# Joint CV Section Executive Council Meeting

**Sunday, April 14, 2019**
*San Diego Marriott Marquis San Diego, CA*

## Meeting Minutes

### Attendees

<table>
<thead>
<tr>
<th>Officers</th>
<th>Amin Hanjani, Sepideh</th>
<th>Mascitelli, Justin</th>
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<tr>
<td>J Marco, Chair</td>
<td>Mocco, J</td>
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<tr>
<td>Baba Welch, Chain Elect</td>
<td>Niemela, Mika</td>
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<td>Michael Latour, Vice Chair</td>
<td>Nimjee, Shahid</td>
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<td>Clement Schirmer, Secretary</td>
<td>Ousman, Josh</td>
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<td>Amin Siddiqui, Treasurer</td>
<td>Graffeo, Christopher</td>
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<td>Schirmer, Clemens</td>
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<td>Garrett, Karen</td>
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<td>Siddiqui, Amin</td>
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<td>Ho, Brian</td>
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<td>Sinuva, Scott</td>
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<td>Howard, Brian</td>
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<td>Singer, Justin</td>
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<td>Huang, Judy</td>
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<td>Tjoumakaris,</td>
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<td>Khalessi, Alex</td>
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<td>Stavropola</td>
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<td>Lawton, Michael</td>
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<td>Veznedargh, Erol</td>
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<td>Levy, Elad</td>
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<td>Welch, Babu</td>
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<td>Mack, William</td>
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<td>Wolfe, Stacey</td>
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<td>Ziflet, Greg</td>
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**Guest Attenders**

- John Romanino (NREF)
- Rick Levy (CVS)
- Courtney Johnson (CNS Foundation)

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### Meeting Agenda

**Guests**

- NREF & AANS
- CNS Leadership & CNS Foundation

**Officer & Standing Committee Updates**

- Minutes from the CV Section CEB Meeting (Dr. Schirmer)
- Treasurer’s Report (Dr. Siddiqui)
- Fundraising Committee (Dr. Siddiqui)
- Membership Update (Dr. Mack)
- Nominating Committee (Dr. Ziflet)
- Bylaws/Rules & Regulations Committee (Dr. James)
- Website Committee (Dr. Romanino)

**Annual Meeting Updates**

- 2019 AANS Meeting (Dr. Simon, Tjoumakaris)
- 2019 CNS Meeting (Dr. Simon, Tjoumakaris, Washington, Osburn)
- 2020 CV Sect/SNIS (Dr. Bai, Simon, Tjoumakaris)
- 2020 ISIC (Dr. Huang, Kim, and Dovez)
- Robert J. Dempsey, MD Cerebrovascular Resident Research Award (Dr. Baskaya)
- CV Sect C Grant Research Award (Dr. Towhid)
- CV Traveling Fellowships (Dr. Towhid, Schirmer)
- Legacy Medal (Dr. Ziflet)

**Project Updates**

- PAM Annual Meeting (Dr. Cockcroft)
- IAC-Cardio Meeting (Dr. Cockcroft, Dr. Patel)
- Cerebrovascular CoR (Dr. Cockcroft, Amin-Hanjani)
- Brain Attack Coalition (Dr. Huang)
- JC Technical Advisory Panel RE: CSG certification (Dr. Bambakidis)
- Metrics and Milestones (Dr. Bambakidis)
- CNS Education Division (Dr. Bambakidis)
- CAG Training Standards (Dr. Siddiqui, Dey)
- DAHS (Dr. Siddiqui)
- Washington Committee (Katie Orrico, Dr. Woo)
- Coding & Reimbursement (Dr. Schirmer, Dr. Win)
- QOD (Dr. Connelly, Dr. Mocco)
- JG/CV Section Guidelines Committee (Dr. Welch)
- MOC Vascular Module (Dr. Siddiqui)
- SNIS Update (Dr. Arthur)
- SVIN Liaison (Dr. Jankowitz)
- International Liaison (Dr. Niemela)
- Newsletter Committee (Dr. Durovi)
- YNS Liaison (Dr. Howard)
- Resident and fellow courses (Dr. Kellner, Binning, Arthur, Mascitelli)
- EC meeting (Dr. Siddiqui)

