The meaning of life is to find your gift; the purpose of life it to give it away.
-Pablo Picasso

One of the great and consistent joys I find in talking to fellow technologist across the nation is the overwhelming pride and love they share for their career. Watching a natural passion grow into a successful career that positively impacts so many is a beautiful thing.

That passion drives our innovation, our growth, and our patient outcomes. As the Society of Interventional Radiology so elegantly stated, we possess the vision to heal. A vision that sees beyond traditional treatment options for patients and consistently seeks better for them. Our unique role as technologists, as experts in patient care, procedures, and inventory, allows us to play an integral role in furthering that vision.

Today, as a result of the vision of those before us and their willingness to “give their gift away”, we continue improve the way millions of patients receive care. We provide invaluable services from lifesaving access, to tumor ablation, to aortic reconstruction, to every demographic of the patient population.

The goal of the AVIR is simply an extension of the personal goals of so many IR technologists around the globe; to provide world class education and resources that enable us to continue to be able to efficiently, safely, and effectively care for our patients, as well as advance our field through research and understanding. Our role is to provide you outlets and opportunities to further your career, and channel your passion.

As you browse through this edition of the Informer, I would encourage you to pay special attention to the opportunities for you to become more involved in the AVIR, either through individual efforts, such as submitting a poster, or attending an abstract writing class, by championing a local chapter, or by joining the AVIR Board of Directors at the national level.

Through your invaluable contribution as a member, the AVIR will continue to grow as a leader in education and an advocate for technologists and their unique and irreplaceable skillset.

Enjoy your summer.
Alisha Hawrylack RT(R)(VI)
President, AVIR
I think it’s safe to say that our Board of Directors held an exceptional Annual Meeting in Washington DC. From the Breakfast with Leadership Series, the Poster Presentation Session, the panel discussions, to the presentations on transplant organs, international IR, and research innovations were some of the most remarkable education sessions I’ve been privileged to be a part of. Anyone that was able to see The Best Case of My Career: A Sit Down with the Experts panel will understand where I’m coming from when I say that I was enamored over the immense intelligence, collaboration, and camaraderie that played out before me.

I am beyond elated to transition into my new role as the Chairman of the Education Committee. The Education Committee as well as the AVIR Board have been very proactive in invoking change within our organization and the opportunities available to our membership. If you haven’t logged into the new Education Portal within our website, please do so! Each month we are updating our online directed readings available to you for CE credits. Our partner, Medlantis has also been diligent on updating their webinars available to AVIR members each month. Many presentations from our D.C. annual meeting have been featured. Please don’t forget to use your monthly coupon code to obtain your CEs from Medlantis for FREE.

**NEW Online Directed Readings:**
- Arterioportal Fistulas in Liver Transplant Patients
- Preliminary Outcome of Microwave Ablation of Hepatocellular Carcinoma: Breaking the 3-cm Barrier?
- Cryoablation of Osteoid Osteoma in the Pediatric and Adolescent Population
- Endovascular Stroke Treatment of Acute Tandem Occlusion
- Prostate Artery Embolization via Transradial or Transulnar versus Transfemoral Access
- Paclitaxel-Coated Balloons for the Treatment of Symptomatic Central Venous Stenosis in Dialysis Access

**Just in! The AVIR Now Offering an Online VI Board Review and Mock Registry Exam!**

Are you interested in taking your Vascular and Interventional certification exam? If you’ve done any research on study materials for this grueling exam, you’ve more than likely been disappointed with outdated mock exams and textbooks from the 90s. For years, there has been a lack of relevant study materials. With the ever changing procedures and inventory within our unique field, the AVIR recognized this was an area for opportunity to provide more for our members. For years we have provided a VI Review and Mock Registry Exam led by our current President, Alisha Hawrylack at our annual and regional meetings… but we recognize getting to these meetings isn’t always realistic for all of our membership. Don’t worry- we’ve got you covered!

The AVIR and Education Committee are very excited to announce that we now provide a 4.0 CE credit video-led online VI Review and Mock Registry Exam. The video content and mock registry are up-to-date and relevant to the current ARRT VI examination. We are confident you will be ready to pass your VI certification exam after our Board Review Course!

**Our review includes:**
- Patient Care and Pharmacology Review
- An In-Depth Look at Vascular Anatomy and Pathology
- A Review of Inventory Vital to Our Field Including Diagnostic and Implantable Devices
- Review of Routine and Complex Interventional Procedures
- A 120-quesiton Mock Exam with Answers

Do you have questions regarding your Education from the AVIR or your ARRT VI Certification Exam? Our Education Committee is happy to help!

**AVIR 2017 Education Committee**

Kristen Welch, RT, R, VI
Kristenavir@gmail.com

Brian Holben, RT, R, VI
bmh2085@gmail.com
Who’s already psyched for LA?! After reading through the survey results from DC I’ve been busy planning the anticipated lineup of presentations for 2018. Every year we go to the extreme to provide our members with the latest technology breakthroughs in IR and next year will be no exception! Start looking at flights early because you don’t want to miss this opportunity.

Kristen Welch and I had a brief excursion to the sunny pacific coast in May to get the lay of the land for our annual meeting adventure headquarters. A whirlwind of only two days but we met with SIR executive council and a few ARIN board members to visit the Los Angeles Convention Center in preparation for the upcoming meeting.

Again we will host our poster presentations so get your abstracts in before the deadline! We are planning to hold a few concurrent sessions and many half hour presentations to keep our audience engaged. A few topics going to be included are: Embolization: past, present, and future, DVT/Thromboembolism/PE, Women’s Health, RF/Cryoablation, and many more. Working with our Director at Large, Mike Kelly, we are also planning on having a discussion among the local chapter heads for brainstorming and creative ideas among each other. Stay tuned to our website and monthly emails for updates.

CITY OF ANGELS- HERE WE COME LA!!

Stefanie Rockwood RT(R)(VI)
Annual Meeting Chair
Our star-studded cast of interventional radiology super stars is headed for the City of Lights next year ... AVIR's annual meeting will be held in conjunction with SIR in LA from March 17-22, 2018! Sprinkled among the starlets and paparazzi will be an amazing list of world-renowned physician speakers. With restaurants and entertainment that's second to none, why would you miss out? Well, if you need a little more convincing, here are the Top 10 reasons you should head out west to "La La Land" for an amazing educational opportunity....

10) Unbelievable selection of restaurants within walking distance of the host hotels and convention center. Take your pick from The Palm Steakhouse and Katsuya Sushi to El Cholo Mexican and The Original Pantry breakfast joint. Whatever suits your palette, you'll find it nearby!

9) HOLLYWOOD! If your brain is getting full and you need a short break from all of the wonderful education, you can visit all things Hollywood as in the Hollywood Walk of Fame, the Hollywood Bowl, Hollywood Boulevard, the Hollywood sign, Madame Tussaud's Hollywood wax museum, and more!!

8) You might catch a glimpse of something being filmed. To date, the LA Convention Center has been the set of hundreds of commercials, movies, and photo shoots. Maybe you'll be "discovered!"

7) Add a day or two to your trip so you won’t miss some of the best amusement parks in the world like Disneyland and Universal Studios. Visiting Mickey and friends coupled with typical, nice weather in southern California is something that shouldn’t be missed!

6) Panel discussions that you won’t find anywhere else. If you weren’t in DC for the 2017 meeting, you missed out on the “best case of my career” panel. Dr. Janice Newsome from Emory didn’t leave a dry eye in the house with her touching case presentation. Plus, it was very cool to watch her interact with her mentor, “Dr. B” (as she called him) otherwise known as Dr. James Benenati from Miami Cardiovascular Institute. Also, Dr. William Rilling from the Medical College of Wisconsin discussed placing a drainage catheter for a fetus in utero. (I’ve been around IR for almost one and a half decades and have never heard anything like the information that was presented during this panel session!)

5) Credits for attending the SIR sessions as well! AVIR provides CE’s for all of the SIR sessions so you can get credits for supporting your attendings or simply exploring topics outside the AVIR speaker schedule. Get more “bang for your buck” when you attend AVIR & SIR!!

4) Need more sight-seeing distractions? Don’t miss Griffith Park & Observatory, Santa Monica Pier, amazing art museums, the list goes on and on!

3) Networking opportunities! You will meet people from all over the country who deal with the same “highs and lows” that you face. It’s always great to talk with others who may have a different way to handle some of the same issues.

2) VI Board review and mock exam presented by the beautiful and talented Alisha Hawrylack. You will learn what you need to know to head into the VI boards with confidence.

And the number one reason you should go to LA for AVIR’s Annual Meeting is.....

