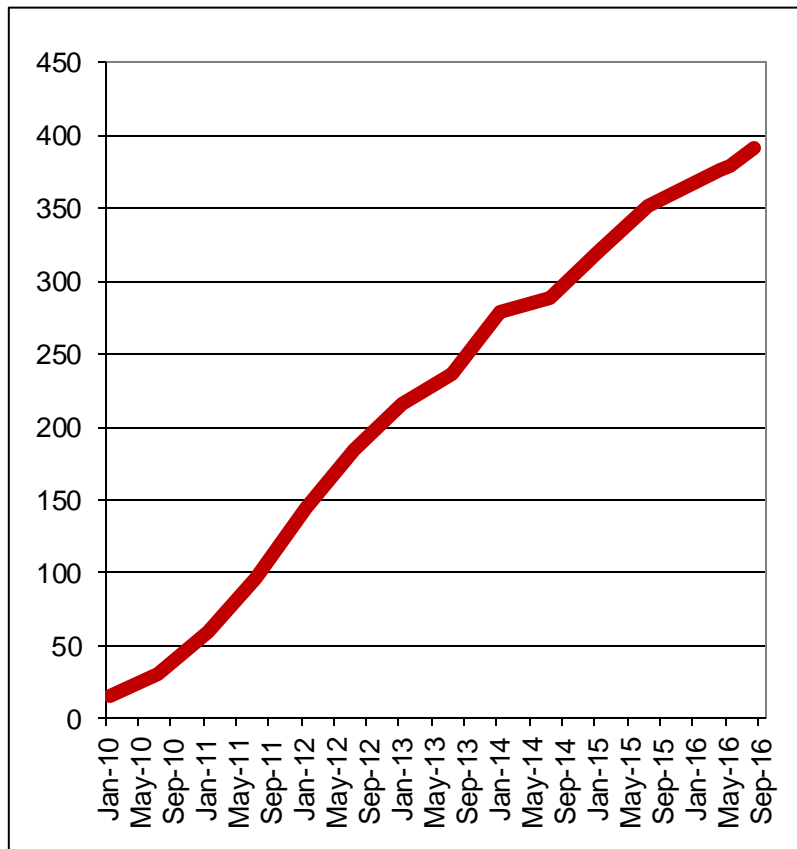


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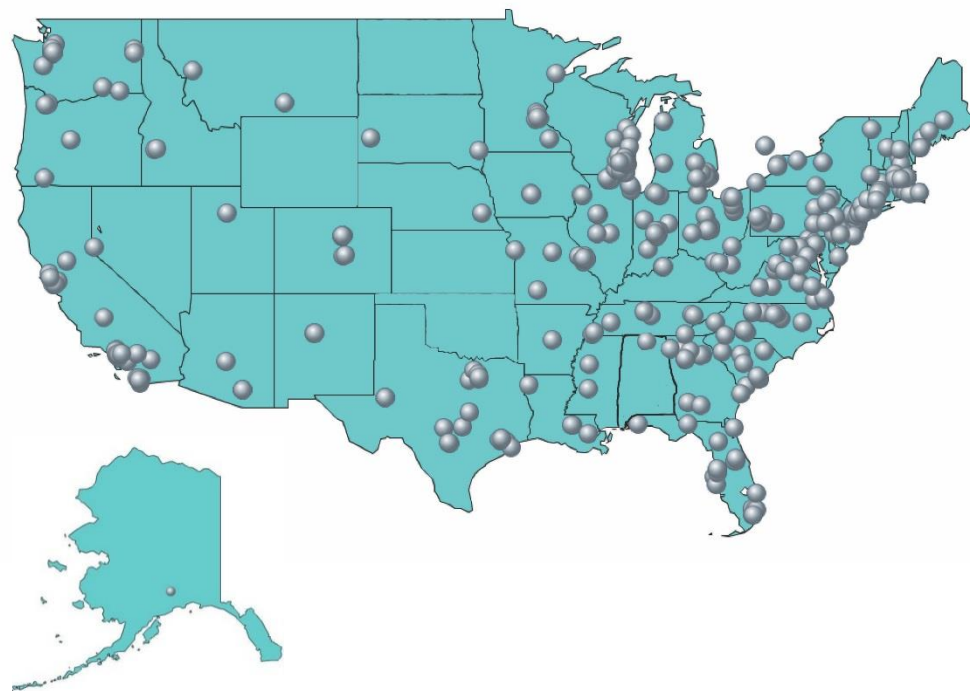
National VQI Update:
Nadine Caputo, SVS PSO

Vascular Quality Initiative[®]

Participating Center Growth



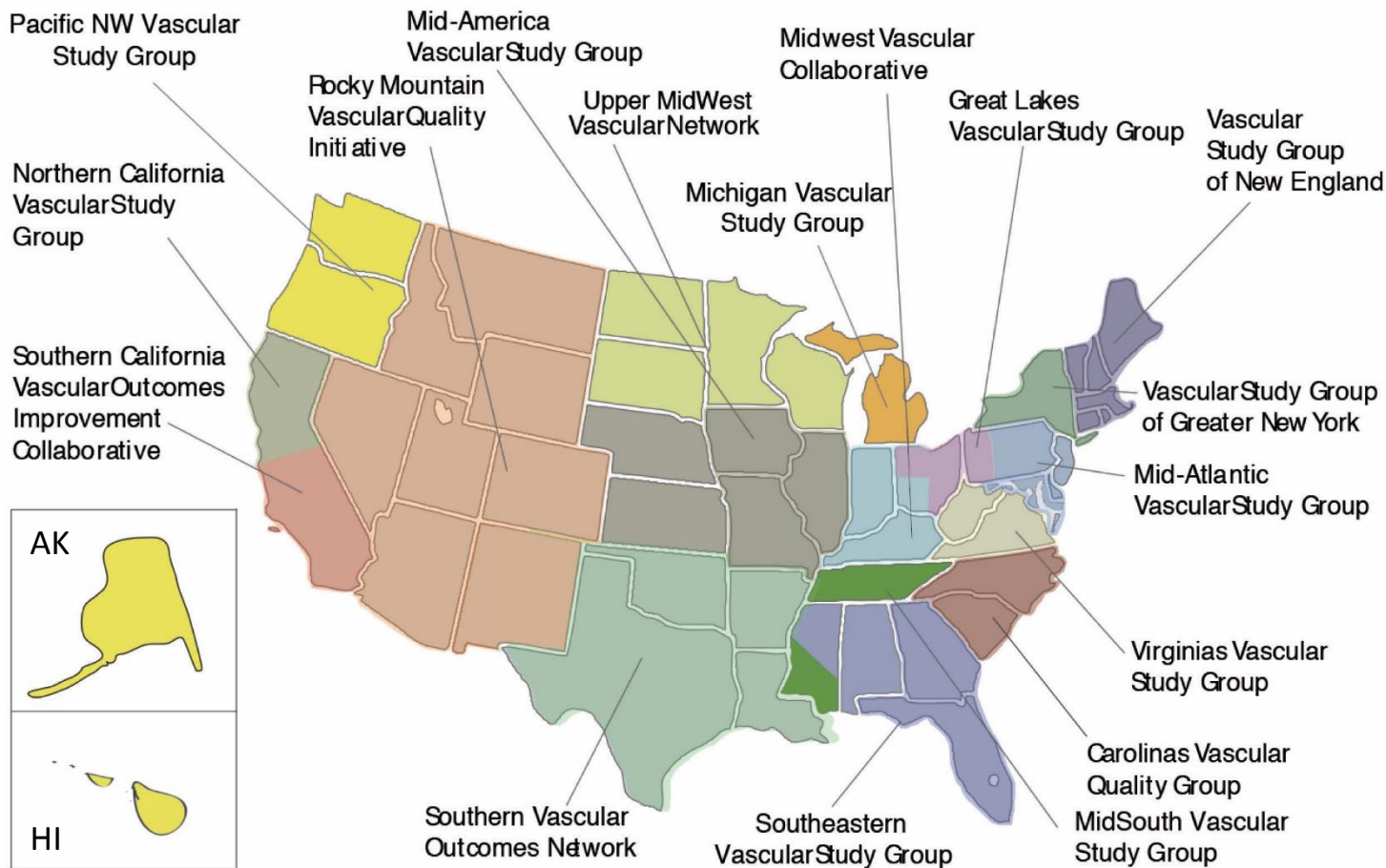
VQI Participating Centers



395 Centers, 46 States + Ontario

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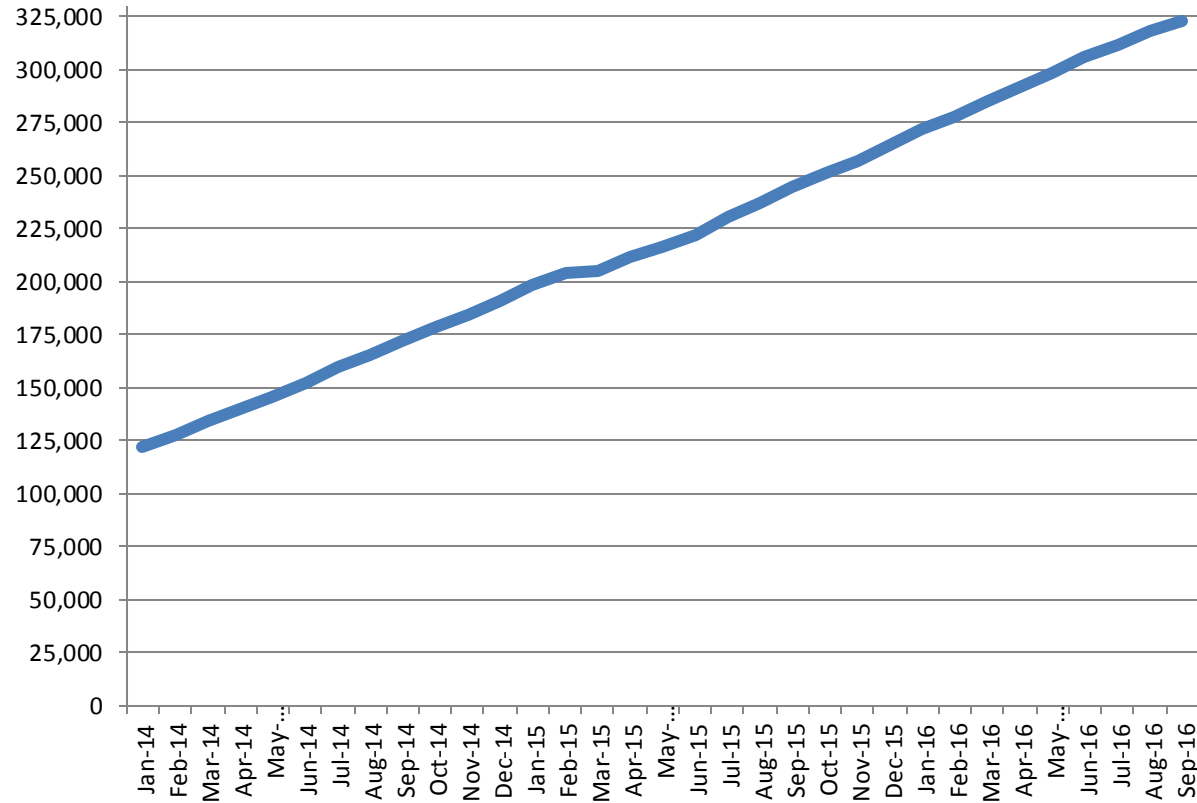
17 Regional Quality Groups



Vascular Quality Initiative®

Total Procedures Captured (as of 10/1/2016)	322,972
Peripheral Vascular Intervention	101,165
Carotid Endarterectomy	73,549
Infra-Inguinal Bypass	33,098
Endovascular AAA Repair	29,270
Hemodialysis Access	27,416
Carotid Artery Stent	12,476
Supra-Inguinal Bypass	11,217
Open AAA Repair	8,724
Thoracic and Complex EVAR	7,129
Varicose Vein	6,703
IVC Filter	6,196
Lower Extremity Amputations	6,029

VQI Total Procedure Volume



Total Procedure Volume tab reflects net procedures added to the registry for the month



Vascular Quality Initiative®

VQI 1st Annual Meeting

- Post-meeting survey feedback
 - Longer, more interactive sessions
 - Networking time needed
 - Very informative and useful meeting
- Suggestions for next year?
 - 1 ½ days with full day for data managers
 - Topic requests?

<http://www.vascularqualityinitiative.org/successful-inaugural-vqi-annual-meeting-svs-pso-now-planning-next-year/>

Vascular Quality Initiative®

VQI Participation Award

Three components

1. No of procedure modules site participates in
2. LTFU = $\geq 80\%$
3. Meeting participation

Vascular Quality Initiative®

Participation Award

- Awards announced early 2017
- **One change:** Remote attendance awarded for Spring 2016 but not the Fall 2016 or going forward

Meeting-Participation Score*

- No MD from site attends = 0 points
- 1 MD from site attends = 1 point
- 2 MDs attend (or 1 MD if site has only 2 MDs) = 2 points
- 3 MDs attend (or all MDs if site has <3 MDs) = 3 points

*Additional health professional staff attendance (Data Manager, Admin, NP, PA, Fellow, etc.,) = one additional point if 1 MD attended

Vascular Quality Initiative®

PVI registry update

- Released September 23, 2016

Vascular Quality Initiative®

Medicine Registry Update

Scope

- Medical management of:
 - Lower extremity PAD
 - Carotid stenosis
 - AAA
- New OP consults that require follow up
- One year F/U required, longer possible

Webinar for final comments January 2017 with tentative release 2Q2017

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Inclusion Criteria:

This registry only includes New Outpatient Consults who are being treated medically for:

- Peripheral arterial disease due to atherosclerosis
- Atherosclerotic carotid artery occlusive disease
- Abdominal aortic aneurysm

Exclusion Criteria:

- Evaluation/diagnosis of pseudo or neurogenic claudication, peripheral arterial disease due to trauma, popliteal entrapment, medial adventitious cystic disease, chronic compartment syndrome
- Carotid disease due to dissection, infection, aneurysm, tumor, isolated common carotid lesion not thought to involve the bifurcation, disease of the carotid bifurcation due solely to vasculitis, and Moyamoya disease, and fibromuscular dysplasia
- Isolated aortic dissection without aneurysm
- Thoracic, thoraco-abdominal, and mycotic aneurysms

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Webinar Schedule 2016

- August: PVI registry changes
- September: PVI registry changes
- October: QI Guide Implementation series
 - Tuesday, Oct. 25 at 7:00 PM EDT *Leading Change to Build and Sustain QI*, Ted James, MD, MS, FACS
<http://www.vascularqualityinitiative.org/vascular-quality-initiative-launches-quality-improvement-webinar-series>
- November: TEVAR/Complex EVAR vs. EVAR
- December: QI Guide Implementation series

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SVS PSO QI Guide: Volunteer to complete charter and follow guide?