**New Business**

- Guidelines Review Committee Policy Update (Hanjani)
- Strategic Planning (Dr. Mocco)
Meeting is called to order at 2:05pm
Meeting began with the CNS Guests:
Dr. Levy: I wanted to come thank the CV Section for their gift to the CNS foundation. The foundation works on guidelines, etc., & Philanthropy. Through this mission, we’re trying to elevate the standards of care. The mission is to bring Endovascular technology to areas where it didn’t exist. We’ve seeded the foundation with a million dollars, up to 200,000 of your donations will be matched, this is with a ROR at 5%.

AANS Guests:
Joanne B., wants to thank the CV section for their support of the honor your mentor fund. We also awarded the 2nd annual traveling CV fellowship. If there’s anything we can to assist with the promotion of the Honor your mentor funds, please reach out.

Any discussion on the minutes, motion was made to approve, second by Dr. Mocco, minutes were approved
We continue to do reasonably well from the standpoint of overall assets. There was one asset that went in the wrong direction which was related to a dip in our investment profile in December, which caused the above loss. I expect we will recoup most of this.
Our total revenue sources remain stable, registration as well as Annual Meeting Revenue. The meeting did quite well, which was surprising, we had anticipate some losses which did not materialize. It should be noted that we’ve only received about 4K of that. For the proposed budget of 2020, we are reducing the AM revenue based on divorcing from the ISC, but have not yet determined where it will land.
Our expenses remain very stable, at the point where when we give out awards, they don’t always impact our expenses right away, and some of which are still to be given. These numbers will go up as we go through the year.

The expenses did increase from 2018 due to some development of our website content. Total expenses look low because we have not received the total revenue or total expenses from the Meeting. Depending on that is where our next statement will come from.

NOTES TO FINANCIAL STATEMENTS
March 31, 2019

Balance Sheet

Account Payable & Current Liabilities: Actual $5,000

Contributions/Sponsorships

<table>
<thead>
<tr>
<th>Amounts:</th>
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<td>Christopher Getch – FY18</td>
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General and Administrative
Revenues

Contributions/Sponsorships – Budget $45,000, Actual $30,000

<table>
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<tr>
<th>Amounts:</th>
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<tr>
<td>Microvention</td>
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<td>Toshiba Medical Systems</td>
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Contributions for Operating Expenses: Budget $10,837, Actual $9,289
Financial Management $3,679
Membership Management $2,608

Annual Meeting: Budget $360,000, Actual $4,005
We received an additional $4,005 for CV Annual Meeting from 2016.

Some notes of things we continue to support.
We continue to contribute, and streamlined our awards.

These are some of our current awards. Most of these are funded by the section themselves.
We continue to encourage philanthropy. CNS Foundation is a similar effort from the CNS as NREF is from the AANS. NREF is geared towards research, CNS is geared more to education. I propose we get a CNS foundation report to include as part of the treasurers reports for the next meeting.

**Fund Raising Goals**

- Create a culture of philanthropy for the benefit of the CV Section
- Report during EC meetings on annual giving to the Section based on reports prepared by the NREF
- Encourage 100% participation by Section Officers
- Encourage 100% participation by EC members
- Encourage participation by Section members

**Current Awards**

Meeting reports that show all the CV contributions, donations, and individual giving to either NREF Research CV, Education CV, Outcome CV, and the CV Fellowship Travel. Starting 2018
These are all of the funds currently available.
Verbal report of nomination results, Chair-Elect is Adnan Siddiqui, Treasurer is Adam Arthur, Vice-Chair is Henry Woo, Member at Large is William Mack, & Nominating Committee Member is Peter Nakaji. Congratulations everyone.
CV Section Membership Spring 2019

