Standardization Welcome in the Office-Based Setting

**Massachusetts Becomes First State to Require IAC Vein Center Accreditation**

Any similar themes, concerns and hopes were shared by speakers during the Venous Governance session on Thursday afternoon. At the top of the list: the hot topics of accreditation and standardization, coupled with looming health care changes and their future impact on office-based vein practices.

Alan Dietzik, MD, opened the session by looking at the distinctions between guidelines and standards. Guidelines are recommendations that are not intended to be standards or absolute requirements. On the other hand, standards provide rules or minimum requirements for clinical practice. Standards are regarded as generally accepted principles of patient management.

Multiple speakers in the session referenced a 6,000 percent annual increase in the number of vein stripping and ablation procedures being reported. This statistic is staggering, as there is concern about the training, or lack thereof, that makes a health care provider qualified to perform these procedures.

“There are a whole lot of indifferent people performing venous procedures,” said Dr. Dietzik. “There’s no one enforcing standards.”

Standards will not only establish necessary training qualifications across specialties and create a measurement and recording of outcomes, but also benefit the patient.

“Patient safety and outcomes are improved with standardization,” he said. “If we cannot reduce the number of unnecessary endogenous procedures, it will impact reimbursement.”

Dr. Dietzik also took a closer look at the differences between licensure, certification and accreditation. He defined these terms, and then discussed who should be tasked with creating endovenous standards.

- SVS? “No, it is a single specialty.”
- Government? “No.”
- Multidisciplinary committee? “Yes, but in what form?”

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**V2 Symposium**

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with the audience,” Dr. Elias said. “Not every faculty member is an expert on every subject discussed, and that’s OK. We want a wide range of knowledge in the room, and we want a fun, lively environment. If some entertainment comes from the discussion, that’s fine. It’s the last day of the conference, and this is what people want and need.”

This is an event where the PowerPoint presentation is not in use, Elias said.

“Instead, we use the question cards and introduce new subjects on the fly,” he said.

Elias said he enjoys the role of facilitator for the V2 Symposium, because it suits his personality.

“I’m the guy at the meeting who doesn’t always wear a tie and a jacket,” he said. “You might see me in a sweater or a vest. You don’t have to wear a dark shirt in Miami. We work hard at the meeting and at the V2 Symposium, but we also work hard to make sure it’s fun.”
Registration Open for INNOVATION

Registration is open for INNOVATION, a new meeting created by Vascular Device Partners (VDP). The meeting’s goal is to educate endovascular specialists and industry on the challenges of, and opportunities in, the endovascular device development pathway. The INNOVATION platform uses compelling stories as educational tools. Start-ups and mature companies will highlight their experiences with research and development, sharing their successes and failures. The inaugural event will take place July 17-18, at the Barceló Bávaro Beach Resort, Punta Cana, Dominican Republic. Visit www.vasculardevicepartners.com/innovation to register today.

Accreditation
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He reviewed the Intersocietal Accreditation Commission (IAC) Vein Center Accreditation program, which was launched in November 2014. Standards were created for superficial venous evaluation and management.

There are some pitfalls to accreditation, such as time requirements and additional training/experience that’s required and application costs. But he also pointed to the benefits that will come from implementation of industry standards.

“Standardization will benefit all patients,” he said. “It will eliminate unqualified physicians and vein centers. Accreditation is the best way to achieve enforceable standards.”

Tom Wakefield, MD, followed with a presentation on the Vascular Quality Initiative-Varicose Vein Registry (VQI-VVR).

Among the key aspects of the registry that Dr. Wakefield discussed was the focus on quality improvement, anonymous benchmarking, 90-day and one-year follow-up and the usage of common data elements. He reviewed the inclusion and exclusion criteria for varicose veins.

Benefits of the registry include the ability to analyze procedural and follow-up data, benchmark outcomes regionally and nationally for continuous improvement and improve outcomes by developing best practices. It will also help a vein center meet IAC certification.

At the time of his presentation, Dr. Wakefield said that 22 centers had enrolled in the registry and 490 procedures had been recorded.

Lowell Kabnick, MD, provided the audience with greater details on the PATHWAYS platform, allowing collection of more comprehensive data for improved patient care.

This licensing agreement will allow vein centers, hospitals and outpatient facilities who are participating in the VVR to significantly improve their data entry workflow and efficiency. SonoSoft’s EMR software will automate the data capture of over 150 data fields on the web-based PATHWAYS form for the registry, including patient demographics and history, procedure details and follow-up.

Jeff Lord, chief technology officer, M2S, said, “Our work with SonoSoft on the integration for the Varicose Vein Registry will both strengthen the PATHWAYS platform and help our clients to capture the quality data they need to track outcomes.”

Dr. Peter F. Lawrence discusses how societies should allocate resources for venous disease.

IAC Vein Center Accreditation program.

“We need an initiative for improving patient care through standards,” he said.

Dr. Kabnick explained that nine different societies participated in the creation of the standards for the program. He reviewed the qualifications, which included requirements on the types and number of procedures performed, staffing and documentation.

He said there are 39 pages of accreditation standards, “many of which you do already.”

To date, 54 applications have been submitted. The IAC has granted accreditation to 32, and 13 applications are under review.

Applications already have increased due to a recent announcement from Blue Cross Blue Shield of Massachusetts that IAC accreditation will be required for vein procedures performed on insured customers.

Since this announcement, Dr. Kabnick said, the IAC has received 32 applications from vein centers in Massachusetts alone.

M2S® and SonoSoft® Sign Licensing Agreement as First EMR Integration Partner for VQI® Varicose Vein Registry™

M2S, Inc., and SonoSoft, a leader in business continuity software and services, have committed to reduce registry data entry time for the new Vascular Quality Initiative (VQI) Varicose Vein Registry. SonoSoft will provide electronic medical records (EMR) integration for the M2S PATHWAYS™ platform, allowing collection of more comprehensive data for improved patient care.

This licensing agreement will allow vein centers, hospitals and outpatient facilities who are participating in the VVR to significantly improve their data entry workflow and efficiency. SonoSoft’s EMR software will automate the data capture of over 150 data fields on the web-based PATHWAYS form for the registry, including patient demographics and history, procedure details and follow-up.

Dr. John Stahl, president, Empower Technologies, added, “We have developed a nice interface with the M2S PATHWAYS platform, so that the information in our EMR will populate the 150+ data fields for the registry in a single click and can be uploaded to the website.”