Access QI Guide on M2S pathways website using their member IDs under the Resource section

Identify data manager and physician leader to initiate QI process.

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Regional Reports:

William P. Robinson, MD

Note: In all reports, regional data are not shown for regions with <3 centers participating in the applicable registry. In "by Center" bar charts, unless noted, data are not shown for centers with <10 cases.

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Total Procedure Volume, All Years

(2003-May 2016)

	Your region	VQI
	Total procedures	Total procedures
CAS	986	10850
CEA	4781	65763
EVAR	1796	26031
HEMO	5037	23762
INFRA	1924	29387
OAAA	277	7967
PVI	8517	88151
SUPRA	658	9843
TEVAR	507	5777
IVCF	638	2088
Varicose Veins	273	4229
LEAMP	1186	5166
Overall	26580	279014

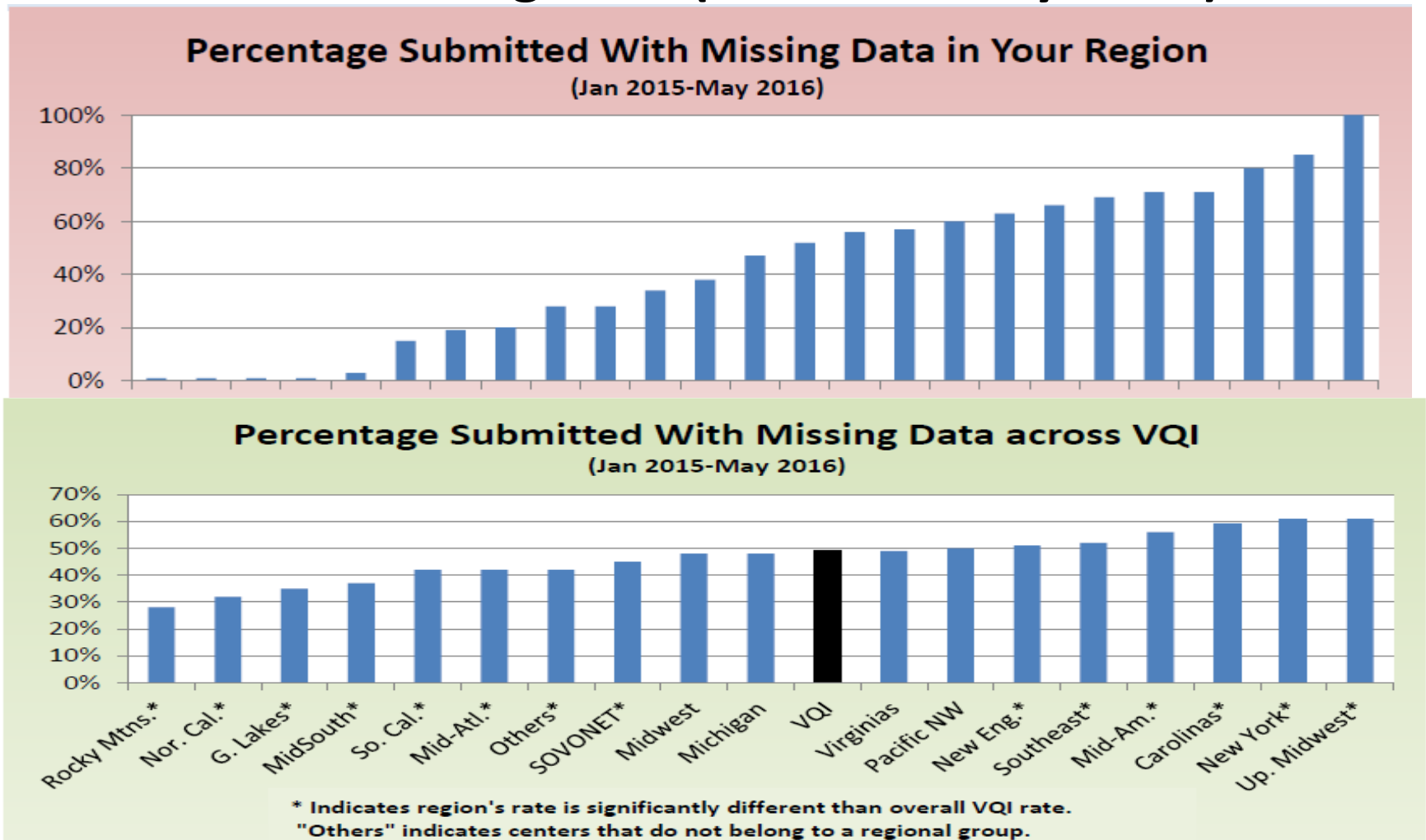
Vascular Quality Initiative®

Percentage of Procedures Submitted With Missing Data (Jan 2015-May 2016)

	Your region	VQI
	Total procedures (% missing data)	Total procedures (% missing data)
CAS	256 (74%)	3777 (51%)
CEA	1625 (28%)	19909 (33%)
EVAR	662 (77%)	7773 (60%)
HEMO	1897 (37%)	9198 (26%)
INFRA	739 (81%)	8048 (82%)
OAAA	100 (81%)	1825 (29%)
PVI	3003 (51%)	30123 (56%)
SUPRA	202 (77%)	2755 (80%)
TEVAR	169 (46%)	2337 (28%)
IVCF	365 (12%)	1133 (23%)
Varicose Veins	273 (0%)	4228 (29%)
LEAMP	656 (76%)	2684 (73%)
2015 overall	9947 (49%)	93790 (49%)
2014 overall	7830 (43%)	67064 (48%)

Vascular Quality Initiative®

Percentage of Procedures Submitted With Missing Data (Jan 2015-May 2016)



Vascular Quality Initiative®

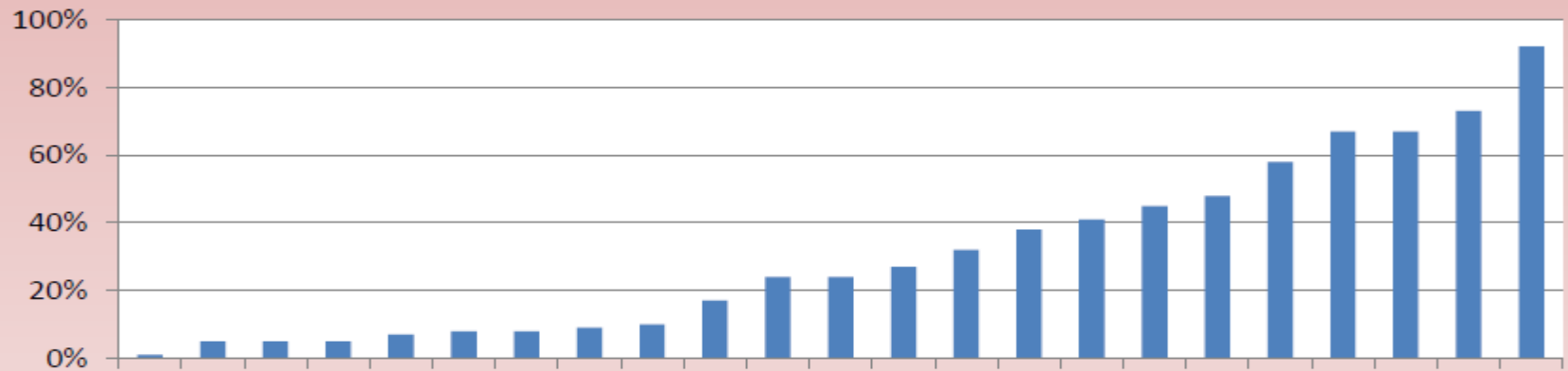
LTFU Reports

	Your region	VQI
	Follow-up rate (N)	Follow-up rate (N)
CAS	20% (229)	54% (2331)
CEA	41% (1223)	56% (14511)
EVAR	37% (427)	56% (5757)
HEMO	49% (1392)	55% (6584)
INFRA	36% (449)	60% (5865)
OAAA	36% (56)	62% (1414)
PVI	31% (2559)	53% (21120)
SUPRA	41% (153)	61% (2096)
TEVAR	40% (97)	54% (1456)
IVCF*	24% (211)	44% (686)
2014 overall	37% (6796)	55% (61820)
2013 overall	81% (4902)	68% (45345)

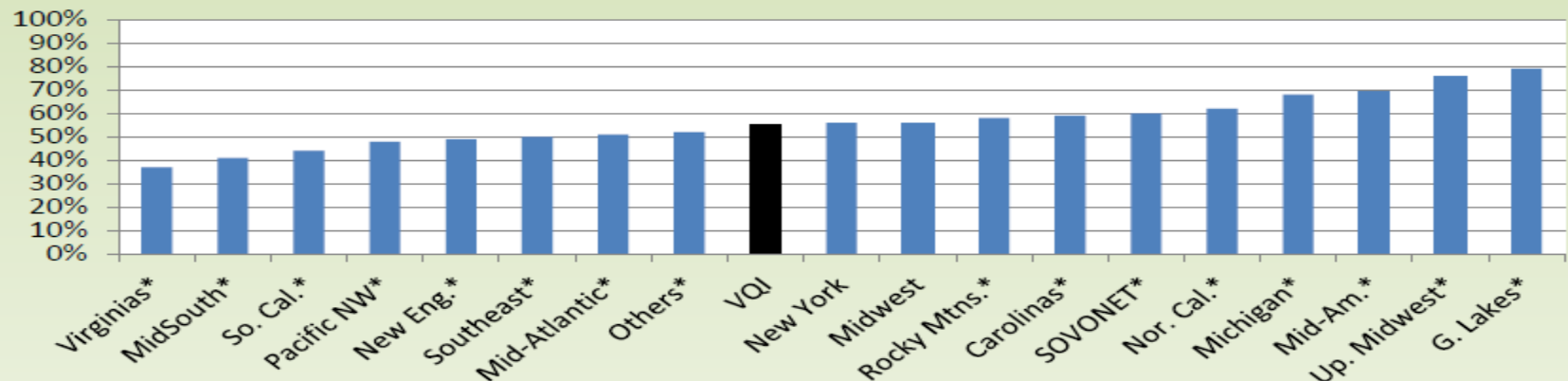
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LTFU Reports

LTFU by Center in Your Region (2014)



LTFU by Region across VQI (2014)



* Indicates region's rate is significantly different than overall VQI rate.

"Others" indicates centers that do not belong to a regional group.

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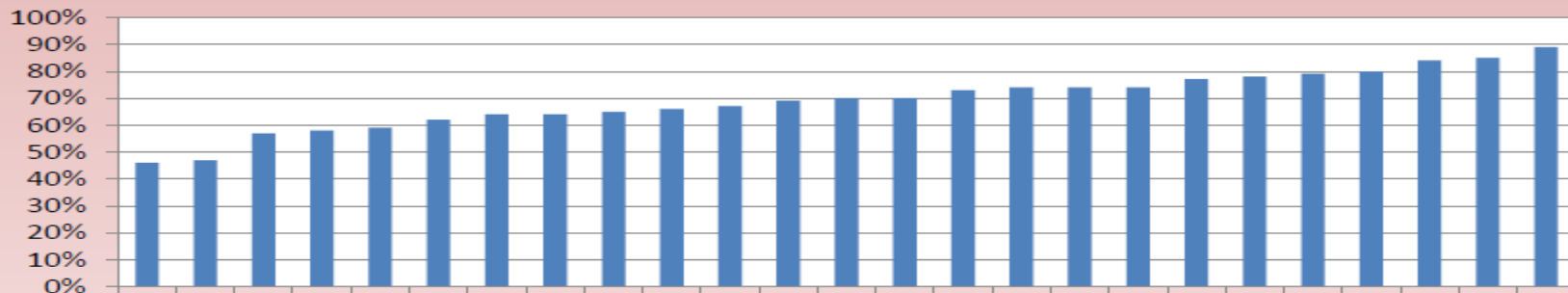
Discharge Medications Antiplatelet and Statin

(Jan 2015-May 2016)

Excludes missing, not treated for medical reason and non-compliant

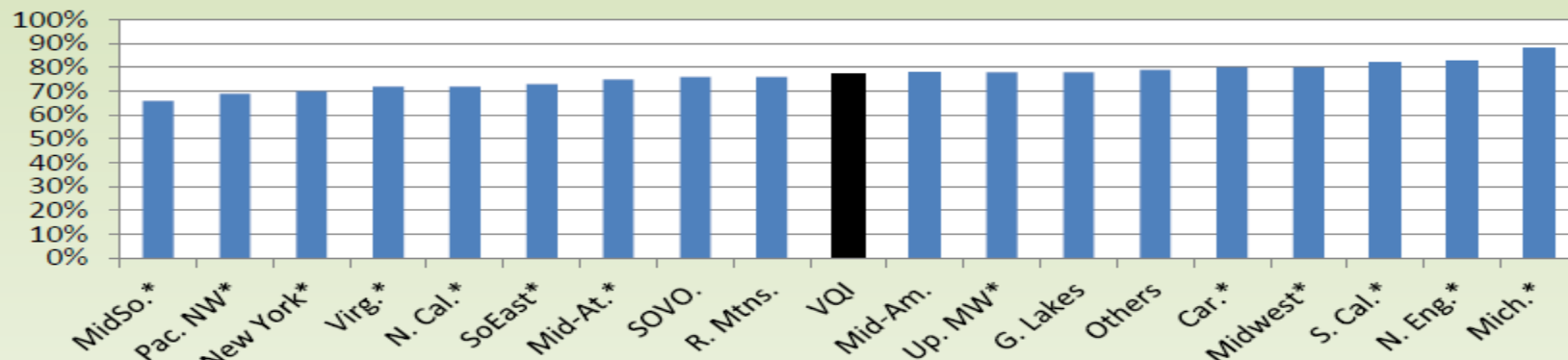
A+S Rate by Center in Your Region

(Jan 2015-May 2016)