CV Section Membership Statistics, as of 4/1/2019

<table>
<thead>
<tr>
<th>Member Class</th>
<th>Subclass</th>
<th>2019 Dues</th>
<th>2019 Members</th>
<th>2018 Members</th>
<th>2017 Members</th>
<th>2016 Members</th>
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<tr>
<td>Adjunct</td>
<td>60D</td>
<td>$100</td>
<td>43</td>
<td>40</td>
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<tr>
<td>Active</td>
<td>01S</td>
<td>$150</td>
<td>409</td>
<td>395</td>
<td>389</td>
<td>362</td>
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<tr>
<td>Lifetime/Senior</td>
<td>20S</td>
<td>$0</td>
<td>111</td>
<td>110</td>
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<tr>
<td>International</td>
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<td>$50</td>
<td>72</td>
<td>67</td>
<td>65</td>
<td>60</td>
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<tr>
<td>Medical Student</td>
<td>15M</td>
<td>$0</td>
<td>19</td>
<td>18</td>
<td>20</td>
<td>33</td>
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<tr>
<td>Resident</td>
<td>50R</td>
<td>$0</td>
<td>1,887</td>
<td>1,827</td>
<td>1,676</td>
<td>1,528</td>
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All membership numbers are up

NEW MEMBERS

<table>
<thead>
<tr>
<th>Active</th>
<th>Resident</th>
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<tbody>
<tr>
<td>Grzegorz Krzysztof Brzezinski, MD</td>
<td>Rabaii Akbar Qazi, MBBS</td>
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<tr>
<td>Verneal S. Fennell, MD</td>
<td>Anagha Prabhune, MBBS</td>
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<tr>
<td>Jesse Jay Savage, MD, FAANS</td>
<td>Francisco Javier Sanchez Gallardo, MD</td>
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<tr>
<td>John Entwistle, DO</td>
<td>Harry Pinson, MD</td>
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<tr>
<td>Ryan Alexander Zengou, MD, FAANS</td>
<td>Eid A Aljohani, MBBS</td>
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<tr>
<td>Aqueel Hussain Ranahey, MU</td>
<td>Jorge Alberto Miranda Barrera, MU</td>
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<td>Justin Allen Dye, MD, FAANS</td>
<td>Gani Akbar Qazi, MD</td>
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<tr>
<td>Thomas Morris III, MD</td>
<td>Yan Hua Sun, MD</td>
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<tr>
<td>David Krieger, MD, FAANS</td>
<td>Juan Carlos Gomez Vega, MD</td>
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<tr>
<td>Carolina Sandoval-Garcia, MD</td>
<td>Suresh Bishokarma, MBBS, MS</td>
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<tr>
<td>Jane Nq, MBBS, PhD</td>
<td>Christos Tsiatsianis, MD</td>
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<tr>
<td>Jan-Karl Burkhardt, MD</td>
<td>Eric Nyam Tee Tau, MD</td>
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<tr>
<td>International</td>
<td>Shadi AbuHaila</td>
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<tr>
<td>Amrit Thapa, MBBS, M5, MCh</td>
<td>Darjeev Arjyanath Greenivasan, MBBS, M3, MRC3</td>
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<tr>
<td>Dayyan Martin Chaviano, MD</td>
<td>Rita Di Bonaventura, MD</td>
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<tr>
<td>Guilherme Brasilheiro Aguiar, MD, MSc</td>
<td>Arthur Hossmann, MD</td>
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<tr>
<td>Ankit Sharma, MBBS, DNB</td>
<td>Deepak Khatri, MCh</td>
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<tr>
<td>Adjunct Associate</td>
<td>Xin Zhang, MD</td>
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<tr>
<td>Amanda Weil, APRN, CNP</td>
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<tr>
<td>Lori Cox, CCRN, MSN, NP</td>
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<tr>
<td>Elyna Leah Tenares, FNP-BC</td>
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These are the new members, residents are automatic
We have a far shorter list year than in years past

**CV Section Membership**

2017 Spine and Tumor sections

Gives AANS applicants the option to check a box when applying for AANS membership to advise us if they would become members of any of the sections.

Saves time for the sections: pre-vetted, pre-screened by the AANS Membership Committee, no further review is necessary.

Once the AANS applicant’s membership is approved, Kristin Zerfas (CV Section Coordinator) gets an automated report of who is to be given membership in the section(s) they requested.

