

## Building a Vascular Lab Physical Space Equipment Protocols Structured Reporting Image Storage Personnel Record Keeping Quality Control Accreditation Maintenance

### Physical Space

- ▶ Hallway and door spacing
- ▶ Size of exam rooms
- ▶ Design of the space
- ▶ Lighting
- ▶ Amenities























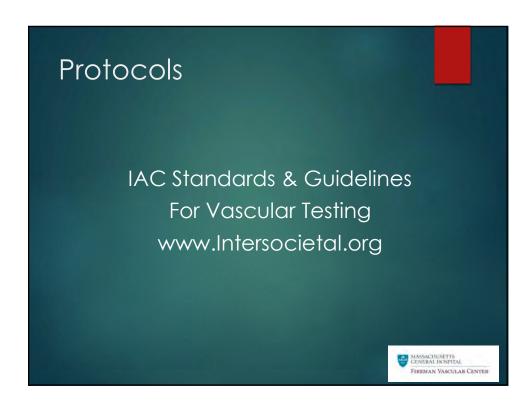


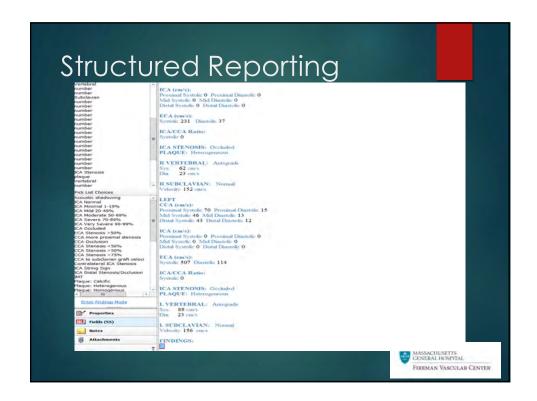
## The Hallmarks Extracranial Cerebrovascular Duplex Lower Extremity Venous Duplex Lower Extremity Arterial Physiologic Exam Lower Extremity Arterial Duplex

### ▶ Frequently Used ▶ Renal Artery Duplex ▶ Lower Extremity Venous Reflux Duplex ▶ Abdominal Aorta / IVC Duplex ▶ Upper Extremity Arterial Physiologic Exam ▶ Upper Extremity Venous Duplex ▶ Transcranial Doppler (Imaging or non-imaging) ▶ Bypass Graft / Stent Duplex

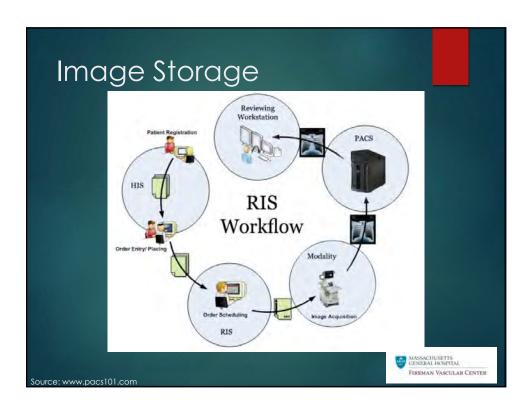
# ▶ Occasionally Used ▶ Mesenteric Artery/Vein Duplex ▶ Arterial Duplex for Aneurysm/Pseudoaneurysm ▶ Hemodialysis Fistula Duplex ▶ Palmar Arch Testing ▶ Raynaud's and Thoracic Outlet Testing ▶ Vasomotor Reactivity Testing











## ▶ Medical Director ▶ Licensed MD or DO ▶ Must meet one or more levels of training/experience ▶ Physician Credential for Vascular Interpretation (RPVI or ASN) ▶ Formal Training ▶ Informal Training ▶ Established Practice

## ▶ Technical Director ▶ Credentialed in appropriate area of vascular testing ▶ Appropriate level of training meeting minimum testing volume standards in each area

# Personnel Dersonnel Technical Staff Credentialed in appropriate level of training – meeting minimum testing volume standards Provisional – new graduate from an established program who must obtain credential within one year from date of graduation





- Volume Requirements (in each testing area)
  - Extracranial Cerebrovascular Testing 100
  - ► Intracranial Cerebrovascular Testing 100
  - ▶ Peripheral Arterial Testing 100
  - ▶ Peripheral Venous Testing 100
  - ▶ Visceral Vascular Testing 100

Practice can choose which areas of testing in which to obtain accreditation



## Record Keeping The patient Name MRN Ultrasound Results CTA Results MRA/MRI Results Angiogram Op Report Correlation The patient Name MRN Ultrasound Results CTA Results MRA/MRI Results Angiogram Op Report Correlation The patient Name MRN Ultrasound Results CTA Results MRA/MRI Results Angiogram Op Report Correlation The patient Name MRN Ultrasound Results CTA Results MRA/MRI Results Angiogram Op Report Correlation The patient Name MRN Ultrasound Results CTA Results MRA/MRI Results Angiogram Op Report Correlation The patient Name MRN Ultrasound Results CTA Results MRA/MRI Results Angiogram Op Report Correlation The patient Name MRN Ultrasound Results CTA Results MRA/MRI Results Angiogram Op Report Correlation The patient Name MRN Ultrasound Results CTA Results MRA/MRI Results Angiogram Op Report Correlation The patient Name MRN Ultrasound Results CTA Results MRA/MRI Results Angiogram Op Report Correlation The patient Name MRN Ultrasound Results CTA Results MRA/MRI Results Angiogram Op Report Correlation The patient Name MRN Ultrasound Results CTA Results MRA/MRI Results Angiogram Op Report Correlation The patient Name MRN Ultrasound Results CTA Results MRA/MRI Results Angiogram Op Report Correlation The patient Name MRN Ultrasound Results CTA Results MRA/MRI Results Angiogram Op Report Correlation The patient Name MRN Ultrasound Results Angiogram Op Report Correlation The patient Name MRN Ultrasound Results Angiogram Op Report Correlation The patient Name MRN Ultrasound Results Angiogram Op Report Correlation The patient Name MRN Ultrasound Results Angiogram Op Report Correlation The patient Name MRN Ultrasound Results Angiogram Op Report Correlation The patient Name MRN Ultrasound Results Angiogram Op Report Correlation The patient Name MRN Ultrasound Results Angiogram Op Report Correlation The patient Name MRN Ultrasound Results Angiogram Op Report Correlation The patient Name MRN Ultrasound Results Angiogram Op Report Correlation The patient Name MRN Ultrasound Results Angiogram Op Report

### Record Keeping

- Quality Assurance Meetings
  - All staff may participate in validation of interpretation criteria
  - ▶ Two staff QA meetings per year (minimum)
  - ▶ Engage staff in "interesting cases" huddles
  - IAC website many resources for staff meetings and sample templates for recording meeting minutes
  - CME's all staff must meet minimum requirements



### IAC Accreditation

...One Year Later
You're ready to begin the ...

IAC Accreditation Application!







