ANNUAL REPORT 2019

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Mission

To provide a professional community for nurses focused on advancing the care of persons living with vascular disease through excellence in evidence-based practice and education.

Vision

SVN will be the premier vascular nursing organization.

Core Values

Excellence in vascular nursing practice through innovation, research, and education.
Respect for individual member’s contributions, values, and perspectives.
Advocacy for vascular nurses and persons living with vascular disease.

Membership Demographics

Total: 190 members as of 5/20/19
Active Members: 177 members
Associate Members: 1 member
Student/Graduate Members: 7 members
International: 3 members
Emeritus: 2 members
Practice and Research Committee
Chair: Diane Treat-Jacobson
Rebecca Brown
Debra Kohlman-Trigoboff
Sue Monaro
Kathy Rich
Eileen Walsh
Mary Whipple

Nominating Committee
Chair: Tiffany Street
Melody Heffline
Phyllis Gordon

Conference Planning Task Force
Chair: Chris Owen
Marie Rossi
Delmar Imperial-Aubin
Catherine Ware
Sarah Rosenberger
## Organizational Collaboration

**American College of Cardiology Competency Management Committee**  
Phyllis Gordon

**American Heart Association PAD Task Force**  
Debra Kohlman-Trigoboff

**American Heart Association PVD Leadership Committee**  
Kathy Rich

**Intersocietal Accreditation Commission**  
Melody Heffline

**Vascular Interventional Advances (VIVA)**  
Chris Owen

## Society for Vascular Surgery Various Committees

**Vascular Center Verification and Quality Improvement Program**  
Melody Heffline, Patty Flanagan, Karen Hanrahan

**SVS Program Committee**  
Chris Owen

**SVS Public and Professional Outreach Committee**  
Nancy Crowell

**SVS Community Practice Committee**  
Tiffany Street

**SVS Leadership and Diversity Committee**  
Cristina Sola
President: Cindi Christensen
President Elect: Patty Flanagan
Treasurer: Marie Rossi
Director: Anabelen Contreras
Director: Chris Owen
Director: Cristina Sola
Director: Barbara Vogel
Immediate Past President: Tiffany Street

President: Patty Flanagan
President Elect: Chris Owen
Treasurer: Marie Rossi
Director: Anabelen Contreras
Director: Nancy Crowell
Director: Alexandra Moran
Director: Barbara Vogel
Immediate Past President: Cindi Christensen

New England-Boston
Mid-Atlantic
North

SVN National Conference

ANCC Cardiac-Vascular Nurse Certification- RN-BC (signed MOU between SVN and ANCC)

Journal of Vascular Nursing, Jasmiry Bennett, Editor

Scope and Standards of Vascular Nursing, 2016

Clinical Practice Guidelines:
SVN Carotid Artery Endarterectomies (CEA) updated Nursing Clinical Practice Guidelines (on website) Endovascular Repair of Abdominal Aortic Aneurysm (EVAR) Nursing Clinical Practice Guideline- in the final phases of completion and will be on the website soon.

SVN Online Learning:
Carotid Module Units 1-3 posted on the SVN website. Unit 4 to be released soon.

SVN Vascular Images:
Over 150 different images for presentation and publication are available for SVN members free of charge. Images can be used for annual conference presentations, chapter meetings, articles published in JVN and SVN supported events.

2019 Annual Conference Grant and Sponsorship Support

- Acelity
- Boston Scientific
- Gore
- Hanger Clinic
- Janssen Pharmaceuticals
- Medtronic
- Osborn Rooke
- Silk Road
- Sampsons

The Society for Vascular Surgery has been managing the SVN since December 2016. Our three-year management agreement will be resigned with the SVS at the end of this year. In addition to a renewed agreement, the SVN and SVS are working on an organizational membership to go live this fall. The organizational membership includes dual membership for SVN active members to become SVS affiliate members when they renew or join with the SVN. SVN members do not need to complete an application with the SVS. Dues for the SVN will remain the same price but will include two organizational memberships for the price of one.
SVN Practice and Research Committee 2018-2019 Members
Diane Treat-Jacobson – Chair
Rebecca Brown
Karen Fitzgerald
Anne Foley
Debra Kohlman-Trigoboff
Sue Monaro
Kathy Rich
Carolyn Robinson
Eileen Walsh
Mary Whipple

SVN Practice and Research Committee 2019-2020 Members
Diane Treat-Jacobson – Chair
Rebecca Brown
Debra Kohlman-Trigoboff
Sue Monaro
Kathy Rich
Eileen Walsh
Mary Whipple
YOU?