This is a chance for people to automatically get enrolled, this will continue the membership drive.
Bylaws & Rules & Regulations Committee

Dr. Robert F. James (Chair)
Dr. Stacey Wolfe
Dr. Alex Spiotta

Rules and Regulation update

New resolution establishes a new standing committee: “The Dacey Medal Selection Committee” as well as defining rules for membership to the committee and the award selection process.

An amendment to the bylaws is required for all new standing committees and will create institutional memory related to the award.

Amendment to the bylaws approved by CV Section Membership April 05, 2019 with 97% approving (Vote Yes: 29 No: 1).

Resolution to Amend the Rules and Regulations of the AANS/CNS Cerebrovascular Section-Deadline April 5, 2019

Q2 Vote Yes or No

<table>
<thead>
<tr>
<th>Answer Choices</th>
<th>Responses</th>
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<tr>
<td>Yes: I support the resolution...</td>
<td>96.67% 29</td>
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<tr>
<td>No: I do not support this...</td>
<td>3.33% 1</td>
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TOTAL 30
Approved Amendment to CV Section Rules and Regulations

Next Steps
Submit to AANS and CNS parent organizations for final approval of change to CV Section Rules and Regulations

The above slides were reviewed
I’d like to thank those who have been contributing content to the social media accounts.

Website Committee

News/Social Media: Chris Griessenauer, Ning Lin, Justin Singer, Joey Linzey
Patients: Peter Kan
Members: Aditya Pandey, Chris Roark, Rabih Tawk
Meetings: Rose Du
Education: Justin Mascitelli, Daniel Heiferman
International: Leonardo Rangel-Castilla
Awards and Grants: Scott Simon
Research: Scott Simon, Josh Osbun

Website Committee

Contract with Vividsites
- Paid for 25hrs in Oct 2018 – 3750.00
- Used 5hrs as of March 2019

No outstanding invoices
-This is an overview of users
The above slides were reviewed
This is the most popular

Most people come to the site through an organic search
This shows how much comes through social media referrals
Annual Meeting Updates

2019 CV Section Meeting
Dr. Tjoumakaris
Dr. Simon
Dr. Bain
Dr. Tjoumakaris: I'd like to thank Mark Bain, we broke a lot of records.

Bill Mack: It was discussed in other forums to potentially move the meeting away from ISC. The initial call/thought is that there is a strong possibility to move the meeting to be in conjunctions with the SNIS meeting in July.

Question was raised: Who is opposed to this?

Bill Mack: There’s people who have concerns about size of venue, finances, etc. There’s not a specific person against it. We’re trying to make it a stronger by numbers.

Adnan Siddiqui: It’s not a decision being made, we are just exploring the possibility. We cannot explore the process without conversation from SNIS. We are also exploring other alternatives, both with the CNS & the AANS.

Bill Mack: This will be a decision made by the board and the task force.

J Mocco: I’d also emphasize that part of the thinking is empowering our membership to attend ISC. There are many that feel that having our meeting right in front of it takes away from their ability to attend.
Scientific Session 1 is tomorrow.

Second session is on Wednesday.
Saturday at CNS we’re going to have an all day symposium.
Dr. Schirmer reported on behalf of Dr. Baskaya, these are the two winners for this year's Dempsey award.

We would like to acknowledge and thank the following reviewers:

Dundan Sun, MD, PhD
Professor of Neurology
University of Pittsburgh

G. Edward Yates, MD, PhD
Professor of Neurosurgery, Endocrinology & Otolaryngology
University of Rochester Medical Center

Robert Friedlander, MD, MA
Chair, Walter E. Dandy Professor of Neurosurgery, Neurology & Neurobiology
University of Pittsburgh

Mustafa Baskaya, MD
Professor of Neurological Surgery
University of Wisconsin - Madison

Robert Dempsey, MD
Chair & Manscher Javid Professor of Neurological Surgery
University of Wisconsin - Madison
Dr. Schirmer: Dr. Khan gave his support at the annual meeting, and we’ve selected the next two winners. This is going well, but we need to double down on publicizing this a little bit. I welcome anyone’s suggestions on how to publicize this.

The Dacey medal presentation went really well. We’ll send out a nominations letter after this meeting to solicit nominations for the 2020 meeting.