A+S Rate by Region across VQI

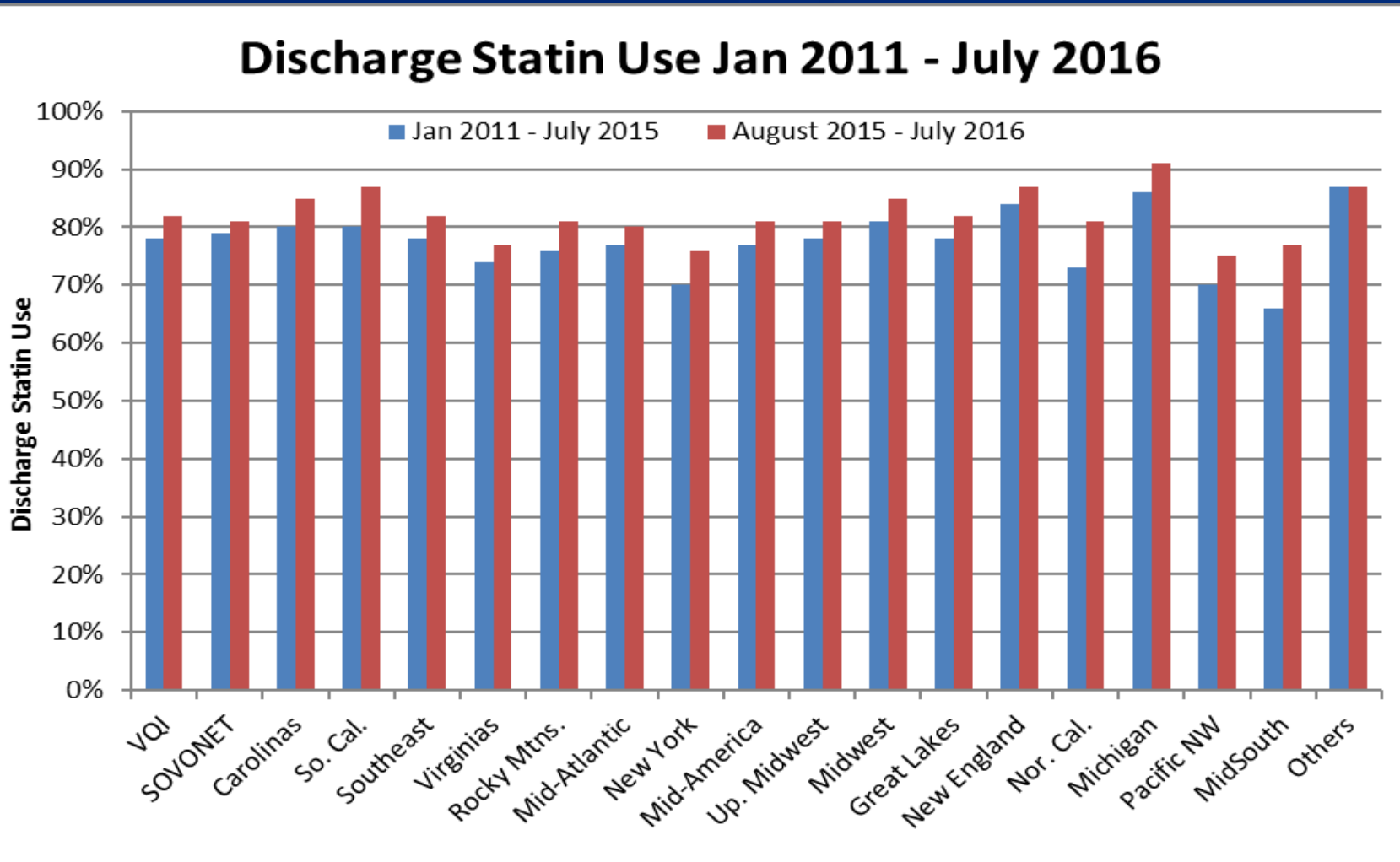
(Jan 2015-May 2016)



* Indicates region's rate is significantly different than overall VQI rate

"Others" indicates centers that do not belong to a regional group

Regional Participation Is Important

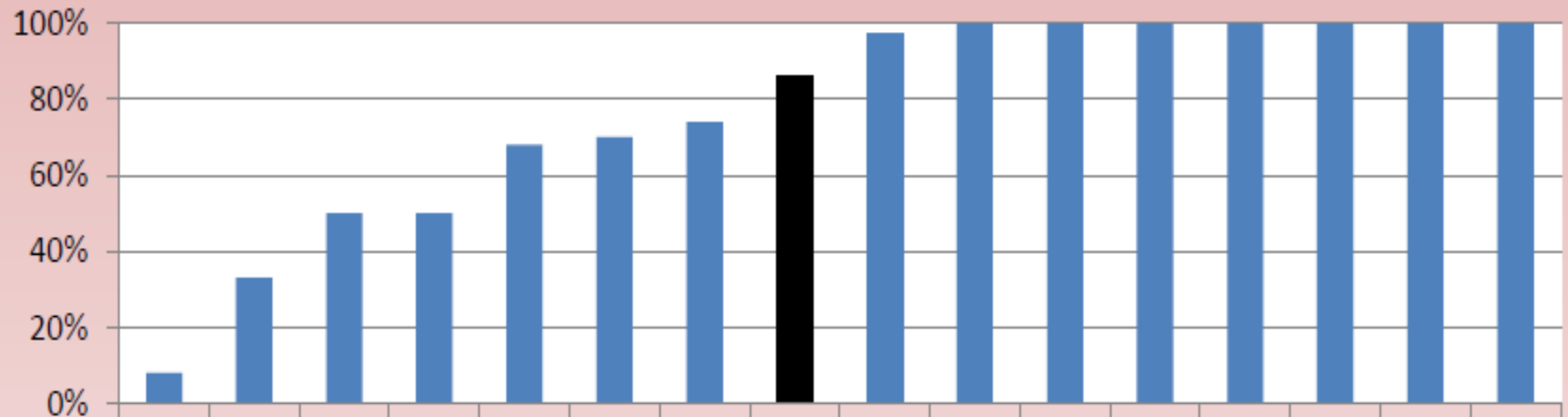


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Varicose Veins: Percentage of Procedures with Complete Patient-Reported Outcome Measures Recorded at Follow Up (Jan 2015-May 2016)

procedures; includes only patients with any follow-up visit recorded. All regional data omitted because most regions have <3 centers. Patient-reported outcome measures (PROMs) include heaviness, achiness, swelling, throbbing, itching, appearance and impact on work in side of operation.

PROMs by Center across VQI (2015)



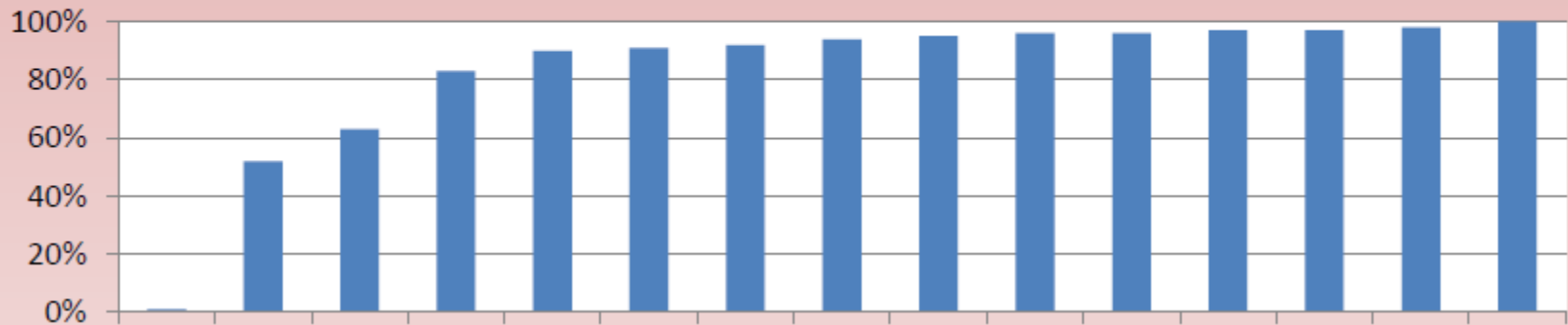
Vascular Quality Initiative®

Percentage of Infra inguinal Bypass Procedures with Chlorhexidine or Chlorhexidine + Alcohol Skin Prep

(Jan 2015-May 2016)

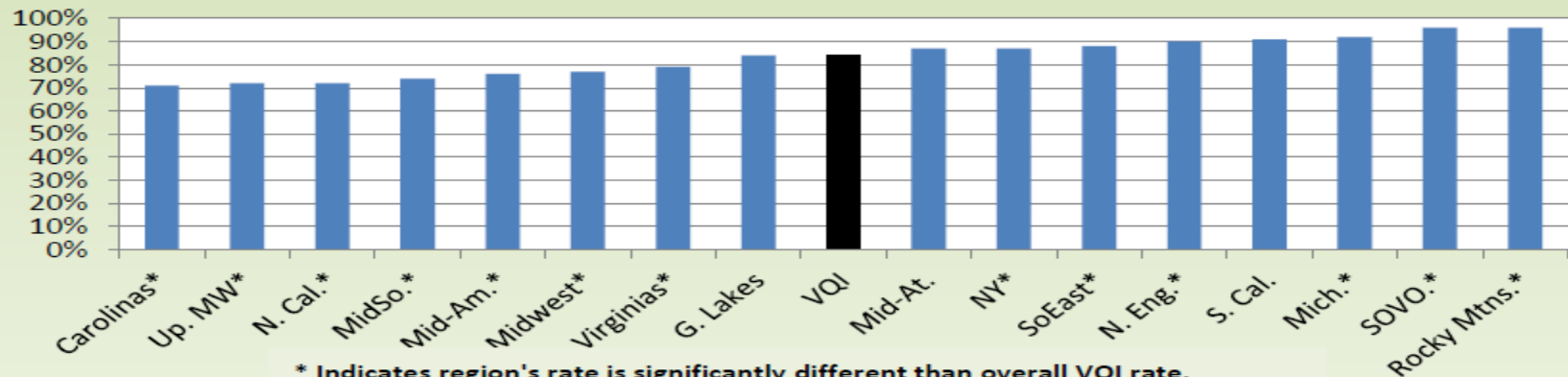
Chlorhexidine Rate by Center in Your Region

(Jan 2015-May 2016)



Chlorhexidine Rate by Region across VQI

(Jan 2015-May 2016)

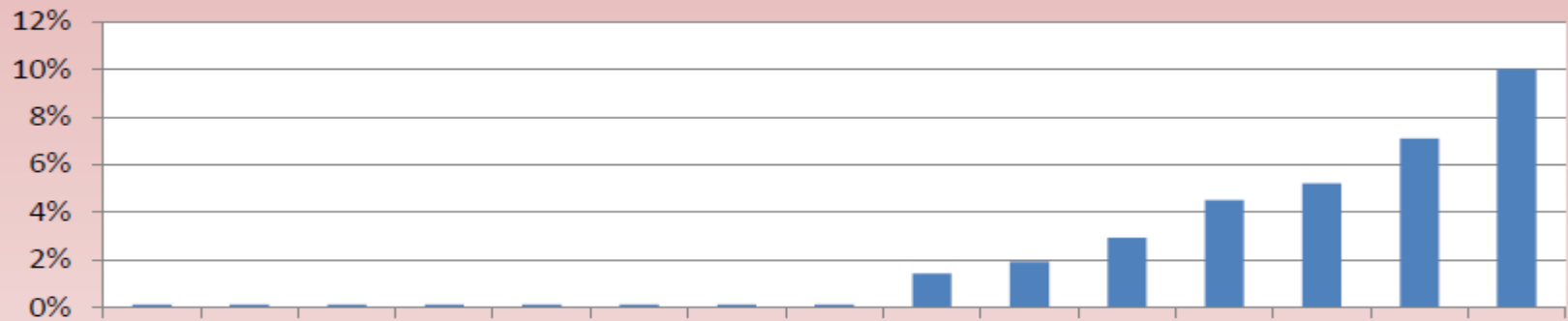


* Indicates region's rate is significantly different than overall VQI rate.
 "Others" indicates centers that do not belong to a regional group.

