Open case minimums for VS/VSI?

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Disclosures: Member – Vascular Surgery
Board/American Board of Surgery

Current category minimums

Defined Category Minimum Numbers: Vascular Surgery
Review Committee for Surgery

<table>
<thead>
<tr>
<th>Category</th>
<th>Minimum</th>
</tr>
</thead>
<tbody>
<tr>
<td>Endovascular Aneurysm Repair</td>
<td>20</td>
</tr>
<tr>
<td>Endovascular Therapeutic Procedures</td>
<td>60</td>
</tr>
<tr>
<td>Endovascular Diagnostic Procedures</td>
<td>100</td>
</tr>
<tr>
<td>Complex</td>
<td>10</td>
</tr>
<tr>
<td>Peripheral</td>
<td>45</td>
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<tr>
<td>Cardiovascular</td>
<td>25</td>
</tr>
<tr>
<td>Abdominal</td>
<td>30</td>
</tr>
</tbody>
</table>

Direct mortality link for OSR (AAA)

Open AAA repairs in steep decline

Is open training still sufficient?

Will category case minimums help?
PD consensus case requirements

What about practicing surgeons?

SVS AAA Guidelines volume mandate

40% of centers below threshold

UM, JHMI & Dartmouth minimums
Summary

- Open volume low, will get lower. How much is enough?
- Are open case category minimums even possible?
- Are AAAs a special case, or minimums for all open procedures?
- Weight of individual experience vs. “centralization”?
- What defines a vascular surgeon today? In ten years?

Evolution of surgical experience

150 to 200 major open cases per DE applicant:
- Aneurysm = 40 (AAA from 32 to 14)
- Cerebrovascular = 57
- PAD = 71