Dr. Dacey is asking to no longer serve as the chair of that committee. The way that committee is structured, 1 person as to be a past winner. I’d propose Sander Connolly to be the chair of the committee, and stay on in a 3 year term. Maybe this coming year we could then determine who would take over for Dr. Dacey.

Dr. Zipfel: I motion that Dr. Dacey steps down after 1 additional year, and that Sander Connolly takes over.

Siddiqui: I second.

J Mocco: I second that Dacey serves as an additional year. All motions were seconded, and voted unanimously for approval.
The above slides were reviewed
CNS Foundation

Consider a donation to CNS Foundation
1. CNS Foundation General Fund
2. Fellowship Training Awards & Grants Fund
3. Guidelines Development Fund
4. Leadership in Healthcare Fund
5. NINDS/CNS Getch Scholar K12 Award

https://www.cns.org/about-us/foundation/donate

Neurosurgery PAC

Mission to support candidates for federal office who support neurosurgeons.
Makes direct campaign contributions to candidates for the U.S. Senate and the U.S. House of Representatives who are supportive of the issues important to neurosurgery.
Nonpartisan and does not base its decisions on party affiliation but instead focuses on the voting records and campaign pledges of the candidates.

https://myaans.aans.org/MyAANS/DonationPAC.aspx

A Arthur: I’ll be rotating off of PAC, but they’ve been doing great work.
Adnan Siddiqui: The section donates 10K to the Washington committee. Is that different from PAC??
Kevin Cockroft: yes, this is talking about individual donations.
J Mocco: Suggest taking our attendance sheet and sending them information on contributing to these organizations?
Adnan Siddiqui: One of the reasons we started doing this was to encourage people to donate more. Should we just have names up there?
Sepideh Amin-Hanjani: How does the mentor funds get utilized? The ones you mentioned are the ones the CV Section runs?
Clemens Schirmer: The answer depends on how the fund is set up, we don’t necessarily have control of this.
Kevin Cockroft: I count any donation
Alex Khalessi: I am a huge believer in philanthropy, and if we want to have a list thanking those who have donated, but it should not be considered in the nomination process.
J Mocco: I don’t think that’s the idea, it’s just one component
Greg Zipfel: I think the point is that we’re the leaders, one way we lead is by donating, and showing that contributing is one aspect that we are trying to promote. I think we’re heading towards that goal, but I agree that doing more than that is not the intent.
Adnan Siddiqui: there was a question of increasing membership. What if, instead of just dues, we include an option to donate, so that when people are writing a check they just write a bigger check?
Kevin Cockroft: Is there a way to designate to the CNS foundation?
Brian Hoh: Yes
J Mocco: I announced an initiate to do a CV Section matching effort, we’ve been in conversations with both NREF and CNS Foundation.
Intersocietal Accreditation Commission - Carotid Stenting

COCKROFT & PATEL

IAC - Carotid Stenting

Four accredited facilities.
- Three fully accredited for three years each.
- One received a 1 year provisional grant and has not provided corrective action plan yet to acquire the full granted accreditation.

One delayed application.
- Delays due to significant issues related to neuro testing pre and post CAS and follow up exams with duplex ultrasound and neuro testing.
- No corrective action plan submitted as yet.

One facility's accreditation expired April 30, 2018 and did not submit an application for reaccreditation.
Cockroft elected as Officer-at-Large for division board and Carotid Stenting Division representative to overall IAC board of directors.

IAC - Carotid Stenting

Four accredited facilities.

Three applications for reaccreditation in 2018
- One was granted as they had no discrepancies.
- One received a one year provisional grant and they were requested to submit their corrective action plans related to the neurological testing (mRS and NIHSS) pre and post carotid stent procedure and a follow up examination with duplex ultrasound and neurological testing (mRS and NIHSS).
- Accreditation was delayed in one. Facility did not have a quality improvement process. They also did not perform neurologic testing (mRS and NIHSS) pre and post carotid stent procedure and did not perform follow up examinations with duplex ultrasound.
The joint commission is torn about this, they are a little wary of what this means to them, so they approached BAC for their input. The BAC is wary of this request, we are on board with data collection, but not really supportive of the process.