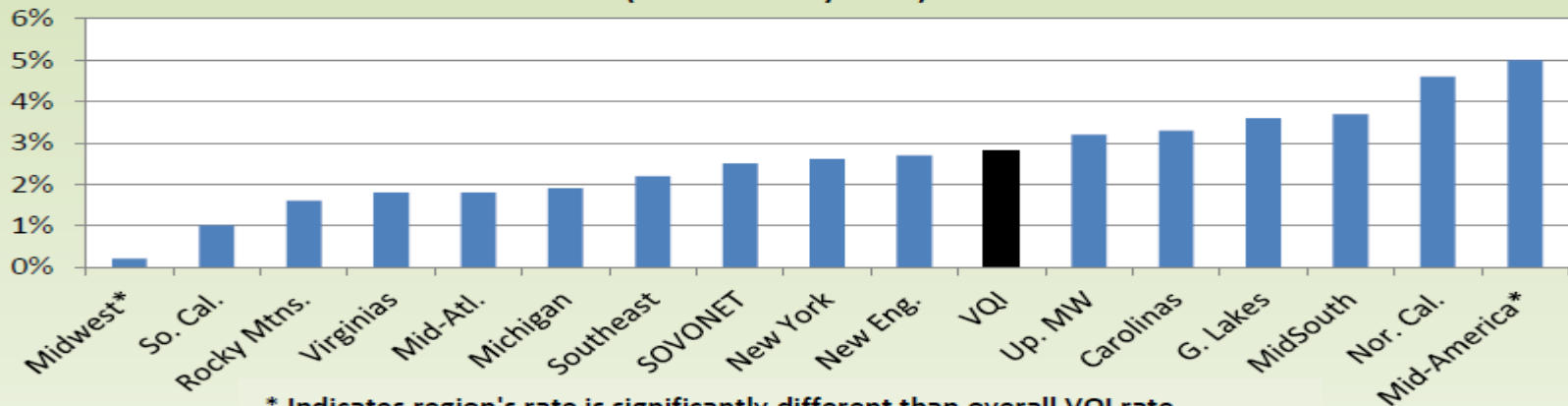
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Infrainguinal Bypass: Percentage of Procedures with In-Hospital Surgical Site Infection (Jan 2015-May 2016)

In-Hospital Infection Rate by Center in Your Region
(Jan 2015-May 2016)



In-Hospital Infection Rate by Region across VQI
(Jan 2015-May 2016)



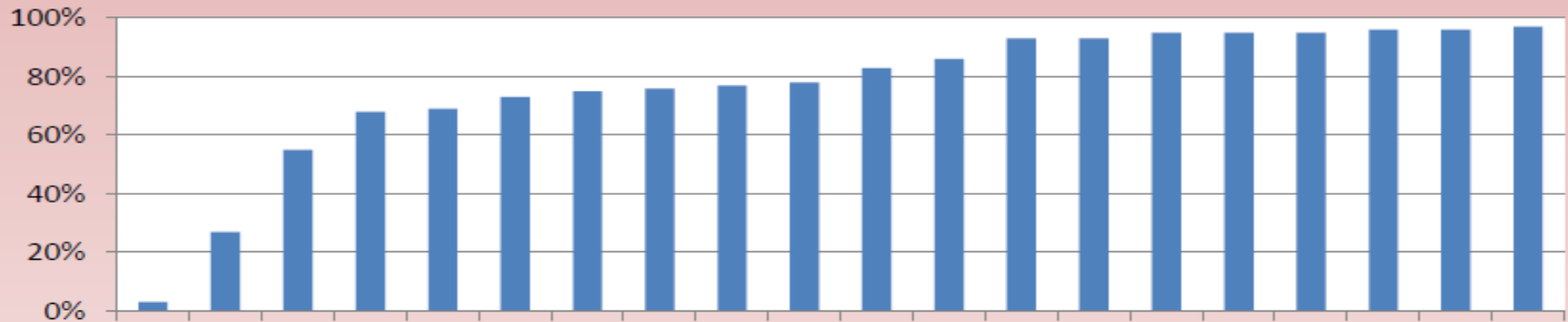
* Indicates region's rate is significantly different than overall VQI rate.
"Others" indicates centers that do not belong to a regional group.

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Percentage of Percutaneous Femoral PVI Procedures Using
Ultrasound Guidance (Jan 2015-May 2016)
Excludes cut-down

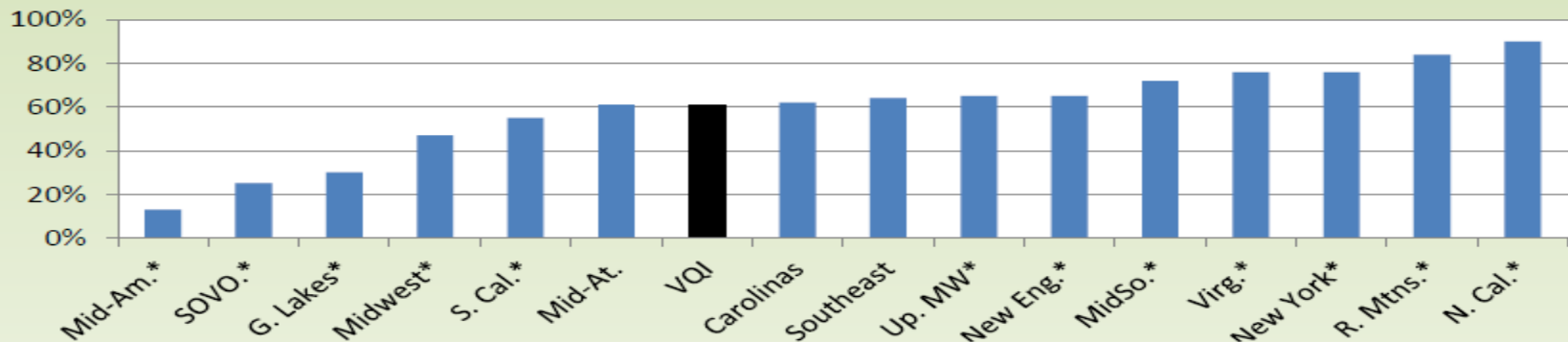
Rate of US Guidance by Center in Your Region

(Jan 2015-May 2016)



Rate of US Guidance by Region across VQI

(Jan 2015-May 2016)



* Indicates region's rate is significantly different than overall VQI rate.

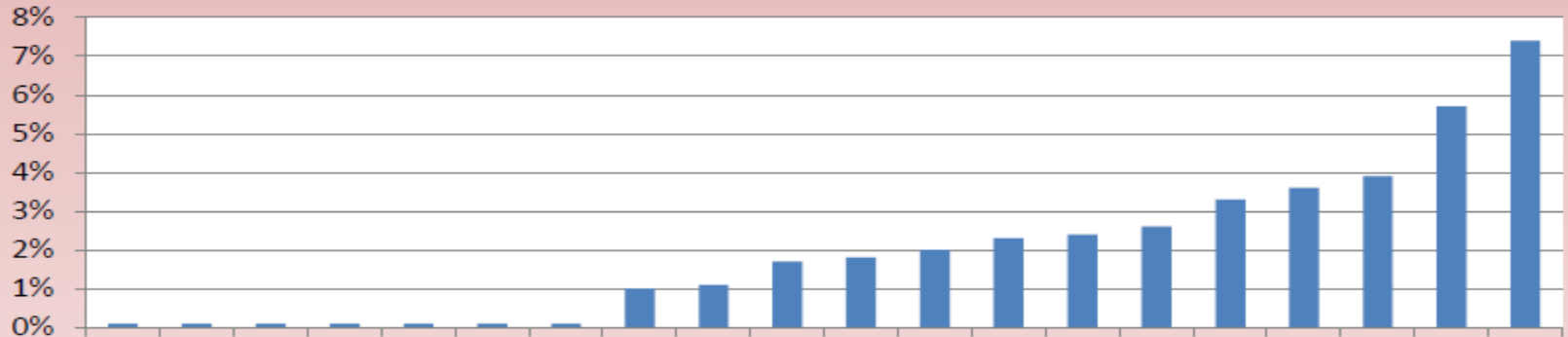
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Rate of Hematoma After PVI (Jan 2015-May 2016)

Excluding cut-down access guidance

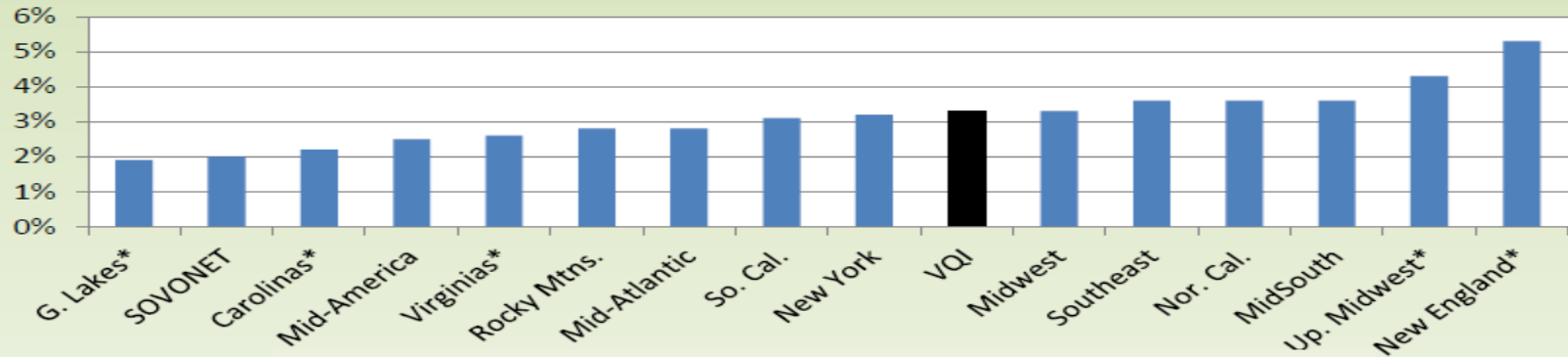
Rate of Any Hematoma by Center in Your Region

(Jan 2015-May 2016)



Rate of Any Hematoma by Region across VQI

(Jan 2015-May 2016)



* Indicates region's rate is significantly different than overall VQI rate.

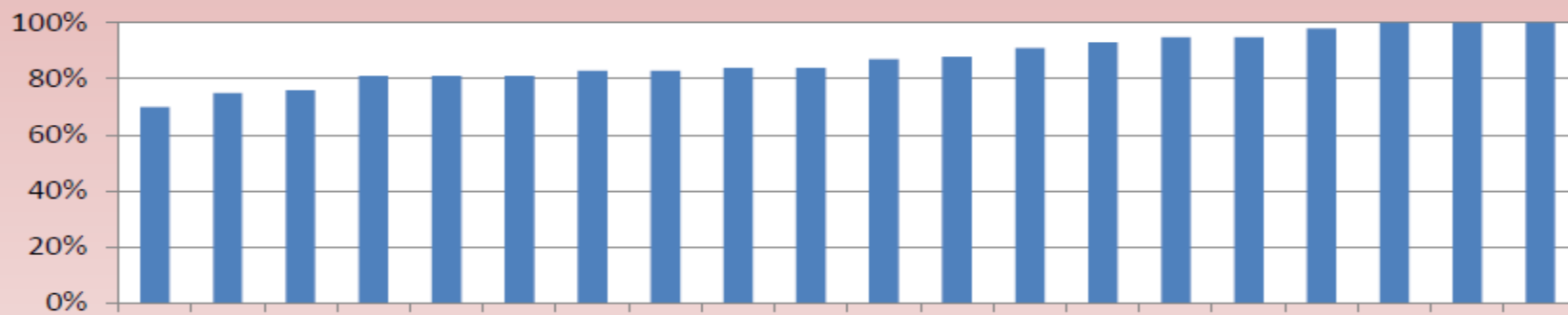
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PVI: Percent of Patients with ABI or TBI Assessed Before Procedure (Jan 2015-May 2016)

“ABI or TBI Assessed” indicates at least one measure was recorded for the side of the procedure, or on both sides for bilateral and aortic procedures

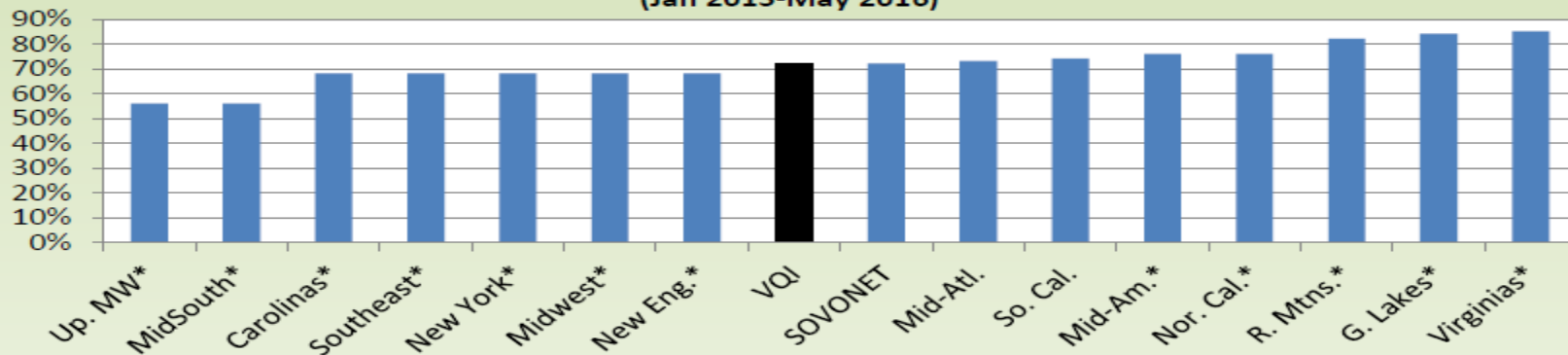
ABI/TBI Assessment by Center in Your Region

(Jan 2015-May 2016)



ABI/TBI Assessment by Region across VQI

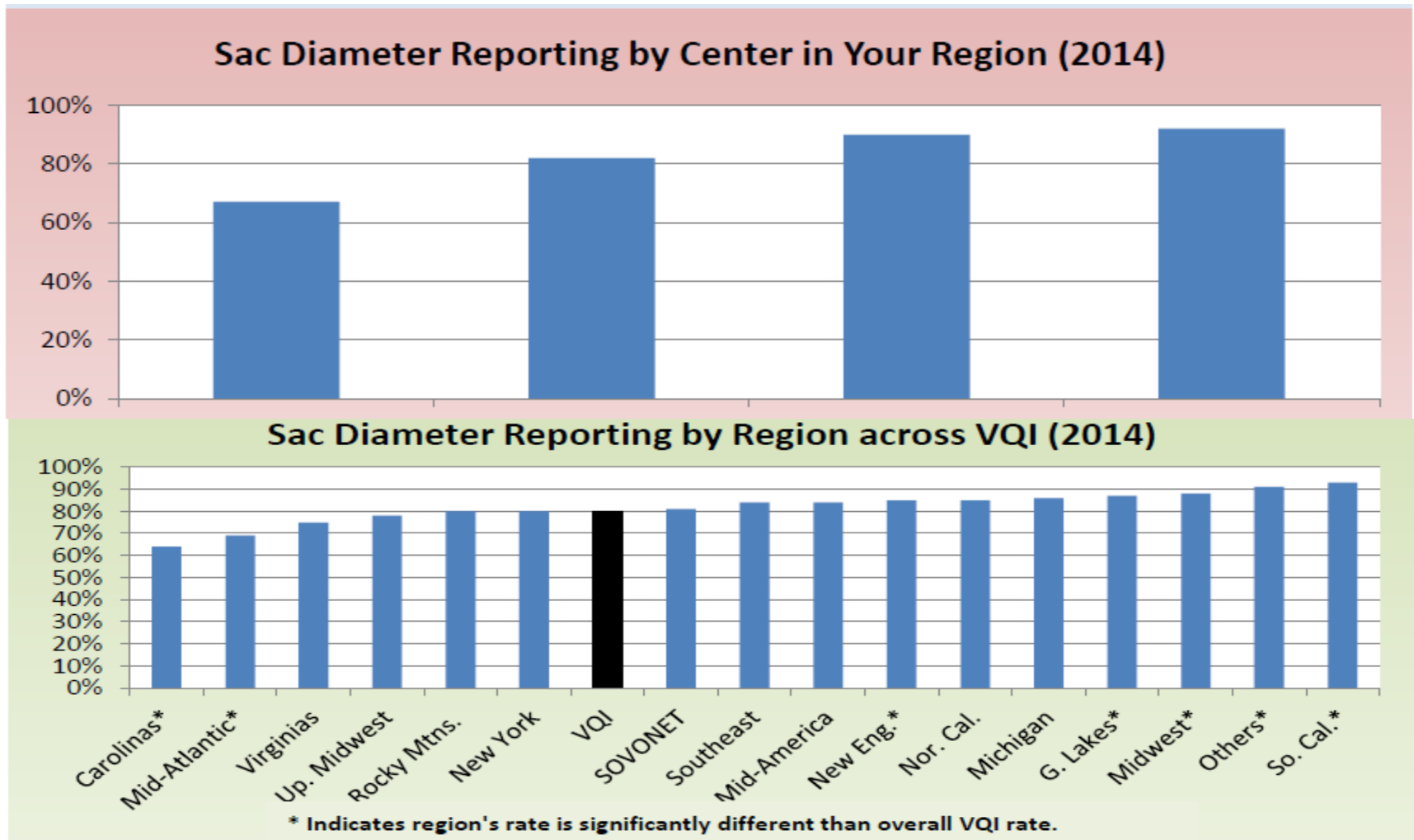
(Jan 2015-May 2016)



* Indicates region's rate is significantly different than overall VQI rate.