The SVN Carotid Artery Endarterectomies (CEA) Updated Nursing Clinical Practice Guidelines is currently on the SVN web site. The Endovascular Repair of Abdominal Aortic Aneurysm (EVAR) Nursing Clinical Practice Guideline is in the final stages of review and update. The next Clinical Practice Guideline the Committee will be working on is for lower extremity peripheral artery disease.
A-AHA-NHLBI held a PAD Roundtable on December 10, 2018. Members agreed upon the need for a coordinated approach to PAD awareness for the general public, patients and health care providers.

Based on small group ideas the following needs were identified:

- PAD Messaging
- Community Activation
- Patient Support
- Awareness Gaps Among Research Funders
- Health System Activation and Provider Education
- Advocacy and Screening ABI

Comprehensive National PAD awareness initiative

Top 6 recommendations

1. Broaden the appropriate use of diagnostic ABI for patients with exertional leg symptoms and lower extremity wounds. Ensure reimbursement for diagnostic ABI when ordered for abnormal lower extremity pulses (29 votes).

2. Write a set of multidisciplinary guidelines for primary care providers, endocrinologists, podiatrists, gynecologists for PAD education about risk factors, symptoms and diagnosis (28 votes).

3. Advocacy effort for public reporting of amputations (24 votes).

4. Create a PAD Action Plan document (like the COPD Action Plan) which will be the basis for a unified, enduring national PAD movement (18 votes).

5. Have a Lobby Day to advocate for PAD in Washington DC (16 votes).

6. Build PAD information into existing resources/systems (MI, Stroke, Diabetes, Tobacco Cessation) (16 votes).

Follow-up Plan

1. Conference Report
   - Include an audit of current PAD educational and outreach activities from each of the collaborating groups represented at the Roundtable
   - Summarize each small group brainstorming/recommendations

2. Summit Planning
3. Optimal Strategy for Collaborating on PAD Awareness

- Write the PAD Action Plan and launch this at the Summit.
- Plan for ownership over different aims within collaborating groups and quarterly calls for updates on progress

SVN representative to the AHA PAD Task Force: Debra Kohlman-Trigoboff

| Liaison Council, Committee or Organization | Society for Vascular Nursing |
| Reporting To | AHA PVD Leadership Committee |
| Priorities | • Promote excellence in vascular nursing clinical practice, education and research  
               • Advocate for persons living with vascular disease  
               • Grow membership |
| Goals | The Society for Vascular Nursing’s mission is to provide a professional community for vascular nurses focused on advancing the care of persons living with vascular disease through excellence in clinical practice, education, and research.  
               For the immediate future, SVN continues to focus on the following:  
               1. Grow membership.  
               2. Increase attendance at the annual conference.  
               3. Provide quality programming at the annual conference.  
               4. Strengthen collaborations with AHA and other vascular organizations such as SVS, SVM, PCNA and SVU. |
| Current Activities | • Finalized the SVN annual conference program to be held June 12-13 in conjunction with SVS in National Harbor, MD  
                                  • Sent the endovascular AAA nursing guideline for internal review  
                                  • Created web-based basic vascular nursing education modules on carotid artery disease  
                                  • Began the literature review for the lower extremity revascularization nursing guideline  
                                  • SVN writing group members are on the following AHA papers:  
                                    o Perfusion Assessment in Critical Limb Ischemia |
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<tr>
<th>Collaboration Opportunities</th>
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<td>• SVN is on the AHA PAD Task Force</td>
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<td>• SVN representative attended the PAD Roundtable at NIH in December 2018 &amp; will be part of a writing group to develop a set of multidisciplinary guidelines for primary care providers on PAD education about risk factors, symptoms and diagnosis</td>
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<th>Announcements</th>
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May 21, 2019