Adam Arthur: Is this the opposite of the bypass which we’ve discussed? About taking patients to an Endovascular unit directly?

J Mocco: As someone who’s spent a lot of time working through these issues, I don’t see how this works, I don’t see how this is consistent or feasible. It’s so difficult to get agreement on basic certification things, I would not be supportive of this type of endeavor.

Nick Bambakidis: I agree, it’s a non-workable pathway based on this much information.

Brian Hoh: This is where Art is, the way he described it is we have this team that covers all these hospitals

Babu Welch: Was there some mileage requirement within these? Or it truly systems?

Judy Huang: It seemed this behavior was looking for input from BAC. The general feeling was this was a way for one system to gain an unfair advantage.

J Mocco: Is there an official message we should give?

Clemens Schirmer: we should tell them if they want to study this as research, they are welcome to, but to make it pilot.

J Mocco: I think we should tell them we would not support this.

Nick Bambakidis: it as the potential to wipe out what we’ve done

Clemens Schirmer: That’s the point, I think if they want to STUDY, they should study, but they shouldn’t convey it as a designation.

Adam Arthur: If they want to study, sure.

J Mocco: Sure, study, but make sure we tell them we think it’s a bad idea.

J Mocco: I motion that we provide a response that we do not support

Motion was seconded

All in Favor: Majority carried.
Nick Bambakidis: There's an ongoing discussion about stroke center certifications

There's also a discussion about enacting a system with regards to transport times that are 2—3 hours. It’s hard to say where they’ll go with it.

There’s also a discussion about CAST certification. The concern is that they may not be eligible for the practice pathway. There was an urging from members to re-engage with CAST about the certification requirements.

J Mocco: I think that we’ve been part of a great initiative in making CAST a thing, and we’ve gotten multi specialty buy-in. However, operationally, we are struggling in some of these things. They were a hair away from scrapping CAST completely based on a recent response letter. It is far from certain or locked in; it’s somewhat precarious, this is a real issue that we have the potential to lose the progress we’ve made.

We have to make sure that documents are not going out that completely contradict what we say. The letter in question is confidential. The other piece is that we have to realize that since we’ve gotten the Joint Commission to agree to some reasonable minimums, they are the best of the worst, and they are seeing substantial flight of institutions to DNV. Unless we can show value in keeping standards high, it’s going to be a problem.

Adan Siddiqui: There’s another arm in this, the department of health. It doesn’t matter who it is, whoever does the certification for the state needs to follow those regulations.
The only thing you’ll hear from me is about CNS Nexus, I would encourage you consider providing some cases to this initiative.
There are a few issues which have come up. For full disclosure, this was a discussion had at NESAC. People who are not CAST eligible who did their training outside of the US.

NESAC is going to morph into CSAC. In addition to those member’s, we’ll have additional members from each parent board. The certification will be provided by each of the individual boards. It looks like it is being adopted.

Total programs are above, we have an additional 15 applications in front of CAST.
Total programs are above, we have an additional 15 applications in front of CAST.

These are the current CAST members.
Adam was supposed to replace Dr. Howard, but Dr. Howard is staying, and we’re adding Adam as additional.

Our total number of applicants will be close to 300 by June.
Adnan Siddiqui: We have approved multiple Radiologists, but no one who only does mechanical thrombectomy. We have not considered volume, but at least some demonstration that you have some kind of endovascular practice. The issue was, they were complete against creating a clear and absolute formula. They were worried about people gaming the system. It mostly is about leaving it to expert for discussion and consensus.

J Mocco: A new president of SIR just took over at their last meeting, Adam and I have been having conversations with her about these paths. She has said she would be open to agreeing that someone who trained within their residency that someone would have to do a 1 year fellowship after that training. What we’d have to decide is what they’d have to do during those other 6 years.

Alex Khalessi: If we don’t come up with a pathway for future trainees, that opens up some exposure.

Brian Hoh: It doesn’t matter what you do during your residency, you have to have done your fellowship training at a CAST accredited fellowship.