1) Unparalled educational opportunities specific to interventional radiology and the chance to see real stars in action like our gold medal lecturer, Dr. Wael Saad, Dr. Michael Miller talking about service excellence, Dr. Mark Lessne from Carolinas Medical Center and his “Twitter case files” year in review, Dr. John Aruny from Yale discussing pulmonary AVM, and many, many more!
Collaboration among staff is the foundation of the success of any team and it is a skill we utilize daily in Interventional Radiology. Healthcare is a dynamic profession in which doctors, nurses, technologists, and other healthcare team members with expertise in different arenas must collaborate, communicate frequently and share resources. Our multidisciplinary teams are made up to manage the increasingly complex and specialized needs of the patients we treat who are suffering from multiple healthcare problems. In Interventional Radiology the healthcare team is made up of a variety of professionals, each with specialized knowledge, responsible for diverse tasks who communicate often and work together towards a common goal of excellent patient care. By practicing the old adage “Two heads are better than one” we collaborate as equals utilizing the skills and experience of our staff to function as a team to effectively deliver a higher level of patient care.

Looking around your own department and you can see collaboration occurring constantly in the IR department. We pool resources in IR through continuing education presentations for staff and collaborative posters showcasing the cutting edge research inherent in our Interventional Radiology departments. Schedulers working with the physicians changing schedules to rearrange patient appointments to satisfy both the MD’s and the patients in the process. The morning report highlighting key issues about the days scheduled patients attended by a Charge MD, Tech and RN who then disseminate resulting information in morning huddle to the department staff on the unit that day. We see collaboration in our complex cases that involve staff from the Anesthesia department, Nuclear Medicine department, Pathology department as well as Cryoablation, Radio frequency ablation or IRE support staff. These cases involve additional equipment added to the lab that can create logistical challenges requiring accommodation as well as the education of personnel who may be unfamiliar with the IR Lab environment and procedure involved. The greatest collaboration occurs in our department during difficult cases such as acute endovascular stroke treatment, acute trauma management, anaphylaxis or an unexpected code blue. During these challenging cases our entire IR team comes together, all hands on deck, assuming varied roles and coordinating treatment of the patient to obtain the best possible outcome. I am so very fortunate to work in Interventional Radiology, an immensely collaborative department, working together for a common goal of exceptional patient care.

Speaking of collaboration, we would love to hear about the awesome collaboration your IR staff is involved in. Why not collaborate with colleagues and present a poster at the AVIR annual meeting in Los Angeles California in March 17-22nd 2018. Poster presentations are a fantastic tool to enable the swift communication of scientific ideas. Poster presentations should visually guide the audiences through the basics of the information displayed on the poster board while the presenter focuses on explaining and clarifying the key elements and answers viewer questions. The poster presentation format is less formal and more interactive than an oral lecture because it provides the opportunity for the audience to engage in discussion and have one-on-one interactions with the viewers and the presenter. As a result, poster sessions offer the prospect of new collaborations to be developed among colleagues.

AVIR awarded 1st prize in two separate Poster Presentation categories at the 2017 annual meeting in DC. The winner of the Educational Poster was Samantha Kobeissi for Iatrogenic Vascular Access Pseudoaneurysm: Spectrum and Treatment Techniques. The winner of the Scientific Poster was Schlena Jones for Clinical Evidence of the Endovascular Treatment of Intracranial Aneurysms with Newer Generation of Hydrogel Coils. The winners have shared their spectacular abstracts and posters presentations with us in our AVIR newsletter to encourage others to take the leap into presenting a poster at the 2018 annual meeting.
If you would have told me that six months into my Interventional Internship I would be sitting in a conference room in Washington DC among colleagues from across the country, listening to the Dr. Waltman give a presentation on the history of IR, I would have thought you were crazy. Attending the annual AVIR meeting was definitely something I hoped for my future, but figured it’d be quite some time before I would be able to attend. My experience at Annual Meeting was nothing short of what I had hoped it would be. In fact, it surpassed my expectations by a long shot.

When I was first notified that I was the recipient of the President’s Award of Educational Excellence a couple of emotions took over me. First and foremost I was excited. I was so excited that I would be attending the Annual Meeting held in conjunction with SIR. I couldn’t believe that I had been chosen as the recipient the first year of this prestigious award and honored to accept the invitation. I had no idea what I was about to experience but I was ready to dive into this unexpected journey.

I was given the opportunity to listen to physicians from around country (and world) give presentations about the history of IR, new equipment, latest procedural techniques, research, and their overall passion for IR. This had me mesmerized. Here is a field that I had chosen as my career, one that I am just beginning to find my footing in, and I am able to be in the same room as all of the people that have paved the way for IR.

I was in a room full of technologists and nurses who treat Interventional Radiology with so much passion. IR is far from being just a job for them and you can tell that by the tone in their voice and participation throughout the conference. They were asking questions after presentations, discussing posters on new ideas, procedures and equipment and networking with fellow technologists/nurses to improve their own practice.

My time at the AVIR annual meeting was one of the most inspiring experiences I have ever had. I was motivated to get involved, maybe I could submit my own abstract next year! Being able to be a part of this event as an intern was very special. I realized that there was so much more to the IR community than I was aware of. To see the collaboration between the technologists, nurses and physicians made me recognize that I had chosen my career well. I would hope and suggest that all technologists, new and experienced should attend this event. My time at the AVIR annual meeting was one of the most inspiring experiences I have ever had. I was motivated to get involved, maybe I could submit my own abstract next year! Being able to attend, made me realize how proud I am to be a part of such a unique field. Above all I believe that it’s the people who work so hard to better the lives of our patients that truly make the difference. I was so honored to be able to attend such an unforgettable event and I can’t wait to experience it again!

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1 Pain Physician 2014 Jul-Aug; 17(4):317-27
3 J. Vasc Interv Radiol 2015; 18: 573-581
4 Pain Physician 2015; 18: 573-581
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**Care for More Patients:** Optimized profile and new configurations provide tailored delivery options for a broader range of patient anatomy

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Each year the VIR recognizes thought leaders within our dynamic field of Interventional Radiology. We were delighted to award the Shari Ulman Gold Medal Lecture, the AVIR Award of Excellence, and our newest addition; the President’s Award of Educational Excellence at our 27th Annual Business Meeting in Washington, DC.

**2017 Shari Ulman Gold Medal Lecture Award**

**John Fritz Angle, MD, FSIR**
University of Virginia

This Award is named after one of our organizations’ founding members, Shari Ulman. Without Shari’s unwavering dedication, countless efforts and commitment, this organization would not be in its good standing we are today. She held numerous Board of Directors positions such as Secretary/ Treasurer, Vice President, President and Immediate Past President. Shari played a key role in ensuring the AVIR with had a strong foundation and financial stability. Shari continued her commitment to the organization as the External Liaison working on the Care Bill. She was instrumental in helping to direct the content of that bill and lobbying in Washington DC. She believed so strongly in the need for this bill she never let up or gave up…much like her own life. In 2008 Shari lost a two-decade long battle with breast cancer. Each year we recognize a physician with outstanding and extraordinary contributions to the AVIR and Interventional Radiology in Shari’s name. This year, we were very thrilled and honored to present this noble award to Dr. John Fritz Angle.

Dr. Angle completed his medical education with the University of Nebraska. He completed his residency at Truman Medical Center in Kansas City, Missouri. He finished his Vascular and Interventional Fellowship at the University of Virginia, where he is currently a Professor and serves as the Director of Vascular and Interventional Radiology.

Dr. Angle has been acknowledged both nationally and internationally as a leader within our field. He has been rated as one of the Best Doctors in America consistently for the last five years. He has been recognized by his peers for the Outstanding Clinical Faculty Excellence Award at the University of Virginia. He is a reviewer for multiple journals including Radiographics, the Journal of Vascular and Interventional Radiology, Catheterization and Cardiovascular Interventions, Journal of Endovascular Therapy, and Radiology. Dr. Angle served as the Scientific Program Chair for SIR in 2014. He was inducted as a Fellow of the Society of Interventional Radiology in 2014, and has served on several other committees within the society. Please join us in congratulating Dr. Angle on this prestigious Award.

**2017 AVIR Award of Excellence**

**Debra Barnes, BS, RT, R, CV**
Froedtert & the Medical College of Wisconsin

The AVIR Award of Excellence is given each year in an effort to recognize an outstanding technologist. This technologist consistently goes the extra mile and the award is particularly prestigious because the recipient is nominated by their peers. The award winning technologist has an unwavering dedication to patient care, exemplifies exceptional leadership, and demonstrates a true commitment and loyalty to Interventional Radiology.

This year we are proud to present this award to Debra Barnes. Debbie is the Lead Clinical Interventional Technologist at Froedtert and the Medical College of Wisconsin. Debbie has numerous contributions to our field and this organization. She has been a co-chair for one of our largest chapters; the Southeastern Wisconsin chapter of the AVIR since 2011. In this role, she has given presentations and organized several regional conferences.