To: Cynthia Christensen, MSN, CVN, ARNP-BC
   SVN President

   Joanna Bronson
   Inter-Society Relations Director SVS

From: Neil Khilnani, MD, FSIR, FACPh
   President – IAC Vein Center

   Mary Lally, MS, CAE
   IAC Chief Executive Officer

   Laura Humphries, RVT, RPhS
   IAC Director of Accreditation – Vein Center

IAC VEIN CENTER
Melody Heffline, MSN, RN, ACNS-BC, ACNP-BC

BACKGROUND ON IAC, STRUCTURE OF ITS DIVISIONS AND IAC BOARD OF DIRECTORS

Each IAC division (Vascular Testing, Echocardiography, Nuclear/PET, MRI, CT/Dental CT, Carotid Stenting, Vein Center, Cardiac Electrophysiology and Cardiovascular Catheterization) offers a separate accreditation program and is led by a board of directors. Using common goals and methods, each division board establishes the IAC Standards and policies for accreditation within its specific specialty and renders accreditation decisions. The division boards are comprised of representatives from sponsoring organizations (refer to Addendum on Page 5) who support the divisions’ activities, as well as members-at-large with specific expertise. These representatives come from a variety of specialties delivering and/or utilizing specific imaging/procedure modalities. Representatives from each of the nine divisions compose the IAC Board of Directors that provides governance to the IAC.
There are approximately 14,000 IAC-accredited sites across all imaging and procedural programs currently. Since its inception in 1991, IAC’s accreditation program has been offered to facilities in the U.S. and Canada, with international expansion commencing this year as discussed below.

IAC is a CMS-approved Accreditation Organization (AO) for Advanced Diagnostic Imaging (ADI) for Nuclear Medicine/PET, CT and MRI facilities that bill for Medicare Part B. In addition, there are multiple private payers with policies in place linking reimbursement to the accreditation status of the facility.

IAC NEWS / UPDATES

• The 2019 IAC Officers: Michael Lilly, MD, RVT, RPVI, IAC Chair (representing SVS); Raymond Stainback, MD, FACC, FASE, Immediate-past Chair (representing ASE) and David Sacks, MD, IAC Chair-Elect (representing SIR), Merri Bremer, EdD, RN, ACS, RDCS, FASE, IAC Secretary (representing SDMS) and Robert Pizzutiello, MS, FAAPM, FACR, FACMP, IAC Treasurer (representing AAPM).

• The IAC Board convened for an IAC Strategic Planning session April 20-22, 2018. The 2019 Strategic plan was approved at the IAC Board Meeting on September 12, 2018.

• Independence Blue Cross of Philadelphia and AmeriHealth of New Jersey and Pennsylvania mandated IAC Vein Center accreditation for providers by June 1, 2019. It is anticipated the IAC will receive at least 125 new applicants. There is also activity with Blue Cross Blue Shield of Texas related to requiring IAC Vein Center accreditation.

• The Pennsylvania Department of Health is reviewing IAC’s application to be considered a recognized Cardiovascular Catheterization accrediting organization for facilities performing PCI without open heart surgical services in Pennsylvania.

• Released in 2016, the IAC Quality Improvement (QI) Self-Assessment Tool offers facilities a method for selfassessing their imaging studies and reports toward continuous process improvement. Data is collected, and facilities are provided with a quantitative report that targets opportunities for improvement. Use of the QI Tool may be used to satisfy the CMS MIPS Improvement Activity for the 2019 payment year.

• The IAC is pleased to announce a new medical sponsoring society for IAC Echocardiography, the Society of Cardiovascular Anesthesiologists (SCA). The representatives from the SCA and American Society of Echocardiography (ASE) will work with the IAC Echocardiography division to develop the Standards for perioperative transesophageal imaging in 2019.

STANDARDS REVISIONS

IAC provides a 60-day comment period for all proposed Standard revisions, providing sponsoring organizations, participating facilities and the public an opportunity to provide feedback prior to the finalization of the Standards.
Vein Center

A review of the IAC Standards & Guidelines for Vein Center Accreditation for follow-up documentation was recently completed; all revisions will be published in summer 2019.

The Board of Directors is currently reviewing the Standards to propose additions to the required training and experience pathway for Advanced Practice Providers. Once complete, they will be released for public comment.

A new version of Standards specific to deep venous procedures is also in progress. There are approximately seven procedures that will be addressed in these Standards.

