Creating a Patient Registry for the Parkview Vein Clinic

Katrina Fliotsos[1], Michael GeRue[2], David Sowden[3]

[1]Indiana University School of Medicine; [2]Parkview Heart Institute; [3]Parkview Physicians Group—Cardiovascular Surgery

Background/Objective: The Parkview Vein Clinic provides individualized care to patients suffering from venous disease by providing assessment, education, treatment, ultrasound imaging, and surgical interventions all under one roof. The Vein Clinic has experienced a consistent increase in patient volume since opening in 2019, creating a need for tracking patient outcomes. Patient registries are useful tools for tracking high volumes of patients, assessing outcomes, and improving treatment guidelines. The main objective of this quality improvement project is to define the workflow for creating a patient registry for the Vein Clinic and determine which data points are feasible to collect.

Methods: This is a retrospective chart review of patients with the diagnosis of "venous stasis ulcer" seen at the Vein Clinic from September 2019 to July 2022. A total of 84 data fields were collected on each patient, including information on demographics, medical history, ulcer descriptions, imaging, procedure information, and post-procedure follow-up. The Society for Venous Surgery Vascular Quality Initiative was used as a template for registry design, with the goal of merging the registry with the national database in the future.

Results: Venous ulcer information, including number of healed ulcers, duration of ulcer, and largest diameter active ulcer, was not readily accessible within the chart and required expanded review find and quantify. All other categories were readily accessible in the chart.

Conclusions: The data collected by the registry will be useful for future quality improvement purposes of the Vein Clinic. Creation of a structured reporting template in Epic would help facilitate the ease and accuracy of data extraction and help maintain the internal validity of the registry. More detailed follow-up assessments should be implemented to track patient outcomes, which could include use of the Venous Clinical Severity Score or a patient-reported outcomes assessment.