Debbie shows a true commitment to bettering Interventional Radiology every day. Of all her accomplishments, the most notable is that she serves as the Program Director for Froedtert’s IR Internship that she developed and launched 12 years ago. In this program, Debbie has successfully trained 35 interventional technologists. She has been recognized by her peers for her true love and loyalty for our specialty that is contagious to everyone around her. She has impacted so many young minds, and these people will serve as our field’s next generation of Interventional professionals. We are very honored to name her our 2017 Award of Excellence recipient.
2017 Inaugural President’s Award of Educational Excellence

Melinda Mondrawickas, RT, R
Froedtert & the Medical College of Wisconsin

We were very pleased to award our very first recipient, Melinda Mondrawickas the President’s Award of Educational Excellence. This award was designed to honor a VI student who demonstrates a passion for Interventional Radiology through their commitment to patient care, research and innovation, and pursuit of continued learning.

Melinda is currently and Vascular and Interventional intern at Froedtert and the Medical College of Wisconsin. During this rigorous 10-month program the interns are paired with a senior level technologist and are expected to immediately participate in staffing complex interventional procedures.

Melinda is described by her preceptors and peers as someone who consistently challenges herself, calmly approached difficult and stressful situations, and easily applies her knowledge and skillset into practice. Her hard work and dedication to education are consistently recognized by her colleagues and the physicians she works with every day. She has a constant positive attitude, is always willing to help, and above all, consistently puts her patients first. Please join us as we offer our congratulations to Melinda!

2017 President’s Award of Educational Excellence Recipient, Melinda Mondrawickas

With Gratitude in DC
By Debra Barnes, BS, RT, R, CV

It was an honor to be nominated for the AVIR Award of Excellence, let alone win the nomination. It is with a grateful, overwhelmed heart that I accepted this award in DC. I would like to extend my heartfelt appreciation and thanks to my peers who nominated me and to the AVIR Board of Directors who voted in my favor.

I have been an IR technologist since 1998, so for almost 20 years. I remember applying for the job in “Angio” (it was ok to call it that back then), and not being very confident in being hired. The manager at the time did not usually hire techs without experience, so I didn’t get my hopes too high. I didn’t have much to lose and I was looking to learn something new, why not apply? For whatever reason, I was offered the position. When I look back, I realized that I had no idea what I had just gotten myself into, I had no idea really what happened in Angio, but I was about to find out!

I had phenomenal role models that molded me in my early career. The manager who hired me, Dennis Bair, encouraged me to ask “why”. If you figure out the “why”, then the puzzle comes together. He also taught me the importance of education. He came from an institution that had an IR program that he taught in and that skill was extended to the Angio techs in the department. He required us to pick a topic and teach it to each other on a regular basis. Granted, this frustrated some – extra work above and beyond what was expected, but I learned so much from him and this requirement. During this same time he served two terms as the president of the AVIR which was very inspiring for me (I work for the president of the AVIR)! He encouraged me to get involved with the AVIR and this is why I am a co-chair of the southeastern Wisconsin chapter today. I have a warm place in my heart for him and consider him an important part of my early education.

I also learned from the technologists in the department. Some had trained at an IR program, and to me, it seemed that they knew everything! I looked up to them and wanted to be them. They were respected by the physicians in a way that is unique to IR. It seemed impossible that I would ever compare.

They were so patient with me and taught me how to think ahead, to be prepared and to anticipate. None of these are easy tasks to teach someone else!

I have learned so much from the fellows and attending physicians through the years, but especially during my early years. The fellows let me scrub in with them and taught me the steps to procedures. They never tired of my questions – we had more time back then! The attending physicians would lecture us on procedural steps to further our understanding during cases. I wanted to do a good job for them and to be respected like the other techs. They were also very patient with me, especially when I dropped every piece of a TVLB kit on the floor throughout the course of a case!

The role of the IR nurse was also a new concept in my early years. They taught me how to stay calm in a code situation. I was so amazed at their immediate, direct action. That is how you take control of a situation! Working side by side with some of the most encouraging patient advocates I have had the pleasure to call coworkers taught me really what it mean to operate as a team.

These role models were, and are, still very important to me. Looking back, I was very fortunate to have had their encouragement and experience to guide me. They took the time to teach me and it is because of them that I am still engaged and passionate about IR. Years later, to think that someone would think of me in that way is difficult to wrap my head around. I have such adoration and respect for those mentors and role models that it is incomprehensible that I would ever reach a point that I could ever be the role model for someone else. I still learn something new every day. I teach my interns to never believe someone who thinks they have all the answers and I certainly don’t pretend to. I encourage them to invest the time, to investigate, to question everything. This is how they will grow into the type of IR technologist that people look up to.

I am truly honored to accept the Award of Excellence, thank you.
CALL FOR POSTER ABSTRACTS

The Association of Vascular and Interventional Radiographers invites you to submit abstracts for posters to be presented at our Annual Meeting held in conjunction with the Society of Interventional Radiology. We are seeking scientific and educational abstracts that address clinical, education, procedures, quality improvement, and patient safety within Interventional Radiology.

EARLY BIRD PRIZE
Submit your abstract by December 17, 2017 and be entered to win a FREE conference registration to our annual meeting held in conjunction with SIR, March 17-22, 2018. The technologists from the state with the most submissions will be entered TWICE!

DEADLINE
Registration is open NOW, and the deadline for electronic submission is 5:00pm EST February 17, 2018. All authors will be notified of acceptance within two weeks of their submission. If your abstract is accepted, you are invited to create a poster that will be showcased at our annual meeting.

Visit Our Website for Abstract / Poster Guidelines: https://avir.site-ym.com/page/abstract

Authors of accepted abstracts are invited to present their posters during our poster session Monday March 19 in Los Angeles

Questions?
Lora Cheek, RN - loracheek@gmail.com
Kristen Welch, RT, R, VI – kristenavir@gmail.com

COMMITMENT TO GROWTH

If you’re looking for an opportunity to network with other professionals and become involved with the AVIR on a deeper level consider pursuing appointment to the AVIR Education committee. The Education Committee, led by the Vice President, assists in the management of the Educational Content and all E-learning modules through our online and mobile platform and social media outlets. Often, those who join committees gain the experience to smoothly transition to an elected position on the AVIR Board of Directors.

If you’re considering joining an AVIR committee, or have any questions or concerns, please contact us at info@avir.org.

Education Committee:
Nominating Committee:
Membership Committee:
Chapter Committee:
Annual Program Committee:
Publications Committee:
Associate Members Committee
Web Site Committee

WHAT IS AVIR?
The Association of Vascular Interventional Radiographers (AVIR) is the national organization of healthcare professionals working within Vascular and Interventional Radiology and involved in standard of care issues, continuing education and related concerns.

WHY IS JOINING IMPORTANT?
The AVIR is dedicated to you, and is a powerful advocate for the special interests and concerns of healthcare professionals working in Vascular and Interventional Radiology. We acknowledge the importance of continuing education, establishing high standards of practice and care, certifying Vascular Interventional Radiographers, and establishing a nationwide network for obtaining information and employment opportunities.
In select sizes. LUTONIX® offered sizes as of June 2016: lengths of 40, 60, 80, 100, 120, 150 mm, diameters of 4-6 mm up to 150 mm, 7 mm up to 60 mm. LEVANT 2 clinical trial data on file. N=476. At 12 months, treatment with LUTONIX® 035 resulted in a primary patency rate of 73.5% versus 56.8% with PTA alone (p=0.001). Primary patency defined as absence of binary restenosis defined by DUS PSVR ≥2.5 and freedom from Target Lesion Revascularization (TLR). At 12 months, treatment with LUTONIX® 035 resulted in a freedom from primary safety event rate of 86.7% versus 81.5% with PTA alone (p=0.185). Primary safety defined as composite of freedom from all-cause perioperative death and freedom at 1 year in the index limb from Amputation (ATK or BTK), Reintervention, and Index-limb related death. Numbers reported are Kaplan-Meier analyses, not pre-specified.

Calculated based on dollar sales. MRG Moving Annual Total 2016 Data published May 2016 based on hospital sample. Includes third party vendor sales for LUTONIX®. © 2016 Millennium Research Group, Inc. All rights reserved. Reproduction, distribution, transmission or publication is prohibited. Reprinted with permission.

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2017 CHAPTER UPDATES

Mike Kelly, RT(R)(VI)RCIS
Director at Large

Austin, Texas (HCIR) Hill Country Interventional Radiographers
Contact: Derek Stearns
Email: avirhctx@gmail.com

This is a new chapter of the AVIR headed by Derek Stearns. Derek seems to have a great team working with him and they are gearing up for exciting things. They are looking to have some exciting things happening in the upcoming months. I look forward to hearing more from them in the future.