STATISTICS

As of May 2019, there are currently 179 IAC-accredited Vein Centers. All facilities that are granted are required to undergo a site visit within the first 12 months to observe the quality of the direct patient care. Approximately 80% of all submitted applications require some rectification before they can be granted.

RESEARCH

IAC’s research initiative began in 2012 and has resulted in numerous studies exploring whether participation in the accreditation process results in measurable quality improvement. The results are quite compelling; IAC accreditation leads to greater awareness of safety, standardization of processes, adherence to guidelines and most importantly, improved patient care. IAC Accreditation and Its Impact on Quality Patient Care was published in 2018 to highlight the results and can be accessed as a digital download at intersocietal.org/researchsummary.

The Call for Proposals for the 2019 Research Award Program ended on April 15, 2019. Notification of the 2019 award recipients is anticipated for October 2019. More information is available at intersocietal.org/research. Abstracts

Vein Center


**Quality Improvement Tool (Applicable to All Divisions)**

• Presented at the American Board of Medical Specialties Conference 2017: Usefulness of the IAC Quality Improvement (QI) Self-Assessment Tool at One Year.

• Presented at the Society of Nuclear Medicine and Molecular Imaging 2018 Annual Meeting as an oral abstract: Intersocietal Accreditation Commission (IAC) QI Self-Assessment Tool Utilization Improves Accreditation Outcomes.

**MARKETING AND COMMUNICATIONS**

IAC integrates numerous marketing/communications activities designed to ensure that current and prospective customers, including the SVN membership, are aware of the accreditation programs and understand the value these programs provide as a tool for demonstrating facilities’ commitment to quality patient care.

To help ensure that members of the vein center community are aware of the new reimbursement directives that became effective June 1, 2019 for Independence Blue Cross and AmeriHealth providers performing varicose vein procedures in the office setting in Pennsylvania and New Jersey, IAC has and continues to conduct many outreach activities aimed at providing awareness and resources.

Helpful resources include accreditation/reaccreditation live webinars which provide useful tips to those preparing their accreditation applications. In addition, IAC identifies clinical, specialty topics and invites guest presenters to speak on subjects related to quality in medical and procedural imaging. Our special topic, live webinars are successful in drawing large numbers of participants, often surpassing 1,000 attendees. The webinars are offered free-of-charge and participants have the opportunity to earn corresponding continuing education (CE) credit. IAC will reach out to SVN for future live webinars that might be of interest to the society to co-sponsor and market to its membership.

Planned for 2019 is a first-time project to recognize facilities accredited by IAC in three or more modalities. Facilities qualifying for the multi-modality accredited facility recognition program will receive a special banner from the IAC that can be proudly displayed in their patient waiting area or lobby to help spotlight this achievement to patients. IAC looks forward to showcasing these facilities and their use of the banner to illustrate their comprehensive commitment to quality patient care, as the program progresses.

The IAC encourages SVN to submit society news and we will publish the content on our website and social media sites, including details of upcoming events, annual meetings and
continuing medical education (CME) opportunities offered by SVN. The IAC extends the opportunity to the SVN to use its mailing list, free-of-charge, with an approved mail piece.

We hope you find the details of this report useful. The IAC appreciates the ongoing collaboration with your society as we work to evaluate and recognize facilities’ ongoing commitment to quality patient care through the accreditation process. IAC continues to sustain a collaborative and collegial relationship amongst all of the sponsoring organizations' members.