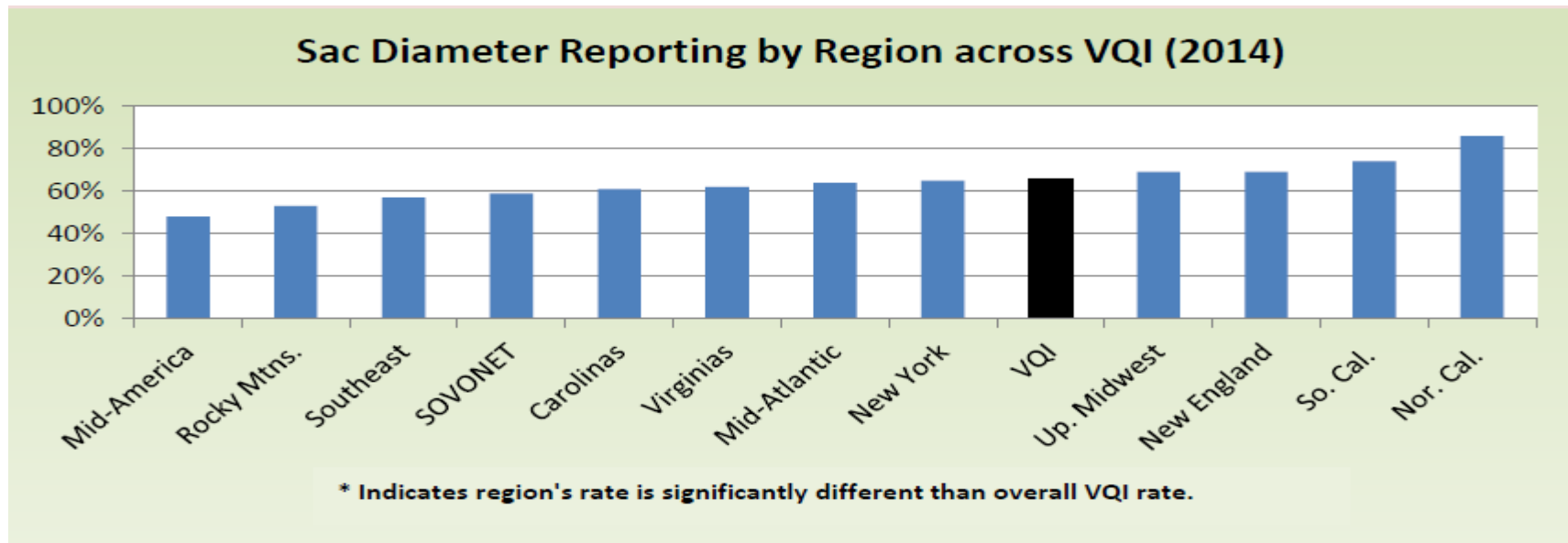
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EVAR: Rate of Sac Diameter Reporting at Long-Term Follow Up 2014, excluding patients without at least 9 month follow up



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TEVAR: Rate of Sac Diameter Reporting at Long-Term Follow Up
2014, excluding patients without at least 9 month follow up
(your region did not have at least 3 centers with 10 procedures)



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Carotid Endarterectomy

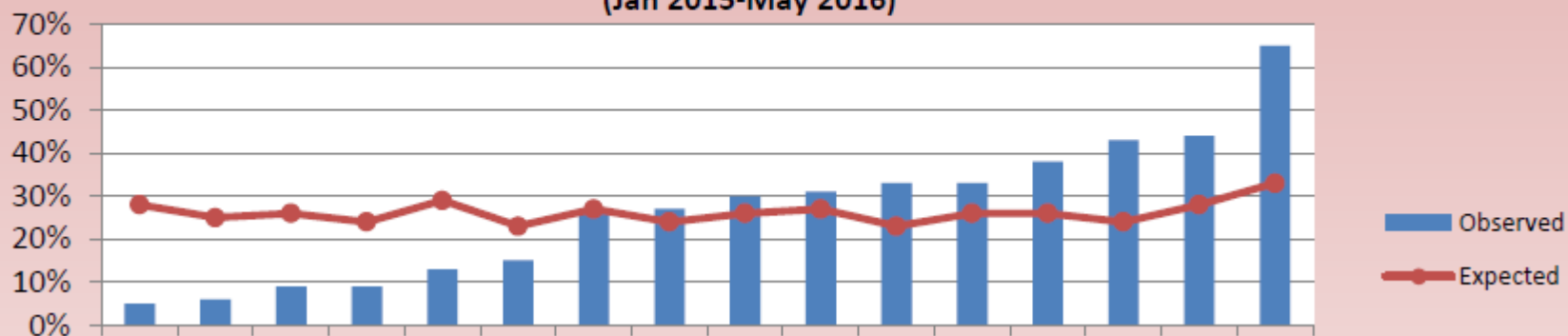
Percentage of Patients with Length of Stay > 1 Day

(Jan 2015-May 2016)

elective procedures, excluding prior ipsilateral CEA, concomitant CABG, proximal endovascular or other arterial operation, in hospital death with LOS ≤ 1 day,

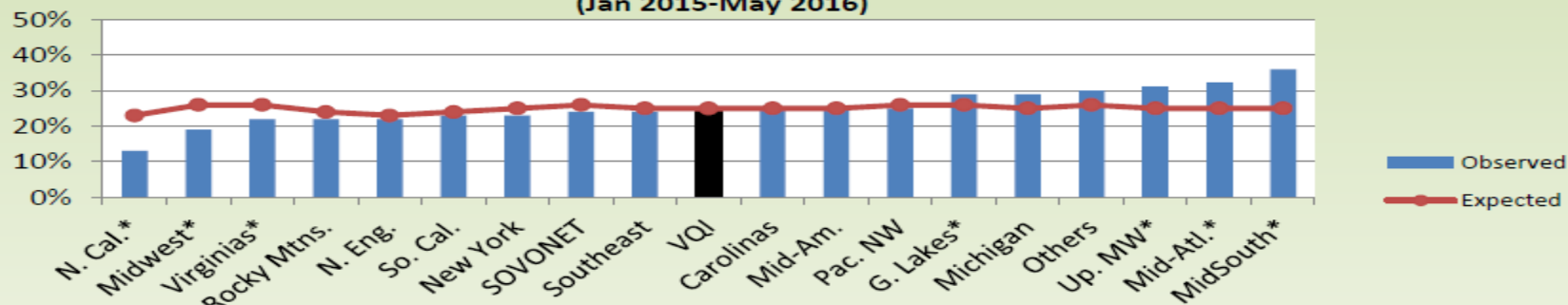
CEA LOS >1 Day by Center in Your Region

(Jan 2015-May 2016)



CEA LOS >1 Day by Region across VQI

(Jan 2015-May 2016)



* = Region's rate is significantly different than expected

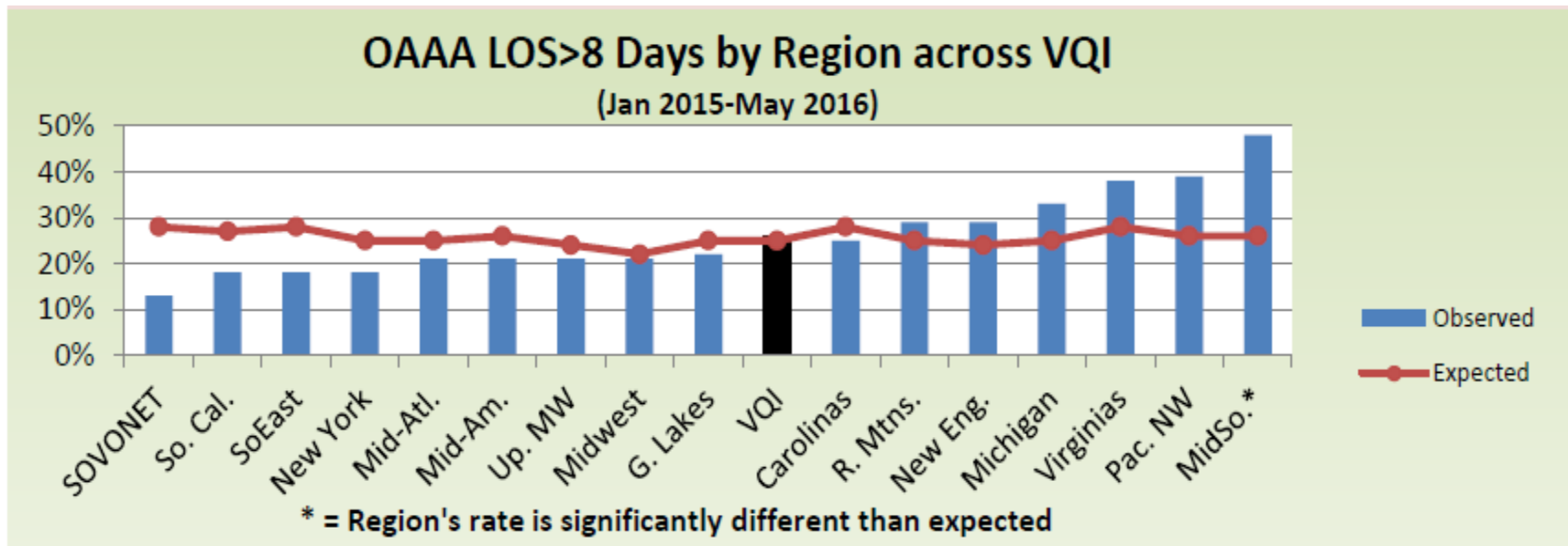
Vascular Quality Initiative[®]

Open AAA Repair: Percentage of Patients with Length of Stay \geq 8 Days

(Jan 2015-May 2016)

procedures, excluding ruptured aneurysms and in hospital deaths with LOS \leq 8 days, procedures not done on day of admission and weekend procedures

(your region did not have at least 3 centers with 10 procedures)



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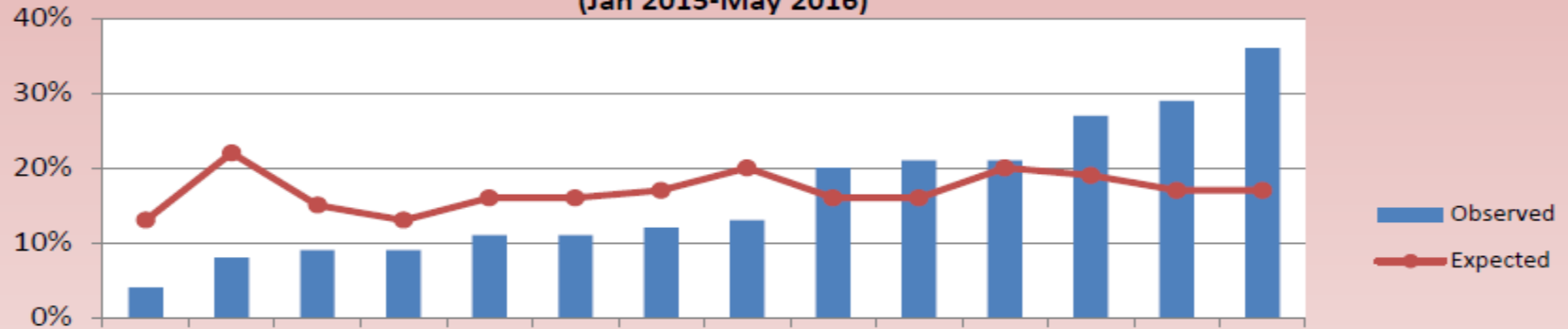
Endovascular AAA Repair: Percentage of Patients with Length of Stay > 2 Days

(Jan 2015-May 2016)

procedures, Excluding symptomatic, ruptured, prior aortic surgery, in hospital deaths with LOS

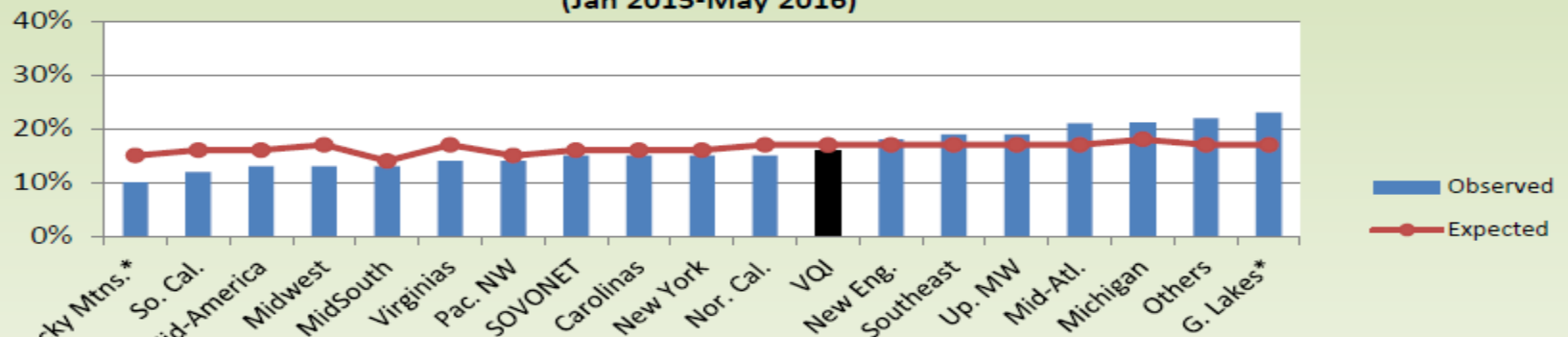
EVAR LOS>2 Days by Center in Your Region