Arizona, Chapter
Contact: Alfredo Yanez
Email: ayanezavir@gmail.com

A newer AVIR Chapter is from Phoenix headed by Alfredo Yanez. They have a lot of interest and support from their local hospitals and staff. I have no doubt they will hit the ground running with some great lectures and add to our membership growth.

Boston Chapter
Contact: Rob Sheridan
Email: robsheridanavir@gmail.com

Contact: Brian Oakes
Email: brianoakesavir@gmail.com

This new Boston chapter is in the process of putting together their first educational meeting to be held in early fall. This will be the first of many to follow.

Brazil Chapter (Rio de Janeiro)
Contact: Dr. Paulo Eduardo Ocke Reis
Email: vascular@pauloocke.com.br

Contact: Dr. Guilherme Abrao
Email: guiaobrao@yahoo.combr

Both of these physicians have showed a lot of interest in getting involved with and starting the first ever AVIR chapter in Brazil. They feel it is an honor to represent the AVIR in their area and help create educational opportunities for their chapter. Really looking forward to the development of this chapter.

Buckeye State Chapter (Ohio)
Contact: Jamie Hiott RT (R ) (CV)(M)(CT)(VI)
Email: jshiott@gmail.com

Chicago (Chicagoland) Chapter
Contact: Kevin Lynch, Amanda Karpierz, and Chelsea Lafayette
Email: AvirChicagochapter@gmail.com

Chicagoland is currently planning the 1st Annual Chicagoland AVIR Conference. This event will be held on October 14th, 2017 at Joe’s Live @ MB Financial Park. They have some great speakers lined up for this great event. Make sure to reach out to the chapter contacts or follow them on their AVIR Chicago Facebook page to get more information about this event and other future events. This highly motivated team are hitting the ground running and are building a very successful chapter.

Connecticut Northeast Chapter of AVIR
Contact: Paul McCarthy RT(R) (VI)
Email: pmccarthy03@yahoo.com

Paul held three AVIR meetings in the Connecticut Chapter since last year’s annual meeting. He is continuing to strive with membership for the AVIR and we look forward to hearing from them soon on the other great things they have lined up.

Knoxville, Tennessee
Contact: Dan Bernard
Email: djbernard@me.com

The TN AVIR will host their 3rd Annual Conference in Nashville, TN towards the end of January 2018. They plan on having their conference itinerary posted by September 1, 2017 so please keep posted for that. For more information please call Dan Bernard at 1(865) 406-0514. Be sure to follow them on their TN chapter Facebook page. They have been using their Facebook page for chapter communication and to post articles and cases of the month that are always open for discussion. Please join, like and share their page.
The TN Chapter’s current board consist of:
Dan Bernard – Chapter President
Alan Buck – Chapter Vice President
Gary Anders – Chapter Secretary/Treasure
Brad Mitchell – Chapter Director at Large
Chris O’Fallon – Corporate Liaison

South Florida-Miami Chapter
Contact: Roberto Telleria, RT R CV CT
Email: AVIR.MIAMI.RT@GMAIL.COM

ISET this year was another successful story. The Nurses and Techs section had over 150 registrants, two of the most notable were AVIR’s Vice President elect Kristen Welch RT(R)(VI) and Izzy Ramaswamy MS, RT(R)(CV). The topics ranged from Procedure Simulation, Complications in the Endovascular Lab, Biodegradable or Absorbable Devices to What’s next in Transcatheter Valve Therapy to mention a few. Once again, AVIR had a strong presence with attendance and providing ACE-approved category A+ CE’s. They are currently working on ISET 2018 agenda so be sure to keep your eye out for that.

New York City Chapter
Contact: Rennie Mohabir RT(R) (CV)
Email: mohabirh@mskcc.org

Rennie is really motivated to grow this chapter and I have no doubt that he will do just that. The NYC chapter has plans to put together some events in the near future. We will keep you updated.

Capital Region New York Chapter
Contact: James Black
Email: tdstechno.jb@gmail.com

Contact: Stefanie Rockwood
Email: stefavir@gmail.com

The Capital Region NY Chapter is up and running again!! They recently just hosted a talk on Trauma Embolization given by Chris Stark which had close to 30 attendees. This is just the first of many great educational opportunities to come from this group.

Northern California Chapter
Contact: Darlene Crockett RT(CV)
Email: maildarlene@juno.com

North Carolina Chapter (NCAVIR)
Currently looking for interested members that are interested in taking over the honor of running this longstanding chapter. If you are interested please contact Mike Kelly at mikekelly.avir@gmail.com

North Texas Chapter
Contact: Sven Phillips RT (R)VI
Email: sven427@yahoo.com

Sven and his colleagues are currently in the process of preparing educational opportunities for their area. Please reach out to him if you are interested in becoming involved.

Orange County California Chapter (OCAVIR)
Contact: Brett Thiebolt (R)
Email: thiebolbh@stjoe.org

The Orange County California Chapter has been involved with an Angio Club that meets quarterly for the last few years. They ask multiple facilities in the Orange County and LA area to provide case presentations. They usually ask for teaching cases or cases that have complications. The Angio Club is open to Physicians (IR Radiologists, Cardiologists and Vascular Surgeons), Fellows, Residents, RT’s and Rn’s.
2017 CHAPTER UPDATES

Orlando, Florida Chapter
Contact: Jodie Reynolds
Email: jodieavir@gmail.com
Great news central Florida interventional technologists! The Orlando chapter of AVIR is up and running at Nemours Children’s Hospital. They have an exciting year ahead of us and will be offering amazing new benefits. In conjunction with physicians and medical supply representatives, we will be hosting meetings to further educate our community on the history and future of AVIR.

Seattle Chapter
Contact: Leona Benson RT (R)(CV) FAVIR
Email: seattleavir@hotmail.com
The Seattle Chapter is looking for a few members that would love to help be on the chapter committee. If you are interested, please contact them or contact the AVIR for more details.

South Carolina (SCAVIR)
Contact: John Furtek RT (R)
Email: jfurtek52@gmail.com
The South Carolina Chapter is holding the 14th annual S.E.T. Symposium in Kiawah Island, South Carolina. It is scheduled for February 22nd -24th 2018. The Sanctuary of Endovascular Therapy (S.E.T.) has established itself as one of the premier endovascular meetings. The Symposium provides vascular surgeons, interventional radiologists, cardiologists, podiatrists and allied health professionals a unique interactive program with the most current information and treatment options for endovascular disease.

This three-day event featured presentations from world-renowned specialists with an emphasis on the latest advances, changing concepts and new techniques in endovascular treatments. Our faculty brings diverse specialty backgrounds that provide a unique perspective.

The program includes Interactive Panel Discussions, Pedal & Radial Access, Critical Limb Ischemia (CLI), Venous Sessions, CEU’s for the entire team, and much more.

Tampa, Florida
Contact: Pete Stibbs
Email: pete.stibbs@argonmedical.com

Texas Gulf Coast Chapter
Contact: Heather Cleveland
Email: hxcelvel@texaschildrens.org
Phone: (214) 498-2962
Heather is dedicated to relaunching the Gulf Coast Chapter. If you are interested in being a part of this chapter or possibly helping Heather with this task, please reach out to her. There is no doubt that this can be a great chapter.

Utah Chapter
Contact: Ivan Cutler
Email: cutler.ivan@gmail.com
This new chapter will be based in the Salt Lake City area. Please reach out to Ivan if you are interested in being a part of this chapter and the great things that I am sure will come from them.

Virginia Chapter VA AVIR
Contact: Hannah Smith
mmhkcsmith@verizon.net
Contact: Mike Kelly
Mikekelly.AVIR@gmail.com
The VA AVIR is currently planning their 15th annual symposium at the Great Wolf Lodge in Williamsburg, VA on Nov. 3rd & 4th. Once again, they will have a Friday night session geared towards students and those currently interested in the world of Interventional Medicine although everyone is welcome. This session will walk attendees through what Interventional Radiology is, Tools/Equipment utilized, different team roles, transitioning into the lab, and even what a Cardiovascular tech is. There will also be ARIN representation present and credit opportunities for RN’s.

The Saturday portion of the symposium is full of lectures regarding many aspects of our profession. Topics for Saturday include “Vascular Gone Wild”, Interventional Oncology, Prostate embolization, Advanced Cardiac Procedures, Radiation Protection, and much more. Attendees have the opportunity to earn 12 A+ CE credits. Make sure to follow the VA Chapter on their Facebook page (https://www.facebook.com/VAAVIR ).