Adnan Siddiqui: For a proposal, I would say the CAST document should include the pre-requisite Adam Arthur: We agree with that

Brian Hoh: The thought process behind what went into that, after group discussion, was that there was something about having a neuro background that mattered.

J Mocco: SIR also presented their document for stroke treatment, but didn’t give us a chance to actually read it.
We are excited to announce the merger of NVQI and QOD, our hope is that we would be doing a few things, including reaching out to CMS to get some funding.
J Mocco: We are synergizing QOD, and hopefully we will continue to drive the field towards better collaboration.

Kevin Cockroft: You’ll be getting letters about this merger, pricing has not yet been worked out.
The above top three will be rotating off this year

There was a guideline that came out that they wanted us to review. The other interesting thing is that CTA and CP should be clarified.

No report
SNIS Update

Board of Directors

Adam Arthur, MD  
Richard Kluza, MD  
William Mack, MD  
G. Lee Price, MD  
Guinemer Galus, MD  
Michael Chen, MD  
Jamek Milksari, MD  
Peter Kan, MD  
Gabor Toth, MD  
Blaise Baxter, MD  
Donald Frei, MD  
Mahesh Jayaraman, MD  
J Mocco, MD  
Sandra Narayanan, MD – ex officio  
Felipe Alvarado, MD – ex officio  
Sameer Anwar, MD, PhD – ex officio

Cooperative Projects

- Brain Attack Coalition – Stroke care issues
- Cerebrovascular Coalition – Neurovascular issues
- ACGME Endovascular Surgical Neuroradiology Fellowship/CAST
- Meeting programming
- Standards

Standards of practice in acute ischemic stroke intervention: international recommendations

- American Stroke Association, American Heart Association
- AHA/ASA Guidelines Committee
- American Society for Neuroimaging
- American Society of Neuroradiology
- Australasian Society of Neuroimaging
- Canadian Neurological Society
- European Society of Neuroradiology
- European Stroke Organization
- German Society of Neuroradiology
- German Stroke Society
- International Stroke Commission
- International Stroke Academy
- International Stroke Initiative
- International Stroke Society
- International Stroke Federation
- Japan Stroke Society
- Korean Stroke Society
- Latin American Stroke Society
- Mexican Stroke Society
- South American Stroke Society
- Turkish Stroke Society
- World Federation of Neurology
- World Stroke Organization
- World Federation of Neurointerventional Surgery
- World Stroke Organization (WFO), World Federation of International Neurology (WFN)

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• Governing Council has been formed:
  Ø From QOD: Adam Arthur, Sander Connolly & Kevin Cockroft
  Ø From NVQI: Sameer Ansari, Shazam Husein & J. M. M. O'Brien

• Working to integrate the two registries

• We look forward to reporting on this further in future meetings

• Launched in May 2016
  • Campaign is focused on organizing stronger stroke systems of care nationwide.
  • Goal is to enact legislative change in all 50 states requiring EMS to take ischemic stroke patients with large vessel occlusion to neurointerventional-ready hospitals with 24/7/365 coverage.

Meetings

AANS/CNS Joint CV Section Annual Meeting
February 4-5, 2019
Honolulu, HI
Final attendance: 413

SNIS 16th Annual Meeting
July 22-25, 2019
Miami, FL
Publications - Journal Update

Initial publication: July 2009 as a quarterly journal
Indexed in Thomson-Reuters 2010
2017 Impact factor 3.524
Pub Med/Medline indexing September 2011

Editor-in-Chief, Felipe C. Albuquerque, MD

Societal Converging Goals

- Pay for performance evaluation and issues
- Medicare reductions in payment
- Standards of practice – stroke, carotids, aneurysms
- Defining the appropriate randomized trials
- Coding
- “Comprehensive Stroke Center” designation
- Refining standards of training in Endovascular (CAST)
- Generating resident interest in Neurovascular

SNIS Update Summary

Healthy membership growth of this multi-disciplinary society

Successful annual meetings and continued involvement with CV Section
The next SVIN meeting is in November.

Meeting Chairman
Lucas Elijovich
lelijovich@semmes-murphy.com
Cell 646-831-6584
They are officially looking for a new journal to be affiliated with.