(Jan 2015-May 2016)



EVAR LOS>2 Days by Region across VQI

(Jan 2015-May 2016)



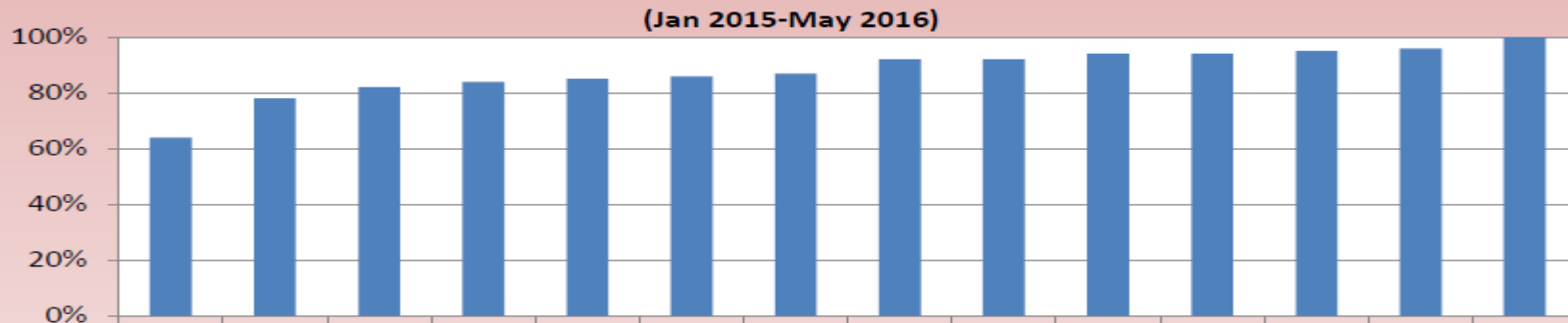
* = Region's rate is significantly different than expected

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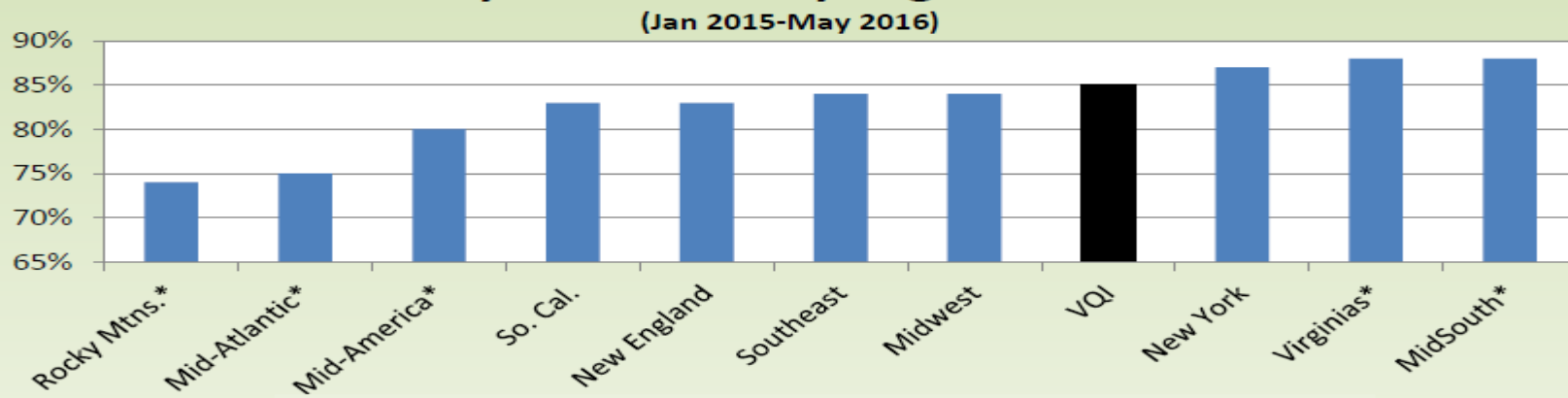
Hemodialysis Access: Percentage of Primary AVF vs. Graft (Jan 2015-May 2016)

procedures, excludes patients receiving AVF access who have received previous access in the forearm, upper arm or basilic vein on the same side

Primary AVF Access by Center in Your Region (Jan 2015-May 2016)



Primary AVF Access by Region across VQI (Jan 2015-May 2016)



* Indicates region's rate is significantly different than overall VQI rate.

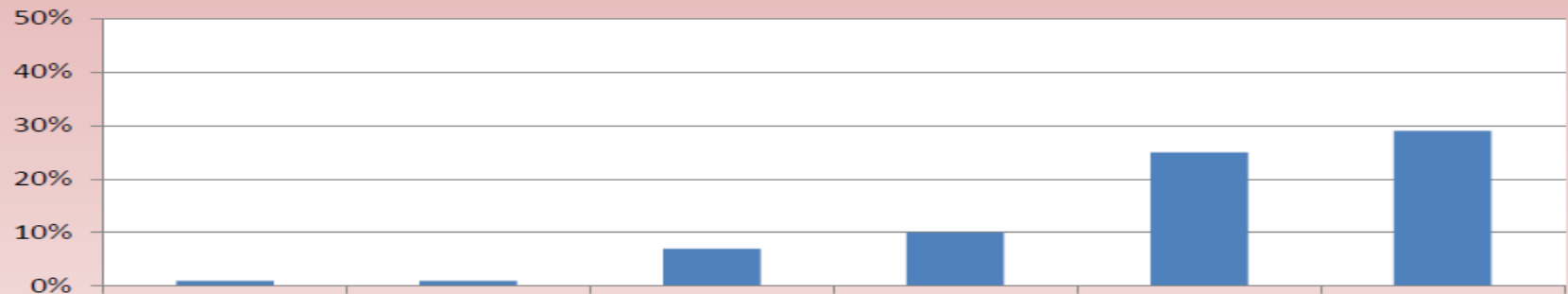
Vascular Quality Initiative[®]

IVC Filter: Percentage of Temporary Filters with Retrieval or Attempt at Retrieval

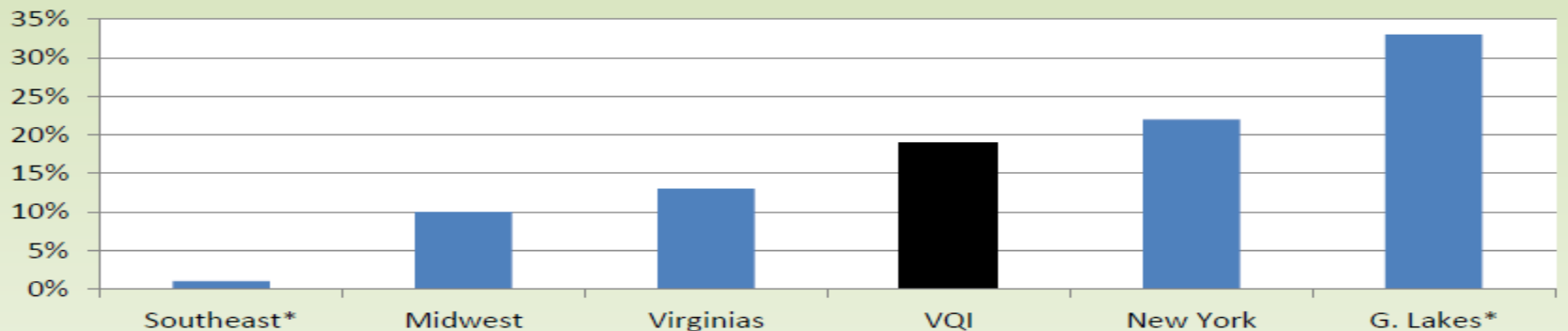
(Jan 2015-May 2016)

procedures, excluding patients who have died since discharge

IVCF Retrieval by Center in Your Region (2015)



IVCF Retrieval by Region across VQI (2015)

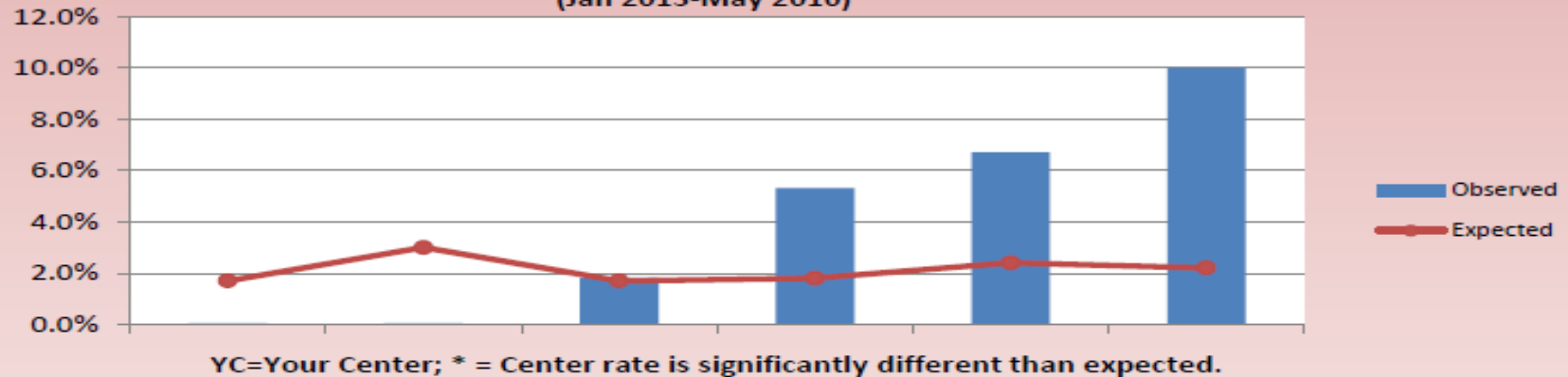


* Indicates region's rate is significantly different than overall VQI rate.

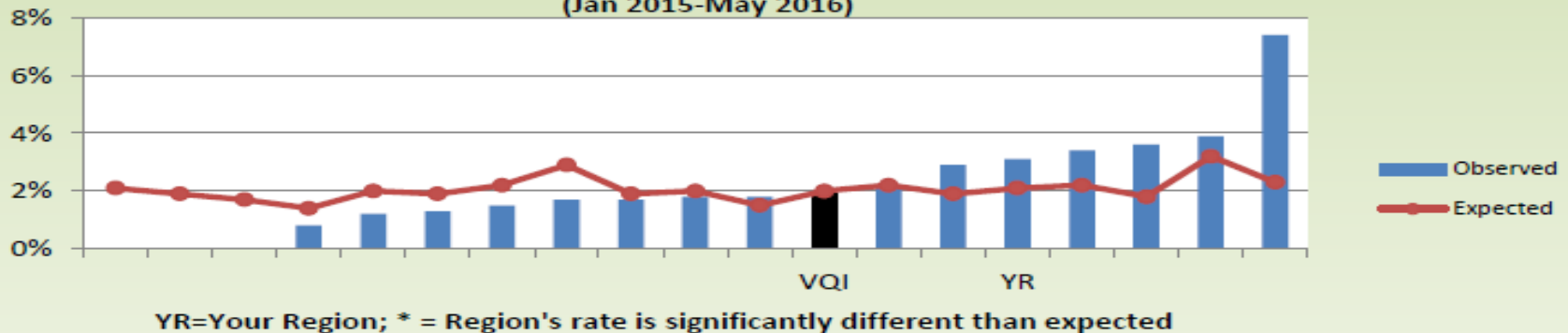
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Carotid Artery Stent: Stroke or Death in Hospital (Jan 2015-May 2016) procedures, elective, excluding prior ipsilateral CAS

CAS Stroke or Death by Center in Your Region
(Jan 2015-May 2016)



CAS Stroke or Death by Region across VQI
(Jan 2015-May 2016)



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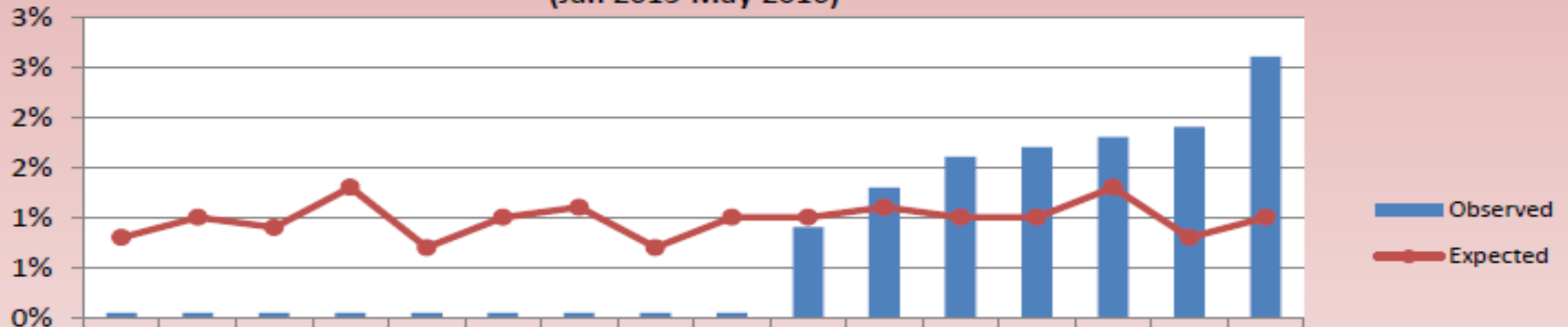
Carotid Endarterectomy: Stroke or Death in Hospital