Association of Vascular and Interventional Radiographers
15th Annual VA AVIR MEETING
Great Wolf Lodge, Williamsburg
NOVEMBER 3rd-4th 2017
Highlights include Student initiative and recognition on Friday.
Register on AVIR website www.regonline.vaavir.org

Registrants have access to Vendors Reception on Friday Night and Workshops on topics relevant to professional growth.

www.avir.org
Wisconsin Southeast Chapter
Contact: Jen Eklund / Kristen Welch / Deb Barnes
Email: daisymay1210@yahoo.com
Email: kristenavir@gmail.com
Email: Debra.Barnes@froedert.com

The SEW AVIR held our annual all day Spring Symposium on April 1, 2017. There were several great presentations. We were very honored to have Dr. Michael Soulen as our keynote speaker. Dr. Soulen’s presentation was on the History of Interventional Oncology; a topic he is uniquely qualified to speak on, as he has been recognized worldwide as the father of Interventional Oncology. He traveled from Pennsylvania to speak to our organization! We also had presentations on the Evolution of Aortic Aneurysm Repair, 3D Applications in a 2D World, Chasing the Clot: Contemporary Approach to Venous Thromboembolism, Acute Stroke, Patient Selection and Treatment in I.O., and Cerebral Venous Intervention. We also had an interactive presentation led by “Judge” Janet Ste. Marie, RN on Legal Implications in the Procedural Area. Audience members were selected to serve as plaintiff, witnesses, and the jury. This symposium was sponsored by local vendors and the attendees had an opportunity to interact with the vendors and ask questions about their product in our vendor hall. We also held a 2 CEU event at Miller Park in early June on the Endovascular Management of Aortic Dissection and Carotid Artery Stenosis. This event was sponsored by Abbott and had several attendees!

In appreciation of those chapters providing Regional or Local Meetings with a minimum of 7 hours of continuing education for the chapter’s attendees, the AVIR is going to extend one FREE registration to the Annual Scientific Meeting of that year per year. The category A credit hours will have to be approved by a RCEEM recognized by the ARRT (AVIR being one of these) and will need to be submitted to the AVIR office prior to the AVIR/SIR registration deadline.

Any questions concerning the formation of new chapters or existing ones please call the AVIR office at 703 234-4055 or the Director at Large:
Mike Kelly AVIR
Email: mikekelly041@yahoo.com
Phone 757 753-4110
Again, thank you
WHAT'S THE DEAL WITH THIS NEW IR RESIDENCY?  
A Q&A WITH PARAG J. PATEL, MD, MS, FSIR  
GRADUATE MEDICAL EDUCATION COUNCILOR, SOCIETY OF INTERVENTIONAL RADIOLGY EXECUTIVE COMMITTEE

Kristen L Welch, RT, R, VI  
President-Elect

I’m sure most of you by now have heard the rumblings of a new IR Residency. The guidelines for these new programs were developed in 2014, and training institutes have been working to develop their own residency programs. These residencies are designed to welcome candidates directly from medical school combining the traditional Radiology Residency and Vascular and Interventional Fellowship into one cohesive program. I had the opportunity to sit down with Parag Patel, MD, MS, FSIR who serves as the Graduate Medical Education Councilor on SIR’s Executive Committee to discuss these changes.

Q Why is Interventional Radiology transitioning into their own residency programs?

A Intervventional Radiology has continued to evolve into a more specialized field requiring a more comprehensive grasp of these complex image guided procedures. These residencies were designed to provide a more in-depth experience in the clinical diagnosis and care of patients with diseases commonly treated by Interventional Radiology.

Q How is the IR Residency different from previous training pathways?

A Upon medical school, the students still complete an internship during PGY1. The IR Residency is five years (PGY2 – 6). During residency the students are exposed to DR and IR rotations. The first three years (PGY2 – 4) are focused on diagnostic imaging. The final two years of their residency (PGY5 – 6) are focused primarily on IR training including procedural, ICU, consult, and in-patient care rotations.

<table>
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<tr>
<th>Year</th>
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<th>IR Residency</th>
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<td>PGY 1</td>
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Q. What is going to happen to current IR Fellowships?

A With the introduction of IR Residencies, all traditional Vascular and Interventional Fellowships will no longer exist. The traditional fellowships shall cease June 30, 2020. IR residencies have already begun implementation with the first Match occurring in 2016 with an even larger group in this year’s Match.

Q How does this affect me as an Interventional technologist?

A Overall, I believe the IR residencies will better train IRS how to handle the clinical care of the patients that we treat. This has significant implications to a practice where skilled and knowledgeable Interventional technologists are needed. First of all, it is the best care for patients that the doctor performing the procedure knows how to evaluate and care for the patient before, during and after the procedure. Second, this will allow more IR groups to meaningfully grow their practices to include work that may have otherwise been lost as current practitioners were not trained to manage and care for patients in the manner the new IR Residencies require. If practices grow then more skilled technologists are needed. Additionally, Interventional technologists can expect that more varied procedures will be seen in their practices in the future.

ATTENTION ALL WRITERS

The Interventional Informer is offering $100 to the best article. This is awarded for each issue of the Informer. The article should be originals. No limit in size, but they must pertain to Interventional Medicine. Just submit your article with name and address for the AVIR Board of Directors to review.

Best of Luck!
Editors Award Winner
AVIR would like to acknowledge the following writer for their publication in the past issue.

We Love Our Corporate Sponsor!
Kristen Welch for AVIR Honors
Congratulations
AVIR CREATES THAT ELECTRIC FEEL- RELIVING THE ANNUAL MEETING BUZZ!

By Stefanie Rockwood RT(R)(VI)
Annual Meeting Chair

Our 27th annual meeting in Washington DC was another successful event! Held in conjunction with SIR, we had the opportunity to hear from some incredible speakers. Being at the heart of our nations capital only intensified that feeling of awe and excitement.

We jump started our combined day with ARIN listening to our Shari Ulman Gold Medal Lecture, given by Dr. John Fritz Angle on the Art of Catheterization. Also included in the combined day were the topics of emergencies in IR Neuro and creating an emergency pulmonary response team. A huge crowd pleaser this year was the presentation by Marcus Engel, The Other Side of the Stethoscope. The room was filled with only standing room available, it was a privilege to hear such a moving story told by a patients perspective.

As the combined day came to an end the team of ARIN, AVIR and our valued sponsors gathered to attend our soirée held at the Capitol View.

We held our 2nd annual poster presentations this year. Impressive! We were thrilled to receive such an ample response by so many talented technologists!

During our annual business meeting we learned about the evolving changes the ARRT have started implementing by Kristen Welch for primary and post primary certifications. We also met our incoming board members for this year.

Our annual meeting chair, Kristen Welch did an amazing job on the lineup of topics and presenters. Our group heard from some of the pioneers of IR and world experts. It’s hard not to include all the pictures taken from this event because there were so many fantastic moments. Highlights include: PAD, Pediatric Stroke, History of IR, Intra-Artierial Liver Directed Therapy, and many more. I was able to capture some snapshots for a brief nostalgic feel.

Dr. Gary Siskin presented us with a day in the life of IR, he’s pictured here with a few colleagues past and present.

Wrapping on Wednesday we had a half day of lectures as well as a concurrent comprehensive VI review presented by Alisha Hawrylack. Thank you again to our sponsors and our members, you keep this organization up and running! We hope everyone enjoyed the meeting as much as we did and I look forward to seeing everyone again in LA 2018!!

The best case of my career panel discussion included: Dr. William Rilling, Dr. Janice Newsome, Dr. James Benenati, Alisha Hawrylack RT(R)(VI), Dr. Bulent Arslan, and Dr. Ziv Haskal as moderator.

Dr. John Fritz Angle the recipient winner of the Shari Ulman Gold Medal Award

Dr. Bob Dixon speaking to us about burnout and productivity

Debra Barnes and Melinda Mondrawickas displaying the Award of Excellence and the Presidents Award for Educational Excellence

Our bone panel discussion with Dr. Alda Tam, Dr. Alexis Kelekis, and Dr. Sean Tutton
Are you interested in obtaining a comprehensive education in Interventional Radiology? The following institutions provide educational opportunities in Vascular and Interventional Radiology through certificate, associates, and bachelor’s degree programs. These programs will provide students wishing to pursue an IR profession with the skills and knowledge necessary to prepare them to take the Vascular and Interventional registry examination.

University of Virginia Health System
Charles J Tegtmeyer School of Interventional Radiology and Special Procedures
Charlottesville, VA
12- month certificate program
Begins early August each year
Application deadline: May 30
Established in 1973 by Dr. Charles J. Tegtmeyer, the postgraduate Interventional Radiology and Special Procedures Program offered at the University of Virginia Medical Center provides a challenging and rewarding opportunity for dedicated Radiology Technologists interested in pursuing a career in the field of Interventional Radiology. This didactic and clinical program includes call rotations.