J Mocco: JNS Reached out to them and offered to partner with them, and they said no.
International Liaison Mika Niemelä

EANS vascular and ESMINT, Nice September 4-6, 2019
-5 AANS/CNS speakers and 5 moderators
-Joint day the 4th, EANS vascular 5-6th

Newlsetter Committee
Dr. Ducruet
-Verbal Report
YNS Liaison
Dr. Brian Howard

Tomorrow’s our second annual YNS Luncheon
JM: We had a successful fellows course at the CV Section. We’re beginning to plan the same fellows course for the SNIS meeting.
Adnan Siddiqui: The meeting is a little earlier this year.
New Business

The JGRC, which all sections participate, went through a process of updating their governance process. A new administrator has also joined the JGRC.

CPG = Clinical Practice Guidelines

The JGRC is the body that is asked to review guidelines, and make a recommendation.
CPG = Clinical Practice Guidelines

JGRC: now having a new admin can be a good point of communications to help sections corral things back to the parent organizations
Section Endorsement Wording: non EBM documents

- **Section Affirmation (after parent organization approval):**
  - “The American Association of Neurological Surgeons/Congress of Neurological Surgeons [insert joint section name] affirms the educational benefit of this document.”

No Endorsement Wording

- **Section Review (not approved):**
  - “This document was reviewed, but not endorsed by the American Association of Neurological Surgeons/Congress of Neurological Surgeons [insert joint section name].”

- **JGRC Review (not approved):**
  - “This document was reviewed, but not endorsed by the American Association of Neurological Surgeons and Congress of Neurological Surgeons.”
First bullet point notes: Additional liaisons will be appointed from the CNS guidelines committee and other specialty organizations as needed. Each section/entity is allotted 1-9 appointees based on the size of their membership and guideline productivity. Each term is three years in length and may be renewed at the direction of the nominating entity.

Third bullet point notes: EBM = Evidence Based Medicine, Members may also provide evidence of equivalent prior training. This training must be documented before participation in review activities for the JGRC.

There is an attempt made within leadership to retain section leadership. It is important to think about folks who would be good candidates to go down the JGRC Leadership path, which is a lengthy path (8-10 years)
First bullet point notes: Additional liaisons will be appointed from the CNS guidelines committee and other specialty organizations as needed. Each section/entity is allotted 1-9 appointees based on the size of their membership and guideline productivity. Each term is three years in length and may be renewed at the direction of the nominating entity.

Third bullet point notes: EBM = Evidence Based Medicine, Members may also provide evidence of equivalent prior training. This training must be documented before participation in review activities for the JGRC.

Each representative has a term, which is renewable, in that request the JGRC will indicate if those people have been active or not. If someone is chosen as a section guidelines chair, it makes sense to have that person be added to the JGRC.

Individuals do need to undergo some training, they are asked to volunteer as experts for all types of documents. It’s important to have people who understand their role is multifunctional.
Role and Intent

JGRC also

- Facilitate communication regarding guidelines topics to and from the subspecialty sections’ representatives
- Provide representatives to work with outside professional organizations producing multidisciplinary guidelines in areas related to neurosurgical practice
- Serving as a resource for the Washington Office and AANS/CNS leadership, regarding evidence-based guidelines

JGRC Staff Support

- The JGRC is staffed by a consultant administrator
  - handles communications between the JGRC and Joint Sections, Washington Committee, AANS/CNS leadership, and other appropriate neurosurgical committees or organizations
  - tracks ongoing projects
  - identifies neurosurgical volunteers to serve on writing committees
  - to ensure that the AANS and the CNS are consulted at an early stage on projects relevant to neurosurgery
- Contact Info: Kirsten H. Aquino – kheinalaquino@gmail.com

Notes: Suggest people make note of contact info and encourage them to keep JGRC in the loop on any Guidelines related efforts.
New business Item: Clemens Schirmer, there is a focus month, vascular, Justin Singer would like to feature a video about stroke. We’d like to see who is interested in participating in this. We’ll try to follow this up with an email as well.

Motion to adjourn made at 3:47pm, second by J Mocco.