(Jan 2015-May 2016)

procedures, elective, excluding prior ipsilateral CEA
and concomitant CABG

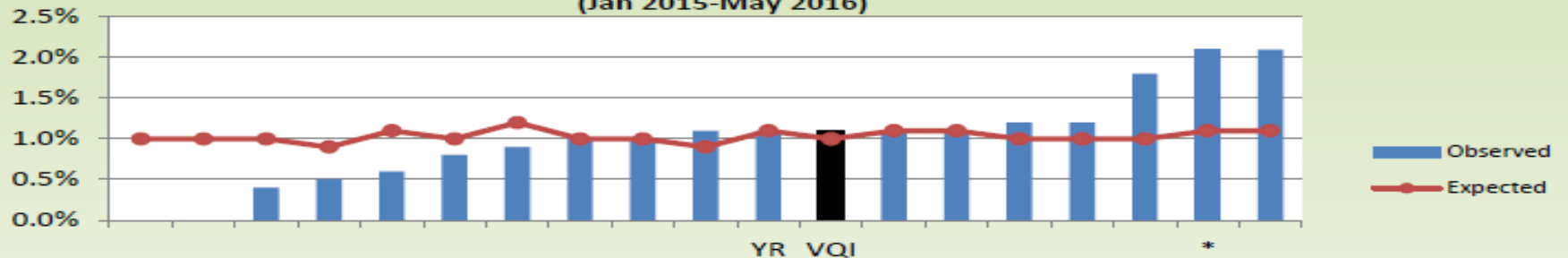
CEA Stroke or Death by Center in Your Region

(Jan 2015-May 2016)



CEA Stroke or Death by Region across VQI

(Jan 2015-May 2016)



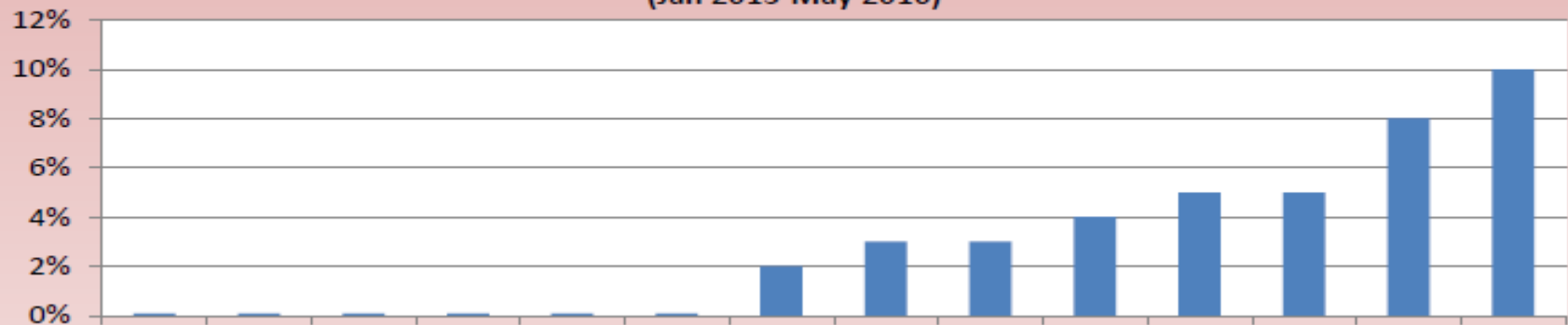
YR=Your Region; * = Region's rate is significantly different than expected

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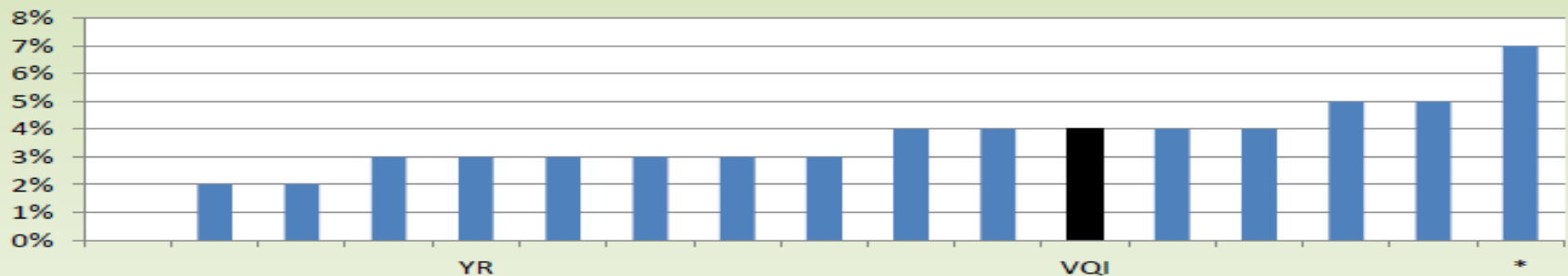
Infrainguinal Bypass: Percentage of Major Complications (Jan 2015-May 2016)

procedures, Major complications= In hospital death, ipsilateral amputation or graft occlusion. Includes only patients with Indication=Rest Pain or Tissue Loss

Complications by Center in Your Region (Jan 2015-May 2016)



Complications by Region across VQI (Jan 2015-May 2016)



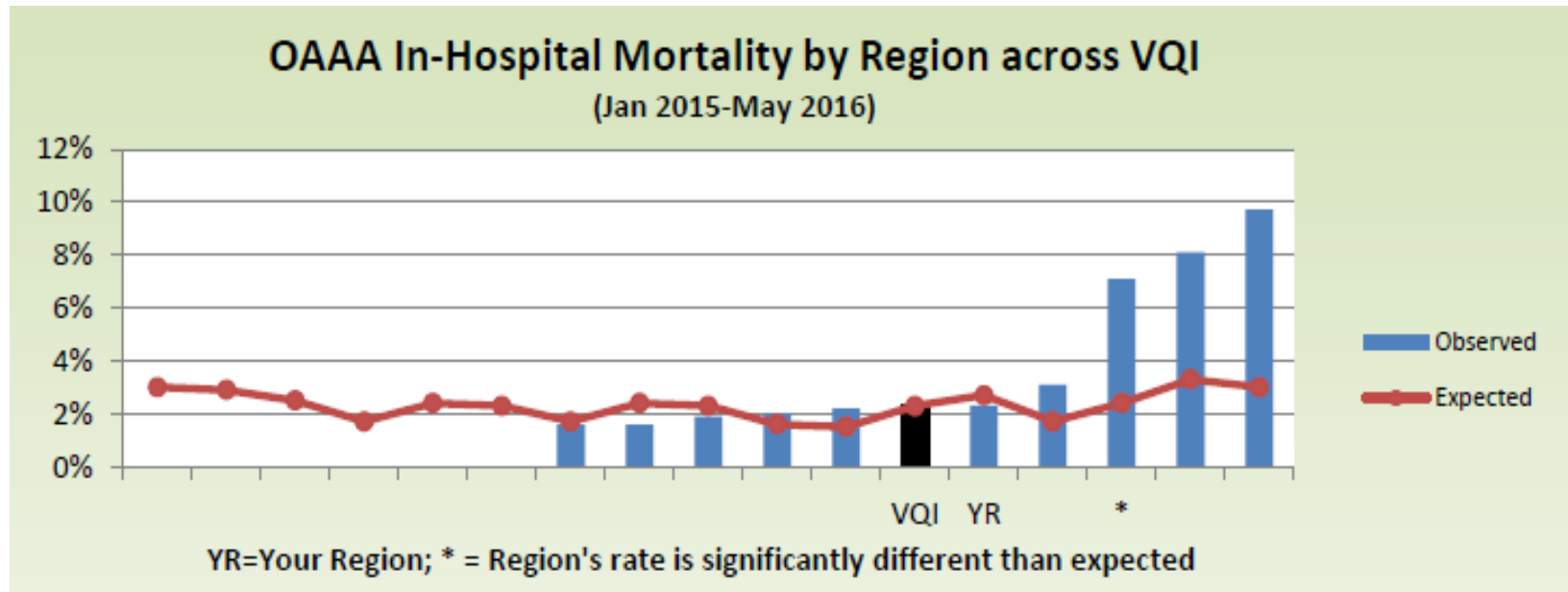
YR=Your Region; * = Region's rate is significantly different than VQI rate.

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Open Non-ruptured AAA: In hospital Mortality (Jan 2015-May 2016)

procedures, excluding weekend procedures

(your region did not have at least 3 centers with 10 procedures)



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Research Advisory Council Update:
Albeir Mousa, MD

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National Research Projects

- This year the SVS PSO Research Advisory Committee (RAC) approved 64 national research projects submitted by 51 unique VQI investigators in 26 centers, representing diverse topics across multiple procedures. In addition, multiple research projects using regional data were performed at VQI sites.
- <http://www.vascularqualityinitiative.org/vqi-resource-library/research-advisory-committee/>

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vascularqualityinitiative.org

Regional Concerns and Issues

A VVSG discussion

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How can the VVSG
serve
member institutions?

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How can we improve LTFU?

- VVSG Quality Initiative
- VVSG endorsed letter to patients at 30D F/U visit stressing the importance of LTFU
- Compare pre- and post- letter LTFU rates

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VVSG Community

- Volunteers to spearhead:
 - LTFU QI Initiative
 - Update VVSG website

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Arterial Quality Council Update: Megan Tracci, MD

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Actionable Reports

- **Physician-level Reporting** : these comparisons allow sites to analyse blinded physician results between physicians at the same site as well as between facilities to understand detailed results and best practices
- **Site-level Reporting (Center Opportunity Profile for Improvement Reports)**: Similar to the physician data, the COPI Reports provide detailed national and regional benchmarking on quality improvement such as length of stay

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COPI and Physician Reports

- In addition to the spring and fall regional reports, this year we have published two COPI reports:
 - 30-day stroke and 1-year mortality after CEA
 - 30-day stroke or 1-year mortality after CAS
- We have also published two surgeon-level reports:
 - Percentage of high-risk patients receiving CEA
 - Percentage of patients receiving follow-up imaging after EVAR
- At least two additional reports are planned for this year:
 - COPI report on hematoma after PVI
 - Surgeon-level report on percentage of high-risk patients receiving CAS

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Governing Council Update:
William P. Robinson, MD

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GC meeting at VAM

- The Governing Council approved the policy of un-blinding LTFU Reporting Rates, if a majority of members of the regional group agree to un-blind the LTFU data.
- M2S and Medstreaming provided the Committee with an overview on what the acquisition might afford VQI members:
 - Enhanced Analytics
 - Experience with data integration from EMRs
 - Extensive experience with outpatient data that complements M2S experience with inpatient data.
- Announcement of the new PSO Communications Committee
 - Glen Jacobowitz from NYU Langone, Chair
 - Leila Mureebe from Duke University Medical Center, Vice Chair

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Pathways Development Update



Vascular Quality Initiative®

Drill Down – Procedures With Both Statin and Antiplatelet Agents Prescribed at Discharge

[Home](#) [Define Report](#) [View My Results](#) [Raw Data](#)

Report Name: Procedures With Both Statin and Antiplatelet Agents Prescribed at Discharge
Procedure Type: Carotid Artery Stent, Carotid Endarterectomy, Endo AAA Repair, Infra-inguinal Bypass, Open AAA Repair, Peripheral Vascular Intervention, Supra-inguinal Bypass, Thoracic and Complex EVAR

Advanced Filter

Procedure Variable Name	My Center Results (N=809)
Discharge Statin and antiplatelet agents prescribed	
No	12.0% (97)
Yes	88.0% (712)
Missing Value or N/A	0.0% (0)

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Drill down – Procedures With Both Statin and Antiplatelet Agents Prescribed at Discharge











[Home](#) [Define Report](#) [View My Results](#) [Raw Data](#)

Report Name: Procedures With Both Statin and Antiplatelet Agents Prescribed at Discharge
Procedure Type: Carotid Artery Stent, Carotid Endarterectomy, Endo AAA Repair, Infra-inguinal Bypass, Open AAA Repair, Peripheral Vascular Intervention, Supra-inguinal Bypass, Thoracic and Complex EVAR
Variable: Discharge Statin and antiplatelet agents prescribed = No

[Results](#) » Patient List

Show entries

Search:

Registry	First Name	Last Name	Procedure Date	MRN	Physician	
Infra-inguinal Bypass	Paul	Bearer	07/01/2015	123	Marcus Jekyll	
Supra-inguinal Bypass	Paul	Bearer	07/01/2015	123	Marcus Jekyll	
Peripheral Vascular Intervention	Paul	Bearer	07/01/2015	123	Marcus Jekyll	
Thoracic and Complex EVAR	Paul	Bearer	10/01/2015	123	Marcus Jekyll	
Open AAA Repair	Zaphod	Beeblebrox	12/03/2015	123432	Bob Moloney2	
Endo AAA Repair	Valentine	Smith	02/04/2014	52445456	Walter J Freeman	
Thoracic and Complex EVAR	Valentine	Smith	02/03/2015	52445456	Walter J Freeman	
Infra-inguinal Bypass	TestT7	Test0	03/20/2013	1000001	F991 L991	
Peripheral Vascular Intervention	TestT7	Test0	03/20/2013	1000001	F991 L991	
Peripheral Vascular Intervention	TestT7	Test0	04/19/2013	1000001	F991 L991	

Showing 1 to 10 of 97 entries

Previous ... Next

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Drill down – Procedures With Both Statin and Antiplatelet Agents Prescribed at Discharge

[Home](#) [Define Report](#) [View My Results](#) [Raw Data](#)

Report Name: Procedures With Both Statin and Antiplatelet Agents Prescribed at Discharge
Procedure Type: Carotid Artery Stent, Carotid Endarterectomy, Endo AAA Repair, Infra-inguinal Bypass, Open AAA Repair, Peripheral Vascular Intervention, Supra-inguinal Bypass, Thoracic and Complex EVAR
Variable: Discharge Statin and antiplatelet agents prescribed = No