For more information:
https://med.virginia.edu/radiology/services/radiology-technologists-education-interventional-radiology/
Alisha Hawrylack, RT, R, VI
Program Director
Email: ac4nf@virginia.edu

Froedtert and the Medical College of Wisconsin
Vascular and Interventional Radiology Internship
Milwaukee, WI
10-month paid Certificate Program
Begins in September, Ends in July
The curriculum for the Interventional Radiology Internship is based on the ARRT requirements for certification in Vascular-Interventional Radiography. The faculty presents the curriculum through formal lecture and clinical applications to enhance the learning experience. Classes are 1.5 hour in duration and are held daily from 08:00 – 09:30. Clinical applications of ideas and concepts are applied from 0930-1630.
The IR Interns have the opportunity to rotate through five single plane Vascular Interventional suites, three biplane Neuro-Interventional suites, two Hybrid OR suites and Computed Tomography. In addition, the Interns also have scheduled rotations in Prep and Recovery working with the nursing and nurse practitioner staff, Vascular Interventional Clinic, Neuro-Interventional Clinic, Ultrasound, Cardiac Cath Lab and Children’s Hospital of Wisconsin.
For more information:
http://www.froedtert.com/health-care-professionals/education/interventional-radiology-internship
Debra Barnes, BS, RT, R, CV
Lead Clinical Interventional Technologist
Phone: (414) 805-3052
Email: debra.barnes@froedtert.com

Holy Family University
Philadelphia, PA
Two track options:
Bachelor of Science Program for already certified Radiologic Technologists & Certificate program for post-primary training in Vascular and Interventional Radiology
For more information:
Phone: 267-341-3360
Email: radiologicscienceprogram@holyfamily.edu

Mayo Clinic School of Health Sciences
Vascular and Interventional Radiology Internship
Jacksonville, FL
8-month certificate program
Two terms:
Spring: March – November
application deadline: January 15
Fall: August- April
Application deadline: June 15
Mayo School of Health Sciences at Mayo Clinic’s campus in Jacksonville, Florida, offers an eight-month Vascular Interventional Radiologic Technology Internship designed to enhance the knowledge and skills of postgraduate radiography students. Interns receive technological training in thoracic, visceral, genitourinary, gastrointestinal, neurologic, and peripheral diagnosis and intervention for vascular and nonvascular systems. This clinical and didactic program offers an advanced level of understanding of human vascular systems, while clinical courses provide the experience needed to become skilled specialists in the areas of invasive diagnostic and interventional procedures including, cardiac catheterization, electrophysiology, interventional radiology, and vascular interventional surgery.
For more information:
Adam Rubin, RT, R, VI
Internship Director
Phone: 904-953-9532
Email: rubin.adam@mayo.edu

Forsyth Tech
Interventional Cardiac and Vascular Technology Program
Winston-Salem, NC
This program involves students in a variety of educational experiences including classroom, laboratory, and clinical settings. Didactic courses provide an advanced level of understanding of human vascular systems, while clinical courses provide the experience needed to become skilled specialists in the areas of invasive diagnostic and interventional procedures including, cardiac catheterization, electrophysiology, interventional radiology, and vascular interventional surgery.
University of Nebraska Medical Center
Cardiovascular and Interventional Technology Program
Omaha, NE
The Cardiovascular Interventional Technology (CVIT) Program at UNMC allows students to obtain classroom and clinical experience related directly to vascular and interventional technology. Completion of an accredited Radiography program, ARRT certification in Radiography, and 27 specific college prerequisites are required for admission into the CVIT Program, which is offered as a post-primary certification modality at UNMC.

12-month Certificate Program
Begins in August
Application Deadline: January 15
For more information:
https://www.unmc.edu/alliedhealth/education/vfi/index.html
402-559-4000 (cahpadmissions@unmc.edu)

For more information:
https://www.unmc.edu/alliedhealth/education/vfi/index.html
402-559-4000 (cahpadmissions@unmc.edu)

Regis College
Affiliated with Massachusetts General Hospital
Weston, MA
Registered and registry-eligible technologists in Radiography (RT(R)) are candidates for the Bachelor of Science degree in Medical Imaging with Interventional Radiology (IR) concentration. The IR curriculum, which commences each September and continues for a full calendar year, requires a full-time commitment. Given successful completion of all IR components and all general education core requirements, students may complete the entire program in as little as 12 months.

12+ month Bachelors of Science Completion Program
For more information:
http://www.regiscollege.edu/academics/pa-department.cfm?id=BS_in_Medical_Imaging
Phone: (781) 768-8387
Email: ias@regiscollege.edu
University of Iowa
Iowa City, IA
Two track options:
1. Bachelor of Science – These students complete 4 years with training to earn their RT and VI certifications
2. Online Bachelor of Science Degree Completion Program - These students are required to already hold their RT certification. During their schooling they'll complete training to earn their VI certification.

The cardiovascular interventional student will have clinical internship assignments in many different areas of UIHC including Interventional Neuroradiology, Vascular Interventional Radiology, the Heart and Vascular Center and Cardiology in the Stead Family Children's Hospital. These departments offer a wide variety of heart catheterization, cardiac electrophysiology, peripheral endo-vascular, non-vascular and interventional oncology procedures. The student's clinical experience will include diagnostic angiography, balloon angioplasty and stenting, central venous access, embolotherapy, chemoembolization, thrombolysis, intracranial aneurysm coiling, and balloon valvuloplasty.

For more information:
https://medicine.uiowa.edu/radsci/
Jean Eisenhauer Wiese, MS, RT, R, CV, CT, MR
Program Director
Phone: (319) 356-4332
Email: jean-wiese@uiowa.edu

Dallas County Community College
Vascular Intervventional Advanced Technical Program
Dallas, TX
16-month Certificate Program
This program prepares the student to further their radiologic science career with a specialty in vascular interventional radiography. The VIR technologist uses radiation and advanced patient care skills to produce vascular images of the patient which are used by the physician to make a diagnosis. For the vast majority of the diagnostic procedures, the VIR technologist has total responsibility for the care and well-being of the patient and must be prepared to produce quality images with care and empathy.
For more information:
https://www1.dcccd.edu/catalog/programs/degree.cfm?degree=vascular_interv_adv_tec_cert

Fort Hays State University
Online Cardiovascular Interventional Program
Hays, KS
FHSU’s Department of Allied Health is pleased to offer radiologic technologists one of the few online certificate and degree programs in the country. An online certificate in Cardiovascular Interventional Technology (CVIT) gives you the education and training you need to: improve your skills and versatility as a technologist, fulfill your continuing education requirement, and prepare for your ARRT VI Certification Exam.
Online 10-Credit Certificate Program
For more information:
https://www.fhsu.edu/virtualcollege/degrees/certificates/cardiovascular-interventional/
Christa Weigel
Distance Coordinator
Phone: (785) 628-5549
Email: crweigel@fhsu.edu
**Philips Completes Acquisition of Spectranetics**

*August 10, 2017—* Royal Philips announced that it has completed the acquisition of Spectranetics Corporation. Philips, which is based in Amsterdam, The Netherlands, and Spectranetics, headquartered in Colorado Springs, Colorado, announced a definitive merger agreement on June 28.

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**Adjunctive Catheter-Directed Thrombolysis Evaluated for DVT**


**FDA Clears Malin’s Hourglass Peripheral Embolization Plug**

*August 22, 2017—* Malin Corporation plc, an Ireland-based company, announced that its Hourglass peripheral embolization plug was granted US Food and Drug Administration (FDA) 510(k) clearance to commence marketing in the United States. The company stated that the Hourglass device is designed to provide precise, secure, over-the-wire delivery and immediate occlusion in a single integrated device. The device received European CE Mark approval in 2015.

In the company’s announcement, Andrew Cragg, MD, commented, “The Hourglass device is designed to provide immediate occlusion in a wide range of vessel sizes with a single device. The device’s unique design was created to take advantage of natural hemodynamic forces to provide immediate, focal, stable occlusions.” Dr. Cragg, a Co-Developer of Hourglass, is an interventional radiologist in Minneapolis, Minnesota. The Hourglass device was a product of Emba Medical Limited, which Malin acquired in 2015.