ADDENDUM

IAC SPONSORING ORGANIZATIONS

- Alliance of Cardiovascular Professionals (ACVP)
- American Academy of Neurology (AAN)
- American Academy of Oral and Maxillofacial Radiology (AAOMR)
- American Academy of Orthopaedic Surgeons (AAOS)
- American Academy of Otolaryngology — Head and Neck Surgery (AAO-HNSF)
- American Association of Neurological Surgeons / Congress of Neurological Surgeons Cerebrovascular Section
- American Association of Oral and Maxillofacial Surgeons (AAOMS)
- American Association of Physicists in Medicine (AAPM)
- American College of Surgeons (ACS)
- American College of Nuclear Medicine (ACNM)
- American Institute of Ultrasound in Medicine (AIUM)
- American Society for Dermatologic Surgery Association (ASDSA)
- American Society of Echocardiography (ASE)
- American Society of Neuroimaging (ASN)
- American Society of Neuroradiology (ASNR)
- International Society for Musculoskeletal Imaging in Rheumatology (ISEMIR)
- Neurocritical Care Society (NCS)
- Pediatric and Congenital Electrophysiology Society (PACES)
- Society for Cardiovascular Angiography and Interventions (SCAI)
- Society for Cardiovascular Magnetic Resonance (SCMR)
- Society for Clinical Vascular Surgery (SCVS)
- Society for Vascular Medicine (SVM)
- Society for Vascular Nursing (SVN)
- Society for Vascular Surgery (SVS)
- Society for Vascular Ultrasound (SVU)
- Society of Cardiovascular Anesthesiologists (SCA)
- Society of Cardiovascular Computed Tomography (SCCT)
- Society of Diagnostic Medical Sonography (SDMS)
- Society of Interventional Radiology (SIR)
- Society of Neurolnterventional Surgery (SNIS)
- Society of Nuclear Medicine and Molecular Imaging (SNMMI)
Over the past year I participated on the VIVA nurse planning committee by developing objectives for the meeting necessary for CEU application. I moderated several sessions and spoke on Patient Assessment and Diagnosis of Claudication and CLI and Carotid Artery Stenosis and Stroke at the 2018 meeting.

This year I have been asked to participate on the nurse planning committee and provided documentation necessary to complete application for CEUs. I have also been asked to speak on CLI Care Basics: Care of the Patient Beyond Revascularization and Provide a Case Study/Workup of the Acute and nonacute Patient. I will also be moderating some sessions for VIVA 2019.

Chris Owen
December 6, 2018  SVS: What is a vascular surgeon and why would you need to see one?

January 25, 2019  How Exercise Can Help in Peripheral Artery Disease
Walking with PAD brings a different meaning to ‘no pain, no gain.’

February 5, 2019  Good news / bad news: rAAA deaths down, but 43% occur in people that don’t qualify for screening

February 8, 2019  DANGEROUS COMBO: JVS reports depression and leg artery disease put patients at higher risk of amputation and death

February 26, 2019  JVS: Metformin may reduce growth of AAA
METFORMIN PRESCRIPTION STATUS AND ABDOMINAL AORTIC ANEURYSM DISEASE PROGRESSION IN THE U.S. VETERAN POPULATION

March 12, 2019  Deep Vein Thrombosis in Los Angeles Lakers Forward Could Indicate Thoracic Outlet Syndrome

March 14, 2019  Rapid growth in EVT procedures parallels increase in non-vascular surgeon providers


April 17, 2019  What vascular surgeons wish patients knew about their circulation

April 22, 2019  SVS: Hardest cases – Even high-risk aneurysm patients can have good results if selected carefully
RISK FACTORS FOR EARLY AND LATE MORTALITY AFTER FENESTRATED AND BRANCHED ENDOVASCULAR REPAIR OF COMPLEX ANEURYSMS
Journal of Vascular Surgery, May 2019

April 29, 2019  SVS: Frequent venous thromboembolism documented in H1N1 ARDS patients
EMPIRICAL SYSTEMIC ANTICOAGULATION IS ASSOCIATED WITH LESS VENOUS THROMBOEMBOLISM IN CRITICALLY ILL INFLUENZA A H1N1 ACUTE RESPIRATORY DISTRESS SYNDROME PATIENTS, Journal of Vascular Surgery: Venous and Lymphatic Disorders, May 2019

- **May 10, 2019** SVS Branding Concepts: The Leader / The Partner
  Discussion and voting took place; verdict to be revealed at VAM

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### American College of Cardiology Competency Management Committee

This committee is just forming. The invitation to participate in this committee included the following description. The American Heart Association and Society of Vascular Medicine are partnering on a document which will focus on competence and training standards related to the diagnosis and management of patients with vascular disease. Our methodology includes obtaining views not only from expert physicians in this field – but also other stakeholders who work in vascular medicine and/or refer or collaborate with vascular medicine specialists.

### Vascular Center Verification and Quality Improvement Program

This committee has met just once. The purpose is to develop standards of vascular excellence within a hospital similar to the trauma levels that are currently in place.

Program Committee- minimal participation this year.

Community Practice Committee- the project we participated in is completed.

Leadership and Diversity Committee- This committee has not yet met.