[Results](#) » [Patient List](#) » Patient Procedure

Infra-inguinal Bypass

Patient Information			
General-Demographics History Procedure Post-Op			
Patient Information			
First Name	Paul	Last Name	Bearer
Date of Birth	1940-03-01	SSDI Date of Death	
Patient Date of Death			
General-Demographics			
Zip/Postal Code	12345	Gender	Male
Hispanic or Latino	No	Race	White
Height (inches)	60.0	Height (cm)	152.0
Weight (lbs)	200.0	Weight (kgs)	91.0
Visit Code	2	Primary Physician	Marcus Jekyll
Admit Date	07/01/2015	Procedure Date	07/01/2015
Did Primary Physician bill to Medicare Part B?		Assistant	
Primary Insurer	Self Pay	Transferred From?	No
Smoking	Never	Quit Smoking Date	
Hypertension	No	Diabetes	None

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Drill Down Permissions

- Physicians can only drill down to their own patient level data
- Hospital Manager and all other non-physician users can only drill down if they have permissions to the “procedure and follow up download reports” privilege (granted by M2S with hospital manager approval)

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Shared Reports – Where to find them

Reports
User Calculated Variables

Create a New Common Variables Report:

Common Variables

Create a New Life Table Report for:

Infra-inguinal Bypass Freedom from Amputation

PVI Freedom from Major Amputation

PVI Freedom from Target Lesion Revascularization

Create a New Risk-Adjusted Report for:

In-hospital Death after Primary Isolated Elective CEA

LOS > 1 Day after Primary Isolated Elective CEA

In-hospital Stroke after Primary Isolated Elective CEA

In-hospital Stroke or Death after Primary Isolated Elective CEA

In-hospital Stroke or Death after Primary Elective CAS

LOS > 2 Days after Elective EVAR

Create a New Custom Report for:

Carotid Endarterectomy

Carotid Artery Stent

PATHWAYS Shared Reports:

Report Name	Type	Created on	Updated on	Shared	Retired	Shared by
CAS Post Op Complications	Carotid Artery Stent	06/14/2016	06/24/2016	<input checked="" type="checkbox"/>	<input type="checkbox"/>	WHEADON-ADMIN
Elective TEVAR Aneurysm for All Complications Except Death	Thoracic and Complex EVAR	01/07/2016	06/15/2016	<input checked="" type="checkbox"/>	<input type="checkbox"/>	WHEADON-ADMIN
Hemo AVF vs Graft	Hemodialysis Access	01/07/2016	06/24/2016	<input checked="" type="checkbox"/>	<input type="checkbox"/>	WHEADON-ADMIN
Major Amputations Requiring Revision Prior to Discharge	Lower Extremity Amputation	01/11/2016	06/15/2016	<input checked="" type="checkbox"/>	<input type="checkbox"/>	WHEADON-ADMIN
Major Complications for Supra Bypass Origin at the Aorta	Supra-inguinal Bypass	06/09/2016	06/24/2016	<input checked="" type="checkbox"/>	<input type="checkbox"/>	WHEADON-ADMIN
Major Complications for Supra Bypass Origin at the Axillary	Supra-inguinal Bypass	06/10/2016	06/24/2016	<input checked="" type="checkbox"/>	<input type="checkbox"/>	WHEADON-ADMIN
Major Complications for Supra Bypass Origin at the Femoral	Supra-inguinal Bypass	06/10/2016	06/24/2016	<input checked="" type="checkbox"/>	<input type="checkbox"/>	WHEADON-ADMIN
Major Complications for Supra Bypass Origin at the Iliac	Supra-inguinal Bypass	06/10/2016	06/24/2016	<input checked="" type="checkbox"/>	<input type="checkbox"/>	WHEADON-ADMIN
Procedures with Both Statin and Antiplatelet Agents Prescribed at Discharge	Common Variables	03/22/2016	06/15/2016	<input checked="" type="checkbox"/>	<input type="checkbox"/>	WHEADON-ADMIN
Supra Graft Complications Aorta Origin	Supra-inguinal Bypass	04/28/2016	06/24/2016	<input checked="" type="checkbox"/>	<input type="checkbox"/>	WHEADON-ADMIN
Supra Graft Complications Axillary Origin	Supra-inguinal Bypass	06/09/2016	06/24/2016	<input checked="" type="checkbox"/>	<input type="checkbox"/>	WHEADON-ADMIN
Supra Graft Complications Femoral Origin	Supra-inguinal Bypass	06/09/2016	06/24/2016	<input checked="" type="checkbox"/>	<input type="checkbox"/>	WHEADON-ADMIN
Supra Graft Complications Iliac Origin	Supra-inguinal Bypass	06/09/2016	06/24/2016	<input checked="" type="checkbox"/>	<input type="checkbox"/>	WHEADON-ADMIN

My Saved Reports:

Report Name	Type	Created on	Updated on	Shared	Retired	
CEA LOS	Carotid Endarterectomy	01/11/2016	06/08/2016	<input type="checkbox"/>	<input type="checkbox"/>	
PVI ABI/TBI	Peripheral Vascular Intervention	03/28/2016	03/28/2016	<input type="checkbox"/>	<input type="checkbox"/>	

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Shared Reports – What’s Available?


Reports Available in PATHWAYS Analytics	Registry
CAS Post Op Complications	CAS
Elective TEVAR Aneurysm for All Complications Except Death	TEVAR
Hemodialysis AVF vs Graft	Hemo
Major Amputations Requiring Revision Prior to Discharge	LEA
Major Complications for Supra Bypass Origin at the Aorta	Supra
Major Complications for Supra Bypass Origin at the Axillary	Supra
Major Complications for Supra Bypass Origin at the Femoral	Supra
Major Complications for Supra Bypass Origin at the Iliac	Supra
Procedures with Both Statin and Antiplatelet Agents Prescribed at Discharge	CAS, CEA, EVAR, Infra, Open, PVI, Supra, TEVAR
Supra Graft Complications Aorta Origin	Supra
Supra Graft Complications Axillary Origin	Supra
Supra Graft Complications Femoral Origin	Supra
Supra Graft Complications Iliac Origin	Supra
Elective TEVAR Aneurysm for all complications including death	TEVAR
ICU Days >= 3 Days	Open, EVAR, TEVAR, Supa
Major Cardiac Event Composite	Open, EVAR, TEVAR, Supra, Infra

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Shared Reports – Modify and Save to Meet Your Needs

Enter New / Find Existing Patients | Tools | Resources | Share a File | Analytics & Reporting Engine | Analytics & Reporting Engine

Home | Define Report | View My Results | Raw Data

Report Name: Report 004  Click to Save As
Procedure Type: Endo AAA Repair



Total Number of Procedures: N=0

Variable Name	Tab	Description
Not Discharged Home	Procedure Calculated Variables	Patient's standard of living has deteriorated since admission. For detailed calculation, please refer to Calculated Variables appendix in the user manual.
Post-op LOS > 2 Possibility	Procedure Calculated Variables	Possibility a subject will stay in hospital more than 2 days
Post-op Length of Stay	Procedure Calculated Variables	Discharge Date - Surgery Date
Post-op Length of Stay > 2	Procedure Calculated Variables	Patient stayed in hospital more than 2 days

Vascular Quality Initiative®

Physician-level Reporting – Choose Your View

Home Define Report View My Results Raw Data

Report Name: Report 1001
Procedure Type: Peripheral Vascular Intervention
View: Center Physician
Update Report

Center or Physician?

Procedure Variable Name	My Center Results (N=100)
Arterial Dissection	
No	89.0% (89)
Iliac	1.0% (1)
Fem-pop	6.0% (6)
Tibial	0.0% (0)
Missing Value or N/A	4.0% (4)
Arterial Perforation	
No	98.0% (98)
Iliac	0.0% (0)
Fem-pop	0.0% (0)
Tibial	0.0% (0)
Missing Value or N/A	2.0% (2)
Distal Embolization	
No	97.0% (97)
Minor	0.0% (0)

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Physician-level Reporting – Selecting included Physician(s)

Home Define Report View My Results Raw Data

Report Name: Report 1001
Procedure Type: Peripheral Vascular Intervention
View: Center Physician [Select Physicians](#)

Blind Physician Names? No Yes

4 selected

Filter:

Check all Uncheck all

- Physician 2913
- Kailyn McGlynn
- Nicolette McDermott
- Hiram Kautzer
- Reynold Langworth
- Hayden Ebert
- Serenity Weber
- Madeline Schultz
- Jude Moen

Select from Dropdown

Procedure Variable	(N=1)	Nicolette McDermott (N=1)	Hiram Kautzer (N=1)	Reynold Langworth (N=9)
Arterial Dissection				
No	100.0% (1)	100.0% (1)	100.0% (1)	88.9% (8)
Iliac	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)
Fem-pop	0.0% (0)	0.0% (0)	0.0% (0)	11.1% (1)
Tibial	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)
Missing Value or N/A	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)
Arterial Perforation				
No	100.0% (1)	100.0% (1)	100.0% (1)	100.0% (9)
Iliac	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)
Fem-pop	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)
Tibial	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)
Missing Value or N/A	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)
Distal Embolization				
No	100.0% (1)	100.0% (1)	100.0% (1)	100.0% (9)

Vascular Quality Initiative®

Physician-level Reporting

Home Define Report View My Results Raw Data

Report Name: Report 1001
 Procedure Type: Peripheral Vascular Intervention
 View: Center Physician [Select Physicians](#)

Update Report

Procedure Variable Name	Kailyn McGlynn (N=1)	Nicolette McDermott (N=1)	Hiram Kautzer (N=1)	Reynold Langworth (N=9)
Arterial Dissection				
No	100.0% (1)	100.0% (1)	100.0% (1)	88.9% (8)
Iliac	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)
Fem-pop	0.0% (0)	0.0% (0)	0.0% (0)	11.1% (1)
Tibial	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)
Missing Value or N/A	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)
Arterial Perforation				
No	100.0% (1)	100.0% (1)	100.0% (1)	100.0% (9)
Iliac	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)
Fem-pop	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)
Tibial	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)
Missing Value or N/A	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)
Distal Embolization				
No	100.0% (1)	100.0% (1)	100.0% (1)	100.0% (9)
Minor	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)



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Release Order

- Shared Reporting (released)
- Drill Down (released)
- Physician-level Reporting Q4
- Modifying common variables – can be common across tabs Q4

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EMR Integration Status Updates

- Integration for Varicose Vein procedure form
 - Released and officially certified 2 vendors
 - Medstreaming
 - Mtuitive
- Integration for PVI procedure form
 - Planned to be available in Q4 2016
- Integration for procedure forms of other registries
 - Planned to be available in 2017
- Integration for follow-up forms
 - Planned to be available in 2017

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TEVAR Surveillance Project

- Longest running VQI Surveillance project
- Two cohorts
 - 5 year cohort is fully enrolled
 - 1 year cohort – enrollment is in progress
- The earliest patients are reaching the 3-year timepoint
- The FDA is very enthusiastic about using registries for post-market surveillance quality improvement projects

Contact the Project Managers at TEVARProject@m2s.com for more information

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CREST 2 Registry Project

- CAS Registry with Supplemental 1-page form
- Enrolling
- 64 Physicians are participating through VQI
- Objectives
 - Promote rapid initiation and completion of enrollment in the CREST-2 trial
 - Ensure that CAS is performed by adequately experienced operators within CREST-2 and C2R
 - Closely monitor clinical outcomes of C2R patients
 - Prevent inappropriate use of CAS outside of C2R
- C2R Investigators have received 10 reports
 - Patient-level data is non-identifiable per HIPAA
 - Physician and center names are transferred IAW project data sharing agreement

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Bard Peripheral Vascular LifeStent

- Bard has recently partnered with the VQI for a post approval project for the LifeStent® Vascular Stent System.
- Invitations sent
- Patients: 74 patients
- Timepoints: Procedure, 1 yr, 2 yr
 - Less than 5 custom VQI content
 - Images sent to Imaging CoreLab at 1 yr. and 2 yr. if specific Adverse Events are reported

Vascular Quality Initiative®

VQI TCAR Surveillance Project

- Safety and effectiveness of trans-carotid artery revascularization (TCAR) in comparison with carotid endarterectomy (CEA)
- High surgical risk patients (asymptomatic or symptomatic) procedure and one-year follow-up be submitted to the VQI CAS Registry in order to qualify for Medicare coverage
- vqi@m2s.com

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2016 QCDR Program

- A QCDR is a CMS-approved entity that collects medical and/or clinical data for the purpose of patient and disease tracking to foster improvement in the quality of care provided to patients.
- Individual EPs who satisfactorily participate in 2016 PQRS through a QCDR may avoid the 2018 negative payment adjustment.

26 Measures Available in 2016

- To successfully participate:
 - 9 measures
 - across 3 domains
 - 2 outcome measures
 - reporting rate > 50% Medicare patients
 - **2015 procedures must be followed up by 12/31/2016**

Vascular Quality Initiative®

The VQI is celebrating its Anniversary!

5 YEARS

12 **OVER 290,000**
PROCEDURES

CLINICAL **3,000**
REGISTRIES **Physicians**

Over 375 **Participating**
Centers

Vascular Quality Initiative®



New VQI Customers (Nov 18th)

Give us a chance to show you the power of your data.

Choose FIVE or more registries and your site will save \$2,500 off your first year!

Current VQI Customer (Dec 31st)

Thank you for playing such a big role in our success.

Add an additional VQI registry to your package, and receive a one-time \$500 credit, per site, at the time of renewal.

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Expanding Participation

AUGUSTA HEALTH	FISHERSVILLE	VA
HENRICO DOCTORS' HOSPITAL	RICHMOND	VA
RIVERSIDE REGIONAL MEDICAL CENTER	NEWPORT NEWS	VA
VIRGINIA HOSPITAL CENTER	ARLINGTON	VA
CARILION NEW RIVER VALLEY MEDICAL CENTER	CHRISTIANSBURG	VA
BON SECOURS ST MARYS HOSPITAL	RICHMOND	VA
BON SECOURS MEMORIAL REGIONAL MEDICAL CENTER	MECHANICSVILLE	VA
BON SECOURS DEPAUL MEDICAL CENTER	NORFOLK	VA
UNITED HOSPITAL CENTER	BRIDGEPORT	WV
WHEELING HOSPITAL	WHEELING	WV
RALEIGH GENERAL HOSPITAL	BECKLEY	WV
BECKLEY ARH HOSPITAL	BECKLEY	WV

Vascular Quality Initiative®

Virginias Vascular Study Group announces its Spring 2017 meeting
on the Grounds of the University of Virginia, Charlottesville
Thursday 13 April 2017
8AM – 12:30 PM EDT