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**STRATIS Registry Evaluates Real-World Use of Neurothrombectomy Devices for Acute Ischemic Stroke**

*August 22, 2017—* Nils H. Mueller-Kronast, MD, et al published primary results of the STRATIS registry online ahead of print in Stroke. The STRATIS (Systematic Evaluation of Patients Treated With Neurothrombectomy Devices for Acute Ischemic Stroke) registry aimed to assess whether similar process timelines, technical, and functional outcomes could be achieved in a large, real-world cohort as in the randomized trials on the use of mechanical thrombectomy with stent retrievers for treating patients with acute ischemic stroke caused by large vessel occlusions. According to the investigators, STRATIS was designed to prospectively enroll patients treated in the United States with the Solitaire revascularization device (Medtronic) and Mindframe Capture low-profile revascularization device (Medtronic) within 8 hours from symptom onset. The STRATIS cohort was compared with the interventional cohort of the previously published SEER patient-level meta-analysis. As summarized in Stroke, the investigators analyzed a total of 984 patients treated at 55 sites. The mean National Institutes of Health Stroke Scale score was 17.3. Intravenous tissue-type plasminogen activator was administered in 64%. The median times from onset to arrival in the enrolling hospital, from door to puncture, and from puncture to reperfusion were 138, 72, and 36 minutes, respectively. A core lab–adjudicated modified Thrombolysis in Cerebral Infarction (M-TICI) ≥2b was achieved in 87.9% of patients. At 90 days, 56.5% achieved a modified Rankin Scale score of 0 to 2, all-cause mortality was 14.4%, and 1.4% suffered a symptomatic intracranial hemorrhage. The median time from emergency medical services scene arrival to puncture was 152 minutes, and each hour delay in this interval was associated with a 5.5% absolute decline in the likelihood of achieving modified Rankin Scale score 0 to 2. This largest-to-date Solitaire registry documents that the results of the randomized trials can be reproduced in the community and that the decrease of clinical benefit over time warrants optimization of the system of care, concluded the investigators in Stroke.

**Getinge Announces Full Availability of Biotronik’s Pulsar-18 Self-Expanding Stent in the United States**

*August 22, 2017—* Getinge, which distributes Biotronik’s portfolio of products to treat peripheral artery disease in the United States, announced the full United States market release of Biotronik’s Pulsar-18 self-expanding stent with 4-F delivery system for use in the superficial femoral arteries (SFAs). Getinge stated that the Pulsar-18 device with 4-F delivery system reduces procedure times, more easily crosses lesions, lowers access site complication rates, and requires less compression time without the need for a closure device. In July, Biotronik announced the results of the BIOFLEX-I clinical study and the commercial availability of Pulsar-18, which was approved in March 2017 by the US Food and Drug Administration for the treatment of SFAs. According to Getinge, the safety and efficacy of the Pulsar-18 stent for treating the SFAs were demonstrated by 12-month data from the pivotal BIOFLEX-I clinical study presented by the trial’s United States Principal Investigator Mark Burket, MD, at C3: the 2017 Complex Cardiovascular Catheter Therapeutics Advanced Endovascular and Coronary Intervention Global Summit held June 27–30 in Orlando, Florida. The BIOFLEX-I results showed 99.7% freedom from major adverse events at 30 days, 87.6% freedom from clinically driven target lesion revascularization at 12 months, and 66.8% primary patency at 12 months in lesion lengths up to 190 mm. Results also demonstrated improvements in clinical and quality-of-life metrics as assessed by ankle-brachial index, 6-minute walk test, and a walking impairment questionnaire. In Getinge’s announcement, Professor Marianne Brodmann, MD, European Principal Investigator of the BIOFLEX-I study, commented, “Minimally invasive 4-F technology has the potential to positively impact our endovascular practice. Much of the lower limb arterial disease we treat is amenable to 4-F access, thus reducing risks associated with access site complications compared to larger bore devices and offering similarly promising efficacy even in complex lesions.”
Several new codes were introduced for use in the beginning of 2017 that describe diagnostic and interventional procedures for hemodialysis access. The previously used codes (36147, 36148, 36870, 75791, 35476, 75798, 35475, 75962) have been retired and can no longer be used. The new codes are more bundled than the older codes and require knowledge of updated definitions for dialysis “vessels” as defined for CPT coding for these services. In general, the new codes are straightforward, but there are some nuances that will be discussed and illustrated with coding scenarios.

The New Codes

- 36901 Introduction of needle(s) and/or catheter(s), dialysis circuit, with diagnostic angiography of the dialysis circuit, including all direct puncture(s) and catheter placement(s), injection(s) of contrast, all necessary imaging from the arterial anastomosis and adjacent artery through entire venous outflow including the inferior or superior vena cava, fluoroscopic guidance, radiologic supervision and interpretation and image documentation and report;

- 36902 with transluminal balloon angioplasty, peripheral dialysis segment, including all imaging and radiologic supervision and interpretation necessary to perform the angioplasty

- 36903 with transcatheter placement of intravascular stent(s), peripheral dialysis segment, including all imaging and radiologic supervision and interpretation necessary to perform the stenting, and all angioplasty within the peripheral dialysis segment

- 36904 Percutaneous transluminal mechanical thrombectomy and/or infusion for thrombolysis, dialysis circuit, any method, including all imaging and radiologic supervision and interpretation, diagnostic angiography, fluoroscopic guidance, catheter placement(s), and intraprocedural pharmacologic thrombolytic injection(s);

- 36905 with transluminal balloon angioplasty, peripheral dialysis segment, including all imaging and radiologic supervision and interpretation necessary to perform the angioplasty

- 36906 with transcatheter placement of intravascular stent(s), peripheral dialysis segment, including all imaging and radiologic supervision and interpretation necessary to perform the stenting, and all angioplasty within the peripheral dialysis circuit

- +36907 Transluminal balloon angioplasty, central dialysis segment, performed through dialysis circuit, including all imaging and radiologic supervision and interpretation required to perform the angioplasty (list separately in addition to code for primary procedure)

- +36908 Transcatheter placement of intravascular stent(s), central dialysis segment, performed through dialysis circuit, including all imaging radiologic supervision and interpretation required to perform the stenting, and all angioplasty in the central dialysis segment (list separately in addition to code for primary procedure)

- +36909 Dialysis circuit permanent vascular embolization or occlusion (including main circuit or any accessory veins), endovascular, including all imaging and radiologic supervision and interpretation necessary to complete the intervention (list separately in addition to code for primary procedure)

The New Definitions

For coding purposes, the following definitions apply to this set of codes.

Dialysis circuit: The segments of vessel/graft extending from the arterial anastomosis to the right atrium. The perianastomotic segment, including the artery immediately adjacent to the arterial anastomosis, the arterial anastomosis itself, and the short segment of venous outflow immediately adjacent to the arterial anastomosis are included in the dialysis circuit. The dialysis circuit is composed of two segments, the (1) peripheral dialysis segment and (2) central dialysis segment.

Peripheral dialysis segment: The portion of the dialysis circuit that begins at the arterial anastomosis and extends to the central dialysis segment. In the upper extremity, the peripheral dialysis segment extends through the axillary vein (or through the entire cephalic vein in the case of cephalic venous outflow). In the lower extremity, the peripheral dialysis segment extends through the common femoral vein. The “perianastomotic” segment is defined as part of the peripheral dialysis segment. Any intervention in the perianastomotic region is therefore reported with the new codes and is no longer separately reported as an arterial intervention.

Central dialysis segment: Includes all draining veins central to the peripheral dialysis segment. In the upper extremity, the central dialysis segment includes the veins central to the axillary and cephalic veins, including the subclavian and innominate veins through the superior vena cava. In the lower extremity, the central dialysis segment includes the veins central to the common femoral vein, including the external iliac and common iliac veins through the inferior vena cava. Other named or unnamed veins may be included in this segment. For instance, large collateral veins may develop in the neck to circumvent a stenosis or occlusion of the subclavian vein, draining into the central vein via the jugular vein. In this case, the large collateral veins and jugular vein are defined as part of the central dialysis segment.

For more information: this material is available in “Endovascular Today”. 
Established in 1973 by Dr. Charles J. Tegtmeyer, the postgraduate Interventional Radiology and Special Procedures Program offered at the University of Virginia Medical Center provides a challenging and rewarding opportunity for dedicated Radiology Technologists interested in pursuing a career in the field of Interventional Radiology.

The Program was founded upon the idea that as the field of Interventional Radiology continued to evolve and expand, technologists that were proficient in all facets of patient care would be an invaluable asset to the collaborative team required to provide excellent and innovative patient care.

Thorough clinical and academic instruction from nationally and internationally recognized staff and faculty ensures successful graduates that possess the fundamental knowledge and skillset required to pursue a rewarding career in Interventional Radiology. For more information on UVA’s Angiography and Interventional Radiology Division click here.

Contact:
Alisha Hawrylack, RT(R)(VI)
Program Director
The Charles J. Tegtmeyer, MD Program of Interventional Radiography and Special Procedures
University of Virginia Health System
PO Box 800377 Charlottesville, VA 22980
ac4nf@virginia.edu

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February 3–7, 2018
The Diplomat
Hollywood, Florida USA

*Pending submission to the American Board of Radiology (ABR) for qualification in meeting the criteria for self-assessment toward the purpose of fulfilling the requirements in the ABR Maintenance of Certification Program.
## Upcoming IR Conferences

<table>
<thead>
<tr>
<th>Meeting</th>
<th>Date</th>
<th>Location</th>
<th>Website</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vascular Techniques &amp; Technology Thinktank (VAST)</td>
<td>August 3-5, 2017</td>
<td>Saratoga Springs, NY</td>
<td><a href="http://www.vaware.org">www.vaware.org</a></td>
</tr>
<tr>
<td>7th Annual Amputation Prevention Symposium (AMP)</td>
<td>August 9-12, 2017</td>
<td>Chicago, IL</td>
<td><a href="http://www.ampteclimeting.com/home">www.ampteclimeting.com/home</a></td>
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<tr>
<td>West Coast Vein Forum</td>
<td>September 6-9, 2017</td>
<td>Olympic Valley, CA</td>
<td><a href="http://www.veinforum.org">www.veinforum.org</a></td>
</tr>
<tr>
<td>41st Annual Midwestern Vascular Annual Meeting</td>
<td>September 7-9, 2017</td>
<td>Chicago, IL</td>
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</tr>
<tr>
<td>Endovascular Therapies</td>
<td>October 27-29, 2017</td>
<td>Pinehurst, NC</td>
<td><a href="http://www.endovasculartherapies.com">www.endovasculartherapies.com</a></td>
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<tr>
<td>Synergy, A Multidisciplinary Approach to Interventional Oncology</td>
<td>November 9-12, 2017</td>
<td>Miami Beach, FL</td>
<td><a href="http://www.synergymiami.org">www.synergymiami.org</a></td>
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<tr>
<td>RSNA- Radiologic Society of North America Annual Scientific Assembly</td>
<td>November 26- December 1, 2017</td>
<td>Chicago, IL</td>
<td><a href="http://www.rsna.org">www.rsna.org</a></td>
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<tr>
<td>CIO- Symposium on Clinical Oncology</td>
<td>Feb 3-4, 2018</td>
<td>Hollywood, FL</td>
<td><a href="http://www.iset.org">www.iset.org</a></td>
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<tr>
<td>43rd Annual SIR Meeting</td>
<td>Mar 17-22, 2018</td>
<td>Los Angeles, CA</td>
<td><a href="http://www.sirmeeting.org">www.sirmeeting.org</a></td>
</tr>
<tr>
<td>28th Annual AVIR Meeting</td>
<td>Mar 17-22, 2018</td>
<td>Los Angeles, CA</td>
<td><a href="http://www.avir.org">www.avir.org</a></td>
</tr>
<tr>
<td>GEST- Global Embolization Cancer Symposium Technologies</td>
<td>May 17-20, 2018</td>
<td>Miami Beach, FL</td>
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</tbody>
</table>
Meet our AVIR Board of Directors

It has been my continued privilege to serve with the 2017-2018 AVIR Board of Directors. I am confident that our board possesses the individual skill sets, passion, and knowledge that will lead to the continued growth of the AVIR. They are working tirelessly to provide our members with access to world class education, networking opportunities, and resources that enable them further their own careers and effectively care for their patients.

Members of the 2017-2018 Board of Directors Include:

- **President**
  Alisha Hawrylack RT(R)(VI)
  a.hawrylack@gmail.com

- **President Elect**
  Kristen Welch, RT(R)(VI)
  kristenavir@gmail.com

- **Secretary Treasurer**
  Sandra Strycker, RT(R)
  sandrastrycker

- **Director at Large**
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  mikekelly041@yahoo.com

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  loracheek@gmail.com

- **Annual Meeting Chair**
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  stefavir@gmail.com

- **Corporate Liaison**
  Dana Bridges-Kanfoush
  anakanfoush@gmail.com

- **Publication Chair**
  David S. Douthet, RT(R)(CV)
  dsdouthet@gmail.com

- **Immediate Past President**
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  angioCI@gmail.com

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Application for Presidents Award of Educational Excellence

Student Information

<table>
<thead>
<tr>
<th>Full Name:</th>
<th>Date:</th>
<th>Last</th>
<th>First</th>
<th>M.I.</th>
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Address:

<table>
<thead>
<tr>
<th>Street Address</th>
<th>Apartment/Unit #</th>
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<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>ZIP Code</th>
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Phone:  
Email:  

Education

College or VI Certificate Program: ___________________________________________________________________

Address:

<table>
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<tr>
<th>Street Address</th>
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<table>
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<tr>
<th>City</th>
<th>State</th>
<th>ZIP Code</th>
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</table>

Anticipated Graduation or completion date: __________________________________________________________

References

*In addition to yourself, the nominator, please list one additional reference we can contact.*

<table>
<thead>
<tr>
<th>Full Name:</th>
<th>Relationship:</th>
<th>Phone:</th>
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| Company: |__________ | | |
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<th>Full Name:</th>
<th>Relationship:</th>
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</table>

| Company: |__________ | | |
|__________ | | | |

Address:

Recipient

*Please briefly share what unique attributes or qualities specific to education, patient care, or continued learning, led you to nominate your student for the AVIR Presidents Award of Excellence.*

__________________________________________________________________________________________

__________________________________________________________________________________________

__________________________________________________________________________________________

__________________________________________________________________________________________
MEMBERSHIP APPLICATION
ASSOCIATION OF VASCULAR AND/OR INTERVENTIONAL RADIOGRAPHERS
2201 Cooperative Way | Suite 600 | Herndon, VA 20171 | 571.252.7174 | Fax: 571.858.7174 | Email: info@avir.org
FULL PAYMENT MUST ACCOMPANY COMPLETED APPLICATION FORM

Membership Category — Select only one | Please print or type

☐ Active | $75/yr* ☐ Clinical Associate | $65/yr ☐ Corporate Associate | $65/yr
☐ Student | $45/yr ☐ International | $85/yr *ACTIVE – Submit ARRT Certification or Canadian Equivalent

☐ Mr ☐ Mrs ☐ Ms NAME / FIRST M.I. LAST GENERATION (JR., SR., II, III)

CREDENTIALS LICENSURE

DEGREE/S REGISTRATION/S

PREFERRED ADDRESS ☐ HOME ☐ WORK

HOME STREET

CITY STATE ZIP

PHONE FAX EMAIL (for official AVIR business only)

WORK INSTITUTION NAME DEPT.

STREET (include department, room number, mail stop codes, etc., if appropriate)

CITY STATE ZIP

PHONE FAX EMAIL (for official AVIR business only)

Length of Time as Tech Area of Expertise: ________________

Size of Institution (# of beds): ________________

☐ Private ☐ Academic

Number of Exams Performed at this Institution:

☐ Vascular ☐ Interventional

Are You a Member of: ARRT ☐ Yes ☐ No ASRT ☐ Yes ☐ No
(If YES, please attach photocopy of membership card/s)

Other Professional Organizations of Which You Are a Member:

________________________________________

________________________________________

________________________________________

Related Interests (CQI, Teaching, Publishing, etc.):

________________________________________

________________________________________

________________________________________

Payment Information: ☐ Check Enclosed

OR Charge Credit Card: ☐ AmEx ☐ MasterCard ☐ Visa

ACCT NUMBER EXP DATE

NAME ON CARD

SIGNATURE

Student Members Only

DIRECTOR

PROGRAM ADDRESS

CITY STATE ZIP

PHONE
WHAT IS AVIR?

The Association of Vascular and Interventional Radiographers (AVIR) is the national organization of healthcare professionals within Vascular and Interventional Radiology and involved in standard of care issues, continuing education and related concerns.

Who Can Become a Member of AVIR?

ACTIVE: Radiographers with a primary focus in Vascular and/or Interventional Radiology. Active members must be ARRT registered or have Canadian equivalent. Submit copy of certification with application.

Dues are $75 per year.

ASSOCIATE: Related healthcare professionals working with or having a special interest in Vascular and/or Interventional Radiology, including Nurses, Medical/Cardiovascular Technologies and Commercial Company Representatives.

Dues are $65 per year.

STUDENT: Students in certified programs for Vascular and/or Interventional Radiographers.

Dues are $45 per year.

INTERNATIONAL: Healthcare professionals working or having special interest in CIT and who reside outside of the United States and Canada. This category includes, but is not limited to, medical technologists, radiologic technologists, registered nurses, licensed practical nurses, Physicians and commercial company representatives.

Dues are $85 per year.

All Memberships are renewable annually each January.

Why Is Joining AVIR Important?

The AVIR is dedicated to you and is a powerful advocate for the special interest and concerns of healthcare professionals working in Vascular and Interventional Radiology. We acknowledge the importance of continuing education, establishing high standards of practice and care, certifying Vascular and/or Interventional Radiographers, and establishing a nationwide network for obtaining information and/or employment opportunities.

What Opportunities Does AVIR Offer?

- Professional growth
- Society of Interventional Radiographers (SIR) Annual Meeting
- Exchange of information and ideas
- AVIR Annual Meeting
- Continuing education opportunities
- Quarterly newsletter
- Local chapter involvement
- National membership directory

The Association of Vascular and Interventional Radiographers (AVIR)
2201 Cooperative Way | Suite 600 | Herndon, VA 20171
571.252.7174 | Fax: 571.858.7174
email: info@avir.org | www.avir.org